



# The Choice Is Yours

Understanding and selecting the  
employee benefits that meet your needs

# Keeping You at Your Best

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At Diné Development Corporation we greatly value our employees. You make this business run day in and day out, so we want you to be able to bring your best self to work.

That's one reason we offer comprehensive employee benefits. We want you to have the resources you need to keep yourselves and your families healthy, secure, and equipped to overcome any challenges that come your way.

This guide can help make it easier to choose the right benefits for your situation. In it, you'll find characters facing the same choices as you, and get insight on how they're making their decisions.

If you need help with your benefits, you can always contact the Alliant Benefit Advocate team at (800) 489-1390 or [benefitsupport@alliant.com](mailto:benefitsupport@alliant.com).



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# Meet the Decision-Makers

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Jamie, Alex, Taylor, and Chris are at different stages in their lives and careers, which influences why they'd enroll in certain benefits.



## Jaime

Hi, I'm Jaime! I don't think too much about employee benefits, and frankly I'd like to keep it that way! As long as I have health insurance in case I get in a car wreck or something, I'm all good. In my spare time I love to go snowboarding, or take my dog, Mango, to the local dog park.

## About Jaime

- In her late 20s
- Single, no children
- Healthy and active
- Just getting started in her career
- Recently graduated from college with significant student loan debt
- Lives in an apartment with two roommates



## Alex

Hi, I'm Alex. When my spouse and I aren't working or busy getting our kids to and from soccer practice, ballet, and gymnastics, we enjoy reading, DIY, and video games. We both have some health issues we're trying to manage, so it's important to have good and affordable health insurance for our family. And we know we need to be thinking about retirement (after we get the kids through school!).

## About Alex

- In his 40s or early 50s
- Married, three children
- Has chronic health conditions and is sedentary (spouse also has chronic health condition and is sedentary; all three kids are healthy and active)
- Established in his career
- Has a bachelor's degree
- Has minimal student loan debt
- Lives with his spouse and kids in a suburban home that they own



## Taylor

Hi, I'm Taylor! My spouse and I are saving up for a down payment on a house, so we're always on the hunt for cost savings, and we don't want something unexpected to derail our plans. We saw our parents lose a lot of their retirement savings during the mid-2000s, so we know how important it is to make the right choices for retirement savings. On the other hand, we've got a lot of student loans to pay back. In our free time we enjoy meeting up with friends for a meal or a beverage and traveling to meet up with old friends.

### About Taylor

- In his 30s
- Married, no children
- Healthy and moderately active (spouse is healthy and active)
- Starting to get established in his career
- Has a bachelor's degree
- Has significant student loan debt
- Lives with his spouse in a rented apartment



## Chris

Hi, I'm Chris. I'm starting to look forward to retirement, and I definitely don't want to spend my leisure years worrying too much about my finances! My younger child lives with me, but when they move out, I might move into a place that's a little lower maintenance. After all, who wants to do yard work when there's pickleball to be played and a grandbaby to cuddle? I also run half-marathons, although one of my knees has started bugging me during the past couple races (I probably ought to get that checked out).

### About Chris

- Approaching retirement age (55+)
- Divorced, two adult children (one still younger than 26)
- Healthy but starting to have some age-related concerns, and active but slowing down (younger adult child is healthy and moderately active)
- Well-established in his career and thinking about exiting the workforce
- Has a graduate degree
- Has paid off his student loan debt
- Lives with his younger adult child in a suburban home that he owns, in the same city as his older adult child and grandchild



# Medical Insurance

## PPO Plans

A preferred provider organization, or PPO, is a plan that provides more help covering medical costs if you use medical professionals and facilities within a specific network.

With a PPO, you can visit any doctor you like, although you will pay more outside the PPO network. You don't need a referral to see a specialist, although you may need preauthorization for certain procedures or medications.

One reason you might like a PPO is the flexibility it offers when it comes to choosing where you get medical care. It can also be easier to visit specialists since you don't have to get referrals from a primary care provider.

