



Western Kentucky University
 Student Health Insurance Plan
 2016-2017 Final Premium Rates
 UHC

Domestic / Funded Graduates (Fall and Spring / Summer only)

	Annual		Fall		Spring/Summer		Summer	
	8/1/2016 through 7/31/2017		8/1/2016 through 12/31/2016		1/1/2017 through 7/31/2017		5/1/2017 through 7/31/2017	
Medical								
Student	\$	1,718.00	\$	859.00	\$	859.00	\$	433.00
Spouse	\$	1,718.00	\$	859.00	\$	859.00	\$	433.00
Child	\$	1,718.00	\$	859.00	\$	859.00	\$	433.00
Children	\$	3,436.00	\$	1,718.00	\$	1,718.00	\$	866.00