



OPRY ENTERTAINMENT.



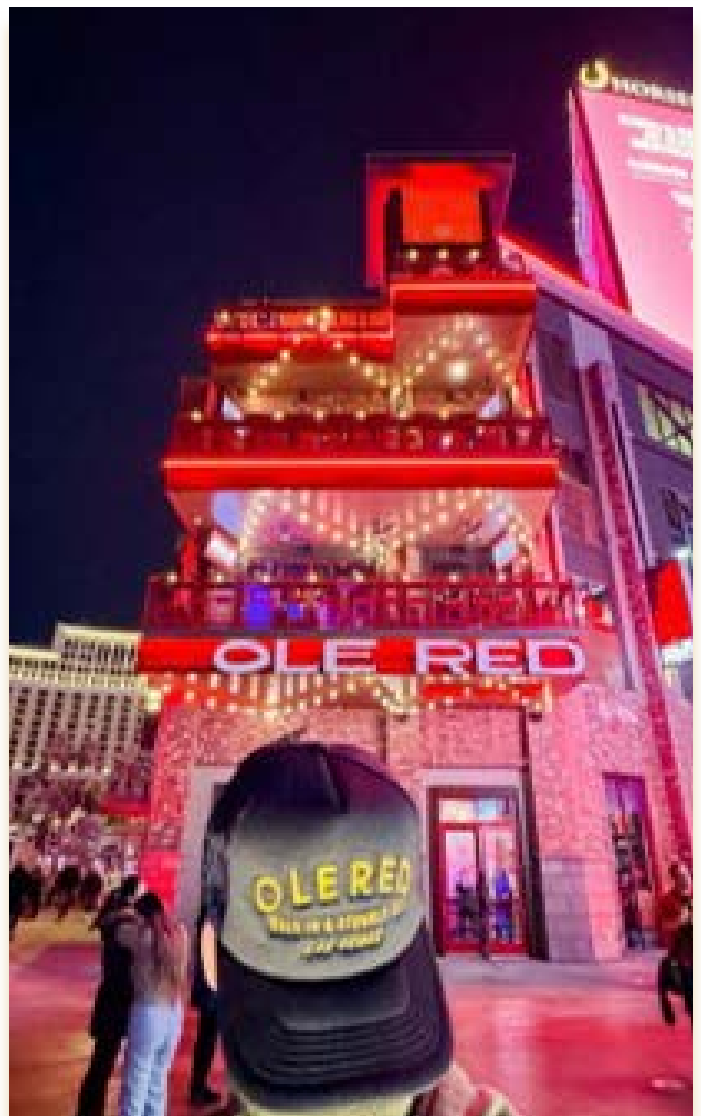
2025 EMPLOYEE BENEFITS GUIDE

FULL-TIME EMPLOYEES



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BENEFITS OVERVIEW

Ryman Hospitality Properties and Opry Entertainment Group are proud to offer a comprehensive benefits package that meets the various needs of our employees and their families. We continually review our programs to ensure that they are cost-effective and high-quality benefit options that support your physical, emotional, financial, and work-life wellbeing. The complete benefits package is briefly summarized in this guide. Plan documents are available online or by request and provide more detailed information about each program.

BENEFITS OFFERED

- Medical and Prescription Drug
- Live Well Rewards (Wellness)
- Dental
- Vision
- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- 401(k) Savings Plan
- Identity, Financial and Privacy Protection
- Life and Accidental Death & Dismemberment (AD&D)
- Disability Coverage
- Employee Assistance Program (EAP)
- Lantern (formerly SurgeryPlus) & Vanderbilt MyHealth Bundles
- PerkSpot

LOOKING FOR MORE INFORMATION ABOUT YOUR BENEFITS?

Scan the QR code to visit our Benefits website.



ELIGIBILITY

As a new hire in 2025, you and your dependents will be eligible for benefits on the first day of the month following 30 days of employment, except where noted otherwise. Eligible dependents include your spouse, certified domestic partner, children under age 26 and disabled dependents of any age. More information on eligibility can be found on page 5.

If you were recently promoted into a full-time position, your elected benefit coverage will begin on your full-time position effective date. You must enroll in coverage within 31 days of your full-time promotion.

Our benefit plan operates on a calendar year, meaning that the Plan Year begins on January 1st and ends on December 31st. Coverage elections made now will remain in place until December 31st, unless you or your eligible dependents experience a qualifying event. If you experience a qualifying event, you must contact Your Benefit Resources (YBR) within 31 days. See Enrollment Information on page 8 for more details on making changes to your benefits.

BENEFITS BASICS

Because choosing your benefits takes careful thought and planning, we encourage you to take the time to understand your choices, consider who you need to cover and determine the right coverage for you and your eligible dependents.

BENEFITS	BRIEF OVERVIEW
Medical and Prescription Drug	Three different medical plans, each including prescription drug coverage.
Live Well Reward\$	- Virtual wellness program for employees and spouses/domestic partners enrolled in a medical plan. - Earn up to \$200 in online rewards each year by completing qualifying activities focused on maintaining a healthy lifestyle.
Dental	Includes preventative treatment, major restorative treatment, orthodontia coverage.
Vision	Offers annual exam and eyewear benefits.
Healthcare FSA	- Reimburse yourself with tax-free dollars for eligible expenses not reimbursed under your medical, dental, or vision plan(s). - Requires an annual election and unused funds are forfeited.
Dependent Care FSA	- Reimburse yourself with tax-free dollars for eligible expenses for your children under age 13 and other qualifying dependents. - Requires an annual election and unused funds are forfeited.
Health Savings Account (HSA)	- Save and pay for healthcare with pre-tax dollars. To qualify for the HSA, you must enroll in the HDHP with HSA. - When you enroll in the HDHP with HSA medical plan, you will receive Employer contributions into your Health Savings Account! \$500 for single coverage, \$1,000 for family coverage. Contributions are paid quarterly and prorated for new hires during the year. - Funds from HSA roll over year after year.
Limited Use FSA	- Available if you are enrolled in the HDHP w/HSA medical plan. - Reimburse yourself with tax-free dollars for dental and vision expenses, saving your HSA for medical expenses.
401(k) Savings Plan	- Full time or part-time and on-call employees age 18 or older are eligible to participate after 30 days of employment. - Contributions are matched by the company up to 4% and can be made either before-tax or after-tax via automatic payroll deductions. - All contributions vest immediately. This means that funds in your account are 100% owned by you.
Life and AD&D Insurance	- Company-paid life and AD&D insurance equal to your base pay. - You may purchase additional Life and AD&D coverage for yourself and dependents.
Disability Coverage	Company-paid Short-Term Disability (STD) and Long-Term Disability (LTD) coverage.
Identity Protection	Company-paid identity, financial and privacy protection.
Employee Assistance Program (EAP)	Employer-sponsored program providing you and all members of your household with confidential support and resources centered around emotional wellbeing, work-life balance, and basic financial planning.
Family Planning Benefits	- Eligible after 90 days of employment. 4 weeks of Company-paid Parental Leave for childbirth and/or adoption. - Adoption & Surrogacy Assistance up to \$5,000 (\$10,000 lifetime max).
Fedlogic	Free guidance to help you and your family navigate federal and state benefits like social security, Medicare, Medicaid and the Marketplace
PerkSpot	Access to discounts on travel, tickets, gym memberships, retail and more.



ELIGIBILITY INFORMATION

The benefits described in this guide are available to full-time employees who work an average of 30 hours or more per week.

As a new hire in 2025, your elected coverage begins on the first day of the month following 30 days of employment. 401k and Family Planning benefits have separate waiting periods.

You may cover eligible dependents under the medical, prescription drug, dental, vision and life insurance benefit plans. It's important that you ensure that you are not covering an ineligible dependent. Review the following chart for details on who is eligible for coverage.

