BLOOMIN' BRANDS INC

2027 BENEFITS GUIDE

Hourly Team Members



Taking care of you.

HOURLY TEAM MEMBER BENEFITS

BBI provides the following benefits at no cost to you:

- Core life and accidental death and dismemberment (AD&D)
- Employee assistance program (EAP)

You have the option to enroll in the following benefits:

- Medical coverage with free support programs and money-saving options
- Dental coverage
- Vision coverage
- Health savings account (HSA)

You can find more information about the plans you have available, learn about changes for 2027 and log in to Workday to enroll on **BloominBrandsBenefits.com!**

Use the QR code for faster access!!



A Message from Mike

I hope that you all are well as we communicate our health and wellness programs. I highly encourage you to take time to review this guide, learn about the new resources available to you, and carefully consider which options best meet the needs of you and your family. Your choices matter, and taking advantage of the programs available to you can make a meaningful difference in both your health and your healthcare costs. If you have any questions about benefits, please create a Workday HELP case, or call the HR Resource Center at 1-800-555-5808 (Option 3) for further information.

We have taken a careful and intentional approach to reviewing our benefit plans – balancing cost increases while continuing to invest in programs that support your health, your family, and your financial well-being. This year's changes reflect our commitment to Enhanced Benefits, Trusted Providers, and Real Savings by helping Team Members find the right care, from the right providers, at the right value.

For 2027, you will have access to new resources that can help you find high-quality healthcare providers, better manage chronic health conditions, and receive additional support when you and your family members need it. We will also continue to leverage technology to enhance privacy with at-home preventive wellness and medical access. Our goal is simple: better care, better outcomes, and greater value for you and your family.

Thank you for everything you do for Bloomin' Brands. Your health, your family, and your well-being remain at the center of our benefits strategy, and we are proud to continue investing in benefits that support you both today and in the future.

Sincerely,

Mike Spanos
Chief Executive Officer

Visite **BloominBrandsBenefits.com** para obtener información en español sobre la inscripción en los beneficios para el año 2027. 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 Humanos, llame al 1-800-555-5808 (Opción 3).

GETTING STARTED

Eligibility

Benefits eligibility for field hourly Team Members is determined by the number of service hours the Team Member earns over a specified time frame. Generally, you must have one year of continuous service and earn 1,560 service hours (an average of 30 hours per week) within your initial measurement period to be eligible for benefits. You have 31 days from your eligibility date to enroll in coverage. For more information about benefits eligibility, visit the **Eligibility Requirements & How to Enroll** page on **BloominBrandsBenefits.com**.

If you enroll for benefits, you can also cover eligible family members. Eligible dependents include your legally married spouse, and your children under age 26.

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

How and when to enroll

You can review and update your elections through **Workday**. Visit **BloominBrandsBenefits.com** and select **Enroll/Log In – Workday** from the top menu.

Elections you make during our annual Open Enrollment period will take effect January 1 of the following plan year.

We offer three medical plans

Bloomin' Brands offers three medical plan options through UnitedHealthcare (UHC): the **Value PPO plan**, the **Choice PPO plan**, and the **Choice HSA plan**. The PPO plans have copays for certain services and prescription medications. The Choice HSA plan is a high-deductible health plan (HDHP) that can be paired with a health savings account (HSA).

After you enroll in medical coverage, create a Garner account

Through **Garner Health**, you can locate Garner-recommended providers in the UHC network. If you use recommended providers, you can potentially save money on your medical costs with the peace of mind that your provider has been independently evaluated for quality of care and patient outcomes.

After you sign up for a medical plan during enrollment, you'll need to create your Garner account. Download the Garner Health app or visit **getgarner.com**. See **page 6** for more details.

MEDICAL

This chart shows what you pay for services with UHC in-network providers. You will have access to Garner-recommended providers, which can lower your out-of-pocket costs. Learn more about Garner on the **next page**.

