



2025 OPEN ENROLLMENT GUIDE

OCTOBER 29 - NOVEMBER 12, 2024

Hourly Team Members



Taking care of you.

IT IS TIME FOR 2025 OPEN ENROLLMENT!



This is your annual opportunity to review and update your benefits for 2025. Consider changes you might have experienced this year. Did your family expand? Have your medical, dental, or life insurance needs changed? Open Enrollment only rolls around once each year so now is the time to adjust your plans and coverages.

And this year, you will have more choices and options than ever. We heard your feedback on our benefits, and for 2025 you will see some important additions and changes. Our goal is to provide a comprehensive benefits package that supports you now and into the future.

We have outlined the details of the choices you have here in this Open Enrollment Guide. We encourage you to read through it to see for yourself what's new for 2025.

There is even more information available for you at the all new **BloominBrandsBenefits.com**. (If you have not visited us lately, don't miss out!) There is a special Open Enrollment information page that has all the details about new plans, new features and action you can take to get and stay healthy. (Use the QR code for faster access!!)



Attend a Live Webinar to Explore Your 2025 Benefits!

When you visit **BloominBrandsBenefits.com** you will see a schedule of webinars in late October and early November. These sessions are designed to give you everything you need regarding your benefit options for next year. Head over to **BloominBrandsBenefits.com** for all the details - dates, times, and links to join the sessions.

**Complete your enrollment between
October 29 and November 12.**

WHAT'S ON THE MENU FOR 2025?

We have heard your feedback – you want more predictability in healthcare costs, such as having set copays for office visits and prescription drugs. We have added two new medical plans to the lineup to give you more choices and help you take control of your health coverage and your budget. These new plan options are tailored to meet your unique needs and financial goals, bringing you the flexibility and peace of mind you have been asking for!

The new Value PPO plan and Choice PPO plan have copays for essential services including doctor visits, making it easier to manage and predict your healthcare costs.

The Value PPO plan offers minimum coverage for the lowest per-paycheck cost.

- The plan has a \$6,550 deductible for individual coverage or a \$13,100 deductible for family coverage.
- It has copays for doctor visits and generic prescription drugs. You pay coinsurance after the deductible for other services.

The Choice PPO plan has the highest level of coverage for a higher per-paycheck cost.

- The plan has a \$2,500 deductible per person with a \$5,000 family maximum.
- It has copays for doctor visits, urgent care and emergency room visits, and prescription drugs.

Both the Value and Choice PPO plans fully cover preventive medical care such as annual physicals. They also offer telehealth services through Teladoc.

The Choice HSA plan remains an available option for all eligible Team Members.

- This plan has a \$2,500 deductible for individual coverage or a \$5,000 deductible for family coverage.
- If you choose this option, you will be able to contribute pretax dollars to a health savings account (HSA) to use for eligible healthcare expenses now or in the future.

YOUR OPTIONS AT A GLANCE

In-Network Benefits	New Value PPO	New Choice PPO	Choice HSA
Wellness/ preventive care	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications
Calendar year deductible	\$6,550 individual \$13,100 family	\$2,500 per person \$5,000 family max	\$2,500 individual \$5,000 family
Calendar year out-of-pocket maximum	\$7,500 individual \$15,000 family	\$5,000 per person \$10,000 family max	\$5,000 individual \$8,200 family
Primary care office visit	\$30 copay	\$25 copay	20% after deductible
Specialist office visit	\$70 copay	\$50 copay	20% after deductible
Teladoc general visits	\$55 per visit	\$55 per visit	\$55 per visit
Urgent care	20% after deductible	\$60 copay	20% after deductible
Emergency room	20% after deductible	\$350 copay	\$300 copay after deductible
Most other services	20% after deductible	20% after deductible	20% after deductible
Generic prescription drugs	\$10 copay	\$10 copay	20% after deductible
Preferred brand prescription drugs	20% after deductible	\$30 copay	20% after deductible
Non-preferred brand prescription drugs	40% after deductible	\$50 copay	40% after deductible

The Value HRA, Choice HRA and Value HSA plans will be frozen to new participants and no longer offered after 2025. If you are currently enrolled in one of these three plans:

- You can keep your current plan for one more year, or you may change your election to the new Value or Choice PPO or the Choice HSA plan.
- HRA funds will no longer be available after December 31, 2025.**

If you are not currently enrolled in one of these three plans, they are not available to you for 2025.

