

**KENYON COLLEGE**  
**FRINGE BENEFITS SCHEDULE - 2023/24**

<u>FRINGE BENEFIT</u>	<u>College Pays</u>	<u>Employee Pays</u>
<b>FIICA:</b>	<u>Effective 01/01/23</u> 7.65% as follows:	<u>Effective 01/01/23</u> 7.65% as follows:
Social Security (OASDI)	6.20% x Kenyon salary on maximum base of \$160,200 for a \$9,932.40 maximum	6.20% x Kenyon salary on maximum base of \$160,200 for a \$9,932.40 maximum
MEDICARE	1.45% x Kenyon salary	1.45% x Total salary
(HI)	(no maximum)	add'l 0.9% for wages over \$200,000 (no maximum)
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<b>TIAA/CREF</b>	<u>Effective 01/01/23</u> 9.5% x Kenyon salary	<u>Effective 01/01/23</u> 5% x Total salary
Maximum College contribution based on salary of \$330,000		
Maximum of \$66,000 employee and College combined contribution. (Catch-up contributions are not included in this maximum.)		
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<b>TOTAL DISABILITY STANDARD INSURANCE</b>	<u>Effective 01/01/17</u> .323% of annual salary	<u>Effective 01/01/17</u> -0-
Maximum \$200,000		
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<b>STANDARD LIFE INSURANCE</b>	<u>Effective 01/01/17</u> \$.091 per month x full-time Kenyon salary	<u>Effective 01/01/17</u> -0-
(\$.075 Life & \$.016 AD&D) 1,000		
Maximum of \$250,000		
Benefit drops to 65% at age 65; 45% at age 70; 30% at age 75; 20% at age 80.		
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<b>STANDARD LIFE INSURANCE VOLUNTARY PLAN</b>	<u>Effective 01/01/17</u> \$2.00/month \$24.00/year	<u>Effective 01/01/17</u> cost varies by employee
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<b>EMERITI POST RETIREMENT HEALTH CARE</b>	<u>Effective 07/01/22</u> \$2,064 per year	<u>Effective 07/01/22</u> Voluntary
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<b>HEALTH INS. - PREMIUM PLAN</b>	<u>Effective 07/01/23</u> <u>Employer</u>	<u>Effective 07/01/23</u> <u>Employee</u>
<b>Family Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$2,315    87%    \$27,780	\$346    13%    \$4,152
\$40,000 - \$59,999	\$2,222    84%    \$26,664	\$439    16%    \$5,268
\$60,000 - \$79,999	\$2,155    81%    \$25,860	\$506    19%    \$6,072
\$80,000 - \$109,999	\$1,996    75%    \$23,952	\$665    25%    \$7,980
\$110,000 - \$139,999	\$1,810    68%    \$21,720	\$852    32%    \$10,224
\$140,000 +	\$1,597    60%    \$19,164	\$1,064    40%    \$12,768
<b>Single + 1 Coverage:</b>		
≤ \$39,999	\$1,713    87%    \$20,556	\$256    13%    \$3,072
\$40,000 - \$59,999	\$1,644    84%    \$19,728	\$325    16%    \$3,900
\$60,000 - \$79,999	\$1,595    81%    \$19,140	\$374    19%    \$4,488
\$80,000 - \$109,999	\$1,476    75%    \$17,712	\$492    25%    \$5,904
\$110,000 - \$139,999	\$1,339    68%    \$16,068	\$630    32%    \$7,560
\$140,000 +	\$1,181    60%    \$14,172	\$787    40%    \$9,444
<b>Single Coverage:</b>		
≤ \$39,999	\$779    87%    \$9,336	\$116    13%    \$1,392
\$40,000 - \$59,999	\$747    84%    \$8,964	\$148    16%    \$1,776
\$60,000 - \$79,999	\$725    81%    \$8,700	\$170    19%    \$2,040
\$80,000 - \$109,999	\$671    75%    \$8,052	\$224    25%    \$2,688
\$110,000 - \$139,999	\$608    68%    \$7,296	\$286    32%    \$3,432
\$140,000 +	\$537    60%    \$6,444	\$358    40%    \$4,296
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<b>HEALTH INS. - BASIC PLAN</b>	<u>Effective 07/01/23</u> <u>Employer</u>	<u>Effective 07/01/23</u> <u>Employee</u>
<b>Family Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$1,738    90%    \$20,856	\$182    10%    \$1,812
\$40,000 - \$59,999	\$1,700    88%    \$20,400	\$221    12%    \$2,652
\$60,000 - \$79,999	\$1,594    83%    \$19,128	\$326    17%    \$3,912
\$80,000 - \$109,999	\$1,440    75%    \$17,280	\$480    25%    \$5,760
\$110,000 - \$139,999	\$1,325    69%    \$15,900	\$595    31%    \$7,140
\$140,000 +	\$1,210    63%    \$14,520	\$711    37%    \$8,532
<b>Single + 1 Coverage:</b>		
≤ \$39,999	\$1,264    90%    \$15,168	\$133    10%    \$1,596
\$40,000 - \$59,999	\$1,237    88%    \$14,844	\$161    12%    \$1,932
\$60,000 - \$79,999	\$1,160    83%    \$13,920	\$238    17%    \$2,856
\$80,000 - \$109,999	\$1,048    75%    \$12,576	\$349    25%    \$4,188
\$110,000 - \$139,999	\$964    69%    \$11,568	\$433    31%    \$5,196
\$140,000 +	\$880    63%    \$10,560	\$517    37%    \$6,204
<b>Single Coverage:</b>		
≤ \$39,999	\$576    90%    \$6,912	\$60    10%    \$720
\$40,000 - \$59,999	\$564    88%    \$6,768	\$73    12%    \$876
\$60,000 - \$79,999	\$529    83%    \$6,348	\$108    17%    \$1,296
\$80,000 - \$109,999	\$478    75%    \$5,736	\$159    25%    \$1,908
\$110,000 - \$139,999	\$439    69%    \$5,268	\$197    31%    \$2,364
\$140,000 +	\$401    63%    \$4,812	\$236    37%    \$2,832
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<b>DENTAL INSURANCE</b> (Delta Dental)	<u>Effective 07/01/23</u> <u>Employer</u>	<u>Effective 07/01/23</u> <u>Employee</u>
<b>Family Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$53    50%    \$636	\$53    50%    \$636
<b>Single + 1 Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$38    50%    \$456	\$38    50%    \$456
<b>Single Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$16    50%    \$192	\$16    50%    \$192
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<b>VISION INSURANCE</b> (VSP)	<u>Effective 07/01/23</u> <u>Employer</u>	<u>Effective 07/01/23</u> <u>Employee</u>
<b>Family Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$16.50    50%    \$198.00	\$16.50    50%    \$198.00
<b>Single + 1 Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$10.00    50%    \$120.00	\$10.00    50%    \$120.00
<b>Single Coverage:</b>	<u>Monthly</u> <u>Annual</u>	<u>Monthly</u> <u>Annual</u>
≤ \$39,999	\$5.50    50%    \$66.00	\$5.50    50%    \$66.00
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**Note:** Life Insurance: For those on LWP for half year, life insurance value will be based on annualized salary.  
Health Insurance: For those on LWP for half year, health premiums will be based on annualized salary.