FEATURE	RULES AND REQUIREMENTS
Your Spouse	Your spouse must be your legally married spouse (within the meaning of federal tax law).
Your Certified Domestic Partner	Your current relationship must have been in effect for at least 12 months. Plus, you and your certified domestic partner must have met all of the following criteria for the preceding 12 consecutive months: • Be financially interdependent and jointly responsible for each other's common welfare; • Intend to remain in a committed relationship • Share the same living quarters and permanent address; • Not be so closely related by blood that legal marriage would be prohibited by law; • Be at least age 18 and not married to a third party; and • Have not been in a different domestic partner relationship or marriage within the last 12 months.
You or your spouse's certified domestic partner's natural or adopted children	Dependent children include: • Children up to age 26, regardless of full-time student status, residency, financial support or marital status; and • Unmarried dependent children of any age who become mentally or physically disabled before age 19, as long as the child remains incapacitated, unmarried and dependent on you for support.

- Important Notes:
- For eligible children, coverage ends on the last day of the month your child turns age 26.
 - If your dependent becomes ineligible to participate in Ryman benefit plans, you may elect to continue coverage for that dependent through COBRA. See your Summary Plan Description (SPD) for details.
 - If you cover any dependents who do not meet IRS guidelines for being a qualified tax dependent, the fair market value of the coverage for those non-qualified dependents will be included in your gross income and subject to income tax withholding and employment taxes.

VERIFICATION OF DEPENDENT ELIGIBILITY

After enrolling your dependents in coverage, you will need to verify that your covered dependent(s) are eligible to participate in our benefit plans. Dependent verification is required when you add: (1) a new dependent and (2) a dependent who was previously denied coverage through a previous Dependent Verification Service process.

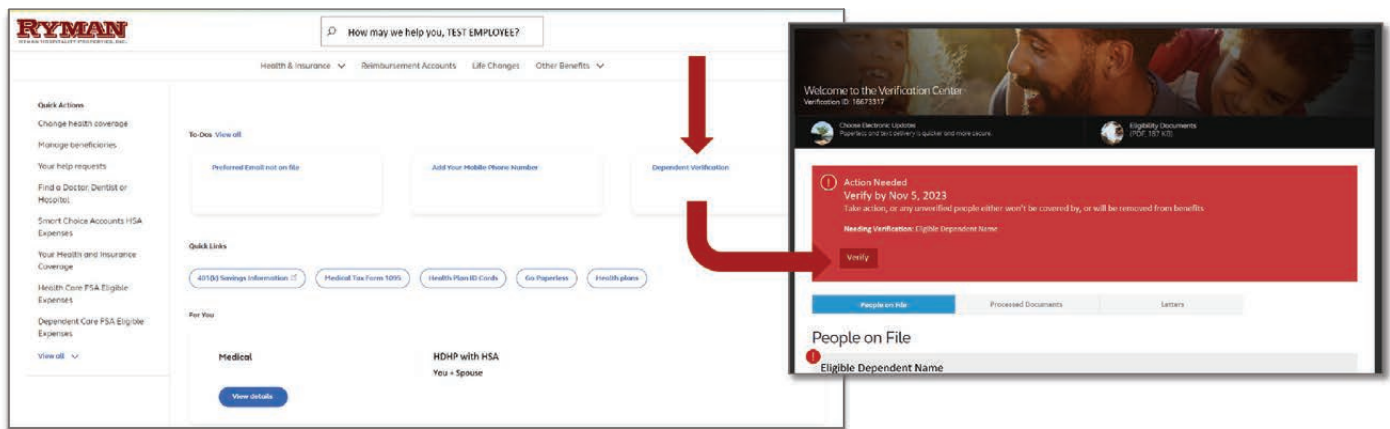
After adding your dependent(s) to coverage, make sure to submit your required verification documents within 60 days. You can submit your documents by:

- Uploading your documents through the DVS link (see screenshot below)
- Fax to: Dependent Verification Center at 1-877-965-9555 (with a cover page)
- Mail to: Dependent Verification Center, P.O. Box 1401 Lincolnshire, IL 60069-1401

Dependents are covered immediately and remain covered through the verification period. If documents are not submitted or approved during the verification window, coverage will be dropped retroactive to the original coverage effective date.

DEPENDENT VERIFICATION SERVICES (DVS) INSTRUCTIONS

- Log into your account at www.ybr.com/ryman
- Click on Dependent Verification
- Will take you to Dependent Verification Services (DVS) portal
- Click on “Verify” for each eligible dependent to upload required documentation
- List of eligibility documents can be found here



IMPUTED INCOME FOR DOMESTIC PARTNER COVERAGE

If you enroll a domestic partner or your partner's child(ren) in your medical, dental or vision plans, the Internal Revenue Service (IRS) considers the fair market value of the additional coverage as “imputed income.” Unlike health coverage for other family members, the value of the additional coverage is a taxable benefit. This means that the imputed income increases your taxable gross income for purposes of federal income and FICA taxes (Social Security and Medicare).

Federal and FICA taxes on imputed income are withheld from your paycheck on a biweekly basis.

Imputed income is separate from and in addition to your biweekly plan cost. You may have imputed income even if you do not pay a biweekly premium for your medical, dental and vision coverage. The amount of your imputed income depends on the dependents covered and plans they are enrolled in. Imputed income is reported on your annual Form W-2.

ENROLL IN YOUR BENEFITS

Your Benefits Resources (YBR) is your link to enroll in your benefits, access enrollment information, plan documents and more! Take advantage of the easy-to-use online tools to help you choose and manage your benefits. You can access information any time—24 hours a day, seven days a week—from work or home.

Make sure to complete your enrollment before your enrollment deadline.

GETTING STARTED ON YBR

Go to **ybr.com/ryman** and enter your User ID and password.

IF YOU ARE A NEW USER:

- Click on “New User?”
- Enter the last four digits of your Social Security Number (SSN) and your date of birth. Select “Log On” and follow the prompts to establish a unique User ID, password and security questions.

IF YOU FORGOT YOUR USER ID OR PASSWORD:

- Click on “Forgot User ID or Password”
- Enter the last four digits of your SSN and your date of birth, then review your hint and retry your login. Answer the security questions to create a new user ID or password , or;
- Request a new User ID or password be sent to you via email or mail.

If you need additional help, call **888.GET.YBR1 (888.438.9271)** and follow the prompts.

ENROLL AND ACCESS YOUR BENEFITS ANYTIME, ANYWHERE

Download the Alight Mobile app now



ENROLLMENT CHECKLIST

Place a check in the boxes below as you complete each item

- ☐ Review the information in this Benefits Guide carefully.
- ☐ Consider any benefit options you may have access to outside of work. See which plans make the most sense for you.
- ☐ Go to the **benefits website** for more information on your benefits including Benefit Summaries and Summary Plan Descriptions, etc.
- ☐ Remember, you must re-enroll each year into an FSA or HSA Plan.
- ☐ Enroll in your 2025 coverage at **ybr.com/ryman** or call customer service at **888.438.9271** before the deadline.
- ☐ Are you adding dependents to the plan? Complete the Dependent Verification process within 60 days (see page 6 of the benefits guide for more information).
- ☐ Visit Aon Pep website at **aonpep.voya.com** to enroll in the 401(k) plan.
- ☐ Register for FREE employee identify theft and credit monitoring coverage with Allstate at **myaip.com**.

ENROLLMENT INFORMATION

SPECIAL ENROLLMENT RIGHTS

MAKING CHANGES (Qualifying Events)

If you have certain changes in status during the plan year, such as marriage or divorce, birth or adoption of a child, death of a dependent, loss or gain of dependent status, change in spouse's employment status, or a qualified medical child support order, you may be able to make changes to your benefit elections—provided you notify Your Benefit Resources of the qualified change in status within 31 days of the event.

