

TO: Administrative Council Members  
 FROM: Sheri Kershner  
 DATE: 12/14/2020  
 RE: Current 2020-21 and Estimated 2021-22 Fringe Rates

| <u>Fringe Description</u>      | <b>Budgeted<br/>2020-21</b> | <b>Estimated<br/>2021-22</b> |
|--------------------------------|-----------------------------|------------------------------|
| ERS (810)                      | 15.00%                      | 15.00%                       |
| TRS (820)                      | 9.75%                       | 9.75%                        |
| Social Security/Medicare (830) | 7.65%                       | 7.65%                        |
| Unemployment (850)             | 0.40%                       | 0.70%                        |
| Worker's Comp (860)            | 1.5%                        | 1.5%                         |
| Compensated Absences (844)     | 0.8%                        | 0.8%                         |
| Retiree Health Insurance (841) | \$5,810/Per Salaried Person | \$6,000/Per Salaried Person  |

|                                      | <b>Budgeted<br/>2020-21<br/>Annual</b> | <b>Actual<br/>2020-21<br/>Annual</b> | (Revised 12/14/20)<br><b>Revised Estimated<br/>2021-22<br/>Annual</b> |
|--------------------------------------|--|--------------------------------------|---|
| <u>Health/Dental Insurance (840)</u> |  |                                      |   |
| COMBO - Individual                   | \$ 7,400                               | \$ 7,299                             | \$ 7,645  |
| COMBO - Family                       | \$ 17,550                              | \$ 17,346                            | \$ 18,170   |
| Mid-Level/Non Rep - Individual       | \$ 7,650                               | \$ 7,550                             | \$ 7,910  |
| Mid-Level/Non Rep - Family           | \$ 18,550                              | \$ 18,367                            | \$ 19,240   |
| OCMBFT/Term - Individual             | \$ 7,650                               | \$ 7,550                             | \$ 7,910  |
| OCMBFT/Term - Family                 | \$ 18,550                              | \$ 18,337                            | \$ 19,240   |
| Dental - Individual                  | \$ 225                                 | \$ 225                               | \$ 225  |
| Dental - Family                      | \$ 275                                 | \$ 275                               | \$ 275  |