HEALTH INSURANCE REQUIREMENTS FOR J-1 EXCHANGE VISITORS AND DEPENDENTS

Both US federal regulations and UAB policy require all J-1 exchange visitors to obtain health insurance. Upon arriving at UAB, exchange visitors must check in with a J-1 Scholar Advisor in the Office of International Student and Scholar Services (ISSS) in the international center on the 2nd floor of Sterne Library (Campus Map) and provide proof of health insurance coverage.

IMPORTANT NOTE

In accordance with J-1 regulations, ISSS will NOT issue the Certificate of Eligibility for J-1 Status (DS-2019) until you provide proof of insurance that meets all four criteria for a minimum of one (1) month from the start date listed on your invitation letter.

ALL EXCHANGE VISITORS (BOTH J-1 PRINCIPALS AND J-2 DEPENDENTS) MUST PRESENT TO ISSS PROOF OF COVERAGE FOR INSURANCE THAT MEETS THE DEPARTMENT OF STATE’S REQUIREMENTS IN EFFECT FOR THE ENTIRE DURATION OF THEIR STAY AT UAB.

Minimum coverage required by federal J-1 Exchange Visitor Program regulations:

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

In other words, if the insurance you purchase does not clearly state that it meets all four criteria in the box above, the insurance does not comply with US federal regulations, and we will be unable to issue a DS-2019 for you until you provide proof of coverage that meets all four criteria.

The period of required coverage is the actual duration of your participation in UAB’s exchange visitor program as mentioned on your DS-2019 in box 3 “Form covers period.” If your program is more than one year in duration, you MUST provide proof of coverage for the first entire year. A willful failure to carry insurance is a violation of exchange visitor program regulations, and UAB reserves its right, under the regulations, to terminate your SEVIS record if you do not provide satisfactory proof of insurance in a timely manner.

UAB cannot charge you fees for the provision of insurance coverage beyond any demonstrable and justifiable staff time. UAB is not required to, but may, offer supplemental “entry to exit” coverage (i.e., coverage from the time you depart your home country until you return). If UAB provides your health insurance, or arranges for health insurance to be offered to you, via payroll deduction at UAB, you must voluntarily authorize this action in writing and also be given the opportunity to make other arrangements to obtain insurance. UAB must keep these authorizations on file.
1. Choose your insurance plan
   a. Exchange Visitors Compensated by UAB

If you will be compensated by UAB, depending on your HR assignment category you may be eligible to enroll in **VIVA UAB Insurance**.

If you will be **compensated as a Postdoctoral Scholar** (*i.e.*, you received a letter from UAB’s Office of Postdoctoral Education), you will be **eligible** to enroll in **VIVA UAB for Postdocs**.

Both VIVA UAB and VIVA for Postdocs (when read in conjunction with the life insurance policy in which postdocs are automatically enrolled) meet the Department of State’s insurance requirements.

Please note that the process can take several weeks after your arrival in the US. Thus, you **MUST buy temporary insurance** to cover you and your family from your program start date until the day you will enroll in VIVA UAB and provide proof to ISSS (please see the table below for insurance plans acceptable for J-1 Exchange Visitor). We require you to provide us with evidence of insurance for at least the **first one (1) month** you will be in the US.

b. Exchange Visitors NOT Compensated by UAB

There are dozens of J-1 compliant insurance policies on the market. The following are just a few of the policies available, and ISSSS does not endorse any particular company or plan.

<table>
<thead>
<tr>
<th>INSURANCE COMPANY</th>
<th>PHONE #</th>
<th>ACCEPTABLE PLANS</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISO Student Health Insurance</td>
<td>+1-800-244-1180</td>
<td>ISO J-1 Exchange Plan</td>
<td>Minimum 3 months plan</td>
</tr>
<tr>
<td>IMG</td>
<td>+1-800-628-4664</td>
<td><a href="http://www.imglobal.com">www.imglobal.com</a> (Patriot Exchange plan - choose the $100,000 plan option)</td>
<td>Have 1 month plan</td>
</tr>
<tr>
<td>International Student Protection</td>
<td>+1-877-738-5787</td>
<td>ISP Basic (choose the version with the $100/$500 deductible option)</td>
<td></td>
</tr>
<tr>
<td>iNext International Health Insurance</td>
<td>+1-866-887-7122</td>
<td>Global Adventure or Global Adventure Plus</td>
<td></td>
</tr>
<tr>
<td>VISIT International Health Insurance</td>
<td>+1-800-247-5575</td>
<td>Patriot Exchange (choose the $100,000 option) or VISIT Lite (choose the $100,000 option)</td>
<td></td>
</tr>
<tr>
<td>Cultural Insurance Services International</td>
<td>+1-800-303-8120</td>
<td>International Student and Scholar Insurance</td>
<td></td>
</tr>
<tr>
<td>International Student Insurance</td>
<td>+1-877-758-4391</td>
<td>Smart, Budget, Select, or Elite plans</td>
<td></td>
</tr>
<tr>
<td>PGH Global by United Healthcare</td>
<td>+1-800-605-2282</td>
<td>Basic or Essential</td>
<td></td>
</tr>
<tr>
<td>Tokio Marine HCC</td>
<td>+1-800-605-2282</td>
<td>Atlas Travel</td>
<td>Have 1 month plan</td>
</tr>
</tbody>
</table>
2. **Insurance Terminology**

The US has no universal healthcare system. Individuals are either insured through their employer, a private insurance company, or one of the government exchanges established by the Affordable Care Act ("ACA"). **J-1 exchange visitors are not subject to the ACA for their first two years in the US.**

A policy or plan document outlines what types of illness or injury you and your dependent spouse and/or child(ren) can be treated for. This is called **coverage**, because these illnesses and injuries are “covered” by the policy. When you visit a physician, you may be asked to pay a small fee called a **co-pay**, which is considered your portion of the cost of the treatment. The insurance company will pay the rest of the cost of the visit if you have a covered illness or injury, depending on your **deductible**.

Deductibles work like this: if you have a $500 deductible, your insurance will not cover treatment until you have spent $500 in one year on medical costs. When you personally pay for treatment instead of being covered by insurance, it’s called paying **out-of-pocket**. For example, if you purchase an insurance policy that covers you and your family at 100% after you meet a $500 deductible, you must pay the first $500 cost of your medical care out-of-pocket. Then, your insurance will cover the entire cost of medical care for that year beyond $500.

To maintain your health insurance coverage, you will pay a certain amount every month known as a **premium**. Generally, policies or plans with higher premiums have lower deductibles (because you’re paying more upfront, they start to cover your costs sooner), and plans with lower premiums have higher deductibles (because you’re paying less upfront, they start to cover your costs later). Look closely at the relationship between premiums and deductibles when you consider insurance plans.

Some plans will not pay the cost of treating illnesses or injuries that began prior to when you purchase insurance, known as **pre-existing conditions**. Others make you wait (e.g., six months) until they will cover the cost of that illness. If you or a dependent suffer from a chronic condition, choose a plan that will cover any treatment necessary for that condition as soon as the policy is effective.