One reason you might not like a PPO is the cost. The monthly premium for a PPO plan is typically higher than for other plan types. You'll also have to meet a deductible before your plan starts paying a portion of your healthcare costs. If you do visit a doctor outside the PPO network, you may have to file a claim for reimbursement yourself, rather than having the doctor file it for you. And if you want coordinated care, you'll likely have to take the lead on sharing your health and treatment status with all your providers.



### Our PPO plans

Cigna OAP 500  
Cigna OAP 1000

### What's preauthorization?

Also known as prior authorization or preapproval, preauthorization is a restriction your insurance plan has on certain procedures or medications. It requires a doctor to provide documentation that the service is medically necessary or that other medications or procedures were tried first.

If you don't get preauthorization when your plan requires it, your insurance may not cover the procedure or medication at all.

# The decision-makers weigh in



Taylor

I really like my current doctor. I don't want to worry about whether my insurance will pay if I keep seeing her, so the PPO seems like a good option from that perspective. I do hope she's in the network, though. My spouse and I don't want to spend more on healthcare than we have to since we're trying to save up as much as we can!



Chris

I've always been happy with the care my current doctor provides, and I trust him to send me to the right person to get my knee checked out. Knowing I could get coverage with that person even if they aren't in the network definitely makes the PPO plan appealing. And it's nice to know that I don't *have* to go to the person my doctor chooses.



Alex

Being able to keep seeing the specialists my spouse and I already like makes the PPO sound like a good option. With our health conditions, it's important to know we can visit the absolute best person around and not have to worry about whether our insurance would pay. And even though we don't mind getting referrals from our primary doctors, it's good to know they're looking at all the options, not just the people in the network.



Jaime

The PPO sounds good to me because I like having lots of options. If I need to go to the doctor, I want to be able to choose anybody, even if it might be a little more expensive. On the other hand, the premiums seem a little steep, especially since I doubt I'll need to go to the doctor very often.

# Medical Insurance

## HDHP Plans

A high deductible health plan, or HDHP, can be any type of plan, such as a PPO or HMO, but it will have a deductible of at least \$1,650 for an individual or \$3,300 for a family. You can often pair an HDHP with a tax-advantaged health savings account, or HSA.

One reason you might like an HDHP is the low monthly cost. The deductible is high, which makes you responsible for a bigger share of your medical costs, but that allows the insurance company to lower the premiums. If you pair an HDHP with an HSA, you can lower your overall tax burden by contributing to that account and using it to pay for your deductible and other expenses (learn more about HSAs on page 18).

One reason you might not like an HDHP is the high out-of-pocket cost when you do need medical care. Some people also balk at the high deductible and avoid going to the doctor if they have an issue, which can lead to bigger health problems in the future.

If you're in generally good health, an HDHP can help you save a significant amount of money. But if you're managing a chronic condition, make sure you factor the high deductible into your overall costs.



### Our HDHP plans

Cigna HSA 1650

Cigna HSA 3000

### How do deductibles work?

When your insurance plan has a deductible, you pay for 100% of your medical costs (except preventive care) until you've paid the deductible amount. At that point, your insurance begins covering a portion of the cost.

If you use in-network medical professionals and facilities, you'll typically get a discount, even before you've met your deductible.



# The decision-makers weigh in



Chris

If we enroll in the HDHP, it'll be because of the HSA. I might not have a lot of healthcare needs at the moment, but it'd be nice to build a little nest egg for those expenses in retirement. And since my child would be covered under my plan while they're still my tax dependent, I'd be able to contribute up to the family limit!

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Alex

I'll have to do some math to see if the HDHP premium savings and the HSA tax savings would make up for the high deductible. Even though we have a lot of healthcare expenses, the HDHP could end up being the more affordable option for us, even if the deductible gives me a little sticker shock.

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Jaime

That deductible sure is high! But the premiums are pretty low ... I'm pretty healthy anyway, so I don't think I'll need to go to the doctor unless I get hurt in an accident. The HSA might be a cool bonus—I could put just a little money away right now, and then I'd be able to cover my deductible if I ever did get hurt.

