



2021

Total Rewards Guide
Empowering Your Self-Care

Empowering Your Self-Care



Six Dimensions of Well-Being

- Physical** Preventive Care | Eat Healthy | Move More | Sleep Better
- Emotional** Reduce Stress | Be Resilient | Reduce Anxiety and Depression
- Financial** Plan Ahead | Budget | Manage Debt
- Work-Life** Foster Positive Relationships | Manage Career | Enjoy Life
- Community** Protect the Environment | Be Community Active | Help People
- Educational** Personal Development | Improvement | Learn New Skills

Our focus is to support you in empowering your self-care through our six dimensions of well-being as you and your family navigate your *HEALTHYyou* journeys toward optimal well-being.



@PerrigoCompanyPlc



@PerrigoCompany



Perrigo Company plc

How Dimensions Apply to You

Your overall health is much more than annual health exams or gym workouts. That's why Perrigo identifies six well-being dimensions within our **HEALTHYyou** Total Rewards benefits, in addition to your base pay and incentives. Our programs work together to optimize your and your family's self-care journeys.

How to Use the Total Rewards Guide

Review this Guide to learn about Perrigo's well-being programs. Detailed information on each program is available through the Perrigo Benefits Center.

Find all benefit and well-being program information through:

Perrigo Benefits Center (PBC)
Website: benefitscenter.perrigo.com
Telephone: 800.974.5176
Mon-Fri: 8 am-7 pm EST

**BEST AND
BRIGHTEST** 
IN WELLNESS
WINNER 2020

The Perrigo **HEALTHYyou** Well-Being Program was awarded the Best and Brightest in Wellness™. This award, sponsored by the National Association for Business Resources (NABR), recognizes employers for quality and excellence in health awareness in promoting a culture of wellness to make their business and the community a healthier place to live and work.

For the fourth year in a row, Perrigo has earned the Best and Brightest Award for our **HEALTHYyou** Well-Being Program.



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Information is only intended to highlight Perrigo's benefit plans. You may or may not be enrolled and eligibility for each of the benefit plans is subject to the specific plan provisions. If there are any differences, the plan documents and / or policies will govern. Additionally, Perrigo reserves the right to amend, suspend, or terminate the Plan and any Welfare Program at any time by written action of the Board of Directors or its duly appointed designee.



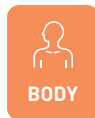
GR8NESS

In addition to
your HEALTHY you
Well-Being Journey

START YOUR SELF-CARE JOURNEY TODAY

- | Build Your Profile |
- | E-Books & Challenges |
- | Polls & Quizzes |
- | Personalized Content |


SELF-CARE



GR8NESS - Supporting Perrigo's Well-Being

Begin Building GR8ER Self-Care
and Join Our Community at

www.GR8NESS.com





Medical Benefits

Blue Cross Online Visits

Access care from board-certified physicians at anytime from anywhere at low cost using your mobile devices. Learn more on page 15.

Which Medical Plan is Right for Me?

See which medical plan may be right for you by using the Medical Plan Decision Tool found on the Perrigo Benefits Center.

Healthcare Bluebook Rewards

Find high-quality, fair-priced providers in your area and earn rewards for using green providers for certain medical procedures.

Livongo

Supplies and coaching at no-charge for members, enrolled in a Perrigo medical plan, diagnosed with diabetes and/or hypertension. See page 14.

QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com
Telephone: 800.974.5176
Mon-Fri: 8 am-7 pm EST

Blue Cross Blue Shield Michigan

Website: bcbsm.com
Telephone: 866.684.8213

Perrigo offers three medical plan options:

- The Consumer Driven Health Plan (CDH Plan)
- The Value Preferred Provider Organization Plan (Value PPO Plan)
- The Preferred Provider Organization Plan (PPO Plan)

Prescription drug benefits are included in all three plans through CVS Caremark (see page 10).

All options have:

- The same in-network providers and services
- 100% coverage for in-network preventive care services

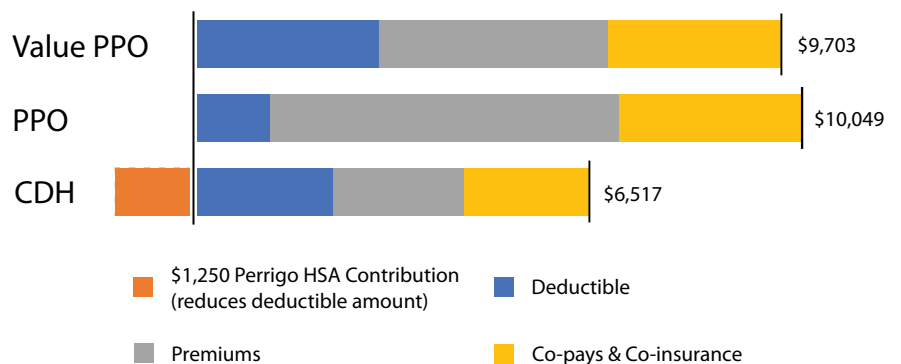
Compare the plans' features and costs on page 7.

CDH Plan May be the Right One for You!

Even with a higher deductible, the CDH Plan can be the more affordable option with lower premiums and Perrigo's contribution (up to \$1,250) to a Health Savings Account (HSA). To learn more, access the Medical Plan Decision Tool (found on the Perrigo Benefits Center).

For example, an employee with a family of four elects family coverage. With moderate medical and low prescription drug expenses in a calendar year, here is what they might expect to pay in either medical plan.

Example: Total costs are lower with the CDH Plan



Estimates are based on in-network expenses for average national care costs. Because costs vary and not all service details are included, actual costs may differ from what is shown. Actual costs may also vary based on the order in which services are incurred and by the specific family member using a service (if applicable).

Enrollment Verification Process

If enrolling spouse or child(ren), you will be asked to verify life event and dependent relationships by our partner Mercer. Please respond timely or your request will be reversed (without COBRA eligibility).



How the Family Deductibles Differ among Medical Plans

CDH Plan

One covered member's medical and prescription drug claims can meet the total family deductible or the sum of all covered members' claims can meet the total family deductible. Co-insurance then applies for the medical plan and co-payments for prescription drugs.

PPO Plan and Value PPO Plan

When one member's claims meet the individual deductible, co-insurance then applies for that individual. Another or all family members can meet the remaining family deductible, then co-insurance applies. Prescription co-payments apply right away.

