

2025

benefits guide



Benefits@ClaytonHomes.com

Clayton
benefits

Clayton[®] benefits



The 2025 Benefits Guide is not intended to act as a Summary Plan Description and does not change the terms of the plan. In the event this guide conflicts with the terms of the plan, the plan term governs. Please email Benefits@ClaytonHomes.com to request a copy of Summary Plan Descriptions.



Welcome to your **Clayton Benefits**

We strive to offer a comprehensive benefits package that **enhances the health and wellbeing for you and your family and ensures you have access to high-quality healthcare providers and medical services.**

As part of your medical plan enrollment, you receive free access to Garner's Top Provider search tool that identifies the top 20% of performing providers who have a track record of producing excellent patient outcomes and reviews. **Garner empowers you to make an informed decision on who is the best care team for your unique medical needs.** As an added benefit, when you visit Garner approved providers, your out-of-pocket costs that qualify will be reimbursed, **up to \$3,000 for family and \$1,500 for individual plans!**

Our medical plans are designed to be **SIMPLE**. You will only pay a copay (flat fee) for in-network care and services with no deductibles or co-insurance, helping eliminate surprise medical bills. This will help you plan and budget for out-of-pocket costs, making it even easier to get the care you need!

To assist those who take medications for chronic conditions, over 100 prescription drugs are covered at no cost! Review the 2025 free prescription drug list on pages 17 & 18.



Your benefits at a glance

medical



top provider directory

garner

diabetes reversal



pharmacy



telehealth



voluntary insurance



health care & dependent FSA

Optum Financial®

dental



vision



life insurance & LTD



short-term disability

AbsenceOne™

paid parental leave



identity theft protection



401(k)



additional support



new for
20
25



now available for sustainable weight loss

For the past two years, Virta has helped many Clayton Team Members and family reverse diabetes. Members have transformed their lives by lowering blood glucose levels and reducing or eliminating diabetes medications. With Virta's Sustainable Weight Loss program, members can prevent receiving any type of diabetes diagnosis and lose weight without counting calories.



Learn more on pages 15 - 16

Enrollment for Virta for Sustainable Weight Loss will be available October 1, 2024.

FREE for Team Members and family enrolled in the Clayton medical plan.

When can I enroll?

new hires

- Benefits are effective on your 31st day of employment.
- You must complete your benefits enrollment no later than your effective date.
- Late enrollments are not accepted.

life events

- You can make changes mid-year if you have a life event (marriage, divorce, loss of coverage, birth of child, etc).
- You must complete your benefits enrollment within 31 days.
- Supporting documents will be required.

open enrollment

- Each year you will be given an opportunity to change, elect or drop coverage.
- Changes are effective January 1st and will remain in place for one year.

coverage ends

- If you separate with the company, your insurance coverage ends on your last day of employment.
- If necessary, COBRA information will be mailed to your home address.



Who can I enroll on my plan?

● eligible dependents

- Your legally married spouse
- **Children under age 26:** including biological, adopted, placed for adoption, foster, step children and children who you are legally appointed as guardian or limited guardian (cannot be temporary).
- **Disabled Children:** including your unmarried child who is primarily supported by you and is incapable of engaging in self-sustaining employment due to mental or physical disability, if the child is already covered as your dependent when the child reaches 26. You and your disabled child's physician must complete and return the disabled child certification form within 31 days after the child reaches 26 in order to continue dependent coverage for the child without interruption. A new certification form must be submitted annually to prove the child continues to meet all the requirements for dependent coverage as a disabled child. Contact Benefits@ClaytonHomes.com for more information.

● who is not a qualified dependent?

- Boyfriend, girlfriend, fiancé or domestic partner
- Parents
- Grandparents
- Brothers or sisters
- Aunts, uncles, nieces, nephews, cousins or similar relatives
- Your child who is also covered under the plan as a team member
- Divorced former spouse or legally separated spouse (unless coverage is continued under COBRA)
- Any person on active duty in the military (life insurance plan only)
- Other persons living in your home who are not eligible as defined in the plan



How do I enroll?



Log on to:
workday.claytonhomes.com



Scan Here to
download the
Workday app!

medical plan comparison



Deductible	\$0	\$0	
Medical Copays			
Preventive Care	Free	Free	
Telehealth	Free	Free	
Lab	Free	Free	
Eligible For \$0 Copay After Garner Reimbursement			*with garner
Primary Care Physician	\$50	\$30	\$0
OB / GYN	\$50	\$30	\$0
Outpatient Therapy (ex. mental health or substance abuse)	\$50	\$30	\$0
Physical, Speech or Occupational Therapy	\$60	\$40	\$0
Chiropractor	\$60	\$40	\$0
Urgent Care	\$75	\$50	\$0
Standard Radiology (ex. x-ray or ultrasound)	\$90	\$60	\$0
Specialist	\$150	\$70	\$0
Durable Medical Equipment	\$150	\$100	\$0
Advanced Imaging (ex. MRI, CAT or PET scan)	\$600	\$240	\$0
Outpatient Procedure / Surgery	\$850	\$425	\$0
Inpatient Stay	\$1,500 / Day	\$750 / Day	
Ambulance	\$700	\$350	
Emergency Room	\$1,000	\$500	
Pharmacy Copays			
30-Day Supply	Generic	\$20	\$10
	Preferred Brand Name	\$120	\$60
	Non-preferred / Specialty	\$250	\$150
90-Day Supply	Generic	\$50	\$25
	Preferred Brand Name	\$300	\$150
	Non-preferred / Specialty	\$625	\$375
Combined Medical & Pharmacy Out-of-pocket Maximum	\$6,000 per individual or \$12,000 combined family maximum	\$4,000 per individual or \$8,000 combined family maximum	
Weekly Premiums			
Team Member Only	\$25.18	\$47.27	
Team Member + Spouse	\$55.42	\$101.53	
Team Member + Child(ren)	\$45.33	\$82.93	
Team Member + Family	\$75.55	\$118.60	

Please Note: if the service or prescription charge is lower than the copay, you will pay the lesser amount.

*Up to \$3,000 for family and \$1,500 for individual plans. See pages 11 - 14 to learn more about how these copays can qualify for reimbursement through your Garner Benefit.



ELIGIBLE FOR GARNER
REIMBURSEMENT

	In-Network	Out-Of-Network
Deductible	\$0	\$5,000 per individual or \$10,000 combined family maximum
Medical Copays		
Preventive Care	Free	
Telehealth	Free	
Lab	Free	
		*with garner
Primary Care Physician	\$50	\$0
OB / GYN	\$50	\$0
Outpatient Therapy (ex. mental health or substance abuse)	\$50	\$0
Physical, Speech or Occupational Therapy	\$60	\$0
Chiropractor	\$60	\$0
Urgent Care	\$75	\$0
Standard Radiology (ex. x-ray or ultrasound)	\$90	\$0
Specialist	\$150	\$0
Durable Medical Equipment	\$150	\$0
Advanced Imaging (ex. MRI, CAT or PET scan)	\$600	\$0
Outpatient Procedure / Surgery	\$850	\$0
Inpatient Stay	\$1,500 / Day	
Ambulance	\$700	\$700
Emergency Room	\$1,000	\$1,000
Pharmacy Copays		
30-Day Supply	Generic	\$20
	Preferred Brand Name	\$120
	Non-preferred / Specialty	\$250
90-Day Supply	Generic	\$50
	Preferred Brand Name	\$300
	Non-preferred / Specialty	\$625
Combined Medical & Pharmacy Out-of-pocket Maximum		\$6,000 per individual or \$12,000 combined family maximum
		\$10,000 per individual or \$20,000 combined family maximum

Enrollment Group	Weekly Premium
Team Member Only	\$25.18
Team Member + Spouse	\$55.42
Team Member + Child(ren)	\$45.33
Team Member + Family	\$75.55

***Up to \$3,000 for family and \$1,500 for individual plans.** See pages 11 - 14 to learn more about how these copays can qualify for reimbursement through your Garner Benefit.