In-Network Benefits	Value PPO	Choice PPO	Choice HSA
Wellness/ preventive care	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Generic preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Generic preventive medications	Covered in full: •Eligible office visits •Screenings •Contraceptives •Labs •Generic preventive medications
Calendar year deductible	$7,550 individual $15,100 family	$4,500 per person $9,000 family	$5,000 individual $10,000 family
Garner incentive	$2,000 individual $4,000 family	$2,000 individual $4,000 family	$2,000 individual $4,000 family
Calendar year out-of-pocket maximum	$8,500 per person $17,000 family	$7,000 per person $14,000 family	$7,500 individual $15,000 family*
Primary care office visit	$30 copay	$25 copay	20% after deductible
Specialist office visit	$70 copay	$50 copay	20% after deductible
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

* Choice HSA family coverage has a $15,000 family out-of-pocket maximum; however, no individual family member will pay more than $12,000 in covered in-network expenses.

New program!

GARNER HEALTH

Find doctors in your area and save on out-of-pocket costs

Garner Health helps you find recommended in-network providers in your area and then reimburses you for eligible services when you visit those providers. This resource is FREE for our UHC medical plan members to use. Check out **garnerhealth.com/how-it-works** to learn more.

What does Garner Health do?

- Takes the guesswork out of finding high-quality medical care
- Reimburses you for using Garner-recommended providers
- Garner Concierge provides expert support
- Works alongside UHC medical plans

Garner-recommended providers

- Nearby, in-network and available
- Selected based on patient outcomes
- Doctors who follow the latest research, avoid unnecessary procedures, and help patients get healthy faster
- Rankings are updated monthly

Build your Garner Care Team

Find Garner-recommended providers in the Garner app and add them to your Care Team before your appointment. Your Care Team keeps your selected providers in one place and helps you confirm which providers are approved for your Garner benefit.

Get medical bills covered

Get reimbursed for medical expenses with Garner-recommended providers, including office visits, imaging, and lab work when ordered by a Garner-recommended provider.

How Garner works with our medical plans

If you enroll in the Value PPO or the Choice PPO, the Garner incentive is available immediately when you receive eligible care from a Garner-recommended provider. You pay at the time of service and are automatically reimbursed by Garner for eligible expenses.

If you elect the Choice HSA plan, you do not need to satisfy the full plan deductible ($5,000 individual or $10,000 family) before becoming eligible for reimbursement for seeing Garner-recommended providers. You will only need to meet the 2027 IRS minimum deductible required for an HSA-qualified plan: $1,750 if you only cover yourself or $3,500 if you cover family members before becoming eligible for reimbursement for seeing Garner-recommended providers.

	Garner Incentive
Individual coverage	Up to $2,000
Family coverage	Up to $4,000

GARNER HEALTH

Getting started with Garner

After you sign up for a medical plan during enrollment, create your Garner account. Download the Garner Health app or go to **getgarner.com**.

- **Find a Garner-recommended provider and add them to your Care Team BEFORE your visit**. You can find nearby doctors based on name or the type of care needed. Look for the green badge labeling providers who are recommended.
- Starting January 1, 2027, you can get reimbursed for qualifying medical costs charged by Garner-recommended providers listed on your Care Team. Reimbursement is direct deposited or sent by your preferred payment method.
- The **Garner Concierge** is also available to help you find providers, understand your benefit, answer claim questions, set up direct deposit and more.
- Track your paid claims in the Garner Health app.

Garner Concierge

As your first line of expert assistance, the Garner Concierge team can help with:

- Understanding your benefit and managing your Care Team
- Finding providers for yourself and your family
- Answering questions about claims

CONTACT THE GARNER CONCIERGE

Use in-app messaging, call **866-761-9586** or email **concierge@getgarner.com**. The Concierge team is available Monday through Friday from 8 a.m. to 8 p.m. Eastern time. Se habla español.



MEDICAL PLAN RATES

Your biweekly per-paycheck deduction will depend on your salary, the medical plan you choose, and whether or not you and your covered spouse completed the wellness program requirements in 2026 to earn a premium discount. If you only cover yourself, the wellness premium discount is $17.31 per paycheck. If you cover a spouse and they also completed the wellness program requirements, you are eligible for an additional $17.31 biweekly discount.