OPTING OUT OF COVERAGE

You may decline enrollment for yourself or your dependents (including your spouse) because you and your eligible dependents have coverage elsewhere. If you opt out of coverage and your other coverage ends or expires during the year, you can enroll in our benefit plan(s) — provided you enroll within 31 days of a qualifying event.

RYMAN HOSPITALITY PROPERTIES AND OPRY ENTERTAINMENT BENEFITS SITE



LEARN MORE ABOUT YOUR BENEFITS

Review the benefits information on the **benefits website** (scan QR code on the left of this page).

- See Your Benefits Resources at **ybr.com/ryman**. View your coverage options and costs as well as use the interactive tools available in the Enroll in Your Benefits section of the site.
- Check out YBR mobile access, which gives you access to the YBR website on your web enabled device. You can enroll, review/verify beneficiaries and more!
- You and your family can ask UMR plan advisors for help with health and benefit questions, big or small. Connect with UMR plan advisor who will take the time to get to know you and understand your needs.



MEDICAL BENEFITS



Administered by UMR

When it comes to your overall health, our comprehensive medical plans provide options and peace of mind. In case of an illness or injury, you and your eligible dependents have coverage options to manage all your healthcare needs. We have three medical plans to choose from, all using the UHC Choice Plus network.

Preventive healthcare coverage is important in protecting you and your covered dependents from the risks of unexpected illness. Establishing a relationship with an in-network Primary Care Provider (PCP), is an inexpensive (and important) review of your physical health. Small problems can potentially develop into more serious health conditions, while also leading to larger financial expenses. By identifying problems early, through regular preventive care and routine exams, often they can be treated at little cost.

	TRADITIONAL PPO \$750 / \$1,500		HDHP WITH COPAY \$2,750 / \$5,500		HDHP WITH HSA \$3,250 / \$6,500	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible	\$750 single \$1,500 family	\$1,500 single \$3,000 family	\$2,750 single \$5,500 family	\$5,500 single \$11,000 family	\$3,250 single \$6,500 family	\$6,000 single \$12,000 family
Annual Out-of-Pocket Maximum*	\$4,000 single \$8,000 family	\$8,000 single \$16,000 family	\$6,500 single \$13,000 family	\$13,000 single \$26,000 family	\$4,000 single \$8,000 family	\$10,000 single \$20,000 family
Coinsurance	80%	60%	80%	60%	90%	50% after deductible
MEDICAL SERVICES						
Primary Care Office Visit	\$25 copay	60% after deductible	\$25 copay	60% after deductible	90% after deductible	50% after deductible
Specialist Office Visit	\$40 copay	60% after deductible	\$40 copay	60% after deductible	90% after deductible	50% after deductible
Virtual Visit	\$10 copay	No Coverage	\$10 copay	No Coverage	90% after deductible	No Coverage
Urgent Care	\$50 copay	60% after deductible	\$75 copay	60% after deductible	90% after deductible	50% after deductible
Preventive Care**	100%	No Coverage	100%	No Coverage	100%	No Coverage
Fertility Services	Up to \$10,000 lifetime max	No Coverage	Up to \$10,000 lifetime max	No Coverage	Up to \$10,000 lifetime max	No Coverage
HOSPITAL CARE						
Emergency Room	\$500 copay (waived if admitted)		\$500 copay (waived if admitted)		90% after deductible	90% after deductible
Inpatient	80% after deductible	60% after deductible	80% after deductible	60% after deductible	90% after deductible	50% after deductible
Outpatient Surgery	80% after deductible	60% after deductible	80% after deductible	60% after deductible	90% after deductible	50% after deductible
Ambulance Service	80% after deductible	60% after deductible	80% after deductible	60% after deductible	90% after deductible	50% after deductible

*Annual out-of-pocket maximums include deductible, copayments, and coinsurance

**Preventive Care includes routine exams, immunizations, well baby care and mammograms

PRESCRIPTION

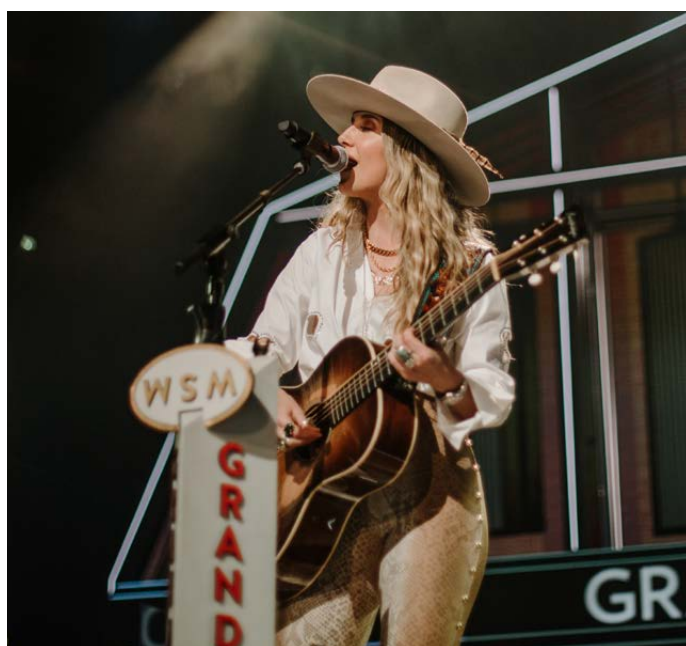
Administered by OptumRx

	TRADITIONAL PPO \$750/\$1,500		HDHP WITH COPAY \$2,750/\$5,500		HDHP WITH HSA \$3,250 / \$6,500	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
PRESCRIPTION DRUGS						
RETAIL PHARMACY COVERAGE (1-31 DAY SUPPLY)						
Generic	\$10 copay		\$10 copay		90% after deductible	
Preferred Brand	\$35 copay		\$35 copay		90% after deductible	
Non-Preferred Brand	\$70 copay		\$70 copay		90% after deductible	
Specialty Tier	\$140 copay		\$140 copay		90% after deductible	
RETAIL PHARMACY COVERAGE (32-90 DAY SUPPLY)						
Generic	\$25 copay		\$25 copay		90% after deductible	
Preferred Brand	\$87.50 copay		\$87.50 copay		90% after deductible	
Non-Preferred Brand	\$175 copay		\$175 copay		90% after deductible	
MAIL ORDER EXTENDED SUPPLY (1-90 DAY SUPPLY)						
Generic	\$25 copay		\$25 copay		90% after deductible	
Preferred Brand	\$87.50 copay		\$87.50 copay		90% after deductible	
Non-Preferred Brand	\$175 copay		\$175 copay		90% after deductible	
Fertility Drugs	\$10,000 lifetime max					

MEDICAL / PRESCRIPTION PLAN ID CARDS

You will receive a medical/prescription plan ID card if you enroll in a medical plan.

Download the OptumRx App now from the Apple® App Store or Google Play™.



WELLNESS RESOURCES



TELADOC

SAVE MONEY WITH TELADOC

When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of your home to sit in a waiting room. Now, you don't have to! A Teladoc visit lets you see and talk to a doctor from your mobile device or computer without an appointment. Most visits take about 10-15 minutes and doctors can write a prescription, if needed, that you can pick up at your local pharmacy.

The best news? In network Teladoc visits are part of your medical benefits and offered with a \$10 copay under Traditional and HDHP with Copay plans. The cost is approximately \$54 with HDHP with HSA plan, but once the medical deductible is met there is no copay.

24/7 doctor visits via phone or mobile app

Teladoc gives you round-the-clock access to U.S. board-certified doctors, from home or on the go. Call or connect online or using the Teladoc mobile app for affordable medical care, when you need it.

