



CITY OF EVANS PART-TIME REGULAR BENEFITS SUMMARY

Effective January 1, 2026-December 31, 2026



This summary is a brief outline of the benefits provided for City of Evans employees. Please see the certificate of coverage for more details.

| Medical Insurance | | This summary does not include all services or charges | |
|---|--------------------------|---|---|
| CEBT | Network: United & Kaiser | HD 4000 | PPO Select 1 |
| Annual Deductible | | \$4,000 individual \$8,000* family Embedded *Must be met by 2 or more family members | Tier 1 \$1,500; Tier 2 \$3,000 Individual Tier 1 \$3,000; Tier 2 \$6,000 family Embedded *Must be met by 2 or more family members |
| Coinsurance (In network/Out of network) | | 20% In *40% Out (*subject to Usual and Customary) | Tier 1 20% and Tier 2 50% |
| Maximum Out-of-Pocket (In network /Out of network) (includes deductible) | | \$5,000 (In) \$10,000 (Out) individual \$10,000 (In) \$20,000 (Out) family Embedded | Tier 1 \$4,000 (In); Tier 2 \$8,000 (Out) individual Tier 1 \$8,000 (In); Tier 2 \$16,000 (Out) family |
| Office Visits Physician Specialist OB/GYN Urgent Care | | Plan Pays 80% after deductible Plan Pays 80% after deductible Plan Pays 80% after deductible Plan Pays 80% after deductible | PCP: Tier 1 \$0 copay Tier 2 Ded + 50% to OOP Max Spec: Tier 1 \$100 copay; Tier 2 Ded + 50% to OOP Max \$0 copay per visit Covered 100% |
| Emergency Care | | Plan pays 80% after deductible | Tier 1 & 2 Deductible + 20% to OOP Max |
| Preventive Care | | 100% covered | 100% covered |
| Inpatient Hospitalization | | Plan pays 80% after deductible | Tier 1 Deductible + 20% to OOP Max Tier 2 Deductible + 50% to OOP Max |
| Outpatient Surgery | | Plan pays 80% after deductible | Tier 1 Deductible + 20% to OOP Max Tier 2 Deductible + 50% to OOP Max |
| Advanced Imaging | | Plan pays 80% after deductible | \$500 copay Tier 1 & 2 |
| X-Ray | | Plan pays 80% after deductible | \$25 copay outpatient setting Tier 1 & 2 |
| Lab | | Plan pays 80% after deductible | \$25 copay outpatient setting Tier 1 & 2 |
| Chiropractic Care | | Plan pays 80% after deductible (20 visit limit per year; subject to "reasonable & customary" guidelines) | \$45 copay per visit (20 visit limit per year; subject to "reasonable & customary" guidelines) |
| Prescription Drug Coverage Tier 1/ Tier 2/ Tier 3 | | Subject to deductible; Applies up to out-of-pocket max. Generic \$20 Preferred \$40 Non-preferred \$60 (Mail order 2X for 90-day supply: 40/\$80/\$120) | Generic \$20 Preferred \$40 Non-preferred \$60 (Mail order 2X for 90-day supply: \$40/\$80/\$120) |

