

J-1 Exchange Visitor and J-2 Dependent Insurance Requirements

During your stay in the U.S. you and any J-2 dependents (spouse and/or children) must possess at all times health insurance that meets the minimum governmental standards listed below. You and any dependents must possess one of three options listed below. Please **follow the instructions given for the option that applies to you** in order to satisfy the health insurance requirements.

HEALTH INSURANCE OPTIONS 1, 2 or 3	Minimum Insurance Plan Requirements According to Federal J-1 Regulations				Provide Proof of Possession of Health Insurance
	A	B	C	D	
See Notes* for more information about the three options listed below.	Minimum \$50,000 US paid per accident or illness	Maximum \$500 US deductible (the amount you pay before the insurance starts paying)	Minimum \$10,000 US for medical evacuation to home country (in case you become seriously ill in the U.S.)	Minimum \$7,500 US for repatriation of remains (in case you die while in the U.S.)	Submit proof to the International Student and Scholar Services Office (ISSSO) <u>upon arrival to MU and when applying for a Program Extension</u>
1. MU Employee Benefits Plan If you will be/are a benefits eligible MU employee	Has A	Has B	Does not have C YOU MUST purchase an Add-on policy to cover Medical Evacuation/ Repatriations from Global Emergency Assistance Services (brochure enclosed) or another company and renew it on an annual basis.	Does not have D	Copy of check and application written to The Chickering Group or another insurance carrier providing Medical Evacuation/Repatriation
2. Chickering Group Insurance Plan (Brochure Enclosed)	Has A	Has B	Has C	Has D	Copy of application and check written to Student Assurance Services for you and your dependents.
3. Other (a plan you have acquired on your own)	It is your responsibility to confirm that the policy you purchase meets or exceeds the minimum requirements for J-1 insurance (A, B, C and D)				You will be asked to provide a copy of the insurance plan in English and sign an insurance compliance form.

Please note: J-1 program extensions will not be processed until the required proof of insurance information indicated above is provided by the J-1 Exchange Visitor. If the requested information is not provided, the J-1 visitor's program at the University of Missouri-Columbia may be terminated.

INFORMATION CONTINUED ON OTHER SIDE OF THIS PAPER

***Notes:**

1. If you are an official **employee of the University of Missouri-Columbia** and have a benefits package, which includes health insurance, your policy will **only** satisfy health insurance requirements A and B. In addition, **you must purchase** a Medical Evacuation/Repatriation policy to cover requirements C and D. A brochure for the plan administered through Global Emergency Assistance Services and The Chickering Group has been included in your initial program materials and is also available at the International Center. The cost of this plan is \$36 for half year and \$66 for full year (one fee for the J-1 and all J-2 dependents)

Remember that your **J-2 dependents must also meet the health insurance requirements.** Therefore, you should add them to your MU Benefits health insurance plan and your Medical Evacuation/Repatriation Policy.

2. The **Chickering Group Plan** (brochure enclosed in your initial materials and available at the International Center) satisfies all J-1 health insurance requirements (A, B, C, and D). Any J-2 dependents must also have insurance that satisfies (A, B, C, and D). You will note that the Chickering Group Plan is expensive when including the spouse, but relatively inexpensive with the children. This financial obligation must be considered when planning financially for your stay in the US. In order for your J-2 dependents to use the Chickering Group Plan, you, the J-1, must also be insured by the plan.

***Chickering Group Plan Monthly Premium Rates**

<u>Classification</u>	<u>Net Rate**</u>
Scholar Only	\$ 84
Scholar & Spouse	\$ 471
Scholar & Child(ren)	\$ 231
Scholar & Spouse & Children	\$ 618

To calculate the premium multiply that rate by the number of calendar months (not 30 day periods) of coverage desired. For example: Coverage requested for a UMC Scholar for period 11/15 to 01/15 = \$84 x 3 (3 calendar months, Nov. Dec. & Jan.) = \$252 (All rates subject to change without notice)

*The whole premium is charged for each calendar month or portion of a calendar month.

3. **Other Plan-** Any plan you purchase must meet requirements A, B, C, and D. The International Center staff can not assess the quality of insurance plans. It is the responsibility of the scholar to educate themselves regarding the strengths and weaknesses of a plan's coverage in the US.