Download the Teladoc App | 1-800-Teladoc | teladoc.com

LIVE WELL REWARDS PROGRAM

If you are covered under one of the medical plans, you are eligible to participate in UMR's Live Well Reward\$ Wellness Program. Through the program, you can take a more active role in your personal health and well-being. Use UMR's helpful resources to find new ways to address your personal health risks and learn healthy strategies you can use in your daily life to help you and your family stay on track. In addition to keeping your health in focus, you also have the opportunity to earn financial incentives when you complete specific action items related to your overall health and well-being. Participation is completely voluntary, and all resources are available at no cost to you.

You can earn up to a maximum of up to \$200 in online rewards per employee and/or covered spouse/domestic partner.

Some of the eligible action items include:

- Get your preventive care annual wellness checkup (\$100; must be completed before 11/1/2025)
- Teladoc registration or updating your health questionnaire (\$25)
- Completing a specific Live Well Action Plan (\$50 each, up to \$100 maximum; multiple to choose from)
- Completing a UMR Wellness Challenge (\$50 each, up to \$100 maximum; multiple to choose from)
- Logging your exercise 12 times in a month (\$20 per completed month)
- Get your preventive care flu-shot (\$50)

Log into the Live Well Reward\$ portal or visit our benefits website. Complete your wellness actions by 12/31/2025 to earn your rewards!

UMR Plan Advisor



UMR PLAN ADVISORS ARE READY TO CONNECT AND GUIDE YOU TO BETTER HEALTH.

A Plan Advisor is available to help you manage your physical health - from routine preventive care to complex ongoing medical conditions. Plan Advisors partner with you so you feel more confident in the decisions you make about your health, and comforted by the steps you're taking to get there.

UMR's Plan Advisors can help you:

- Look into a recent medical claim to make sure it was paid correctly
- Check to see what your out-of-pocket costs are for services
- See how much you have paid of your individual or family deductible
- Understand all programs and services available to you and your covered dependents

CONNECTING YOU TO THE CARE YOU NEED

Whether your question is common or complex, we make it easier for you to get answers by ensuring you have the information you need.

KEEPING IT REAL

Your plan advisor is an actual person who's focused on serving you, equipped with knowledge and options to support and anticipate your unique needs and goals.

WE'RE IN IT WITH YOU

If you need something that's out of our reach, we'll connect you to the resources you need - and we'll even stay on the call as long as you need.

FINDING THE RIGHT FIT IS IMPORTANT - WE CAN HELP

We'll match you to high quality health care providers and the highest level of benefits - right where you live - to avoid paying more than you need to. We can schedule appointments with providers and identify possible health screenings or preventive care.

KNOW YOUR COVERAGE - AND COSTS

Your plan advisor is ready to go over your benefit details with you or connect you to the right person to find the answer you need, so you won't be caught by surprise.



ONGOING CONDITION CARE

ADMINISTERED BY UMR



BEGIN LIVING YOUR BEST LIFE

We have teamed with UMR's Ongoing Condition CARE program to offer expert resources and one-on-one support to help those with ongoing conditions gain control of their health. It starts with being open to moving in a positive direction and working to make small, but important, changes to your daily routine. This program is open to medical plan members with one or more of the following conditions:

- **Neuromuscular/Autoimmune Disorders:**

ALS, Multiple Sclerosis, Myasthenia Gravis, Rheumatoid Arthritis

- **Cardiovascular Disorders:**

Hypertension, Heart Failure, CAD

- **Respiratory Disorders:**

Asthma, COPD

- **Behavioral Health Disorders:**

Depression, Generalized Anxiety Disorder*

- **Blood Disorders:**

HIV/AIDS, Hepatitis C, Sickle Cell Anemia

- **Gastrointestinal Disorders:**

Ulcerative Colitis, Crohn's Disease

- **Oncology:**

Breast, Prostate, Colorectal or Lung Cancers

- **Endocrine Disorders:**

Diabetes (Type 1 and Type 2)

- **Genitourinary Disorders:**

Chronic Kidney Disease (CKD)

* Generalized Anxiety Disorder is managed when it occurs along with other qualified conditions.

BENEFITS OF BETTER HEALTH

When you are able to manage your symptoms, you can:

- Feel better and do more
- Avoid flare-ups that lead to ER visits
- Cut your out-of-pocket costs
- Reduce or eliminate the need for medications
- Lower your long-term health risks

CARE ON THE GO

The CARE app, powered by Vivify Health, allows you to connect with your CARE nurse through your mobile device. With the app, you can:

- Send and receive text messages securely with your CARE nurse if you're enrolled in a clinical pathway.
- Access educational articles and videos about general wellness or specific conditions.
- Track blood pressure, blood sugar, oxygen level and weight. This information is shared with your CARE nurse to help manage your condition (when appropriate).
- Understand your provider's treatment plan or instructions for care – and help you stick to it

LOOKING FOR HELP?

Log in to **umr.com** and select Contact us to send an email to the Ongoing Condition CARE program.

You can call us toll-free at 800-207-3172.

**Download the
UMR mobile app
for care on the go!**



COMMONLY COVERED PROCEDURES

If you are covered under one of the medical plans, you automatically have access to Lantern, with no additional enrollment required! Lantern provides cost-saving solutions for over 1,500 planned surgical procedures, utilizing their nationwide network of over 400 top-quality hospitals, surgery centers, and surgeons. The best part is that your planned surgery will cost little to no out-of-pocket expenses!

Some of the more commonly covered procedures are listed below:

JOINT REPLACEMENT

- Ankle
- Elbow
- Hip
- Wrist
- Knee
- Shoulder

EAR, NOSE & THROAT

- Ear Tube Insertion
- Ear Infection
- Septoplasty
- Sinuplasty

GYNECOLOGY (GYN)

- Bladder Repair
- Hysteroscopy
- Hysterectomy
- Myomectomy
- Ovary Removal

SPINE

- Artificial Disk Replacement
- Laminotomy
- Cervical Disk Fusion
- Laminectomy
- Lumbar Interbody Fusion
- 360 Spinal Fusion

CARDIAC

- Cardiac Ablation
- Defibrillator Implant
- Pacemaker Implant
- Pacemaker Replacement
- Valve Surgery

GENERAL SURGERY

- Hernia Repair
- Thyroidectomy
- Gallbladder removal

ORTHOPEDIC

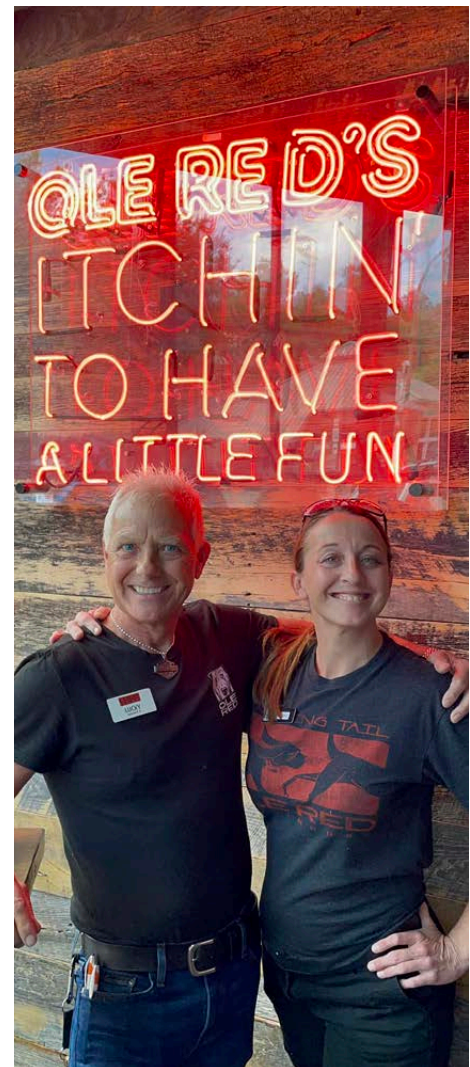
- Arthroscopy (Knee/Shoulder)
- Bunionectomy
- Carpal Tunnel Release
- Ligament Repair
- Rotator Cuff Repair

SPORTS MEDICINE

- Cervical Epidural
- Lumbar Epidural Steroid
- Stellate Ganglion Block
- Epidural Blood Patch

GASTROENTEROLOGY (GI)

- Colonoscopy
- Upper GI Endoscopy



MYHEALTH BUNDLES

Exceptional care. Better experience. Low to no costs.