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Taylor

The HDHP is appealing because of the low premium cost. And the pre-tax HSA contributions would be nice, too—we'd love to have a safety net if either of us ever needed it (or if we decided to start a family).

# Medical Plan Cost Comparison

## Jaime: Employee Only Coverage

Jaime had very few services throughout the year. She had her annual checkup (fully covered), had two sick visits, and filled one generic antibiotic.

Based on the allowed cost assumptions, Jaime spends the least on medical care on the Cigna OAP 1000; but has the lowest per paycheck premium deductions on the Cigna HSA 3000. If Jamie considers her out-of-pocket spend on the plan, her per paycheck deductions, and DDC's HSA contribution, the Cigna HSA 3000 is the most affordable plan for her with approximately \$2,200 in savings over the Cigna OAP 1000.

### Allowed Cost Assumptions\*

Sick Visit	\$180
30-day Generic Prescription	\$30

	Cigna OAP 500	Cigna OAP 1000	Cigna HSA 1650	Cigna HSA 3000
Annual Checkup	No Charge	No Charge	No Charge	No Charge
(2) Sick Visits	\$80	\$60	\$360	\$360
Generic Prescription	\$15	\$15	\$30	\$30
<b>Total Cost</b>	<b>\$95</b>	<b>\$75</b>	<b>\$390</b>	<b>\$390</b>
DDC HSA Contribution	\$0	\$0	\$1,200	\$1,200
<b>Total Cost with HSA Seed</b>	<b>\$95</b>	<b>\$75</b>	<b>\$0</b>	<b>\$0</b>
Deductible Met?	No	No	No	No

\*Assumptions are based on in-network services only

# Medical Plan Cost Comparison

## Alex: Family Coverage

Alex covers his spouse and three young children. They each go for their annual checkup. Between the five of them, they have six sick visits, four generic prescriptions, and one 3-day hospital stay.

Based on the allowed cost assumptions, Alex and his family spend the least on medical care on the Cigna OAP 500; but he has the lowest per paycheck premium deductions on the Cigna HSA 3000. If Alex considers his out-of-pocket spend on the plan, his per paycheck deductions, and DDC's HSA contribution, the Cigna HSA 1650 is the most affordable plan for him with savings of approximately \$2,500 over the Cigna OAP 500.

### Allowed Cost Assumptions\*

Sick Visit	\$180
30-day Generic Prescription	\$30
Hospital Stay Per Night	\$5,000
Physician Fees Per Night	\$200

	Cigna OAP 500	Cigna OAP 1000	Cigna HSA 1650	Cigna HSA 3000
(4) Annual Checkups	No Charge	No Charge	No Charge	No Charge
(6) Sick Visits	\$240	\$180	\$1,080	\$1,080
(4) Generic Prescriptions	\$60	\$60	\$120	\$120
(3) Hospital Facility Fees	\$1,000	\$5,400	\$2,100	\$6,840
(3) Hospital Physician Fees	\$0	\$120	\$0	\$120
<b>Total Cost</b>	<b>\$1,300</b>	<b>\$5,760</b>	<b>\$3,300</b>	<b>\$8,160</b>
DDC HSA Contribution	\$0	\$0	\$1,400	\$1,400
<b>Total Cost with HSA Seed</b>	<b>\$1,300</b>	<b>\$5,760</b>	<b>\$1,900</b>	<b>\$6,760</b>
Deductible Met?	Yes	Yes	Yes	Yes

\*Assumptions are based on in-network services only

# Dental Insurance

## How it works

Dental insurance is similar to medical insurance because it pays a portion of the cost of dental care. Plans may or may not have deductibles, copays, coinsurance, and plan networks.

