University of Arkansas Student Health Insurance Plan 2025-2026 Final Premium Rates UHC Voluntary

	Fall	5	Spring/Summer	Spring	Summer
	8/1/2025		1/1/2026	1/1/2026	5/16/2026
	through		through	through	through
	12/31/2025		7/31/2026	5/15/2026	7/31/2026
Medical Combined					
Student	\$ 1,831.00	\$	2,537.00	\$ 1,615.00	\$ 922.00
Student & Spouse	\$ 3,662.00	\$	5,074.00	\$ 3,230.00	\$ 1,844.00
Student & Child	\$ 3,662.00	\$	5,074.00	\$ 3,230.00	\$ 1,844.00
Student & Children	\$ 5,493.00	\$	7,611.00	\$ 4,845.00	\$ 2,766.00
Student & Spouse & Child	\$ 5,493.00	\$	7,611.00	\$ 4,845.00	\$ 2,766.00
Student & Spouse & Children	\$ 7,324.00	\$	10,148.00	\$ 6,460.00	\$ 3,688.00