Florida A&M University International Student Health Insurance Compliance Check

INSTRUCTIONS FOR INSURANCE COMPANY COMPLETING THIS FORM: Please read carefully the list of mandatory benefits. Complete the name of the insurance company, policy number, and dates of coverage. Indicate YES for every benefit in the student's policy that meets or exceeds the requirements. Indicate "NO" for benefits not provided or that do not meet the required coverage. Please print your name and position with the company, sign and date the form at that bottom of the page.

Student Name: Date of Birth: Insurance Company: Policy No: Date Coverage begins: Date Coverage ends:	
	Coverage for annual period student is in school, including holiday and summer breaks. Payment of benefits must be renewable.
	Room, board, hospital services, physician fees, surgeon fees, ambulance, outpatient services, and outpatient fees paid at 80% UCR in-network and 70% UCR out-of-network, per accident or illness
	Inpatient Mental Health Care – paid at 80% UCR in-network or 60% UCR out-of-network with a minimum 30 day cap per benefit period
	Outpatient Mental Health Care – paid at 80% UCR in-network or 60% out-of-network for a minimum of 30 sessions per year
	Maternity Benefits – treated as any other temporary medical condition and paid at no less than 80% UCR in-network or 60% UCR out-of-network
	Inpatient/Outpatient Prescription Medication: Must cover \$1,000 or more per policy year
	Repatriation - \$10,000
	Medical Evacuation - \$25,000
	Exclusion for Pre-Existing Conditions – First 6 months of policy only
	Deductible – Maximum of \$50 per occurrence if services rendered at Student Health Center; maximum of \$100 per occurrence if treatment services are rendered at an off-campus ambulatory care or hospital emergency facility
	Minimum coverage - \$200,000 for covered injuries/illnesses per policy year
	Insurance carrier must meet the rating requirements specified in Part 62.14©(1) of Title 22 of the Code of Federal Regulations
	Policy must not unreasonably exclude coverage for perils inherent to the student's program of study
	Claims must be paid in U.S. dollars payable on a U.S. financial institution
	Policy provisions must be available from the insurer in English
This insurance policy meets the minimum requirements as stated above (circle one): Y N I have completed and verified the information on this form. Position:	

Date: _____

Signature: _____