Coverage Level	**Value** PPO	**Choice** PPO	**Choice** HSA
ANNUAL SALARY LESS THAN $45,000			
Team Member only	$50.40	$79.92	$72.65
Team Member + spouse	$126.37	$192.86	$175.32
Team Member + child(ren)	$102.31	$159.05	$144.60
Team Member + spouse + child(ren)	$173.11	$263.84	$239.85
ANNUAL SALARY $45,000 TO $150,000			
Team Member only	$82.61	$116.49	$105.90
Team Member + spouse	$203.64	$280.39	$254.90
Team Member + child(ren)	$164.86	$230.04	$209.13
Team Member + spouse + child(ren)	$279.94	$384.82	$349.84
ANNUAL SALARY MORE THAN $150,000			
Team Member only	$91.59	$127.53	$115.94
Team Member + spouse	$225.52	$306.99	$279.08
Team Member + child(ren)	$182.70	$251.87	$228.97
Team Member + spouse + child(ren)	$310.00	$421.34	$383.04

HEALTH SUPPORT PROGRAMS

As a BBI medical plan participant, you have access to targeted programs at no additional cost to you. These programs are available exclusively to eligible members enrolled in a Bloomin' Brands medical plan. While you can enroll in these programs any time during the year, you can only enroll in medical coverage during Open Enrollment or when you are first eligible for benefits, unless you experience a qualifying life event. Learn more about these programs and find links to enroll at **BloominBrandsBenefits.com** > **Benefits** > **Health & Wellness** > **Health Resources** > **Health Support Resources & Programs**.

Hello Heart

Get a FREE blood pressure monitor and a personalized digital program to help you understand and manage your blood pressure. Track your numbers, learn what they mean, and get personalized guidance to support better heart health.

Virta

Get personalized support for diabetes, prediabetes, and weight management. Connect with health coaches and care specialists, access personalized tools and guidance, and build sustainable habits that can help improve your health.

Maven

Maven makes pregnancy and postpartum support simple. Connect with a network of experts, access trusted resources, and get personalized guidance throughout your fertility, pregnancy and postpartum journey – for you and your baby.



New, enhanced program!

HEALTH REWARDS

We know your health and wellness is important to you and your family – and they are important to BBI too. **We have partnered with UHC to bring you the Health Rewards program** starting in 2027. You will be able to earn a medical premium discount by taking care of your health.

By completing wellness activities like the Health Rewards Health Survey and an annual checkup, you will accumulate credit toward a medical premium discount in 2028! Plus, if your spouse is enrolled in a BBI medical plan and completes the same requirements, you will receive an additional premium discount for 2028.

All wellness activities must be completed between January 1 and September 30, 2027 to receive the premium discount as of January 1, 2028. Activities completed between October 1 and December 31, 2027 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, 2028.

Learn more and get started at **BloominBrandsBenefits.com** > **Benefits** > **Health & Wellness** > **Health Resources** > **Health Rewards**.

Get your annual checkup from home

Your Bloomin' Brands medical plan includes access to Catapult Health VirtualCheckup. You'll get a full picture of your health with a VirtualCheckup Home Kit, which includes the same essential screenings and guidance you'd receive from your doctor's office without leaving home. VirtualCheckups are available to covered Team Members, spouses, and dependents age 18 or older at no cost to you.



HEALTH REWARDS

How Health Rewards works

Health Rewards encourages you to live healthier every day. **Here's what you need to do:**

1. **Activate your Health Rewards Program by first completing your Health Survey.** This required first step unlocks the remaining Health Rewards activities and opportunities to earn progress toward your annual goal.
2. **Complete your annual preventive checkup** to stay on top of your health.
3. **Complete eligible preventive screenings**, such as dental and vision exams, to support your overall well-being.
4. **Connect a compatible fitness tracker or health app** and participate in daily or weekly activities. Tracked activity can help you build healthy habits while earning credit toward your Health Rewards Program.
5. **Monitor your progress throughout the year** and complete Health Rewards activities to earn at least **100%** and qualify for the medical premium discount for the following plan year.

