Additional Benefit Information

Twelve (12) Paid Holidays (Eleven {11} Federal Holidays Plus One (1) Birthday Holiday.

Longevity
ONLY FOR EMPLOYEES HIRED BEFORE
9/1/2018.

Direct Deposit

Any Financial Institution available.

457 Plan (VOYA), Guardían Life, Cafetería 125

Long Term Disability

Worker's Compensation and Unemployment Insurance

Flexible Spending Account Medical and Dependent

The SNRHA pays fifty percent (50%) of YMCA (Employee Wellness Program) monthly dues. Employer portion is considered a fringe benefit and is taxed.



Contact Information

Human Resources

5390 East Flamingo Road Las Vegas, Nevada 89122 Phone: (702) 477-3170 Fax: (702) 922-1690

Benefits Summary

New & Prospective Employees

Effective Oct. 1, 2020



SNRHA is a choice agency with Public Employee Retirement System (PERS) therefore, you have 2 options, #1 100% Employer paid (29.25% of annual salary) or #2 50%/50% Employee/Employer paid (30.5% of annual salary) employee receives a 15.25% increases and 15.25% deduction for tracking purposes; Employee is vested after five (5) years of service. No Social Security deduction; and for Medicare one point four five percent (1.45%) is deducted for employee portion.

Note:

Insurance is effective the first (1st) day of the month following sixty (60) days of employment with SNRHA except for Key Employees. Key Employees probationary period is waived.

*A life insurance policy, an amount depending on the employee's position is also provided at no cost to the employee. Supplemental Life Insurance is optional.

Regular Employees \$20,000

Supervisors \$40,000

Dept. Heads/Directors \$60,000

Deputy/Exec. Director \$110,000

A comprehensive medical package with Health Plan of Nevada is provided to you and your dependents also your dental and vision plan coverage is provided by the United Healthcare Services.

Sick Leave

Four point zero (4.0) hours bi-weekly.
One Hundred and four (104) hours yearly.

Vacation Leave (See Chart Below)

	Approximate Rate of	<u>Actual</u> Number
Years of Service	Accrual Per	of Work
TO CA	Pay Period	<u>Days</u>
	(hours)	Earned
In the first two (2) ye <mark>ars of</mark> regular employment.	3.08	8
Beginning the first day of the third (3) year of regular employment, and through the tenth (10 th) year of employment.	4.62	12
Beginning the first day of	The state of	
eleventh (11) year of regular	5.00	13
employment, employee will	5.39	14
earn one (1) additional day	5.77	15
of Annual Leave per each year worked, up to a	6.16	16
maximum of twenty (20) days		
a year.		

Bereavement Leave

Three (3) days administrative time for local services.
Four (4) days administrative time for out of town services.

The Southern Nevada Regional Housing Authority pays the total premium for employees (HMO Plan) for medical, dental and vision and fifty percent (50%) of the premium for dependent coverage.

HPN/Medical HMO

Covered	Employee Contribution	SNRHA Premium
Employee	\$0.00	\$592.65
Employee + 1	\$136.77	\$889.13
Emp. + Fam.	\$246.18	\$1126.04

HPN/Medical POS

Employee Contribution	SNRHA <u>Premium</u>
\$42.95	\$635.60
\$222.67	\$960.56
\$349.26	\$1234.84
	<u>Contribution</u> \$42.95 \$222.67

United Health Care Dental

<u>Covered</u>	Employee Contribution	SNRHA Premium
Employee	\$0.00	\$40.14
Employee + 1	\$9.17	\$60.01
Emp. + Fam.	\$24.36	\$92.92

United Health Care Vision

Covered	Employee Contribution	SNRHA <u>Premíum</u>
Employee	\$0.00	\$5.91
Employee + 1	\$1.12	\$8.34
Emp. + Fam.	\$2.95	\$12.30