| HDHP 4000 Rates | | | | |
|--|--------------------|--|--------------------------|--------------------------|
| Employee Per Pay Period Contributions | | Employee Pay Period Contribution based on average hours worked per week. | | |
| | Total Monthly Rate | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| Employee Only | \$782.00 | \$65.30/pp | \$130.60/pp | \$326.50/pp |
| Employee + Spouse | \$1,609.00 | \$243.26/pp | \$365.57/pp | \$732.48/pp |
| Employee + Child(ren) | \$1,462.00 | \$210.01/pp | \$322.34/pp | \$659.34/pp |
| Employee + Family | \$2,288.00 | \$397.49/pp | \$565.66/pp | \$1,070.16/pp |
| PPO Select 1 Rates | | | | |
| Employee Per Pay Period Contributions | | Employee Pay Period Contribution based on average hours worked per week. | | |
| | Total Monthly Rate | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| Employee Only | \$944.00 | \$228.31/pp | \$300.16/pp | \$515.73/pp |
| Employee + Spouse | \$1,949.00 | \$594.62/pp | \$729.71/pp | \$1,134.07/pp |
| Employee + Child(ren) | \$1,767.00 | \$526.90/pp | \$650.35/pp | \$1,020.72/pp |
| Employee + Family | \$2,771.00 | \$895.85/pp | \$1,081.64/pp | \$1,639.03/pp |
| Kaiser HMO 50 Rates | | | | |
| Employee Per Pay Period Contributions | | Employee Pay Period Contribution based on average hours worked per week. | | |
| | Total Monthly Rate | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| Employee Only | \$1,031.00 | \$224.96/pp | \$296.64/pp | \$511.65/pp |
| Employee + Spouse | \$2,132.00 | \$586.46/pp | \$721.18/pp | \$1,125.36/pp |
| Employee + Child(ren) | \$1,932.00 | \$519.48/pp | \$642.87/pp | \$1,013.05/pp |
| Employee + Family | \$3,033.00 | \$886.51/pp | \$1,072.34/pp | \$1,629.84/pp |
| Eligibility: Coverage commences the first of the month following employment. | | | | |

CEBT Health & Wellness Centers

For those enrolled in CEBT medical insurance plan, CEBT, in partnership with Marathon Health, operates six, HIPAA compliant Health & Wellness Centers, including two within northern Colorado (Greeley and Loveland). The Health Centers offer both in person and virtual visits and provide a wide range of non-emergency medical services, including, primary care services for eligible employees, spouses, and their dependents (age two and older). In addition to a variety of acute care, the Center offers some pharmacy and lab services and provides support for overall healthy well-being, including tools and resources to proactively engage in healthy living. The Center offers more immediate access to medical appointments, with less wait time, and longer appointment durations, than traditional primary care professionals. Each center offers personalized care with qualified, compassionate professionals that strive for high-level customer satisfaction. Health Coaching, preventative care (annual physical), including applicable lab services done in house are **free** to all plan participants. Diagnostic/acute care visits are **free** to PPO and Kaiser plan participants and \$45 per visit for HDHP participants. Diagnostic/acute care visits that are done virtually are **free** to all plan participants enrolled in a CEBT medical plan.

Teladoc - CEBT

Teladoc is a virtual telemedicine benefit that provides employees, and their families enrolled in a CEBT PPO and HDHP plan, 24-hour, 7 day a week, convenient access to quality US Board-certified doctors. Teladoc offers treatment and medical advice for minor illnesses, without having to visit your doctor's office, and all from the convenience of your home, while at work or on vacation. This service provides an alternative for non-emergencies, versus urgent care or ER visit, when you need care right away. Employees have access through the convenience of a phone call, video conference or a mobile app for medical consultation without an appointment. Teladoc visits are covered at 100% for those enrolled in the HDHP and PPO Select 1 plans.

Healthcare Bluebook

Healthcare Bluebook is a confidential healthcare benefit to help employees shop for healthcare and medical procedures, compare facilities, and ultimately save money on services. With free via online and mobile application access, the service provides cost and quality ratings to the most common medical services and procedures within designated areas. Get paid to save for the same procedure, at different facilities, with different prices.

Lantern (Formally SurgeryPlus)

Lantern is a supplemental benefit for pre-planned surgeries, where a Care Advocate will help employees plan and pay for certain covered medical procedures. Lantern will help participants find a board-certified surgeon with a history of quality care. They will assist with initial consultation, and appointments, make travel arrangements to their surgeon, negotiate costs of surgery, and even assist with the coordination of payments. This benefit is available to those enrolled in CEBT PPO or HDHP medical plans. When Lantern is used, CEBT will waive participant out-of-pocket costs and/or deductibles on PPO plans; HDHP plans will require a minimum amount towards your deductible to be met by the end of the year. If that amount is met, the surgery cost is completely paid for. If you haven't reached that amount, Lantern will collect up to that minimum amount at the end of the year.

