Purdue University
Student Health Insurance Plan
2023-2024 Final Premium Rates
Delta Dental Option 1
Graduate Assistants Dental

	Monthly	
Dental		
Student	\$ 21.67	
Spouse	\$ 21.19	
All Children	\$ 29.00	
Dental Combined		
Student	\$ 21.67	
Student & Spouse	\$ 42.86	
Student & Children	\$ 50.67	