



TWENTY-TWENTY-THREE

# Benefits Guide

20  
23

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# New for 2023

## garner



### GARNER HEALTH

Garner is a free benefit that helps you find the highest-quality in-network doctors. When you visit a Garner-recommended provider, Garner will reimburse certain co-pays up to an annual limit. \*Must be enrolled in the Clayton medical plan

Learn more on pages 11-14.

### VIRTA DIABETES PROGRAM

Virta's type 2 diabetes reversal program safely eliminates or reduces diabetes medications and assists in returning blood sugar to sub-diabetic levels. \*Must be enrolled in the Clayton medical plan

Learn more on pages 15-16.

### ADDED FEATURES WITH LIFELOCK IDENTITY THEFT PROTECTION

Get more protection from identity theft with LifeLock, at an even lower rate! New features for 2023 include social media monitoring, device security with parental control and cloud backup (up to 10GB), checking and savings account application alerts and more!

Learn more on pages 45-46.

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# WHEN CAN I ENROLL?

## NEW HIRES:

- You must complete your online enrollment before your effective date.
- Benefits are effective on your 31<sup>st</sup> day of employment.
- 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 online 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 1<sup>st</sup> 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.

## ELIGIBLE DEPENDENTS INCLUDE:

- Your legally married spouse.
- Children under age 26: including biological, step children, legally adopted children, children placed for adoption, and children who you are legally appointed as guardian or limited guardian (cannot be temporary guardian).
- Disabled children over age 26: an unmarried child who is mentally or physically disabled and incapable of engaging in self-sustaining employment.



# HOW DO I ENROLL?

LOG ON TO:

[WWW.MYCLAYTONBENEFITS.COM](http://WWW.MYCLAYTONBENEFITS.COM)



SCAN HERE TO  
BEGIN YOUR  
ENROLLMENT!

Visit the library section to view plan documents, videos and much more!



**Our medical plans are designed to be SIMPLE. They allow you to know exactly how much services will cost before you receive care, in an effort to eliminate surprise medical bills. You will only pay a co-pay (a flat fee) for in-network care and services with no deductibles or co-insurance! This will help you plan and budget for out-of-pocket costs, which will make it easier to get the care you need! Over 100 prescription drugs for chronic conditions are covered at no cost. You can review the free Rx list on pages 17-18 of the Benefits Guide.**

**We also understand searching for in-network medical providers can be overwhelming. In an effort to assist our Team Members make an informed decision, we are pleased to introduce a new benefit with Garner! Garner allows you to easily search for the best in-network doctors within minutes through their mobile app, website, or by calling a Garner Concierge Representative. The best part - when you use Garner to find care you can be reimbursed up to \$1,000 for individuals and \$2,000 for families annually for applicable co-pays.**



**\*Medical carrier is based on your location and will be shown to you when completing your online enrollment.**

# MEDICAL PLAN COMPARISON

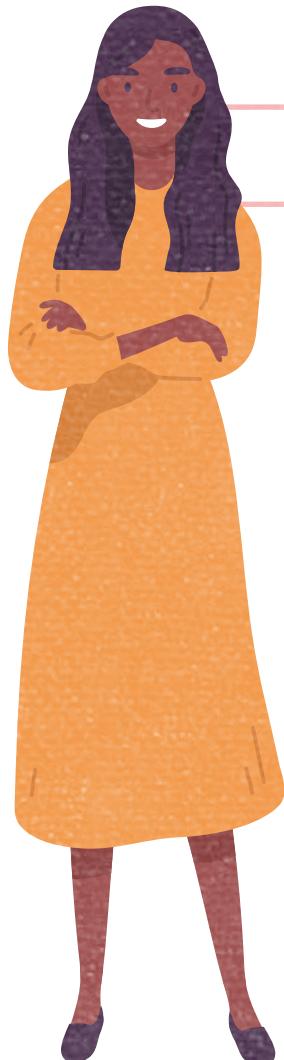
## (In-network)



DEDUCTIBLE	\$0	\$0
<b>MEDICAL CO-PAYS</b>		
Preventative Care	Free	Free
Telehealth	Free	Free
Lab	Free	Free
Primary Care Physician	\$40	\$25
OBGYN	\$40	\$25
Outpatient Therapy (ex. mental health or substance abuse)	\$40	\$25
Physical, Speech or Occupational Therapy	\$60	\$40
Chiropractor	\$60	\$40
Urgent Care	\$75	\$50
Standard Radiology (ex. x-ray or ultrasound)	\$90	\$60
Specialist	\$120	\$60
Durable Medical Equipment	\$150	\$100
Advanced Imaging (ex. MRI, CAT or PET scan)	\$500	\$200
Outpatient Procedure / Surgery	\$700	\$350
Ambulance	\$700	\$350
Emergency Room	\$1,000	\$500
Inpatient Stay	\$1,500 / day	\$750 / day
<b>PHARMACY CO-PAYS</b>		
<b>30-Day Supply</b>		
Generic	\$20	\$10
Preferred Brand Name	\$120	\$60
Non-preferred / Specialty	\$250	\$150
<b>90-Day Supply</b>		
Generic	\$50	\$25
Preferred Brand Name	\$300	\$150
Non-preferred / Specialty	\$625	\$375
<b>OUT-OF-POCKET MAXIMUMS</b>		
Combined Medical and Pharmacy Out-of-Pocket Max	\$6,000 per individual or \$12,000 combined family max	\$4,000 per individual or \$8,000 combined family max
<b>WEEKLY PREMIUMS</b>		
Team Member Only	\$22.84	\$43.92
Team Member + Spouse	\$50.27	\$94.34
Team Member + Child(ren)	\$41.12	\$77.06
Team Member + Family	\$68.53	\$110.20

*Please note: if the service or prescription charge is lower than the co-pay, you will pay the lesser amount.*

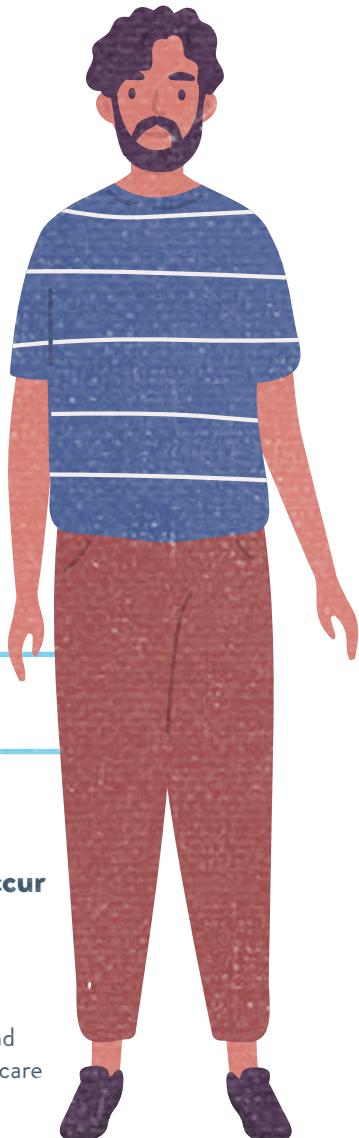
# WHICH PLAN IS

The logo for Simple, featuring the word "Simple" in a white, sans-serif font. A small white house-like roof icon is positioned above the letter "i".

## PAIGE:

- Recent college graduate
- Doesn't use care often
- Needs the **cheapest medical premium**

Paige enrolls in the **Simple Plan** because she seldom visits the doctor and wants lower premiums.



## MIGUEL:

- Has an **emergency fund**
- Can afford **higher out-of-pocket expenses if they occur**
- **One generic medication**

Miguel enrolls in the **Simple Plan** because he rarely visits the doctor and he has an emergency fund for healthcare expenses if he needs it.

