Western Illinois University Student Health Insurance Plan 2024-2025 Final Premium Rates UHC

	Fall 8/1/2024		Spring Matriculates		Spring / Summer		Summer Matriculates	
			1/1/2025		2/1/2025		6/1/2025	
	through		through		through		through	
	1/31/2025		7/31/2025		7/31/2025		7/31/2025	
Medical								
Student	\$	1,061.00	\$	1,232.00	\$	1,061.00	\$	355.00
Spouse / Domestic Partner	\$	1,061.00	\$	1,232.00	\$	1,061.00	\$	355.00
Child, 2x Max	\$	1,061.00	\$	1,232.00	\$	1,061.00	\$	355.00