2025 BENEFITS OPEN ENROLLMENT





It's Open Enrollment!

November 4th – 12th

- One time each year you can make changes for any reason
- Switch to a different plan
- Add or drop coverage
- Add or drop dependents
- Re-enroll in flexible spending accounts (FSAs)
- This is an active enrollment, which means every employee must go through the enrollment process



Who's Eligible For Benefits?

Employees

- Full-time employees working 30 or more hours per week
- Employees with variable hours/seasonal schedules may be eligible—refer to benefits guide

Dependents

- Spouse or domestic partner
- Biological, adopted or stepchildren up to age 26
- Domestic partner's children are eligible up to age 26
- Disabled dependent children of any age
- Children named in a support order (QMCSO)

Changing Your Benefits

When it's not open enrollment, you can change your benefits if you have a change in:

- marital status
- number of dependents or dependent eligibility
- employment that affects eligibility (you or dependents)
- residence that affects access to network providers
- health coverage due to spouse's employment
- eligibility for Medicare or Medicaid



You have 30 days to submit changes



What's New or Changing for 2025?

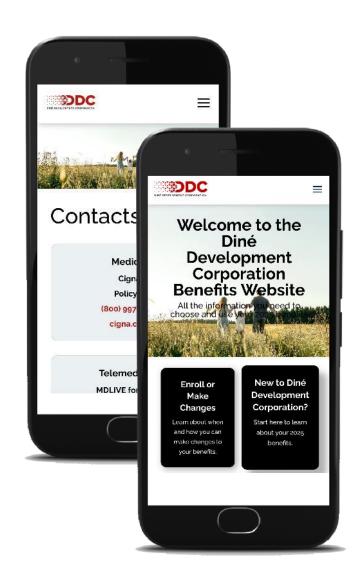
Summary

- Cigna HSA 1600 plan in-network deductibles increasing to \$1,650 for individual coverage and \$3,300 for family coverage due to IRS minimum requirement increases
- Dental coverage moving to Unum with plan design changes to the current plan and the option of a buy-up plan
- Supplemental dental coverage available through Aflac
- IRS indexed maximum changes to HSAs, FSAs, commuter programs, and 401(k)

MyBenefits.Life®

All your 2025 benefits information in one place—at home, at work or on the go

- Benefit details and documents
- Plan contact information
- Enrollment information
- ddc.mybenefits.life



Need Help With Your Benefits?

Get help from an Alliant Benefit Advocate

- General benefit questions
- Eligibility and coverage changes
- Finding a network provider
- Claim or billing issues, in some cases

