DECLARATION OF COMPLIANCE WITH HEALTH INSURANCE REQUIREMENTS FOR J-1 EXCHANGE STUDENTS AND SCHOLARS

INFORMATION ON HEALTH INSURANCE REQUIREMENTS

The requirements for the health insurance of J-1 visa holders and their dependents, as set forth in 22 C.F.R. § 62.14(b)(2), are as follows:

1. The J-1 and their dependents must have health insurance for their entire period of stay in the US.
2. The insurance coverage must provide
   a) medical benefits of at least $100,000 per accident or illness,
   b) Repatriation of remains in the amount of $25,000,
   c) Expenses associated with medical evacuation to home country in the amount of $50,000, and
   d) Deductibles that do not exceed $500 per accident or illness.
3. The health insurance must cover all accompanying J-2 dependents, with exactly the same terms.

PENALTIES

According to the Federal Regulation (22 C.F.R. § 62.14(i)) "Exchange visitors who willfully fail to maintain the insurance coverage set forth above while a participant in an exchange visitor program or who make a material misrepresentation to the sponsor concerning such coverage shall be deemed to be in violation of these regulations and shall be subject to termination as a participant." According to the Federal Regulations, the University "must terminate an exchange visitor's participation in their program if the sponsor determines that the exchange visitor or any accompanying spouse or dependent willfully fails to remain in compliance with this section."

Therefore, the University has the right to refuse a visa document to any person who holds a J-1 or J-2 visa and is not in compliance with the health insurance requirements for a J-1 or J-2 visa holder. This includes degree-seeking students, exchange students (non-degree students), visiting researchers, visiting professors and short-term scholars. Any time a person in the J-1 or J-2 category wishes an extension, transfer or duplicate DS-2019 visa documents, the health insurance held by that person shall be confirmed, and an extension, transfer, or duplicate document will be withheld if health insurance is not being maintained with adequate amounts of coverage.

J-1 STUDENT OR SCHOLAR DECLARATION OF AGREEMENT TO ABOVE REQUIREMENTS

I have read all of the above requirements regarding the maintenance of health insurance coverage for J-1 visa-holders and their J-2 dependents and I agree to comply with all of the above requirements throughout my stay as a J-1 visa holder. I understand that not complying with the above requirements is grounds for termination of my J-1 visa status and that of any J-2 dependents.

______________________________
Signature of J-1 Student/Scholar:

______________________________
Name in print:

______________________________
Date:

Please sign and return to the Office for International Students & Scholars.