

Voluntary

UT San Antonio
 Student Health Insurance Plan
 2023-2024 Final Premium Rates
 Blue Cross Blue Shield
 Voluntary

	Fall		Spring/Summer	
	Initial Payment	Monthly Payment	Initial Payment	Monthly Payment
	8/1/2023 through 12/31/2023	8/1/2023 through 12/31/2023	1/1/2024 through 7/31/2024	1/1/2024 through 7/31/2024
Medical				
Student	\$ 863.00	\$ 287.00	\$ 566.00	\$ 287.00
Spouse	\$ 863.00	\$ 287.00	\$ 566.00	\$ 287.00
Children	\$ 1,385.00	\$ 460.00	\$ 910.00	\$ 460.00
Medical (Combined)				
Student	\$ 863.00	\$ 287.00	\$ 566.00	\$ 287.00
Student & Spouse	\$ 1,726.00	\$ 574.00	\$ 1,132.00	\$ 574.00
Student & Children	\$ 2,248.00	\$ 747.00	\$ 1,476.00	\$ 747.00
Student, Spouse & Children	\$ 3,111.00	\$ 1,034.00	\$ 2,042.00	\$ 1,034.00
Dental				
Student	\$ 62.00	\$ 22.00	\$ 37.00	\$ 22.00
Spouse	\$ 62.00	\$ 22.00	\$ 37.00	\$ 22.00
Children	-	-	-	-
Medical + Dental				
Student Only	\$ 925.00	\$ 309.00	\$ 603.00	\$ 309.00
Spouse Only	\$ 925.00	\$ 309.00	\$ 603.00	\$ 309.00
Children Only	\$ 1,385.00	\$ 460.00	\$ 910.00	\$ 408.00
Student & Spouse	\$ 1,850.00	\$ 618.00	\$ 1,206.00	\$ 618.00
Student & Children	\$ 2,310.00	\$ 769.00	\$ 1,513.00	\$ 769.00
Student & Spouse & Children	\$ 3,235.00	\$ 1,078.00	\$ 2,116.00	\$ 1,078.00

Please Note: Open enrollments for the Installment Plan option ends 08/31/2023 for Fall and 01/31/2024 for Spring.

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