

# 2020 Total Rewards Survey

## GENERAL INFORMATION

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### 1. General Information: \*

Name:

Title

Work Email:

### 2. Restaurant Information \*

Company Name

Restaurant Name

Restaurant Segment

- Quick Service
- Fast Casual
- Family Dining
- Casual Dining
- Upscale Casual
- Fine Dining

3. Number of restaurants:

Company Owned

Franchised

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Total : 0

4. Number of corporate office employees

5. Number of restaurant management employees

Full time management

Part time management

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Total : 0

6. Number of restaurant non-management employees

Full time non-management employees

Part time non-management employees

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Total : 0

7. System wide sales (Please enter whole dollar amount) \*

\$

8. Enter the average annual unit volume for the restaurants operated by your company. If you are a franchisor, enter the average unit volume including franchisee operated units. If you are a multi-concept operator, please enter the average annual unit volume across all concepts under your company. (Please enter whole dollar amount)

annually per unit

9. In response to COVID-19, have you made any base pay adjustments for those that remained employed (not laid off or furloughed):

	Base pay was not cut in response to COVID-19 at any time	Pay was cut initially, but we have since reinstated to full pay	Pay was cut initially, but we have since partially reinstated pay	Pay was cut initially, but we have not been able to reinstate any pay	Pay was cut initially, and further pay cuts were needed in the last three months
Corporate executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate office staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restaurant management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restaurant hourly employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Are you paying extra (hazard pay) in those areas heavily affected by COVID-19?

	Yes	No
Restaurant managers	<input type="radio"/>	<input type="radio"/>
FOH hourly employees	<input type="radio"/>	<input type="radio"/>
BOH hourly employees	<input type="radio"/>	<input type="radio"/>

11. For those positions you are paying extra hazard pay, what is the average premium paid **per hour** worked?

FOH hourly employees    \$

BOH hourly employees    \$

Restaurant managers    \$

12. Have you created new positions at your restaurants in response to the COVID-19 pandemic?

- Takeout/Off-premise specialist (hourly, non-management position)
- Off-premise manager
- Sanitation/Safety specialist
- Other - Write In
- No new positions created

13. Average starting hourly pay rate for new position added

Takeout/Off-premise specialist (hourly, non-management position)

Off-premise manager

Sanitation/Safety specialist

Other - Write In

No new positions created



15. Which of these measures are currently in place to protect the safety of your guests and employees? (Check all that apply):

- Reduced the length of shifts at restaurants
- Isolated shifts so no employee is working with other employees in more than one shift
- Requiring masks for all front of house employees
- Requiring masks for all back of house employees
- Requiring gloves for all front of houes employees
- Requiring gloves for all back of house employees
- Taking temperature of employees at the beginning of each shift
- Taking temperature of guests entering the restaurant
- Requiring employees to wear face shields
- Adding plexiglass shields for customer facing employees (host/hostess stand, customer facing counters, etc.)
- Adding plexiglass or other dividers between tables
- Removing tables from restaurants
- Adding hand sanitizer throughout restaurant
- Other - Write In

16. What is your process if an employee tests positive for COVID-19?

17. What will be your new corporate office protocols?

- Encouraging sick workers to stay at home.
- Requiring masks
- Taking temperature of employees
- Minimizing contact among workers, clients, and customers
- Replacing face-to-face meetings with virtual communications
- Establishing alternating days or extra shifts that reduce the total number of employees in office
- Other - Write In

18. What changes has your organization made or is considering making at the unit level due to COVID-19?

- Permanently closed units
- Temporarily closed units

19. What % of the corporate office staff is working from home and your expectations for the following time-frames?

% Currently

% in the next 3-6 months

% in the next 12 months

20. How do you expect your corporate office operations to change in the next 12 months?

- Downsizing (or downsized) to a smaller office
- Changing (changed) to 100% remote for **all** employees
- Changing (changed) to 100% remote for **some** employees
- Restructuring (restructured) hours worked in the office and hours worked from home
- Not sure, considering a permanent change to allow for more flexibility
- None of the above - returning to normal office setting

21. Directly due to the COVID pandemic, by what percentage have you reduced your workforce (through furloughs or layoffs) and what is your expectation in the coming months?