Email

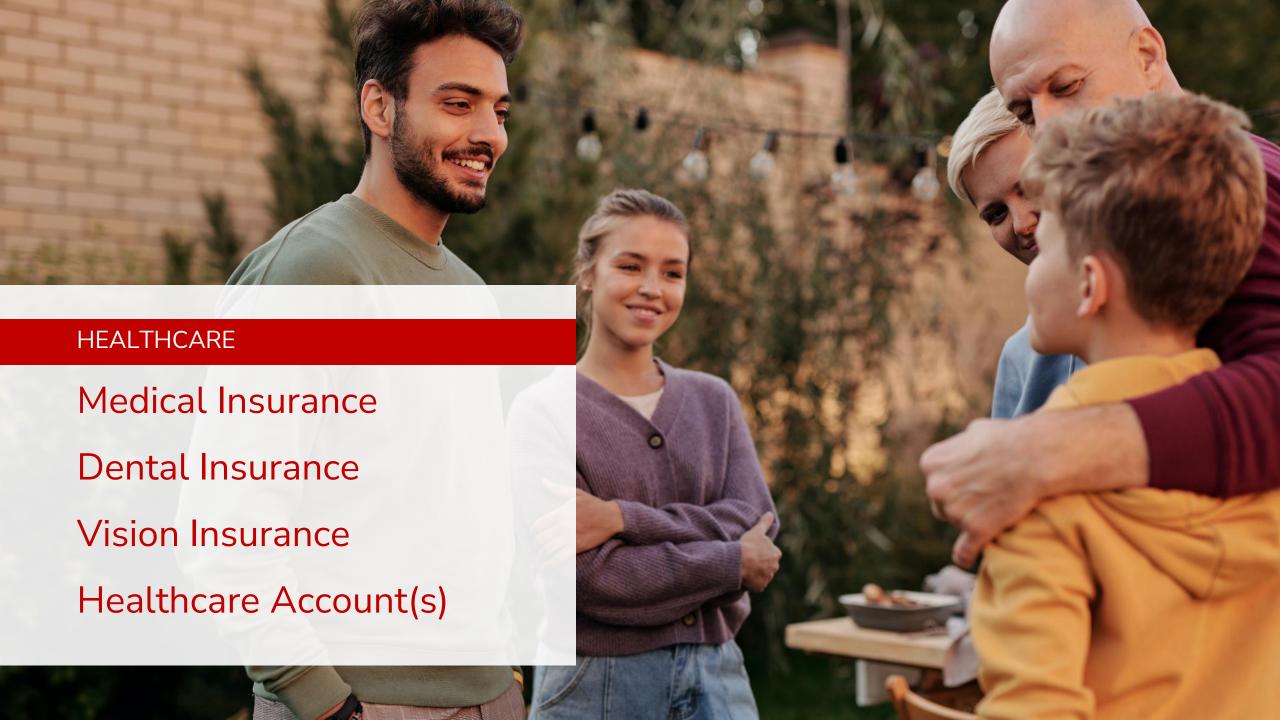
benefitsupport@alliant.com

Phone

(800) 489-1390

Hours

5 a.m.–5 p.m. (Pacific Time) Monday–Friday



Medical Plans

- Cigna OAP 500
- Cigna OAP 1000
- Cigna HSA 1650
- Cigna HSA 3000

Medical coverage includes:

- Preventive and emergency care
- Doctor visits
- Prescription drugs



Which Plan Is Right for You?

	Cigna OAP 500 Cigna OAP 1000	Cigna HSA 1650 Cigna HSA 3000
Plan type	PPO	HDHP
Out-of-network coverage?	Yes	Yes
Primary Care Physician (PCP) required?	No	No
Other Features	 You must meet a deductible You pay higher monthly premium Flexibility to see any provider Compatible with tax-free flexible spending account (FSA) You pay more out-of-network No referrals required 	 You must meet a higher deductible You pay lower monthly premium Flexibility to see any provider Compatible with tax-free health savings account (HSA) You pay more out-of-network No referrals required

Medical Plan Comparison*

	Cigna OAP 500	Cigna OAP 1000	Cigna HSA 1650	Cigna HSA 3000
Annual Deductible	Individual: \$500 Family: \$1,000	Individual: \$1,000 Family: \$3,000	Individual: \$1,650 Family: \$3,300	Individual: \$3,000 Family: \$6,000
Annual Out-of-Pocket Maximum	Individual: \$6,000 Family: \$12,000	Individual: \$6,000 Family: \$12,000	Individual: \$6,550 Family: \$13,100	Individual: \$6,550 Family: \$13,100
Primary Office Visit	\$40	\$30	0% after deductible	20% after deductible
Specialist Office Visit	\$80	\$60	0% after deductible	20% after deductible
Emergency Room	\$500	\$500	0% after deductible	20% after deductible
Outpatient Surgery	0% after deductible	20% after deductible	0% after deductible	20% after deductible
Hospitalization	0% after deductible	20% after deductible	0% after deductible	20% after deductible
Most Other Services	0% after deductible	20% after deductible	0% after deductible	20% after deductible

^{*}In-network amounts only — refer to your summary plan description or DDC.MyBenefits.Life® for full plan details. Individual Deductible within a Family is \$3,300 for both Cigna HSA plans

Prescription Plan Comparison*

	Cigna OAP 500	Cigna OAP 1000	Cigna HSA 1650	Cigna HSA 3000
Rx Deductible	None	None	Combined with Medical	Combined with Medical
Out-of-Pocket Maximum	Combined with Medical	Combined with Medical	Combined with Medical	Combined with Medical
Generic	30-day: \$15 90-day: \$38	30-day: \$15 90-day: \$38	30-day: 0% after deductible 90-day: 0% after deductible	30-day: 20% after deductible 90-day: 20% after deductible
Preferred Brand Name	30-day: \$35 90-day: \$88	30-day: \$35 90-day: \$88	30-day: 0% after deductible 90-day: 0% after deductible	30-day: 20% after deductible 90-day: 20% after deductible
Non-Preferred Brand Name	30-day: \$60 90-day: \$150	30-day: \$60 90-day: \$150	30-day: 0% after deductible 90-day: 0% after deductible	30-day: 20% after deductible 90-day: 20% after deductible

^{*}In-network amounts only — refer to your summary plan description or DDC.MyBenefits.Life® for full plan details. 30-day can only be filled at retail. 90-day can be filled at retail or through mail order.

