



University at Buffalo  
The State University of New York

Office of International Education  
International Student and Scholar Services

**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. The DOS also requires J-2 dependents to have medical insurance that meets DOS regulatory requirements. Note: The SUNY Dependent Medical Coverage meets the DOS requirements so is recommended.

Although J-1 Exchange Visitors may purchase health insurance in their home country, they should be aware that their home country policy can only substitute for the SUNY policy if the health insurance coverage is comparable. If not, the J-1 Exchange Visitor will also have to purchase the SUNY policy. Similarly, any health insurance policy purchased for J-2 dependents must meet the DOS requirements or the J-2 will need to purchase additional insurance. Therefore, we do not recommend purchasing health insurance in your home country to cover you (or your dependents) during your stay in the U.S.

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

\_\_\_\_\_ I will have health insurance coverage as a benefit of my University at Buffalo employment  
Note: In this case, you must purchase health insurance from UB's Student Medical Insurance Office (Student Union 315, North Campus) in order to have coverage during the 42-day waiting period before the insurance takes effect.  
Note: ALL UB Research Foundation employees must purchase SUNY's Medical Evacuation & Repatriation Insurance (MEDEX).

\_\_\_\_\_ I will purchase health insurance from UB's Student Medical Insurance Office (Student Union 315, North Campus) when I arrive in Buffalo and maintain it for the duration of my stay as a J-1 Exchange Visitor.  
Note: You must submit the health insurance enrollment form to the Student Medical Insurance Office upon your arrival in the U.S.

\_\_\_\_\_ I (and my dependents) have my (our) own health insurance, but understand that it must be evaluated by UB's Student Medical Insurance Office. (If it is not in English, I will provide a translated copy.) If it does not provide the coverage required by SUNY, I (We) will purchase the SUNY health insurance. (For detailed information about SUNY's International Health Insurance policy, please visit: [http://wings.buffalo.edu/intlservices/health\\_stu.html](http://wings.buffalo.edu/intlservices/health_stu.html), <http://subboard.com/insurance/> or <http://hthworldwide.net/>.)

\_\_\_\_\_ My J-2 dependents will purchase health insurance from the Student Medical Insurance Office (Student Union 315, North Campus) when they arrive in Buffalo.

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

\_\_\_\_\_  
Exchange Visitor Signature

\_\_\_\_\_  
Date