



## Family Support and Mission Coaches 2026 Benefits Summary

As a full-time team member of Maple Street Biscuit Company, you will be 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 Benefits Enrollment Guide at [totalrewards.crackerbarrel.com](http://totalrewards.crackerbarrel.com), or in Workday under Benefits and Pay Suggested Links.

If you are a part-time team member working under 30 hours per week on average, your hours worked will be reviewed during your first 12 months to determine your eligibility for full-time benefits. Part-time team members can enroll in the River Health Essentials Plan immediately upon hire. To enroll or learn more about the Essentials Plan, go to [www.river.health/group/biscuit](http://www.river.health/group/biscuit).

### **Health Plans (Full-Time Team Members)**

- 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)**

	Health Savings Advantage Plan	Value Health Plan	Traditional Health Care Plan
<b>HSA Company Match</b> The company will match your contributions up to the maximum	\$500 max match for employee-only coverage \$1,000 max match for all other coverage levels	N/A	N/A
<b>Annual Deductible*</b>	\$3,400 individual \$6,800 family (per IRS regulations)	\$ 3,500 individual \$7,000 family	\$2,500 individual \$5,000 family
<b>Annual Out-of-Pocket Maximum</b> Includes the deductible	\$6,000 individual \$12,000 family	\$7,500 individual \$15,000 family	\$6,000 individual \$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 \$50 copay specialist \$25 copay behavioral health	\$45 copay primary care \$55 copay specialist \$45 copay behavioral health
<b>Virtual Visit - Teladoc</b> (phone or online)	You pay \$0	You pay \$0	You pay \$0
<b>Urgent Care</b>	25% after deductible	\$75	\$60
<b>Emergency Room</b> For emergencies only	You pay 25% after deductible	You pay 50% after deductible	\$400 per visit copay, then you pay 25%
<b>Hospitalization</b> Inpatient	You pay 25% after deductible	You pay 50% after deductible	You pay 25% after deductible and \$200 per confinement deductible

Type 2 Diabetes Management**	You pay \$0	You pay \$0	You pay \$0
Teladoc			
Lantern Surgery	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

#### 4<sup>th</sup> Medical Plan Benefit (The American Worker (AWP))

The Core Health 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 Pay \$0 for Preventive care and Teladoc virtual care.
- Affordable copays for office visits, x-rays and lab work.
- Daily allowances for hospital services, outpatient surgery, etc.
- Generic and brand name drugs at \$10, \$20, \$50 or less.

You can find more information about the AWP at [totalrewards.crackerbarrel.com](http://totalrewards.crackerbarrel.com).

#### Blue Cross Blue Shield Prescription Drug Benefits

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

#### Full Time Family Support Team Salaried – Bi-Weekly Cost

Benefit	Employee Only	Employee + Child(ren)	Employee + Spouse	Family
<b>Medical</b>				
Health Savings Advantage Plan	\$54.78	\$177.10	\$196.44	\$220.98
Value Health Plan	\$49.94	\$170.36	188.68	\$211.02
Traditional Health Care Plan	\$93.92	\$305.22	\$333.84	\$373.10
Core Health Plan*	\$27.04	\$50.86	\$67.66	\$108.24
<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

## Full Time Family Support Team Hourly – **Weekly Cost**

Benefit	Employee Only	Employee + Child(ren)	Employee + Spouse	Family
<b>Medical</b>				
Health Savings Advantage Plan	\$27.39	\$88.55	\$98.22	\$110.49
Value Health Plan	\$24.97	\$85.18	\$94.34	\$105.51
Traditional Health Care Plan	\$46.96	\$152.61	\$166.92	\$186.55
Core Health Plan*	\$13.52	\$25.43	\$33.83	\$54.12
<b>Dental</b>				
Basic Dental	\$4.72	\$12.49	\$10.35	\$17.68
Basic Dental with Orthodontia	\$6.39	\$14.06	\$12.14	\$20.58
Value Dental	\$3.46	\$7.86	\$7.68	\$13.76
<b>Vision</b>				
Davis Vision Plan	\$.93	\$1.76	\$2.04	\$2.99

- A spousal surcharge of \$225 per month applies if enrolling a spouse (who is eligible for health coverage through their own employer) in a medical plan.
- If you or your spouse uses 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 free programs 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 team members who don't enroll in a BCBS or The American Worker.
- 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 [www.river.health/group/biscuit](http://www.river.health/group/biscuit) or call 1-888-814-6062.

