

## 2006-2007 Student Insurance Rates

|                      |             |          |
|----------------------|-------------|----------|
| <b>Undergraduate</b> | <b>SHIP</b> |          |
|                      | Plan        | Rate     |
|                      | Single      | \$85.00  |
|                      | Spouse      | \$220.00 |
|                      | Child       | \$438.00 |
|                      | Family      | \$489.00 |

|                 |             |          |                   |          |
|-----------------|-------------|----------|-------------------|----------|
| <b>Graduate</b> | <b>SHIP</b> |          | <b>UIGRADCare</b> |          |
|                 | Plan        | Rate     | Plan              | Rate     |
|                 | Single      | \$85.00  | Single            | \$228.00 |
|                 | Spouse      | \$220.00 | Spouse            | \$307.00 |
|                 | Child       | \$438.00 | Child             | \$414.00 |
|                 | Family      | \$489.00 | Family            | \$543.00 |

|                          |             |          |              |                 |
|--------------------------|-------------|----------|--------------|-----------------|
| <b>Employed Graduate</b> | <b>SHIP</b> |          | <b>UI</b>    | <b>Employee</b> |
|                          | Plan        | Rate     | Contribution | Cost            |
|                          | Single      | \$85.00  | \$76.50      | \$8.50          |
|                          | Spouse      | \$220.00 | \$154.00     | \$66.00         |
|                          | Child       | \$438.00 | \$306.60     | \$131.40        |
|                          | Family      | \$489.00 | \$342.30     | \$146.70        |

|                   |          |              |                 |
|-------------------|----------|--------------|-----------------|
| <b>UIGRADCare</b> |          | <b>UI</b>    | <b>Employee</b> |
| Plan              | Rate     | Contribution | Cost            |
| Single            | \$228.00 | \$205.20     | \$22.80         |
| Spouse            | \$307.00 | \$214.90     | \$92.10         |
| Child             | \$414.00 | \$289.80     | \$124.20        |
| Family            | \$544.00 | \$380.10     | \$162.90        |

|               |          |              |                 |
|---------------|----------|--------------|-----------------|
| <b>Dental</b> |          | <b>UI</b>    | <b>Employee</b> |
| Plan          | Rate     | Contribution | Cost            |
| Single        | \$21.00  | \$17.85      | \$3.15          |
| Spouse        | \$20.00  | \$14.00      | \$6.00          |
| Child         | \$100.00 | \$70.00      | \$30.00         |
| Family        | \$60.00  | \$42.00      | \$18.00         |