

**MEDICAL INSURANCE PLAN WAIVER REQUEST FORM
INDIANA UNIVERSITY-PURDUE UNIVERSITY
FORT WAYNE (IPFW)**

FOR CAMPUS USE ONLY
Waiver Validation & Rider Verification
Authorization Initials: _____
Date: _____
Valid to: _____

_____		_____	
Last Name	First Name	MI	Student ID#
<p>I have read the description of the IPFW International Student and Scholar Health Insurance Plan. I elect to waive my right to participate in this plan because I have comparable worldwide major medical insurance coverage. I understand that I must purchase medical insurance coverage as follows, and proof is attached.</p>			
_____		_____	
Insurance Company	Certificate/Policy Number/Group Number		

Insurance Contact Information in the United States			
<p>I therefore waive the coverage provided by Indiana University Purdue University Fort Wayne (IPFW) for: 20_____ - 20_____</p>			
_____		_____	
Student Signature	Date		

Policy and criteria for waiver of insurance coverage offered through IPFW:

IPFW requires that all international students purchase the University-sponsored health insurance plan unless they fall into one of the following three categories which qualifies them for a waiver:

Please Note: international graduate students with benefit-eligible graduate staff appointments (benefit-eligible TA or RA positions) will have the option to purchase a IPFW University Graduate Staff Health Insurance Plan.

Who qualifies for a waiver?

Please Note: If you qualify for a waiver, a new form must be submitted each semester.

Category # 1 - Government-sponsored students whose home government purchases insurance for students and does not just supply funds to purchase an insurance plan of their choice.

Category # 2 - Students employed by a U.S. or Canadian based employer or the dependent of a U.S. or Canadian-based employee with employer-based health insurance.

Category # 3 - Students who are participants in an official study abroad exchange program (J-1 exchange students).

Note: Individual and private insurance companies do not qualify for a waiver.

If you are in one of the three categories eligible for a waiver, please note the minimum criteria for granting a waiver are as follows:

1. Coverage must be in effect from the 1st day of classes through the last day of final exams.
2. Medical benefits per accident or illness of at least \$200,000. *
3. Repatriation of remains in the amount of \$25,000.*
4. Medical evacuation coverage in the amount of \$50,000.*
5. An annual deductible per year not to exceed \$500* per illness (per person).
6. To qualify, an insurance policy must be underwritten by an insurance corporation with an A.M. Best rating of "A-" or above, an Insurance Solvency International, Ltd. (ISI) rating of "A-I" or above, a Standard and Poor's Claims Paying Ability rating of "A-" or above, or a Weiss Research, Inc. rating of B+ or above. Alternatively, the participant's policy may be backed by the full faith and credit of the government of the exchange visitor's home country.

*Amounts must be in US dollars(\$) and are the minimal amounts required at the time a waiver request is reviewed at the University.

There is no monetary profit for the University if a student purchases the University plan. The benefit is ensuring that all international students have an adequate health insurance plan and are protected from huge financial burdens.