Plan Cost Scenario 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 Jaime 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 Assum	nptions*
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
Total Cost	\$95	\$75	\$390	\$390
DDC HSA Contribution	\$0	\$0	\$1,200	\$1,200
Total Cost with HSA Seed	\$95	\$75	\$0	\$0
Deductible Met?	No	No	No	No

Plan Cost Scenario 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 Assum	ptions*
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
Total Cost	\$1,300	\$5,760	\$3,300	\$8,160
DDC HSA Contribution	\$0	\$0	\$1,400	\$1,400
Total Cost with HSA Seed	\$1,300	\$5,760	\$1,900	\$6,760
Deductible Met?	Yes	Yes	Yes	Yes



Dental Plans

- Unum Dental Base Plan
- Unum Dental Buy-up Plan

Covers four types of care:

- Preventive care checkups, cleanings
- Basic care x-rays, fillings, simple extractions
- Major care root canals, bridges, crowns, dentures
- Orthodontia for children and adults

Dental Plan Comparison*

	Unum Dental Base Plan	Unum Dental Buy-up Plan
Annual Deductible	Individual: \$50 Family: \$150	Individual: \$50 Family: \$150
Annual Plan Maximum	\$2,000	\$2,500
Diagnostic & Preventive	0%	0%
Basic Services	20% after deductible	20% after deductible
Major Services	50% after deductible	50% after deductible
Orthodontia	Not Covered	50% \$1,500 lifetime max Child and Adult
Carryover Benefit (New!)	During each benefit year, if a member receives at least one cleaning or exam and their total dental claims are below \$800, a portion of the annual maximum (up to \$1,500) will automatically carry over to the next year's annual maximum. Each covered family member receives their own carryover benefit.	

Aflac Supplemental Dental

Increase your dental reimbursements with the Aflac supplemental dental.

- Get reimbursed for any dentist (in or out-ofnetwork)
- No precertification requirements
- Reimbursements are set based on a schedule of benefits based on your state of residency and available services



You own the policy!

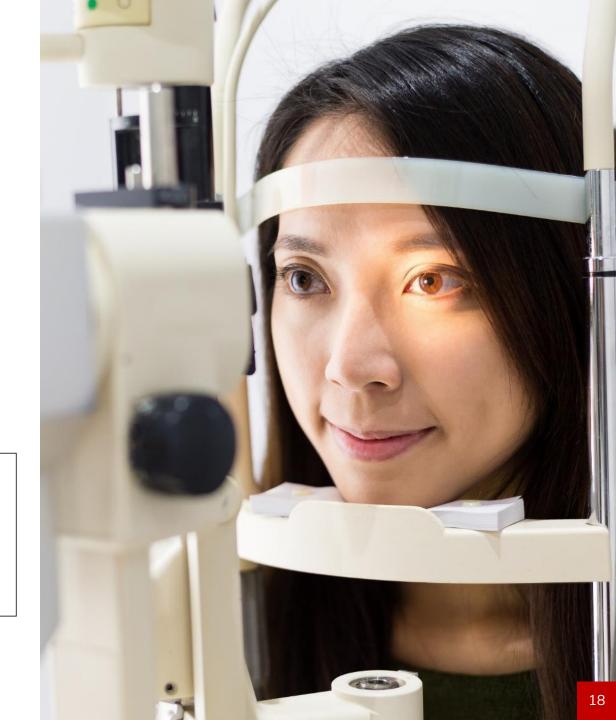
If you leave Diné Development Corporation, you can take this benefit with you.

