

UT Health Houston
Student Health Insurance Plan
2025-2026 Final Premium Rates
Blue Cross Blue Shield
Dental Post Graduate

	Fall		Spring		Summer	
	9/1/2025 through 12/31/2025		1/1/2026 through 6/30/2026		7/1/2026 through 8/31/2026	
Medical						
Student	\$	1,146.00	\$	1,710.00	\$	582.00
Spouse	\$	1,146.00	\$	1,710.00	\$	582.00
Children	\$	1,838.00	\$	2,743.00	\$	934.00
Dental						
Student	\$	86.00	\$	128.00	\$	44.00
Spouse	\$	86.00	\$	128.00	\$	44.00