In-Network Benefits	Value HRA	Choice HRA	Value HSA
Wellness/preventive care	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Preventive medications
Calendar year deductible	\$6,550 per person \$13,100 family max	\$4,300 per person \$8,600 family max	\$4,300 individual \$8,600 family
Calendar year out-of-pocket maximum	\$6,550 per person \$13,100 family max	\$6,300 per person \$9,000 family max	\$6,500 individual \$9,000 family
Primary care office visit	0% after deductible	30% after deductible	20% after deductible
Specialist office visit	0% after deductible	30% after deductible	20% after deductible
Teladoc general visits	\$55 per visit	\$55 per visit	\$55 per visit
Urgent care	0% after deductible	30% after deductible	20% after deductible
Emergency room	0% after deductible	\$300 copay after deductible	\$300 copay after deductible
Most other services	0% after deductible	30% after deductible	20% after deductible
Generic prescription drugs	0% after deductible	20% after deductible	20% after deductible
Preferred brand prescription drugs	0% after deductible	20% after deductible	20% after deductible
Non-preferred brand prescription drugs	0% after deductible	40% after deductible	40% after deductible

MEDICAL PLAN RATES

Medical premiums will be slightly higher in 2025

For the past two years, your per-paycheck costs have remained unchanged while plan costs continued to increase.

While the company continues to pay the majority of the cost of healthcare plans, there will be a slight increase in Team Member premiums.

As in the past, your biweekly per-paycheck deduction will depend on your salary and the medical plan you choose.

Coverage Level	New Value PPO	New Choice PPO	Choice HSA	Value HRA	Choice HRA	Value HSA
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ANNUAL SALARY LESS THAN \$45,000

Team Member only	\$45.29	\$71.81	\$65.28	\$45.29	\$45.90	\$54.39
Team Member + spouse	\$113.56	\$173.29	\$157.54	\$113.56	\$114.89	\$133.58
Team Member + child(ren)	\$91.94	\$142.92	\$129.93	\$91.94	\$93.09	\$109.23
Team Member + spouse + child(ren)	\$155.55	\$237.07	\$215.52	\$155.55	\$157.37	\$182.86

ANNUAL SALARY \$45,000 TO \$150,000

Team Member only	\$70.88	\$99.96	\$90.88	\$70.88	\$71.49	\$79.99
Team Member + spouse	\$174.74	\$240.59	\$218.72	\$174.74	\$176.08	\$194.77
Team Member + child(ren)	\$141.46	\$197.39	\$179.45	\$141.46	\$142.61	\$158.76
Team Member + spouse + child(ren)	\$240.20	\$330.20	\$300.18	\$240.20	\$242.03	\$267.52

ANNUAL SALARY MORE THAN \$150,000

Team Member only	\$75.21	\$104.72	\$95.20	\$75.21	\$75.81	\$84.31
Team Member + spouse	\$185.17	\$252.07	\$229.15	\$185.17	\$186.50	\$205.20
Team Member + child(ren)	\$150.02	\$206.81	\$188.01	\$150.02	\$151.17	\$167.32
Team Member + spouse + child(ren)	\$254.53	\$345.95	\$314.50	\$254.53	\$256.35	\$281.84

ADDITIONAL 2025 BENEFIT ENHANCEMENTS

We are also enhancing other benefits for 2025!

Improvements to prescription drug coverage

- All medical plans will now include 100% coverage for select preventive prescriptions, such as those for asthma, diabetes, heart disease, high blood pressure, and tobacco cessation.
- You can find preventive medications on **BloominBrandsBenefits.com**. Go to **Benefits > Health & Wellness > Medical Coverage & Resources > Pharmacy Benefits** and use the **Pre-Enrollment Tool**. Some medications have requirements such as prior authorization that must be met before the medication is covered.
- You will no longer be required to use Walgreens or CVS for maintenance medications you take on a regular basis. You can fill prescriptions for a 90-day supply of maintenance medications through the Express Scripts mail order program or at any network pharmacy starting January 1, 2025.
- The 2025 prescription drug benefits will integrate with GoodRx, automatically providing discounted pricing at the pharmacy when it is available.