Omada

Omada is a virtual care program that combines data-powered human coaching, connected devices, peer support and tailored curriculum to help members achieve their health goals and make sustainable lifestyle changes. The digital care solution offers four programs that focus on pre-diabetes (prevention), diabetes, hypertension, & musculoskeletal issues. This benefit is available to those enrolled in CEBT PPO or HDHP medical plans

UMR Cancer Resource Services & Maternity Care Programs

Cancer Resource Services (CRS): A program designed for personal support following a cancer diagnosis. Cancer Resource Services (CRS) will provide guidance, direction, and support through tenured oncology nurses as well as access to quality Cancer Centers of Excellence (COE). This benefit is available to those enrolled in CEBT PPO or HDHP medical plans.

Maternity Care: Get the support you need when considering having a baby, or you are already expecting. UMR Maternity CARE can explain how to reduce your risk of complications and prepare you to have a successful, full-term pregnancy and a healthy baby. This benefit is available to those enrolled in CEBT PPO or HDHP medical plans.

Modern Health

Modern Health is a comprehensive and personalized mental health care platform offering self-guided, community-based, and one-on-one mental health support. With this new partnership, CEBT will be broadening its mental health network by adding 950 additional mental health providers for CEBT members to access. Modern Health's network of clinical therapists supports a variety of mental health needs, such as depression, anxiety, substance use disorders and trauma. With an average wait time of less than 1 day for coaching or therapy appointments, Modern Health's adaptable services will assist members wherever they are in their mental health journey by asking how they want to receive care and guiding them to appropriate care options that meet their needs. This benefit will include 8 free therapy sessions and 8 free coaching sessions per year as well as unlimited access to guided meditations, digital programs, and community sessions.

| Dental Insurance | | This summary does not include all services or charges | | |
|--|--------------------|---|--------------------------|--------------------------|
| CEBT-Delta Dental-Plan A | | | | |
| Annual Deductible | | \$50 individual / \$150 family | | |
| Preventive Services | | 100% Covered | | |
| Basic Services | | Deductible applies: Covered 80% in-network/out of network | | |
| Major Services | | Deductible applies: Covered 50% in-network/out of network | | |
| Right Start 4 Kids | | Program for kids - all services are covered 100% up to age 13. There is no co-insurance for the following: diagnostic, preventive, basic, and major services. No deductibles, no copays, and no cost share up to the annual maximum. This program requires in-network Dentists. | | |
| Prevention First | | Preventive care visits and diagnostic visits do NOT count towards the annual maximum benefit; this means you will have additional money left to use towards your annual maximum for other types of services – this benefit extends your dollars. | | |
| Orthodontia | | \$ 2,000 <u>lifetime maximum</u> per individual (orthodontia services are covered at 50% up to a cap amount of \$2,000), ortho LIFETIME max is separate from the regular annual max (not combined) Covers employee, spouse, and children up to age 26. | | |
| Calendar Year Annual Maximum Benefit | | \$ 2,000 per individual | | |
| | | Employee Pay Period Contribution based on average hours worked per week. | | |
| Employee Per Pay Period Contributions | Total Monthly Rate | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| Employee Only | \$44.00 | \$1.57/pp | \$3.14/pp | \$7.85/pp |
| Employee + Spouse | \$90.00 | \$15.73/pp | \$17.58/pp | \$23.10/pp |
| Employee + Child(ren) | \$112.00 | \$19.91/pp | \$22.16/pp | \$28.91/pp |
| Employee + Family | \$151.00 | \$28.24/pp | \$31.10/pp | \$39.69/pp |
| Eligibility: Coverage commences the first of the month following employment. | | | | |