Compare Plans

2021 In-Network Coverage

In all No-Fault Auto Insurance States, Perrigo medical plan coverage is secondary to auto insurance coverage. Please contact your auto insurer to be sure your policy provides primary coverage.

Feature	PPO Plan	Value PPO Plan	CDH Plan
Preventive Care	100%	100%	100%
Amount Perrigo contributes to Health Savings Accounts (HSAs) (For more HSA information see page 9)	Not available	Not available	Individual: \$750 Enroll two or more: \$1,250
Annual Deductible	Individual: \$600 Family: \$1,200	\$1,500 \$3,000	\$1,750 \$3,500
Out-of-Pocket Maximum*	Individual: \$3,000 Family: \$6,000	\$7,500 \$15,000	\$3,500 \$7,100
Co-insurance (after deductible) for eligible expenses except as noted below	20%	20%	20%
What you pay for primary care doctor's office visit	\$25	\$35	20% after deductible
What you pay for telemedicine doctor visit through Blue Cross Online Visits	\$10	\$10	\$59, then 20% after deductible
What you pay for specialist doctor's office visit	\$40	\$50	20% after deductible
Emergency room (what you pay)	\$150 co-pay, then 20% after deductible	\$150 co-pay, then 20% after deductible	20% after deductible
Hospital or mental health Inpatient (what you pay)	\$100 co-pay, then 20% after deductible	\$100 co-pay, then 20% after deductible	20% after deductible

*In-network out-of-pocket maximum includes the deductible, co-insurance, and co-payments. The PPO has a separate out-of-pocket maximum for prescription drug (see page 10).

See the Summaries of Benefits and Coverage (SBCs) for more information on each medical plan, including out-of-network coverage and other plan features. Benefits for prescription drugs vary by plan, see page 10 for details.



Medical Benefits

Medical and Prescription Drug Plan Rates

Discounted rates are earned through the [HEALTHYyou](https://www.perrigo.com/healthyou) Well-Being Program (learn more at [perrigo.limeade.com](https://www.perrigo.com/healthyou)).

Weekly

Coverage	No Discount			Partial Discount			Full Discount		
	PPO Plan	Value PPO	CDH Plan	PPO Plan	Value PPO	CDH Plan	PPO Plan	Value PPO	CDH Plan
Employee Only	\$46.19	\$34.43	\$14.19	\$36.19	\$24.43	\$9.19	\$27.19	\$15.43	\$4.19
Employee + Spouse*	\$83.54	\$59.61	\$29.70	\$70.54	\$46.61	\$24.70	\$59.54	\$35.61	\$19.70
Employee + Child(ren)	\$80.93	\$56.38	\$28.47	\$70.93	\$46.38	\$23.47	\$61.93	\$37.38	\$18.47
Employee + Family*	\$111.67	\$73.47	\$41.78	\$98.67	\$60.47	\$36.78	\$87.67	\$49.47	\$31.78

***Spousal Surcharge:** If your spouse is eligible for another medical plan, add \$50 to your PPO Plan's weekly rate or \$25 to your CDH Plan's weekly rate. The spousal surcharge is in addition to your medical plan rate. Please sign into or call the Perrigo Benefits Center to confirm your surcharge election. If you do not, it may be added to your paycheck (and is non-refundable).

Note: Leaders pay a surcharge above these rates (+12.5% or +25%).

Semi-Monthly

Coverage	No Discount			Partial Discount			Full Discount		
	PPO Plan	Value PPO	CDH Plan	PPO Plan	Value PPO	CDH Plan	PPO Plan	Value PPO	CDH Plan
Employee Only	\$100.08	\$74.60	\$30.74	\$78.41	\$52.93	\$19.91	\$58.91	\$33.43	\$9.07
Employee + Spouse*	\$181.00	\$129.16	\$64.34	\$152.84	\$101.00	\$53.51	\$129.00	\$77.16	\$42.68
Employee + Child(ren)	\$175.34	\$122.16	\$61.68	\$153.68	\$100.50	\$50.85	\$134.18	\$81.00	\$40.02
Employee + Family*	\$241.96	\$159.18	\$90.52	\$213.79	\$131.02	\$79.68	\$189.96	\$107.18	\$68.85

***Spousal Surcharge:** If your spouse is eligible for another medical plan, add \$108.34 to your PPO Plan's semi-monthly rate or \$54.17 to your CDH Plan's semi-monthly rate. The spousal surcharge is in addition to your medical plan rate. Please sign into or call the Perrigo Benefits Center to confirm your surcharge election. If you do not, it may be added to your paycheck (and is non-refundable).

Note: Leaders pay a surcharge above these rates (+12.5% or +25%).

Onsite Medical Care Available at the Perrigo Medical Center

Perrigo partners with Premise Health to provide well-being and general health services to full-time employees, part-time employees, and interns. Spouses and children (ages 12+) who are covered by a Perrigo medical plan are also eligible. Key services include:

- Routine physicals and check-ups (including sports physicals)
- Chronic condition management, such as diabetes and high blood pressure
- Minor cuts and lacerations
- Sick visits, including cold, flu, and ear aches
- Strains and sprains
- Occupational health
- Routine immunizations
- And much more!

Health Savings Account



A Perrigo-funded Health Savings Account (HSA) is included when you enroll in the CDH Plan to help you pay for your and your family's eligible health expenses.

Perrigo will deposit up to \$1,250 in your HSA

(Pro-rated for mid-year enrollment)

Coverage Level	Amount
Employee Only	\$750
Family	\$1,250

In addition to Perrigo's contribution, you can also save:

Coverage Level	Individual	Family
IRS Limits	\$3,600	\$7,200
Perrigo Contribution	\$750	\$1,250
Your Maximum Contribution	\$2,850	\$5,950

If you are age 55 or older, you can contribute up to an extra \$1,000 in catch-up contributions

Key Benefits of Perrigo's HSA

Triple Tax Advantage: Both Perrigo's and your contributions plus any investment earnings remain tax-free as long as used to pay eligible expenses.

Automatic Account Setup: If eligible, your account will automatically be set up after you enroll in the CDH Plan.

Invest Funds: If you have more than \$1,000.

Learn more at optumbank.com or irs.gov for eligible health expenses.

Additional Considerations

- Balances carry over automatically year over year
- You can add to, change, or stop your contributions at any time
- The account and funds remain yours even if you separate from Perrigo
- Pay eligible health expenses for spouse
- Pay eligible health expenses for children, claimed on your tax return, up to age 19 or 24 if full-time student
- Maintain and manage your own receipts for eligible expenses

Optum Bank Resources

The Optum Bank Academy has a variety of videos, frequently asked questions, and webinars to learn more about the power of HSAs.

