



2025 OPEN ENROLLMENT GUIDE

OCTOBER 29 - NOVEMBER 12, 2024

Salaried 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. If you choose one of these plans, you can set aside pretax dollars in the healthcare flexible spending account (FSA) to help pay for eligible medical, prescription drug, dental, and vision expenses.

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 |
|----------------|---------------|----------------|------------|-----------|------------|-----------|
|----------------|---------------|----------------|------------|-----------|------------|-----------|

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 **magellanascent.com**.
- Magellan Ascend also offers confidential virtual counseling through BetterHelp at **betterhelp.com/Magellan**.

IRS contribution limits for HSAs and FSAs 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.
- If you are enrolled in one of the HRA medical plans or you choose the new Value PPO or Choice PPO, you may contribute up to \$3,200 in pretax dollars to the healthcare FSA. You must use the funds in your account by the end of 2025 or they will be forfeited due to FSAs' use it or lose it rule.



EXCITING CHANGES TO OUR WELLNESS PROGRAM

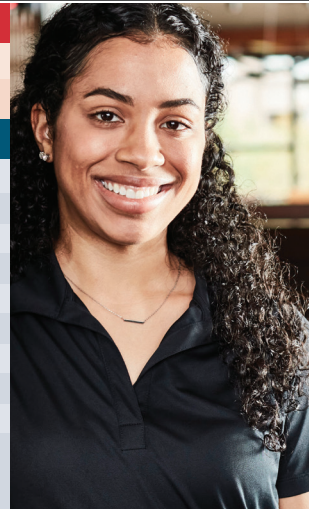
We know your health and wellness is important to you and your family – and they are important to BBI too. In 2025, you will still have the opportunity to participate in wellness activities and get rewarded. **This is what you need to do:**

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 |



INCOME PROTECTION

Enhanced financial support for Team Members after childbirth

We are committed to supporting Team Members, and that is why we are introducing a new maternity short-term disability benefit for those recovering from childbirth.

- The enhanced program provides 100% of base weekly salary (subject to applicable taxes) during recovery.
- Maternity short-term disability benefits begin after a one-week waiting period, providing income replacement for weeks two through six, or weeks two through eight for C-section recovery.



| | Short-Term Disability (STD) | Long-Term Disability (LTD) |
|----------------|--|---|
| Benefits begin | After 7-day waiting period | After 180-day waiting period |
| Plan pays | 40% of your covered base salary up to a \$750 weekly benefit | 40% of your covered base salary and performance bonus up to a \$1,500 monthly benefit |
| Paid for by | Bloomin' Brands | Bloomin' Brands |
| | STD Buy-Up | LTD Buy-Up |
| Plan pays | Additional 20% up to a \$2,000 weekly benefit* | Additional 20% up to a \$15,000 monthly benefit* |
| Paid for by | Team Member | Team Member |

* Total benefit with buy-up is inclusive of the Core benefit.

LIFE AND AD&D INSURANCE

Bloomin' Brands provides all Team Members with Core Life and Accidental Death & Dismemberment (AD&D) insurance equal to 1x your base salary at no cost to you. You have the option to purchase additional Life and AD&D coverage as outlined below.

| | You | Your spouse | Your eligible child(ren) |
|-------------------------------------|---|---|---|
| Supplemental Life Insurance options | \$20,000 increments to \$1,000,000 maximum* | \$10,000 increments to 100% of your coverage up to \$500,000* | Flat amount \$10,000 |
| Rates based on... | Your age (as of January 1 of the current plan year) | Team Member's age (as of January 1 of the current plan year) | Flat fee, regardless of the number of eligible children insured |
| Supplemental AD&D Insurance options | \$20,000 increments to \$1,000,000 maximum | \$10,000 increments to 50% of your coverage | N/A |

* Coverage is reduced to 65% at age 65, 40% at age 70, and 25% at age 75.



Evidence of Insurability (EOI)

If you are not currently enrolled in the STD or LTD buy-up options or Supplemental Life Insurance, or you make any changes to Supplemental Life Insurance for yourself or eligible spouse, you will be subject to underwriting approval (EOI).

Visit BloominBrandsBenefits.com for more information. If you do not receive EOI forms (mail or email) from New York Life Group Benefits (NYL GBS) by mid-January, please call the NYL GBS EOI support center at **1-866-607-2360**.

LEGAL PLANS

MetLife Legal gives you access to affordable legal assistance when you need it.

Life is filled with moments where you might need legal help.

