



Taking care of you.



2024 Open Enrollment Guide

Hourly Benefits





Welcome!

Your Bloomin' Brands benefits are designed to support what matters most to you — your well-being and your family. Open Enrollment is your chance to carefully consider which benefit options for the 2024 calendar year will best suit your anticipated needs.

It is important to note that the benefits you choose during Open Enrollment will be in effect from January 1 to December 31, 2024. After the enrollment period ends, you will not have another opportunity to modify your 2024 benefits, unless you experience a qualifying life event such as marriage, divorce, or the birth or adoption of a child.

Take the time to read this guide thoroughly, and then visit **bloominbrandsbenefits.com** to review your 2024 benefit options and enroll before the deadline on November 14.

Everyone can enroll
October 31–November 14.





Things to Do



Opt in now to receive text message alerts during the Open Enrollment period!
Text your concept code to **1-813-776-3200** (message and data rates may apply).

OBS	BFG	CIG	FPS	AGO	EXP	RSC
Outback Steakhouse	Bonefish Grill	Carrabba's Italian Grill	Fleming's Prime Steakhouse & Wine Bar	Aussie Grill by Outback	Express	Restaurant Support Center



Mark your calendars

Remember to take action during the enrollment period

October 31–November 14



Review your benefits

The benefits you can choose for 2024:

- Medical — administered by Blue Cross and Blue Shield of Florida, Inc. (BCBSFL)
- Dental
- Vision

You automatically receive:

- Core Life and AD&D
- Employee Assistance Program (EAP)
- Adoption Assistance Benefits
- And more! See pages 22–25.



Know who to cover

Cover yourself

For more information about annual benefits eligibility and required hours of service, visit bloominbrandsbenefits.com > **Hourly Benefits > Enroll > Eligibility > Benefits 101.**

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. See BBI Connect for details.



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 en los beneficios para el año 2024 (disponible a partir del 31 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** (Opción 3).



Medical plans at a glance

You have four plan options to choose from in 2024 — all administered by Blue Cross and Blue Shield of Florida, Inc. (BCBSFL). All plans are consumer-driven health plans, or CDHPs.

How the plans work

1 First

In most cases, you will be responsible for the full cost of all non-preventive care until you meet your deductible. You can use the money in your Health Savings Account (HSA) or Health Reimbursement Account (HRA) to help pay the eligible expenses toward your deductible.

2 Next

After you have met your deductible, you and Bloomin' Brands share in the cost of covered healthcare claims through coinsurance. If you have one or more dependents covered, you and your dependents must meet the entire family deductible. For the Value HRA, the deductible is the same as the out-of-pocket maximum, so please skip to step 3.

3 Finally

Once you meet the applicable out-of-pocket maximum, your medical plan will pay 100% of your eligible in-network expenses for the rest of the plan year. If you have one or more dependents covered, you and your dependents must meet the entire family out-of-pocket maximum.

Remember to complete Health Rewards to get Bloomin' Brands contributions to your account each calendar year. See pages 12-13.

	CHOICE HSA	VALUE HSA	CHOICE HRA	VALUE HRA
Your paycheck contributions	\$\$\$\$	\$\$\$	\$\$	\$
Your calendar year deductible	\$	\$\$	\$\$\$	\$\$\$\$
Your calendar year out-of-pocket maximum	\$	\$\$	\$\$\$\$	\$\$\$
Health care account type	HSA	HSA	HRA	HRA

Things to think about

When determining which plan is right for you, there are a couple of questions you may want to consider:

- Is it important to you to have long-term health savings?
- Is it more important to have the lowest possible paycheck contribution or the lowest possible out-of-pocket expenses when you need care?

See pages 14-15 to learn about the differences between an HRA and an HSA.