Important

If you have a balance in a Healthcare Flexible Spending Account and elect the CDH Plan with a Health Savings Account, the balance in your FSA must be \$0 on 12/31. Otherwise, your HSA election and contributions will be delayed to 4/30.

Download the App

Use the Optum Bank app to:

- Track your balance, payments, recent transactions
- Capture and upload receipts
- Reimburse yourself



QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com

Telephone: 800.974.5176

Mon-Fri: 8 am-7 pm EST

Optum Bank

Website: optumbank.com

Telephone: 844.326.7967



Prescription Drug Benefits

Download the Caremark App

- Scan your prescription for refills
- Check costs and find lower-cost options
- Get refill reminders and pick-up alerts



Standard Formulary

Caremark maintains a standard list of prescriptions drugs called a formulary. The drugs on the formulary are considered clinically appropriate and cost effective. If your medication is not listed on the formulary, it may or may not be covered. We encourage you to review the caremark.com website to learn more.

Additional Coverage

If prescribed by your doctor, these products and drugs are covered:

- Tobacco cessation (generic Zyban or Chantix)
- Tobacco cessation over-the-counter products (gum, lozenges, patches)
- Anti-obesity medications, with prior authorization

QUESTIONS?

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Website: benefitscenter.perrigo.com
 Telephone: 800.974.5176
 Mon-Fri: 8 am-7 pm EST

CVS Caremark

Website: caremark.com
 Telephone: 800.552.8159

Prescription drug benefits through CVS Caremark are included when you enroll in a Perrigo Medical Plan, using the CVS Caremark Standard Formulary.

Retail Pharmacy 34-day Supply for Mail-Order benefits, see page 11

Drug Tier ¹	PPO Plan	Value PPO Plan	CDH Plan (after deductible)
1 Generic	\$10 co-pay	\$10 co-pay	\$10 co-pay
2 Preferred Brand-Name ²	20% (Min: \$25, Max: \$50)	30% (Min: \$35, Max: \$80)	20% (Min: \$25, Max: \$50)
3 Non-Preferred Brand-Name ²	30% (Min: \$50 Max: \$100)	45% (Min: \$75 Max: \$135)	30% (Min: \$50 Max: \$100)
4 Specialty Rx (PPO Plans Only) ³	100% if through PrudentRx (otherwise 30%)		Tiers 1-3 apply as applicable
Out-of-Pocket Maximum ⁴	\$1,500 per individual \$3,000 per family	Applies to medical plan maximum	Applies to medical plan maximum

¹See CVS Caremark (caremark.com) to review the standard formulary to determine which tier applies

²If a generic is available and you choose to fill with a brand-name drug, you pay the difference

³Specialty drugs may be covered at 100% with PrudentRx Copay Program. See PrudentRx Copay Program for details.

⁴CDH Plan drug co-pays (after deductible) apply to the medical plan's out-of-pocket maximum

If you enroll in the CDH Plan, co-payments apply once the medical plan deductible is met (certain generic preventive drugs are covered 100% before deductible). If you enroll either PPO Plan, benefits in the table apply before and after the deductible.

Specialty Rx

Used to treat complex health conditions, specialty drugs are covered but can only be filled through the CVS Caremark Specialty Pharmacy at CaremarkConnect and delivered by mail.

- If you enroll in either PPO Plan, you may be eligible for 100% coverage if you register with the PrudentRx Copay Program (see PrudentRx, below).
- If you enroll in the CDH Plan, specialty medication benefits apply within the three drug tiers, 1 – 3 in the Prescription Drug table.

PrudentRx Copay Program

PrudentRx works with manufacturers to obtain \$0 co-pays for our specialty medications. See the example table:

Your Specialty Medication Cost \$1,000 for 30-day supply	If not enrolled in Prudent Rx	If enrolled in Prudent Rx
Co-insurance	30% = \$300	\$0
Out-of-Pocket cost	\$300	\$0
Amount applied to out-of-pocket max	\$300	\$0

Enrollment is voluntary. Please call early after your effective date or you may be responsible for 30% of the cost. Call 800-578-4403, M-F 8am-8pm, EST.

If you take a specialty medication and do not enroll in the PrudentRx Copay Program, a PrudentRx Advocate will call you to answer questions.



Mail-Order Pharmacy

Maintenance medications are prescribed for certain health conditions, such as high cholesterol, high blood pressure, and diabetes. The medical plans cover certain maintenance medications at 100%! Review at caremark.com or call 888.766.8504.

Mail-order benefits are 2x retail pharmacy benefits for a 90-day supply (three 30-day fills).

When prescribed a maintenance medication:

1. Initially, fill a 34-day supply at your local retail pharmacy,
2. Fill subsequent refills through the mail-order pharmacy, or at a local CVS pharmacy, Target store, or the Meijer store (Plainwell, MI only).



Important: If your maintenance medication refill is dispensed at a network retail pharmacy, you will be responsible for the full cost of the medication.

Follow these steps to maximize plan benefits for maintenance medications and other 90-day supply drugs:

You or your doctor can fax a 90-day prescription using the Mail-Service Order Form available from Caremark at 800.378.5697 or Fast Start® at 877.321.2652. You can also go online to caremark.com and click *Request a Prescription* with Fast Start®.

Your order will be sent to your home address on file or you can request pickup at a CVS pharmacy, Target store, or if you live in Michigan, at the Meijer store in Plainwell, MI only.



Flexible Spending Accounts

Healthcare FSA Debit Card

You will receive a debit card when you enroll in a healthcare FSA.

Important: You may be asked to substantiate (provide proof) that expenses were eligible. Please respond by the requested deadline. If you do not, the IRS requires the FSA administrator to:

- Suspend your debit card until purchases are resolved
- Offset your future reimbursement requests
- Ask you to reimburse the amount

Download the App

The Discovery app is available at your app store. Use it 24/7 to check balances and account activity, sign up for text alerts, be notified on claims, upload documents, verify if an expense is qualified, report a lost or stolen debit card, and more.



QUESTIONS?

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Telephone: 800.974.5176
Mon-Fri: 8 am-7 pm EST

Discovery Benefits

Website: discoverybenefits.com
Telephone: 866.451.3399, option 1

Perrigo offers three Flexible Spending Accounts (FSAs): two Healthcare FSAs and a Dependent Care FSA. Save money by using pre-tax funds to pay for eligible expenses.