As a Bloomin' Brands Team Member, you have access to legal plans through MetLife that can provide you convenient, affordable access to an attorney for a variety of unique circumstances. **Such as:**

- Adoption and reproductive assistance
- Estate planning
- Name changes
- Student loan debt assistance
- Real estate or leasing issues
- Buying a home
- Medicare/Medicaid documents
- Nursing home agreements
- Guardianship
- Immigration status

When you use a network attorney for covered services, all fees are covered by the legal plan (including advice and consultations). That means there are no copays, deductibles, or claims. You simply choose an attorney in any area of practice from the network, and reach out to them by phone, in person, or online.

For more information about your legal plan options, call MetLife at **800-821-6400** Monday through Friday from 8 a.m. to 8 p.m. Eastern.

Learn more about the MetLife legal benefits

Reproductive law benefit: Up to 20 hours of legal assistance for the reproductive legal issues involved in surrogacy, egg donation, sperm donation, embryo donation and/or embryo adoption. Services may include review or preparation of agreements or documents, preparation and filing of court documents, and providing representation at related hearings or other proceedings when required.

Four hours of attorney time and services per year: These hours are for non-covered matters that are not otherwise excluded.

See more details, including a flyer from MetLife Legal, on BloominBrandsBenefits.com > [Benefits](#) > [Legal Assistance](#).

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, with the exception of the healthcare and dependent care FSAs. They require a new election each year to participate.

VISIT THE BBI BENEFITS WEBSITE!



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

CONTACTS



FOR QUESTIONS ABOUT

YOUR RESOURCE

CONTACT INFORMATION

General benefits and eligibility

HR Resource Center

bbconnect@bloominbrands.com
1-800-555-5808 (option 3)

Medical coverage

Blue Cross and Blue Shield of Florida, Inc. (BCBSFL)

Non-members:
mybenefitenrollment.com/bloominbrands
Members:
myhealthtoolkit.com / 1-833-578-1132

Prescription drug coverage

Express Scripts

express-scripts.com
Pre-Enrollment Tool:
www.express-scripts.com/bloominbrands

Dental coverage

Cigna

cigna.com / 1-800-244-6224

Vision coverage

VSP Vision Care

vsp.com / 1-800-877-7195

Health Savings Account (HSA) and Health Reimbursement Account (HRA)

AccrueHealth

member.accrue-health.com / 1-844-643-3099

Life and AD&D

New York Life Group Benefit Solutions

mynylgbs.com / 1-888-842-4462

Employee Assistance Program

Magellan Ascend

magellanascend.com / 1-800-327-6754



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
- Flexible Spending Accounts (FSAs)
- Supplemental Life and Accidental Death and Dismemberment (AD&D)
- Short- and Long-Term Disability Insurance Buy-Up
- MetLife Legal Plans

You automatically receive:

- Core Life and AD&D
- Core Short- and Long-Term Disability Insurance
- Employee Assistance Program (EAP)

Know

who to cover

Cover yourself

You are eligible to enroll in Bloomin' Brands benefits if you are a **salaried Team Member**, or if you are an **hourly Team Member eligible for salaried benefits** (i.e., Sous Chef, MIT, PDD, GEDM, or Flex Manager). For more information about benefits eligibility, visit **BloominBrandsBenefits.com > Salaried > 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.

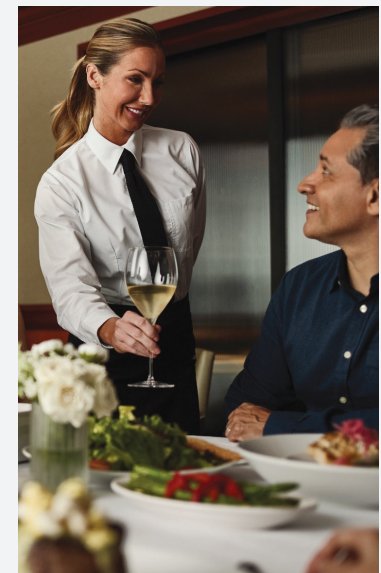
Newly enrolled dependents will be subject to dependent verification. Please refer to **BloominBrandsBenefits.com** in the Eligibility & Enrollment section.

Enroll

Enroll

During the Open Enrollment period, you may 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**.
- **You must make FSA elections for 2025** if you are eligible and want to have account(s). **Your 2024 FSA elections will not carry over.**





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](https://www.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](https://www.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](https://www.bloominbrandsbenefits.com)**. You may request paper copies by calling the HR Resource Center.