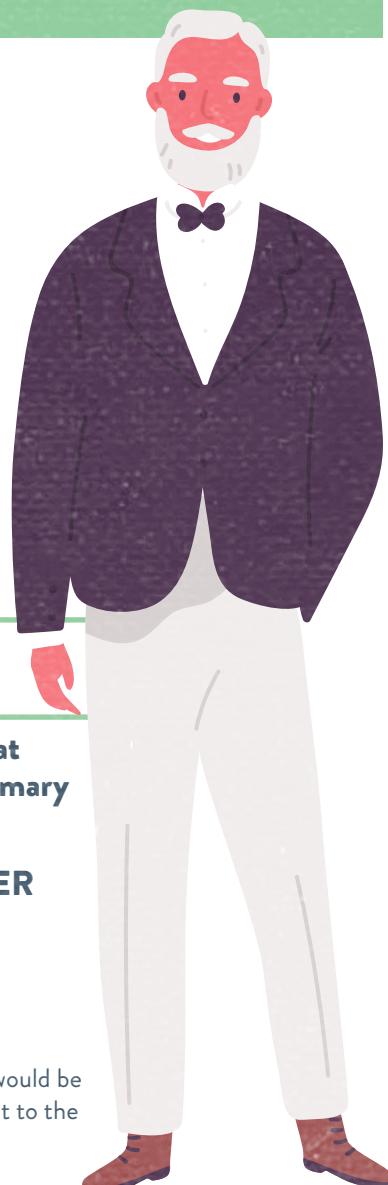
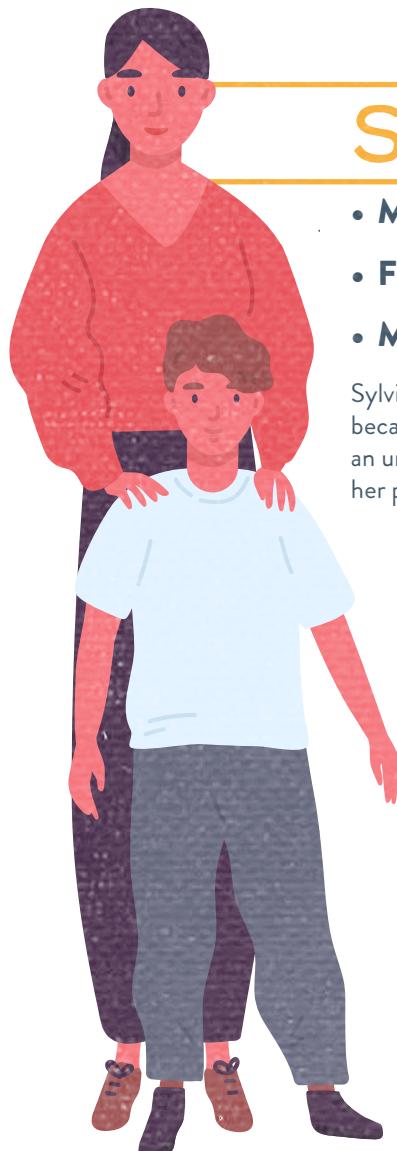
# RIGHT FOR ME?



## SYLVIA:

- Married, three children
- Frequent urgent care visits
- Multiple monthly medications

Sylvia enrolls in the **Simple Plus Plan** because she knows it will only cost \$50 for an urgent care visit and she'll pay less for her prescription drugs.



## ARTHUR:

- Has a medical condition that requires frequent use of primary care and specialty doctors
- Worried about trips to the ER
- Fears unexpected medical expenses

Arthur enrolls in the **Simple Plus Plan** because his total out-of-pocket costs would be lower and he'll know exactly what a visit to the ER will cost him before he seeks care.



	IN-NETWORK	OUT-OF-NETWORK
<b>DEDUCTIBLE</b>	<b>\$0</b>	<b>\$5,000 per individual or \$10,000 combined family max</b>
<b>MEDICAL CO-PAYS</b>		
Preventative Care	Free	
Telehealth	Free	
Lab	Free	
Primary Care Physician	\$40	
OBGYN	\$40	
Outpatient Therapy (ex. mental health or substance abuse)	\$40	
Physical, Speech or Occupational Therapy	\$60	40% after deductible
Chiropractor	\$60	
Urgent Care	\$75	
Standard Radiology (ex. x-ray or ultrasound)	\$90	
Specialist	\$120	
Durable Medical Equipment	\$150	
Advanced Imaging (ex. MRI, CAT or PET scan)	\$500	
Outpatient Procedure / Surgery	\$700	
Ambulance	\$700	\$700
Emergency Room	\$1,000	\$1,000
Inpatient Stay	\$1,500 / day	40% after deductible
<b>PHARMACY CO-PAYS</b>		
<b>30-Day Supply</b>		
Generic	\$20	
Preferred Brand Name	\$120	Not Covered
Non-preferred / Specialty	\$250	
<b>90-Day Supply</b>		
Generic	\$50	
Preferred Brand Name	\$300	Not Covered
Non-preferred	\$625	
<b>OUT-OF-POCKET MAXIMUMS</b>		
Combined Medical and Pharmacy Out-of-Pocket Max	\$6,000 per individual or \$12,000 combined family max	\$10,000 per individual or \$20,000 combined family max
<b>ENROLLMENT GROUP</b>		
Team Member Only		\$22.84
Team Member + Spouse		\$50.27
Team Member + Child(ren)		\$41.12
Team Member + Family		\$68.53



DEDUCTIBLE	IN-NETWORK	OUT-OF-NETWORK
	\$0	\$3,000 per individual or \$6,000 combined family max

MEDICAL CO-PAYS		
Preventative Care	Free	
Telehealth	Free	
Lab	Free	
Primary Care Physician	\$25	
OBGYN	\$25	
Outpatient Therapy (ex. mental health or substance abuse)	\$25	
Physical, Speech or Occupational Therapy	\$40	
Chiropractor	\$40	
Urgent Care	\$50	
Standard Radiology (ex. x-ray or ultrasound)	\$60	
Specialist	\$60	
Durable Medical Equipment	\$100	
Advanced Imaging (ex. MRI, CAT or PET scan)	\$200	
Outpatient Procedure / Surgery	\$350	
Ambulance	\$350	\$350
Emergency Room	\$500	\$500
Inpatient Stay	\$750 / day	40% after deductible

PHARMACY CO-PAYS		
30-Day Supply		
Generic	\$10	
Preferred Brand Name	\$60	Not Covered
Non-preferred / Specialty	\$150	
90-Day Supply		
Generic	\$25	
Preferred Brand Name	\$150	Not Covered
Non-preferred	\$375	

OUT-OF-POCKET MAXIMUMS		
Combined Medical and Pharmacy Out-of-Pocket Max	\$4,000 per individual or \$8,000 combined family max	\$8,000 per individual or \$16,000 combined family max

ENROLLMENT GROUP	WEEKLY RATE
Team Member Only	\$43.92
Team Member + Spouse	\$94.34
Team Member + Child(ren)	\$77.06
Team Member + Family	\$110.20



# GARNER HEALTH

Garner is a free innovative benefit that helps you find the highest-quality in-network doctors, and reimburses certain co-pays when you visit a Garner-recommended provider.

