

UAA Health Insurance Waiver Request Form

All international students in F1 and J1 status are required to have health insurance while attending UAA. Your student account will be billed for the UAA health insurance plan at the beginning of each semester. Students currently covered under a policy in their home country that meets the coverage requirements may request a waiver of the UAA policy. Students must follow the procedures outlined below to request a waiver.

Fall Semester charge is \$559.15 and covers from August 25 – January 14

Spring/Summer Semester charge is \$868.01 and covers from January 15 – August 24

Waiver Process:

ALL WAIVER REQUESTS MUST BE SUBMITTED VIA EMAIL TO UAA_INTLSERVICES@ALASKA.EDU BY THE FIRST DAY OF CLASS EACH SEMESTER.

Required Documents:

1. *International Student Health Insurance Coverage Waiver Request Form* completed by the student
2. Copy of the Insurance Policy, including coverage period. All documents must be in English and American dollars.

Waivers are automatically charged to all international students during the registration period.

If the waiver request is approved, the health insurance charge will be removed from the student's bill before the payment deadline.

If students have already paid for the insurance before the waiver is processed, refunds will be issued by the Bursar's Office. No further action is required by the student.

Note: A new waiver form must be completed and submitted each semester, accompanied by documentation of coverage. Documentation must be submitted with every waiver form, even if there are no policy changes from one semester to the next.

Alternate Insurance Coverage Requirements:

Any alternative policy must

- **Insurance company must be based outside of the US unless offered by a family member's US employment.**
- Cover the entire semester (From the first day of classes until the last day of final exams)
- Provide comparable coverage in the amount of at least \$500,000 annual coverage
- Have a deductible or out of pocket expense of \$500 or less per condition
- Not have a waiting period for coverage of a pre-existing condition
- Provide at least U.S \$25,000 for repatriation of remains to the home country*
- Provide at least U.S \$50,000 for medical evacuation to the home country if medically ordered*
- Treat mental illness as any other illness

**Those with US employment insurance will need to purchase these separately*

For questions regarding this waiver request form or the insurance policy for F-1 and J-1 students, contact:

Uaa_intlservices@alaska.edu.



Spring 2018 UAA International Student Health Insurance Coverage Waiver Request

International Students attending UAA are required to have health insurance. UAA has partnered with LowerMark Student Insurance to provide coverage for all international students. However, students may opt out of this coverage by providing proof of adequate insurance coverage from **their home country**.

To be eligible for this waiver, this form and policy documents must be completed and submitted to uaa_intlservices@alaska.edu by Monday, January 16, 2018.

Student's Name: _____

Student's UAID number: _____

Student's Email: _____

Reason for requesting waiver:

_____ My parent or spouse is living/working in the USA and has medical insurance coverage for me.

_____ I am a sponsored student and have medical insurance coverage from my sponsoring agency or home government.

_____ I have insurance coverage from my home country/government, family or spouse.

_____ Other: _____

Name of Insurance Company: _____

Customer Service Phone Number: _____

Country of Issuance: _____

Name of Policy Owner (Primary Insured Person): _____

Policy Number : _____

Please verify the following information before submitting:

	YES	NO
Is your insurance company based outside of the United States?		
Does your insurance meet these standards:		
Medical benefits of at least \$500,000 USD per accident or illness		
A deductible not to exceed \$500 USD per accident or illness		
No waiting period for coverage of a pre-existing condition		
Repatriation of remains of deceased of at least \$25,000 USD		
Coverage for medical evacuation to home country of at least \$50,000 USD		
Treat mental illness as any other illness		
Does your insurance cover the complete time period between January 16, 2018 to May 5, 2018?		

I understand that:

- A denied waiver request OR failure to provide complete and accurate information will result in my automatic enrollment in the UAA international student health insurance policy.
- If my insurance coverage ends for any reason, it is my responsibility to notify my school.
- Any medical expenses I incur in excess of my insurance coverage are my responsibility. My school assumes no liability.

Signature

Date