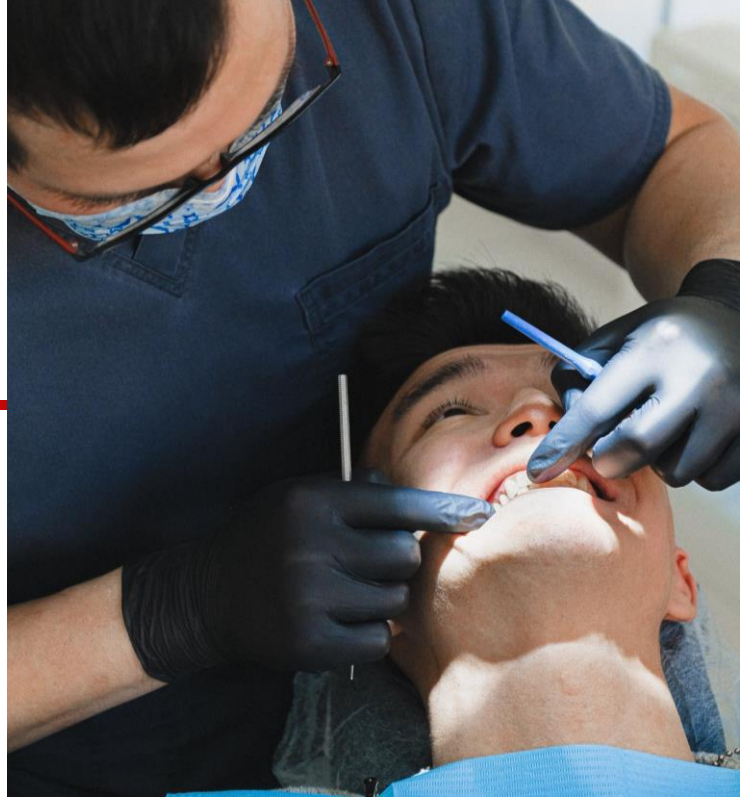
Dental insurance typically covers three types of care: preventive, basic, and major.

Preventive care covers regular cleanings and X-rays, plus screenings for dental and oral diseases. You typically won't have to pay for preventive care.

Basic care covers minor procedures such as filling cavities, pulling teeth, treating gum disease, and root canals. Major care includes complex services like crowns, implants, dentures, and oral surgery. If your plan has a deductible, it will usually apply to basic and major care, and you will likely pay a share of the cost after you meet the deductible.

Most plans don't cover cosmetic procedures like teeth whitening or veneers. Some plans cover orthodontia (braces, retainers, etc.) for children and sometimes for adults.

Unlike with medical insurance, there's typically a limit on how much your dental plan will pay each year. If you reach that limit, you'll have to pay 100% of costs for the rest of the plan year.



## Our dental plans

Unum Base Dental PPO Plan  
Unum Buy-up Dental PPO Plan  
Aflac Supplemental PPO Dental

## Know your plan details

Dental plans can work like an HMO, with the plan only paying for in-network services, or a PPO, with the plan paying a smaller share of out-of-network costs.

Preventive, basic, and major care may all be covered at different levels. It's a good idea to review your plan's details and understand how much your plan will pay for a particular service.

There may also be limits on how often you can get certain procedures, so be aware of those kinds of restrictions as well.

# Vision Insurance

## How it works

Vision insurance is a lot like other health insurance. Plans may or may not have deductibles, copays, coinsurance, and plan networks.

Vision insurance typically helps pay for routine and preventive eye exams, glasses, and contacts.

There are typically limits on how often and how much the plan will pay for exams and glasses or contacts. You'll also probably need to choose between glasses or contacts—plans usually help pay for one or the other every year or two, but not both at the same time.

Most plans won't pay for corrective vision surgery, such as LASIK or PRK, but some offer discounts on those procedures.



## Our vision plan

MetLife Vision Plan

## Doesn't my medical insurance cover vision?

Since the Affordable Care Act took effect, most health insurance plans help pay for vision screenings for children 18 and younger, although not typically for glasses or contacts.

Most medical insurance plans do not help pay for vision care for adults. Even if your medical plan covers vision expenses for any kids in your household, it's still a good idea to buy vision insurance for the adults.