Activity	Credit
Complete Health Survey (required to move forward)	**10%**
Get an annual checkup	50%
Get a flu shot	10%
Attest to being Nicotine Free	10%
Complete a 24/7 Virtual Visit	10%
Cervical cancer screening	10%
Breast cancer screening	10%
Colon cancer screening	10%
Preventive vision screening	5%
Preventive dental screening	5%
Complete a cost estimate	5%
Connect a tracker	1%
Daily activity – Goal 1	0.1%*
Daily activity – Goal 2	0.15%*
Fitness challenge – weekly goal	0.5%*
Sleep tracking – 14 days	1%
Sleep challenge – weekly goal	0.5%*
Total available	**138.25%**



* These percentages are accumulated based on the activity frequency. Daily activities accumulate each day they are completed, while weekly activities accumulate each week they are completed, up to 365 days or 52 weeks during the plan year.

DENTAL

You can choose from two dental plan options through Cigna.

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 rates

	DPPO	DHMO
Team Member only	$13.78	$7.65
Team Member + spouse	$28.93	$13.86
Team Member + child(ren)	$24.77	$21.00
Team Member + spouse + child(ren)	$39.97	$29.06

VISION

Our vision plan is offered through VSP.

	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 **$180 allowance**	Up to **$105 allowance**
Filing a claim	Your VSP provider will submit your claim for you	You pay up front and are reimbursed after filing your claim

Vision plan biweekly rates	2027 vision rates
Team Member only	**$2.44**
Team Member + spouse	**$4.86**
Team Member + child(ren)	**$5.21**
Team Member + spouse + child(ren)	**$8.33**



New plan administrator!

HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the Choice HSA medical plan, you have access to a health savings account (HSA), administered by Fidelity. Contributions, earnings, and withdrawals that are used for qualifying expenses are tax-free. Here's how the account works:

Make your contribution election during enrollment. You can contribute through pretax payroll deductions, up to IRS limits. For 2027, the limits are $4,500 for Team Member-only coverage or $9,000 if you cover family members. If you are age 55 or older, you can make an additional catch-up contribution of $1,000.

Use your HSA. You can use your Fidelity debit card to pay for eligible medical, prescription drug, dental, and vision expenses, or you can pay with personal funds and submit a claim for reimbursement online at **netbenefits.com** or through the NetBenefits mobile app. For a full list of eligible expenses, review **publication 969 on irs.gov**.

Own your account. You have the option to save or invest your HSA funds. The account is yours, even if you leave the company. Your account balance will roll over each year, accruing interest tax-free. You may select from a number of investment funds to help your savings grow faster. You can manage your account, designate beneficiaries, take advantage of financial education tools, and more on Fidelity's website at **netbenefits.com**. You will need to register on the Fidelity site if you are a new user.

You are eligible to contribute to an HSA if:

- You are enrolled in the Choice HSA medical plan.
- You are not covered by your spouse's employer plan unless it is an HSA-qualified high-deductible health plan.
- Your spouse is not enrolled in a healthcare flexible spending account (FSA), unless it is a limited purpose FSA.
- You are not eligible to be claimed as a dependent on someone else's tax return.
- You are not enrolled in Medicare, TRICARE, or TRICARE For Life.
- You have not received Veterans Affairs benefits.



WELL-BEING

Additional medical plan resources

UHC offers programs and resources to help you get more from your medical benefits:

- **Virtual care:** Get convenient virtual visits for routine and urgent medical needs, plus access to virtual behavioral health services, depending on your plan. Connect with care from wherever you are.
- **NEW! Enhanced advocacy services:** Get personalized, one-on-one support from dedicated advocates who can help you understand your benefits, navigate health care, find the right care, and get answers when you need them. Whether you have a medical bill, need a specialist, or are managing a complex health situation, your advocate is here to help make health care easier.
- **Tobacco cessation:** Quit For Life offers personalized coaching, digital tools, and resources to help you quit tobacco for good.

