National Institutes of Health

Division of International Services

J-1 Exchange Visitor Program
Certification of Health Insurance Coverage

Health Insurance Requirements

U. S. Department of State (DOS) regulations in 22 CFR Part 62.14 require that each J-1 Exchange Visitor and J-2 dependent have insurance for sickness or accident. Minimum coverage must include:

- medical benefits of no less than $100,000 per accident or illness:
- a maximum $500 deductible per accident or illness;
- medical evacuation benefits of $50,000;
- repatriation of remains in the amount of $25,000.

Any policy, plan, or contract secured to fill the above requirements must, at a minimum, be:

- Underwritten by an insurance corporation having an A.M. Best rating of "A--" or above; a McGraw Hill Financial/Standard & Poor's Claims-paying Ability rating of "A--" or above; a Weiss Research, Inc. rating of "B+" or above; a Fitch Ratings, Inc. rating of "A--" or above; a Moody's Investor Services rating of "A3" or above; or such other rating as the Department of State may from time to time specify; or

- Backed by the full faith and credit of the government of the exchange visitor's home country; or

- Part of a health benefits program offered on a group basis to employees or enrolled students by a designated sponsor; or

- Offered through or underwritten by a federally qualified Health Maintenance Organization (HMO), or eligible Competitive Medical Plan (CMP) as determined by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.

J-1 Exchange Visitors and J-2 dependents may also be subject to the requirements of the Affordable Care Act.

J-1 Exchange Visitor Certification

I have read the above and certify that I and all my J-2 dependents who are currently in the U.S. have health insurance coverage according to the requirements as specified above. Furthermore, any J-2 dependents who arrive to the U.S. at a later date will be included in my health insurance plan immediately upon their arrival. I further understand that a willful failure on my part to obtain and maintain health insurance that meets the requirements above for myself and J-2 dependents (if applicable), will be cause for termination of my program.

Date	Print Name	Signature

FAES Verification

The insurance policy for the above individual and accompanying J-2 dependents (if applicable) has been verified by the Foundation for Advanced Education in the Sciences (FAES) and has been found to fulfill DOS's requirements under the J-1 Exchange Visitor Program, as described in 22 CFR Part 62.14.

FAES agent	Date

For NIH/DIS and FAES Use Only

DS-2019: *From*	*To*
Category/IC	Type of Insurance ☐ Individual ☐ Family

NIH/DIS Immigration Specialist	Date

NIH 829-6 (03/15)

Distribution of copies: White -- Return to NIH/DIS; Yellow -- FAES; Pink -- J-1 Exchange Visitor