UT Health Houston Student Health Insurance Plan 2023-2024 Final Premium Rates Blue Cross Blue Shield Dental Post Graduate

	Fall	Spring	Summer
	9/1/2023	1/1/2024	7/1/2024
	through	through	through
	12/31/2023	6/30/2024	8/31/2024
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	\$ 84.00	\$ 126.00	\$ 43.00
Spouse	\$ 84.00	\$ 126.00	\$ 43.00