## **Additional Benefit Plans (Full-Time Team Members)**

### **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.

### **Basic 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.
- Basic Life insurance for full-time Family Support Team Members is one and a half (1.5) times your annual base salary up to age 65. 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.

### **Whole Life with Long-Term Care (Allstate)**

- You are eligible to purchase whole life coverage for yourself (up to \$150,000), your spouse (up to \$25,000) and your dependent children under the age of 26 (up to \$20,000).
- This plan includes a living benefit that can pay in the event of a catastrophic health issue (75% up to \$100,000).
- The plan also offers a long-term care benefit to assist you in the care for your loved ones (6% of monthly costs for up to 34 months).
- To enroll, ask questions or see costs, visit [www.allstatebenselect.com/crackerbarrel.com](http://www.allstatebenselect.com/crackerbarrel.com).

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

- When you enroll in the Health Savings Advantage Medical Plan, you can contribute to 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 and qualified dependent day 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 team members only.

### **Commuter (Chard Snyder)**

- 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 team members only.

### **Tobacco Cessation (Quit for Life)**

- The Company offers a free tobacco cessation program through Quit for Life to all full-time employees and spouses.
- Employees and their covered spouses who complete the no-cost Quit for Life Program by March 31 of the Plan year can avoid paying the tobacco surcharge for the rest of the Plan year and receive a refund of any tobacco surcharges paid during the current Plan year.
- For more information, visit [www.quitnow.net](http://www.quitnow.net) or call 1-866-784-8454.

### **Disability**

- Maple Street 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 Short-term Disability is effective after 6 months of continuous employment provided you are a full-time team member and work an average of at least 30 hours per week during the year.
- Enrollment in Long-term Disability is effective after 1 year of continuous employment provided you are a full-time employee and work an average of at least 30 hours per week during the year.
- Salary continuation under the Short-term Disability provides base salary compensation at 75% of base pay
- After a team member 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.

## **Additional Benefit Plans – (Full-Time and Part-Time Team Members)**

### **Purchase Discount Program**

As a Maple Street team member, you will receive a 35% discount for purchases on Maple Street Restaurant items on your 30<sup>th</sup> day of employment. The maximum discount applied to any single ticket is \$35. Please see the 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 [www.biscuitperks.benefithub.com](http://www.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. Newly hired employees are eligible for the company match after 3 months of employment.
- Vesting in the match occurs at 20% after each year of service. Team Members are fully vested after 5 years of service.
- The IRS defines employees in 2026 with an annual compensation of \$ 160,000 or more in 2025 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 Maple Street’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).

### **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 [www.shareworks.com](http://www.shareworks.com) or 1-877-380-7793.

### **Legal Support (MetLife)**

- Access to attorneys to help with common legal issues at no additional cost after your premium deductions.
- Attorneys must be in the MetLife Legal Plan network.
- The plan provides coverage for you and your eligible family members.
- Premiums are payroll-deducted from your payroll check after taxes.

### **Pet Insurance**

- Offered by ASPCA.
- Covers illnesses and injuries.
- Premiums paid directly to ASPCA and not through Maple Street payroll deductions.
- For more information, go to [www.aspcapetinsurance.com/CrackerBarrel](http://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 [www.guidanceresources.com](http://www.guidanceresources.com) or call 1-800-964-3577.

## **Paid Time Off Plans**

### **Paid Time Off (PTO)**

- Hours are on a use-or-lose aspect, unless otherwise specified by state law.
- This includes all Family Support Team and Mission Coach level team members.
- PTO must be taken in full-day increments for exempt members; one-hour increments for non-exempt members; days are assumptive of 8 hour/day.
- All PTO requests must be approved by the team member's leader.
- PTO requests of more than 10 days may require additional approval.
- PTO must be used in accordance with Cracker Barrel's policies for leave of absence/short term disability needs.
- Days/hours will reset upon anniversary date annually and will be front loaded.
- Hours/Days will not carry over, nor will they be paid out upon termination unless required by applicable state law.
- Family Support team members are eligible for PTO with pay according to the following chart.

<b>Full Time Nonexempt or Exempt</b>	
<b>Length of Employment</b>	<b>PTO Days Due</b>
1-4 years	20 days
5-9 years	25 days
10+ years	28 days

### **Paid Holidays**

The Maple Street Family Support 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

- If you are a regular part-time team member and a holiday falls on your regularly scheduled workday, you will be paid based on your average number of hours worked. If a holiday falls on your regularly scheduled day off, you will not be paid for the holiday.