

2018 Benefit Open Enrollment Documentation Processing: Requirements

Tyson Foods requires team members to submit certain forms and documentation prior to completing Open Enrollment. Please review the list below to see which documents you will need to provide. The necessary forms for you to complete can be found on the Important Documents page at www.benefitsquest.com/tyson. You can also contact the Tyson Benefits Center.

Dependent Documentation Requirements: Please note that documentation will only be required for NEWLY added eligible family members who are not currently listed in the enrollment system when you enroll. However, any and all documentation is subject to review by Tyson Foods at any time.

Here's what to do:

- 1. Complete the Email/Fax Cover Sheet on the back of this page.
- 2. Complete the required forms and gather your documentation.
- 3. Scan and email or fax these items to Aon. Please allow 2 business days for Aon to process your documents.
 - Email address (preferred method): Tyson.Docs@aon.com
 - Secure fax: 847-953-1836

DOCUMENTATION REQUIREMENTS

TEAM MEMBER

If you want to waive the group health plan, you will need to submit:

Current proof of other medical coverage*

*Other medical coverage must meet the minimum essential coverage requirements of the Affordable Care Act.

If you want to waive long term disability coverage, you will need to submit:

A signed waiver of coverage form

SPOUSE

If you want to newly add a spouse who is not listed in the enrollment system during Open Enrollment, you will need to submit:

- Proof of current marital status:
 - Copy of marriage license/certificate, AND (if married for one year or more)
 - A copy of the first page of your current year's filed federal or state tax return (please blackout financial information), OR
 - If you cannot provide a joint tax return, contact the Tyson Benefits Center to determine other acceptable documentation such as proof of joint property/asset ownership (recent mortgage, credit card or bank statements, utility bills).
- Proof of the spouse's Social Security number or ITIN

If you are eligible to waive the spousal surcharge, you will need to call in or log in online to declare your intention to waive the surcharge. You will need to submit the proper documentation depending on your election:

- A Tyson Foods Group Health Verification form completed by your spouse's employer, OR
- Verification on company letterhead that your spouse is not eligible for group health coverage, OR
- Other current proof that your spouse is not eligible for employer-sponsored coverage
- Spouse's personnel number if covering a spouse employed by Tyson

DEPENDENT CHILDREN

If you want to newly add a dependent who is not listed in the enrollment system during Open Enrollment, you will need to submit:

- Acceptable proof of the dependent relationship such as a birth certificate or adoption paperwork, AND
- Proof of the dependent's Social Security number or ITIN

If you want to add a dependent step-child who is not listed in the enrollment system during Open Enrollment, you will need to submit the documentation listed above, AND:

 A copy of the marriage license/certificate and proof of current joint ownership to validate current marriage to the step-child's birth parent

TOBACCO USER STATUS

You MUST complete an enrollment session to record your or your spouse's tobacco user status.

If you do not certify during Open Enrollment by completing an enrollment session, you will not qualify for the non-tobacco premium incentive.

You may complete your enrollment before or after submitting documents, but any document change in the program will be displayed 2 days after receipt.

Documents must be received no later than Nov. 10, 2017. *NO EXCEPTIONS*



2018 Benefit Open Enrollment Documentation Processing: Email/Fax Cover Sheet

- 1. Please place this cover sheet as your first page when emailing or faxing your documents.
- 2. Be sure to clearly write the team member's name and your Social Security Number or your Tyson Personnel ID Number at the top of each page you submit.
- 3. Documents must be submitted no later than <u>Friday</u>, <u>November 10</u>, <u>2017</u>. Documents received after this date may not be processed in time for 2018 coverage, as a minimum of 2 business days are required for processing.
- 4. Failure to use this cover sheet may result in delayed processing of documents.

and to waive the spousal surcharge if applicable.

5. Completion of this form is not a guarantee of coverage. You must still participate in the enrollment process as outlined in your How to Enroll document.

Team Member Name:		Social Security Number or Tyson Personnel ID Number:
(Last Name, First Name, Middle Initial)		
Email Address (Preferred method): Tyson.Docs@aon.com		Phone Number: Please provide a phone number and contact name for any outreach required.
Secure, Paperless Fax: 1-847-953-1836		
IMPORTANT: Please double check that the fax number you dialed is correct before hitting send and be sure to gather your fax confirmation sheet after your fax.		(Area Code) Phone Number
		(Contact Name – Team Member, Other)
By providing your signature below, you agree to receive insurance benefit or enrollment related calls from your employer's benefit enrollment center using automated telephone dialing system and/or pre-recorded voice to any of the telephone numbers you provided above. You may withdraw your consent at a time by calling the enrollment center. Your response to this question does not impact your benefits enrollment or eligibility in any way. Signed: Date:		
Enrollment Type:		Benefit Effective Date:
	Open Enrollment	
	New Hire	
Type of Coverage You Wish to Elect:		
	□ Covered by Tyson Spouse (Spouse's Tyson Personnel #)	
	□ Covered by Tyson Parent (Parent's Tyson Personnel #)	
	Team Member + Spouse	
	Team Member + Child(ren)	
	Team Member + Spouse + Child(ren)	
	Waive Coverage	
If you are covering dependents for health insurance, supporting documentation is required. The Tyson Benefits Center can provide a list of acceptable documents. Please call the Dependent Documentation Processing Center at 1-855-720-9929 (Weekdays, 8:00 a.m. to 7:00 p.m. Central Time) if you have questions or have trouble locating your documents.		

I confirm that the information I have provided is accurate and up-to-date. I understand that failure to provide the necessary documentation will disqualify the dependent coverage and re-enrollment will not be permitted until the next plan year if eligible. I may be responsible for the full amount of the benefit claims incurred by any dropped dependent. In addition, I understand that providing false information may result in disciplinary action up to and including termination.

Remember, you must complete your enrollment in order to qualify for the non-tobacco user incentive for yourself and your spouse