Please enter the reduction % for each period:

	Corporate Staff	Restaurant Management	Restaurant Non-management
Total Reduction due to the pandemic (March-June 2020)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Next 3-6 months:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Next 12 months:	<input type="text"/>	<input type="text"/>	<input type="text"/>

22. Have your costs per restaurant **increased** due to spending in any of the following categories as a result of the pandemic:

Please check all that apply

- Purchasing masks, gloves, and other equipment to keep employees and guests safe
- Additional cleaning supplies due to COVID-19
- Extra training required
- Modifications to the restaurant layout (adding physical barriers, plexiglass shields, etc)
- Other - Write In

23. What is your estimated basis point impact in profits from the business model changes you have made since COVID?

- Less than 50 bps
- Between 50-150 bps
- Between 150-250 bps
- more than 250 bps



24. What's the biggest worry related to workforce post-COVID?

**Salary Budgets and Range Increases**

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25. Are your employees eligible to get base pay increases in 2020? (Excluding promotional increases)

	Yes	No
Corporate Executives	<input type="radio"/>	<input type="radio"/>
Corporate Office Directors/Managers	<input type="radio"/>	<input type="radio"/>
Other Corporate Office Employees	<input type="radio"/>	<input type="radio"/>
Multi Unit Managers	<input type="radio"/>	<input type="radio"/>
Restaurant General Managers	<input type="radio"/>	<input type="radio"/>
Other Restaurant Managers	<input type="radio"/>	<input type="radio"/>
Restaurant Hourly Employees	<input type="radio"/>	<input type="radio"/>

## 26. Percent Base Pay Increases

(if no increases were offered or budgeted for a particular position level, please enter 0):

	2020 budgeted merit increase %	2020 expected or actual merit increase %	2021 projected merit increase %
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors/Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Corporate Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>
Multi Unit Manager	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant General Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Restaurant Managers (non GM)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Variable Pay and Bonus Programs

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29. For bonuses earned during the second half of 2020, when are they expected to be paid:

	2020 Bonuses Paid as Originally Scheduled	Bonuses Will Be Paid in 2020, But Payment Has Been Delayed	Payment of Bonuses Has Been Delayed Until 2021	Bonuses Were Eliminated for 2020
Corporate Executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate Directors and Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Corporate Office Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Multi Unit Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
General Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Salaried Restaurant Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Hourly Restaurant Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restaurant Hourly Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. How are these bonuses calculated? Please enter the percentage of the bonus that is based on each of these criteria. Please leave the field blank if the bonus type is not eligible for the specified group of employees. (Each **column** must add to 100%)

	Corporate Executives	Corporate Directors/Managers	Other Corporate Employees
% Individual employee performance (individual KPIs)	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Revenue	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Profits	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Employee Retention	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

31. Please specify other:

32. How are these bonuses calculated? Please enter the percentage of the bonus that is based on each of these criteria. Please leave the field blank if the bonus type is not eligible for the specified group of employees. (Each **column** must add to 100%)

	Multi Unit Managers	General Managers	Other Salaried Restaurant Managers	Other Hourly Restaurant Managers	Restaurant Hourly Employees
% Company revenue and profits	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Revenue of restaurants they manage or work in	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Profit of restaurants they manage or work in	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Quality metrics	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Guest feedback metrics	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Employee retention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

33. Please specify other:

34. Please indicate which Variable Pay / Bonus Programs are offered for each position level (check all that apply):

	Referral Bonuses	Sign-on Bonus	Profit Sharing	Spot Awards / Bonuses	Stock Purchase Plan	Service / Tenure Awards	Shift Premiums	Other
Corporate Executives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corporate Directors/Managers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Corporate Office Employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi Unit Managers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Managers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Restaurant Managers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restaurant Hourly Employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

35. Please specify other:

**Severance Pay Plan**

36. Check those positions that are currently covered by a Severance Pay Plan (check all that apply):

- Corporate Executives
- Corporate Directors and Managers
- Other Corporate Office Employees
- Multi Unit Managers
- General Managers
- Other Restaurant Managers
- Restaurant Hourly Employees

37. Is severance pay amount based on length of service for the company (i.e. certain number of weeks or months of pay per each year worked)

- Yes
- No

38. On average, how many weeks of pay are given as severance per each year worked for the company?

Corporate Executives	<input type="text"/>
Corporate Directors and Managers	<input type="text"/>
Other Corporate Office Employees	<input type="text"/>
Multi Unit Managers	<input type="text"/>
General Managers	<input type="text"/>
Other Restaurant Managers	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>

39. Do any benefits continue through the severance period?

- Yes
- No

40. What benefits continue during the severance period?

- Medical
- Dental
- Life
- Other - Write In

41. Do you offer a total number of days in a PTO Bank that employees can use instead of specifying sick days, holidays, and vacation days?