**FREE for Team Members, spouses and dependents on the Clayton medical plan.**

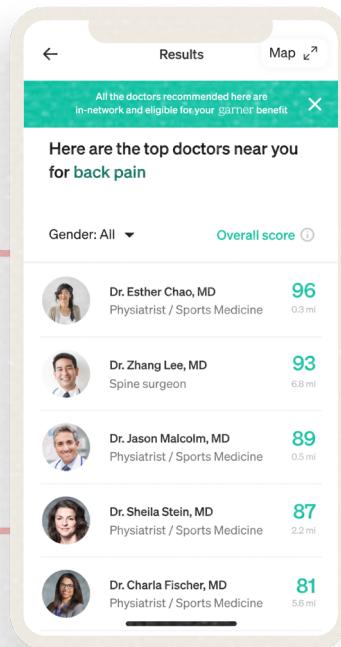
## HOW GARNER WORKS

Garner uses real data to recommend doctors who have a history of:

- Accurately diagnosing health issues
- Successfully treating patients
- Receiving excellent patient reviews

## GET REWARDED FOR USING GARNER!

Garner reimburses your out-of-pocket co-pays up to **\$1,000 for individuals and \$2,000 for families per year!**



## WHAT DOES GARNER COVER?

garner

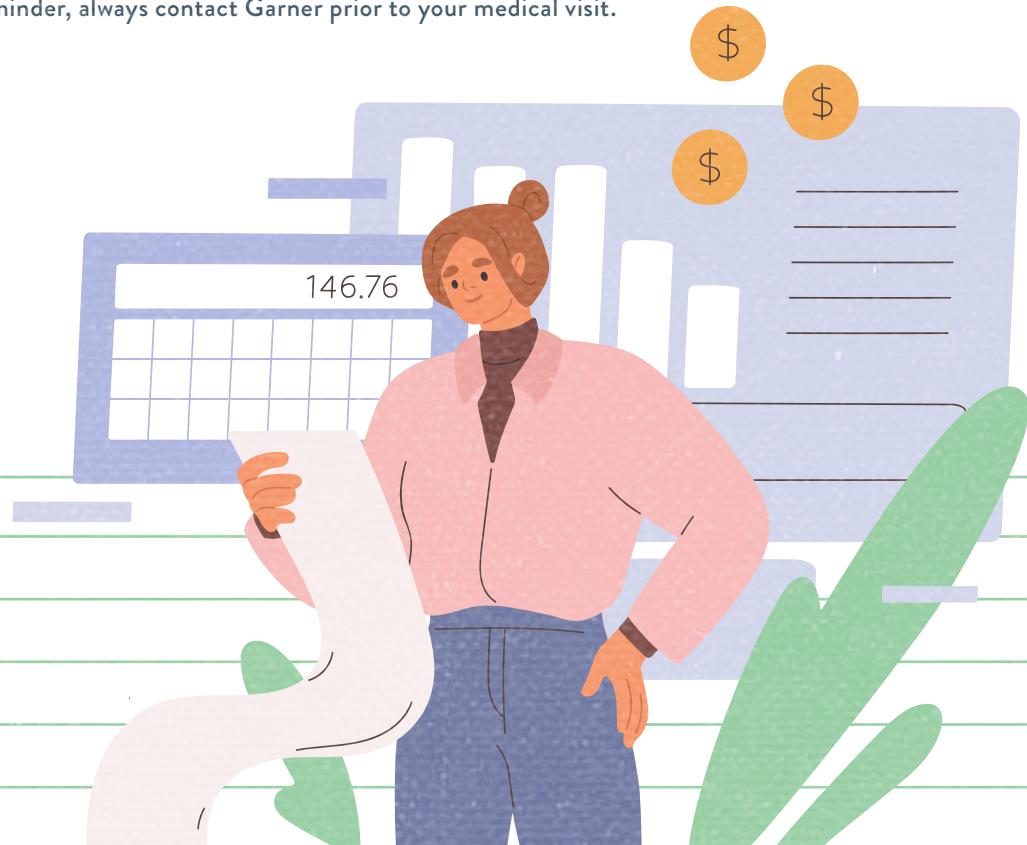
Before you seek medical care, connect with Garner through the mobile app, Garner Concierge or by phone. Garner will provide a list of top-rated providers for your medical needs that are in-network within your medical plan. When you see the Garner-recommended provider, all co-pays for medical services will be reimbursed up to an annual amount.

## WHEN SHOULD I USE GARNER?

**Use Garner when you need to find a provider for you or your family, such as:**

- ✓ Primary care provider
- ✓ Pediatrician
- ✓ Specialist (ex. Orthopedist, Cardiologist, or Oncologist)
- ✓ Imaging or lab work
- ✓ Physical therapist
- ✓ Urgent care
- ✓ Mental health therapist

\*Garner does not reimburse for all medical services, such as prescriptions or emergency room visits. As a reminder, always contact Garner prior to your medical visit.



# GET STARTED WITH GARNER

## 1. Sign up for an account with Garner



Scan Here

OR



Visit [getgarner.com/go](http://getgarner.com/go)

OR



Call [\(866\) 761-9586](tel:8667619586)

ENTER ORGANIZATION NAME:

**Cigna Medical Plan:** Clayton Homes - Cigna

**BCBS Medical Plan:** Clayton Homes - BCBS

Create your account beginning **November 1st, 2022!**

## 2. Find a quality Garner-recommended provider.

After creating an account with Garner, you can begin searching for high-quality in-network providers via the mobile app, website, or by calling a Garner Concierge Representative. Simply tell Garner what type of provider you are looking for (Ex. primary care physician, chiropractor, or mental health therapist) and Garner will provide a tailored list of the best doctors, along with all the information you need to make an informed decision on where to seek medical care.

If you are already established with a primary care physician, chiropractor, therapist, etc., check with Garner to verify whether they are a Garner-recommended provider before your next visit in 2023. If Garner approved, visits with previously established providers qualify for co-pay reimbursements!

## 3. Visit your Garner-recommended doctor.

In order to be eligible for a co-pay reimbursement, you must interact with Garner via the mobile app, website, or Garner Concierge Representative to receive the recommended providers prior to your medical visit. Co-pays will not be eligible for reimbursement for any date of service prior to your interaction with Garner.

## 4. Your reimbursement is on the way!

Garner will automatically reimburse you for out-of-pocket co-pays incurred from a provider who was recommended to you prior to your visit. Garner will automatically initiate the reimbursement process after your medical visit, no documentation is necessary!

It takes approximately six to eight weeks from the date of service for a reimbursement check to arrive at your home address.

If you have questions about the status of your reimbursement, call your Garner Concierge Representative [\(866\) 761-9586](tel:8667619586).

## GARNER CONCIERGE

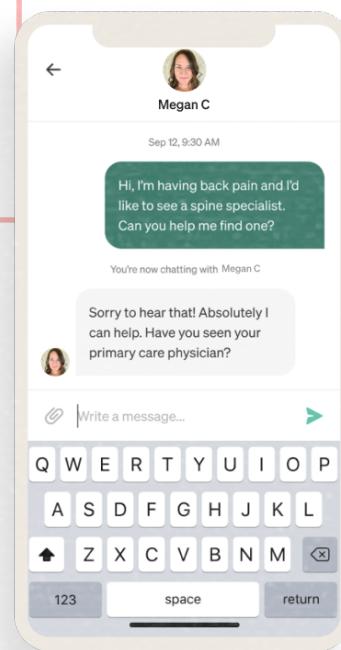
### GARNER CONCIERGE REPRESENTATIVE

If you have any questions, need provider recommendations or help making an appointment, message the concierge in the mobile app or website by clicking “Message the Concierge” or call (866) 761-9586 Monday through Friday from 8:00 a.m. to 8:00 p.m. ET.

### Contact Garner

Monday – Friday • 8 am – 8 pm ET

- Visit [Getgarner.com](https://Getgarner.com)
- Email [concierge@getgarner.com](mailto:concierge@getgarner.com)
- Download the [Garner Health mobile app](#)
- Call [\(866\) 761-9586](tel:(866)761-9586)



## PLANNING YOUR FSA

You should reconsider how much you elect to contribute to your FSA account for 2023. Since Garner will reimburse out-of-pocket co-pays, you may not need to contribute the same amount to your FSA as you historically have.

