



## Executive 2025 Benefits Summary

As an executive of Cracker Barrel Old Country Store, Inc., you are eligible for a variety of competitive benefits when certain eligibility requirements are met. The following is a brief explanation of benefits offered to you. You can find more information and a comprehensive enrollment guide on the Benefits page on The Barrel, at [www.mybenefitelections.com](http://www.mybenefitelections.com), or [totalrewards.crackerbarrel.com](http://totalrewards.crackerbarrel.com).

### Health Plans (Full-Time Employees)

- External Hires:
  - You must enroll within 30 days from your date of hire. Coverage will be effective on the date of hire.
  - If enrolling for family coverage, you must provide dependent verification for all dependents to be covered. Verification is due by the enrollment deadline date (30<sup>th</sup> day of employment).
- Internal Promotions: Your promotion may or may not result in a new enrollment period, depending on your prior position.

### Medical Plan Benefit Options (BlueCross BlueShield of Tennessee)

| Medical In-Network Coverage                                                             | Health Savings Advantage Plan                                                                 | Value Health Plan                                                                | Traditional Health Care Plan                                                     |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| <b>HSA Company Match</b><br>The company will match your contributions up to the maximum | \$500 max match for employee-only coverage<br>\$1,000 max match for all other coverage levels | N/A                                                                              | N/A                                                                              |
| <b>Annual Deductible*</b>                                                               | \$3,300 individual<br>\$6,600 family                                                          | \$4,000 individual<br>\$8,000 family                                             | \$2,800 individual<br>\$5,750 family                                             |
| <b>Annual Out-of-Pocket Maximum</b><br>Includes the deductible                          | \$6,000 individual<br>\$12,000 family                                                         | \$7,500 individual<br>\$15,000 family                                            | \$6,000 individual<br>\$12,000 family                                            |
| <b>Preventive Care</b>                                                                  | You pay \$0                                                                                   | You pay \$0                                                                      | You pay \$0                                                                      |
| <b>Office Visits</b>                                                                    | You pay 25% after deductible                                                                  | \$25 copay primary care<br>\$50 copay specialist<br>\$25 copay behavioral health | \$45 copay primary care<br>\$55 copay specialist<br>\$45 copay behavioral health |
| <b>Teladoc</b><br>(phone or online)                                                     | You pay \$55<br>(\$0 after deductible met)                                                    | You pay \$0                                                                      | You pay \$0                                                                      |
| <b>Urgent Care</b>                                                                      | 25% after deductible                                                                          | \$75                                                                             | \$60                                                                             |
| <b>Emergency Room</b><br>For emergencies only                                           | You pay 25% after deductible                                                                  | You pay 50% after deductible                                                     | \$400 per visit copay, then you pay 25%                                          |
| <b>Hospitalization</b><br>Inpatient                                                     | You pay 25% after deductible                                                                  | You pay 50% after deductible                                                     | You pay 25% after deductible and \$200 per confinement deductible                |
| <b>Type 2 Diabetes Management**</b><br>Livongo                                          | You pay \$0                                                                                   | You pay \$0                                                                      | You pay \$0                                                                      |
| <b>Lantern Surgery</b>                                                                  | You pay \$0                                                                                   | You pay \$0                                                                      | You pay \$0                                                                      |

\*Once an individual family member reaches the individual deductible, the plan pays a portion of that individual's medical expenses. If that individual reaches the individual out-of-pocket maximum, the plan pays 100% of in-network care for that individual.

#### 4<sup>th</sup> Medical Plan Benefit (Symetra Select Benefits)

The Health Basics Plan is a fixed-payment indemnity plan with a preventive care benefit. This plan pays a fixed dollar amount up to the daily, annual or frequency maximums. You can find more information about the Symetra plan at [totalrewards.crackerbarrel.com](https://totalrewards.crackerbarrel.com).