Employee assistance program (EAP)

Our EAP through Magellan Healthcare, offers free, confidential resources to support you and members of your household as you handle life's challenges – everything from simple daily tasks to more complex issues. The EAP offers:

- Up to **six free counseling sessions** per person, per issue, per year to deal with challenges such as coping with a life transition, improving career prospects, parenting skills, managing mood swings, processing grief and trauma, marital issues, and more; counseling is available in-person and via text message, live chat, phone, and video conference through Magellan's partnership with BetterHelp
- 24/7 online information at **magellanascend.com**
- Unlimited access to coaches who will assist you in achieving your goals by helping you create a plan of action and stay on track
- Up to three financial counseling sessions per topic per year
- A well-being app powered by Neuroflow
- Monthly webinars on a variety of topics



FINANCIAL RESOURCES

New York Life programs

BBI provides you with $10,000 in life and AD&D coverage through New York Life at no cost to you. You have access to valuable programs such as:

- **FinancialConnect:** Unlimited access to Certified Public Accountants (CPAs) and other financial professionals for assistance with financial planning
- **LegalConnect:** Unlimited phone consultations with attorneys on topics like divorce, estate planning, and identity theft, plus referrals for a free 30-minute consultation and 25% off additional fees.
- **EstateGuidance:** Create essential documents – wills, living wills, and final arrangements – quickly and affordably with an easy-to-use online tool
- **Secure Travel:** Pre-trip planning, assistance while traveling, and emergency medical transportation benefits when you are traveling 100 miles or more from home.

Commuter benefits

If you live in Illinois, Pennsylvania, New Jersey, New York, or California, you can take advantage of commuter benefits to use pretax dollars to help pay for your daily travel to and from work. You can set aside up to $350 per month from your paycheck for expenses such as public transit fares, ride shares, and parking costs.

Additional benefits

- **Paid time off (PTO):** It's important to take time away from work to recharge or take care of other responsibilities. The number of PTO days/hours you have available is based on your length of service with BBI.
- **Adoption assistance:** If you add a child to your family through adoption, you can request up to a $4,000 reimbursement for eligible expenses from BBI ($6,000 for a special needs child).
- **Discount programs:** You can save on a variety of products and expenses. Visit **BloominBrandsBenefits.com** > **Benefits** > **Benefits Extras & Discounts** to learn more about:
  - Magellan Ascend LifeMart Discount Center to save on major purchases like travel, tickets, electronics, cars, and more
  - Rocket Mortgage savings offers
  - Perks at Work for discounts on apparel, electronics, gifts, fitness gear and memberships, tickets to events and attractions, travel, and more
  - Rx Pets prescription savings program through Express Scripts that offers a discount on generic or brand-name pet medications
  - Tuition discounts at Johnson & Wales University, St. Leo University, and University of Phoenix

CONTACTS

FOR QUESTIONS ABOUT	YOUR RESOURCE	CONTACT INFORMATION
General benefits and eligibility	HR Resource Center	**bbiconnect@bloominbrands.com** **1-800-555-5808** (option 3) Create a HELP case in **Workday**
Medical coverage	UnitedHealthcare (UHC)	member.uhc.com/myuhc **1-844-756-0689**
Recommended medical providers with incentive	Garner Health	**getgarner.com** Garner Concierge: **1-866-761-9586** or **concierge@getgarner.com**
Prescription drug coverage	Express Scripts	**express-scripts.com / 1-866-725-2520** Pre-enrollment tool: **www.express-scripts.com/bloominbrands**
Heart health	Hello Heart	**Coming soon!**
Diabetes and weight management	Virta	**Coming soon!**
Pregnancy support	Maven	**mavenclinic.com/join/takecare / 1-888-861-1329**
Dental coverage	Cigna	**cigna.com / 1-800-244-6224**
Vision coverage	VSP Vision Care	**vsp.com / 1-800-877-7195**
Health savings account (HSA)	Fidelity	**netbenefits.com** **1-800-544-3716**
Life and AD&D	New York Life Group Benefit Solutions	**mynylgbs.com / 1-888-842-4462**
Employee assistance program (EAP)	Magellan Ascend	**magellanascend.com / 1-800-327-6754**

BLOOMIN' BRANDS INC®

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 (OSI) 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.

OUTBACK STEAKHOUSE® CARRABBA'S ITALIAN GRILL® BONEFISH GRILL® Fleming's PRIME STEAKHOUSE & WINE BAR