**IMPORTANT:** Due to IRS regulations, you are not able to use FSA dollars to pay for medical expenses that will be reimbursed by Garner.

*Garner has no financial relationships with doctors. Recommendations are based solely on independent analysis, not commissions or fees.*





# VIRTA

## TYPE 2 DIABETES REVERSAL PROGRAM

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Virta is a comprehensive type 2 diabetes reversal program that can help patients either reverse or better manage their type 2 diabetes, while also providing a safe and sustainable weight loss option! Virta aims to safely eliminate or reduce diabetes medications and assists to returning blood sugar to sub-diabetic levels.

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### ELIGIBILITY

- ✓ Team Members, spouses and dependents who are 18-79 years old
- ✓ Must be enrolled in the Clayton medical plan
- ✓ For individuals diagnosed with type 2 diabetes (A1c of 6.5% or higher)

Virta is available  
at **NO COST**  
to eligible  
participants!

### WHAT'S INCLUDED WITH VIRTA

- Virta starter kit includes meters, strips, connected scale and more
- Dedicated Health Coach to provide daily support
- Continuous medical supervision by a physician-led care team
- A private, opt-in patient community for discussion and support amongst peers
- Educational resources like specialized meal plans, videos, games and more
- Virta is 100% online, providing you convenient access to expert care

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To learn more about Virta, visit [www.virtahealth.com/howitworks](http://www.virtahealth.com/howitworks). Enrollment for Virta will begin January 1, 2023.





# 2023 FREE PRESCRIPTION DRUG LIST

In an effort to assist Team Members and their families take essential medications for chronic conditions, the below list of drugs are completely free to you and any covered dependents on your medical plan in 2023. 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	<b>HMG-COA REDUCTASE INHIBITORS</b>  Atorvastatin Fluvastatin Lovastatin Pravastatin Rosuvastatin Simvastatin  <b>OTHER CHOLESTEROL LOWERING AGENTS</b>  Amlodipine/Atorvastatin Cholestyramine Cholestyramine Light Colesevlam 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 AND STROKE	COLORECTAL
Alendronate Ibandronate Raloxifene Risedronate Zoledronic Acid 5mg	Periomed Sodium Fluoride (Rinse, Gel, Cream, Paste, Tabs, Drops)	<b>BLOOD THINNERS</b>  Aspirin 325 mg Aspirin 81mg Aspirin-Dipyridamole Er Clopidogrel Dipyridamole Prasugrel Warfarin	<b>COLONOSCOPY PREP</b>  Gavilyte-C Gavilyte-G Gavilyte-N Polyethylene Glycol Trilyte

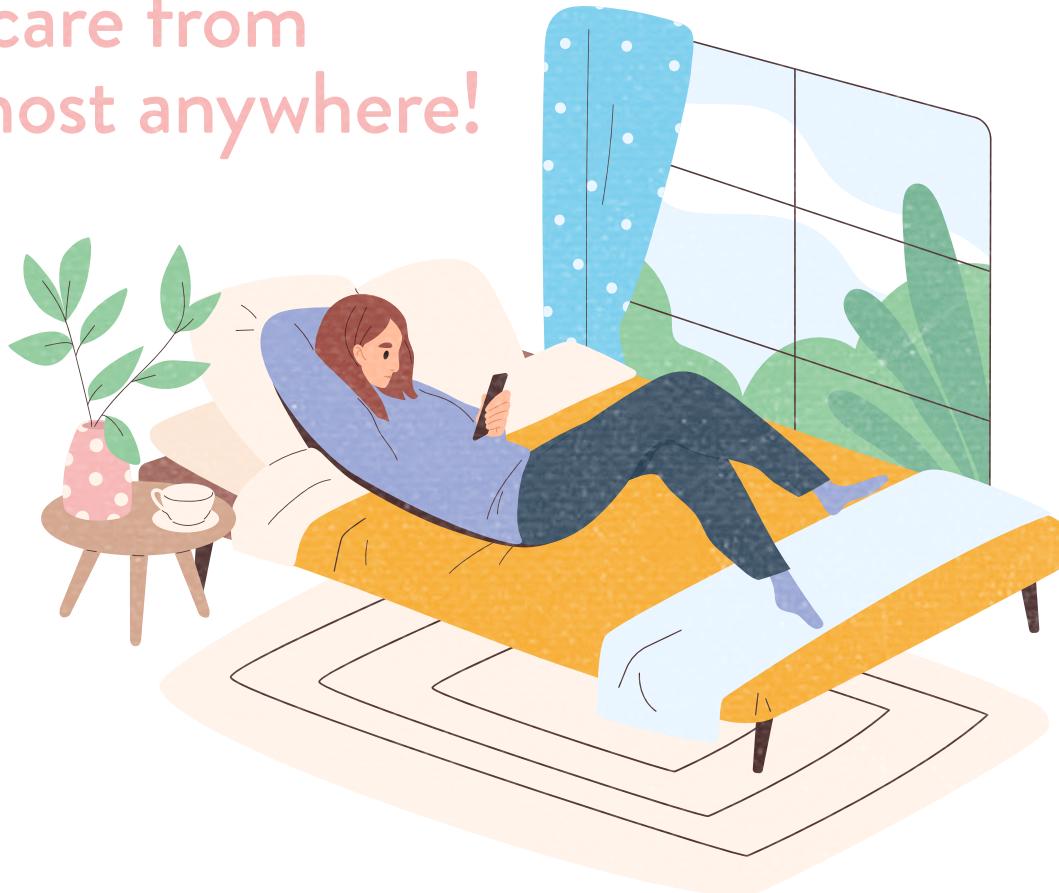
HIGH BLOOD PRESSURE			TOBACCO CESSATION
<b>ACE INHIBITORS</b> ----- Benazepril Captopril Enalapril Fosinopril Lisinopril Moexipril Perindopril Quinapril Ramipril Trandolapril	<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS/ DIURETIC COMBINATIONS</b> ----- Candesartan/Hctz Irbesartan/Hctz Losartan/Hctz Olmesartan/Hctz Telmisartan/Hctz Valsartan/Hctz	<b>CALCIUM CHANNEL BLOCKERS</b> ----- 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	Bupropion Sr 150mg Nicotine Gum Nicotine Lozenges Nicotine Patches
<b>ACE INHIBITORS/ DIURETIC COMBINATIONS</b> ----- Benazepril/Hctz Captopril/Hctz Enalapril/Hctz Fosinopril/Hctz Lisinopril/Hctz Moexipril/Hctz Quinapril/Hctz	<b>BETA BLOCKERS</b> ----- Acebutolol Atenolol Betaxolol Bisoprolol Metoprolol Succinate Er Metoprolol Tartrate Nadolol Pindolol Propranolol Propranolol Er Timolol	<b>OTHER HIGH BLOOD PRESSURE COMBINATIONS</b> ----- Amlodipine/Atorvastatin Amlodipine/Benazepril Amlodipine/Olmesartan Amlodipine/Olmesartan/Hctz Amlodipine/Telmisartan Amlodipine/Valsartan Amlodipine/Valsartan/Hctz Trandolapril/Verapamil	<b>MALARIA</b> Atovaquione/Proguanil Chloroquine Mefloquine Primaquine
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b> ----- Candesartan Eprosartan Irbesartan Losartan Olmesartan Telmisartan Valsartan	<b>BETA BLOCKERS/ DIURETIC COMBINATIONS</b> ----- Atenolol/Chlorthalidone Bisoprolol/Hctz Metoprolol/Hctz Nadolol/ Bendroflumethiazide Propranolol/Hctz		<b>VITAMINS</b> Generic Pediatric Multivitamins w/ Flouride Folic Acid Generic Prenatal
			<b>OBESITY</b> Benzphetamine Diethylpropion Phendimetrazine Phentermine
			<b>DIURETICS</b> 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 at (855) 634-0226.*



# TELEHEALTH

Immediate access  
to care from  
almost anywhere!