ELIGIBLE FOR GARNER
REIMBURSEMENT

	In-Network	Out-Of-Network
Deductible	\$0	\$3,000 per individual or \$6,000 combined family maximum
Medical Copays		
Preventive Care	Free	
Telehealth	Free	
Lab	Free	
		*with garner
Primary Care Physician	\$30	\$0
OB / GYN	\$30	\$0
Outpatient Therapy (ex. mental health or substance abuse)	\$30	\$0
Physical, Speech or Occupational Therapy	\$40	\$0
Chiropractor	\$40	\$0
Urgent Care	\$50	\$0
Standard Radiology (ex. x-ray or ultrasound)	\$60	\$0
Specialist	\$70	\$0
Durable Medical Equipment	\$100	\$0
Advanced Imaging (ex. MRI, CAT or PET scan)	\$240	\$0
Outpatient Procedure / Surgery	\$425	\$0
Inpatient Stay	\$750 / Day	
Ambulance	\$350	\$350
Emergency Room	\$500	\$500
Pharmacy Copays		
30-Day Supply	Generic	\$10
	Preferred Brand Name	\$60
	Non-preferred / Specialty	\$150
90-Day Supply	Generic	\$25
	Preferred Brand Name	\$150
	Non-preferred / Specialty	\$375
Combined Medical & Pharmacy Out-of-pocket Maximum		\$4,000 per individual or \$8,000 combined family maximum
		\$8,000 per individual or \$16,000 combined family maximum

Enrollment Group	Weekly Premium
Team Member Only	\$47.27
Team Member + Spouse	\$101.53
Team Member + Child(ren)	\$82.93
Team Member + Family	\$118.60

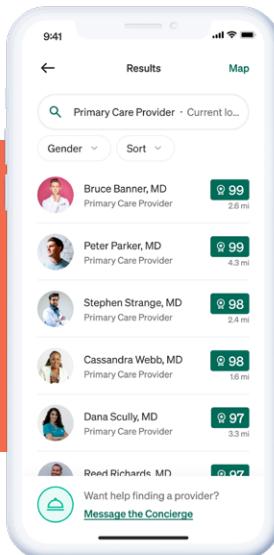
***Up to \$3,000 for family and \$1,500 for individual plans.** See pages 11 - 14 to learn more about how these copays can qualify for reimbursement through your Garner benefit.

GARNER

Garner has compiled and analyzed the largest medical claims database in the United States to identify the **top 20% of all in-network providers**. By using Garner's Top Provider search tool, feel more empowered to make an informed decision on who are the best in-network providers for your unique medical needs.

top providers have shown to

- ✓ Practice based on latest medical research
- ✓ Successfully diagnose problems
- ✓ Get the highest patient satisfaction ratings
- ✓ Produce the best patient outcomes



get rewarded with garner!

Garner reimburses your out-of-pocket costs that qualify, up to **\$3,000 for family** and **\$1,500 for individual plans** when you see **Garner approved providers**!

FREE for Team Members and family on the Clayton medical plan!

garner

GARNER CONTACT INFO
mygarnerguide.com // (866) 761-9586
Message the Concierge in the app



GARNER

top providers

Top Providers are the best-performing medical professionals that Garner has identified through an analysis of over 60 billion medical records. **Top Providers are the top 20% of all providers in the industry.** They are highlighted in the Garner Health app with a green **Top Provider** badge and represent the best available doctors near you who are in-network and have appointment availability. When you choose to visit Garner approved providers, all copays for qualified visits and services will be reimbursed, **up to \$3,000 for family and \$1,500 for individual plans.**

eligible providers

- ✓ Primary Care Provider
- ✓ Pediatrician
- ✓ Physical Therapist
- ✓ Urgent Care Clinic
- ✓ Mental Health Therapist
- ✓ Imaging or Lab Work
- ✓ Advanced Imaging (MRI or CT scan)
- ✓ Specialists (ex. Orthopedist, Cardiologist or Oncologist)



Garner has no financial relationships with doctors. Recommendations are based solely on independent analysis, not commissions or fees. Garner does not reimburse prescriptions, emergency room visits, services not covered by the health plan or services covered by your dental or vision insurance.

garner

GARNER CONTACT INFO
mygarnerguide.com // (866) 761-9586
Message the Concierge in the app



GARNER

get started

Before you seek medical care, connect with Garner! Use Garner when you need a new provider or to verify your current medical team meets Garner's high-quality metrics. Follow these instructions to take advantage of your Garner benefit.

sign up

Download the **Garner Health App** for the best experience or visit mygarnerguide.com.

Click "Create An Account" & enter Organization Name:

Cigna Medical Plan:
Clayton Homes - Cigna

BCBS Medical Plan:
Clayton Homes - BCBS



scan here to
get started!

search top providers

You must always ensure your doctor is added to your Garner approved providers list before you see them to qualify for copay reimbursement. Copays will not be eligible for reimbursement for any date of service prior to adding your provider to your approved providers list.

How to add Top Providers to your approved providers list on your family account:

- Search providers by symptom, procedure, specialty, condition or provider's name.
- Click a doctor's name with the Top Provider badge.
- Look for a green banner that states "**Approved for your Garner Benefit**".

Now you're all set! All qualified visits for you and your covered family members will be eligible for your Garner copay reimbursement! To see a list of providers on your family account, go to Settings and click "**Approved Providers**".

get rewarded

Up to **\$1,500** for individuals and **\$3,000** for families on the Clayton medical plan! When you visit Garner approved providers, your out-of-pocket copays for qualified visits are automatically reimbursed. **No documentation necessary!**

garner

GARNER CONTACT INFO
mygarnerguide.com // (866) 761-9586
Message the Concierge in the app



GARNER

How are medical claims reimbursed?

When you receive care from a Garner approved provider, pay your upfront copays as usual. **After your medical insurance processes the claim, Garner will reimburse your qualifying out-of-pocket medical costs.**

New for 2025

Starting January 1, get reimbursed up to two weeks faster with direct deposit. Plus, view the details of your paid claims and past reimbursements right in your Garner app.

Garner Concierge

Garner provides all members with access to a Garner Concierge who is available to help you find providers and answer questions about your account.

Available: Monday - Friday

8am - 8 pm Eastern

Message the Concierge in the app

Email concierge@getgarner.com

Call (866) 761-9586



IMPORTANT: Can I use my Health Care FSA dollars to pay for copays?

You may need to reconsider how much you elect to contribute to your Health Care FSA account for 2025. Since Garner will reimburse out-of-pocket copays, **you may not need to contribute the same amount to your FSA as you historically have.** Due to IRS regulations, you are not able to use FSA dollars to pay for medical expenses that will be reimbursed by Garner.

garner

GARNER CONTACT INFO
mygarnerguide.com // (866) 761-9586
Message the Concierge in the app



VIRTA

TYPE 2 DIABETES REVERSAL & SUSTAINABLE WEIGHT LOSS

Virta Health has been clinically proven to help members lose weight and reverse type 2 diabetes and prediabetes—simply by using food as medicine. Working with a medical care team, you'll learn to shift what you eat (not how much) to naturally manage blood sugar, lose weight and reduce medications.

- **Reverse Type 2 Diabetes**

Lower your blood sugar to sub-diabetic level while reducing or eliminating diabetes medications.

- **Reverse Prediabetes**

Stop prediabetes in its tracks and prevent rising blood sugar levels.

- **Sustainable Weight Loss | NEW**

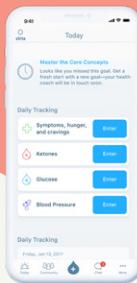
Lose weight and keep it off with Virta's personalized nutrition program. **Available October 1, 2024**

FREE

for eligible Team Members and family enrolled in the Clayton medical plan!



DOWNLOAD
the app!



VIRTA CONTACT INFO
virtahealth.com/join/clayton // (844) 847-8216

VIRTA

TYPE 2 DIABETES REVERSAL & SUSTAINABLE WEIGHT LOSS

eligibility

- ✓ Team Members, spouses and dependents who are 18+ years old
- ✓ Must be enrolled in the Clayton medical plan
- ✓ Type 2 Diabetes Reversal: For individuals with type 2 diabetes or A1C of 6.5% or higher
- ✓ Prediabetes Reversal: For individuals with prediabetes or A1C of 5.7% - 6.4%
- ✓ Sustainable Weight Loss: For individuals with body mass index (BMI) of 25 or higher

what's included

Everything you need for better health.

- Personalized nutrition program
- Dedicated health coach
- Physician-led care team
- Virta starter kit including connected scale
- Free diabetes testing supplies for patients with type 2 diabetes
- Meal plans, member community, and more!



To learn more or enroll, visit
virtahealth.com/join/clayton



VIRTA CONTACT INFO
virtahealth.com/join/clayton // (844) 847-8216

2025 free prescription drug list

In an effort to assist Team Members and their families who take essential medications for chronic conditions, the below list of drugs are **completely free to you and any covered dependents** as part of your medical plan in 2025. These drugs are free when you fill a 30 or 90 day supply through a retail or mail order pharmacy.