Compare costs for in-network medical care

What you pay	CHOICE HSA	VALUE HSA	CHOICE HRA	VALUE HRA
Wellness/preventive care/labs	Covered in full: <ul style="list-style-type: none"> • Eligible office visits • Screenings • Contraceptives • Labs • Certain preventive medications 	Covered in full: <ul style="list-style-type: none"> • Eligible office visits • Screenings • Contraceptives • Labs • Certain preventive medications 	Covered in full: <ul style="list-style-type: none"> • Eligible office visits • Screenings • Contraceptives • Labs • Certain preventive medications 	Covered in full: <ul style="list-style-type: none"> • Eligible office visits • Screenings • Contraceptives • Labs • Certain preventive medications
Calendar year deductible (medical and prescription drugs)	\$2,500 /individual \$5,000 /family	\$4,300 /individual \$8,600 /family	\$5,000 /individual \$10,000 /family	\$6,550 /individual \$13,100 /family
Calendar year out-of-pocket maximum	\$5,000 /individual \$8,200 /family	\$6,500 /individual \$9,000 /family	\$7,000 /individual \$14,000 /family	\$6,550 /individual \$13,100 /family
Office and urgent care visits	20% after deductible	20% after deductible	30% after deductible	0% after deductible
Teladoc visits	\$55 per visit, no deductible	\$55 per visit, no deductible	\$55 per visit, no deductible	\$55 per visit, no deductible
Emergency room visits*	\$300 copay after deductible	\$300 copay after deductible	\$300 copay after deductible	\$300 copay after deductible
Hospital care visits	20% after deductible	20% after deductible	30% after deductible	0% after deductible
Generic prescription drugs	20% after deductible	20% after deductible	20% after deductible	0% after deductible
Preferred brand prescription drugs	20% after deductible	20% after deductible	20% after deductible	0% after deductible
Non-preferred brand prescription drugs	40% after deductible	40% after deductible	40% after deductible	0% after deductible

Note: All of these services and prescriptions are subject to the calendar year deductible, and all apply to your out-of-pocket maximum. Maintenance prescriptions must be filled in 90-day supplies through Express Scripts Pharmacy (home delivery) or a Smart90 Walgreens Network retail pharmacy.

* Emergency room copay waived if admitted



Medical plan rates

Biweekly rates

	HSA		HRA	
	CHOICE	VALUE	CHOICE	VALUE
Annual salary less than \$45,000				
Team Member Only	\$62.17	\$51.80	\$43.71	\$43.13
Team Member + Spouse	\$150.03	\$127.22	\$109.41	\$108.14
Team Member + Child(ren)	\$123.73	\$104.03	\$88.65	\$87.55
Team Member + Spouse + Child(ren)	\$205.25	\$174.15	\$149.87	\$148.14
Annual salary \$45,000 but less than \$150,000				
Team Member Only	\$86.54	\$76.17	\$68.08	\$67.50
Team Member + Spouse	\$208.30	\$185.49	\$167.69	\$166.42
Team Member + Child(ren)	\$170.90	\$151.20	\$135.82	\$134.72
Team Member + Spouse + Child(ren)	\$285.88	\$254.78	\$230.50	\$228.76



Choosing the right plan

Key considerations for choosing the right medical plan may include:

- How much healthcare you and/or your family tend to use
- How important it is to keep paycheck contributions low
- Whether you have access to savings should you have a large, uncovered expense

Check out illustrative claim examples on bloominbrandsbenefits.com.





Health Rewards Program (Strive)

Complete Health Actions between **January 1 and December 1, 2024.**

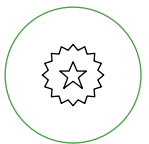
Even if you have finished the activities for 2023, you will still need to complete activities in 2024 in order to earn rewards.

By completing activities with Strive, you can earn Health Rewards from Bloomin' Brands in your Health Reimbursement Account (HRA) or your Health Savings Account (HSA). Credits are awarded within eight weeks after the activity is completed or the claim is processed. Dollars are credited to your HRA or HSA account around the 10th of each month following the date your credits are awarded.



First

Register for your new Strive account. Then, complete the Strive Health Assessment. It provides a snapshot of your current health age and actions you can take to improve or maintain your health. And, you will earn a reward for completing it! (Credits for registration are only awarded when you first register.)



Next

Complete other Health Actions to earn additional rewards toward your HRA or HSA. Dollars are credited to your HRA or HSA account around the 10th of each month following the date your credits are awarded. (Credits for logging in to the mobile app are only awarded for your first login.)



Finally

If your spouse is enrolled in medical coverage, they can earn additional dollars for healthy activities, too. Your spouse must register for their own Strive account.