**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 and flu symptoms
- Ear infections
- Fevers
- Respiratory and sinus issues
- Behavioral and mental health
- And much more!

# STEP 1

Register with either MDLIVE or Teladoc.



Have your insurance ID card available for registration.

# STEP 2

When you need care, call the provider you registered with.



Cost is FREE.

**MDLIVE** (Cigna medical plans)

**(888) 726-3171 / [www.MDLIVEforCigna.com](http://www.MDLIVEforCigna.com)**

**TELADOC** (BCBS medical plans)

**(855) 477-4549 / [www.teladoc.com/alabama](http://www.teladoc.com/alabama)**

## HELPFUL TIP!

Download the MDLive or Teladoc app so you have access to care anytime on your smartphone!

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.





# ACCIDENT, HOSPITAL INDEMNITY + CRITICAL ILLNESS INSURANCE

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, in an effort 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 co-pays or prescriptions
- Home healthcare costs
- Lost income due to missed time at work
- Everyday expenses like utilities and groceries



VOYA<sup>®</sup>  
FINANCIAL







# PREVENTATIVE CARE

## Get Paid for Completing Your Preventative Care Visits!

By enrolling in any of the VOYA plans, you and any covered dependents can each get paid \$50 annually simply by completing one recommended health exam, such as annual well visits, routine dental or vision exams, mammograms, well child visits and many more! To receive the \$50 payment per individual, submit a claim through VOYA within 60 days of your visit. You can set up direct deposit or elect a check be mailed to your home address within 1-2 weeks. You will receive an email confirmation when submitting a claim and you will receive a second email when the claim is approved.

### FOR EXAMPLE:

If you, your spouse, and two children are covered under one of these benefits and each complete a covered health screening, that's \$200 that will be paid to you – regardless if the actual visit cost anything out-of-pocket!

If you have coverage under more than one of these plans benefits, the annual health screening benefit payment is included on all three plans!

### FOR EXAMPLE:

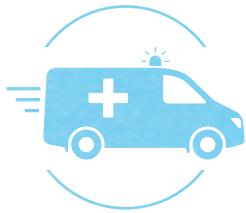
If you, your spouse, and two children are covered under accident, critical illness, and hospital that's \$600 of benefit if everyone completes a covered annual health screening!

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 allowed per line of coverage.

## EXAMPLES OF COVERED HEALTH SCREENINGS:

- Mammography
- Colonoscopy
- Stress test
- Fasting blood glucose
- Prostate cancer screening
- Hearing test
- Routine eye exam
- Routine dental exam
- Well child/preventative exams through age 18
- Biometric screening
- Adult annual physical
- COVID-19 test or vaccine





# ACCIDENT INSURANCE

Accidents can result in unplanned medical expenses. While our medical plans offer set co-pays allowing you to know exactly what you will pay, other expenses are still associated with an accident 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 RATES			
Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Team Member + Family
\$1.15	\$2.46	\$2.94	\$4.25
HIGH PLAN WEEKLY RATES			
Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Team Member + Family
\$2.04	\$3.98	\$4.63	\$6.57

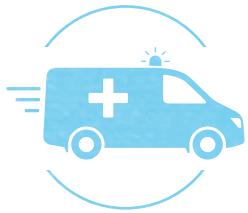


EVENT	LOW PLAN	HIGH PLAN
<b>Hospital Care</b>		
Surgery open abdominal, thoracic	\$800	\$1,200
Surgery exploratory or without repair	\$125	\$175
Blood, plasma, platelets	\$400	\$600
Hospital admission	\$1,000	\$1,250
Hospital confinement per day, up to 365 days	\$300	\$375
Critical care unit confinement 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 three per accident	\$500	\$750
Lodging per day, up to 30 days	\$120	\$180
<b>Accident Care</b>		
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 six per accident	\$30	\$45
Medical equipment	\$100	\$150
Physical or occupational therapy up to six per accident	\$30	\$45
Speech therapy up to 6 per accident	\$30	\$45
Prosthetic device (one)	\$500	\$750
Prosthetic device (two or more)	\$800	\$1,200
Major diagnostic exam	\$200	\$400
Outpatient surgery (one 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, email [benefits@claytonhomes.com](mailto:benefits@claytonhomes.com) or contact VOYA.

To file a claim visit <https://presents.voya.com/EBRC/ClaytonHomes>. Contact VOYA with any questions at (877) 236-7564.



# ACCIDENT INSURANCE COVERAGE CONTINUED

Common Injuries	LOW PLAN	HIGH PLAN
Burns second degree, at least 36% of the body	\$1,000	\$1,250
Burns third degree, at least nine 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 <sup>1</sup> treated no sutures	\$20	\$30
Laceration <sup>1</sup> sutures up to 2"	\$40	\$60
Laceration <sup>1</sup> sutures 2" – 6"	\$160	\$240
Laceration <sup>1</sup> 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 one, surgical repair	\$550	\$825
Tendon/ligament/rotator cuff two 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 <sup>2</sup>	Closed/open reduction <sup>2</sup>
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

	LOW PLAN	HIGH PLAN
<b>Dislocations</b>	<b>Closed/open reduction<sup>2</sup></b>	<b>Closed/open reduction<sup>2</sup></b>
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
<b>Fractures</b>	<b>Closed/open reduction<sup>3</sup></b>	<b>Closed/open reduction<sup>3</sup></b>
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.



# 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 2023? 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
<b>HOSPITAL ADMISSION:</b> An admission benefit is payable for the first day of hospital confinement, once per confinement.	\$750	\$1,500
<b>HOSPITAL CONFINEMENT:</b> A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$100	\$100
<b>CRITICAL CARE UNIT (CCU) CONFINEMENT:</b> A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$200	\$200
<b>REHABILITATION FACILITY CONFINEMENT:</b> A daily confinement benefit is payable for up to 10 days per confinement, beginning on day 2 of confinement.	\$50	\$50
<b>OBSERVATION UNIT DAILY BENEFIT</b> 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

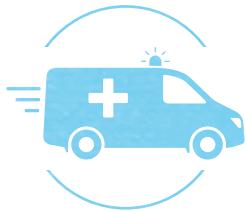
For a list of exclusions and limitations, visit [www.myclaytonbenefits.com](http://www.myclaytonbenefits.com) or contact VOYA.

To file a claim visit <https://presents.voya.com/EBRC/ClaytonHomes>  
Contact VOYA with any questions at (877) 236-7564.

LOW PLAN	
COVERAGE TYPE	WEEKLY RATE
Team Member Only	\$2.55
Team Member + Spouse	\$6.05
Team Member + Child(ren)	\$4.77
Team Member + Family	\$8.27

HIGH PLAN	
COVERAGE TYPE	WEEKLY RATE
Team Member Only	\$3.70
Team Member + Spouse	\$9.05
Team Member + Child(ren)	\$6.94
Team Member + Family	\$12.29





# CRITICAL ILLNESS

Being diagnosed with a critical illness can be devastating, both personally and financially. By purchasing critical illness insurance, this 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 2023 and 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

- Heart attack\* 100%
- Major organ transplant\*\* 100%
- Cancer 100%
- Stroke 100%
- Coronary artery bypass 100%
- Carcinoma in situ (25% of critical illness benefit amount)

## MAJOR ORGAN BENEFIT

- Transient ischemic attacks (TIA) (25% of critical illness benefit)
- Ruptured or dissecting aneurysm (10% of critical illness benefit)
- Abdominal aortic aneurysm (10% of critical illness benefit)
- Thoracic aortic aneurysm (10% of critical illness benefit)
- Open heart surgery for valve replacement or repair (25% of critical illness benefit)
- Severe burns 100%
- Transcatheter heart valve replacement or repair (10% of critical illness benefit)
- Coronary angioplasty (10% of critical illness benefit)
- Implantable/internal cardioverter defibrillator (ICD) placement (25% of critical illness benefit)
- Pacemaker placement (10% of critical illness benefit)

## ENHANCED CANCER BENEFIT

- Benign brain tumor 100%
- Bone marrow transplant (25% of critical illness benefit)
- Skin cancer (10% of critical illness benefit)
- Stem cell transplant (25% of critical illness benefit)

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

\*\* 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 be placed on the UNOS list.

