Students enrolling in a Johns Hopkins University in Explore Engineering Innovation must have health insurance issued by a provider headquartered in the United States. Traveler’s insurance does not meet this requirement. A parent or guardian may not waive or permit students to attend without health insurance that is U.S. based. Documentation of health insurance must be provided to the program before enrollment is confirmed.

International students must also meet this U.S. based health insurance requirement. For students who cannot document satisfactory coverage, a temporary, summer-only plan is provided by IMGlobal, through the Patriot Exchange program. This is a limited, emergency plan, and does not cover pre-existing conditions. The plan requires at least one month of coverage.

At the Patriot Exchange insurance purchase site, the following elements of coverage must be met:

1. Your Start Date and End Date must be set as outlined in the table below.
2. You can choose the deductible amount you and your family prefer, but coverage must be based on the 500,000 Maximum Limit column.

<table>
<thead>
<tr>
<th>Terms of Coverage:</th>
<th>Insurance Start Date</th>
<th>Insurance End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Programs</td>
<td>Sunday, July 3, 2022</td>
<td>Wednesday, Aug. 2, 2022</td>
</tr>
<tr>
<td>° Hood College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° JHU Homewood (Baltimore)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Commuter Programs</th>
<th>Tuesday, July 5, 2022</th>
<th>Thursday, Aug. 4, 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>° Bossier Parish Community College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Bullis School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° California State University – Fullerton</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Hood College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° JHU Applied Physics Lab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° JHU Homewood (Baltimore)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Loyola University Maryland</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Laney College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Mt. San Antonio College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Ohlone College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Pasadena City College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° Thomas Jefferson University</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° University of San Diego</td>
<td></td>
<td></td>
</tr>
<tr>
<td>° University of the District of Columbia</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Navigate to the insurance application at https://www.imglobal.com/application/patriot_exchange?imgac=182036 to purchase insurance.

Please see the screenshots below for assistance in purchasing your insurance policy. You will also see a sample IMG Insurance Policy ID card.
Great choice! Let's get started.

Fill out the basic information below and we'll guide you through the rest.

---

1. **Travel Information**

2. **Travel Dates**
   - **Travel Start Date**: 07/04/2022
   - **Travel End Date**: 08/03/2022
   - **Travel Duration**: 31 Days (1 month minimum)

3. **Coverage Area**
   - Do you need coverage in the USA? Yes
   - What if I need coverage in multiple countries or on a cruise?

4. **Traveler Information**
   - Please enter the following information for each person you would like to include.

   **Primary Insured**
   - **First Name**: [Redacted]
   - **Last Name**: [Redacted]
   - **Date of Birth**: Month 10, Day 11, Year 2005
   - **Gender**: Male
   - **Government / Passport ID (Optional)**: [Redacted]
   - **Citizenship**: China
   - **Residence**: China
   - **US Visa Type**: F1
   - **Sponsored Organization or Program (if applicable)**: [Redacted]

   **Add Spouse**: [ ]
   **Add Children**: [ ]

---

NEXT
**Travel Information**

**Price Options**

**Select your deductible amount**

- $0

Tips: A lower deductible means lower out-of-pocket expenses.

**Select your policy maximum limit**

<table>
<thead>
<tr>
<th>Policy Max</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>$50,000</td>
<td>$64.80</td>
</tr>
<tr>
<td>$100,000</td>
<td>$75.60</td>
</tr>
<tr>
<td>$250,000</td>
<td>$80.40</td>
</tr>
<tr>
<td>$500,000</td>
<td>$86.40</td>
</tr>
</tbody>
</table>

Tips: A higher policy maximum limit means lower out-of-pocket expenses. It's a good idea to pick a higher policy maximum limit.

**Need Some Help?**

Give Us A Call
+1 (317) 655-4500

**Ratings & Reviews**

---

**Optional Coverage**

**Add-Ons**

Provides additional coverage for loss/theft of luggage, valuables, and personal papers. Also, provides legal assistance for travel fees of up to $500 when served with summons. Additionally, provides personal liability coverage for injury to third party of up to $2,000 after $100 deductible, as well as for damage to third party’s property up to $500 after $100 deductible. Provides limited high school sports coverage at 100% of UCR.

- Yes (+ $9.40)
- No

**Adventure Sports Rider**

Provides coverage for any illness or injury sustained while participating in activities designated as Adventure Sports, which are limited to the following: abseiling, BMX, bobsledding, bungee jumping, canopying, caving, hot air ballooning, jungle zip lining, paragliding, parascending, rappelling, skydiving, spelunking, whitewater kayaking, wildlife safari, and windsurfing.

- Yes (+ $17.28)
- No

**Need Some Help?**

Give Us A Call
+1 (317) 655-4500

**Ratings & Reviews**
Name: [redacted]
Insured ID: 84963928
Certificate: EPSWN00275505
Effective: 30-JUN-2019
Expiration: 04-AUG-2019

This coverage contains precertification requirements (see back).
Possession of this card does not guarantee coverage.

Failure to comply will result in a reduction of benefits. To precertify, prenotify, or verify eligibility and/or benefits, please contact IMG at:

Inside the U.S. and Canada: +1.800.628.4664
Outside the U.S. and Canada: +1.317.655.4500
From the Bahamas: +1.866.677.4500
From the U.K.: +44 2920 474 236

Email: insurance@imglobal.com
Fax: +1.317.655.4505
Online Provider Network: www.imglobal.com/provider
Electronic Claim Payor ID: IMGIN
Mail all claims to: International Medical Group (IMG)
P.O. Box 88500
Indianapolis, IN 46208-0500 USA