



Health Insurance Form

Emergency Contact Information

Name _____ Relationship _____
Phone _____ Email _____
Address _____

Health Insurance

The U.S. Department of State requires that each exchange visitor obtain approved health insurance for the duration of their stay in the United States, plus the 30-day “grace period” after the exchange visitor’s program has ended. Exchange visitors should choose a health insurance provider that meets the minimum requirements for J-1 visa holders. Refer to the U.S. Department of State J-1 regulations (22 CFR 62.14) or the IA&A website for the complete list of insurance requirements.

Minimum coverage must provide:

- Medical benefits of at least \$100,000 per accident or illness.
- Repatriation of remains in the amount of \$25,000.
- Expenses associated with the medical evacuation of the exchange visitor to his or her home country in the amount of \$50,000.
- Deductibles not to exceed \$500 per accident or illness.

Once you have purchased insurance, please send IA&A the official proof of purchase showing the description of coverage. The format may be in either one of the following two formats: 1) Forward of original confirmation email showing insurance company logo, date of email, and original sender’s email; or 2) Copy of the registration document showing insurance company logo, contact information, stamp, and signature of sender.

Agreement

By signing below, you acknowledge that in order to maintain a valid J-1 visa status, you must maintain health insurance meeting the requirements of the Department of State for the duration of your exchange visitor program and for the entirety of the grace period.

Name

Signature

Date