## ◆ QUALITY OF LIFE BENEFIT

- Permanent paralysis 100%
- Coma 100%
- Multiple sclerosis 100%
- Amyotrophic lateral sclerosis (ALS) (50% of critical illness benefit)
- 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)
- Parkinson's disease 100%
- Advanced dementia, including Alzheimer's disease 100%

## ◆ ADDITIONAL CHILD DISEASE BENEFIT

- Cerebral palsy 100%
- Niemann-Pick disease 100%
- Congenital birth defects 100%
- Pompe disease 100%
- Cystic fibrosis 100%
- Type IV glycogen storage disease 100%
- Down syndrome 100%
- Infantile Tay-Sachs 100%
- Gaucher disease, type II or III 100%

### TEAM MEMBER ONLY COVERAGE WEEKLY RATES

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 1/1/2023.

### SPOUSE COVERAGE WEEKLY RATES

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 age of spouse as of 1/1/2023.

### CHILD(REN) COVERAGE WEEKLY RATES

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



# HEALTH CARE FLEXIBLE SPENDING ACCOUNT

A health care flexible spending account (FSA) provides you 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 co-pays, 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 log on to your online account at any time for balance information.

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 reason (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 \$550 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.

## Can I use my FSA funds for services that will be reimbursed by Garner?

No, 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-recommended provider, please pay the out-of-pocket co-pays and wait to be reimbursed by Garner. You may need to re-evaluate how much you contribute to your FSA plan.

WITH  
GARNER,

you may not need to contribute as much to your FSA.



*Please note, you can only use funds in your health FSA to pay for qualified medical expenses you incur in 2023. For more information log on to <https://secure.optumfinancial.com> or call (833) 229-4432.*



# DEPENDENT CARE

## FLEXIBLE SPENDING ACCOUNT

A Dependent Care FSA allows you to save pre-tax dollars to pay for qualified dependent day care expenses, including those for an aging parent, to enable you to work.

### 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 pre-schools
- Child care at a day camp or private sitter
- Summer or holiday camps

### How does a Dependent Care FSA work?

- You elect an annual amount during your new hire or open enrollment and the associated premium will be deducted each paycheck.
- After paying out-of-pocket for your eligible dependent care FSA expense, you can then submit for reimbursement.
- You can only be reimbursed based on how much you have contributed so far in weekly premiums.
- Use the mobile app or visit <https://secure.optumfinancial.com> to submit your request for reimbursement and the associated receipt.

### 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.

For more information log on to <https://secure.optumfinancial.com> or call (833) 229-4432.

### 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

### HELPFUL TIP!

Download the mobile app!





# DENTAL



		Preventative	Major + Ortho
<b>Deductible</b>			
Team Member Only		\$50	\$25
Team Member + Spouse		\$150	\$75
Team Member + Child(ren)			
Team Member + Family			
<b>Annual Maximum</b>			
Note: preventative, basic, and major services do count towards your annual maximum.		\$1,000 per individual, per calendar year	\$2,000 per individual, per calendar year
<b>Preventative Services</b>			
Exams		Covered at 100% no deductible	Covered at 100% no deductible
Routine cleanings			
Fluoride (less than 15 years old)			
X-rays			
Sealants			
Space maintainers			
<b>Basic Services</b>			
Fillings		Covered at 80% after deductible	Covered at 80% after deductible
Extractions			
Root canals			
Periodontic procedures			
Oral surgery			
<b>Major Services</b>			
Inlays / onlays		Not covered	Covered at 50% after deductible
Crowns			
Dentures			
Orthodontic Services		Not covered	Covered at 50% up to \$1,500 after plan deductible (\$1,500 lifetime max per individual)

Enrollment Group	Preventative Weekly Rate	Major + Ortho Weekly Rate
Team Member Only	\$4.64	\$9.28
Team Member + Spouse	\$9.28	\$18.56
Team Member + Child(ren)	\$9.28	\$18.56
Team Member + Family	\$9.28	\$18.56



# VISION



## In-Network

<b>Eye Exam (once per calendar year)</b>	<b>\$10 co-pay</b>
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<b>Frames (once per calendar year)</b>	<b>\$175 allowance</b>
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<b>Standard plastic lens (once per calendar year)</b>	
Single	\$20 co-pay
Bifocal	
Trifocal	
Lenticular	
Adult polycarb, scratch coating and tint	<b>No cost</b>

<b>Contact Lens Fitting Fee</b>	<b>\$30 co-pay</b>
Contact lens (in lieu of lenses and frames)	\$175 allowance

<b>Enrollment Group</b>	<b>Weekly Rate</b>
Team Member Only	\$1.12
Team Member + Spouse	\$2.24
Team Member + Child(ren)	\$2.54
Team Member + Family	\$3.93

## HEARING AID AND LASIK VISION CORRECTION DISCOUNTS

### HEARING AID DISCOUNT:

- Free hearing exam
- Discount of up to 40% off premium hearing aids
- [superiorvision.yourhearing.com](http://superiorvision.yourhearing.com)
- (888) 494-1272

### LASIK VISION CORRECTION DISCOUNT:

- Up to 50% off the national average price
- [lasik.svqualsight.com](http://lasik.svqualsight.com)
- (877) 201-3602



# LIFE INSURANCE

**\$30,000**

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

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

## Additional Life:

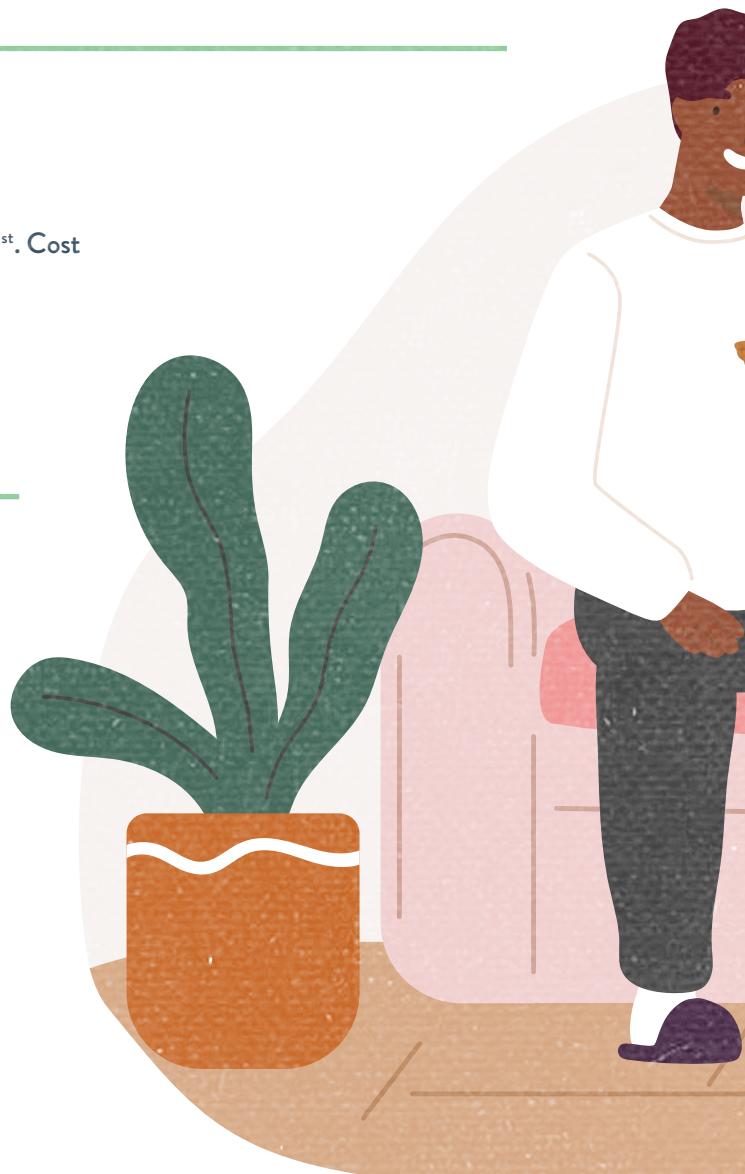
- Purchase up to 10x your covered earnings (not to exceed \$2 million).
- Cost is based on amount selected and age as of January 1<sup>st</sup>. Cost will be shown during your online enrollment.
- Underwriting may be required.
- Life insurance is based off gross wages from a specified period of time.

