

Grad Dental Option 1 Prem Cost

Purdue University  
Student Health Insurance Plan  
2026-2027 Final Premium Rates  
Delta Dental Option 1  
Graduate Assistants Dental

	Monthly	
<b>Dental</b>		
Student	\$	23.92
Spouse	\$	23.40
All Children	\$	32.00
<b>Dental Combined</b>		
Student	\$	23.92
Student & Spouse	\$	47.32
Student & Children	\$	55.92