Vision Plans

MetLife Vision Plan

Plus these extra benefits:

- "Second pair" discount for computer glasses, reading glasses, or prescription sunglasses
- Discounts on LASIK and PRK



Vision Plan Comparison*

MetLife Vision Plan VSP Choice Network

Exam Copay	Coverage	\$20
	Frequency	1 per 12 months
Materials Copay	Coverage	\$20
Frames	Coverage	Covered in full up to \$130 + 20% off remaining balance
	Frequency	1 per 12 months
Lenses	Coverage	Single Vision: 100% after \$20 materials copay Bifocal: 100% after \$20 materials copay Trifocal: 100% after \$20 materials copay
	Frequency	1 per 12 months
Contacts	Coverage	Covered in full up to \$130 (instead of eyeglasses)
	Frequency	1 per 12 months

^{*}In-network amounts only — refer to your summary plan description or MyBenefits.Life® for full plan details.



Healthcare Accounts

Health savings account (HSA)

Flexible spending account (FSA)

Health Savings Account (HSA)

Five reasons to consider the HSA

- 1. Personal savings account for healthcare expenses—office visits, labs, dental, vision, prescriptions, and more.
- 2. Tax-free contributions, expenses, earnings (you can invest any amount over \$2,000).
- 3. Use for spouse and tax-dependent children even if not on your health plan.
- 4. Unlimited rollover of unused balance.
- 5. Extra retirement savings! After 65, use HSA for healthcare expenses (tax-free) or regular living expenses (taxable).



Bonus! DDC helps you save! Administered by AdminAmerica

Health Savings Account (HSA)

IRS Annual Contribution Limit (including DDC contributions)

- Individual Coverage: \$4,300 per year
- Family Coverage: \$8,550 per year
- Contribute an additional \$1,000 per year if age
 55 or older

DDC Contributions

Individual Coverage: \$1,200

Family Coverage: \$1,400

Health Savings Account (HSA)

Is it right for me? It is if you ...

- are enrolled in the Cigna HSA 1650 or the Cigna HSA 3000
- want to save on taxes
- want to pay for healthcare services with tax-free dollars and build a healthcare fund for the future
- are not someone's tax dependent
- are not enrolled in Medicare, Medicaid or Tricare
- your spouse does not have a general-purpose healthcare flexible spending account (FSA)



Check out the easy guide for more details!

Healthcare Flexible Spending Account (FSA)

5 reasons to look into the FSA

1. Tax-free account for healthcare expenses

- 2. Pay for eligible healthcare expenses—office visits, lab tests, dental and vision care, prescriptions, over-the-counter medicines
- 3. If you or your spouse are enrolled in an HSA, you have the option to contribute to a Limited Purpose FSA, which is used to pay for eligible dental and vision expenses only
- 4. Use for spouse and tax-dependent children even if they are not covered by your health plan
- 5. Funded by pre-tax contributions from your paycheck—up to \$3,300 per year
- 6. Funds available on first day of plan year

USE IT OR LOSE IT

\$660 rollover limit

Healthcare Flexible Spending Account (FSA)

Is it right for me? It is if you ...

- want to save on taxes and healthcare expenses
- can estimate the healthcare expenses you expect your family to have from January 1 2025, through December 31, 2025
- limited-purpose FSA is available for employees enrolled in the HSA and can be used to reimburse dental and vision expenses only
- can commit to payroll deductions for the coming year (your total election divided by 24)

AdminAmerica FSA

You must re-enroll every year during open enrollment.

What Expenses Are Allowed for an HSA or FSA?

Common Eligible Expenses

- Acupuncture
- Ambulance
- Artificial limbs
- Artificial teeth*
- Birth control treatment
- Blood sugar test kits for diabetics
- Breast pumps, lactation supplies
- Chiropractor
- Contact lenses and solutions*
- Crutches
- Dental treatments*
- Doctor's office visits and copays
- Drug addiction treatment

- Drug prescriptions
- Eyeglasses (Rx and reading)*
- Fluoride treatments*
- Hearing aids and batteries
- Infertility treatment
- Inpatient alcoholism treatment
- Insulin
- Laboratory fees
- Laser eye surgery*
- Menstrual care products
- Orthodontics*
- Orthotic inserts
- Over-the-counter medications without a prescription