Examples of Expenses to Pay from Healthcare FSA

- Acupuncture and chiropractic
- Co-insurance and deductibles
- Crutches, wheelchairs
- Dental exams
- Orthodontics
- Eye exams, glasses, contacts
- Therapies (speech, physical)
- Medical x-rays

For a more complete list of eligible expenses, visit discoverybenefits.com.

Full Purpose Healthcare FSA

If you're enrolled in either PPO Plan or if you've waived coverage, you can enroll and use pre-tax funds to pay for eligible medical, prescription, dental, and vision expenses for you and your family members (even if not enrolled on your medical plan).

Limited Purpose Healthcare FSA

If enrolled in the CDH Plan, you can enroll and use pre-tax funds to pay for eligible dental and vision expenses. You can pay for medical and prescription expenses once your deductible is met.

Dependent Care FSA

You can set aside pre-tax dollars to pay for eligible childcare or elder care expenses because you and/or your spouse work, are actively looking for work, or are in school full-time. Additionally:

- Your dependent child must live with you and be under age 13
- Older dependents may be eligible if physically and / or mentally dependent upon you (reach out to Discovery Benefits for additional information)

Please note: You cannot use a Dependent Care FSA to pay expenses and take a credit on your tax return.



How Flexible Spending Accounts Work

Set up

Enroll and elect a minimum of \$240, up to:

Healthcare:
\$2,750

Dependent care:
\$5,000 or \$2,500*

Note: Your FSA election is divided by the number of pay periods remaining in 2021 and deducted evenly through December 31.

* If spouse files separate tax return or has a dependent care FSA

Availability of Funds

Healthcare:
Full election is available on your benefit effective date

Dependent care:
Funds are available as they are deducted from your payroll checks



Paying Expenses

Healthcare:
Use the FSA (debit card) or file reimbursement claims

Dependent care:
File reimbursement claims only



Time Limits

Healthcare:
Pay expenses through 3/15/22

File expenses through 4/30/22

Dependent care:
Pay expenses through 3/15/22

File expenses through 4/30/22

Important: After the filing deadline, any remaining funds in FSAs can no longer be reimbursed.

Other Important FSA Considerations:

- You must enroll each year to continue participating.
- After you enroll, you may not change your election during the year unless you have a qualified family status change.
- You cannot transfer money from one account to another. For example, you cannot use money from your Healthcare FSA to pay for dependent care expenses.
- Using the funds in either account for anything other than eligible expenses may result in an IRS penalty.





Livongo, Nurseline, & Chronic Condition Management

Register for Livongo

At welcome.livongo.com/Perrigo (registration code = Perrigo), or

- Call Livongo Member Support at 800.945.4355 (registration code = Perrigo).
- You will need your Perrigo medical card and a valid email address.

Additional information is available on the Perrigo Benefits Center.

Download Livongo App

The Livongo app works with the Livongo Blood Glucose Meter and Blood Pressure Monitor for a more detailed picture of your overall health. Download from your app store.



QUESTIONS?

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Mon-Fri: 8 am-7 pm EST

Livongo

Website: welcome.livongo.com
Telephone: 800.945.4355

Nurseline

Website: bcbsm.com
Telephone: 800.775.2583

Chronic Condition Management

Website: bcbsm.com
Telephone: 800.775.2583

These resources are available at no cost to you when you enroll in a Perrigo Medical Plan.

Livongo

Diabetes Care Management

Employees, spouses, and dependents (with parent's permission), enrolled in a Perrigo medical plan, with Type-1 or Type-2 Diabetes are eligible. Support includes:

- **FREE** Blood glucose meter with a touchscreen
- **FREE** Tests strips and lancets, with automatic refills
- **FREE** Real-time, online analytics that you can view and share with others (if you wish)
- **FREE** Healthy tips, reminders, and automatic alerts
- **FREE** Personalized coaching 24/7/365

Hypertension Management

Employees and spouses enrolled in a Perrigo medical plan, diagnosed with hypertension, are eligible. Support includes:

- **FREE** Blood pressure monitor connected to the Livongo mobile app
- **FREE** Real-time personalized health tips, reminders, and automatic alerts
- **FREE** Personal coaches available 24/7/365
- **FREE** Analytics you can share with others (if you wish)

Nurseline

Have a question about an upcoming treatment or an ongoing health condition? Call Blue Cross Blue Shield's Nurseline 24/7 to:

- Answer healthcare questions
- Clarify treatment, upcoming surgery, and/or medical test
- Explain which preventive care services are fully covered
- Refer you to the right medical care resources
- Discuss at-home treatments for minor illnesses and injuries

Chronic Condition Management

Confidential services in understanding and managing:

- Asthma
- Diabetes
- COPD
- Congestive Heart Failure
- Heart Disease

Telemedicine and Healthcare Bluebook



These resources are available at no cost to you when you enroll in a Perrigo Medical Plan.

Telemedicine

Connect Anytime from Anywhere

Blue Cross Online VisitsSM allows you to engage with a board-certified physician 24/7 via your computer, mobile device, or phone.

Benefits include:

- General medical services for minor illnesses such as colds, flu, allergies, sore throats, and more!
- Physicians can write prescriptions, if appropriate
- Emotional health and substance abuse support (cost may vary)

Blue Cross Online VisitsSM are:

- **Convenient** - you don't have to leave home to access care
- **Affordable** - visits cost less than a regular office visit
- **Quick** - average wait time is about 3 minutes
- **Easy** - track all of your claims information at bcbsm.com

Healthcare Bluebook

Don't Overpay for Healthcare

The cost for a medical service can vary significantly. You can save money with Healthcare Bluebook (at no additional cost to you) by finding a high-quality, fair-priced medical service provider near you. See an example below:



Earn Rewards

Earn the following rewards when using green-designated providers for these and many other services.

\$100

- Colonoscopy
- Upper GI Endoscopy
- Shoulder/Knee Arthroscopy
- Ear Tube Insertion
- Cataract Removal
- Tonsillectomy and Adenoidectomy

\$50

- Lithotripsy
- Cholecystectomy
- Sleep Study

\$25

- CT Scans
- MRI
- Transthoracic Echocardiogram

Blue Cross Online Visits

Enroll in a Perrigo Medical Plan and you automatically have access to Blue Cross Online VisitsSM (telemedicine).

Register in advance to connect quickly when care is needed. Visit bcbsmonlinevisits.com and download the app for online visits on the go.