Additional counseling visits through the employee assistance program (EAP)

- **For 2024, the EAP offered four counseling visits. We have increased the number of visits to six for 2025.**
- You and your family members may receive up to six visits per issue per year, at no cost, with a licensed counselor – available 24/7 at 1-800-327-6754 or **magellanascend.com**.
- Magellan Ascend also offers confidential virtual counseling through BetterHelp at **betterhelp.com/Magellan**.

IRS contribution limits for HSAs will be higher for 2025

If you are enrolled in one of the HSA medical plans, you may contribute pretax dollars to your HSA. In 2025, the maximum contribution is \$4,300 if you have individual coverage or \$8,550 if you have family coverage. If you are age 55 or older, you can make an additional \$1,000 contribution.



EXCITING CHANGES TO OUR WELLNESS PROGRAM

We know your health and wellness is important to you and your family – and they are important to BBI too. In 2025, you will still have the opportunity to participate in wellness activities and get rewarded. **This is what you need to do:**

1. Complete the online health risk assessment.
2. Complete either a biometric screening or a routine physical exam.
3. Earn a total of 200 points.

By completing wellness activities, you will earn a medical premium discount in 2026! Plus, if your spouse is enrolled in a BBI medical plan and completes the same requirements, you will receive an additional premium discount for 2026!

With the updates to our wellness program, BBI will not be making contributions to HRAs or HSAs in 2025.

Wellness activity	Number of points
Required activities	
Health risk assessment	50
Biometric screening or routine physical/health checkup	75
Optional activities	
Complete a Health Journey	10
Set your interests	5
Set a well-being goal	5
Nicotine-free attestation	10
Flu shot attestation	10
Create a personal challenge	5
Complete 20 daily cards in a month	25
Track healthy habits 20 days a month	25
20-day triple tracker	25
At least one preventive exam (cervical cancer, mammogram, colorectal cancer, or prostate screening)	25



All wellness activities must be completed between January 1 and September 30, 2025 to receive the premium discount as of January 1, 2026. Activities completed between October 1 and December 31, 2025 will still be accepted. Any premium reductions earned after September 30 will take effect as soon as administratively possible after BBI receives notice of completion. Premium discounts will not be retroactive to January 1, 2026.

DENTAL

Dental PPO plan: The orthodontia benefit maximum is increasing to \$1,500 for the dental PPO plan in 2025.

Dental plan comparison chart

	DPPO		DHMO
	In-network	Out-of-network	In-network only
Calendar-year deductible (per individual)	\$50	\$100	\$0
Calendar-year deductible (family maximum)	\$150	\$300	\$0
Preventive care (exams, cleanings)	Plan pays 100%	Plan pays 80%	Plan pays 100%
Basic care (fillings, extractions, root canals, denture repairs)	Plan pays 80% after deductible	Plan pays 50% after deductible	Refer to your Patient Charge Schedule for costs and covered services
Major care (bridges, crowns, dentures)	Plan pays 50% after deductible	Plan pays 40% after deductible	Refer to your Patient Charge Schedule for costs and covered services
Benefit maximum (per calendar year)	\$1,500 per person — first year (combined in- and out-of-network coverage)		No benefit maximum
Orthodontia (available for dependent children under age 19)	Plan pays 50% (no deductible required)		Refer to your Patient Charge Schedule for costs and covered services
Lifetime orthodontia (benefit maximum)	\$1,500 per person (combined in- and out-of-network coverage)		No benefit maximum

Dental plan biweekly rate

	DPPO Plan	DHMO Plan
Team Member only	\$13.04	\$6.98
Team Member + spouse	\$27.38	\$12.65
Team Member + child(ren)	\$23.44	\$19.15
Team Member + spouse + child(ren)	\$37.83	\$26.50

VISION

The vision plan will provide an increased allowance of \$180 for eyeglass frames in 2025.