Respiratory	Depression	Cholesterol Lowering	Diabetes
Albuterol (HFA, nebulizer solution, oral) Arformoterol Budesonide Oral Inhalation Cromolyn Nebulizer Solution Formoterol Ipratropium / Albuterol Nebulizer Solution Ipratropium Nebulizer Solution Levabuterol Nebulizer Solution Metaproterenol Montelukast Terbutaline Oral Theophylline Wixela Inhub Zafirlukast Zileuton Er	Citalopram Escitalopram Fluoxetine Fluvoxamine Paroxetine Paroxetine Er Sertraline	HMG-COA REDUCTASE INHIBITORS Atorvastatin Fluvastatin Lovastatin Pravastatin Rosuvastatin Simvastatin OTHER CHOLESTEROL LOWERING AGENTS Amlodipine / Atorvastatin Cholestyramine Cholestyramine Light Colesevelam Colestipol Ezetimibe Ezetimibe / Simvastatin Fenofibrate Fenofibric Acid Gemfibrozil Niacin Prevalite	Acarbose Generic Lancet Generic Needles Generic Syringe Glimepiride Glipizide Er Glipizide / Metformin Glyburide Glyburide / Metformin Metformin Metformin Er Miglitol Nateglinide Pioglitazone Pioglitazone / Glimepiride Pioglitazone / Metformin Repaglinide Repaglinide / Metformin
Bone Disease	Dental	Heart Disease & Stroke	Colorectal
Alendronate Ibandronate Raloxifene Risedronate Zoledronic Acid 5mg	Periomed Sodium Fluoride (Rinse, Gel, Cream, Paste, Tabs, Drops)	BLOOD THINNERS Aspirin 325 mg Aspirin 81mg Aspirin-Dipyridamole Er Clopidogrel Dipyridamole Prasugrel Warfarin	COLONOSCOPY PREP Gavilyte-C Gavilyte-G Gavilyte-N Polyethylene Glycol Trilyte

High Blood Pressure			Tabacco Cessation
ACE INHIBITORS	ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS	CALCIUM CHANNEL BLOCKERS	Bupropion Sr 150mg Nicotine Gum Nicotine Lozenges Nicotine Patches
Benazepril Captopril Enalapril Fosinopril Lisinopril Moexipril Perindopril Quinapril Ramipril Trandolapril	Candesartan / Hctz Irbesartan / Hctz Losartan / Hctz Olmesartan / Hctz Telmisartan / Hctz Valsartan / Hctz	Amlodipine Cartia Xt Diltiazem Diltiazem Cd Diltiazem Er Felodipine Er Isradipine Matzim La Nicardipine Nifedipine Er Nisoldipine Er Tiadylt Er Taztia Xt Verapamil Verapamil Er Verapamil Er PM Verapamil Sr	Malaria
ACE INHIBITORS / DIURETIC COMBINATIONS	BETA BLOCKERS	OTHER HIGH BLOOD PRESSURE COMBINATIONS	Atovaquione / Proguanil Chloroquine Mefloquine Primaquine
Benazepril / Hctz Captopril / Hctz Enalapril / Hctz Fosinopril / Hctz Lisinopril / Hctz Moexipril / Hctz Quinapril / Hctz	Acbeutolol Atenolol Betaxolol Bisoprolol Metoprolol Succinate Er Metoprolol Tartrate Nadolol Pindolol Propranolol Propranolol Er Timolol	Amlodipine / Atorvastatin Amlodipine / Benazepril Amlodipine / Olmesartan Amlodipine / Olmesartan / Hctz Amlodipine / Telmisartan Amlodipine / Valsartan Amlodipine / Valsartan / Hctz Trandolapril / Verapamil	Vitamins
ANGIOTENSIN II RECEPTOR ANTAGONISTS	BETA BLOCKERS / DIURETIC COMBINATIONS		Generic Pediatric Multivitamins with Flouride Folic Acid Generic Prenatal
Candesartan Eprosartan Irbesartan Losartan Olmesartan Telmisartan Valsartan	Atenolol / Chlorthalidone Bisoprolol / Hctz Metoprolol / Hctz Nadolol / Bendroflumethiazide Propranolol / Hctz		Obesity
			Benzphetamine Diethylpropion Phendimetrazine Phentermine
			Diuretics
			Chlorothiazide Chlorthalidone Hydrochlorothiazide Indapamide Metolazone

Please note, these are in addition to any prescriptions that are free under the Affordable Care Act (ACA). This list is subject to change at any time. For the most up to date information, contact Express Scripts.



EXPRESS SCRIPTS CONTACT INFO
express-scripts.com // (855) 634-0226



TELEMEDICINE

get started!

Register for an account before you need care.

- ✓ Download the MDLive or Teladoc app.
- ✓ Register for an account.
(Make sure to have your insurance ID card available.)

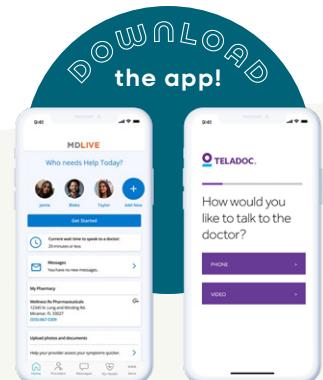
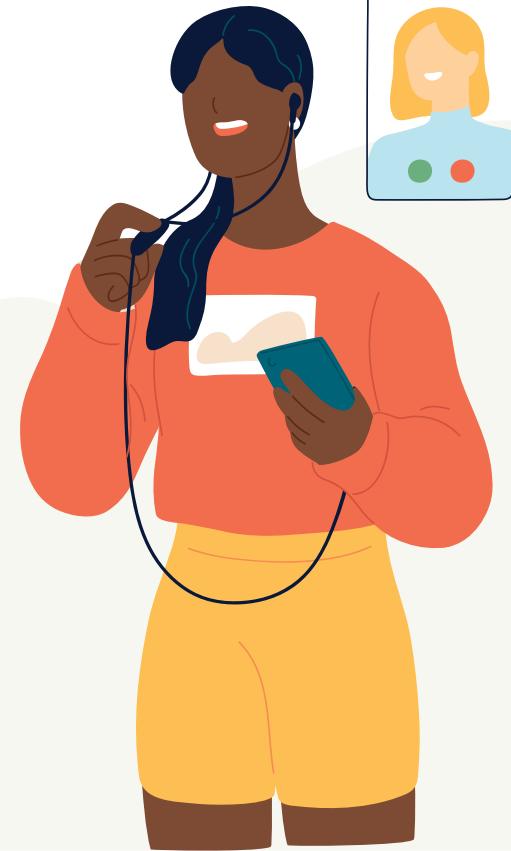
24/7 ACCESS to board certified doctors from where it's most convenient for you – home, office or on the go! Day or night, weekends and holidays!

common conditions treated

- Cold & Flu Symptoms
- Ear Infections
- Fevers
- Respiratory & Sinus Issues
- Behavioral & Mental Health

Telehealth is not appropriate for every medical condition and should not be used in the event of a medical emergency. In case of a medical emergency, you should dial 911 immediately. State restrictions may apply.

FREE for Team Members and family enrolled in the Clayton medical plan!



MDLIVE (CIGNA MEDICAL PLANS)
mdliveforcigna.com // (888) 726-3171

TELEDOC (BCBS MEDICAL PLANS)
teladoc.com/alabama // (855) 477-4549

VOYA PLANS

Accidents, hospitalizations and critical illnesses can happen unexpectedly and be financially challenging. These coverages pay you a benefit determined by the plan you select and the health event **to provide you and your family financial assistance during unforeseen health matters.**

Keep in mind, these plans are not health insurance, but rather a supplement to your existing medical plan. No underwriting is required.

Here are a few examples of how accident, hospital indemnity and critical illness insurance benefits could be used:

- Medical expenses, such as copays or prescriptions
- Everyday expenses like utilities and groceries
- Lost income due to missed time at work
- Home healthcare costs



how to file a claim

- Step 1:** Visit Voya's Claims Center at voya.com/claims and click on "Start A Claim"
- Step 2:** Complete the questionnaire
- Step 3:** Download your claim form package, if applicable
- Step 4:** Complete the form package and gather supporting documents (if applicable)
- Step 5:** Submit your claim



VOYA CONTACT INFO
presents.voya.com/ebrc/claytonhomes
// (877) 236-7564



VOYA PLANS

preventive care benefit

Get paid for completing your preventive care visits!

By enrolling in any of the VOYA plans, **you and your covered dependents can each get paid \$50 annually** simply by completing one recommended health exam. To receive the \$50 payment per individual, submit a claim through VOYA within 60 days of your visit.