- Prescription drugs
- Speech therapy
- Surgery, excluding cosmetic
- Telehealth visits
- Vasectomy
- Vision exam*
- Walker, cane, wheelchair

Common Ineligible Expenses

- Aromatherapy
- Baby bottles and cups
- Baby oil
- Baby wipes
- Cosmetics and skin care
- Cosmetic surgery
- Cotton swabs
- Dental floss
- Deodorants
- Hair re-growth supplies & services
- Health club membership dues
- Humidifier
- Lotion
- Low-calorie foods
- Mouthwash
- Petroleum jelly
- Shampoo and conditioner

^{*}allowed for HSA owners enrolling in limited purpose FSA (dental and vision only)



ENGAGE WITH YOUR HEALTH

The right care at the right time

Preventive care

Health-enhancing programs



Know Where To Go

Туре	Appropriate for	Access	Cost
Nurseline	Quick answers from a trained nurse, home care advice	24/7	\$0
Online visit	Minor illnesses and conditions (colds, allergy, rash), mental health issues	24/7	\$
Office visit	Preventive and routine medical care (illness, injuries, physical and mental health)	Office Hours	\$\$
Urgent care, Walk-in clinic	Conditions that are not life-threatening but require prompt attention (cuts, sprains, flu)	Varies, up to 24/7	\$\$
Emergency room	Life-threatening conditions requiring immediate medical expertise (heart attack, stroke, difficulty breathing)	24/7	\$\$\$\$

Alternative Facilities

Need	Alternative	Features	Average Savings (In-Network)
Surgery	Ambulatory Surgery Center (ASC)	 Same-day surgeries Cataracts, colonoscopies, upper GI endoscopy, orthopedic surgery and more Held to same safety standards as hospitals 	Up to 50% over hospital
Physical Therapy	Physical therapy center	Recovery after an injury or surgery	40 to 60% over hospital
Sleep Study	Home testing	 Diagnoses sleep apnea and other conditions Cost often covered by insurance if medically necessary 	Approx. \$4,500
Infusion Therapy	Home or outpatient infusion therapy	 Intravenous injections, or epidurals Delivered by licensed infusion therapy provider Maintain normal lifestyle and comfort 	Up to 90% over hospital

Preventive Care

Preventive care is 100% covered in-network

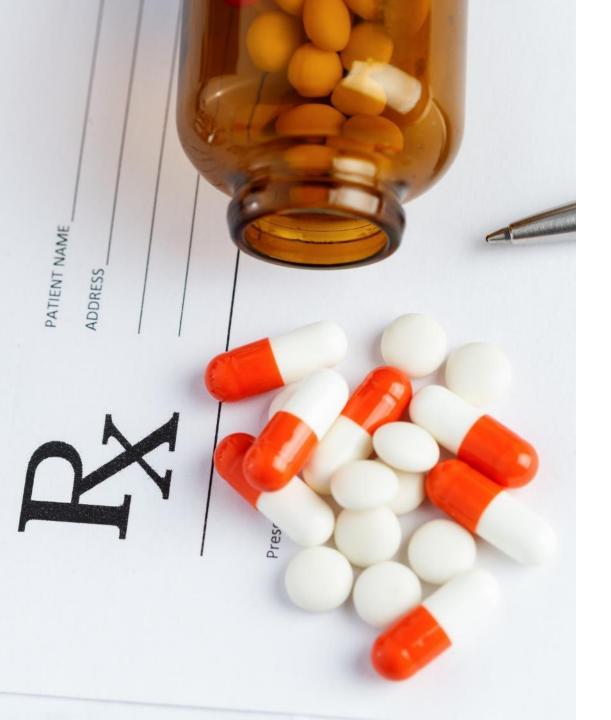
- Preventive care = annual exam and lab tests to monitor health and detect potential issues
- Not all exams and tests are considered preventive
- Check with your health plan if you have questions

Typical Screenings for Adults

- Blood pressure
- Cholesterol
- Diabetes
- Colorectal cancer screening
- Depression

- Mammogram
- OB/GYN screening
- Prostate cancer screening
- Testicular exam





Prescription Drugs

Money-saving tips

- Always ask your doctor if a generic drug is available.
- Check the plan's formulary (approved drug list). Visit the plan website or call Member Services.
- Ask about 90-day mail order supply for maintenance medications.