Vanderbilt's MyHealth Bundles provides you and your dependents enrolled on one of our medical plans with an enhanced healthcare experience through Vanderbilt Health's world-class facilities in Nashville and throughout Middle Tennessee. From concierge-level service and streamlined care to low or no out-of-pocket costs, you will notice the difference from the very start of your journey. By completely reimagining your care experience and "bundling" all of the services you need to succeed with common or complex health conditions, this new approach provides additional support and improves convenience to ease many of the worries often associated with healthcare.

To access MyHealth Bundles, employees do not need to opt in during open enrollment but are required to enroll in the program with a patient navigator at (615) 936-BNDL before they make an appointment related to their care.

	MyMaternityHealth - <i>Pre-natal and Post-natal Care</i> Includes everything required to take care of women from the inception of their pregnancy through their delivery and the first three months as a new mom.
	MyHearingHealth - <i>Cochlear Implant Surgery (Severe Hearing Loss)</i> Provides patients with simplified access to cochlear implant surgery, streamlining the entire process to a single-day experience in many cases.
	MySpineHealth - <i>Select Spine Surgeries</i> Includes coverage of three common spine procedures: cervical fusion, lumbar fusion and lumbar laminectomy.
	MyOrthoHealth - <i>Orthopaedic Care</i> Includes coverage of osteoarthritis of the hip and knee, hip and knee replacement procedures, and shoulder pain not caused by accident or injury.
	MyWeightLossHealth - <i>Surgical Weight Loss</i> Provides patients with a streamlined and personalized approach to surgical weight loss.
	MyUrologyHealth - <i>Kidney Stone Treatment</i> Coordinates all the services needed to treat current kidney stones successfully and prevent them from returning.
	MyRecoveryHealth - <i>Substance Use Disorder Support</i> Includes support for substance use disorder that aims to provide the right level of care to each individual.
	MyHeartHealth - <i>Cardiac Arrhythmia</i> Addresses cardiac arrhythmia, including atrial fibrillation, atrial flutter and supraventricular tachycardia. This bundle includes two electrophysiology (EP) procedures—catheter ablation and left atrial appendage closure.
	MyOncologyHealth* - <i>Personalized Oncology Support</i> Relieves some of the burden and uncertainty of a cancer diagnosis by offering education and expert support from a registered nurse navigator. The navigator will provide education on topics such as diet and nutrition, chemotherapy, mental health, and disease-specific support for common cancers. * Traditional insurance coverage applies to MyOncologyHealth. Patients will be responsible for paying all out-of-pocket costs.

Visit [Ryman.myvanderbilthealthbenefits.com](https://ryman.myvanderbilthealthbenefits.com) or call **615.936.2635** to learn more.

DENTAL BENEFITS



Administered by Delta Dental of Tennessee

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with our dental benefit plan. Your dental plan provides several levels of coverage: preventive services, basic routine services, major restorative services and orthodontia coverage as described below.

SERVICES	IN-NETWORK AND OUT-OF-NETWORK PPO
Annual Deductible	\$50 single \$100 family No deductible for preventive treatment
Annual Benefit Maximum	\$1,200 per person
Preventive Dental Services (cleanings, exams, x-rays)	100%; no deductible
Basic Dental Services (fillings, extractions, oral surgery)	80%
Major Dental Services (crowns, bridges*, implants* dentures* and night guard - every 3 years)	50%
Orthodontia Services	50%, after deductible \$1,500 lifetime maximum per person
Temporomandibular Joint Dysfunction (TMJ) Craniomandibular Disorder (CMD) Individual Maximum	50% coinsurance after deductible; Combined \$750 lifetime maximum

*Bridges, dentures and implants will be covered after 12 months of continuous participation in the plan.

Delta Dental Insurance On The Go

Access your insurance and the tools to help you use it anytime, anywhere with the Delta Dental Mobile App. To download the app to your device, visit the App Store (Apple) or Google Play (Android) or use your phone's QR code Reader to scan the code:



NEED MORE INFO?

For more information on your dental benefits:

Visit Online: www.deltadentaltn.com

Email Us: information@deltadentaltn.com

Call: **800.223.3104**

Hours: Monday-Friday: 7am-5pm CST



VISION BENEFITS



VSP Administered by DeltaVision

Regular eye examinations can not only determine your need for corrective eyewear but also may detect general health problems in their earliest stages. Protection for the eyes should be a major concern to everyone.

VSP		
SERVICE	IN-NETWORK (ANY VSP PROVIDER)	OUT-OF-NETWORK
Eye Exam once every 12 months	\$10 copay; covered in full	up to \$45
Digital Retinal Imaging once every 12 months	No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam	Not Covered
LENSES (ONCE EVERY 12 MONTHS)		
Single Vision Lenses	\$10 copay; covered in full	up to \$30
Lined Bifocal Lenses	\$10 copay; covered in full	up to \$50
Lined Trifocal Lenses	\$10 copay; covered in full	up to \$65
Progressive Lenses	\$95-\$105 copay; covered in full	up to \$50
Frames once every 24 months	\$10 Copay; \$150 allowance for wide selection of frames 20% savings on amount over allowance \$80 Costco frame allowance	up to \$70
Contact Lenses once every 12 months	\$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation)	up to \$105
Laser Vision Correction	Discounted services	Not Covered



VSP VISION CARE APP!

Scan the QR code to download the VSP Vision Care App from the Apple App or Google Play Stores. Get instant access to your benefit coverage, Member ID Card, Exclusive Member Extras, and more.



NEED MORE INFO?

For more information on your vision benefits:

Visit Online: www.vsp.com

Call: **800.877.7195**

Hours: Monday-Friday: 8am-7pm CST



FLEXIBLE SPENDING ACCOUNTS

TO SAVE FOR HEALTHCARE AND DEPENDENT CARE EXPENSES

We want to be sure that you have ways to save on the benefits you need to live a healthy life. Don't miss out on the chance to get extra tax savings by participating in flexible spending accounts (FSAs) and save for eligible healthcare and dependent care expenses through convenient payroll deductions.

Each year, you specify how much of your pay you want to have deducted from your paycheck and deposited into your FSA account to cover eligible expenses. You can contribute any amount from \$50 to \$3,200 in your Healthcare FSA and up to \$5,000 in your Dependent Care account each year. Be sure to use the Spending Account Estimator available at ybr.com/ryman to help calculate your anticipated out-of-pocket expenses to determine if you should participate in a Healthcare and/or Dependent Care FSA.

Healthcare Spending Limit: \$3,200

Dependent Care Spending Limit: \$5,000

Don't forget — you must enroll in these accounts every year! Your participation in an FSA does not carry over from year to year. The IRS requires that you re-enroll each year.

For more information on FSA, HSA, and LUFSA, contact Your Benefits Resources at **888.GET.YBR1 (888.438.9271)** or go online to ybr.com/ryman.