Check out what you can earn annually

	Strive credits	HSA/HRA deposit Individual	HSA/HRA deposit Family	HSA/HRA deposit Spouse
		Each credit = \$3	Each credit = \$6	Each credit = \$1
		\$400 max	\$800 max	\$150 max
Health assessment*	50 credits	\$150	\$300	\$50
Complete registration (credits only for initial registration)*	5 credits	\$15	\$30	\$5
First login to mobile app (credits only for initial login)	5 credits	\$15	\$30	\$5
Set a well-being goal	5 credits	\$15	\$30	\$5
Set your interest	5 credits	\$15	\$30	\$5
Nicotine-free attestation	10 credits	\$30	\$60	\$10
Flu shot attestation	10 credits	\$30	\$60	\$10
Complete a Journey	25 credits	\$75	\$150	\$25
Complete 20 daily cards in a month	25 credits	\$75	\$150	\$25
Track healthy habits 20 days in a month	25 credits	\$75	\$150	\$25
Track 7,000 steps a day for 20 days in a month	25 credits	\$75	\$150	\$25
Health checkup or biometric screening	75 credits	\$225	\$450	\$75

* Must be completed to access and earn additional rewards.

How do you access Strive in 2024?

From a desktop computer:

- Log in to myhealthtoolkitfl.com.
- Select the **Wellness** tab, then **Strive**.

From a mobile device:

- Log in to your My Health Toolkit account.
- Select **Benefits**, then **Strive**.



Health funding accounts



All four medical plans come with a health funding account — either a Health Savings Account (HSA) or a Health Reimbursement Account (HRA).



	Health Reimbursement Account	Health Savings Account
Why should I choose this plan?	You want the company to set up your account. You do not want to contribute your own money to an account.	You want to contribute your own money pre-tax and invest your balance tax-free* for current and future expenses, including expenses in retirement. You want an account that can go with you if you leave the company.
Who sets up the account?	Your account will be opened for you. There is nothing you need to do.	You, but we make it easy to do online. You must establish your account with AccrueHealth within 60 days of any elected HSA payroll contribution and to receive Health Rewards.
Who can contribute?	Only Bloomin' Brands.	You and the company (up to \$4,150 for single coverage or \$8,300 for family coverage; an additional \$1,000 per year if you are age 55+).
How much does the company contribute?	If you complete your Health Rewards by December 1, 2024, you can earn up to \$400 if you are enrolled in single coverage and up to \$800 if you are enrolled in dependent coverage. Your enrolled spouse can earn up to an additional \$150 .	If you complete your Health Rewards by December 1, 2024, you can earn up to \$400 if you are enrolled in single coverage and up to \$800 if you are enrolled in dependent coverage. Your enrolled spouse can earn up to an additional \$150 .
What can the money be used for?	Your share of eligible medical expenses covered by the plan, like copays and coinsurance for office visits and prescription drugs, for you and covered dependents.	Eligible medical, prescription drug, dental, and vision expenses for you and your tax dependents.
How do I use the account?	You can use your AccrueHealth debit card to pay for eligible health care expenses, or you can pay with personal funds and submit a claim for reimbursement. You will be responsible for any amounts in excess of your available account balance.	You can use your AccrueHealth debit card to pay for eligible health care expenses, or you can pay with personal funds and submit a claim for reimbursement. You will be responsible for any amounts in excess of your available account balance.
Are there tax advantages?	Yes, the money deposited by the company is tax-free.*	Yes, contributions are made before taxes, money grows tax-free, and you do not pay taxes on withdrawals for eligible expenses.*
Can I invest the money in my account?	No.	Yes, once your account reaches \$2,000 , you may select from a number of investment funds.
Does the money roll over?	Yes, as long as you stay continuously enrolled in an HRA plan with Bloomin' Brands.	Yes.
Can I take unused money with me if I change plans or leave the company?	No.	Yes, it is always your money — including any investment earnings.
Do I need to report this account to the IRS?	No.	Yes, each year with your federal income tax return — but only withdrawals for non-eligible expenses are taxable (and a penalty may apply).

* Tax advantages are for federal purposes. State tax treatment may vary.

Have HSA or HRA questions?

If you have questions about your HSA or HRA, contact AccrueHealth at **1-844-643-3099**. To open your account with AccrueHealth, visit member.accrue-health.com.

Complete Health Actions

You and your enrolled dependents can complete Health Actions through the Health Rewards Program (Strive) to earn rewards toward your HRA or HSA. See pages 12-13.



Dental

You have two dental plans to choose from for 2024: the DPPO and the DHMO.* Compare costs and decide which plan is right for you and your family.