	Yes	No	If <b>yes</b> , # of days offered in the PTO Bank
Corporate Executives	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Corporate Directors and Managers	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Other Corporate Office Employees	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Multi Unit Managers	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
General Managers	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Other Restaurant Managers	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

42. How many days **per year** do your employees receive as paid time off?

	Holidays	Sick Days	All Other Paid Time Off
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors/Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>
General Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Salaried Restaurant Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Hourly Restaurant Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Non-Management Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>



43. Please indicate how many days of paid vacation your employees receive per year at the following tenures:

	6 months	1 year	5 years	10 years
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors/Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
General Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Salaried Restaurant Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Hourly Restaurant Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Non-Management Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

44. What was your 2019 Employee Turnover rate for the following position levels:

Corporate Managers to Corporate Executives

Corporate Office Employees Only

**Total** Corporate Office Turnover

**Labor Costs**

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45. Please indicate the percentage of total revenue that salaries and bonuses, benefits and employee related taxes, and total employee costs (salaries and bonuses plus benefits and taxes) represent currently for each of the following position levels:

PLEASE NOTE: Total % should be the sum of % Salaries, % Bonuses, % Benefits and % Taxes.

	Benefits and Taxes (%)	Salaries and Bonuses (%)	Total (%) (Salaries and Bonuses, Benefits and Taxes)
<b>All Employees (Corp. + Multi-Unit Mgmt + Rest. Mgmt. + Rest. Hourly)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
All Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>
Multi-Unit Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>All Restaurant Employees (Rest. Mgmt + Rest. Hourly)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Management	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>

46. For each of the departments listed, please enter the **number of non-restaurant employees** currently working in each of them.

If you don't have employees assigned to a department listed, please leave the entire row **blank**.

**Number of Corporate Office Employees**  
(Exclude top, C-Level executives from each department headcount;  
exclude restaurant level positions)

Top Executives (CEO, President, and COO)	<input type="text"/>
Operations / Field Supervision (Exclude COO)	<input type="text"/>
Franchise Operations	<input type="text"/>
Legal	<input type="text"/>
Accounting	<input type="text"/>
Finance and Planning	<input type="text"/>
Information Technology	<input type="text"/>
Procurement	<input type="text"/>
Design and Construction	<input type="text"/>
Real Estate	<input type="text"/>
Facilities	<input type="text"/>
Human Resources - Excluding Training	<input type="text"/>
Training	<input type="text"/>
International	<input type="text"/>
Culinary and Menu Development	<input type="text"/>
Marketing	<input type="text"/>
Other G&A	<input type="text"/>

47. For each of the departments listed, please enter the **percentage** of the organization's Total Payroll Costs each department represents.

If you don't have employees assigned to a department listed, please leave the entire row **blank**.

	<b>% of Total Company-Wide Payroll Costs</b> (e.g. 4.3%)
Top Executives (CEO, President, and COO)	<input type="text"/>
Operations / Field Supervision (Exclude COO)	<input type="text"/>
Franchise Operations	<input type="text"/>
Legal	<input type="text"/>
Accounting	<input type="text"/>
Finance and Planning	<input type="text"/>
Information Technology	<input type="text"/>
Procurement	<input type="text"/>
Design and Construction	<input type="text"/>
Real Estate	<input type="text"/>
Facilities	<input type="text"/>
Human Resources - Excluding Training	<input type="text"/>
Training	<input type="text"/>
International	<input type="text"/>
Culinary and Menu Development	<input type="text"/>
Marketing	<input type="text"/>
Other G&A	<input type="text"/>

48. Did these headcounts change as a result of the pandemic?

	Increased	Decreased	Did not change	N/A
Top Executives (CEO, President, and COO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Operations / Field Supervision (Exclude COO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Franchise Operations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accounting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Finance and Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information Technology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Procurement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Design and Construction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Real Estate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Human Resources - Excluding Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
International	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Culinary and Menu Development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marketing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other G&A	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

49. Are these headcount changes expected to be reverted to pre-COVID levels in the next 12 months?

	Yes	No	Don't know	N/A
Top Executives (CEO, President, and COO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Operations / Field Supervision (Exclude COO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Franchise Operations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accounting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Finance and Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information Technology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Procurement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Design and Construction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Real Estate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Human Resources - Excluding Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
International	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Culinary and Menu Development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marketing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other G&A	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Benefits**

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50. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Corporate Executive**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

51. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Corporate Director/Managers**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

52. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Other Corporate Office Employees**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

53. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Multi-Unit Managers**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



54. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**General Managers**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

55. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Other Restaurant Managers**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

56. For each benefit, please enter the percentage that is paid by the company and the percentage that is paid by the employee.