Please note, each covered individual may only receive a \$50 payment once annually per line of coverage, even if you complete multiple health screenings. There is a \$200 maximum child payment per line of coverage.

examples of covered health screenings

- ✓ Routine Eye Exam
- ✓ Prostate Cancer Screening
- ✓ Fasting Blood Glucose
- ✓ Well Child / Preventive Exams Through Age 18
- ✓ Routine Dental Exam
- ✓ Biometric Scanning
- ✓ Adult Annual Physical
- ✓ COVID-19 Test/Vaccine
- ✓ Mammography
- ✓ Hearing Test
- ✓ Stress Test
- ✓ Colonoscopy



VOYA CONTACT INFO
presents.voya.com/ebrc/claytonhomes
// (877) 236-7564



ACCIDENT INSURANCE

Accidents can result in unplanned medical expenses. While our medical plans offer set copays allowing you to know exactly what you will pay, other expenses are still associated with an accident that you may have not budgeted for such as an ambulance ride, ER visit, x-ray and follow up treatments. **By enrolling in Accident coverage, you will receive a lump sum payment per covered medical service administered in connection with a covered accident that occurs on or after the effective date of coverage. The benefit amount payable depends on the type of injury and care received.**

Low Plan Weekly Premiums

Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Team Member + Family
\$1.15	\$2.46	\$2.94	\$4.25

High Plan Weekly Premiums

Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Team Member + Family
\$2.04	\$3.98	\$4.63	\$6.57



VOYA CONTACT INFO
presents.voya.com/ebrc/claytonhomes
// (877) 236-7564



ACCIDENT INSURANCE

Event	Low Plan	High Plan
Hospital Care		
Surgery Open Abdominal, Thoracic	\$800	\$1,200
Surgery Exploratory Or Without Repair	\$125	\$175
Blood, Plasma, Platelets	\$400	\$600
Hospital Admission	\$1,000	\$1,250
Hospital Confinement Per Day, Up To 365 Days	\$300	\$375
Critical Care Unit Confinement Per Day, Up To 15 Days	\$475	\$600
Rehabilitation Facility Confinement Per Day, Up To 90 Days	\$125	\$200
Coma Duration Of 14 Or More Days	\$11,500	\$17,000
Transportation Per Trip, Up To 3 Per Accident	\$500	\$750
Lodging Per Day, Up To 30 Days	\$120	\$180
Accident Care		
Initial Doctor Visit	\$60	\$90
Urgent Care Facility Treatment	\$250	\$250
Emergency Room Treatment	\$250	\$250
Ground Ambulance	\$350	\$700
Air Ambulance	\$1,000	\$1,500
Follow-Up Doctor Treatment	\$60	\$90
Chiropractic Treatment, Up To 6 Per Accident	\$30	\$45
Medical Equipment	\$100	\$150
Physical Or Occupational Therapy, Up To 6 Per Accident	\$30	\$45
Speech Therapy, Up To 6 Per Accident	\$30	\$45
Prosthetic Device (1)	\$500	\$750
Prosthetic Device (2 Or More)	\$800	\$1,200
Major Diagnostic Exam	\$200	\$400
Outpatient Surgery, 1 Per Accident	\$150	\$225
X-Ray	\$60	\$90



SPORTS ACCIDENT BENEFIT: If your accident occurs while participating in an organized sporting activity as defined by VOYA; the accident hospital care, accident care or common injuries benefit will be increased by 25%; to a maximum additional benefit of \$1,000.

Please note, you may be required to seek care for your injury within a set amount of time.
For a list of exclusions and limitations contact VOYA.



ACCIDENT INSURANCE

Common Injuries	Low Plan	High Plan
Burns Second Degree, At least 36% Of The Body	\$1,000	\$1,250
Burns Third Degree, At Least 9 But Less Than 35 Square Inches Of The Body	\$4,500	\$7,500
Burns Third Degree, 35 Or More Square Inches Of The Body	\$10,000	\$15,000
Skin Grafts	25% of the burn benefit	25% of the burn benefit
Emergency Dental Work	\$250 Crown, \$60 Extraction	\$350 Crown, \$90 Extraction
Eye Injury Removal Of Foreign Object	\$60	\$100
Eye Injury Surgery	\$225	\$350
Torn Knee Cartilage Surgery With No Repair Or If Cartilage Is Shaved	\$150	\$225
Torn Knee Cartilage Surgical Repair	\$500	\$800
Laceration ¹ Treated No Sutures	\$20	\$30
Laceration ¹ Sutures Up To 2"	\$40	\$60
Laceration ¹ Sutures 2-6"	\$160	\$240
Laceration ¹ Sutures Over 6"	\$400	\$800
Ruptured Disk Surgical Repair	\$500	\$800
Tendon / Ligament / Rotator Cuff Exploratory Arthroscopic Surgery With No Repair	\$275	\$425
Tendon / Ligament / Rotator Cuff 1, Surgical Repair	\$550	\$825
Tendon / Ligament / Rotator Cuff 2 Or More, Surgical Repair	\$800	\$1,225
Concussion	\$600	\$500
Paralysis - Paraplegia	\$10,750	\$16,000
Paralysis - Quadriplegia	\$16,000	\$24,000
Dislocations	Closed/Open Reduction ²	Closed/Open Reduction ²
Hip Joint	\$2,550 / \$5,100	\$4,000 / \$8,000
Knee	\$1,600 / \$3,200	\$3,000 / \$6,000
Ankle Or Foot Bone(s), Other Than Toes	\$1,000 / \$2,000	\$1,800 / \$3,600
Shoulder	\$1,000 / \$2,000	\$2,200 / \$4,400
Elbow	\$750 / \$1,500	\$1,500 / \$3,000
Wrist	\$750 / \$1,500	\$1,500 / \$3,000
Finger / Toe	\$175 / \$350	\$350 / \$700
Hand Bone(s), Other Than Fingers	\$750 / \$1,500	\$1,500 / 3,000
Lower Jaw	\$750 / \$1,500	\$1,500 / 3,000
Collarbone	\$750 / \$1,500	\$1,500 / 3,000
Partial Dislocations	25% of the closed reduction amount	25% of the closed reduction amount

ACCIDENT INSURANCE

Coverage Continued

	Low Plan	High Plan
Fractures	Closed/Open Reduction ³	Closed/Open Reduction ³
Hip	\$2,000 / \$4,000	\$5,000 / \$10,000
Leg	\$1,500 / \$3,000	\$2,800 / \$5,600
Ankle	\$1,200 / \$2,400	\$2,500 / \$5,000
Kneecap	\$1,200 / \$2,400	\$2,500 / \$5,000
Foot, Excluding Toes & Heel	\$1,200 / \$2,400	\$2,500 / \$5,000
Upper Arm	\$1,400 / \$2,800	\$2,750 / \$5,500
Forearm, Hand, Wrist Except Fingers	\$1,200 / \$2,400	\$2,500 / \$5,000
Finger, Toe	\$160 / \$320	\$400 / \$800
Vertebral Body	\$2,240 / \$4,480	\$4,200 / \$8,400
Vertebral Processes	\$960 / \$1,920	\$2,000 / \$4,000
Pelvis, Except Coccyx	\$2,250 / \$4,500	\$4,000 / \$8,000
Coccyx	\$200 / \$400	\$500 / \$1,000
Bones Of Face, Except Nose	\$800 / \$1,600	\$1,400 / \$2,800
Nose	\$400 / \$800	\$750 / \$1,500
Upper Jaw	\$1,000 / \$2,000	\$1,750 / \$3,500
Lower Jaw	\$960 / \$1,920	\$2,000 / \$4,000
Collarbone	\$960 / \$1,920	\$2,000 / \$4,000
Rib Or Ribs	\$300 / \$600	\$600 / \$1,200
Skull - Simple, Except Bones Of Face	\$1,000 / \$2,000	\$1,750 / \$3,500
Skull - Depressed, Except Bones Of Face	\$2,000 / \$4,000	\$5,000 / \$10,000
Sternum	\$240 / \$480	\$500 / \$1,000
Shoulder Blade	\$1,200 / \$2,400	\$2,500 / \$5,000
Chip Fractures	25% of the closed reduction amount	25% of the closed reduction amount

1. Laceration benefits are a total of all lacerations per accident.
2. Closed reduction of dislocation = Non-surgical reduction of a completely separated joint.
Open reduction of dislocation = Surgical reduction of a completely separated joint.
3. Closed reduction of fracture = Non-surgical. Open reduction of fracture = Surgical.



VOYA CONTACT INFO
presents.voya.com/ebrc/claytonhomes
 // (877) 236-7564





HOSPITAL INDEMNITY

Hospital Indemnity coverage can provide financial protection **by paying you an admission benefit, plus a fixed daily rate**, if you have a covered stay in the hospital, critical care unit, or rehabilitation facility on or after the effective date of coverage. There are two plan options for you to choose from to best suit your needs.

Expecting a baby in 2025? Consider Hospital Indemnity coverage. You would receive the hospital admission benefit, a fixed daily confinement rate based on the number of days you are in the hospital (starting with day 2), plus a \$100 newborn benefit.

The below list is a summary of benefits provided under Hospital Indemnity coverage.

Covered Benefits	Low Plan	High Plan
Hospital Admission An admission benefit is payable for the first day of hospital confinement, once per confinement.	\$750	\$1,500
Hospital Confinement A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$100	\$100
Critical Care Unit (ccu) Confinement A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$200	\$200
Rehabilitation Facility Confinement A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$50	\$50
Observation Unit Daily Benefit A benefit is payable up to 4 days per calendar year, for admission to a hospital observation unit for at least 4 consecutive hours other than as an inpatient.	\$350	\$700

Low Plan		High Plan	
Coverage Type	Weekly Premiums	Coverage Type	Weekly Premiums
Team Member Only	\$2.55	Team Member Only	\$3.70
Team Member + Spouse	\$6.05	Team Member + Spouse	\$9.05
Team Member + Child(ren)	\$4.77	Team Member + Child(ren)	\$6.94
Team Member + Family	\$8.27	Team Member + Family	\$12.29

You must send VOYA written proof of your claim within 90 days after the date of loss. Failure to give such proof within this timeframe will not invalidate or reduce any payable claim if it can be shown that it was not reasonably possible to give such proof within that time, and the proof was given as soon as reasonably possible. However, in any event, you must provide proof of claim no later than one year after the time proof is otherwise required, except in the absence of legal capacity.

For a list of exclusions and limitations, contact VOYA.



CRITICAL ILLNESS

Being diagnosed with a critical illness can be devastating, both personally and financially. Enrolling in Critical Illness insurance coverage would **pay a percentage of your benefit amount selected if you or a covered family member is diagnosed with a covered illness or condition on or after the effective date of coverage.** The benefit amount payable depends on the type of illness or condition and the coverage amount you purchase.

You can receive a benefit more than once. Each condition below is payable up to four times. For instance, if you had a covered heart attack in 2025, then had a second heart attack more than six months later, both events could be payable.

Coverage Options	
Team Member	\$10,000, \$20,000 or \$30,000
Spouse	\$5,000, \$10,000 or \$15,000 – not to exceed 50% of Team Member's elected coverage
Child(ren)	\$5,000, \$10,000 or \$15,000 – not to exceed 50% of Team Member's elected coverage

The below list is a summary of benefits provided under Critical Illness coverage.

● base benefit

- Major Organ Transplant* 100%
- Carcinoma In Situ
(25% Of Critical Illness Benefit)
- Coronary Artery Bypass 100%
- Heart Attack** 100%
- Cancer 100%
- Stroke 100%

● major organ benefit

- Transient Ischemic Attacks (TIA)
(25% Of Critical Illness Benefit)
- Ruptured Or Dissecting Aneurysm
(10% Of Critical Illness Benefit)
- Implantable / Internal Cardioverter Defibrillator (ICD) Placement
(25% Of Critical Illness Benefit)
- Severe Burns 100%
- Pacemaker Placement
(10% Of Critical Illness Benefit)
- Abdominal Aortic Aneurysm
(10% Of Critical Illness Benefit)
- Open Heart Surgery For Valve Replacement Or Repair
(25% Of Critical Illness Benefit)
- Coronary Angioplasty
(10% Of Critical Illness Benefit)
- Thoracic Aortic Aneurysm
(10% Of Critical Illness Benefit)
- Transcatheter Heart Valve Replacement Or Repair
(10% Of Critical Illness Benefit)

● enhanced cancer benefit

- Bone Marrow Transplant
(25% Of Critical Illness Benefit)
- Benign Brain Tumor 100%
- Stem Cell Transplant
(25% Of Critical Illness Benefit)
- Skin Cancer
(10% Of Critical Illness Benefit)

* Major organ transplant means the irreversible failure of your heart, lung, pancreas, entire kidney or liver, or any combination thereof, determined by a physician specialized in care of the involved organ in addition to being placed on the UNOS list.

** A sudden cardiac arrest is not in itself considered a heart attack.

CRITICAL ILLNESS

● quality of life benefit

- Permanent Paralysis 100%
- Multiple Sclerosis 100%
- Coma 100%
- Amyotrophic Lateral Sclerosis (ALS) (50% Of Critical Illness Benefit)
- Advanced Dementia (Including Alzheimer's disease 100%)
- Parkinson's Disease 100%
- Infectious Disease (ex. COVID-19, sepsis, or bacterial pneumonia) if confined to a hospital for 5+ days or a transitional facility for 14+ days (10% of Critical Illness Benefit)

● additional child disease benefit

- Cerebral Palsy 100%
- Niemann-Pick Disease 100%
- Pompe Disease 100%
- Congenital Birth Defects 100%
- Infantile Tay-Sachs 100%
- Down Syndrome 100%
- Type IV Glycogen Storage Disease 100%
- Gaucher Disease, Type II or III 100%
- Cystic Fibrosis 100%

Team Member Only Coverage
Weekly Premiums

Age	\$10,000	\$20,000	\$30,000
Under 25	\$0.44	\$0.88	\$1.32
25-29	\$0.53	\$1.06	\$1.59
30-34	\$0.78	\$1.57	\$2.35
35-39	\$0.95	\$1.89	\$2.84
40-44	\$2.03	\$4.06	\$6.09
45-49	\$4.20	\$8.40	\$12.60
50-54	\$5.01	\$10.02	\$15.02
55-59	\$6.12	\$12.23	\$18.35
60-64	\$7.94	\$15.88	\$23.82
65-69	\$8.08	\$16.15	\$24.23
70+	\$10.43	\$20.86	\$31.29

Cost based on your age as of 1/1/2025.

Spouse Coverage
Weekly Premiums

Age	\$5,000	\$10,000	\$15,000
Under 25	\$0.22	\$0.44	\$0.66
25-29	\$0.27	\$0.53	\$0.80
30-34	\$0.39	\$0.78	\$1.18
35-39	\$0.47	\$0.95	\$1.42
40-44	\$1.02	\$2.03	\$3.05
45-49	\$2.10	\$4.20	\$6.30
50-54	\$2.50	\$5.01	\$7.51
55-59	\$3.06	\$6.12	\$9.17
60-64	\$3.97	\$7.94	\$11.91
65-69	\$4.04	\$8.08	\$12.12
70+	\$5.22	\$10.43	\$15.65

Cost based on your age as of 1/1/2025.

Child(ren) Coverage
Weekly Premiums

Coverage	Rate
\$5,000	\$0.40
\$10,000	\$0.81
\$15,000	\$1.21



VOYA CONTACT INFO
presents.voya.com/ebrc/claytonhomes
 // (877) 236-7564





HEALTH CARE FLEXIBLE SPENDING ACCOUNT

A Health Care Flexible Spending Account (FSA) **provides you with the ability to set aside pre-tax dollars to pay for qualified medical expenses.** You choose how much money to contribute to your FSA, within certain limits.

What are common examples of qualified medical expenses?

A Health Care FSA will usually cover expenses such as copays, eye glasses or contact lenses, dental work and orthodontia, medical equipment, hearing aids or chiropractic care. Many over-the-counter drugs*, such as cold and allergy medicines, pain relievers and antacids, can also be reimbursed through an FSA. (*Rx may be required)

How do I access my FSA funds?

You will receive a debit card to access your FSA funds. Keep in mind, you may need to submit documentation of the purchase to Optum Financial. You can also pay for eligible expenses with any other form of payment and request reimbursement from your account.

How can I find my account balance and review transactions?

Account balance and claims status information is available by using the mobile app or logging on to your online account. Your mobile and online accounts are secure and updated in real time.

Can I change my contribution throughout the year?

Once an election for the FSA has been made, you cannot change the amount unless you have a qualifying life event. (ex. marriage, birth, etc.)

What happens if I do not spend all my FSA funds by year end?

FSAs are a **use it or lose it** account. You can only roll over \$640 into the next calendar year. Therefore, consider your expected medical and Rx costs before selecting your FSA annual contribution.

What happens if I leave the company?

You are eligible to be reimbursed only for services that were incurred before your termination date, but you can request reimbursement for these expenses through the end of the calendar year.

With Garner, you may not need to contribute as much to your Health Care FSA.

Due to IRS regulations you are not able to use FSA dollars to pay for medical expenses that will be reimbursed by Garner. If you are seeing a Garner approved provider, please pay the out-of-pocket copays with dollars outside of your FSA and wait to be reimbursed by Garner. You may need to reevaluate how much you contribute to your FSA plan.

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

A Dependent Care FSA allows you to **save pre-tax dollars to pay for qualified dependent care expenses**, including those for aging parents.

Common expenses eligible for use with a Dependent Care FSA

- Before or after school care
- Qualifying custodial care for dependent adults
- Licensed day care centers
- Nursery or preschools
- Childcare at a day camp or private sitter
- Summer or holiday camps

What type of expenses are NOT eligible for use with a Dependent Care FSA:

- Expenses for non-disabled children 13 or older
- Food, clothing, sports lessons or field trips
- Registration fees
- Late payment fees
- Medical care



Optum Financial®

OPTUM FINANCIAL CONTACT INFO

secure.optumfinancial.com
// (833) 229-4432

DOWNLOAD
the app!





DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

How does a Dependent Care FSA work?

- You elect an annual amount during your new hire or open enrollment. The associated premium will be deducted each paycheck.
- After paying out-of-pocket for your eligible Dependent Care FSA expense, you can submit for reimbursement.
- You can only be reimbursed based on how much you have contributed so far in weekly premiums.

What happens if I leave the company?

You are eligible to submit expenses for reimbursement through the end of the calendar year. This allows you to spend down the account balance you contributed through payroll deductions while employed.

It is important to note, Dependent Care FSA funds do not rollover into the following year. Unused funds cannot be reimbursed or transferred to your Health Care FSA account.



Optum Financial®

OPTUM FINANCIAL CONTACT INFO

secure.optumfinancial.com
// (833) 229-4432

DENTAL

	Preventive	Major + Ortho
Deductible		
Team Member Only	\$50	\$25
Team Member + Spouse		
Team Member + Child(ren)	\$150	\$75
Team Member + Family		
Annual Maximum		
Note: Preventive, basic and major services do count towards your annual maximum.	\$1,000 per individual, per calendar year	\$2,000 per individual, per calendar year
Preventive Services		
Exams		
Routine Cleanings		
Fluoride (less than 15 years old)	Covered At 100% No Deductible	Covered At 100% No Deductible
X-Rays		
Sealants		
Space Maintainers		
Basic Services		
Fillings		
Extractions		
Root Canals	Covered At 80% After Deductible	Covered At 80% After Deductible
Periodontic Procedures		
Oral Surgery		
Major Services		
Inlays / Onlays		
Crowns	Not Covered	Covered At 50% After Deductible
Dentures		
Orthodontic Services	Not Covered	Covered At 50% Up To \$1,500 After Deductible (\$1,500 lifetime max per individual)
Enrollment Group	Preventive Weekly Premium	Major + Ortho Weekly Premium
Team Member Only	\$4.87	\$9.75
Team Member + Spouse	\$9.75	\$19.49
Team Member + Child(ren)	\$9.75	\$19.49
Team Member + Family	\$9.75	\$19.49

Download
the app!



CIGNA CONTACT INFO
mycigna.com // (800) 244-6224

VISION

	In-Network
Eye Exam (once per calendar year)	\$10 Copay
Frames (once per calendar year)	\$175 Allowance
Standard Plastic Lens (once per calendar year)	
Single	\$20 Copay
Bifocal	
Trifocal	
Lenticular	
Adult Polycarb, Scratch Coating & Tint	No Cost
Contact Lens (in lieu of lenses and frames)	\$175 Allowance
Fitting Fee	\$30 Copay
Enrollment Group	Weekly Premium
Team Member Only	\$1.12
Team Member + Spouse	\$2.24
Team Member + Child(ren)	\$2.54
Team Member + Family	\$3.93

hearing aid discount

- ✓ Free hearing exam
- ✓ Discount of up to 40% off premium hearing aids
- ✓ superiorvision.yourhearing.com
- ✓ (888) 494-1272

lasik vision correction discount

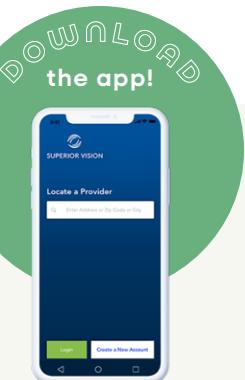
- ✓ Up to 50% off the national average price
- ✓ lasik.sv.qualsight.com
- ✓ (877) 201-3602

an important note about hearing aids

Hearing aids may be more cost-effective through the medical plan. When using a Garner approved provider, some copays may be reimbursed. We recommend consulting with the Benefits team prior to purchasing hearing aids.



SUPERIOR VISION CONTACT INFO
superiorvision.com // (844) 549-2603



LIFE INSURANCE

additional life

- Purchase up to 10x your covered earnings (not to exceed \$2 million).
- Cost is based on amount selected and age as of January 1st and will be shown during your online enrollment.
- Life insurance is based off gross wages from a specified period of time.
- Underwriting may be required.

spouse life

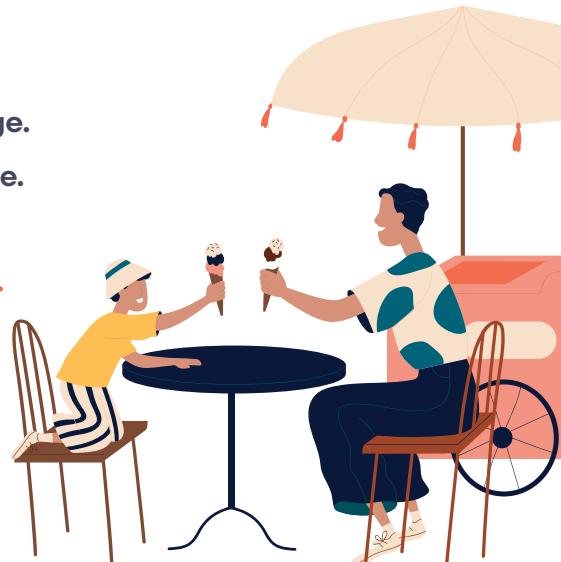
- Purchase up to \$250k in increments of \$25k.
- Cost is based on amount selected and age as of January 1st and will be shown during your online enrollment.
- Coverage cannot exceed 50% of your life insurance coverage.
- You must be enrolled in additional life to purchase spouse life.
- Underwriting may be required.

child life

- Purchase \$10,000 for your children under age 26.
- Cost is \$.23 per week for any number of children covered.

\$30,000

life insurance is provided at no cost to full-time Team Members!



NOTE: Basic, additional, and spouse life insurance reduces by 35% at age 65 and 50% at age 70.



PRUDENTIAL CONTACT INFO
contact by phone // (800) 524-0542

VISIT US
online!



SHORT-TERM DISABILITY

Short-term Disability (STD) provides financial support to replace lost income while disabled due to a **short-term illness or non-work related injury**.

short-term disability is provided at no cost to you!



Pays 50% of covered earnings up to \$1,500 per week.



Weekly benefit can continue for up to 26 weeks.

STD is based off your salary or hourly rate and commissions from a specified period of time.

There is a 7 day waiting period. STD will begin on the 8th day of disability.

STD may be offset by any state disability plans.

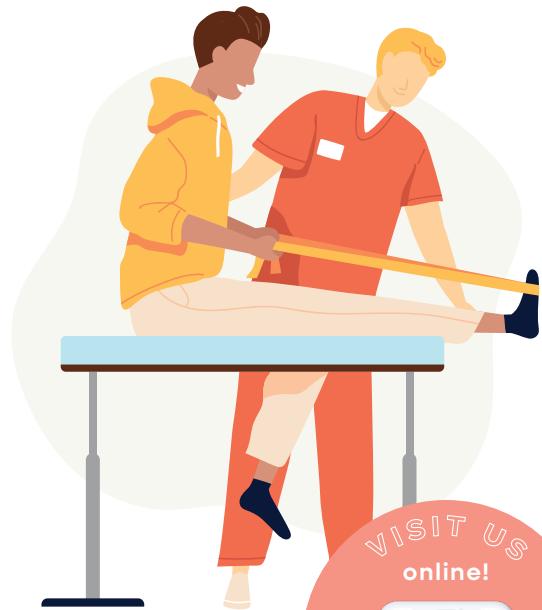
buy-up option



Cost is based on weekly benefit amount.



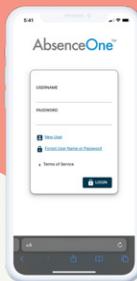
Pays 66.7% of covered earnings up to \$3,000 per week.



VISIT US
online!

AbsenceOne™

ABSENCEONE CONTACT INFO
absenceone.com/clayton // (855) 366-2152



LONG-TERM DISABILITY

Long-term Disability (LTD) protects your income if you are unable to work for a long period of time due to an illness or injury. Long-term Disability begins after Short-Term Disability ends.

long-term disability is provided at no cost to you!



Pays 50% of covered earnings up to \$6,500 per month.



Monthly benefit can continue until the Social Security normal retirement age.

LTD is based off your salary or hourly rate, bonuses and commissions from a specified period of time.

LTD may be offset by other income such as SSI, Worker's Comp, etc. The minimum is \$100/month.

A pre-existing condition review occurs if your date of disability falls within 12 months of your coverage effective date.

buy-up option



Cost is based on amount of your covered earnings.



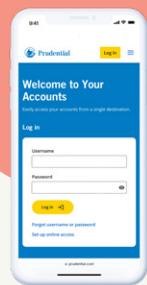
Pays 66.7% of covered earnings up to \$25,000 per month.



VISIT US
online!



PRUDENTIAL CONTACT INFO
contact by phone // (800) 524-0542



HEALTHY PREGNANCIES, HEALTHY BABIES

Cigna's Healthy Pregnancies, Healthy Babies and BCBS's Baby Yourself Maternity Programs aim to support patients at the very start of their pregnancies. Once enrolled, you will connect with a maternity specialist who will provide an initial risk assessment, prenatal education, care management support and routine follow-up assessments throughout your pregnancy.

Enroll as soon as you know you are expecting

**Cigna Healthy Pregnancies,
Healthy Babies**

(800) 615-2906

**BCBS Baby Yourself
Maternity Program**

(800) 222-4379

With Cigna

Enroll during your first trimester to receive \$250 or enroll during your second trimester to receive \$125 upon completion of the program.



FREE

for eligible Team Members and family
enrolled in the Clayton medical plan!

PAID PARENTAL LEAVE

We are pleased to offer paid time off to all new parents! It's an incredibly special time for nurturing and bonding for all parents, as well as needed time off for healing and recovery for moms after delivery. We hope this offering of paid parental leave will encourage and empower new parents to take the time they need and give them financial support while doing so.

For Moms Who Deliver	All Parents
<ul style="list-style-type: none">✓ 10 weeks following delivery✓ 100% base pay at time of delivery✓ Paid through AbsenceOne✓ May be offset by any state disability plans	<ul style="list-style-type: none">✓ 4 weeks✓ 50% of base pay✓ Must be used within 6 months of birth, adoption or foster placement✓ Cannot be used intermittently✓ For moms who deliver, the 4 weeks at 50% pay will begin after the 10 weeks of 100% pay ends✓ Paid through payroll✓ Insurance premiums and arrears deducted



IDENTITY THEFT PROTECTION

What is identity theft?

Identity theft is when your personal information is stolen in order to take over or open new accounts, file fake tax returns, rent or buy properties, or do other criminal activities in your name. While no organization or individual can completely prevent identity theft, LifeLock alerts you to possible use of your personal information, which can be a valuable deterrent to unauthorized use of your identity. It is important to note that LifeLock cannot monitor all transactions at all businesses.

Why do I need protection?



Every 3 seconds there was a victim of identity theft in 2023.



\$50+ billion was lost to cybercrime in the US in 2023.



3 in 5 U.S. consumers have been victim to cybercrime.

How does LifeLock work?

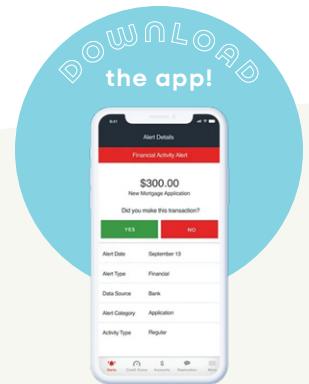
LifeLock monitors fraudulent use of your social, name, address or date of birth in applications for credit and services. When activity occurs involving your information, you are alerted by email, text or phone. If you are a victim of identity theft, LifeLock protection includes reimbursement for stolen funds and coverage for personal expenses (with limits up to \$1 million dollars) and access to lawyers and experts, if needed to help resolve your case. Signing up for LifeLock service is an important step in helping to protect your identity. When you become a member, you will receive communications about your membership, keeping you up-to-date on important information about your identity.

When you enroll you will receive:

- A welcome to LifeLock email that explains how LifeLock service works to help protect you.
- The welcome email will contain a link for you to register your online account. You will use the link to set up your username and password for your member portal.



LIFELOCK CONTACT INFO
lifelock.com // (800) 607-9174



IDENTITY THEFT PROTECTION

LifeLock Benefit Essential™

- ✓ Buy Now Pay Later Fraud Monitoring
- ✓ Checking & Savings Account Application Alerts
- ✓ Credit, Checking, & Savings Account Activity Alerts
- ✓ Credit Monitoring (1 Bureau)
- ✓ Credit Report & Scores (1 Bureau)
- ✓ Reduced Pre-Approved Credit Card Offers
- ✓ Financial Monitoring
- ✓ Child Identity Protection
- ✓ Dark Web Monitoring
- ✓ Data Breach Notifications
- ✓ Fictitious Identity Monitoring
- ✓ File-sharing Network Searches
- ✓ Freeze Center
- ✓ Identity Lock
- ✓ Identity & Social Security Alerts
- ✓ ID Verification Monitoring
- ✓ Phone Takeover Monitoring
- ✓ Sex Offender Registry Reports
- ✓ Social Media Monitoring
- ✓ Telco & Utility Monitoring
- ✓ USPS Address Change Verification
- ✓ Million Dollar Protection Package
- ✓ Prior Identity Theft Remediation
- ✓ Stolen Wallet Protection
- ✓ Identity Restoration Specialists
- ✓ Norton Device Security
 - Number of Devices (3 Devices - Family Gets 6)
 - Anti-spyware, antivirus, malware, & ransomware protection
 - Content Supervision
 - Password Manager
 - PC Cloud backup (10GB)
 - Smart Firewall

LifeLock Benefit Premier™

All The Features Of Benefit Essential PLUS:

- ✓ Bank Account Takeover Alerts
- ✓ Credit Monitoring (3 Bureau)
- ✓ Credit Report & Scores (3 Bureau)
- ✓ Alerts on Crimes Committed in Your Name
- ✓ Home Title Monitoring
- ✓ Norton Device Security
 - Number of Devices (5 Devices - Family Gets 10)
 - Anti-spyware, antivirus, malware, & ransomware protection
 - Content Supervision
 - Password Manager
 - PC Cloud backup (50GB)
 - Smart Firewall



scan here for
a full list of LifeLock
features for 2025!

Benefit Essential Weekly Premiums

Team Member Only	\$1.27
Team Member + Family	\$2.53

Benefit Premier Weekly Premiums

Team Member Only	\$2.31
Team Member + Family	\$4.38

No one can prevent all identity theft.

† Lifelock does not monitor all transactions at all businesses.

** Million dollar protection package benefits are provided by a master policy issued by United Specialty Insurance Company, inc. (State National Insurance Company, Inc. For NY state members). The master policy provides coverage for stolen funds reimbursement and personal expense compensation, each with limits of up \$1 million. If needed, Lifelock will provide lawyers and experts under the service guarantee. Please see the policy terms, conditions and exclusions at: lifelock.com/legal.

401(K) RETIREMENT PLAN

The Clayton 401(k) plan allows eligible Team Members to save for retirement through payroll deduction. Team Members are eligible for the 401(k) retirement plan after **90 days of service**.

enrollment

New hires will receive enrollment materials directly from Fidelity Investments. If no action is taken before reaching **90 days of service**, newly eligible Team Members will be **automatically enrolled into the plan at a 4% pre-tax deferral rate**.

Team Members may contact Fidelity at any time to change their deferral rate or opt out of the plan.

team member contributions

Team Members can contribute **up to 75% of their eligible pay** on a pre-tax and/or Roth basis, up to the annual IRS limit.

matching contributions

Team Members are eligible to receive company match at the beginning of the quarter following one year of service. **The company will match dollar for dollar the first 4% you contribute to the plan, up to the annual IRS limit.**

annual automatic increase

If a Team Member does not actively opt out of the Annual Increase Program, their deferral rate will **increase 1% each year until it reaches a 11% deferral rate**.

catch up!

If you are **age 50 or older**, you can contribute an additional **\$7,500 annually**.

eligibility requirement

Part-time and full-time Team Members 18+ are eligible to participate after 90 days of employment.

roth 401(k)

We also offer a Roth 401(k) option in the plan. Roth contributions to your retirement savings plan allow you to make after-tax contributions and take any associated earnings completely tax free at retirement.



