

Student's name: _____
Last First

Student ID: _____ SEVIS ID: N _____ Email: _____

STATEMENT OF COMPLIANCE: J-1 Insurance Requirement

1. Read insurance requirements. 2. Complete all three sections. 3. Submit completed form to ISS office.

LEGAL INSURANCE REQUIREMENTS

As a J-1 Exchange Visitor, you and your J-2 dependents are required to have sickness and accident insurance, including coverage for medical evacuation and repatriation of remains, for the duration of your J-1 program. This is a U.S. federal law. (U.S. Code of Federal Regulations Title 22 Section 62.14)

Willful failure to have insurance is a violation of this law and could result in termination of your J-1 status.

Minimum coverage must provide:

- Medical benefits of at least \$100,000 per accident or illness
- A deductible not to exceed \$500 per accident or illness
- Repatriation of remains in the amount of \$25,000
- Medical evacuation to your home country in the amount of \$50,000

The insurance policy:

- May require a waiting period for pre-existing conditions which is reasonable as determined by current industry standards
- May include provision for co-insurance (co-pay) up to 25 % of the covered benefits per accident or illness
- Shall not unreasonably exclude coverage for perils inherent to the activities of the exchange program in which the exchange visitor participates.

Any policy, plan, or contract secured to fulfill the above requirements must, at minimum, be:

- Underwritten by an insurance corporation having:
 - A. an A.M. Best rating of "A-" or above;
 - B. a McGraw Hill Financial/Standard & Poor's Claims-paying Ability rating of "A-" or above;
 - C. a Weiss Research, Inc. rating of "B+" or above;
 - D. a Fitch Ratings, Inc. rating of "A-" or above;
 - E. a Moody's Investor Services rating of "A3" or above; or
- Be backed by the full faith and credit of the government of the exchange visitor's home country; or
- Part of a health benefits program offered on a group basis to employees or enrolled students by a designated sponsor;
- Offered through or underwritten by a federally qualified Health Maintenance Organization (HMO) or eligible Competitive Medical Plan (CMP) as determined by Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.

J-1 Exchange Visitor Statement of Compliance

By signing this form, I understand, agree, and acknowledge that:

- In order to maintain eligibility for J-1 Exchange Student status under the sponsorship of the University of Washington's Exchange Visitor Program, I must at all times maintain insurance coverage for myself and my J-2 dependents.
- If I fail to comply with these insurance requirements, the University of Washington will immediately terminate my participation in the Exchange Student Program, report my violation of lawful status to the Department of Homeland Security, and advise me to depart from the United States.
- My insurance coverage will be in effect and will remain valid at all times during my stay in "J" visa status. If for any reason my coverage lapses, I will without delay obtain other comparable insurance coverage.
- I understand that I and my accompanying spouse and dependents may be subject to the requirements of the Affordable Care Act.

Signature _____ Date _____

1. J-1 Health Insurance Requirement

I have health insurance with:

- medical benefits of at least \$100,000 per accident or illness
- a deductible not to exceed \$500 per accident or illness

My health insurance coverage is provided by one of the following:

- I have purchased UW's International Student Health Insurance Plan (ISHIP).
- I am covered by the Graduate Appointee Insurance Program (GAIP).
- I have met one of the categories to waive the UW International Student Health Insurance Plan, AND
I will apply to waive ISHIP as described on the ISS website: <https://iss.washington.edu/health-insurance#toc2>
Here is my health insurance information:

Name of insurance company	Company Phone Number	Insurance Policy Number
---------------------------	----------------------	-------------------------

J-2 dependent health insurance coverage is either not applicable or is sufficient because:

- None of my family members are coming to the U.S. in J-2 status.
- OR
- My J-2 family members have health insurance with medical benefits of at least \$100,000 per accident or illness and a deductible not to exceed \$500 per accident or illness.

Name of insurance company	Company Phone Number	Insurance Policy Number
---------------------------	----------------------	-------------------------

2. J-1 Medical Evacuation and Repatriation Insurance Requirement

I have insurance with coverage for:

- medical evacuation expenses in the amount of \$50,000
- repatriation of remains in the amount of \$25,000

My medical evacuation and repatriation coverage is provided by one of the following:

- I have purchased UW's International Student Health Insurance Plan (ISHIP).
- I am covered by the Graduate Appointee Insurance Program (GAIP).
- I have met one of the categories to waive the UW International Student Health Insurance, AND
I will apply to waive ISHIP as described on the ISS website: <https://iss.washington.edu/health-insurance#toc2>
Here is my medical evacuation and repatriation insurance information:

Name of insurance company	Company Phone Number	Insurance Policy Number
---------------------------	----------------------	-------------------------

J-2 dependent medical evacuation and repatriation coverage is either not applicable or is sufficient because:

- None of my family members are coming to the U.S. in J-2 status.
- OR
- My J-2 family members have insurance coverage for medical evacuation expenses in the amount of \$50,000 and repatriation of remains in the amount of \$25,000.

Name of insurance company	Company Phone Number	Insurance Policy Number
---------------------------	----------------------	-------------------------