#### Prescription Drug Benefits

| Prescription Drugs<br>In-Network<br>Coverage                         | Express Scripts                  |                                  |                                                                                                              |
|----------------------------------------------------------------------|----------------------------------|----------------------------------|--------------------------------------------------------------------------------------------------------------|
|                                                                      | Health Savings<br>Advantage Plan | Value<br>Health Plan             | Traditional Health Care Plan                                                                                 |
| <b>Annual Deductible</b>                                             | Combined with medical deductible | \$150 individual<br>\$300 family | \$25 per covered person                                                                                      |
| <b>Retail 30-Day Supply</b>                                          | You pay 25%*<br>after deductible | You pay 50%*<br>after deductible | After the deductible:                                                                                        |
| <b>Generic</b>                                                       |                                  |                                  | You pay \$25                                                                                                 |
| <b>Preferred Brand</b>                                               |                                  |                                  | You pay 35% (\$45/min \$125 max)                                                                             |
| <b>Non-Preferred Brand</b>                                           | You pay 25%*<br>after deductible | You pay 50%*<br>after deductible | You pay 65% (\$100 min/\$375 max)                                                                            |
| <b>Mail Order 90-Day Supply</b>                                      |                                  |                                  | After the deductible:                                                                                        |
| <b>Generic</b>                                                       |                                  |                                  | You pay \$50                                                                                                 |
| <b>Preferred Brand</b>                                               | You pay 25%*<br>after deductible | You pay 50%*<br>after deductible | You pay 35% (\$90/min \$250 max)                                                                             |
| <b>Non-Preferred Brand</b>                                           |                                  |                                  | You pay 65% (\$200 min/\$750 max)                                                                            |
| <b>Specialty Pharmacy</b><br>Accredo Pharmacy Only<br>1-800-803-2523 | You pay 25%*<br>after deductible | You pay 50%*<br>after deductible | Tier 1 – you pay 25% (\$800 max)<br>Tier 2 – you pay 35% (\$1,050 max)<br>Tier 3 – You pay 45% (\$1,300 max) |

\* In addition to the coinsurance rate, you are required to pay the difference between a brand and generic drug if you request a brand when a generic is available (even if your doctor writes the prescription "dispense as written" or DAW).

#### Bi-weekly Cost

| Benefit                       | Employee Only | Employee + Child(ren) | Employee + Spouse | Family   |
|-------------------------------|---------------|-----------------------|-------------------|----------|
| <b>Medical</b>                |               |                       |                   |          |
| Health Savings Advantage Plan | \$53.22       | \$171.92              | \$190.75          | \$214.57 |
| Value Health Plan             | \$48.46       | \$165.42              | \$183.18          | \$204.88 |
| Traditional Health Care Plan  | \$91.20       | \$296.31              | \$324.09          | \$362.22 |
| Health Basics Plan            | \$27.05       | \$50.86               | \$67.66           | \$108.23 |
| <b>Dental</b>                 |               |                       |                   |          |
| Basic Dental                  | \$9.43        | \$24.97               | \$20.70           | \$35.35  |
| Basic Dental with Orthodontia | \$12.78       | \$28.12               | \$24.29           | \$41.16  |
| Value Dental                  | \$6.92        | \$15.72               | \$15.35           | \$27.52  |
| <b>Vision</b>                 |               |                       |                   |          |
| Davis Vision Plan             | \$1.85        | \$3.52                | \$4.08            | \$5.97   |

- A spousal surcharge of \$225 per month applies if enrolling a spouse (who is eligible for health coverage through their own employer) in a Cracker Barrel medical plan.
- If you or your spouse use tobacco or vaping products, you are considered a tobacco user and will pay a surcharge of 25% of the total medical plan cost. We have a free program to help you become tobacco free and avoid this surcharge. The medical rates above are for non-tobacco users.

