Voluntary

UT Permian Basin Student Health Insurance Plan 2023-2024 Final Premium Rates Blue Cross Blue Shield Voluntary

	Fall Initial Payment		Fall Monthly Payment		Spring/Summer Initial Payment		Spring/Summer Monthly Payment		
	8/15/2023		8/15/2023		1/1/2024		1/1/2024		
		through		through		through		through	
		12/31/2023		12/31/2023		8/14/2024		8/14/2024	
Medical									
Student	\$	732.00	\$	287.00	\$	699.00	\$	287.00	
Spouse	\$	732.00	\$	287.00	\$	699.00	\$	287.00	
Children	\$	1,174.00	\$	460.00	\$	1,129.00	\$	460.00	
Medical (Combined)									
Student	\$	732.00	\$	287.00	\$	699.00	\$	287.00	
Student & Spouse	\$	1,464.00	\$	574.00	\$	1,398.00	\$	574.00	
Student & Children	\$	1,906.00	\$	747.00	\$	1,828.00	\$	747.00	
Student, Spouse & Children	\$	2,638.00	\$	1,034.00	\$	2,527.00	\$	1,034.00	
Dental									
Student	\$	52.00	\$	22.00	\$	47.00	\$	22.00	
Spouse	\$	52.00	\$	22.00	\$	47.00	\$	22.00	
Children		-		-		-		-	
Medical + Dental									
Student Only	\$	784.00	\$	309.00	\$	746.00	\$	309.00	
Spouse Only	\$	784.00	\$	390.00	\$	746.00	\$	309.00	
Children Only	\$	1,174.00	\$	460.00	\$	1,129.00	\$	460.00	
Student & Spouse	\$	1,568.00	\$	618.00	\$	1,492.00	\$	618.00	
Student & Children	\$	1,958.00	\$	769.00	\$	1,875.00	\$	769.00	
Student & Spouse & Children	\$	2,742.00	\$	1,078.00	\$	2,621.00	\$	1,078.00	

Please Note: Open enrollments for the Installment Plan option ends 09/16/2023 for Fall and 02/09/2024 for Spring/Summer.

Please Note: There is an additional \$12 processing fee per installment payment.