FIDELITY CONTACT INFO

netbenefits.com // English: (800) 835-5095
// Spanish: (800) 587-5282

401(K) RETIREMENT PLAN

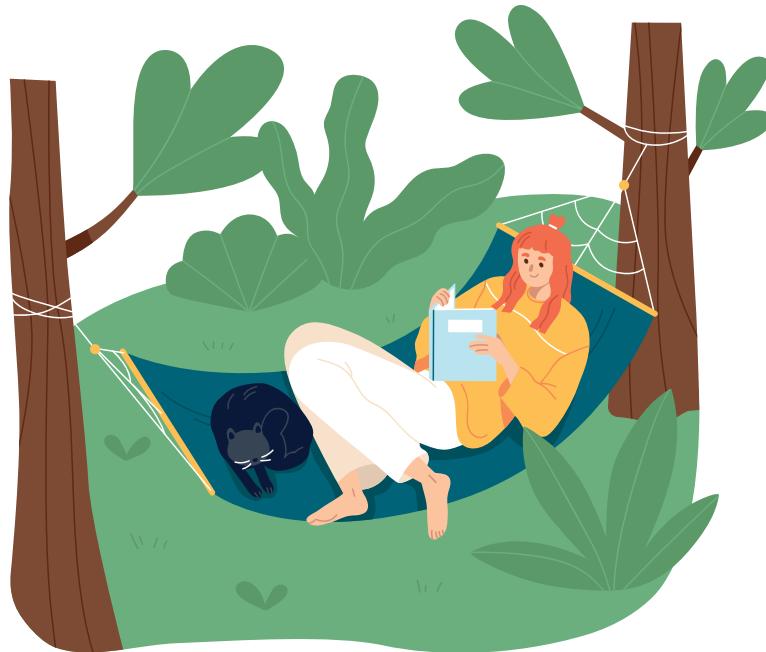
IMPORTANT: Designate your 401(K) beneficiary

Your 401(k) beneficiaries are separate from all other benefits. With Fidelity's Online Beneficiaries Service, you can designate your beneficiaries, receive instant online confirmation and check your beneficiary information virtually anytime.

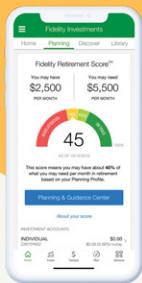
You must designate a 401(k) beneficiary at Fidelity, separately from Workday.

To elect or change your 401(k) beneficiaries

- Visit netbenefits.com
- Select "Profile & Settings" and click on "Beneficiaries"
- Follow the online instructions or contact Fidelity at **(800) 835-5095**



DOWNLOAD
the app!



FIDELITY CONTACT INFO

netbenefits.com // English: **(800) 835-5095**
// Spanish: **(800) 587-5282**



Additional Resources



To learn more about Let's Talk contact the Clayton Wellbeing Team.

LET'S TALK

Let's Talk is Clayton's enterprise-wide commitment to supporting the mental wellbeing of its Team Members. We all have mental health, just as we have physical health, and **we all benefit from having access to professional resources that help us care for our brains like we care for our bodies.**

EMPLOYEECONNECT

As a Clayton Team Member, **you and your family have access to 24/7 support** for a wide range of personal and work-related issues.

● confidential counseling

Up to five* sessions with a counselor per person, per issue, per year.

*In California, up to three sessions in six months, starting with initial contact.

● work-life solutions

Assistance finding child or elder care, moving, college planning, selling a house and more.

● legal support

Access to an attorney for legal concerns such as custody, adoption, debt and bankruptcy.

● financial information, resources and tools

Discuss getting out of debt, retirement or estate planning, saving for college and tax questions.

Call anytime for
confidential support!



Call: (800) 311-4327

TDD: (800) 697-0353



Online: guidanceresources.com

Clayton Web ID: GEN311

NEED ADDITIONAL SUPPORT?

Connect with mental health providers with these resources, available at **NO COST** for Team Members and family enrolled in the Clayton medical plan.

• **garner**

Garner can help you find top-rated providers near you with expertise in mental health and wellbeing. Garner is a free resource available for those on the Clayton medical plan. Download the Garner Health app or visit mygarnerguide.com. See pages 11 - 14 for more details.

• **telehealth**

With MDLive and Teladoc, you can schedule a video or phone call appointment with doctors, therapists or other trained mental health professionals. Talk to someone **same day or schedule a conversation at a later time**. See page 19 for more details.

MDLive (Cigna)

mdliveforcigna.com // (888) 726-3171

Teladoc (BCBS)

teladoc.com/alabama // (855) 477-4549

NATIONAL RESOURCES

• **SAMHSA treatment locator**

samhsa.gov // (800) 662-4357 // Call for treatment referrals to mental health care and substance abuse services.

• **the national suicide prevention lifeline**

Call 9-8-8 for immediate support when experiencing suicidal thoughts. This service is committed to improving crisis services and advancing suicide prevention by empowering individuals.

• **national crisis text line**

crisistextline.org // Text HOME to 741741 to contact a trained Crisis Counselor for immediate assistance with anxiety, depression, eating disorders, abuse, gun violence, loneliness, suicide, and self-harm.

• **veterans crisis line**

Call: (800) 273-8255 // Text: 838255 // Call or text to receive immediate support for all Veterans, Service Members, National Guard and Reserve and their family members and friends.

• **information & resources**

Call 2-1-1 for information and resources such as: housing and utility issues, locate shelters, locate food banks, natural disaster relief, tax preparation assistance, veterans services, support groups, and counseling services.

• **domestic violence hotline**

Call: 1-800-799-SAFE (7233) // If you're experiencing abuse, you can get help with just a call or chat. Trained advocates offer free, confidential support 24/7.

TOBACCO CESSION PROGRAM

Ready to quit?

Quit For Life can help!

The Quit For Life program can help you create an easy-to-follow quit plan that will show you how to get ready, take action and live the rest of your life tobacco free.

What does the program include?

- 5 one-on-one scheduled calls with your own quit coach
- Call to speak with a quit coach anytime, 24/7
- Direct mail order of 8-week supply of a patch or gum
- \$0 copay for 180 day supply of Bupropion or Chantix (prescription required)
- Access to an interactive website that helps you stay on track between calls
- Text2quit, an integrated text messaging service sends games to help during cravings
- Ability to re-enroll and try again if you have not quit for good by your last call

How do I enroll?

Enroll anytime by calling **(866) 784-8454** or visit quitnow.net.

Quit for Life offers translation services for many languages including Spanish.



FREE for Team Members, spouses and dependents 18 years and older!

2025 vendor contacts

program	vendor	website	phone
401(k)	Fidelity	netbenefits.com	(800) 835-5095
Additional Resources	EmployeeConnect	guidanceresources.com	(800) 311-4327
Diabetes Reversal	Virta	virtahealth.com/join/clayton	(844) 847-8216
Disability Long-Term	Prudential	contact by phone	(800) 524-0542
Disability Short-Term	AbsenceOne	absenceone.com/clayton	(855) 366-2152
Flexible Spending	Optum Financial	secure.optumfinancial.com	(833) 229-4432
Identity Theft Protection	LifeLock By Norton	lifelock.com	(800) 607-9174
Life Insurance	Prudential	contact by phone	(800) 524-0542
Medical	Blue Cross Blue Shield	alabamablue.com	(888) 578-6772
Medical & Dental	Cigna	mycigna.com	(800) 244-6224
Pharmacy	Express Scripts	express-scripts.com	(855) 634-0226
Telehealth (BCBS)	Teledoc	teladoc.com/alabama	(855) 477-4549
Telehealth (Cigna)	MDLive	mdliveforcigna.com	(888) 726-3171
Tobacco Cessation	Quit For Life	quitnow.net	(866) 784-8454
Top Provider Directory	Garner	mygarnerguide.com	(866) 761-9586
Vision	Superior Vision	superiorvision.com	(844) 549-2603
Voluntary Benefits	Voya	presents.voya.com/ebcc/claytonhomes	(877) 236-7564

Benefits ABC's

Healthcare and benefits can be confusing! Here's a few common terms used throughout the guide or words that you may hear at your doctor's office defined to help you better understand your benefits package and navigate your healthcare experience.

benefits enrollment

A defined period of time when Team Members may elect or change benefits coverages. Each year, during open enrollment, all Team Members are given the opportunity to change their benefits elections for the upcoming year. During qualified life events such as marriage or the birth of a child, Team Members are given 30 days to change their benefits elections. Log on to **Workday** to enroll in benefits coverages.

copay

Also known as a copayment. Copays are a flat or fixed amount that you pay for a covered health care service such as an appointment, procedure or prescription. **Helpful Tip:** See Garner approved providers to get your copays reimbursed for qualified services.

copay reimbursement

When you receive a bill from your medical provider, pay the bill as you normally would. With Garner, your copays for qualified visits are reimbursed. This means the money you pay will be sent back to you by check or direct deposit about 4 to 8 weeks after your visit with Garner approved doctors.

in-network vs. out-of-network

A provider or facility is considered in-network when they participate in our medical carrier's (BCBS or Cigna) network of providers. When you visit in-network providers, you will pay a flat copay for services received, eliminating surprise medical bills. Out-of-network providers do not participate in our medical carrier network, leading to patients paying a higher cost for medical services. Visit mygarnerguide.com for a list of in-network Top Providers.

out-of-pocket maximum

The maximum amount you will be required to pay for covered health care services during a plan year.

premium

Premium is the amount that is deducted from your paycheck each week for health coverages you elect during benefits enrollment. With some coverages, such as your medical insurance, a premium is shared between you and your employer.

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