



**BALL STATE
UNIVERSITY**

Active Employee Premiums

Effective 01/01/2026

2026 HEALTH PLAN PREMIUMS (Medical + Prescription) TF = Tobacco Free	HSA Qualified Health Plan		PPO Health Plan	
	Biweekly			
	10 month (18 pays)	12 month (26 pays)	10 month (18 pays)	12 month (26 pays)
Single TF Discount	\$56.75	\$39.29	\$97.45	\$67.46
Single Full Rate	\$106.75	\$73.91	\$147.45	\$102.08
EE+CH TF Discount	\$107.84	\$74.66	\$185.18	\$128.20
EE+CH Full Rate	\$157.84	\$109.27	\$235.18	\$162.82
Family TF Discount	\$147.35	\$102.01	\$252.99	\$175.15
Family Full Rate	\$197.35	\$136.62	\$302.99	\$209.76

2026 DENTAL PLAN PREMIUMS	Biweekly	
	10 month (18 pays)	12 month (26 pays)
Single	\$8.87	\$6.14
EE+CH	\$16.84	\$11.66
Family	\$22.98	\$15.91

EE+CH = Employee Plus Child(ren)