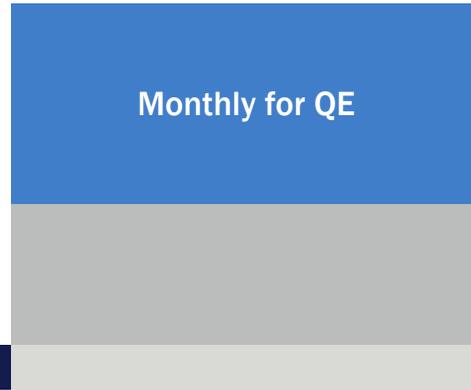


Johns Hopkins University  
 Student Health Insurance Plan  
 2025-2026 Final Premium Rates



<b>Wellfleet Medical</b>		
Student*	\$	275.00
Dependent (+1)	\$	549.00
Family (2+)	\$	686.00

\*Dependent rates are included in the student rate. Auto-enrolled student coverage is charged directly to the students SIS (bursar) bill.

<b>Delta Dental</b>		
Student*	\$	18.65
Dependent (+1)	\$	34.46
Family (2+)	\$	51.28

<b>EyeMed Vision</b>		
Student*		
Dependent (+1)		
Family (2+)		