



BALL STATE UNIVERSITY

Active Employee Premiums

Effective 01/01/2027

2027 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	\$84.76	\$58.68	\$125.45	\$86.85
Single Full Rate	\$134.76	\$93.29	\$175.45	\$121.46
EE+CH TF Discount	\$170.51	\$118.04	\$247.85	\$171.59
EE+CH Full Rate	\$220.51	\$152.66	\$297.85	\$206.20
Family TF Discount	\$222.68	\$154.16	\$328.33	\$227.30
Family Full Rate	\$272.68	\$188.78	\$378.33	\$261.92

2027 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)