

## EWU International Student and Scholar Health Insurance Coverage Fee Waiver Eligibility Requirements

To be considered “comparable” and eligible for insurance fee reversal, international student and scholar health insurance plan must offer coverage for the following health services according to 22 C.F.R. § 62.14 and the Patient Protection & Affordability Act <https://www.healthcare.gov/glossary/patient-protection-and-affordable-care-act/> and meet the minimum standards listed below:

- Unlimited yearly benefit
- Deductible amount less than or equal to \$250USD
- No maximum daily benefit for In-Hospital Room and Board
- Maximum out-of-pocket costs \$4,500 per benefit year
- Insurance carrier must have a claims office in USA
- Preventative services provided with no deductible or co-pay
- Outpatient emotional and mental disorders
- Inpatient emotional and mental disorders
- Outpatient alcoholism and substance abuse
- Pregnancy/maternity costs
- Prescription drugs
- X-rays and lab work
- Ambulance charges
- Annual exams, Immunizations and Contraceptives covered with NO co-pay
- Doctor’s visits
- Durable medical equipment
- Medical evacuation and repatriation coverage
- Repatriation of deceased remains

Additional requirements for the insurance provider as follows:

- Underwritten by an insurance corporation having an A.M. Best rating of “A $\mathbb{Y}$ ” or above; a McGraw Hill Financial/Standard & Poor’s Claims-paying Ability rating of “A $\mathbb{Y}$ ” or above; a Weiss Research, Inc. rating of “B+” or above; a Fitch Ratings, Inc. rating of “A $\mathbb{Y}$ ” 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 or eligible Competitive Medical Plan as determined by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.