Dental plan comparison chart

	DPPO	
	In-network	Out-of-network
Calendar-year deductible (per individual)	\$50	\$100
Calendar-year deductible (family maximum)	\$150	\$300
Preventive care (exams, cleanings)	Plan pays 100%	Plan pays 80% of MRC**
Basic care (fillings, extractions, root canals, denture repairs)	Plan pays 80% after deductible	Plan pays 50% of MRC** after deductible
Major care (bridges, crowns, dentures)	Plan pays 50% after deductible	Plan pays 40% of MRC** after deductible
Benefit maximum (per calendar year)	\$1,500 per person — first year (combined in- and out-of-network coverage)	
Orthodontia (available for dependent children under age 19)	Plan pays 50% (no deductible required)	
Lifetime orthodontia (benefit maximum)	\$1,000 per person (combined in- and out-of-network coverage)	

DHMO	
In-network only	
\$0	
\$0	
Plan pays 100%	
Refer to your Patient Charge Schedule for costs and covered services***	
Refer to your Patient Charge Schedule for costs and covered services***	
No benefit maximum	
Refer to your Patient Charge Schedule for costs and covered services***	
No benefit maximum	



To learn more about your Cigna Dental plans, visit [cigna.com](https://www.cigna.com) or call **1-800-244-6224**.

Dental plan biweekly rate

	DPPO
Team Member Only	\$12.91
Team Member + Spouse	\$27.11
Team Member + Child(ren)	\$23.21
Team Member + Spouse + Child(ren)	\$37.45

	DHMO
	\$6.84
	\$12.39
	\$18.77
	\$25.98

* The DHMO dental plan election is only available to Team Members where a Cigna in-network dentist is available. The DHMO plan is not available in ID, ME, MT, NH, NM, ND, SD, VT, WV, or WY. To locate a primary care dentist, go to [cigna.com](https://www.cigna.com) and look for **Find a Doctor**. See details at [bloominbrandsbenefits.com](https://www.bloominbrandsbenefits.com).

** Cigna's Maximum Reimbursable Charge (MRC) is based on the 90th percentile, which means that nine out of 10 dentists' fee (for the same service in the same geographical area) are within Cigna's MRC. If your provider charges more than Cigna's MRC, you are responsible for paying the difference.

*** To view the schedule of fixed copays for the DHMO, visit [bloominbrandsbenefits.com](https://www.bloominbrandsbenefits.com) > **Benefits > Dental & Vision**.



Vision

Your vision plan is administered through VSP and provides coverage for vision services and supplies.

	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 \$130 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

	2024
Team Member Only	\$2.21
Team Member + Spouse	\$4.41
Team Member + Child(ren)	\$4.73
Team Member + Spouse + Child(ren)	\$7.56





Using your medical benefits

You will continue to have access to medical coverage through Blue Cross and Blue Shield of Florida, Inc. See below for tips on finding medical providers and accessing the My Health Toolkit.



My Health Toolkit

The first time you enroll, you will receive your Blue Cross and Blue Shield of Florida, Inc. (BCBSFL) medical ID card, which will come in a plain white envelope with a South Carolina return address. After that, you will have access to **My Health Toolkit** where you can find all of your medical benefits information, as well as:

- Find a doctor
- View claims status
- View your financial accounts (HSA or HRA) with AccrueHealth
- Order a new ID card and view your digital ID card
- Easily access the Health Rewards Program with Strive
- Get health tips
- Update your contact preferences
- And more!

There are two ways to access the **My Health Toolkit** member portal:



Visit

myhealthtoolkitfl.com.



Download the app on your mobile device.

Once you are on the website or have downloaded the app, select the **Register Now button** and enter your **Member ID** (from your BCBSFL ID card). Then, follow the instructions to create your profile and get started.

Check the network

Always check the network participation of your healthcare providers before your appointment. For example, Quest is the in-network laboratory for Florida, but Quest, Labcorp, or another laboratory may be in-network in a different state. Visit mybenefitenrollment.com/bloominbrands or call **1-833-578-1132**, 8 a.m. to 8 p.m. ET.