#### River Health Medical Plan

- Additional offering to all employees who don't enroll in a BCBS or Symetra plan.
- Essentials plan starting at \$28 per month. Enhanced plan starting at \$30 per month (same plan as Essentials Plan, except Enhanced Plan has behavioral health benefits including prescriptions).
- These are not qualified medical plans under the Affordable Care Act. All enrollment, eligibility and payment aspects of these plans are administered directly through River Health.
- For more information, go to <https://www.river.health/group/biscuit> or call 1-888-814-6062.

## **Voluntary Benefit Plans**

### **Vision Plan (Davis Vision by MetLife)**

- Benefits under the Plan include coverage for eye exams, frames and lenses, contact lenses, and discounts for laser vision surgery.
- Network and out-of-network benefits are available.
- Frames and Contacts covered once per calendar year.

### **Dental (Delta Dental of Tennessee)**

- Preventive Treatment is payable at 100%.
- Basic Services are payable at 80% after a \$50 annual deductible per person.
- Major Services are payable at 40% or 50%, depending on the plan you choose, after a \$50 annual deductible per person.
- Maximum dental benefit is \$1,000 or \$1,500 per person per calendar year, depending on the plan you choose.
- The Dental with Orthodontia Plan also covers orthodontic expenses at 50% after a \$50 deductible with a lifetime orthodontia limit of \$1,500 per covered member.

### **Executive Life Insurance and Accidental Death & Dismemberment (The Hartford)**

- You are automatically enrolled in the Basic Life and Accidental Death & Dismemberment (AD&D) coverage at no cost to you, equal to three and a half (3.5) times your annual base salary, up to maximum limits. Coverage reductions apply beginning at age 65.
- Accidental Death pays your beneficiary an amount equal to the amount of your Basic Life Coverage. Dismemberment benefits are determined based on the type of injury sustained.

### **Optional Life Insurance for You (The Hartford)**

- You are eligible to purchase additional life coverage equal to 1, 2, 3 or 4 times your annual base salary.
- The cost of Optional Life Insurance is based upon your age and "tobacco usage status". Premiums are payroll-deducted from your payroll check after taxes.

### **Optional Life Insurance for Your Spouse (The Hartford)**

- You are eligible to purchase life coverage for your spouse in the amount of \$10,000, \$20,000 or \$30,000.
- The cost of Optional Life Insurance for your spouse is based upon your spouse's age and "tobacco usage status". Premiums are payroll-deducted from your payroll check after taxes.

### **Optional Life Insurance for Your Dependent Children (The Hartford)**

- You are eligible to purchase life coverage for your dependent children under the age of 26 in the amount of \$10,000.
- The cost of Optional Life Insurance for your children is a flat rate. Premiums are payroll-deducted from your payroll check after taxes.

### **Health Savings Account (Bank of America)**

- When you enroll in the Health Savings Advantage Medical Plan, you will also have a Health Savings Account (HSA).
- An HSA is a bank account where you can set aside pre-tax money directly from your pay. You'll receive a debit card as a convenient way to pay for eligible health expenses.
- Contributions roll over year-to-year.
- Each pay period, the company will automatically match what you contribute to your HSA (up to \$500 annually for employee only coverage, and up to \$1,000 annually for other coverage levels).

### **Flexible Spending Accounts (Chard Snyder)**

- Flexible Spending Accounts (FSA) allow eligible employees to use pre-tax dollars to pay for certain eligible out-of-pocket health care expenses.
- You do not have to enroll in a Cracker Barrel health plan to elect the FSA.
- If you enroll in the Health Savings Advantage Plan, only the Limited Healthcare FSA will be available to you for qualified dental and vision expenses.

### **Critical Illness Coverage (The Hartford)**

- This benefit provides a lump-sum payment if you are diagnosed with a covered critical illness.
- You can purchase coverage amounts of \$10,000, \$15,000, or \$20,000.
- Premiums are payroll-deducted from your payroll check after taxes.

