

TYSON FOODS, INC. #141413-002
Hourly Team Members & Family
PLAN HIGHLIGHTS/SCHEDULE OF BENEFITS

Your Long Term Care (LTC) insurance plan is listed below.

Elimination Period: Your plan's Elimination Period of 90 consecutive days is the amount of time you must wait before benefits become payable. This time period must be satisfied only once during the life of your plan.

Newly Hired Employees: you are eligible to enroll in this plan at anytime. You must complete a medical questionnaire.

Medical Underwriting Coverage Effective Date: Employees: The effective date is the later of the first of the month following 3 months of active employment or the first of the month following the Medical Underwriting Approval Date. **Family Members:** The effective date is the Medical Underwriting Approval Date. *Medical Underwriting means that you must answer all questions on a medical questionnaire. In some cases, an interview may also be necessary*

Delayed Effective Date – If you are absent from work because you are injured, sick, temporarily laid off or on a leave of absence, your coverage will not begin on your otherwise expected effective date.

Medical Underwriting for Employees and Family Members: You may choose from the plans listed below. Completion of the Benefit Election Form and the Long Term Care Insurance Application (medical questionnaire) is required to apply for coverage. **All** Medical Questionnaires must accompany a signed Authorization to Request Medical Information Form #6720-03 located in the enrollment kit.

Benefit Duration	3 Years	6 Years	Lifetime
Facility Benefit Amount In Increments of \$1,000	\$1,000 to \$9,000	\$1,000 to \$9,000	\$1,000 to \$9,000
Assisted Living Facility	100%	100%	100%
Lifetime Maximum Per \$1,000 Increments	\$36,000	\$72,000	Lifetime
Professional Home & Community Care	100%	100%	100%
Total Choice Home Care - Option	50%	50%	50%
Inflation Protection * - Option	5% Compound	5% Compound	5% Compound

** If you selected an inflation option, and you terminate that inflation option at a future date, you can purchase the inflated coverage amount at your original age.*

Lifetime Maximum: The Lifetime Maximum is the maximum benefit dollar amount Unum will pay over the life of your coverage. This dollar amount is based on the Facility Benefit Amount and Benefit.

For Example: If you choose \$3,000 Facility Monthly Benefit Amount & 3 Year Duration, your Lifetime Maximum is calculated as follows, \$3,000 per Month X 12 Months X 3 Years = \$108,000 Lifetime Maximum

Insurance Age: Final cost of coverage will be based on your Insurance Age. If you enroll for coverage on or before the group policy effective date, Insurance Age is your age on the group policy effective date. If you enroll for coverage after the group policy effective date, Insurance Age is your age on the date you sign the enrollment form.

Questions: Please call 1-877-975-3517 with questions regarding your Long Term Care Insurance.