



State of Nevada
Public Employees' Benefits Program
901 S. Stewart Street, Suite 1001
Carson City, NV 89701

Remittance Advice Fiscal Year 2022

Please indicate the amounts paid for each group for which you are paying.

State agencies, boards and commissions, please indicate amounts paid toward AEGIS and REGI assessments.

Check Number: _____

Date: _____

Group Number	Group Name	Number of Employees	Actual Total Payroll Amount	Premium Month	Employee Premium	ARRA COBRA Subsidy	AEGIS * Assessment	REGI ** Assessment	Total
									\$
									\$
									\$
									\$
									\$
				Total	\$	\$	\$	\$	\$

Total amount of check

The AEGIS and REGI assessments are for State agencies, boards and commissions only (groups 100-199). These assessments should be paid monthly by the 25th. To ensure payment arrives by the 25th of each month, you may pay estimated amounts. If paying estimated amounts, please ensure a reconciliation is completed quarterly. Please indicate the month for which you are paying your assessments.

Past AEGIS and REGI Rates (groups 100-199 only)

Period Start Date	Period End Date	AEGIS * (per employee per month)	REGI ** (percent of actual payroll)
1-Jul-10	30-Jun-11	\$680.84	0.658%
1-Jul-11	30-Jun-12	\$644.81	2.134%
1-Jul-12	30-Jun-13	\$733.64	2.690%
1-Jul-13	30-Jun-13	\$688.37	2.406%
1-Jul-14	30-Jun-15	\$695.35	2.663%
1-Jul-15	30-Jun-16	\$701.73	2.126%
1-Jul-16	30-Jun-17	\$699.25	2.357%
1-Jul-17	30-Jun-18	\$743.00	2.347%
1-Jul-18	30-Jun-19	\$740.92	2.340%
1-Jul-19	30-Jun-20	\$760.79	2.340%
1-Jul-20	30-Jun-21	\$783.30	2.360%
1-Jul-21	30-Jun-22	\$727.00	2.170%

Include in your AEGIS employee count all employees, even those in their initial hire period (first month).

In your employee count, **exclude** vacant positions, temporary or part time positions not eligible for health benefits and those participants who have declined coverage.

To calculate your REGI assessment - include salaries, sick leave, annual leave and other leave paid out (GL Codes 51xx and 56xx).

Actual payroll does not include terminal leave (annual or sick) payouts.

Please include a copy of the monthly payroll records/reports with your REGI Assessment Payment. This documentation is required as of July 2020.

PEBP staff only

Doc Number: CR 950

Date of deposit: _____

Initials: _____