| Vision Insurance | | This summary does not include all services or charges | | | |
|---|--|--|--------------------------|--------------------------|--|
| EyeMed | Exam co-pay \$0 | | | | |
| | Materials co-pay \$25 | | | | |
| | Every 12 months Exam and lenses or contacts | | | | |
| | Every 24 months Frames | | | | |
| | Plan benefits are subject to maximum allowances. | | | | |
| | | Employee Pay Period Contribution based on average hours worked per week. | | | |
| Employee Per Pay Period Contributions | Total Monthly Rate | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week | |
| Employee Only | \$6.48 | \$0.65/pp | \$1.30/pp | \$3.24/pp | |
| Employee + Spouse | \$12.31 | \$6.48/pp | \$7.13/pp | \$9.07/pp | |
| Employee + Child(ren) | \$12.96 | \$7.13/pp | \$7.78/pp | \$9.72/pp | |
| Employee + Family | \$19.05 | \$13.22/pp | \$13.87/pp | \$15.81/pp | |
| Vision Insurance is provided through EyeMed Vision. EyeMed offers in-network and out-of-network benefits. Services are subject to benefit limits based on in-network and out-of-network services accordingly. | | | | | |
| Eligibility: Coverage commences the first of the month following employment. | | | | | |


| Long Term Disability (LTD) Non-Sworn | |
|--|--|
| Standard Insurance Company <i>(Excludes Uniformed Police; disability through FPPA)</i> | Elimination Period 90 days Percentage of Income Replaced 60% of salary Maximum Monthly Benefit \$6,000 City of Evans pays for the full cost of this coverage. |

| Short Term Disability (STD) Non-Sworn | |
|--|---|
| Standard Insurance Company <i>(All Other Eligible Employees)</i> | Elimination Period 7 days sickness / 7 days accident Percentage of Income Replaced 60% of salary Maximum Weekly Benefit \$1,500 Maximum benefit period 13 weeks City of Evans pays for the full cost of this coverage. |

| Short Term Disability (STD) Police Sworn | |
|---|---|
| Standard Insurance Company <i>(Uniformed Police Personnel Only)</i> | Elimination Period 14 days sickness / 14 days disability Percentage of Income Replaced 60% of salary Maximum Weekly Benefit \$1,500 Benefit Duration Up to 365 days City of Evans pays for the full cost of this coverage. |

| Life Insurance and AD&D | |
|-----------------------------------|---|
| Standard Insurance Company | Life Insurance and AD&D is provided through Standard Insurance. The City pays for the entire premium of life insurance. Coverage is the greater of \$20,000 or 1X annual salary. Accident Death and Dismemberment (AD&D) insurance is also provided along with the life policy. Eligibility: Coverage commences the first of the month following employment. |

| Supplemental Life, Accident and Cancer Insurance | |
|--|---|
| Colonial Insurance | Optional supplemental Insurance is offered by Colonial Insurance. |

