## University of Kentucky Student Health Insurance Plan 2023-2024 Final Premium Rates Continuation

Voluntary - Unfunded Domestic, OPT and Blue Grass

	Monthly (one month maximum)		Half month		
Medical					
Student	\$ 230.0	0\$	123	.00	
Spouse	\$ 230.0	0 \$	123	.00	
Child	\$ 230.0	0 \$	123	.00	
Children	\$ 460.0	0\$	246	.00	

## Funded Graduate students and Internationals

	Monthly (one month maximum)			Half month		
Medical						
Student	\$		219.00	\$		117.00
Spouse	\$		219.00	\$		117.00
Child	\$		219.00	\$		117.00
Children	\$		438.00	\$		234.00