## Spouse Life:

- Purchase up to \$250k in increments of \$25k.
- Cost is based on amount selected and age as of January 1<sup>st</sup>. Cost 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.







# 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.

Short Term Disability may be offset  
by any state disability plans.

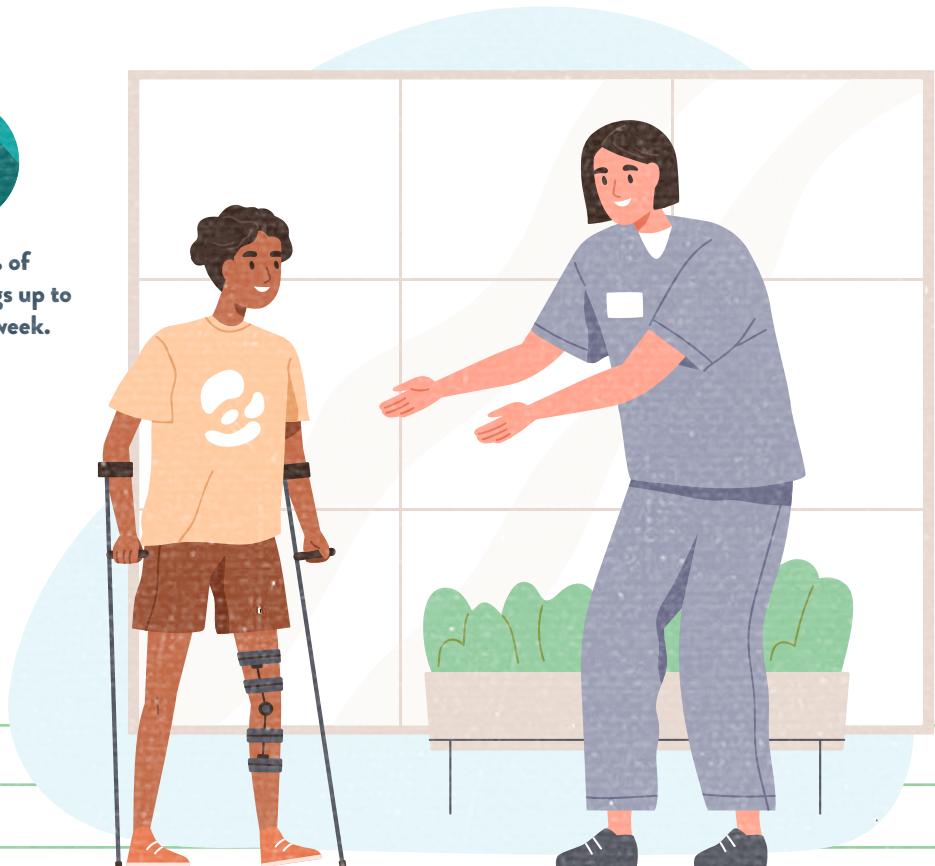
## BUY-UP OPTION:



Cost is based  
on weekly  
benefit amount.



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





# 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 week.



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.

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

## BUY-UP OPTION:



Cost is based on amount of your covered earnings.



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





<input checked="" type="checkbox"/>	Expecting?
<input checked="" type="checkbox"/>	Enrolled in a medical plan?

# HEALTHY BABIES, HEALTHY PREGNANCY



## STEP 1:

Contact Cigna Healthy Babies, Healthy Pregnancy at 1 (800) 615-2906 or BCBS Baby Yourself Maternity Program at 1 (800) 222-4379 as soon as you know you're expecting!



## STEP 2:

You'll be transferred to a maternity specialist that will keep in touch for any maternity related questions from birthing classes, maintaining a healthy weight, to choosing a physician.



## STEP 3:

With Cigna, funds will be deposited into a healthy rewards account. If you enroll in the BCBS Baby Yourself Maternity Program during your first trimester, you'll receive a special gift for you and your baby.





# 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"><li>• 10 weeks following delivery</li><li>• 100% of base pay</li><li>• Paid through Absence One administered by Sedgwick</li><li>• May be offset by any state disability plans</li></ul>	<ul style="list-style-type: none"><li>• 4 weeks</li><li>• 50% of base pay</li><li>• Must be used within 6 months of birth, adoption, or foster placement</li><li>• Cannot be used intermittently</li><li>• For moms who deliver, the 4 weeks at 50% pay will begin after the 10 weeks of 100% pay ends.</li><li>• Paid through payroll</li><li>• Insurance premiums and arrears deducted</li></ul>



# IDENTITY THEFT PROTECTION

## What is identity theft?

Identity theft is when thieves steal your personal information 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, a

service such as 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 can't monitor all transactions at all businesses.

## Why do I need protection?



## 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're 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'll receive:



A welcome to LifeLock email that explains how LifeLock service works to help protect you.



An email that contains your temporary username and password, along with instructions on how to log in to your member portal.



A welcome kit containing your membership ID card will arrive within 10 business days of your benefit effective date.

## Different plans for different needs:

### LIFELOCK BENEFIT ESSENTIAL™

OR

### LIFELOCK BENEFIT PREMIER™

- ✓ LifeLock Identity Alert System
- ✓ Benefit Essential
- ✓ Identity Lock
- ✓ Credit, Bank & Utility Account Freezes
- ✓ Life Lock Identity Alert System
- ✓ Mobile App
- ✓ Dark Web Monitoring
- ✓ Stolen Wallet Protection
- ✓ Fictitious Identity Monitoring
- ✓ Bank & Credit Card Activity Alerts
- ✓ Credit Monitoring (One Bureau)

NEW FOR 2023

- ✓ Online Privacy – Secure VPN, Privacy Monitor & SafeCam
- ✓ Social Media Monitoring
- ✓ Phone Takeover Monitoring
- ✓ Prior Identity Theft Remediation
- ✓ Credit Application Alerts and Credit Monitoring
- ✓ Norton Device Security
  - Secures PCs, Mac & mobile devices (Up to 3 devices, family gets 6 devices)
  - Parental Control
  - Cloud Backup 10GB

ALL THE FEATURES OF BENEFIT ESSENTIAL PLUS:

- ✓ Bank Account Takeover Alerts
- ✓ Monthly Credit Score Tracking (One-Bureau)
- ✓ Credit Reports & Credit Scores On Demand
- ✓ Credit Monitoring (3 Bureau)

NEW FOR 2023

- ✓ Checking & Savings Account Application Alerts
- ✓ Home Title Monitoring
- ✓ Court Records Scanning
- ✓ Norton Device Security
  - Secures PCs, Mac & mobile devices (Up to 5 devices, family gets 10 devices)
  - Parental Control
  - Cloud Backup 50GB

#### BENEFIT ESSENTIAL WEEKLY RATES

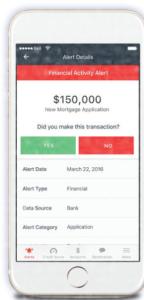
Team Member Only	\$1.27
Team Member + Family	\$2.53

#### BENEFIT PREMIER WEEKLY RATES

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



SCAN HERE FOR  
A FULL LIST OF  
LIFELOCK FEATURES  
FOR 2023!



