

UT Permian Basin
Student Health Insurance Plan
2024-2025 Final Premium Rates
Blue Cross Blue Shield
Athletes (Domestic or International)

	Fall		Summer	
	8/15/2024 through 12/31/2024		6/1/2025 through 8/14/2025	
Medical (Combined)				
Student	\$	1,306.00	\$	704.00
Student & Spouse	\$	2,612.00	\$	1,408.00
Student & Children	\$	3,400.00	\$	1,835.00
Student, Spouse & Children	\$	4,706.00	\$	2,539.00
Dental				
Student	\$	98.00	\$	53.00
Spouse	\$	98.00	\$	53.00