



# Medical Insurance Attestation

Both the U.S. Department of State (DoS) and State University of New York (SUNY) require J-1 Exchange Visitors to have medical insurance coverage during their stay in the U.S. as J-1 Exchange Visitors that covers the entire program of activity as noted on the DS-2019. The DoS also requires J-2 dependents to have medical insurance that meets DoS regulatory requirements. Please note that you, and any accompanying dependents, also may be subject to the requirements of the Affordable Care Act. The state-operated campuses include the technology colleges, university colleges, and university centers and doctoral degree granting institutions. These campuses require enrollment in the SUNY health insurance plan or proof of comparable insurance. The SUNY plan meets the DoS requirements.

Although J-1 Exchange Visitors may purchase health insurance in their home country, they should be aware that their home country policy can substitute for the SUNY policy only if the health insurance coverage is comparable. If not, the J-1 Exchange Visitor will have to purchase the SUNY policy. Similarly, any health insurance policy purchased for J-2 dependents must meet the DoS requirements (\$100,000 per accident/illness; deductible no greater than \$500 per accident/illness; minimum \$25,000 repatriation coverage; and minimum \$50,000 medical evacuation coverage) or the J-2 will need to purchase the SUNY dependent policy which exceeds DoS minimum requirements. Therefore, we do not recommend purchasing health insurance in your home country to cover you during your stay in the United States. You should consult your Exchange Visitor Advisor regarding campus-specific procedures related to health insurance.

Please indicate below how you expect to meet this medical insurance requirement:

I (and my J-2 dependents) will have health insurance coverage as a benefit of my employment\*

*\* In this case, the exchange visitor must purchase health insurance from their host SUNY campus (the SUNY Plan) in order to have coverage during the 42-day waiting period before the insurance takes effect.*

*NOTE: Most state employment benefits do not include repatriation/evacuation coverage so supplemental insurance may be required to meet DoS and SUNY requirements.*

I (and my J-1 dependents) will purchase health insurance from my host SUNY campus and maintain this coverage for the duration of my stay as a J-1 Exchange Visitor.\*\*

*\*\* Your host SUNY campus will supply you with the health insurance enrollment form upon your arrival into the U.S. Your host SUNY campus will assist you in the enrollment process.*

I (and my J-2 dependents) have my (our) own health insurance, but understand that it must be evaluated by the host SUNY campus.

I will provide a copy of the entire policy benefits and coverage, in English, to the international student and scholar services office. If it is not in English, I will provide a translated copy. If it does not provide the coverage required by SUNY, I will purchase the SUNY/campus health insurance.

*NOTE: We recommend that you send a copy of your current coverage to your Exchange Visitor Advisor before your arrival.*

By signing below, I hereby confirm my understanding, and accept my obligations, under the Exchange Visitor Program and State University of New York requirements for J-1 Exchange Visitors. I also acknowledge that willful noncompliance with the insurance provisions will result in the termination of my participation in the Exchange Visitor Program.

Exchange Visitor's Name:

Exchange Visitor's Signature:

Date: