2027

Clayton benefits

Benefits Guide



Benefits@ClaytonHomes.com

Opening doors to a better life.

Clayton® benefits

The **2027 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

At Clayton, we believe benefits are more than just coverage. Benefits are a foundation for supporting you through life's most important moments. Whether you're planning for the future, protecting what matters most, or taking care of your health and wellbeing, Clayton Benefits are here to help you live well, feel secure, and plan ahead with confidence.

From financial protection and security to health and wellness support, our benefits are designed with you and your family in mind. Life brings both expected milestones and unexpected challenges, and our goal is to provide the resources and peace of mind you need to navigate them with confidence.

This guide will help you understand the programs available to you, so you can make informed decisions that fit your unique needs.



Your benefits at a GLANCE

MEDICAL

cigna healthcare

BlueCross BlueShield

Page 9

TOP PROVIDER DIRECTORY

garner™

Page 12

DIABETES REVERSAL & WEIGHT LOSS

virta

Page 15

PHARMACY

Express Scripts By EVERNORTH

Page 17

TELEHEALTH

MDLIVE

TELADOC

Page 19

SUPPLEMENTAL HEALTH

VOYA FINANCIAL

Page 20

HEALTH CARE & DEPENDENT FSA

Optum Financial™

Page 29

DENTAL

cigna healthcare

Page 32

VISION

SuperiorVision™

Page 33

LIFE INSURANCE & LONG TERM DISABILITY

Prudential

Page 34

SHORT-TERM DISABILITY

AbsenceOne®

Page 35

PAID PARENTAL LEAVE

Page 38

IDENTITY THEFT PROTECTION

norton™ LifeLock Benefit Solutions

Page 39

401(k)

Fidelity INVESTMENTS

Page 41

MENTAL WELLBEING SUPPORT

Let's Talk

Page 43

Benefits Contact Info	Benefits@ClaytonHomes.com // (865) 380-3000 x7400

How do I enroll?

workday®

Log on to:
workday.claytonhomes.com

Scan Here to download the Workday app!

When can I enroll?

New Hires

- Benefits are effective on your **31st day of employment.**
- Benefits enrollment must be completed no later than your effective date.
- ***Late enrollments are not accepted.***

Qualifying Life Events

- You can make changes mid-year if you have a qualifying life event, such as marriage, divorce, birth of a child, or loss or gain of coverage.
- You must complete your benefits enrollment within 31 days of the life event.
- Supporting documentation will be required.
- ***Late enrollments are not accepted.***

Open Enrollment

- Each year, during Open Enrollment, you will be given an opportunity to change, elect, or drop coverage.
- Changes to Open Enrollment elections will not be permitted on or after the effective date of coverage.

Coverage Ends

- If you separate with the company, your insurance coverage ends on your last day of employment.
- Our COBRA administrator will automatically mail information to the Team Member's home address within 7-10 business days from termination.

Who can I enroll on my plan?

Eligible Dependents

- **Your legally married spouse.**
- **Children under age 26** including, biological, adopted, placed for adoption, foster, stepchildren, and children who you are legally appointed as guardian or limited guardian (cannot be temporary).
- **Disabled Children Age 26+.** Coverage may continue for an unmarried child age 26 or older who is primarily supported by you and unable to work due to a physical or mental disability. The child must already be covered as your dependent when they turn 26. To continue coverage without interruption, you and your child's physician must complete and submit a Disabled Child Certification Form within 31 days of the child's 26th birthday. Certification is required annually.

Not Eligible

- Boyfriend, girlfriend, fiancé, or domestic partner
- Parents
- Grandparents
- Grandchildren
- Brothers or sisters
- Aunts, uncles, nieces, nephews, cousins, or similar relatives
- Your child who is also covered under the plan as a Team Member (Dual coverage on the Clayton plan)
- Divorced former spouse or legally separated spouse (unless coverage is continued under COBRA)
- Any person on active duty in the military (Not eligible for life insurance plan only)
- Other persons living in your home who are not eligible, as defined in the plan
- **Dual coverage is not allowed,** meaning a child under age 26 or a spouse who is a Team Member cannot be covered both as a Team Member and as a dependent at the same time.

Enrolling someone who is not qualified as a dependent under a benefit plan is considered insurance fraud and may lead to termination of employment.

Clayton Medical Plans

Both the Simple and Simple Plus Plans provide access to the same provider network, prescription drug coverage, and Garner benefits.

- ✓ **No in-network deductible**
- ✓ **Flat, predictable copays for covered services**
- ✓ **Free preventive care**
- ✓ **Free telehealth visits through MDLive or Teladoc, depending on carrier**
- ✓ **Access to Garner's Top Provider Directory to help you find high-quality care**
- ✓ **Automatic reimbursement of eligible copays when you visit a qualifying Garner Top Provider, up to $1,500 annually for individual coverage or up to $3,000 annually for family coverage**

Which plan may be right for you?

Meet the Garcias

Simple Plan: Lower premiums, higher copays

Generally only use preventive care and occasional sick visits

- Values low medical premiums
- Are comfortable paying more when care is needed
- Have savings available for unexpected healthcare expenses



Meet the Thompsons

Simple Plus Plan: Higher premiums, lower copays

Mark is receiving ongoing treatment, and changing providers is not an option.

- Expect to use healthcare services regularly during the year
- Needs ongoing care for a health condition or takes regular medications
- Prefers lower copays and more predictable out-of-pocket costs



Medical Plan Comparison

Enrollment Group	Simple	Simple plus
	Weekly Premium	
Team Member Only	$29.12	$54.76
Team Member + Spouse	$64.12	$117.67
Team Member + Child(ren)	$52.42	$96.04
Team Member + Family	$87.57	$137.32

Deductible		**$0**	$0
Combined Medical and Pharmacy Out-of-Pocket Maximum Ind/Family		$6,000 per individual or $12,000 combined family maximum	$4,000 per individual or $8,000 combined family maximum
Medical Copays		**Simple**	Simple Plus
g Preventive Care		$0	$0
g Telehealth		$0	$0
g Outpatient Therapy (ex. mental health or substance abuse)		$50	$30
g Physical, Speech, or Occupational Therapy		$60	$40
g Chiropractor		$60	$40
g Primary Care Provider		$50	$30
g OB/GYN		$50	$30
g Labs		$0	$0
g Specialist		$150	$70
g Standard Radiology (x-ray or ultrasound)		$90	$60
g Advanced Imaging (MRI, CT, or PET scan)		$600	$240
g Durable Medical Equipment		$150	$100
g Outpatient Surgery		$850	$425
g Inpatient (per day)		$1,500 / Day	$750 / Day
Emergency Care			
g Urgent Care		$75	$50
Ambulance		$700	$350
Emergency Room		$1,000	$500
Prescription Drugs			
Generic	Up to 34 days	$20	$10
Preferred Brand Name	Up to 34 days	$120	$60
Non-preferred / Specialty	Up to 34 days	$250	$150
Generic	90-day	$50	$25
Preferred Brand	90-day	$300	$150
Non-preferred / Specialty	90-day	$625	$375

g Garner-approved services that qualify for copay reimbursement, up to an annual amount.

Please Note: if the service or prescription charge is lower than the copay, you will pay the lesser amount.
This chart compares in-network services only.

Simple

Enrollment Group	Weekly Premium
Team Member Only	$29.12
Team Member + Spouse	$64.12
Team Member + Child(ren)	$52.42
Team Member + Family	$87.57

		In-Network	Out-of-Network
Deductible		$0	$5,000 per individual or $10,000 family combined maximum
Combined Medical and 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
Medical Copays			
g Preventive Care		$0	40% After Deductible
g Telehealth		$0	
g Outpatient Therapy (ex. mental health or substance abuse)		$50	
g Physical, Speech, or Occupational Therapy		$60	
g Chiropractor		$60	
g Primary Care Provider		$50	
g OB/GYN		$50	
g Labs		$0	
g Specialist		$150	
g Standard Radiology (x-ray or ultrasound)		$90	
g Advanced Imaging (MRI, CT or PET scan)		$600	
g Durable Medical Equipment		$150	
g Outpatient Surgery		$850	
g Inpatient (per day)		$1,500 / Day	
Emergency Care			
g Urgent Care		$75	40% After Deductible
Ambulance		$700	$700
Emergency Room		$1,000	$1,000
Prescription Drugs			
Generic	Up to 34 days	$20	Not Covered
Preferred Brand Name		$120	
Non-preferred / Specialty		$250	
Generic	90-day	$50	
Preferred Brand		$300	
Non-preferred / Specialty		$625	

g Garner-approved services that qualify for copay reimbursement, up to an annual amount.

Simple plus

Enrollment Group	Weekly Premium
Team Member Only	$54.76
Team Member + Spouse	$117.67
Team Member + Child(ren)	$96.04
Team Member + Family	$137.32

	In-Network	Out-of-Network
Deductible	$0	$3,000 per individual or $6,000 family combined maximum
Combined Medical and 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
Medical Copays		
g Preventive Care	$0	40% After Deductible
g Telehealth	$0	
g Outpatient Therapy (ex. mental health or substance abuse)	$30	
g Physical, Speech, or Occupational Therapy	$40	
g Chiropractor	$40	
g Primary Care Provider	$30	
g OB/GYN	$30	
g Labs	$0	
g Specialist	$70	
g Standard Radiology (x-ray or ultrasound)	$60	
g Advanced Imaging (MRI, CT, or PET scan)	$240	
g Durable Medical Equipment	$100	
g Outpatient Surgery	$425	
g Inpatient (per day)	$750 / Day	
Emergency Care		
g Urgent Care	$50	40% After Deductible
Ambulance	$350	$350
Emergency Room	$500	$500
Prescription Drugs		
Generic (Up to 34 days)	$10	Not Covered
Preferred Brand Name (Up to 34 days)	$60	
Non-preferred / Specialty (Up to 34 days)	$150	
Generic (90-day)	$25	
Preferred Brand (90-day)	$150	
Non-preferred / Specialty (90-day)	$375	

g Garner-approved services that qualify for copay reimbursement, up to an annual amount.

Garner

Find High-Quality Care With Garner

Garner Health has analyzed over 320 million medical records to identify the **top 20% of in-network providers nationwide.** Use the Garner Top Provider search tool to confidently choose high-performing doctors who are in-network, nearby, and have appointment availability.

Who Are Top Providers?

Top Providers are high-performing medical professionals based on outcomes and cost-effectiveness. They're marked with a **green Top Provider** badge in the Garner Health app, making it easy to find trusted care tailored to your needs.

- ✓ **Practice based on latest medical research**
- ✓ **Successfully diagnose problems**
- ✓ **Receive high patient satisfaction ratings**
- ✓ **Deliver excellent patient outcomes**



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

Eligible Providers

- ✓ **Primary Care Provider**
- ✓ **Pediatrician**
- ✓ **Physical Therapist**
- ✓ **Urgent Care Clinic**
- ✓ **Mental Health Therapist**
- ✓ **Imaging or Lab Work**
- ✓ **Advanced Imaging (ex. 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

Get Started with Garner

1. Create Your Account

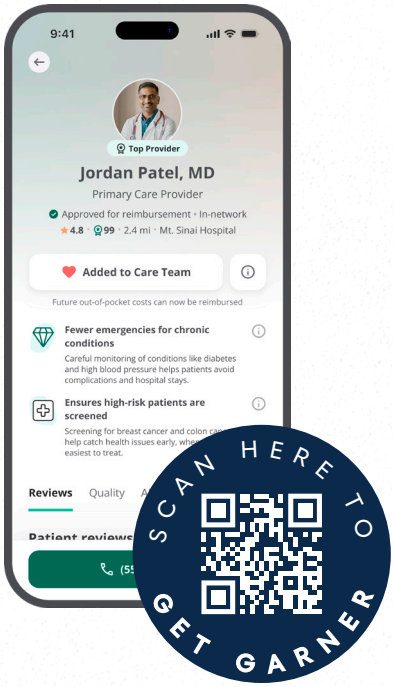
- Download the Garner Health app or visit mygarnerguide.com
- Select *"Create Account"*
- Enter Organization Name:

Cigna Medical Plan: Clayton Homes - Cigna

BCBS Medical Plan: Clayton Homes - BCBS

2. Find a Top Provider

- Search by provider, specialty, condition, or procedure
- Look for the **green Top Provider badge**
- Verify the provider is approved for your Garner benefit



3. Add Providers to Your Care Team

***Starting January 1, 2027, you must add providers to your Care Team.**

- Add approved providers before your appointment
- Now you're all set! All qualified visits for you and your covered family members will be eligible for your Garner benefit

Get Rewarded!

- When you receive care from a Garner Top Provider, eligible copays are automatically reimbursed. You can earn **up to $3,000 per year** for family coverage or **$1,500 per year** for individual coverage

garner™

GARNER CONTACT INFO

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

Garner

Garner Concierge

Garner provides all members access to a Garner Concierge, your dedicated resource to help you find high-quality providers and answer questions about your account. Whether you're searching for a new doctor or need assistance navigating your Garner benefit, the Concierge is available for support.

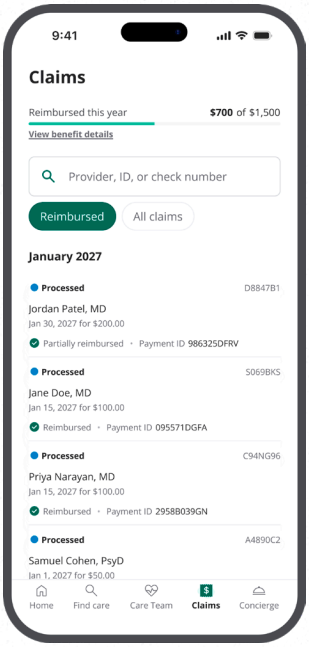
Available Monday - Friday | 8AM - 10PM Eastern

Message the Concierge in the app Call: (866) 761-9586

Email: concierge@getgarner.com

Helpful tips!

- Activate your Garner benefit anytime. Signing up for Garner is not limited to your enrollment period.
- Only one Garner account is needed per family. However, any dependent age 18+ may choose to create an account.
- Copay reimbursements typically arrive in about 6 to 8 weeks. Enroll in direct deposit to receive your reimbursement faster.
- Track and review claims details on the mobile app.
- Connect with Garner Concierge to see if your nurse practitioner or physician assistant qualifies for your Garner benefit.



Important Health Care FSA Note

Since Garner may reimburse eligible copays, you cannot use Health Care FSA funds for expenses that will be reimbursed by Garner. Consider this when deciding how much to contribute to your Health Care FSA during enrollment.

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 to naturally manage blood sugar, lose weight, and reduce medications.



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

Virta Programs

- **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**
  Lose weight and keep it off with Virta's personalized nutrition program.

virta

VIRTA CONTACT INFO

Enroll: virtahealth.com/join/clayton

Support: go.virta.com/help | support@virtahealth.com

(844) 847-8216

Virta

Type 2 Diabetes Reversal & Sustainable Weight Loss

Eligibility:

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

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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, glucose monitor, food scale, recipe book, and more
- Free diabetes testing supplies for patients with Type 2 Diabetes
- Meal plans, member community, and more



2027 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 for you and any covered dependents** as part of your medical plan enrollment. 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
Arformoterol Albuterol Hfa Albuterol Nebulizer Solution Albuterol Oral Breyna Budesonide Oral Inhalation Budesonide/Formoterol Cromolyn Nebulizer Solution Fluticasone/Salmeterol Inhalation Powder Formoterol Ipratropium/Albuterol Nebulizer Solution Ipratropium Nebulizer Solution Levabuterol Nebulizer Solution And Concentrate Montelukast Roflumilast Terbutaline Oral Theophylline Theophylline Er Tiotropium Cap-Inhaler Wixela Inhub Zafirlukast	Citalopram Escitalopram Fluoxetine Fluoxetine Dr Fluvoxamine Fluvoxamine Er Paroxetine Paroxetine Er Sertraline	Hmg-Coa Reductase Inhibitors Atorvastatin Fluvastatin Fluvastatin Er Lovastatin Pitavastatin Pravastatin Rosuvastatin Simvastatin Other Cholesterol Lowering Agents Amlodipine/Atorvastatin Cholestyramine Cholestyramine Light Colesevelam Colestipol Ezetimibe Ezetimibe/Simvastatin Fenofibrate Fenofibric Acid Fenofibric Acid Dr Gemfibrozil Icosapent Ethyl Niacin Niacin Er Prevalite Prevalite	Acarbose Exenatide Generic Syringes, Lancets And Needles Glimepiride Glipizide Glipizide Er And Xl Glipizide/Metformin Glyburide Glyburide/Metformin Glyburide Micronized Liraglutide Metformin Metformin Er Metformin Solution Miglitol Nateglinide Pioglitazone Pioglitazone/Glimepiride Pioglitazone/Metformin Repaglinide Saxagliptin Saxagliptin/Metformin Er
Bone Disease	**Dental**	**Heart Disease & Stroke**	**Colorectal**
Alendronate Ibandronate Oral Raloxifene Risedronate Risedronate Dr Zoledronic Acid 5mg	Periomed Sodium Fluoride Rinse, Gel, Cream, Paste, Tabs And Drops	BLOOD THINNERS Aspirin, 81 Mg* & 325 Mg Aspirin-Dipyridamole Er Clopidogrel Dabigatran Dipyridamole Jantoven Prasugrel Rivaroxaban Ticagrelor warfarin	COLONOSCOPY PREP Gavilyte-C Gavilyte-G Gavilyte-N Peg-3350/Electrolytes Sodium, Potassium And Magnesium Sulfates

High Blood Pressure

ACE INHIBITORS

Benazepril
Captopril
Enalapril
Fosinopril
Lisinopril
Moexipril
Perindopril
Quinapril
Ramipril
Trandolapril

ACE INHIBITORS / DIURETIC COMBINATIONS

Benazepril/Hctz
Captopril/Hctz
Enalapril/Hctz
Fosinopril/Hctz
Lisinopril/Hctz
Quinapril/Hctz

ANGIOTENSIN II RECEPTOR ANTAGONISTS

Candesartan
Eprosartan
Irbesartan
Losartan
Olmesartan
Telmisartan
Valsartan

ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS

Candesartan/Hctz
Irbesartan/Hctz
Losartan/Hctz
Olmesartan/Hctz
Telmisartan/Hctz
Valsartan/Hctz

BETA BLOCKERS

Acebutolol
Atenolol
Betaxolol
Bisoprolol
Metoprolol Succinate Er
Metoprolol Tartrate
Nadolol
Nebivolol
Pindolol
Propranolol
Propranolol Er
Timolol

BETA BLOCKERS / DIURETIC COMBINATIONS

Atenolol/Chlorthalidone
Bisoprolol/Hctz
Metoprolol/Hctz
Propranolol/Hctz

CALCIUM CHANNEL BLOCKERS

Amlodipine
Cartia Xt
Diltiazem
Diltiazem Cd
Diltiazem Er
Felodipine Er
Isradipine
Matzim La
Nicardipine
Nifedipine
Nifedipine Er
Nisoldipine Er
Tiadylt Er
Verapamil
Verapamil Er
Verapamil Er Pm
Verapamil Sr

OTHER HIGH BLOOD PRESSURE COMBINATIONS

Amlodipine/Atorvastatin
Amlodipine/Benazepril
Amlodipine/Olmesartan
Amlodipine/Olmesartan/Hctz
Amlodipine/Valsartan
Amlodipine/Valsartan/Hctz
Trandolapril/Verapamil Er

Tobacco Cessation

Bupropion Sr 150mg
Nicotine Gum, Lozenges And Patches
Varenicline

Malaria

Atovaquone/Proguanil
Chloroquine
Mefloquine
Primaquine

Vitamins

Folic Acid*
Generic Prenatal Vitamins
Generic Pediatric Multivitamins With Fluoride*

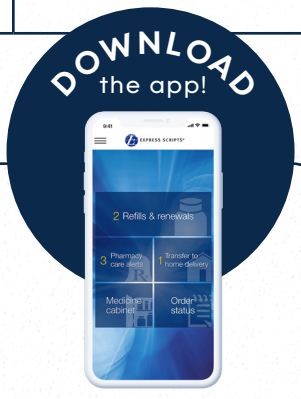
Obesity

Benzphetamine
Diethylpropion
Diethylpropion Er
Phendimetrazine
Phendimetrazine Er
Phentermine
Phentermine/Topiramate Er

Diuretics

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
By EVERNORTH

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

Telemedicine

Get started!

✓ Register for an account before you need care.

✓ Make sure to have your insurance ID card available.

Cigna: MDLive Sign in to the myCigna app

BCBS: Teladoc www.teladoc.com/alabama

24/7 Access To Board-Certified Doctors

Access board-certified doctors anytime, anywhere, including evenings, weekends, and holidays.



Common Conditions Treated:

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

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

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.

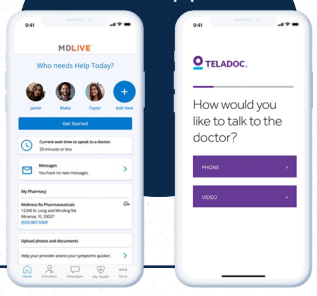
MDLIVE

TELADOC

MDLive (CIGNA)
Sign in through the myCigna app
(888) 726-3171

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

DOWNLOAD the app!



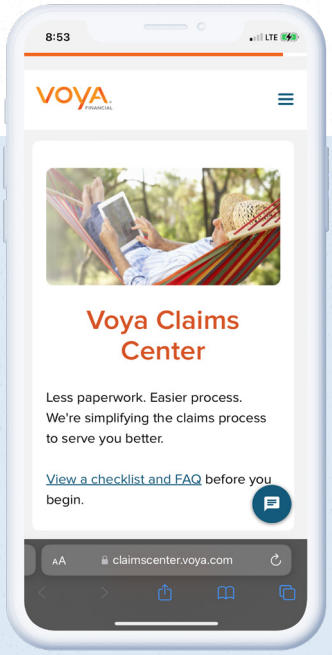
Voya

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.

Note: Voya is supplemental insurance, meaning it provides additional financial support for unexpected health events but does not replace your primary medical coverage. No underwriting 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
- Lost income due to missed time at work
- Everyday expenses like utilities and groceries
- Home healthcare costs



How To File A Claim

1. Visit Voya's Claim Center at voya.com/claims
2. Click "Start a Claim"

Information Needed

- Group Name: Clayton Homes
- Group Number: 717380
- You may be asked to provide a social security number or other information for the claimant

VOYA FINANCIAL

VOYA CONTACT INFO

presents.voya.com/ebrc/claytonhomes

(877) 236-7564

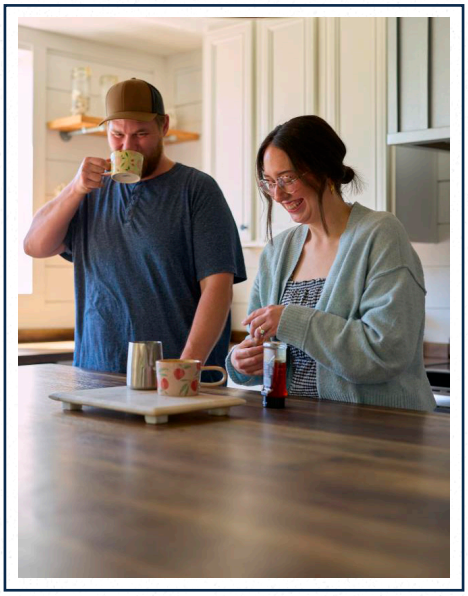
SCAN HERE TO FILE A CLAIM

Voya

Preventive Care Benefit

Get paid for completing your preventive care visits!

Enroll in any Voya plan and earn **$75 per covered person, per line of coverage**, each year. Simply complete one of the recommended health screenings below and submit your claim within one year of the date of service.



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 Screening
- ✓ Adult Annual Physical
- ✓ Colonoscopy
- ✓ COVID-19 Test / Vaccine
- ✓ Mammography
- ✓ Hearing Test
- ✓ Stress Test

Voya

Accident Insurance

Accidents can lead to unexpected costs. While our medical plans offer predictable copays, you may still have other expenses that aren't planned for, such as ambulance transportation, emergency room visits, X-rays, and follow-up care.

By enrolling in Accident Insurance, 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	$1.15
	Team Member + Spouse	$2.46
	Team Member + Child(ren)	$2.94
	Team Member + Family	$4.25

High Plan Weekly Premiums	Team Member Only	$2.04
	Team Member + Spouse	$3.98
	Team Member + Child(ren)	$4.63
	Team Member + Family	$6.57

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 30 Days	$475	$600
Rehabilitation Facility Confinement Per Day, Up To 90 Days	$150	$200
Non-induced 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	$100
Urgent Care Facility Treatment	$250	$250
Emergency Room Treatment	$250	$250
Ground Ambulance	$350	$700
Air Ambulance	$1,000	$2,000
Follow-Up Doctor Treatment	$60	$100
Chiropractic Treatment, Up To 10 Per Accident	$30	$50
Medical Equipment	$100	$200
Physical Or Occupational Therapy, Up To 10 Per Accident	$30	$50
Speech Therapy, Up To 10 Per Accident	$30	$50
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 50%, up to a maximum additional benefit of $2,000.

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	50% of the burn benefit	50% 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	$700
Paralysis - Paraplegia	$12,000	$16,000
Paralysis - Quadriplegia	$30,000	$50,000
Dislocations	**Closed/Open Reduction[2]**	**Closed/Open Reduction[2]**
Hip Joint	$2,550 / $5,100	$5,000 / $10,000
Knee	$1,600 / $3,200	$3,000 / $6,000
Ankle Or Foot Bone(s), Other Than Toes	$1,250 / $2,500	$3,600 / $7,200
Shoulder	$2,500 / $5,000	$3,000 / $6,000
Elbow	$750 / $1,500	$1,500 / $3,000
Wrist	$750 / $1,500	$1,500 / $3,000
Finger / Toe	$275 / $550	$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	$6,000 / $12,000
Leg	$1,500 / $3,000	$2,800 / $5,600
Ankle	$2,500 / $5,000	$2,700 / $5,400
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)	$2,800 / $5,600	$3,000 / $6,000
Finger, Toe	$200 / $400	$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 FINANCIAL

VOYA CONTACT INFO

presents.voya.com/ebrc/claytonhomes

(877) 236-7564

SCAN HERE TO FILE A CLAIM

Voya

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 2027? Hospital Indemnity coverage can provide additional financial support during and after childbirth. You would receive a hospital admission benefit, a daily confinement benefit based on the number of days you are hospitalized (beginning on day 2), and a $300 newborn benefit. If your newborn is added to your Hospital Indemnity coverage following birth, additional admission and confinement benefits may also be available if your baby requires hospital treatment.

Covered Benefits	Low Plan	High Plan
Admission Benefit An admission benefit is payable for Hospital, Critical Care Unit, and Rehabilitation Facility admission, once per confinement.	$1,000	$2,000
Hospital Confinement A daily confinement benefit is payable for up to 90 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 90 days per confinement, beginning on day 2 of confinement.	$200	$200
Rehabilitation Facility Confinement A daily confinement benefit is payable for up to 90 days per confinement, beginning on day 2 of confinement. Includes mental health and substance use facilities.	$100	$100
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

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

Voya

Critical Illness

Enrolling in Critical Illness insurance coverage **pays 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 elect.

You can receive a benefit more than once. Each condition below is payable multiple times as long as you have the policy in place. For instance, if you had a covered heart attack in 2027, then had a second heart attack, you may be eligible for payment.**

Coverage Options	
Team Member	$10,000, $20,000, $30,000, or $40,000
Spouse	$10,000, $20,000, $30,000, or $40,000 – not to exceed 100% of Team Member's elected coverage
Child(ren)	$10,000, $20,000, $30,000, or $40,000 – not to exceed 100% 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
  (50% Of Critical Illness Benefit)
- Coronary Artery Bypass 100%
- Heart Attack and Sudden Cardiac Arrest 110%
- Cancer 110%
- Stroke 110%

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
  (25% Of Critical Illness Benefit)
- Type I Diabetes 100%
  (100% 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
  (100% Of Critical Illness Benefit)
- Benign Brain Tumor 100%
- Stem Cell Transplant
  (100% 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.
**There is a 1 month separation period for cancer diagnoses.

Voya

Critical Illness

Quality Of Life Benefit

- Permanent Paralysis 100%
- Amyotrophic Lateral Sclerosis (ALS) (100% Of Critical Illness Benefit)
- Multiple Sclerosis 100%
- Advanced Dementia (Including Alzheimer's disease 100%)
- Coma 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 (25% of Critical Illness Benefit)
- Parkinson's Disease 100%

Additional Child Disease Benefit

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

Team Member and Spouse Coverage Weekly Premiums

Age	$10,000	$20,000	$30,000	$40,000
Under 25	$0.44	$0.88	$1.32	$1.75
25-29	$0.53	$1.06	$1.59	$2.12
30-34	$0.78	$1.57	$2.35	$3.14
35-39	$0.95	$1.89	$2.84	$3.78
40-44	$2.03	$4.06	$6.09	$8.12
45-49	$4.20	$8.40	$12.60	$16.80
50-54	$5.01	$10.02	$15.02	$20.03
55-59	$6.12	$12.23	$18.35	$24.46
60-64	$7.94	$15.88	$23.82	$31.75
65-69	$8.08	$16.15	$24.23	$32.31
70+	$10.43	$20.86	$31.29	$41.72
Cost based on your age as of 1/1/2027.				

Child(ren) Coverage Weekly Premiums

Coverage	$10,000	$20,000	$30,000	$40,000
Rate	$0.81	$1.62	$2.42	$3.23

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.

Common Eligible Expenses

- Doctor copays
- Prescription medications
- Glasses and contact lenses
- Dental treatment and orthodontia
- Chiropractic care
- Hearing aids
- Eligible over-the-counter items such as allergy medications, antacids, and cold/flu remedies. Some items may require a prescription.

Scan to view a list of qualifying expenses

How it Works

1. Elect your annual contribution during enrollment.
2. Funds are available through your Optum FSA debit card or you can pay with another form of payment and request reimbursement from your account.
3. Use funds for eligible healthcare expenses. You may be required to submit documentation of your purchase.
4. Track balances and claims through Optum Financial.

Important Things to Know

Consider your expected medical and Rx costs before electing your FSA annual contribution.

- Once an election for Health Care FSA has been made, you cannot change the amount unless you have a qualifying life event.
- Use it or lose it account. **You may rollover up to $680 into the following plan year.** Unused amounts exceeding the rollover limit will be forfeited.

What happens if I leave the company?

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

Garner Reminder

Due to IRS limits, do not use Health Care FSA dollars for expenses that will be reimbursed by Garner.

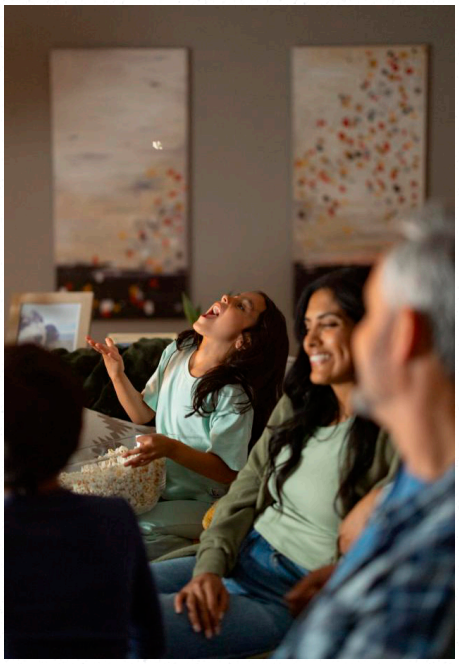
Dependent Care

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 and children 12 and under.**

How it Works

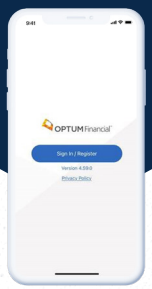
1. Elect your annual contribution during your benefits enrollment. The associated premium will be deducted each paycheck.
2. Pay for eligible dependent expenses.
3. Submit for reimbursement through Optum Financial. You may only be reimbursed up to the amount that has been deducted from your paycheck and contributed to your account so far.



Important Note

Dependent Care FSA funds do not roll over into the following plan year. Unused funds cannot be reimbursed or transferred to your Health Care FSA.

DOWNLOAD the app!



Optum Financial™

OPTUM FINANCIAL CONTACT INFO

secure.optumfinancial.com

(833) 229-4432

As 2027 IRS annual maximum allowable amounts are released, Clayton will allow elections up to maximum amounts.

Dependent Care

Flexible Spending Account

Save pre-tax dollars to pay for eligible dependent care expenses.

Eligible Expenses

- Licensed daycare centers, nurseries, or preschools
- Summer day camps
- Before-and-after school care
- Qualifying custodial care for dependent adults



Not Eligible

- Medical expenses
- Registration fees
- Food and clothing
- Sports lessons
- Field trips
- Late payment fees

What happens if I leave the company?

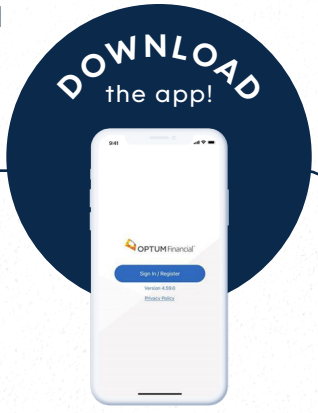
You may continue to submit eligible expenses for reimbursement through the end of the calendar year. Any funds you contributed to your account through payroll deductions while employed remain available for eligible reimbursement.

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OPTUM FINANCIAL CONTACT INFO

secure.optumfinancial.com

(833) 229-4432



Dental

Enrollment Group	Preventive Weekly Premium	Major + Ortho Weekly Premium
Team Member Only	$5.07	$10.16
Team Member + Spouse	$10.16	$20.31
Team Member + Child(ren)	$10.16	$20.31
Team Member + Family	$10.16	$20.31
Deductible		
Team Member Only	$50	$25
Team Member + Spouse Team Member + Child(ren) Team Member + Family	$150	$75
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) X-Rays Sealants Space Maintainers	Covered At 100% No Deductible	Covered At 100% No Deductible
Basic Services		
Fillings Extractions Root Canals Periodontic Procedures Oral Surgery	Covered At 80% After Deductible	Covered At 80% After Deductible
Major Services		
Inlays / Onlays Crowns Dentures	Not Covered	Covered At 50% After Deductible
Orthodontic Services	Not Covered	Covered At 50% Up To $1,500 After Deductible ($1,500 lifetime max per individual)

cigna healthcare

CIGNA CONTACT INFO

dentalmarketplace.cignahealthcare.com

(800) 244-6224

Vision

Enrollment Group	Weekly Premium
Team Member Only	$1.12
Team Member + Spouse	$2.24
Team Member + Child(ren)	$2.54
Team Member + Family	$3.94

	In-Network
Eye Exam **(once per calendar year)**	$10 Copay
Frames **(once per calendar year)**	$175 Allowance
Standard Plastic Lens **(once per calendar year)**	$20 Copay
Single	
Bifocal	
Trifocal	
Lenticular	
Adult Polycarb, Scratch Coating & Tint	No Cost
Contact Lens **(instead of lenses and frames)**	$175 Allowance
Fitting Fee	$30 Copay

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.

SuperiorVision™

SUPERIOR VISION CONTACT INFO

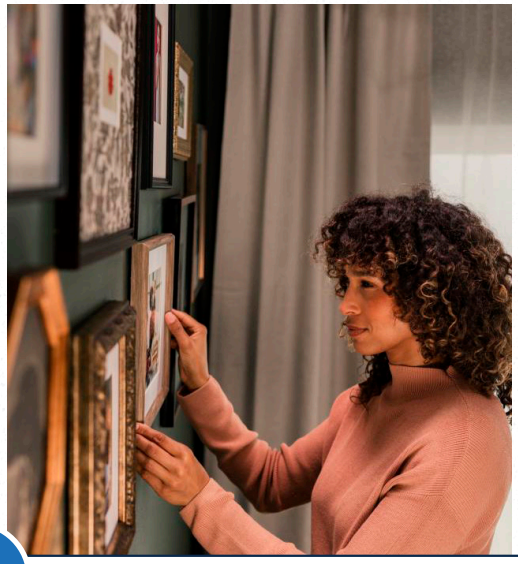
superiorvision.com

(844) 549-2603

Life Insurance

$30,000

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



NOTE: Age-Based Reductions: Basic Life, Additional Life, and Spouse Life Insurance coverage reduces by 35% at age 65 and by 50% at age 70

Additional Life

- Purchase up to 10 times your covered earnings, not to exceed $2 million.
- Your cost is based on the coverage amount selected and your age as of January 1. Premiums will be shown during enrollment.
- Coverage amounts are based on gross wages from a specific amount of time, including eligible bonuses and commissions.

Spouse Life

- Purchase up to $250k in increments of $25k.
- Your cost is based on the coverage amount you select and your age as of January 1. Rates will be displayed during enrollment.
- Coverage cannot exceed 50% of your life insurance coverage.
- You must elect Additional Life Insurance to enroll in Spouse Life Insurance.
- Underwriting may be required.

Child Life

- Purchase $10,000 of life insurance coverage for eligible children under age 26.
- Cost is $0.23 per week for any number of children covered.

Prudential

PRUDENTIAL CONTACT INFO

contact by phone // (800) 524-0542

Short-Term Disability

Short-Term Disability (STD) provides income replacement if you are unable to work due to a non-work-related illness, injury, or qualifying medical condition.

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 on your salary or hourly rate and commissions from a specified period of time.
- Benefits begin on the 8th day of disability after a 7-day waiting period. For disabilities caused by an accident, benefits begin immediately.
- STD benefits will be reduced by payments received from state-sponsored disability or other eligible leave programs.
- Short-Term Disability claims are paid by AbsenceOne.

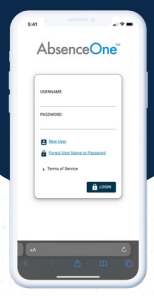
Buy-Up Option

Increase your income protection with optional Buy-Up coverage.

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) helps replace a portion of your income if a covered illness or injury keeps you out of work for an extended period. Benefits begin after 26 weeks of disability.

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 benefits are based on your salary or hourly rate, plus bonuses and commissions from a specified period of time.
- LTD benefits may be reduced by income received from sources such as Social Security Disability Insurance (SSDI) or Workers' Compensation. ($100 monthly minimum)
- A pre-existing condition review occurs if your date of disability falls within 12 months of your coverage effective date.

Buy-Up Option

Increase your income protection with optional Buy-up coverage. Underwriting is required.



Cost is based on amount of your covered earnings.



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

Prudential

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 new mothers 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.
- Enroll during your second trimester to receive $125.
- Upon completion of the program, Cigna will automatically mail a check to your home address within 8 to 10 weeks or through direct deposit.



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

Paid Parental Leave

We're proud to offer Paid Parental Leave to support 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 mothers after delivery. We hope this offering of Paid Parental Leave will encourage and empower new parents to take the time they need and provide financial support while doing so.

For Mothers Who Deliver	All Parents
✓ 10 weeks following delivery ✓ 100% base pay at time of delivery ✓ Paid through AbsenceOne ✓ Benefits will be reduced by payments received from state disability or paid leave programs.	✓ 4 weeks ✓ 50% of base pay ✓ Must be used within 6 months of birth, adoption, or foster placement ✓ Cannot be used intermittently ✓ Paid through payroll ✓ Insurance premiums and arrears deducted ✓ For moms who deliver, the 4 weeks at 50% pay will begin after the 10 weeks of 100% pay ends

Please ensure your Paid Parental Leave paperwork is completed prior to delivery or before parental leave begins.



Identity Theft Protection

Identity Theft Protection

Identity theft, account takeovers, data breaches, and online scams can happen to anyone. Norton LifeLock helps monitor for potential misuse of your personal information and provides support if identity theft occurs.

Why Consider Identity Theft Protection?

Identity theft can take many forms, including unauthorized credit accounts, tax fraud, data breaches, account takeovers, and misuse of personal information.
Consider Identity Theft Protection to help:

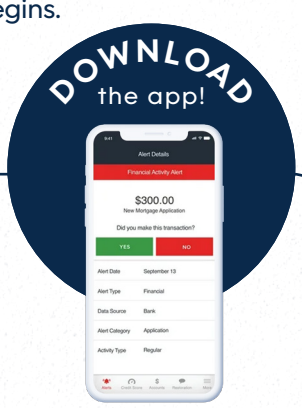
- ✓ Monitor for suspicious activity
- ✓ Detect potential fraud sooner
- ✓ Protect personal information
- ✓ Access support if identity theft occurs
- ✓ Gain peace of mind for you and your family

How does Norton LifeLock work?

Norton LifeLock helps protect your identity by monitoring for potential misuse of your personal information, including your Social Security number, name, address, and date of birth. If suspicious activity is detected, you'll receive alerts so you can respond quickly. If identity theft occurs, Norton LifeLock provides access to restoration specialists, legal experts, and reimbursement for covered stolen funds and personal expenses, up to plan limits. Please note that LifeLock cannot monitor all transactions at all businesses. As a member, you'll also receive ongoing communications and important account alerts to help you stay informed.

