



Office of International Student Services  
Center for International Studies  
261 Millennium Student Center  
One University Boulevard, (MC 221)  
St. Louis, Missouri 63121  
USA  
Telephone 314.516.5229  
Fax 314.516.5636  
Email: iss@umsl.edu

# Mandatory Health Insurance

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## Requirements

United States federal law and system-wide policy for the University of Missouri require all students with J-1 visas (exchange students) to have adequate health insurance for their studies in the US. Because of this law and this policy, UM-St. Louis requires that all J-1 students **EITHER**: 1) purchase health insurance through the University, **OR** 2) prove that they have adequate health insurance from their home country. A health insurance fee is charged to all J-1 students automatically each semester. In order to qualify for a waiver of the insurance fee your health insurance plan must meet all eight of the requirements listed on the next page.

**Please complete the attached form and return it to Shao-Wei Wang at UM-St. Louis by August 1, 2008.** It is especially important that you do this **BEFORE** purchasing any insurance plan in your home country. Any insurance plan you purchase must satisfy the listed requirements. If your insurance does not satisfy **ALL** of the requirements, you will be required to purchase health insurance through UM – St. Louis.

**To repeat: if your insurance does not meet EVERY requirement on the next page, you will have to purchase health insurance through UM – St. Louis.**

## More Information

A detailed description of the insurance coverage offered through the University's plan is available on the following websites:

University of Missouri-St. Louis Office of International Student and Scholar Services:  
<http://www.umsl.edu/international>

Chickering (our health insurance company):  
<http://www.chickering.com>

Many students have had particular difficulty locating the credit rating for their insurance company and a US or Canadian contact telephone number where coverage can be verified. You should ask your insurance company for these answers directly. You can also search for ratings yourself at the following websites: [www.ambest.com](http://www.ambest.com) and [www.standardandpoors.com](http://www.standardandpoors.com). (Note: it may be easier to find a rating for your insurance company's parent company.) Even though it might be difficult to find answers to these questions, they are **ABSOLUTELY REQUIRED**.

You may find it helpful to know that a few companies have previously met all of the mandatory requirements:

AIG Assist (Seoul, Korea)  
AIG Europe (Paris, France)  
AIU Insurance (Tokyo, Japan)  
Victoria Krankenversicherung (Düsseldorf, Germany)

If you have any questions, please contact Shao-Wei Wang at [wangsw@umsl.edu](mailto:wangsw@umsl.edu).



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## UM-St. Louis Exchange Student Health Insurance Form

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Please select one option below. If you choose the second option, please also complete the other eight steps. Then return the form to our office by mail (post) or fax using the contact information below.

Office of International Student & Scholar Services  
 Attn: Shao-Wei Wang  
 261 MSC, One University Blvd. (MC221)  
 St. Louis, MO 63121  
 +1.314.516.5636 (fax)

I plan to purchase health insurance through UM – St. Louis

Great! You can stop here. Please return this form to our office by mail (post) or fax. Please also note: health insurance costs for the academic year 2006-2007 are approximately \$418\* for 5 months of coverage in the fall term and \$585\* for 7 months of coverage in the winter term. Coverage in the fall begins on August 1 and ends on December 31; coverage in the spring begins on January 1 and ends on July 31. If you will be in the US before or after these dates, you are strongly encouraged to request and pay for additional coverage through our office.

I plan to purchase health insurance on my own

Before you purchase your own health insurance, you need to make sure that it satisfies **every** requirement below. Please read through each requirement and fill in the information about your health insurance as you go. **You cannot leave any answer blank. If your health insurance does not meet each requirement, you will be required to purchase health insurance through the university.** You should also make sure that your health insurance covers you from the date you arrive in the US to the date you leave (students in J1 status can enter the US up to 30 days before their program begins and remain up to 30 days after their program has ended).

Requirement	Your insurance
<input type="checkbox"/> 1. Maximum benefit per accident or illness must be at least US\$50,000	Max benefit: _____ write 'unlimited' if there is no limit
<input type="checkbox"/> 2. Deductible per accident or illness cannot be greater than US\$500	Deductible: _____ write '0' if there is no deductible
<input type="checkbox"/> 3. In the event of death, the policy must offer repatriation of mortal remains coverage of at least US\$7,500	Repatriation: _____
<input type="checkbox"/> 4. In the event of serious illness, the policy must offer medical evacuation benefits of at least US\$10,000	Medical Evac. _____
<input type="checkbox"/> 5. Insurance company must pay costs directly; your insurance company cannot be the type of company that reimburses you for payment that you make on your own	Pays: health care provider directly by reimbursing you
<input type="checkbox"/> 6. Insurance company must have a credit rating of: 'A-' or better from A.M. Best 'A' or better from Insurance Solvency International 'A+' or better from Standard and Poor's	Rating: _____ From: _____
<input type="checkbox"/> 7. Insurance company must have a US or Canadian telephone number where coverage can be verified	Telephone number in the US or in Canada: _____
<input type="checkbox"/> 8. After completing the form, attach copies of your insurance card/certificate and policy information, please then return the form to our office by mail (post) or fax using the contact information listed at the top of this form.	

\*please note: insurance costs subject to change