**Identity Theft Protection/Financial Wellness (Experian)**

- This benefit can help detect, intercept and restore the misuse of personal information that puts your identity at risk.
- You may elect coverage for yourself or your family. Premiums are payroll-deducted from your payroll check after taxes.
- Additionally, the Financial Wellness helps track your credit, gives you suggestions to improve your credit, helps you set financial goals, and helps you with money management.

**Accident Insurance (The Hartford)**

- Provides a cash benefit in situations when you have an accidental injury outside the workplace.
- Available to full-time benefit-eligible employees only.

**Commuter**

- Pretax dollars set aside to offset commuting expenses.
- Covered Expenses: Mass Transit (train, bus, etc.) or Parking expenses (parking garage/parking lots).
- Available to all full-time eligible employees only.

**Tobacco Cessation (Quit For Life)**

- For more information, visit [quitnow.net](http://quitnow.net) or call 1-866-784-8454.

**Disability**

- Cracker Barrel automatically provides you with Short-term Disability (salary continuation) and Long-term Disability Insurance coverage at no cost to you if you are unable to work for extended periods of time due to an accident or sickness or as the result of a pregnancy.
- Enrollment in the Short-term and Long-term Disability is effective after 1 year of continuous employment provided you are a full-time employee and worked an average of at least 30 hours per week during the year.
- Salary continuation under the Short-term Disability provides base salary compensation according to the following schedule:

| Years of Service       | Weeks at Full Pay | Weeks at 60% Pay* |
|------------------------|-------------------|-------------------|
| 1 to less than 2 years | 2                 | 10                |
| 2 to less than 3 years | 4                 | 8                 |
| 3 to less than 4 years | 6                 | 6                 |
| 4 to less than 5 years | 8                 | 4                 |
| 5 to less than 6 years | 10                | 2                 |
| 6 or more years        | 12                | --                |

- After an employee has been disabled from work for 90 days, he/she may be eligible for Long-term Disability Benefits (The Hartford). If approved, Long-term Disability coverage provides a benefit of 50% of base pay.
- Disability benefits will be offset by any benefits you are eligible to receive under law, including Social Security, Workers Compensation, Unemployment Compensation and any state-mandated disability or paid leave laws.

\*The following provisions apply for eligible employees who are unable to work due to the employee's pregnancy:

- Employees will be eligible for Short-term Disability benefits after six (6) months of active employment.
- The 60% rate of pay described in the chart above will be payable at 75%.

**Employee Purchase Discount Program**

You will receive a 35% discount for purchases on Cracker Barrel Retail and Restaurant items on your 30<sup>th</sup> day of employment. The 30-day waiting period does not apply for employees who are hired during fiscal month 2 through fiscal month 5 (roughly September through December). The maximum amount of discount applied to any single ticket is \$35. The maximum total discount per employee is limited to \$1,000 per calendar quarter (up to \$4,000 annually). The discount may not be used on any retail items that have been marked down 70% or more. Please see the Employee Handbook for the full discount policy.

**Biscuit Perks**

Biscuit Perks is a benefits program that offers you discounts on hundreds of brands you already love. Log on and register to view discounts in your area at [biscuitperks.benefithub.com](http://biscuitperks.benefithub.com).

#### **401(k) Employee Savings Plan (Merrill Lynch)**

- The Employee Savings Plan allows you to contribute 1% to 50% of your base and bonus income through payroll deductions either pre-tax or in an after-tax Roth option and is designed for long-term savings.
- You will be eligible to participate in the 401(k) plan on your date of hire if you are at least twenty-one (21) years of age.
- The company will match \$.50 for every \$1.00 on the first 5% of your pay that you contribute. New hire employees are eligible for the company match after 3 months of employment.
- Vesting in the match occurs at 20% after each year of service. Employees are fully vested after 5 years of service.
- The IRS defines employees in 2025 with an annual compensation of \$155,000 or more in 2024 as Highly Compensated Employees (HCEs). That definition is subject to change annually. Due to required non-discrimination testing, Cracker Barrel limits HCEs to a 2% contribution rate in the 401(k) Plan and provides enrollment in the Non-Qualified Plan as another means to save funds pre-tax.
- After you begin employment, you may “roll-over” the balance from another qualified retirement plan into Cracker Barrel’s 401(k) Plan, following IRS guidelines, without any early withdrawal penalties on the amount rolled over, as long as the money goes directly from your former plan to the Cracker Barrel Plan.
- To enroll or to receive information about a rollover, contact the Merrill Lynch Retirement & Benefits Contact Center at 1-855-444-6305 or logon to [www.benefits.ml.com](http://www.benefits.ml.com).

