State of Nevada
Public Employees' Benefits Program
3427 Goni Road, Suite 109
Carson City, NV 89706

Remittance Advice
Fiscal Year 2024

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 reconcilliation 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-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%
1-Jul-22	30-Jun-23	$755.00	2.180%
1-Jul-23	30-Jun-24	$730.00	3.110%

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

staff only

Doc Number: CR 950 Date of deposit: _____ Initials: _____