Getting Started:

1. You'll receive a welcome email from Norton LifeLock after coverage begins.
2. Use the registration link provided to create your online account.
3. Set up your username and password.
4. Activate monitoring and protection features.



norton™
LifeLock Benefit Solutions

NORTON LIFELOCK CONTACT INFO
www.norton.com/benefitplans
(800) 607-9174
Monday - Friday // 9AM - 7PM ET

Identity Theft Protection

Norton 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

Norton LifeLock Benefit Premier Plus™

All The Features Of Benefit Essential and PLUS:

- ✓ **Bank Account Takeover Alerts**
- ✓ **Credit Monitoring (3 Bureau)**
- ✓ **Credit Report & Scores (3 Bureau)**
- ✓ **Alerts on Crimes committed in your name**
- ✓ **Home Title Monitoring**
- ✓ **Cybercrime insurance up to $50,000**
- ✓ **Norton Device Security**
  - · Number of Devices (10 Devices for Team Members Only, Family Gets Unlimited)
  - · Anti-spyware, antivirus, malware & ransomware protection
  - · Content Supervision
  - · Password Manager
  - · PC Cloud backup (50GB)
  - · Smart Firewall
  - · Scam protection for SMS, Call blocker, email browsing

SCAN HERE
for a full list of Norton LifeLock features for 2027!

Benefit Essential Weekly Premiums	
Team Member Only	$1.27
Team Member + Family	$2.53

Benefit Premier Plus Weekly Premiums	
Team Member Only	$2.31
Team Member + Family	$4.38

No one can prevent all identity theft.
† Norton 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 to $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 provides a dollar-for-dollar match on the first 4% you contribute to the plan, up to the annual IRS limit.

Eligibility Requirement

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

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 an 11% deferral rate.**

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.

Annual Limits & Catch-up Options

Contribution	2027 Limit
Pre-Tax / Roth	$24,500 ages 49 and under
Catch-up	$8,000 ages 50 and over
"Super" Catch-up	$11,250 ages 60-63

Annual limits are established by the IRS and may change each year. Refer to current IRS guidance for the most up-to-date limits.

401(k) Retirement Plan

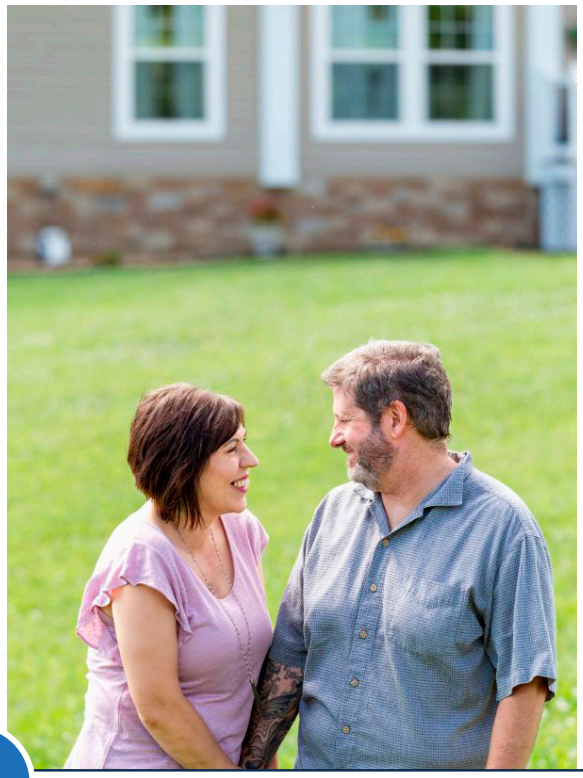
Important: Designate Your 401(k) Beneficiary

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 on Fidelity's website, 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



To connect with the Clayton 401(k) Team, email 401k@ClaytonHomes.com.

Fidelity INVESTMENTS

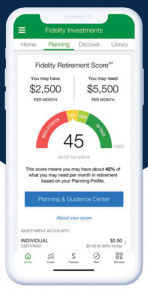
FIDELITY CONTACT INFO

netbenefits.com

English: (800) 835-5095 //

Spanish: (800) 587-5282

DOWNLOAD the app!



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 our Team Members and their families. 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.

Employee Assistance Program (EAP)

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

Receive 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
DHH: (711) 697-0353

Online: guidanceresources.com
Clayton Web ID: GRS311

Need Additional Support?

Connect with mental health providers through these resources, available at no cost for Team Members and their families enrolled in the Clayton medical plan.

Garner

Garner can help you find top-rated providers near you with expertise in mental and behavioral health. Download the Garner Health app or visit mygarnerguide.com. See pages 12 - 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 the same day or schedule a conversation at a later time. See page 19 for more details.

MDLive (Cigna)
on the myCigna app // (888) 726-3171

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

National Resources

These national mental health resources are available to all Team Members and their families, regardless of whether they are enrolled in the Clayton Medical Plan.

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 connect with 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 assistance, 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, help is just a call or chat away. Trained advocates offer free, confidential support 24/7.

Tobacco Cessation Program

Ready to quit?

STRIDES can help!

The STRIDES program available through Quit for Life 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 a dedicated 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.** Translation services available for many languages, including Spanish.

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

STRIDES
your path. your power.

2027
Vendor Contacts

PROGRAM	VENDOR	WEBSITE	PHONE
401(k)	Fidelity	netbenefits.com	(800) 835-5095
Additional Resources	Employee Assistance Program (EAP)	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	www.norton.com/benefitplans	(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)	Teladoc	teladoc.com/alabama	(855) 477-4549
Telehealth (Cigna)	MDLive	Sign-In through the myCigna app	(888) 726-3171
Tobacco Cessation	STRIDES	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/ebrc/claytonhomes	(877) 236-7564

Benefits Contact Info | Benefits@ClaytonHomes.com // (865) 380-3000 x7400

Benefits ABC's

Understanding your benefits starts with understanding the key terms. Use this guide to learn common healthcare benefits terms that can help you make informed decisions and get the most from your coverage.

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 qualifying life events, such as marriage or the birth of a child, Team Members are given 31 days to change their benefits elections. Log on to Workday to enroll in benefits coverages.

Copay (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: If you're enrolled in the Simple or Simple Plus plans, you are eligible for copay reimbursements when you use Garner-approved providers.

Garner Top Provider Directory

Garner offers a doctor search tool to help you find top-performing, in-network doctors near you with available appointments. Learn more at mygarnerguide.com.

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 Garner-approved providers.

Out-Of-Pocket Maximum

This is the maximum amount you'll pay for covered healthcare services during a plan year. Once you reach this limit, your insurance covers 100% of eligible expenses.

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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Clayton benefits