BCBSFL network codes for provider search:
FRU (Nationwide) **FJJ** (GA residents only)

Health resources for you and your family

Did you know there are a number of resources to help you and your family find the most efficient providers (cost, quality, and outcomes)? As a BCBSFL member, you can take advantage of tools and resources such as:

- **A dedicated customer service team** trained to support BBI members only.
- **Tools on My Health Toolkit (myhealthtoolkitfl.com)** to help you find providers, see ratings and reviews about them, and determine the cost of care. Visit the Find and Price Care section of the myhealthtoolkitfl.com website.
- **A mobile app** to take information with you on the go!
- **Free one-on-one coaching** from a care manager by phone or digitally through the My Health Planner app. Whether you or your enrolled dependents feel completely comfortable handling a health condition or you do not know where to begin, working with a care manager offers stability, insight, and peace of mind. Support is available to help you find quality care after a diagnosis, help manage chronic conditions, navigate the complex requirements of prior authorization, and coordinate care already being provided at home or in a facility. For more information or to get started, call your Blue Cross Care Manager (a registered nurse), Teresa, at **1-855-263-0675, ext. 40469**.
- Also, BCBSFL members can register with Blue 365 to access numerous discounts on goods, services, and memberships to help you with your lifestyle goals around fitness, personal care, healthy eating, hearing, and vision. You can choose discounts from companies like Fitbit, Garmin, Skechers, Start Hearing, Sunbasket, KIND, Fitness Your Way, and more. Once you are a BCBSFL member, sign up at Blue365Deals.com/register and start saving and achieving your goals today!



Resources

There is MORE! Remember all of the additional resources available to you and your family.

BBI medical plan enrollees

My Health Novel

My Health Novel is available in your My Health Toolkit account with BCBSFL. When you qualify and sign up, you can take advantage of in-person and virtual programs such as health coaching, nutrition guidance, digital tools, group support, and more to support you on your health journey.

Personal Coaching

Get help creating personalized programs for many lifestyle concerns. Call **1-855-838-5897, opt 2 or 3**, to get started.

Quit For Life

With the right support, quitting tobacco is possible. Work with a coach dedicated to helping you kick the habit. Call **1-866-QUIT-4-LIFE**.

Maternity Support Program

Get personalized support through all stages of pregnancy and delivery, working 1-on-1 with a maternity support nurse. Call **1-855-838-5897, opt 4** to enroll.

Teladoc

Teladoc provides 24/7 access to a board-certified physician through the convenience of phone or video consults. Visit teladoc.com.

WW (Weight Watcher's Reimagined) Digital Program

BBI pays 50% of the online program cost for you and your eligible spouse while enrolled in a BBI medical plan.

My Health Toolkit

Once enrolled in a BCBSFL medical plan, get easy access to your benefits information by downloading the **My Health Toolkit mobile app** or visiting myhealthtoolkitfl.com.

Treatment Decision Support

When you are faced with an important health decision, the Decision Support team can help. Call the dedicated BCBSFL customer service line at **1-833-578-1132** for assistance.



Visit the BBI Benefits website!

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



More resources

Check out even more resources available to you and your family.

All benefits-eligible Team Members

Employee Assistance Program (EAP)

Magellan Ascend offers confidential, face-to-face, or virtual counseling through BetterHelp. You and your household family members can receive up to four visits per issue per year, **at no cost**, with a licensed counselor — available 24/7 at **1-800-327-6754** or **magellanascend.com** or **betterhelp.com/magellan**.

Perks at Work

You can receive discounts and points toward gear at **perksatwork.com**.

Adoption Assistance

BBI provides **\$4,000 (\$6,000** for a special needs child) to Team Members for qualified adoption expenses.

NYL Will Preparation Services

Get resources and tools to help you plan and learn more about will preparation, estate planning, and funeral planning.

NYL Identity Theft Assistance

Access tools and guidance for prevention, detection, and resolution before and after identity theft.

Discounts for BBI Team Members

Bloomin' Brands offers a range of discounts to enhance your experience. These include tuition assistance programs at Johnson & Wales, Saint Leo University, and University of Phoenix. You can also enjoy discounts on tickets, goods, and services through Perks at Work and LifeMart (via EAP). Additionally, we provide mortgage discounts in collaboration with Rocket Mortgage.

To explore these benefits, visit **bloominbrandsbenefits.com > Benefits > Other Benefits > Discounts**.





Contacts

For questions about:

Your resource

Contact information

General benefits and eligibility

Resource Center

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

Navigating the health care system and your medical coverage

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

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

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

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

Visit the BBI Benefits website!

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





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) summarize important information about your medical plan options in a standard format, helping you to compare across options. The SBCs are available online at bloominbrandsbenefits.com > **Quick Links** > **View legal & plan documents**. You can request paper copies by calling the Resource Center.

Important

Information contained in this enrollment guide is provided as a general overview of the OSI Restaurant Partners, LLC (a Bloomin' Brands company) benefit plans. 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 can be found at bloominbrandsbenefits.com. You can request paper copies by calling the Resource Center.