

Fringe Benefit Rates for Fiscal Year 2003

effective with July 5, 2002 paycheck (also reflects changed due to calendar year end)

Fringe Benefit Deduction codes on checks	Account (object code)	EMPLOYER cost % of gross	EMPLOYEE cost % of gross or amount	Comments
Social Security tax OASDI MED/ER	11910 11910	6.2% 1.45%	06.2% 1.45%	Maximum base wage for OASDI in calendar year 2002 is \$84,900.00. There is no Medicare earnings maximum.
Regents Retirement TSA__	11830	8.5%	5.50%	Unclassified employees are eligible after one year of employment.
Regents Retirement PRYRSV	11840	1.67%	----	Unclassified employees are subject to this assessment after one year of employment. This is an employer cost.
Regents Retirement GTLxxx	11850	N/A	Employee cost is referred to as Taxable Group Term Life See check calculation notes	This employer cost for Death and Disability was been suspended by the state from 7/1/02-12/31/02. It will be reactivated in CY2003. The employee cost is based on a formula related to annual base rate and age.
KPERS RETREG	11810	4.38%	4.00%	Classified employees are eligible after one year of employment.
KPERS (D&D) GTLREG	11810	0.60%	See check calculation notes	The employee cost is based on a formula related to annual base rate and age.
Ks Police & Firemen RETP&F	11880	6.48%	7.00%	Police and Firemen are eligible immediately upon employment.
State Leave Payment Reserve Fund STLEAV	11760	0.40%	----	All employees are subject to this assessment which funds retiree sick and vacation leave pay outs. This is an

				employer cost.
Workers' Compensation Insurance WCI	11970	0.679%	-----	All employees are covered by Workers Compensation. This is the employer cost for this coverage.
Unemployment Compensation tax UCI	11980	0.06%	----	Non student employees are covered by Unemployment Compensation. This is the employer cost for this coverage.
Kan-Elect HCARE DCARE	11990 11990	5.74% 5.74%	\$\$ chosen by employee	Employee contributions have a 5.74% administrative fee charged to the employer.
Parking PPKADR	11780	7.65%	\$\$ chosen by employee	Employee contributions have a 7.65% administration fee charged to the employer

GROUP HEALTH INSURANCE (Employer cost only.) See the [Human Resouce web site](#) for Employee rates.

Semi Monthly Rates	Account (object code)	Medical	Dental	Drug	Total
Full Time - Single	1950	\$108.93	\$9.24	\$28.96	\$147.13
Part Time - Single	1950	\$87.11	\$6.82	\$23.16	\$117.09
Full Time - Dependant	1750	\$50.68	\$3.92	\$13.47	\$68.07
Part Time - Dependant	1750	\$39.83	\$3.47	\$10.59	\$53.89