	In-network	Out-of-network
Eye exam once every calendar year	Covered 100% after \$15 copay	Up to \$35 allowance
Eyeglass lenses once every calendar year		
Single vision	Covered 100% after \$15 copay	Up to \$25 allowance
Lined bifocal	Covered 100% after \$15 copay	Up to \$40 allowance
Lined trifocal	Covered 100% after \$15 copay	Up to \$55 allowance
Eyeglass frames every other calendar year	Up to \$180 allowance	Up to \$45 allowance
Contact lenses once every calendar year, in lieu of eyeglass lenses and frames	Up to \$130 allowance	Up to \$105 allowance
Filing a claim	Your VSP provider will submit your claim for you	You pay upfront and are reimbursed after filing your claim

Biweekly rates

	2025
Team Member only	\$2.22
Team Member + spouse	\$4.42
Team Member + child(ren)	\$4.74
Team Member + spouse + child(ren)	\$7.56



BENEFITS ENROLLMENT IS OCTOBER 29 TO NOVEMBER 12!

Mark your calendar! Open Enrollment runs from October 29 to November 12, 2024. This is your chance to make the changes you need for 2025!

- Open Enrollment is your opportunity to update your coverage, add or remove dependents from your plans and choose your contribution amounts for pretax savings accounts
- You can learn more on the Open Enrollment information page on **BloominBrandsBenefits.com**.
- Enroll online through BBI Connect between October 29 and November 12.
- Remember, after November 12, you can only change your benefits if you experience a qualifying life event such as marriage, divorce, or welcoming a new child to the family.
- If you do not take action during enrollment, your current elections will roll over to 2025.



VISIT THE BBI BENEFITS WEBSITE!

For a complete list of resources and much more, check out **BloominBrandsBenefits.com** via your browser, smartphone, or tablet.

THINGS TO DO

Mark

your calendars

Remember to take action during the enrollment period

October 29–November 12



Review

your benefits

The benefits you can choose for 2025:

- Medical
- Dental
- Vision

You automatically receive:

- Core Life and AD&D
- Employee Assistance Program (EAP)



Know

who to cover

Cover yourself

Benefits eligibility for **field hourly Team Members** is determined by the number of service hours the team member earns over a specified time frame. For more information about benefits eligibility, visit BloominBrandsBenefits.com > **Hourly > Benefits > Eligibility & Enrollment > Eligibility Requirements & How to Enroll.**

Cover your dependents

Eligible dependents include your legally married spouse, your children under age 26, and eligible children incapable of self-sustaining employment by reason of mental or physical disability.

Newly enrolled dependents will be subject to dependent verification. Please refer to BloominBrandsBenefits.com in the Eligibility & Enrollment section.

Enroll

Enroll

During the Open Enrollment period, you can enroll online through BBI Connect.

- Go to MyBBI.com > **Digital Resources > BBI Connect** to make your selections.
- If you do not enroll by the deadline, **you will be defaulted into your current plan.**

Visite BloominBrandsBenefits.com para obtener información en español sobre la inscripción los beneficios para el año 2025 (disponible a partir del 29 de Octubre). Representantes que hablan español están a su disposición de lunes a viernes, de 9 a.m. a 6 p.m. Para comunicarse con el Centro de Recursos, llame al **1-800-555-5808** (Opcion 3).



Summary of Benefits and Coverage

Choosing a medical plan that is right for you is an important decision. The Summaries of Benefits and Coverage (SBCs) provide important information about your medical plan options in a standard format, helping you to compare options. The SBCs are available online at **BloominBrandsBenefits.com** > **Resources & Tools** > **Documents**. You may request paper copies by calling the HR Resource Center.

Important

Information contained in this enrollment guide is provided as a general overview of the OSI Restaurant Partners, LLC Employee Benefit Plan. OSI reserves the right to change, modify, or terminate these plans at any time. Full details of the plans are contained in official plan documents that govern each plan. In case of a conflict in interpretation between this booklet and the official plan documents, the official plan documents will prevail. The detailed Summary Plan Descriptions (SPDs) can be found at **BloominBrandsBenefits.com**. Required notices regarding your rights under HIPAA, COBRA, CHIP, Medicare Part D, and Women's Cancer Rights may be found at **BloominBrandsBenefits.com**. You may request paper copies by calling the HR Resource Center.