Cost Savings by Plan

	Standard PCP Office Visit	Blue Cross Online Visits
PPO Plan	\$25	\$10
Value PPO	\$35	\$10
CDH Plan	\$75 - \$125	\$59 ¹

¹Before deductible. After deductible, cost is under \$12

Transparency Tool

Enroll in a Perrigo Medical Plan and you automatically have access to Healthcare Bluebook at no additional cost to you. Access the Healthcare Bluebook online tool and reference the app when you discuss medical services with your doctor.

Download the Apps

Healthcare Bluebook
From App Store (ID = PRGO)

BCBSM Online Visits
From App Store



QUESTIONS?

Blue Cross Online Visits

Website: bcbsmonlinevisits.com
Telephone: 844.606.1608

Healthcare Bluebook

Website: healthcarebluebook.com/cc/perrigo
Telephone: 800.341.0504



Dental Benefits

Preventive Care

Regular dental exams are important for your overall well-being. Did you know that preventive dental exams can detect several serious health issues?

- Diabetes
- Leukemia
- Oral cancer
- Pancreatic cancer
- Heart and kidney disease, and more

Source: American Dental Association

The Perrigo Dental Plan, in partnership with Delta Dental, offers quality care.

What's Included

Diagnostic and Preventive Services i.e. cleanings, x-rays, fluoride treatment	Plan pays 100% with no deductible
Annual Deductible	\$50 per covered person; up to \$100 family maximum
Basic Services i.e. fillings, root canal	Plan pays 80% after deductible
Major Services i.e. crowns, bridges, implants	Plan pays 50% after deductible
Orthodontic Services (up to age 19)	Plan pays 100% after deductible, up to \$1,500 lifetime max per member
Annual Benefit Maximum	\$1,500 per member; per year (for Basic and Major Services)

Note: Benefits include both in-network and out-of-network coverage, but out-of-network benefits are based on Reasonable & Customary (R&C) charges, and may include additional charges from your dental provider. Please call Delta Dental with questions.

Taking Advantage of Benefits

- Use Delta Dental PPO or Premier network dentists - search at deltadentalmi.com or call 800.524.0149
- For major services, ask your dentist to request a predetermination to help you understand, budget, and plan for the expense
- If you are enrolled in the CDH Plan, you can pay eligible expenses from your Health Savings Account or Limited Care Flexible Spending Account (if elected)

Additional services for preventive care are available in certain instances. Contact Delta Dental of Michigan at 800.524.0149 to learn more.

Dental Plan Rates

Coverage	Weekly	Semi-Monthly
Employee Only	\$3.00	\$6.50
Employee + One Dependent	\$6.00	\$13.00
Family (Employee + two or more)	\$9.00	\$19.50

QUESTIONS?

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Website: benefitscenter.perrigo.com

Telephone: 800.974.5176

Mon-Fri: 8 am-7 pm EST

Delta Dental of Michigan

Website: deltadentalmi.com

Telephone: 800.524.0149

Vision Benefits



Vision Plans

To help maintain your and your family's vision, Perrigo partners with VSP to offer three plan options. The following table compares benefits available in each option for expenses from in-network providers. To find in-network providers, go to vsp.com and search the VSP Choice network.

Coverage after co-pay for in-network providers

Feature	Basic	Value	Enhanced
Well Exam	\$10 co-pay	\$20 co-pay	\$10 co-pay
Lenses	20% discount	\$20 co-pay	\$25 co-pay
Frames	20% discount	\$150 allowance, \$80 allowance at Costco	\$150 allowance, \$80 allowance at Costco
Frequency	Every 12 months	Exam, every 12 months Frames, every 24 months	Every 12 months
Contact Lens Exam Services	15% discount	15% discount, \$60 co-pay max	15% discount, \$60 co-pay max
Contact Lenses (in place of frames)	Not available	\$130 allowance	\$140 allowance

*Co-pays vary depending on the lens option (anti-reflective and scratch-resistance coatings, polycarbonate lenses, progressive, photochromic, solid tints/PGC, etc.). See the VSP materials and plan documents on the Perrigo Benefits Center.

Vision Plan Rates

Weekly	Basic	Value	Enhanced
Employee Only	\$0.28	\$1.64	\$2.28
Employee + Spouse	\$0.40	\$2.39	\$3.33
Employee + Child(ren)	\$0.40	\$2.39	\$3.33
Employee + Family	\$0.72	\$4.30	\$6.00
Semi-Monthly	Basic	Value	Enhanced
Employee Only	\$0.60	\$3.55	\$4.95
Employee + Spouse	\$0.88	\$5.18	\$7.23
Employee + Child(ren)	\$0.88	\$5.18	\$7.23
Employee + Family	\$1.57	\$9.32	\$13.00

Eyeconic

Check out Eyeconic, VSP's online store, to browse frames, upload your prescription, and order new glasses. Your VSP benefits will automatically be applied.

Regular Eye Exams Matter

Did you know vision exams can also:

- Detect early signs of diabetes, high cholesterol, and some cancers
- Identify vision problems in one in four children

Source: National Institute of Health (NIH)

Add a Healthcare Flexible Spending Account

To help pay, consider enrolling in a Full-Purpose Healthcare Flexible Spending Account (if enrolled in the PPO Plan) or a Limited Purpose Healthcare Flexible Spending Account (if enrolled in the CDH Plan).

QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com

Telephone: 800.974.5176

Mon-Fri: 8 am-7 pm EST

VSP Choice

Website: vsp.com

Telephone: 800.877.7195



Life and AD&D Insurance, and Disability Benefits

Dual Coverage

If you and your spouse both work for Perrigo, you can only be covered as an employee or a dependent with Optional Life and AD&D Insurance. Additionally, only one may cover dependent children.

Perrigo pays for and automatically enrolls you in Basic Life and Accidental Death & Dismemberment (AD&D) through Reliance Standard. Add more coverage for yourself and family through the Optional Life and AD&D plan.

