

---



---

# International Student Services

## International Student Health Insurance

### Verification of Alternative Coverage Standards

---



---

**For those students who either are not campus employees or are on a 90 day waiting period and wish to purchase insurance coverage other than the student coverage at Texas A&M you must provide this form completed by you, the student and an insurance company representative, and attach a copy of the policy in English. You should also keep a copy of your policy in English for yourself, so that should the need arise in an emergency situation you have verification of your benefits.**

In the United States it is up to each person to provide for his or her own and family's health care expenses. International Students (those who are not permanent residents of the US) enrolled at Texas A&M, are required to have an approved health insurance plan. This is to ensure that medical treatment will be available in the event of injury or illness while enrolled at the University. All exchange visitors (both J-1 principals and J-2 dependents) are required to have sickness and accident insurance and medical evacuation and repatriation insurance in effect for the duration of their exchange visitor program. 22 C.F.R. § [62.14](#)

<b>Last Name</b>	
<b>First Name</b>	
<b>UIN</b>	
<b>E-mail Address</b>	
<b>Dependents Name (if applicable)</b>	
<b>Do you have an assistantship? If so with which department?</b>	
<b>Address</b>	
<b>Phone Number</b>	

“State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.”

**\*Important Health Insurance Information for Students with Assistantships**

Please be aware that the state of Texas does not provide a state contribution toward health coverage to new employees (all graduate assistantships) in the first 90 days of employment. Because international students are required to maintain health coverage by Texas A&M University regulations international students may wish to consider purchasing their own insurance coverage during this period of time until the university covers the aforementioned insurance.

# International Student Services

## International Student Health Insurance

### Verification of Alternative Coverage Standards

**STUDENT-** Please sign below to certify the following:

I certify that I have purchased the coverage as listed below. I certify that my health insurance coverage is in effect and will remain in effect until the entire Texas A&M semester is complete. I understand that it is my sole responsibility to maintain the minimum coverage required by applicable federal regulations and Texas A&M policies.

I certify that I am legally responsible for my own medical expenses and that Texas A&M is not responsible for such expenses. I give the insurance company listed below permission to release and share all policy information to Texas A&M University.

Student's Printed Name	
Signature	

**Official Representative of Insurance Company:**

Name of Insurance Company		
Policy Holder's Name		
Policy effective dates	Begin:	End:

Please verify that the insured has the following requirements listed in their current policy:

1. Medical benefits of at least \$50,000 per accident or illness
2. Repatriation of remains in the amount of \$7,500
3. Medical evacuation to one's home country of at least \$10,000
4. A deductible not to exceed \$500 per accident or illness
5. No limit on the student's daily coverage, otherwise known as a "per diem" policy (Texas A&M no longer accepts these plans)
6. Please note that you have the following: Have a Best or Standard and Poor's rating of at least "A-", or a Weiss Research Inc. rating of at least B+; or an Insurance Solvency International, Ltd. rating of at least "A-1"; or be backed by the full faith and credit of the student home country government.
7. Policy is effective upon student's first day of class through the end of the semester

Please verify with your signature that the student's health insurance policy meets all of the above requirements listed above.

Insurance Company Representative Printed Name	
Signature	
Title	
Date	