# Are vision and dental worth it?

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If you have 20/20 vision along with healthy teeth and gums, you may be wondering if vision and dental insurance are really worth the cost of monthly premiums. Let's see what's on the minds of our decision-makers.



Chris

I certainly don't *need* vision insurance. I wear glasses, but my prescription hasn't changed in decades, so if I really want to save money, I can just keep using my current glasses.

But I really like my eye doctor, and I know how important it is to get an eye exam every year to make sure I don't develop eye disease, like cataracts or glaucoma. My doctor charges about \$200 for an annual visit, so the insurance premiums are worth it for me (and I can get some new glasses if I decide to splurge).



Alex

When our kids were really little, we didn't get vision insurance, since our health insurance covered the kids' vision screenings.

I have 20/20 vision, but my spouse wears glasses. Their prescription hasn't changed since their late 20s, so they can get away with using the same pair they've had forever.

When we weren't buying vision insurance, we'd just go to one of those big-box stores that has an optometrist and get our annual checkups for less than \$100.

Now that the kids are in school, it's worth it for us to pay the vision insurance premiums. None of the kids need glasses yet, but it'll probably happen soon, considering my spouse's family history. At that point we'll be glad to have help paying for glasses—with our kids I know we'll have to shell out for those scratch-resistant lenses!



Jaime

I'm not sure I'm going to get dental insurance. I brush twice a day, floss every day, avoid sugary food and drinks, and generally just take really good care of my teeth.

If I'm only going to get my teeth cleaned twice a year, wouldn't it be cheaper to just pay for that with cash?

Jamie's got a point. Depending on what dental care costs in her area, she might be able to save money by paying for preventive care out of pocket and hoping she doesn't get any cavities.

Assuming she sets aside the money she'd be paying in premiums every month, it might be worth it. Let's see at what our budget-savvy decision-maker Taylor thinks.



Taylor

Since we're saving up for a down payment on a house, my spouse and I are pinching as many pennies as we can! But we're always balancing our tight budget with the need to protect ourselves from unforeseen expenses—we're working too hard to let anything derail our plans!

We're both fortunate to have healthy teeth, so I considered not buying dental insurance. But after I did the math, I decided it was worth the cost. Let me show you:

$$\text{Last year's dental premiums} \rightarrow \$565 - \$400 = \$165 \leftarrow \text{Potential savings}$$

↑  
what my dentist billed  
(doesn't include in-network discount)

If I just paid my dentist out of pocket, I could save \$165. But then if I did get a cavity or something, I'd have to pay more than \$165 to fix it. So I decided to think of it this way:

$$\text{Potential savings} \rightarrow \$165 \div 12 = \$13.75 \leftarrow \text{Monthly cost for peace of mind (worth it)}$$

months

# Tax-Advantaged Savings Accounts

## Healthcare FSA

A healthcare flexible spending account (FSA) is an account funded with pre-tax deductions from your paycheck. You can use a healthcare FSA only for eligible healthcare expenses like your deductible and copayments, eyeglasses, dental care, and even some over-the-counter products.

One reason you might enroll in an FSA is to potentially lower your taxes. Your pre-tax contributions to the FSA lower your overall taxable income, which may mean tax savings for you.

One reason you might not want to enroll in an FSA is if you don't have a good estimate of what your healthcare costs will be in the coming year. FSA funds are "use it or lose it" money, meaning you don't get to keep any money you don't spend within the plan year. Some FSAs do offer a grace period or limited rollover of leftover money.

If you're enrolled in an HDHP with a health savings account, you can't enroll in an FSA unless it's a limited-purpose FSA for dental and vision expenses only.

You can enroll in an FSA even if you don't get health insurance through Diné Development Corporation, and you'll get a debit card to pay for eligible expenses.



### Important FSA details

- You can contribute up to \$3,300 to an FSA in 2024.
- You can roll over up to \$660 in FSA funds you haven't spent in 2024 to spend in 2025.
- You can spend FSA money on eligible expenses.
- You cannot spend FSA money on ineligible expenses.
- If you have a limited-purpose FSA, you can use it for eligible dental and vision expenses only.

