

Supplemental Long-Term

Disability Insurance



NPC International, Inc.

Benefits At-A-Glance

All Job Class 200 (Assistant Managers), Job Class 250 (Restaurant Managers) Job Class 300 (Area General Managers), Job Class 300 (RM's and TVP's; Field Support (HR and Marketing); Corporate Office), Job Class 800 (Executive)

The Lincoln Long-term Disability Insurance Plan:

- Provides a cash benefit after you are out of work for 180 days or more due to injury, illness, or surgery
- Starts with a "core plan" that is paid for by NPC International, Inc.
- Offers a simple "buy-up" option that lets you enhance your benefit at affordable group rates
- Features group rates for eligible NPC International, Inc. employees
- Includes EmployeeConnectSM services, which give you and your family confidential access to counselors as well as personal, legal, and financial assistance

Core Plan (paid by NPC International, Inc.)			
Monthly benefit amount	40% of your monthly salary, limited		
	to \$15,000 per month		
Elimination period	After the end of your short-term disability or a period of 180 days of		
	disability, whichever is greater		
"Buy-Up" Option (paid by you through payroll deduction)			
Monthly benefit amount	60% of your monthly salary, limited		
	to \$15,000 per month		
	After the end of your short-term		
Elimination period	disability or a period of 180 days of		
	disability, whichever is greater		

Elimination Period

• This is the number of days you must be disabled before you can collect disability benefits.

Maximum Coverage Period

- This is the total amount of time you can collect disability benefits (also known as the benefit duration).
- Mental illness and substance abuse benefits are limited to a combined period of 24 months

•	Age at Disability M	aximum Benefit Period
	Less than age 60 Grea	ater of Social Security Normal Retirement
	age	or to age 65 (but not less than 5 years)
	60	60 months
	61	48 months
	62	42 months
	63	36 months
	64	30 months
	65	24 months
	66	21 months
	67	18 months
	68	15 months
	69 and over	12 months

Additional Plan Information

Evidence of Insurance

 When you are first offered this coverage (and during approved open enrollment periods), you may be able to take advantage of this important coverage with no evidence of insurability (proof of health).

Pre-existing Condition

 If you have a medical condition that begins before your coverage takes effect, and you receive treatment for this condition within the 3 months leading up to your coverage start date, you may not be eligible for benefits for that condition until you have been covered by the plan for 12 months.

Benefit Exclusions & Reductions

Like any insurance, this long-term disability insurance policy does have some exclusions. You will not receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- Your disability is the result of cosmetic surgery, unless related to a disabling condition
- Your disability occurs while you are committing a felony or misdemeanor or participating in a riot

Your benefits may be reduced if you are eligible to receive benefits from:

- A state disability plan or similar compulsory benefit act or law
- A retirement plan
- Social Security
- Any form of employment
- Workers' Compensation
- Salary continuance
- Sick leave

A complete list of benefit exclusions and reductions is included in the policy. State restrictions may apply to this plan.

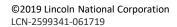
This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the contract, the contract will govern.

EmployeeConnectSM services are provided by ComPsych* Corporation, Chicago, IL. ComPsych* and GuidanceResources* are registered trademarks of ComPsych* Corporation. ComPsych* is not a Lincoln Financial Group* company. Coverage is subject to actual contract language. Each independent company is solely responsible for its own obligations.

Group insurance products and services described herein are issued by Lincoln Life Assurance Company of Boston. Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates. Affiliates are separately responsible for their own financial and contractual obligations.











Supplemental Long-Term Disability Insurance Calculate Your Premium

Use the employee buy-up long-term disability premium rate table provided below to calculate your cost and benefit. The following example calculates the monthly cost for an employee with annual earnings of \$35,400.

Note: The maximum monthly covered earnings are equal to the maximum monthly benefit divided by the benefit percentage.

Calculation Example		Example	You
Step 1	Enter the monthly rate per \$100 of monthly covered payroll.	\$0.251	
Step 2	Enter your monthly earnings. Divide your annual earnings by 12.	\$2,950	
Step 3	If your monthly earnings are greater than the maximum monthly covered earnings of \$9,000, indicate \$9,000. <i>Otherwise, indicate the amount from Step 2.</i>	\$2,950	
Step 4	Calculate your monthly benefit. Multiply Step 3 by 0.60.	\$1,770	
Step 5	Enter your monthly earnings in increments of \$100 of monthly covered payroll. To calculate, divide the amount in Step 3 by \$100.	29.5	
Step 6	Calculate your monthly cost. Multiply Step 1 by Step 5	\$7.40	

Premium Rate per		
\$100		
0.251		

This worksheet allows you to approximate your monthly contributions for buy-up long-term disability insurance coverage. Cost of insurance may change in the future due to age and/or coverage amount elected.