DIFFERENT TYPES OF FLEXIBLE SPENDING ACCOUNTS (FSA):

1. Healthcare FSA: This is ONLY available for the Traditional and HDHP with Copay plans. Use your Healthcare FSA to reimburse yourself for healthcare expenses that are not paid for by your medical, dental, or vision plans (including deductibles, copayments, etc.) You can also use your Healthcare FSA to pay for prescription, contacts and eyeglasses that are not covered by your vision plan, as well as many over-the-counter medical supplies and diabetic products. You are able to carryover up to \$640* of your healthcare FSA balance remaining at the end of the year.
2. Dependent Care FSA: Use your Dependent Care FSA for eligible dependent care expenses, including before-and-after-school care, child day care fees and day care fees for an elderly or a disabled dependent. Any unused funds at the end of the year will be forfeited. So plan carefully when making your annual election.

*Indicates projected 2025 maximum rollover amount

How To Receive Reimbursements from Your FSA

- Your Healthcare Smart-Choice Account MasterCard. You'll receive a Smart-Choice MasterCard debit card.
- Online or Paper Claims. To request reimbursements for eligible expenses not reimbursed through your Smart-Choice Accounts MasterCard, go to ybr.com/ryman and select the **Smart-Choice Accounts** link. You can upload claims and documentation online or print and mail a completed reimbursement request form or complete the form online and fax it to the number provided on the form.



HEALTH SAVINGS ACCOUNTS

HIGH DEDUCTIBLE HEALTH PLAN (HDHP) AND HEALTH SAVINGS ACCOUNTS (HSA)

Unlike traditional health insurance plans, a high deductible health plan (HDHP) is a type of health insurance plan that typically features higher deductibles and with lower coverage premiums. This means that you'll have higher out-of-pocket costs when you need medical care, but will be paying less out of your paycheck for coverage. The HDHP w/HSA medical plan can be ideal for employees and their eligible dependents who stay current with their regular preventive care and make occasional visits to their doctors for injuries or illness.

If you enroll in our HDHP w/HSA medical plan, you're eligible to contribute to a health savings account (HSA). An HSA can be used to offset the cost of your deductibles, as well as prescription medications or other medical expenses.

Here are some advantages of an HSA:

- (1) Contribute pretax dollars; (2) Grow your account tax-free; (3) Use your HSA to pay for eligible healthcare expenses tax-free.
- Use it today or save for tomorrow. The balance rolls over year after year so you can let it grow over time.
- You own the money in the HSA. If you choose to leave the company or switch healthcare plans, you keep the money.
- It's convenient. Contributions are automatically deducted from your paycheck and deposited into your HSA Bank Account. You can change or stop contributions at any time.
- Invest your HSA funds. Once your savings reach a certain threshold, you are eligible to invest your HSA dollars and grow your balance.

EMPLOYER CONTRIBUTIONS!

- \$500 single/\$1,000 family
- Paid quarterly and will be prorated for new hires during the year
- HSA Annual Max Contribution Limits:
 - **Single: \$4,300 + \$1,000 catchup (for ages 55+)**
 - **Family: \$8,550 + \$1,000 catchup (for ages 55+)**

Note:

- HSA max contribution limits include employee and employer contributions.
- In order to contribute to the HSA, you must be enrolled in our HDHP with HSA, not covered under a secondary health insurance plan, not enrolled in Medicare, and not another person's tax dependent.

How To Receive Reimbursements from Your HSA

- Your Health Saving Smart Choice Account MasterCard.
- Online. To request reimbursements for eligible expenses not reimbursed through your Smart Choice Account MasterCard, go to ybr.com/ryman and select the **Smart-Choice Account** link.

LIMITED USE FSA:

Available only for HDHP with HSA participants. A Limited Use account is a FSA that allows you to set aside pretax dollars for dental and vision expenses. Eliminates your need to use your HSA funds for dental and vision expenses, leaving you with more money in your HSA to use for regular medical expenses. You can contribute any amount from \$50 to \$3,200 to your Limited Use FSA.

Why is using a Limited Use FSA beneficial to you? IRS rules do not allow you to contribute to an HSA if you are covered by a nonqualifying health plan, including a general purpose Health FSA. By limiting FSA reimbursements to dental and vision expenses you remain eligible to participate in both a Limited Use FSA and an HSA. Participating in both plans allows you to maximize your savings and tax benefits.

LIFE INSURANCE

Insured by New York Life



LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

COMPANY-PROVIDED BASIC LIFE INSURANCE

In the event of your death, we will provide a basic life insurance benefit equal to your annual base pay rounded to the next \$1,000, with a minimum \$10,000 benefit. If you continue working beyond age 65, your basic life insurance coverage will be reduced.

COMPANY-PROVIDED BASIC ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE

If you should die or suffer dismemberment as a result of an accident, this plan pays an additional benefit equal to your base pay rounded to the next \$1,000, with a minimum \$10,000 benefit. This coverage also includes benefits for a coma or paralysis resulting from an accident, and for loss of use of sight, speech, or hearing due to an accident.

OPTIONAL LIFE AND AD&D INSURANCE

You may purchase Life and AD&D insurance beyond the company provided coverage. The plan maximum for basic and optional insurance is \$1.0 million.

- Life Insurance — you can elect coverage equal to one or up to six times your regular base pay. You must provide Evidence of Insurability (EOI) for coverage over \$500,000.
- AD&D Insurance — you can elect coverage equal to one or up to six times your regular base pay. You may choose to cover yourself or your entire family.

VOLUNTARY DEPENDENT LIFE INSURANCE COVERAGE		
	SPOUSE/DOMESTIC PARTNER BENEFIT OPTIONS	CHILD(REN) BENEFIT OPTIONS
This coverage pays benefits to you if your spouse/domestic partner or dependent child(ren) dies while covered by the plan.	\$10,000	\$5,000
	\$25,000	\$10,000
	\$50,000	\$15,000
	\$75,000*	\$20,000
	\$100,00*	\$25,000

*Evidence of Insurability (EOI) is required.

How to File a Life Insurance Claim

Call the YBR Service Center at **888.438.9271**. The YBR Service Center will start the claim process and provide you with contact information for applicable life insurance and AD&D claims.



DISABILITY COVERAGE

Insured by New York Life

The company provides both Short-Term Disability (STD) and Long-Term Disability (LTD) coverage to all benefits-eligible employees through New York Life. If approved, disability coverage provides an income to help with living expenses if you become disabled.

SHORT-TERM DISABILITY

Ryman Hospitality Properties provides eligible full-time employees (after six months of full-time consecutive service) with STD coverage of 60% of your regular base pay for 25 weeks (after a seven-consecutive-calendar-day waiting period.)

LONG-TERM DISABILITY

Ryman Hospitality Properties provides LTD coverage of 60% of your regular base pay per month up to \$10,000 (after a 180 calendar day waiting period).

If you are disabled for more than 26 weeks, your employment could terminate and you may be eligible for benefits under COBRA.



LEAVE OF ABSENCE

Administered by New York Life

The **Family Medical Leave Act (FMLA)** requires covered employers to provide up to 12 weeks of unpaid, jobprotected leave to “eligible” employees for certain family and medical reasons. Employees are eligible after 12 months of employment and must have worked 1,250 hours during the previous 12 months.

REASONS FOR TAKING LEAVE:

- For the birth and care of the newborn child of the employee;
- For placement of a son or daughter with the employee for adoption or foster care;
- To care for an immediate family member (spouse, child or parent) with a serious health condition;
- For the employee when the employee is unable to work because of a serious health condition;
- The care of a wounded service member with a serious injury or illness incurred in the line of duty to whom the employee is a spouse, son, daughter, parent, or nearest blood relative (hereinafter referred to as a “service member caregiver on leave”); or
- Due to a qualifying exigency resulting from the employee’s spouse, son, daughter or parent being on active duty or called to duty status.

In certain cases, this leave may be taken on an intermittent basis rather than all at once, or the employee may work a part-time schedule.

