## FY 2024 Fringe Benefits Calculation

## Effective: September 1, 2023 - August 31, 2024

To determine the complete annual cost of employee fringe: calculate the total monthly fringe benefits, then add the university's portion of health insurance, and multiply the sum by 12.

Fringe Benefits Calculation				
TRS (Teacher Retirement System)	Benefits-Eligible Employees Only – Multiply monthly salary & state longevity by 8.25%			
ORP (Optional Retirement	Benefits-Eligible Employees Only –			
Program)	Multiply monthly salary & state longevity by 6.6%			
1% Payroll Charge (ERS)	Benefits-Eligible Employees Only –			
	Multiply monthly salary (only) by 1%			
FICA/Medicare	Multiply monthly salary & state longevity by 7.65%			
Benefit Surcharge	Multiply monthly salary & state longevity by 1.25%   ✓			
TOTAL FRINGE BENEFITS	Add each applicable benefit to get the monthly total			

ORP Grandfathered ORP recipients (in ORP before 9/1/95) receive 8.5%.

Benefits Surcharge Includes Workers' Comp and Unemployment and is used for vacation payouts.

## **Health Insurance Cost**

## Full-Time Employees (75-100% FTE)

Note: These premiums are paid monthly and include a basic term life rate of \$2.22 paid by employer.

	Premium*	TXST Pays	Employee Pays			
HealthSelect of Texas®						
You Only	\$ 624.82	\$ 624.82	\$ 0.00			
You + Spouse	1,340.82	982.82	358.00			
You + Children	1,104.22	864.52	239.70			
You + Family	1,820.22	1,222.52	597.70			
Consumer Directed HealthSelect <sup>SM**</sup>						
You Only	624.82	\$ 624.82	\$ 0.00			
You + Spouse	1,305.02	982.82	322.20			
You + Children	1,080.24	864.52	215.72			
You + Family	1,760.44	1,222.52	537.92			

**Part-Time (50-74% FTE) & Graduate Student Employees** Note: These premiums are paid monthly and do include a basic term life rate of \$2.22 split evenly between employee and employer.

	Premium*	TXST Pays	Employee Pays			
HealthSelect of Texas®						
You Only	\$ 624.82	\$ 312.41	\$ 312.41			
You + Spouse	1,340.82	491.41	849.41			
You + Children	1,104.22	432.26	671.96			
You + Family	1,820.22	611.26	1,208.96			
Consumer Directed HealthSelect <sup>SM**</sup>						
You Only	\$ 624.82	\$ 312.41	\$ 312.41			
You + Spouse	1,305.02	491.41	813.61			
You + Children	1,080.24	432.26	647.98			
You + Family	1,760.44	611.26	1,149.18			