**Full Time Restaurant Hourly Employees**

	% Paid by company (e.g. 80%)	Did the % paid by the company change due to the pandemic?		
		Increased	Decreased	No Change
Health Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Short Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Disability	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision Care Plan	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription Drug Program	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



58. Please enter the percentage dining discount for each position level, where applicable:

Corporate Executives

Corporate Directors

Corporate Managers

Corporate Office Employees

Multi Unit Managers

General Managers

Other Restaurant Management

Restaurant Hourly Employees

59. Does your company offer a wellness program?

- Yes
- No

60. Please indicate which wellness programs are offered:

- Health screenings
- Smoking cessation programs
- Weight loss programs
- Wellness / Health education
- Other - Write In

61. What well-being initiatives do you expect will be most important this year?

62. What benefits do you expect to change because of COVID?

- Expanding virtual or telemedicine programs
- Enhancing mental health support
- Reducing retirement plan contributions
- Expanding voluntary benefits
- Increasing cost-sharing for plan expenses (deductibles, premiums, etc.)
- Offering childcare support and/or care-giving leave
- Increasing PTO
- Other - Write In

**Benefits 2**

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63. How many hours per week does an hourly employee have to work to be considered full time?

64. Are part time hourly employees eligible for health benefits?

- Yes
- No

65. What is the waiting period in weeks for eligible employees to receive health benefits? If health benefits are effective immediately, please enter "0". If benefits are effective on the first of the month after being hired, please check the box and leave the adjacent cell blank.

	# of weeks	1st of following month
Corporate Executives	<input type="text"/>	<input type="checkbox"/>
Corporate Directors/Managers	<input type="text"/>	<input type="checkbox"/>
Other Corporate Office Employees	<input type="text"/>	<input type="checkbox"/>
Restaurant Management	<input type="text"/>	<input type="checkbox"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="checkbox"/>



67. For each position, enter the total monthly cost and the percentage of that cost that the company pays, for each of the plans listed below.

Leave blank if your company does not offer this kind of plan

**PPO**

	PPO Average Monthly Cost (Coverage for <b>Employee Only</b> ) (\$)		PPO Average Monthly Cost (Coverage for <b>Employee Plus One</b> ) (\$)		PPO Average Monthly Cost (Coverage for <b>Employee Plus Family</b> ) (\$)	
		Company Pays (%)		Company Pays (%)		Company Pays (%)
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

68. Is your Dental and/or Vision plan included as part of your health plan (e.g. HMO, PPO, etc.)?

	DENTAL		VISION	
	Yes	No	Yes	No
Corporate Executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate Directors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate Managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate Office Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restaurant Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restaurant Hourly Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>









72. For each plan (if applicable) please enter average amounts for most commonly used plan or option:

**PPO**

	Medical Office Visit Copay (\$)	Generic Prescription Copay (\$)	Brand Name Prescription Copay (\$)	Annual Deductible per Individual (if no deductible enter 0) (\$)	Annual Deductible per Family (if no deductible enter 0) (\$)	Annual Out of Pocket Maximum per Family (\$)
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Benefits 3**

73. Please indicate if your company offers a limited benefits plan high deductible plan for restaurant hourly employees:

	Yes	No
Full-time Hourly	<input type="radio"/>	<input type="radio"/>
Part-time Hourly	<input type="radio"/>	<input type="radio"/>

74. Is the high deductible plan the **only** health benefits plan offered to hourly employees?

	Yes	No
Full-time Hourly	<input type="radio"/>	<input type="radio"/>
Part-time Hourly	<input type="radio"/>	<input type="radio"/>

75. For each position level, enter the average monthly cost for the limited benefits plan and the percentage of that cost that the company pays:

	Limited Benefits Total Monthly Cost (Coverage for <b>Employee Only</b> ) (\$)	Company Pays (%)	Limited Benefits Total Monthly Cost (Coverage for <b>Employee Plus One</b> ) (\$)	Company Pays (%)	Limited Benefits Total Monthly Cost (Coverage for <b>Employee Plus Family</b> ) (\$)	Company Pays (%)
Full-time Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part-time Hourly	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

76. For the health benefit plan(s) offered by your company, please indicate the percentage of eligible employees that are enrolled: (If your company does not offer a particular plan, please leave the appropriate cells blank.)

	HMO	PPO	Limited Benefits Plan	Other
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

77. Please indicate the average percentage change expected from 2020 to 2021 for the total premium costs for each of the health benefits plans (employee coverage only) offered by your company.

If your company does not offer a particular plan, please leave the appropriate cells blank.

	HMO	PPO	Limited Benefits Plan	Other
Corporate Executives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Directors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Managers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate Office Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Restaurant Hourly Employees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

78. Please list and briefly explain any additional benefits offered by your company that are not included in this survey:

79. Please list and briefly explain any benefits **offered for the first time** by your company over the last 12 months for any of your employees:

80. What changes to your **benefits** practices have had a positive impact on retention and/or business results?

81. What changes to your **compensation** practices have had a positive impact on retention and/or business results?