| Employee Assistance Program (EAP) | | | | | | | |
|--|--|-------------------|---------|-----------------|---------|------------------------|---------|
| <p>Two plans are available:</p> <ul style="list-style-type: none">  The Standard (3 Free Visits for all employees)  Triad (6 Free Counseling Session for all employees) (6 Free Life Coaching Sessions for all employees) | <p>Employee Assistance Programs are a free, confidential, short-term counseling and referral system designed to help employees and their families deal with problems of personal or family in nature. Telephone access is available 24 hours a day, seven days a week for support, guidance, and resources. In addition to 24-hour telephone access. The Standard EAP offers up to three in-person counseling sessions per person, per incident, per year at no cost. Triad EAP offers six total free counseling sessions and six life coaching sessions per year.</p> | | | | | | |
| Workers' Compensation | | | | | | | |
| Pinnacol | <p>The City provides workers' compensation insurance coverage at no cost to the employee. Workers' Compensation Insurance pays for an employee's medical expenses for injuries/illnesses incurred while on the job. Any employee unable to work due to one or more on-the-job injuries or job-related illnesses may be granted injury leave.</p> | | | | | | |
| Health Savings Account (HSA) | | | | | | | |
| Rocky Mountain Reserve | <p>A Health Savings Account (HSA) is a pre-tax savings account available to employees who are enrolled in a High-Deductible Health Plan (HDHP) to save money for future, qualified medical expenses, including dental vision and over-the counter drugs. HSAs are owned by the employee. The HSA has three major tax savings: the money contributed into the account is tax deductible; contributions are invested over time and grows tax free; and certain withdrawals for qualified medical expenses are tax free. All employee accounts are established through UMB Bank. HSA funds roll over and accumulate year to year, if not spent.</p> <p>If an employee enrolls in the City's HDHP, the City will contribute \$900 (amount is prorated based on hire date) for employee coverage and \$1,300 (amount is prorated based on hire date) for dependent coverage into the HSA for elections during the period of 1/1/26 - 12/31/26. Established employee HSA deductions will remain in place until a contribution change is requested. Employees may change HSA deductions at any time but must comply with annual established IRS limits. The annual IRS contribution limits summarized below include <u>both</u> City and Employee contributions.</p> <p><u>2026 HSA IRS Limits:</u></p> <table> <tr> <td>Single Coverage</td><td>\$4,400</td></tr> <tr> <td>Family Coverage</td><td>\$8,750</td></tr> <tr> <td>Catch up (55 or older)</td><td>\$1,000</td></tr> </table> | Single Coverage | \$4,400 | Family Coverage | \$8,750 | Catch up (55 or older) | \$1,000 |
| Single Coverage | \$4,400 | | | | | | |
| Family Coverage | \$8,750 | | | | | | |
| Catch up (55 or older) | \$1,000 | | | | | | |
| Flexible Spending Account (FSA) | | | | | | | |
| | <p>On a pre-tax basis, participants may contribute to a Health Care Spending Account to pay for qualified medical expenses that are not covered under a medical, dental or vision plan (for example, co-insurance, and deductible obligations). Employees are not permitted to contribute to both an HSA & an FSA, unless the FSA is a Limited Purpose FSA. An amount of \$680.00 can be rolled over. A LPFSA can only be used for eligible dental and vision expenses within the calendar year; you may also contribute to a Dependent Care Spending Account to cover day care expenses for a dependent child or a disabled dependent requiring day care.</p> <p><u>2026 FSA IRS Limits:</u></p> <table> <tr> <td>Medical/LPFSA FSA</td><td>\$3,400</td></tr> <tr> <td>Dependent Care</td><td>\$7,500</td></tr> </table> <p>Employee must re-enroll every year for this benefit. This election is on a calendar year.</p> | Medical/LPFSA FSA | \$3,400 | Dependent Care | \$7,500 | | |
| Medical/LPFSA FSA | \$3,400 | | | | | | |
| Dependent Care | \$7,500 | | | | | | |
| Wellness Program | | | | | | | |
| | <p>The City is committed to the health, safety & well-being of our employees. Employees are eligible to receive up to \$700/year for participation in the City's comprehensive wellness program & achieving milestones. Spouses enrolled in the City's medical insurance plan are also eligible to participate in the City's wellness program; in this case, the household benefit is up to \$1,400/year. Please note that wellness incentives and prizes are considered taxable benefits. Employees will be taxed at the time any incentive is paid. Employees that receive prizes from drawings will be taxed on the value of the prizes received from their pay at the end of the calendar year.</p> | | | | | | |

| Holidays | |
|----------|---|
| | Employees shall be granted 11 holidays plus one floating holiday each year. Except for those employees for whom a different holiday system or schedule is specified per policy, each full-time employee shall receive full pay for time off for observance. |