PERSONAL LEAVE OF ABSENCE

In situations where an employee is not eligible for FMLA, an unpaid personal leave of absence may be requested. A personal leave of absence may be granted for important and urgent personal needs with department and human resources approval. Employees may only apply for a personal leave of absence once per rolling 12-month period and each request will be evaluated on a case-by-case basis. The maximum duration for a personal leave of absence is 30 days (60 days with approval from department leader). Extensions beyond 60 days will not be granted. If you need to request a personal leave of absence, contact your department leader and consult with Human Resources.

How to Request a Leave or File a Claim

Contact New York Life:

Toll free number: **888.842.4462**

Website: **mynylgbs.com**



PAID PARENTAL LEAVE AND ADOPTION/SURROGACY ASSISTANCE

Our Total Rewards philosophy is built around offering benefits that support you and your family's total well-being. In addition to our comprehensive health and wellness offerings, we are pleased to provide Paid Parental Leave and Adoption & Surrogacy Assistance to eligible full-time employees looking to expand their family through childbirth, adoption, or surrogacy.

PAID PARENTAL LEAVE

The company provides four weeks of company-paid parental leave as a result of childbirth or adoption to eligible full-time employees who have been employed at the company for at least 90 days.

This benefit will apply to birthing and non-birthing parents who welcome a child into their family. Your paid parental leave must be taken in 1 week increments and must be used within 12 months from the date of birth/adoption.

Eligible birth mothers can request to schedule their 4 weeks of paid parental leave to be taken prior to and/or after any short-term disability benefits as long as paid parental leave is taken in a minimum of 1-week increments

All eligible employees (including eligible non-birth parents) must follow the normal Leave of Absence process and contact New York Life to file their Paid Parental Leave claim.

Online: www.myNYGLBS.com

Phone: For English, (888) 842-4462;
For Spanish, (866) 562-8421

ADOPTION & SURROGACY ASSISTANCE

Ryman Hospitality Properties and Opry Entertainment Group will provide reimbursement for certain expenses pertaining to adoption & surrogacy, up to \$5,000 per qualifying event. This benefit will be available to eligible full-time employees who have been employed at the company for at least 90 days.

The benefit limit is two (2) children per lifetime per Eligible Employee/Family, regardless of any combination of adoption and/or surrogacy. If both parents are Eligible Employees, the maximum benefit and lifetime limit of two (2) children applies to the combined expenses of both parents.

You can submit your reimbursement form and documentation to:

Electronic Delivery (email):
totalrewards@rymanhp.com

Physical Delivery (mail):
Ryman Hospitality Properties, Inc.
Attn: Total Rewards Department
One Gaylord Drive
Nashville, Tennessee 37214

For additional questions and information on either of these benefits, please contact the Ryman Hospitality Total Rewards department at totalrewards@rymanhp.com.

IDENTITY, FINANCIAL AND PRIVACY PROTECTION



Administered by Allstate

ALLSTATE IDENTITY PROTECTION PRO+ CYBER

Enjoy peace of mind, financial reassurance and time saving expertise with your own identity protection plan. Allstate Identity Protection Pro+ Cyber. Ryman Hospitality Properties has paid for you to receive a comprehensive identity protection plan. You can add family members to this plan for a low biweekly cost.

Activate your free account today!

For more information, login to **myaip.com** or call **800.789.2720**.



FEDLOGIC



YOUR VERY OWN PERSONAL NAVIGATOR

All employees have free unlimited access to FEDlogic with no additional enrollment required. FEDlogic provides you and your household members with free consultation on all state and federal benefit programs (Social Security, Medicare, Medicaid, etc.).

REASONS TO CONTACT FEDLOGIC

- You need assistance navigating Medicare and/or Social Security Benefits
- You or a household family member have been diagnosed with a major illness
- You have a child with a disability or born prematurely
- You have lost a spouse
- You need assistance navigating Medicaid, Marketplace, or COBRA
- You need help exploring alternative healthcare avenues based on your income
- You are currently on dialysis (ESRD)

877-837-4196 | fedlogicgroup.com | services@fedlogicgroup.com

Employees are now required to use an access code when using site.
Please add - Employee Access Code **ryma21**



401(k) SAVINGS PLAN

Administered by Aon PEP/Voya

Aon Consulting, Inc. maintains the Aon Pooled Employer Plan (Aon PEP) for the company. The 401(K) plan provides you access to the latest plan features and an enhanced participant experience. Voya Financial® serves as the recordkeeper for the Aon PEP. Under Voya, you have a variety of retirement savings features available to explore, including online planning tools and resources, an interactive website, and a mobile app for on-the-go account management. The Aon PEP gives you the ability to save and invest for your retirement effectively.

Eligibility: Full-time or part-time and on-call employees age 18 or older with at least 30 days of employment.

- The company matches 100% of your before-tax contributions up to the first 4% you contribute. That's like free money to help your account grow faster!
- Employees can contribute up to 70% of their pay to their 401(k) Savings Plan account.
- Choose from a variety of investment options.
- Contribution Options
 - Before-tax: You can contribute money before it is taxed, and pay taxes at withdrawal.
 - Roth and After-tax: You can contribute after-tax dollars and receive tax-free withdrawals.
- Make contributions via automatic payroll deductions.

ENROLL OR ACCESS YOUR ACCOUNT

You can access your retirement account at aonpep.voya.com or through the Voya Retire mobile app. If you prefer to speak directly with a representative, you can contact the Aon PEP Retirement Service Center at 833.AON.9PEP (833.266.9737). Representatives are available weekdays from 8:00 a.m. to 8:00 p.m., Eastern Time, excluding stock market holidays.



IMPROVE YOUR FINANCIAL WELLBEING

Access the Aon PEP Information Center at myaonpep.com/learn to find webinars, tools, and resources to improve your financial wellbeing. The site provides easy access to unique Aon PEP educational programs, your Aon PEP account, and Voya's extensive library of content.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

RESOURCES FOR LIVING EAP WEBSITE (EAP)

Resources for Living is an employer sponsored program available at no cost to you and all members of your household. That includes dependent children up to age 26 whether or not they live at home. Services are confidential and available 24 hours a day, 7 days a week. Here you can access educational resources on a variety of topics, including:

DAILY LIFE ASSISTANCE

Resources for Living can give you personalized guidance and help you find resources for:

- Child care, parenting, adoption
- Caregiver support
- Special needs
- Care for older adults
- Pet care

EMOTIONAL WELL BEING SUPPORT

You can access up to 6 free counseling sessions per issue each year. Counseling sessions can cover a wide range of issues including:

- Relationship support
- Stress management
- Grief and loss
- Work/life balance

FINANCIAL SERVICES

Call for a free 30-minute consultation for each financial topic related to:

- Budgeting
- Retirement or other financial planning
- Mortgages and refinancing
- Credit and debt issues
- College funding
- Tax and IRS questions and preparation

LEGAL SERVICES

Free 30 minute consultation with a participating attorney for each new legal topic related to:

- Family
- Criminal law
- Divorce
- Mediation services
- Real estate transactions

TALKSPACE

Sometimes reaching out for emotional support can feel like one more thing to add to your to-do list. Chat therapy lets you work with a counselor anytime and just about anywhere. It's as easy as 1-2-3 to get started. Simply:

- Complete a short online questionnaire to be matched with a therapist
- Connect with your counselor virtually

ONLINE RESOURCES

Your member website offers a full range of tools and resources to help with emotional wellbeing, work/life balance and more. You'll find articles and self assessments, video resources, live and recorded webinars. Other offers found online.

Resources for Living EAP Website

To access services:

Website: www.resourcesforliving.com

User Name: **RHP** | Password: **RHP**

Phone: **800.272.7252**

Also available in Spanish

Resources for Living Mobile App

You can find a helping hand wherever you go. You can access your EAP Benefits anytime or anywhere. The app is available from the Apple App Store or Google Play store, search for "Resources for Living" to install.