Life and Accidental Death Insurance

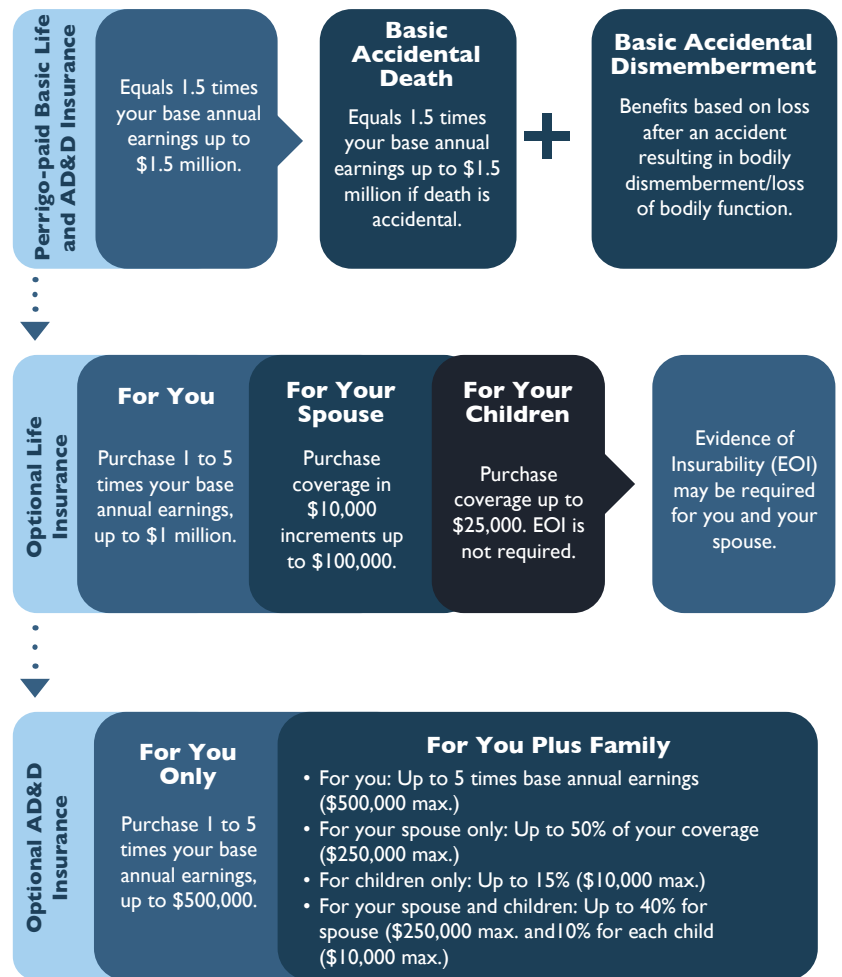
Cost for Optional Life is based on the elected coverage level and your age. Age reductions to life benefits begin at age 70.

Evidence of Insurability (EOI)

Coverage above a certain amount or if coverage is elected outside of a new hire window (some exceptions apply) requires Evidence of Insurability. EOI is a medical questionnaire the carrier reviews for approval before coverage is effective (Optional Life only).

Newly Eligible Employees

Elect Optional Life up to 3 times your base annual earnings up to \$500,000 and up to \$50,000 for your spouse without EOI. If you enroll later, EOI will be required. If you elect additional coverage over and above these amounts, EOI will be required.



QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com
Telephone: 800.974.5176
Mon-Fri: 8 am-7 pm EST

Reliance Standard

Website: reliancestandard.com
Telephone: 800.351.7500

Beneficiaries

Be sure to elect at least one beneficiary when enrolling. You can change beneficiary designations at anytime at the Perrigo Benefits Center. Please also remember to assign beneficiaries to your 401(k) account at vanguard.com/retirementplans.



Optional Life Insurance Rates

Your cost for Optional Life insurance is based on your age and coverage level. The plan has separate rates for employees, spouses, and children as shown in the tables below.

Optional Life Insurance Rates*

Monthly Cost Per \$1,000 of Coverage

Age	Employee	Spouse	Age	Employee	Spouse
Under 25	\$0.056	\$0.050	50-54	\$0.259	\$0.230
25-29	\$0.068	\$0.060	55-59	\$0.484	\$0.430
30-34	\$0.090	\$0.080	60-64	\$0.743	\$0.660
35-39	\$0.101	\$0.090	65-69	\$1.429	\$1.270
40-44	\$0.113	\$0.100	70-74	\$2.318	\$2.060
45-49	\$0.169	\$0.150	75+	\$2.400	\$2.060

*Spouse rate is based on employee's age

Example for Calculating the Cost of Optional Life Insurance: Employee age 44 earning \$26,208/year

Calculation	Example
Calculate yearly earnings (hourly rate x 2,080 hours)	\$26,208 – annual earnings
Choose a coverage level (1x, 2x, 3x, 4x, or 5x your annual earnings)	3x annual earnings elected: \$78,624
Determine the coverage amount in thousands	\$78,624 ÷ 1,000 and rounded up to nearest 1,000 = 79 thousands
Find age and cost from the chart	\$0.113
	$\$.113 \times 79 = \$8.93/\text{month}$
Determine per paycheck cost	$\$8.93 \times 12/52 = \mathbf{\$2.06 \text{ weekly rate}}$
	$\$8.93 \div 2 = \mathbf{\$4.46 \text{ semi-monthly rate}}$

Child Optional Life Insurance Rates

Coverage	Rate
Cost per \$1,000	\$0.09

Optional AD&D Insurance Rates

Monthly Cost Per \$1,000 of Coverage

Coverage Level	Rate
Employee Only	\$0.020
Employee + Family	\$0.032

Example for Calculating the Cost of Optional AD&D Insurance

Coverage	Calculation for \$50,000 in Coverage
Employee Only	$50 \times \$0.020 = \1.00 a month
Employee + Family	$50 \times \$0.032 = \1.60 a month

Disability Benefits

Perrigo pays for disability insurance at no cost to you and you are automatically enrolled when eligible.

Disability benefits replace a portion of your eligible earnings during your recovery from a covered illness or injury.

Short-Term Disability (STD) benefits continue for up to six months during an approved disability leave. Details are available in the Employee Handbook.

Long-Term Disability (LTD) continues benefits if your disability leave exceeds six months and approved by Reliance Standard. Reliance Standard administers the LTD Plan.



Critical Illness & Cancer Insurance and Accident Coverage

By electing the Critical Illness & Cancer and / or Accident benefit programs through ManhattanLife, you can receive lump sum payments. Use the money to pay the doctor, hospital, and other out-of-pocket expenses not covered by your medical plan.

Critical Illness & Cancer Insurance

Pays a lump-sum cash benefit after a diagnosis of a serious health condition, such as a heart attack, stroke, coronary artery disease, or cancer. You and enrolled family members are eligible for coverage.

The plan also includes a once-a-year preventive care benefit of \$50 to reward you for completing certain preventive care health screenings.