| Vacation Leave | | | | |
|--|--|--------------------------|--------------------------|--------------------------|
| <p>Employees accrue vacation leave based on the following schedule:</p> <p>Vacation accrual begins on the first day of continuous full-time employment. Employees are eligible to take vacation once earned with supervisory approval.</p> | Length of Continuous Service Accrual Rate in Hours Per Month | | | |
| | | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| | < 2 years | 8.1 hours per month | 7.2 hours per month | 4.5 hours per month |
| | > 2 & < 5 Years | 9 hours per month | 8 hours per month | 5 hours per month |
| | > 5 & < 9 Years | 10.8 hours per month | 9.6 hours per month | 6 hours per month |
| | > 9 & < 15 Years | 12.6 hours per month | 11.2 hours per month | 7 hours per month |
| | Year 15 & > | 14.4 hours per month | 12.8 hours per month | 8 hours per month |

| New Hire Leave | |
|----------------|--|
| | Part-time regular employees will receive a prorated amount of New Hire Leave based on the percentage of hours worked. New Hire Leave can be used for purposes of health, personal or vacation and used in conjunction with other approved paid leaves, such as health, vacation, and holiday leave. Upon separation, any unused new hire leave hours will not be paid out. |

| Health Leave | | | | |
|--------------|---|--------------------------|--------------------------|--------------------------|
| | Part-time Regular employees are provided with a prorated amount of health leave for each full month worked during an employee's absence from scheduled working hours due to personal sickness or off-the-job injury; sickness or injury of an employee's immediate, household family member requiring the employee's personal care and attendance; and medical/dental appointments for the employee or the employee's immediate, household dependents. Accumulated health leave will not exceed 960 hours. In addition to the paid health leave provided, in the event of a declared public health emergency, additional benefits may be available. | | | |
| | | 36 Hours Worked Per Week | 32 Hours Worked Per Week | 20 Hours Worked Per Week |
| | | 7.2 hours per month | 6.4 hours per month | 4 hours per month |

| Personal Leave | |
|----------------|--|
| | Employees may convert accrued and unused health leave into personal leave credit at a ratio of 2:1 (health leave: personal leave) after accruing and maintaining 192 hours of health leave. A maximum of 24 hours of personal leave conversion will be allowed each calendar year. |

| 401 (k) Empower Retirement Plan | |
|--|---|
| Type of Plan | 401 (k) Retirement Plan |
| Purpose of Plan | To provide a retirement benefit to employees and encourage employee contributions toward a retirement plan. |
| Eligibility | Employee working 30 or more hours/week. New hires are eligible to participate and receive the City contribution/profit sharing and the employer match the first of the month following employment. Rollovers from other eligible plans are accepted. |
| City Contribution | 3% of employees' plan compensation (i.e., base wages). |
| City Match | City will match 100% of employees' elective deferrals up to 4%. |
| Employee Contribution/Salary Deferrals | Employee Elective Deferrals, with pre-tax or after-tax options. Contributions of any amount not to exceed the annual IRS limit. |
| Employee Roth Deferrals | Roth deferrals are a form of employee salary deferral, where contributions are made on an after-tax basis and are included in current taxable income. Employees will not be taxed on contributions or earnings attributable to the Roth deferrals if the employee elects to withdraw Roth amounts from the plan. Employer match will not exceed a combined total of 4% of employee elective salary deferral, whether pre-tax or after-tax. |
| Withdrawal & Loan Provisions | Withdrawals are subject to IRS rules and regulations. 401(k) loan provision of 50% of the vested amount up to \$50,000 |
| Investment of Funds | Employees may direct their investments into different funds. |

| 401 (k) Vesting | <p>Employee contributions and earnings are 100% vested. The city's contributions and earnings will be vested according to the following schedule:</p> <table border="1"> <thead> <tr> <th>Years of Service</th><th>Vested Interest</th></tr> </thead> <tbody> <tr> <td>1</td><td>30%</td></tr> <tr> <td>2</td><td>60%</td></tr> <tr> <td>3</td><td>100%</td></tr> </tbody> </table> | Years of Service | Vested Interest | 1 | 30% | 2 | 60% | 3 | 100% |
|------------------------------------|---|------------------|-----------------|---|-----|---|-----|---|------|
| Years of Service | Vested Interest | | | | | | | | |
| 1 | 30% | | | | | | | | |
| 2 | 60% | | | | | | | | |
| 3 | 100% | | | | | | | | |
| 2026 IRS Contribution Limit | 2026 -\$24,500/year; Catch up (50 or older) \$8,000/year, Catch up (60-63 years of age)\$11,250/yr. The standard limit resumes the year you turn 64. | | | | | | | | |
| Additional Notes: 401(k) | If a participant takes a hardship, their maximum deferral contribution for the year following is reduced by the amount of the hardship the participant took. If there are any discrepancies between the Benefits Summary and the Plan Document, the Plan Document will prevail. For additional information, please refer to the Summary Plan Description (SPD). | | | | | | | | |