Basic Life and AD&D Insurance through The Hartford

- Cost paid in full by DDC
- \$150,000 flat benefit amount
- All coverage is guaranteed issue
- Benefit amounts reduce at age 65. Refer to plan document for details



A NOTE ABOUT TAXES

Company-provided life insurance coverage over \$50,000 is considered a taxable benefit. The value of the benefit over \$50,000 will be reported as taxable income on your annual W-2 form. A waiver form is available from HR for the amount above \$50,000.

Short-Term Disability (STD) through The Hartford

- 60% per week, up to a maximum of \$3,000
- Accident: Benefits begin after 7 days
- Sickness: Benefits begin after 7 days
- Benefits payable for up to 13 weeks (based on first day you are disabled)



Income Replacement for Limited-Duration Issues

Prolonged illness or injury
Surgery and recovery time
Pregnancy issues and childbirth
recovery



Long-Term Disability (LTD) through The Hartford

Income replacement for longer-duration issues

- 60% per month up to a maximum of \$10,000
- Benefits begin after 90 days of disability
- Benefits payable up to your normal Social Security Retirement Age if disabled prior to age 63 (see plan document for benefit duration details for age 63 and older)



Voluntary Life and AD&D Insurance

Whole Life Insurance

Supplemental Health Insurance

Pet Insurance



Voluntary Life and AD&D Insurance through The Hartford

Employee \$10,000 increments up to the lesser of 5x earnings or \$500,000.

Guaranteed issue of \$150,000.

Spouse \$5,000 increments up to the lesser of 50% of employee's benefit

or \$100,000. Guaranteed issue of \$50,000.

Child(ren) \$10,000 (\$250 benefit for ages 15 days to 6 months).

Whole Life Insurance through MassMutual

- Guaranteed level premiums
- Guaranteed Issue up to \$100K
- Simplified guarantee issue up to \$250K
- Guaranteed increases in cash-value
- Guaranteed death benefit
- Permanent and portable coverage
- Potential for dividends
- Chronic Care benefit included

Accident Insurance through Aflac

Provides benefits for a wide range of common injuries and services.

Benefits can be used however you see fit!

Covered Injuries and Services Include

- Broken bones
- Burns
- Emergency Room Visits
- Concussions
- Eye injuries

- Hospitalization
- Lacerations
- Physical therapy
- Follow-up care
- and more!



Wellness Benefit

You and each of your enrolled dependents are eligible for a \$90 wellness benefit under the Accident Plan.

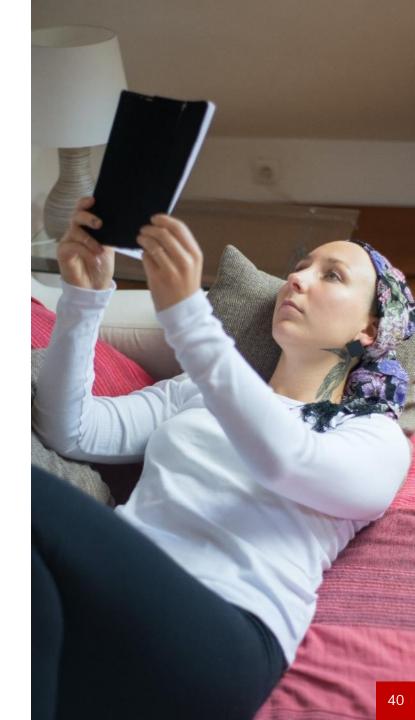


Critical Illness, Critical Care & Recovery and Cancer Insurance through Aflac

Fills a financial gap if you experience a serious illness such as cancer, heart attack or stroke.

Lump-sum benefit immediately upon diagnosis of a covered condition.

Use the benefit as you see fit!





Hospital Indemnity Insurance through Aflac

Enhances your current medical coverage

Benefit available for hospital admission and stays

Use the benefit as you see fit!