Coverage options:

- For you, from \$10,000 to \$50,000
- For your spouse, 50% of your coverage amount
- For your children, \$5,000

Accident Coverage

Pays a lump-sum cash benefit following an eligible non-work-related accident or injury. Both you and enrolled family members are eligible for coverage. Benefits include reimbursements for:

- \$1,000 once a year for your first hospitalization
- \$2,000 of actual accident charges, including physician treatment, emergency room, or urgent care services
- \$300 for ground ambulance charges
- \$600 for emergency air transportation within 100-mile radius

See the ManhattanLife summaries available at the Perrigo Benefits Center for details.

If you elect coverage, your next opportunity to change your election is during Open Enrollment.

QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com

Telephone: 800.974.5176

Mon-Fri: 8 am-7 pm EST

ManhattanLife

Website: manhattanlife.com

Telephone: 855.448.6982



Employee Contribution Rates for ManhattanLife Critical Illness and Cancer Insurance										
Age	Employee – Non-Tobacco User					Employee – Tobacco User				
	Weekly	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$10,000	\$20,000	\$30,000	\$40,000
18-29	\$1.28	\$2.22	\$3.15	\$4.09	\$5.02	\$1.77	\$3.19	\$4.62	\$6.04	\$7.46
30-39	\$2.25	\$4.06	\$5.87	\$7.68	\$9.49	\$3.64	\$6.84	\$10.05	\$13.25	\$16.45
40-49	\$4.33	\$8.14	\$11.95	\$15.77	\$19.57	\$7.91	\$15.31	\$22.70	\$30.09	\$37.48
50-59	\$7.88	\$15.10	\$22.33	\$29.54	\$36.77	\$14.69	\$28.73	\$42.78	\$56.81	\$70.84
60-64	\$15.27	\$29.76	\$44.25	\$58.73	\$73.21	\$28.14	\$55.51	\$82.86	\$110.22	\$137.57
65-69	\$22.07	\$43.30	\$64.52	\$85.72	\$106.93	\$39.83	\$78.81	\$117.76	\$156.72	\$195.70
Semi-Monthly	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000
18-29	\$2.77	\$4.80	\$6.83	\$8.86	\$10.88	\$3.83	\$6.92	\$10.00	\$13.09	\$16.17
30-39	\$4.86	\$8.79	\$12.71	\$16.63	\$20.56	\$7.88	\$14.83	\$21.77	\$28.70	\$35.65
40-49	\$9.38	\$17.63	\$25.89	\$34.16	\$42.41	\$17.14	\$33.16	\$49.18	\$65.20	\$81.21
50-59	\$17.06	\$32.71	\$48.36	\$64.01	\$79.66	\$31.83	\$62.24	\$92.66	\$123.08	\$153.49
60-64	\$33.07	\$64.46	\$95.85	\$127.25	\$158.63	\$60.96	\$120.24	\$179.52	\$238.80	\$298.07
65-69	\$47.81	\$93.78	\$139.75	\$185.73	\$231.69	\$86.28	\$170.71	\$255.14	\$339.57	\$424.01
Age	Spouse – Non-Tobacco User					Spouse – Tobacco User				
	Weekly	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$5,000	\$10,000	\$15,000	\$20,000
18-29	\$0.81	\$1.28	\$1.75	\$2.22	\$2.68	\$1.06	\$1.77	\$2.48	\$3.20	\$3.90
30-39	\$1.34	\$2.24	\$3.15	\$4.05	\$4.96	\$2.04	\$3.64	\$5.24	\$6.84	\$8.45
40-49	\$2.42	\$4.33	\$6.24	\$8.14	\$10.04	\$4.21	\$7.91	\$11.61	\$15.30	\$19.00
50-59	\$4.26	\$7.87	\$11.49	\$15.09	\$18.71	\$7.67	\$14.69	\$21.71	\$28.73	\$35.75
60-64	\$8.02	\$15.26	\$22.51	\$29.76	\$37.00	\$14.46	\$28.14	\$41.82	\$55.50	\$69.18
65-69	\$11.46	\$22.07	\$32.68	\$43.28	\$53.89	\$20.34	\$39.82	\$59.30	\$78.78	\$98.28
Semi-Monthly	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000
18-29	\$1.76	\$2.77	\$3.79	\$4.80	\$5.81	\$2.29	\$3.83	\$5.37	\$6.93	\$8.46
30-39	\$2.90	\$4.86	\$6.82	\$8.78	\$10.75	\$4.41	\$7.88	\$11.35	\$14.82	\$18.30
40-49	\$5.25	\$9.38	\$13.51	\$17.63	\$21.76	\$9.13	\$17.14	\$25.15	\$33.15	\$41.17
50-59	\$9.24	\$17.06	\$24.89	\$32.70	\$40.54	\$16.62	\$31.83	\$47.04	\$62.25	\$77.45
60-64	\$17.38	\$33.07	\$48.77	\$64.47	\$80.16	\$31.32	\$60.96	\$90.60	\$120.25	\$149.88
65-69	\$24.83	\$47.81	\$70.80	\$93.78	\$116.77	\$44.06	\$86.28	\$128.49	\$170.70	\$212.93

Child Contribution Rates for ManhattanLife Critical Illness Insurance		
Children up to age 25 \$5,000 Benefits	Weekly Rates	Semi-Monthly Rates
		\$0.38

ManhattanLife Accident Coverage Rates		
Coverage	Weekly	Semi-Monthly
Employee Only	\$6.02	\$13.05
Employee + Spouse	\$8.87	\$19.21
Employee + Child(ren)	\$10.62	\$23.00
Family (Employee + Spouse + Child[ren])	\$14.87	\$32.21



Additional Benefit Programs

Pet Care Discount

Enroll in the Pet Assure Pet Care Discount Program for savings on pet care, covering all domestic pets, regardless of age or pre-existing conditions. Features include:

- 25% savings on medical services through in-network veterinarians, including office visits, vaccinations, dental cleaning, spay & neuter, surgeries, x-rays, emergencies, and hospitalization
- Lost pet recovery service with 24/7 monitoring

Service and product discounts will be applied at the time of service or purchase and without claim forms.

Visit petbenefits.com/search to locate a veterinarian in the network, call 888.789.7387, or email customercare@petbenefits.com.