| 457 Empower Deferred Compensation Plan | |
|---|--|
| Type of Plan | 457 Deferred Compensation Plan |
| Purpose of Plan | Provides an optional tax-sheltered retirement benefit for employees to help save for their retirement and reduce taxable income and save for the future. |
| Eligibility | All benefited employees are eligible first of the month following employment. |
| Employee Contribution | Employees can make pre-tax contributions of any amount not to exceed annual IRS limit. |
| Withdrawal & Loan Provisions | Subject to IRS rules and regulations. No 10% penalty for withdrawal before the age of 59 1/2, however subject to ordinary taxes. No loan provision, but an emergency withdrawal option is available. |
| Investment of Funds | Employees may choose from a variety of investment options. |
| 2026 IRS Contribution Limit | 2026 -\$24,500/year; Catch up (50 or older) \$8,000/year, Catch up (60-63 years of age)\$11,250/yr. The standard limit resumes the year you turn 64. |

| 529 College Invest | |
|---------------------------|--|
| | College Invest is designed to help families save for college by offering expert information, simple planning tools, scholarships, and a Colorado savings program with a state tax deduction. Tax-deferred growth and tax-free qualified withdrawals. The City offers a convenient payroll deduction. |

| Tuition Reimbursement & Education Assistance | |
|---|---|
| | <p><u>Tuition Reimbursement:</u> Employees may be eligible for educational reimbursement up to \$5,000 per year with pre-approval and prior to enrollment of classes, that will mutually benefit the employee and the City. Lifetime tuition maximum of \$25,000.</p> <p><u>Education Assistance:</u> Paid assistance up to \$2,500 per year in obtaining pre-approved certifications that will mutually benefit the employee and the City.</p> |

| Pay Incentive Programs – See Employee Policies | |
|---|--|
| | Upon City Council's approval annually, Bi-lingual Language Incentive Pay, and Lateral Assignment Incentive Pay, may be paid to qualifying employees. |

| Recreation Access | |
|--------------------------|--|
| | As part of a wellness benefit, employees are offered access to the recreation center free of charge. This is considered a taxable fringe benefit. Employees that utilize this benefit will be taxed on the value of usage from their wages annually. Employees will be asked to obtain an ID card for admission into the center. Immediate family members are eligible to purchase a discount pass at a rate of \$15.00 for a 30-visit punch card. |

* This summary of benefits is neither an express nor implied contract, and the City of Evans retains the right to change, delete, or modify any benefit as authorized by applicable law. This summary in no way replaces the information contained in the Employee Policies and other benefit documents. Employees should refer to the Employee Policies and other benefit plan documents for more details regarding eligibility, definitions, procedures, limitations, and exclusions. This summary represents a condensed version of the plan/policy provisions. Therefore, the wording in some instances may not always be exactly as it would appear in the plan document or policy. The right to any benefit and the amount of any benefit will be determined based on the terms and conditions of the applicable plan/policy. No rights accrue by reason of any statement omitted from or stated in this summary. Every effort has been made to ensure that the information in this statement is accurate; however, no warranty of complete accuracy is made. This report does not in any way constitute a contract of employment. The City of Evans reserves the right to amend pay and benefits at any time without notice. If you feel an error has been made or have any questions, please contact Human Resources. (Revised October 2025)