#### **Non-Qualified Savings Plan (Merrill Lynch)**

- Employees who are members of a select group of management are eligible to enroll. The non-qualified Plan (NQP) is a tax-deferred retirement savings plan with some features similar to a 401(k).
- You can defer up to 50% of your base salary and/or up to 100% of bonuses.
- You may elect a different deferral amount for salary and for bonuses.
- The company will contribute \$.25 for every \$1.00 you defer to the plan, up to 6% of your pre-tax deferrals. The match is applied to the first 6% of combined 401(k) and NQP income deferred.
- If eligible, you will be notified and may enroll within 30 days of becoming eligible. This plan requires re-enrollment each year. Annual enrollment for this plan is typically in November to be effective January 1 of the following year.
- This Plan is considered a deferred compensation plan under the Internal Revenue Code. Your money could be at risk in the unlikely event of the Company’s insolvency.
- You may withdraw funds only for severe and unforeseeable financial hardship conditions, regardless of your age, while you are employed. Your withdrawal is subject to regular taxation, but not tax penalties.

#### **Employee Stock Purchase Plan (Shareworks by Morgan Stanley)**

- The Employee Stock Purchase Program (ESPP) allows you to purchase Cracker Barrel stock through payroll deduction.
- You will be eligible to participate in the ESPP on your date of hire if you are at least twenty-one (21) years of age.
- To enroll or make changes to your contribution amount, contact Shareworks by Morgan Stanley at [shareworks.com](http://shareworks.com) or 1-877-380-7793.

#### **Legal Support**

- Access to attorneys to help with common legal issues at no additional cost after your premium deductions.
- Attorney must be in the MetLife Legal Plan network.
- Available to all employees.

#### **Pet Insurance**

- Offered by ASPCA.
- Covers illnesses and injuries.
- Premiums paid directly to ASPCA and not through Cracker Barrel payroll deductions.
- For more information, go to <https://www.aspcapetinsurance.com/CrackerBarrel> or call 1-877-343-5314.

#### **Employee Assistance Program (The Hartford – Ability Assist)**

- Three counseling sessions with a counselor per occurrence per year.
- Spouse and dependents are covered under this plan.
- Program is through ComPsych, which has lots of online resources.
- For more information, go to [guidanceresources.com](http://guidanceresources.com) or call 1-800-964-3577.

**Cracker Barrel Cares**

- Cracker Barrel Cares is a 501(c)(3) nonprofit organization funded by employees, for employees.
- There are specific “qualifying events” that meet the criteria for a Cracker Barrel Cares grant. Documentation is required and limits apply.
- You can donate to the program by setting up a payroll deduction for either a one-time donation or an ongoing donation from each paycheck.
- For additional details or to donate to the program, <https://www.crackerbarrelcares.com>.

**Vacation**

- Executives are eligible for unlimited vacation.

**Paid Holidays**

The Cracker Barrel Home Office is closed to observe the following holidays:

|                            |                  |                          |
|----------------------------|------------------|--------------------------|
| New Year's Day             | Independence Day | Day after Thanksgiving   |
| Martin Luther King Jr. Day | Labor Day        | Christmas Eve (Half Day) |
| Memorial Day               | Thanksgiving Day | Christmas Day            |