PERKSPOT DISCOUNT PROGRAM



What is the Ryman Hospitality Properties Discount Program?

Your Ryman Hospitality Properties Discount Program is a one-stop-shop for thousands of exclusivediscounts in more than 25 different categories. That means there's something for everyone!

How to Navigate Your Discount Program

Perks Near You

Located in the New & Featured section, Perks Near You allows you to use your location to see all of the discounts near you, wherever you are! Discounts can be filtered by category and distance.

Personalized Savings

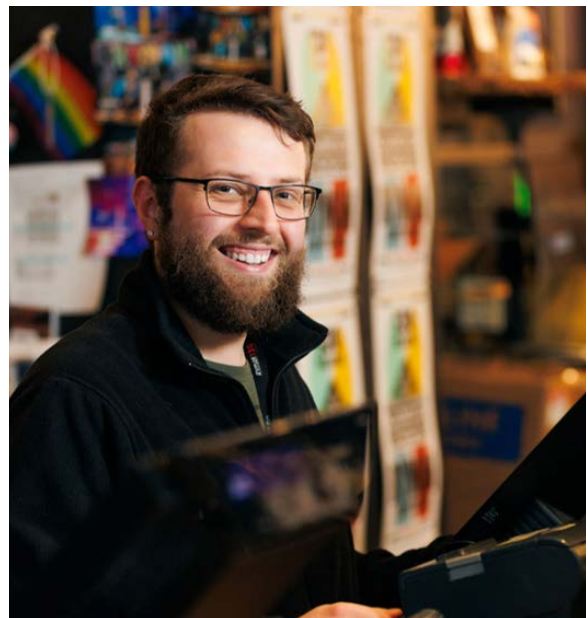
Let us know what you're interested in so we can ensure you're seeing the perks you'll most enjoy, front and center on your Discount Program Home Page.

Brands Fit For Every Lifestyle

Looking for something specific? The Brands page, found in the Popular Perks section, is an easy and quick way to search for all of the discounts available to you.

Suggest a Business

Don't see what you're looking for? Head to the Suggest a Business page, found in the upper right-hand corner of your Home Page under Account Options, to suggest your favorite brands and local spots be added to your Discount Program.



Dedicated Support

PerkSpot's customer support team is here to help with any questions. We've included important information regarding our availability should you need assistance!

Access PerkSpot to start saving today!

Website: ryman.perkspot.com

Phone: 866-606-6057

Email: cs@perkspot.com

Hours: Monday - Friday, 8:00am - 6:00pm CST

Mobile App: Scan QR Code to download!



2025 BIWEEKLY COST CHART

HEALTH BENEFIT PLANS

PLANS	EMPLOYEE	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	EMPLOYEE, SPOUSE & CHILD(REN)
Traditional Plan	\$88.34	\$185.53	\$163.44	\$256.20
HDHP with Copay	\$55.30	\$116.11	\$102.29	\$160.35
HDHP with HSA	\$34.81	\$73.09	\$64.39	\$100.92
Dental	\$8.28	\$12.40	\$15.51	\$24.85
Vision	\$2.82	\$5.64	\$6.04	\$9.65

OPTIONAL LIFE AND AD&D BENEFIT PLANS

EMPLOYEE OPTIONAL LIFE INSURANCE ¹		EMPLOYEE/SPOUSE RATES (MONTHLY)		CHILD(REN) RATES (MONTHLY)	
Elect:	1 to 6 times annual salary	AGE	PRICE PER \$1,000	AGE	PRICE PER \$1,000
		<30	0.063	Up to age 26	0.100
SPOUSE LIFE INSURANCE²		30-34	0.096	OPTIONAL AD&D RATES (MONTHLY)	
Elect:	\$10,000 \$25,000 \$50,000 \$75,000 \$100,000	35-39	0.101	COVERED	PRICE PER \$1,000
		40-44	0.146	Employee Only	0.029
		45-49	0.32	Employee & Family	0.035
CHILD(REN) LIFE INSURANCE³		50-54	0.40	IDENTITY, FINANCIAL, PRIVACY PROTECTION (BIWEEKLY)	
Elect:	\$5,000 \$10,000 \$15,000 \$20,000 \$25,000	55-59	0.70	Family	\$6.44
		60-64	0.85		
		65-69	1.34		
		70+	2.06		
OPTIONAL AD&D INSURANCE					
Elect:	1 to 6 times annual salary				

PRICING EXAMPLE - EMPLOYEE OPTIONAL LIFE INSURANCE FOR 36-YEAR-OLD MAKING \$50,000 PER YEAR					
Coverage Amount Elected	Divide	Equals Units	Multiply	Price per \$1,000	Monthly Cost
1x Pay= \$50,000	1,000	50	X	0.101	\$5.05
Your Situation =	1,000		X		

¹ **Optional Life Insurance:** Any amount over \$500,000 require Evidence of Insurability

² **Spouse Life Insurance:** Spouse life insurance cannot exceed 100% of the employees life amounts elected. Any amount over \$50,000 requires Evidence of Insurability.

³ **Child(ren) Life Insurance:** The child(ren)'s coverage cannot exceed 100% of the employees life amounts elected.

CONTACT INFORMATION

If you have specific questions about a benefit plan, please contact the administrator listed below, or your Total Rewards department (totalrewards@rymanhp.com).

BENEFIT	ADMINISTRATOR	PHONE	WEBSITE/EMAIL
Enrollment/Life Events/COBRA	Your Benefits Resources (YBR)	888.438.9271	ybr.com/ryman
Medical/Live Well Rewards	UMR	800.207.3172	umr.com
Prescription Drug Coverage	OptumRx	844.368.0699	optumrx.com
Telemedicine	Teladoc	800-teladoc (800-835-2362)	teladoc.com
Lantern	Lantern	855.200.2099	my.lanterncares.com
Vanderbilt MyHealth Bundles	Vanderbilt	615.936.2635	myhealthbundles.org
Dental	Delta Dental of TN	800.223.3104	deltadentaltn.com
Vision	VSP	800.877.7195	vsp.com
Life and AD&D Insurance	New York Life	800.362.4462	newyorklife/group-benefits-solutions
Spending Accounts (FSA, Dependent Care, HSA)	Smart-Choice Accounts	888.438.9271	ybr.com/ryman (click Smart-Choice Account link)
Short-Term and Long-Term Disability Coverage	New York Life	888.842.4462	mynylgbs.com
Leave of Absence, FMLA, Parental Leave	New York Life	888.842.4462	mynylgbs.com
401(k) Savings Plan	Voya	833.266.9737	aonpep.voya.com
Employee Assistance Program (EAP)	Resources for Living	800.272.7252	Resourcesforliving.com Login: RHP Password: RHP
Identity, Financial & Privacy Protection	Allstate Identity Protection	800.789.2720	myaip.com
Fedlogic	Fedlogic	877.837.4196	Fedlogicgroup.com
PerkSpot Discount Program	PerkSpot	866.606.6057	ryman.perkspot.com
ADP			workforcenow.adp.com (Home Tab)
RHP/OEG Benefits Website			https://flimp.live/Ryman-Benefits

This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/ Total Rewards Department.

This 2024 Benefit Summary highlights recent plan changes and is intended to fully comply with the requirements under the Employee Retirement Income Security Act (ERISA) as a Summary Material Modification (SMM) and should be kept with your most recent Summary Plan Description (SPD). This document does not guarantee any benefits.

NOTES

RYMAN
RYMAN HOSPITALITY PROPERTIES, INC.

OPRY ENTERTAINMENT.

GRAND OLE
OPRY

RYMAN
AUDITORIUM

AUSTIN CITY
LIMITS

OLE
REB

CATEGORY
10

WSM
RADIO

