


**VICE PRESIDENT OF ACADEMIC AFFAIRS AND PROVOST
POLICY MEMORANDUM**

		MEMORANDUM ID:	
TITLE:	J-1 Health Insurance Policy		
ORIGINATOR:	Denise R. Smith	DATE:	REV MAY 5, 2015
REVIEWED/APPROVED:	DATE:	SIGNATURES: 	
DEANS' COUNCIL			
PRESIDENT'S COUNCIL			
IMPLEMENTATION:		DATE:	
DISTRIBUTION:			

Per U.S. federal regulations, a J-1 exchange visitor is required to have health insurance coverage in effect for himself/herself and all J-2 dependents accompanying them to the U.S. for the entire duration of his/her J-1 exchange visitor program (validity dates on form DS-2019). Proof of this coverage must be provided prior to the exchange visitor being “validated” in SEVIS upon his/her arrival at the Medical University of South Carolina (MUSC). The health insurance coverage must meet or exceed the limits required per 8 CFR Title 22 § 62.14 and MUSC. The limits consist of the following:

- Medical benefits of at least \$100,000 per accident or illness
- In case of death, repatriation of remains in the amount of \$25,000
- In case of serious illness or injury, payment of expenses associated with the medical evaluation of the Exchange Visitor to his or her home country in the amount of \$50,000
- A deductible not to exceed \$500 per accident or illness
- Includes a co-payment provision that does not exceed 25% co-pay by the exchange visitor
- Does not exclude benefits for perils inherent to the activities of the exchange visitors program
- The insurance corporation underwriting the policy must have one of the following ratings:
 - An A.M. rating of "A" or above
 -
 - A McGraw Hill Financial/Standard & Poor's Claims paying ability rating of "A-" or above
 - Weiss Research, Inc. rating of "B+" or above
 - A Fitch Ratings, Inc. rating of "A-" or above

If an exchange visitor is employed incidental to his/her status by MUSC and is offered access to a MUSC employee health insurance plan, there could be a lapse in coverage of up to one month from the time the exchange visitor arrives until the time the insurance coverage is effective.¹ In

¹ If the Exchange Visitor is offered access to a MUSC employee health insurance plan, he/she must choose a plan which meets or exceeds the limits of coverage offered in the Blue Cross Blue Shield Standard Plan (aka the SHP

this circumstance, the Exchange Visitor must purchase a plan from a US provider that: 1) meets or exceeds the above-listed coverage requirements; and 2) is effective on or before the program start date and remains effective until the health insurance coverage provided by MUSC begins.

If the Exchange Visitor will not be covered by a MUSC employee insurance plan, he/she must obtain health insurance coverage from another US provider that: 1) meets or exceeds the above-listed coverage requirements; and 2) is effective on or before the program start date and remains effective for the duration of his/her stay.

All health insurance plans are required to be through US insurance providers for the purpose of ensuring that the coverage of the policy meets or exceeds the limits required per 8 CFR Title 22 § 62.14. Insurance coverage through a non-US company or government will not be accepted.

Documentation for all non-MUSC health insurance coverage for the exchange visitor and his/her dependents must be submitted to the Center for Global Health for review. The documentation must include the dates of coverage, the details of the plan selected (i.e. schedule of benefits), and any beneficiary of the plan.

It is the responsibility of the exchange visitor to ensure that he/she has the required health insurance coverage necessary for himself/herself and all dependents in order to remain in valid J-1 status.

Standard Plan). The Blue Cross Blue Shield Savings Plan (aka the SHP Savings Plan) **does not** meet the minimum requirements of 8 CFR Title 22 § 62.14.