# The decision-makers weigh in



Jaime

I don't think I'll have a lot of healthcare costs this year, but it might be nice to use tax-free money to help pay for LASIK! Assuming I don't enroll in the HDHP, that is.



Alex

We spend a lot on healthcare every year, so being able to use pre-tax money for some of it really helps out the family budget (especially if any of the kids end up needing braces). And if we enroll in the HDHP, we'll probably contribute as much as we can to the limited-purpose FSA.



Taylor

We like the idea of paying for healthcare with tax-free dollars. It would be nice if we could keep whatever money we don't spend, though. I'd only want to contribute as much money as we'd need, but it's hard to know how much that'll be.



Chris

If we don't enroll in the HDHP, I'll probably put a little bit of money in an FSA. I don't think my child and I will spend a lot on healthcare, but I can always buy an extra pair of glasses or some over-the-counter products if there's money left over at the end of the year.

# Tax-Advantaged Savings Accounts

## HSA (with HDHP)

A health savings account HSA is an account you can contribute pre-tax money to if you have a high deductible health plan (HDHP—see page 8 for details). You can only use an HSA for eligible healthcare expenses. Some employers also contribute to an HSA.

One reason you might enroll in an HSA is the potential tax savings. Your pre-tax contributions to the HSA lower your overall taxable income, and healthcare-related withdrawals are not taxed. Your HSA money stays in your account until you spend it, and you keep the account if you leave Diné Development Corporation. You can also invest HSA money and use it to supplement your retirement savings.

You can only contribute to an HSA if you have an HDHP. Make sure the HSA contributions fit into your budget if you choose an HDHP—if you had to withdraw HSA money for a non-healthcare emergency, you'd pay income tax on that money plus a 20% penalty. (After you turn 65, you'd no longer have to pay the 20% penalty.)

If an HDHP is a good option for you, then definitely consider an HSA as well.



### Important HSA details

- Individuals can contribute up to \$4,300 to an HSA in 2025.
- Families can contribute up to \$8,550 in 2025.
- If you're 55 or older, you can contribute an extra \$1,000.
- HSA contribution limits do include employer contributions.
- You can spend HSA money on eligible expenses.
- You cannot spend HSA money on ineligible expenses.
- If you later switch to non-HDHP insurance (including Medicare), you won't be able to contribute to your HSA, but you can still use it to pay for eligible healthcare expenses.



# The decision-makers weigh in



Alex

Between our health conditions and the kids, our family spends a lot on healthcare—it's not uncommon for us to reach the out-of-pocket limit! And if we somehow didn't spend our full HSA balance, we'd certainly be able to use it in the future. The HDHP deductible is intimidating, but with the premium savings and the HSA it might be a good option for us.

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Taylor

We love the idea of putting away a little money every month to build a safety net in case one of us gets sick or hurt—we don't want anything unexpected to derail our financial goals! And if we had a nice bit saved up after we buy a house, it'd be a big help in deciding if we want to start a family.

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Chris

The HSA definitely makes the HDHP a more appealing option. Between catch-up contributions and being able to contribute up to the family limit, I'd be able to build a nice nest egg for my healthcare expenses in retirement!

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Jaime

I like that the HSA would roll over and stay with me if I had to leave Diné Development Corporation. I don't think I'll have a lot of healthcare costs anytime soon, but it'd be nice to put a little bit away every paycheck so I'd have the money if I ever needed it. And if I invested the money, I'd have lots of time to let it grow!