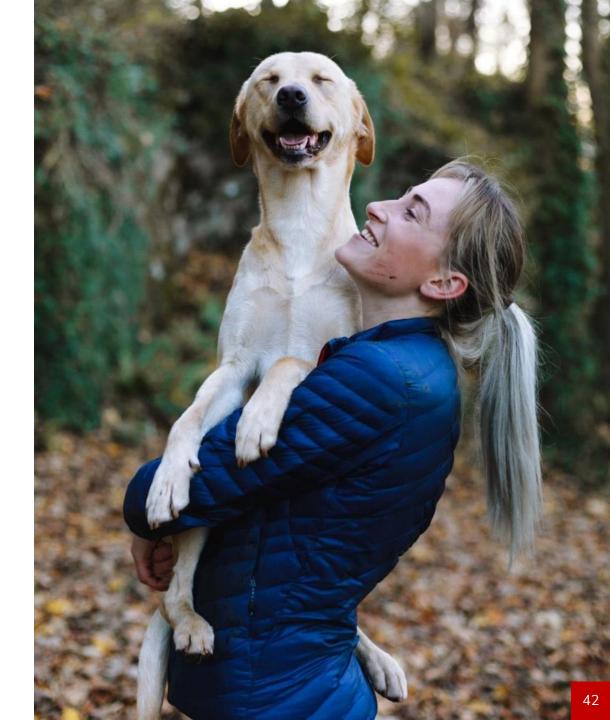


Pet Insurance

Save money on vet bills

Protection through Total Pet Plan or Wishbone Pet Insurance

 Helps cover expensive medical bills if your pet becomes ill or injured





Dependent Care Flexible Spending Account (FSA)

How it works

- Funded by pre-tax contributions from your paycheck—up to \$5,000 per household per year
- Election is binding unless you have a change in status
- FSA and/or dependent care tax credit?
 Talk to a tax advisor
- Use it or lose it: No rollover! No spending on healthcare FSA!

3 reasons to consider the dependent care FSA

- You pay for preschool, day care, before/after school programs, and/or summer day camp so you and your spouse can work.
- You have children under 13 and/or adult dependents who need day care.
- You want to save on taxes.
- Note: You must re-enroll every year for the AdminAmerica dependent care FSA.

Transportation Savings Account

The AdminAmerica transportation savings account has flexible options:

- Pre-tax contributions/purchases
- Contribute up to \$325 per month for parking or transit expenses
- Submit claims and get reimbursed
- Manage account at AdminAmerica.com
- Cancel future deductions if your commuting needs change



Is it right for me? It is if you

...

- want to save on taxes
- have out-of-pocket commuting expenses (public transportation, vanpool, parking)



Employee Assistance Program

The Ability Assist EAP through The Hartford is free for you and your household members.

- Help with emotional health, substance use disorder, parenting/childcare needs, financial coaching, legal consultation, and eldercare resources.
- Unlimited phone access 24/7.
- In-person or video counseling for short-term issues; up to 3 visits per occurrence per year.
- Unlimited access to website resources.



CONTACT THE EAP

Phone:

(800) 964-3577

Website:

www.guidanceresources.com

Mental Health Resources

In-Network Mental Health Services*		
	Outpatient	Inpatient
Cigna OAP 500	Office Visit: \$80 office visit Other Outpatient Services: 0% coinsurance (deductible waived)	0% after deductible
Cigna OAP 1000	Office Visit: \$60 office visit Other Outpatient Services: 20% coinsurance (deductible waived)	20% after deductible
Cigna HSA 1650	0% after deductible	0% after deductible
Cigna HSA 3000	20% after deductible	20% after deductible



Mental Health Services Through Cigna

Video or phone consult with a provider anywhere, any time.

To learn more and set up your account, go to myCigna.com.

^{*}Refer to your summary plan description or DDC.MyBenefits.Life® for out-of-network coverage.

Well-Being Discounts

LifeBalance works like an online coupon book, offering discounts at thousands of participating businesses nationwide, such as:

- Fitness studios
- Online retailers
- Sporting goods stores
- Amusement parks

- Movie theaters
- Hotels
- Ski resorts
- Pet Benefits



Never get so busy making a living that you never make a life!

Member Services

(888) 754-5433

info@LifeBalanceProgram.com



Enrollment Checklist

Open enrollment begins on November 4th and ends on November 12th.

This is an active Open Enrollment, which means you must enroll in benefits to be covered for the 2025 plan year.



Thank you for watching!