



**BALL STATE
UNIVERSITY**

Active Employee Premiums

Effective 01/01/2026

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)