# Life & Accident Insurance

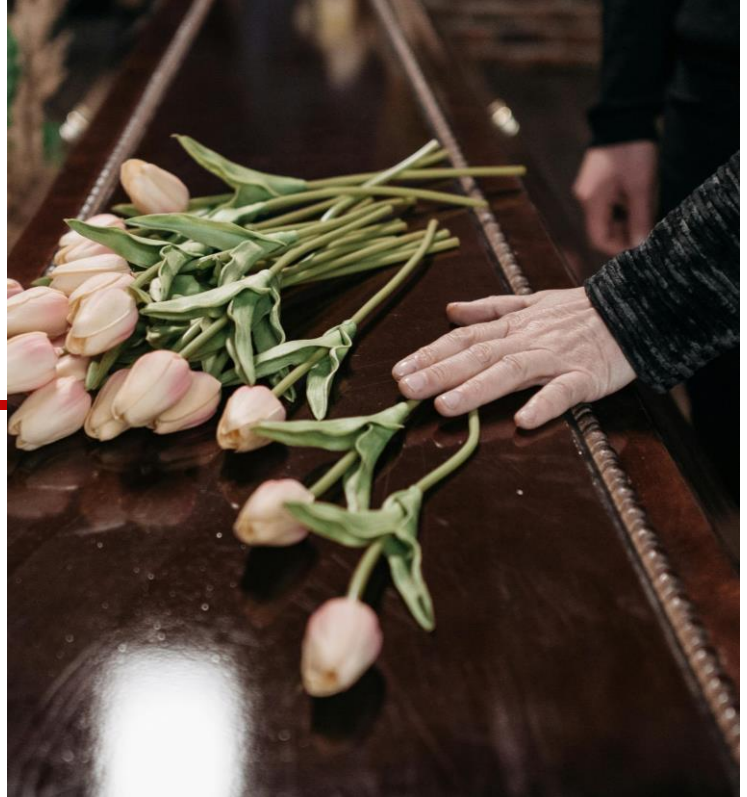
## Life and AD&D

Life insurance and accidental death and dismemberment (AD&D) insurance are intended to help provide for your loved ones in the event of your death or severe injury. Sometimes these are separate policies, and sometimes they're combined.

Life insurance pays your beneficiaries in the event of your death. It's a good idea to buy life insurance if you have family members who depend on your income. If that's not the case, a small amount of life insurance can cover funeral and burial costs, which your loved ones will probably appreciate.

AD&D insurance is similar to life insurance, but it only pays a death benefit if you die because of an accident. It will also pay a disability benefit if you are severely injured, such as losing a limb or your sight, speech, or hearing in an accident. The benefit amount usually depends on the severity of your injury.

Diné Development Corporation provides life and AD&D benefits at no cost to you, and you can also purchase additional coverage. Costs for these policies will vary based on your age and how much coverage you want.



### Our life and AD&D offerings

The Hartford Voluntary Life and AD&D

### What are beneficiaries?

Beneficiaries are the people or entities that will receive benefits if you die. If you don't name a beneficiary, the money may be delayed in probate court. You can make one person your beneficiary or divide your benefit between multiple people. A beneficiary can be a spouse, family member, friend, or charitable organization.

Retirement accounts also have beneficiaries in case you die before using the full balance.

# The decision-makers weigh in



Chris

I have enough assets that I wouldn't be leaving my kids destitute if something happened to me, but they do still rely on me as a safety net from time to time. I'm getting a policy for \$100,000 so they could pay for a funeral and have a little left over to keep them from struggling.



Jaime

Nobody really depends on my income, so I don't really need much life insurance. I think the benefit Diné Development Corporation pays for will be plenty.



Alex

I don't know what our family would do if anything ever happened to me or my spouse. We're getting policies for \$300,000 so we know the family would be taken care of if the worst happened.



Taylor

It'd definitely be tough to make ends meet if anything happened to one of us. Since we're putting everything we can toward paying off our student loans and saving up for a house, we'll probably just get policies for \$50,000, to cover funeral expenses.

# Other benefits

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## Dependent-care FSA

If you have tax dependents who need day care (children or adults), you can contribute up to \$5,000 to a dependent-care flexible spending account (DCFSA) in 2024.

A DCFSA works just like a healthcare FSA (see page 16), except you have to use the money for eligible childcare or adult day care expenses.

