



# COLLEGE of CHARLESTON

CENTER FOR  
INTERNATIONAL EDUCATION

## Insurance Waiver Requirements Checklist

**You must be able to answer YES to ALL questions for your waiver to be approved.**

Criteria	My Plan
1. My policy will provide coverage to me the entire time I am in the United States.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. My coverage will stay active while I am attending the College of Charleston for the 2017-2018 policy year.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. There is no Maximum Dollar Limit on my Policy.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. My policy provides emergency and non-emergency health care as well as in-patient mental health care benefits.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. My current policy does not have a deductible greater than \$100.00 USD per insured person, per policy year.	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. My current policy includes medical evacuation of no less than \$50,000.00 USD.	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. My current policy includes repatriation of remains no less than \$25,000.00 USD.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. My policy covers pre-existing conditions.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. My policy provides coverage for prescription drugs.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. My policy provides no less than 70% reimbursement of claims in network as well as no less than 60% reimbursement of claims out of network, for both emergency and non-emergency care.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>11. POLICY BENEFIT INFORMATION IS AVAILABLE FROM MY INSUERER IN ENGLISH, TO BE SUBMITTED WITH MY WAIVER REQUEST FORM</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>**This section is for College of Charleston Athlete's only**</i></b>	
12. My policy covers injuries due to Intercollegiate Sports.	<input type="checkbox"/> Yes <input type="checkbox"/> No