 **norton™**  
LifeLock Benefit Solutions

**LifeLock phone:**  
**(800) 607-9174**

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 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](http://Lifelock.com/legal).



# TOBACCO CESSATION 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.
- Bupropion/chantix (prescription required) \$0 co-pay for 180-day supply.
- Access to an interactive website that helps participants 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 last call.

### How do I enroll?

Enroll anytime by calling (866) 784-8454  
or visit [www.quitnow.net](http://www.quitnow.net).

Quit for Life offers translation services for many languages including Spanish. For the hearing-impaired, TTY service is available at 1 (877) 777-6534.

**FREE**  
for Team Members,  
spouses, and  
dependents 18 years  
or older.





# 401(K) RETIREMENT PLAN

The Clayton 401(k) plan allows eligible Team Members to save for retirement through payroll deduction.

## 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.

## AUTOMATIC INCREASE

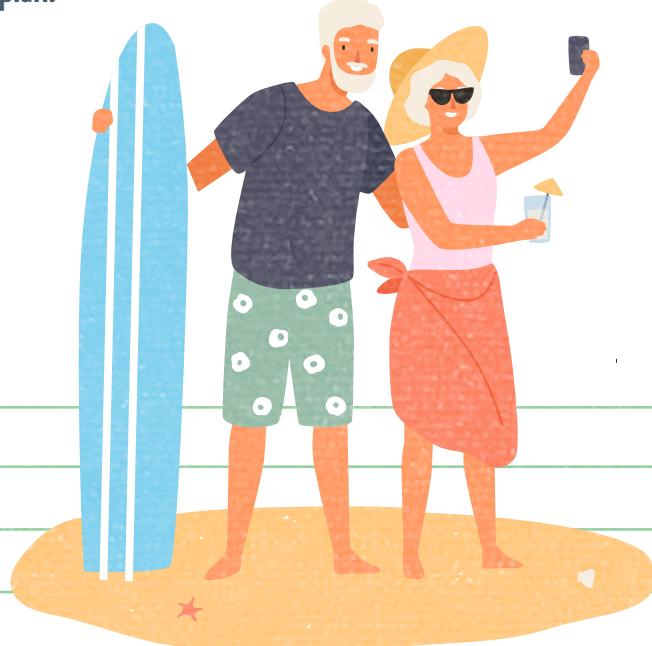
If a Team Member does not actively opt out of the Annual Increase Program, their deferral rate will **increase 1% each year until it reaches a 11% deferral rate**.

## Team member contributions

Team Members can contribute up to 75% of their eligible pay on a pre-tax basis, up to the annual IRS dollar limits.

## 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 of the first 4% you contribute to the plan.**



## Eligibility requirement

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

## Roth

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.

## CATCH UP

If you are age 50 or older, you can contribute an additional \$6,500 annually.



### Online beneficiary

With Fidelity's Online Beneficiaries Service, you can designate your beneficiaries, receive instant online confirmation, and check your beneficiary information virtually any time.

### Remember to designate your 401k beneficiary

Your 401k beneficiary is separate from all other benefits. In order to elect a beneficiary for your 401k, visit [www.netbenefits.com](http://www.netbenefits.com), then select "Beneficiaries" and follow the online instructions or contact Fidelity at (800) 835-5095.



There is a wide choice of professionally managed funds through Fidelity Investments. For investment advice and financial planning, contact Fidelity at **1(800) 835-5095** or **1(800) 587-5282** (Spanish) or go to [www.netbenefits.com](http://www.netbenefits.com).

# EMPLOYEE CONNECT

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Life can be stressful when juggling work, life, kids, health issues, finances, and much more! Sometimes, we just need a little extra help. EmployeeConnect is available and ready to assist 24 hours a day, 7 days a week.

## 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 by Team Member.

## 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.

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## Call anytime for confidential help!

EmployeeConnect is available to you and your family members  
24 hours a day, 7 days a week.



**NEW Contact Information for 2023**

**Call: (800) 311-4327**

**TDD: (800) 697-0353**



**Online: [guidanceresources.com](http://guidanceresources.com)**

**Clayton Web ID: GEN311**



# VENDOR CONTACTS

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VENDOR	WEBSITE	PHONE
AbsenceOne (LTD)	<a href="http://www.absenceone.com/clayton">www.absenceone.com/clayton</a>	(800) 842-1718
AbsenceOne (STD)	<a href="http://www.absenceone.com/clayton">www.absenceone.com/clayton</a>	(855) 366-2152
Blue Cross Blue Shield	<a href="http://www.alabamablue.com">www.alabamablue.com</a>	(888) 578-6772
Cigna	<a href="http://www.mycigna.com">www.mycigna.com</a>	(800) 244-6224
EmployeeConnect	<a href="http://www.guidanceresources.com">www.guidanceresources.com</a>	(800) 311-4327
Express Scripts	<a href="http://www.express-scripts.com">www.express-scripts.com</a>	(855) 634-0226
Fidelity	<a href="http://www.netbenefits.com">www.netbenefits.com</a>	(800) 835-5095
Garner Health	<a href="http://www.getgarner.com">www.getgarner.com</a>	(866) 761-9586
Lifelock	<a href="http://www.lifelock.com">www.lifelock.com</a>	(800) 607-9174
MD live	<a href="http://www.mdliveforgigna.com">www.mdliveforgigna.com</a>	(888) 726-3171
Optum Financial	<a href="https://secure.optumfinancial.com">https://secure.optumfinancial.com</a>	(833) 229-4432
Prudential	contact by phone	(800) 524-0542
Quit For Life	<a href="http://www.quitnow.net">www.quitnow.net</a>	(866) 784-8454
Superior Vision	<a href="http://www.superiorvision.com">www.superiorvision.com</a>	(844) 549-2603
Teladoc	<a href="http://www.teladoc.com/alabama">www.teladoc.com/alabama</a>	(855) 477-4549
VOYA	<a href="https://presents.voya.com/ebrc/claytonhomes">https://presents.voya.com/ebrc/claytonhomes</a>	(877) 236-7564

# VENDOR APPS

Did you know some of our vendors have mobile apps where you can access your ID cards, review claims, view your out-of-pocket maximums, and much more? Download today!

**Cigna**  
(myCigna)



**MDLive**



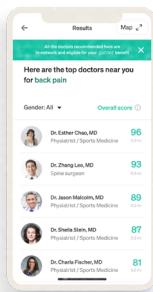
**Optum**  
Financial



**Express**  
Scripts



**Garner Health**



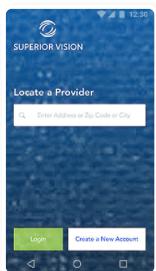
**LifeLock**



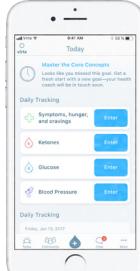
**Fidelity**  
(NetBenefits)



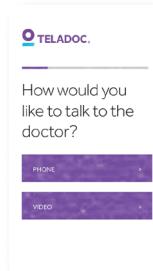
**Superior Vision**



**Virta**



**Teladoc**



**BCBS**  
(Alabama Blue)