## Optional benefits

In addition to the benefits detailed in this guide, Diné Development Corporation offers these voluntary benefits: hospital indemnity, accident, cancer and critical illness insurance, whole life insurance, and pet insurance.

You'll pay the full cost of these benefits, but they're offered at a cheaper group rate than what you'd pay as an individual. And you'll pay via payroll deductions, which is quite convenient!



# The decision-makers weigh in



Alex

Since my spouse and I both work, our kids need daycare. It really helps our family budget to be able to use tax-free money through the DCFSA to pay for some of it.

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Taylor

My spouse both participate in sports leagues, and want to make sure we don't incur additional medical costs if we are injured. I signed us both up for the voluntary accident plan so that it can help cover our out-of-pocket costs in the case of an accident.

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Chris

Cancer runs in my family, and while I've been lucky so far, it would be a relief to have extra insurance to help cover any out-of-pocket costs for a potential diagnosis and treatments, giving me one less thing to worry about. I'm going to sign myself up for the cancer plan now.

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Jaime

Mango might not be a fancy show dog, but he is my best friend. I'd be devastated if something happened to him and I couldn't afford to pay for the veterinary care he needed. I'm enrolling him in pet insurance so I know he'll be by my side for as long as possible.



# A few things to consider

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Everyone has different needs, and we all have to balance competing priorities in our lives and budgets. While Diné Development Corporation does our best to provide great benefit offerings, you might have other options that better suit your situation. Here are some additional tips to help you figure out what will work best for you.

## Changes in your situation

Even if you aren't required to re-select your benefits each year during open enrollment, it's a good idea to at least review your benefits and make sure they're still right for your situation.

Certain significant events in your life—such as a change in marital status, adding a child to your family, or losing your health insurance from a spouse or parent's employer—can trigger a special enrollment period that allows you to choose new benefits during the 30 days after those events.



## Early enrollment advantages

For some benefits, there are advantages to enrolling at the earliest opportunity.

For example, life insurance premiums are based on age, but with certain policies your premium is locked in at the initial rate. That means the younger you are when you enroll in that type of policy, the less you'll spend overall.

Your retirement savings can also get a boost from early enrollment due to compounding interest and the risk-reduction benefits of time.

## Other employer-sponsored health coverage options

If you're married or younger than 26, you may be able to get medical, dental, and vision insurance through your spouse's or parent's employer. Be sure to consider the plan's specific benefits and premium costs to determine if it's the best option for you.

## ACA Marketplace subsidies

Because Diné Development Corporation offers health insurance that meets the government's affordability threshold for employees, you are not eligible for premium tax subsidies to get coverage through the Affordable Care Act (ACA) Marketplace. However, if the premium cost to cover your dependents through a Diné Development Corporation-sponsored plan is more than 9.02% of your household income, then your dependents may qualify for Marketplace premium subsidies.

To learn more, contact Alliant Individual Health Solutions at (877) 328-1195 or [alliantindividualhealthsolutions.com/](http://alliantindividualhealthsolutions.com/).

## Medicare considerations

If you're eligible for Medicare and also for health insurance through Diné Development Corporation or your spouse's employer, it's important to understand when you need to sign up for Medicare Parts A and B to avoid late-enrollment penalties. You also need to know whether your employer-sponsored prescription drug plan counts as "creditable" coverage, because that affects whether you'll have to pay a penalty if you don't enroll in Medicare Part D right away.

To learn more, contact Alliant Medicare Solutions at (877) 385-8107 or [www.alliantmedicareolutions.com/](http://www.alliantmedicareolutions.com/).

# Want a deeper dive?

Check out these resources for more information on employee benefits in general, as well as specific plans and benefits.



### Benefit guide

Detailed descriptions of Diné Development Corporation benefit offerings, open enrollment instructions, and other resources.



### Easy Guide to Understanding Your HDHP with HSA

Learn all the ins and outs about HSAs and HDHPs.



### MyBenefits.Life

Benefits information, documents, contacts, and educational materials.