Legal Plan

Hyatt Legal Plans is now known as MetLife Legal Plans

Access attorneys for a wide variety of personal legal services through MetLife Legal Plan's network of attorneys. Representation and support includes:

- Telephone consultations
- In-person consultations
- Document preparation
- Representation in many frequently needed legal matters

For a list of participating attorneys and program details, go to info.legalplans.com and enter the access code: 6090646 or call 800.821.6400

Auto & Home Insurance

MetLife offers insurance at discounted group rates for automobiles, motorcycles, boats, motor homes, RVs, and homes (including renter's insurance). Pay insurance premiums through automatic payroll deductions.

Special features:

- An immediate 10% Welcome Discount for new MetLife customers
- Potential savings of up to 15% for multiple policies
- A 10% good student discount on auto insurance

To find out how much you may save, contact MetLife at 800.GET.MET8. For best results, gather your current auto and home insurance policies before calling. You can also visit the website at metlife.com/mybenefits (ID = Perrigo).

Fitness Funds

Qualify for up to \$75 (employee) or \$120 (family) reimbursement for gym memberships each quarter. Attendance requirements must be met. You can learn more on the Perrigo Benefits Center.

Identity Theft Protection

For fraud and ID theft protection and help recovering from identity theft, elect coverage through ID Watchdog. Services include:

- Up to \$1 million expense reimbursement coverage
- Credit monitoring, freezes, fraud alerts
- Public records monitoring
- Payday loan monitoring
- Cyber monitoring of your identity
- Breach notification

A digital wallet vault is included to store wallet contents to help in replacing a lost wallet and canceling credit cards. Call center is also available 24/7.

Contact ID Watchdog at idwatchdog.com or call 800.970.5182.

Voluntary Benefits		
	Pet Care Rates	Legal Plan Rates
Weekly	\$2.08	\$3.92
Semi-Monthly	\$4.50	\$8.50

Identity Theft Protection Rates	
Weekly Employee Only	\$2.07
Weekly Family	\$4.37
Semi-Monthly Employee Only	\$4.48
Semi-Monthly Family	\$9.48

Important: Once enrolled in any of these plans (excluding MetLife Auto & Home Insurance), your next opportunity to make changes is at Open Enrollment.

Employee Assistance Program



Life can throw a lot at you, from small worries to big concerns. If you find yourself needing assistance with relationships, work, or other concerns, your Employee Assistance Program (EAP) benefit offers confidential support.

Access emotional well-being sessions (up to five per year, per concern) at any time 24/7 available to you and your household family members at no-charge.

In addition to emotional health, your EAP can also support you with:

- Navigating legal issues like divorce, wills, or debt and credit issues through telephone consultation
- Consultation with an expert specialist on financial concerns like budget planning, college savings, retirement planning, tax help, audit assistance, loan consultation, and mortgage evaluation, etc.
- Accessing savings on flowers and gifts, theme park and movie tickets, travel, hotels, and car rentals through an online discount service
- Articles, resources, and tools through a robust suite of online modules



Onsite Counseling

In Allegan, MI, an onsite counselor is available at the Perrigo Medical Center. Reach out to our EAP partner to schedule an appointment.

Other Emotional Well-Being Resources

- Through New Directions, the Perrigo medical plans cover behavioral health inpatient and outpatient services, therapies, and counseling. Call 800.762.2382.
- Access Whil digital mindfulness training through HEALTHY_{you} at perrigo.limeade.com
- Engage with master level therapists and psychologists through Blue Cross Online VisitsSM (learn more at bcbsmonlinevisits.com)

QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com

Telephone: 800.974.5176

Mon-Fri: 8 am-7 pm EST

Magellan Health

Website: MagellanAscend.com and click on the *Find My Company* button and enter 'Perrigo'

Telephone: 800.424.3506



Retirement Plan and Financial Education Programs

Newly Hired Employees

- After 30 days, you are automatically enrolled in the 401(k) with a 4% pre-tax contribution
- Contributions are invested in the Moderate Retirement Choice Portfolio, the Qualified Default Investment Alternative (QDIA) fund
- Contribution rates automatically increase by 1% each year, up to 10% in the anniversary month of your eligibility date
- Create your account at vanguard.com/retirementplans to update your contribution and/or investment strategy at any time (Plan ID 099087)
- Additionally, you may adjust your beneficiary designations at any time

Download the App

The Vanguard app is available at your app store. Use it 24/7 to check your balances, monitor performance, view account statements and messages, review your plan, and more.



QUESTIONS?

Perrigo Benefits Center (PBC)

Website: benefitscenter.perrigo.com
Telephone: 800.974.5176
Mon-Fri: 8 am-7 pm EST

Vanguard

Website: vanguard.com/retirementplans
Telephone: 800.523.1188

Retirement Plan

Perrigo, in partnership with Vanguard, offers retirement benefits through the Perrigo Company Profit-Sharing and Investment Plan, which includes:

- Employee pre-tax, Roth, and after-tax contributions
- Perrigo matching contributions
- Perrigo profit-sharing contributions

Contributions

This table shows your options for 401(k) contributions and Perrigo's matching and profit sharing contributions. You are always 100% vested in all contributions to your 401(k), meaning the funds are 100% yours.

01

Your Contributions

Contribute up to 50% pre-tax and/or post-tax (Roth) of your eligible earnings, up to the IRS maximum (if age 50 or older, you may be eligible to contribute more). You may also contribute up to an additional 4% of eligible earnings on a traditional after-tax basis. Learn more below.

02

Matching Contributions

If you are actively participating, you qualify for the company match:

- 100% of the first 2% you contribute,
- Then 50% on the next 2%.
- If you contribute 4%, Perrigo contributes 3%.

03

Catch-up Contributions

If you are age 50 or older in 2021, you may be eligible to contribute an additional amount per year. Contact Vanguard for more information.

04

Profit Sharing Contributions

If eligible, Perrigo will contribute at least 3% of your eligible earnings into your 401(k) by March of the following year. You do not have to actively contribute to your 401(k) to qualify.

05

Traditional After-Tax Contributions

You may contribute up to an additional 4% of eligible earnings on an after-tax basis above the IRS limit. Once added, these contributions can be converted to Roth. They are not eligible for company match, so we encourage you to review your pre-tax and post-tax (Roth) deferrals first.

You are always 100% vested in all contributions to your 401(k), meaning the funds are 100% yours.



Managing Your Retirement Account

During the year, you may:

- Increase, decrease, or stop contributing (may take up to 2 payroll cycles to complete)
- Choose or change your investments (options are available on the Vanguard website at vanguard.com/retirementplans)
- Add or update your beneficiary information
- Check your account's performance

Financial Education Programs

Financial Advice Services

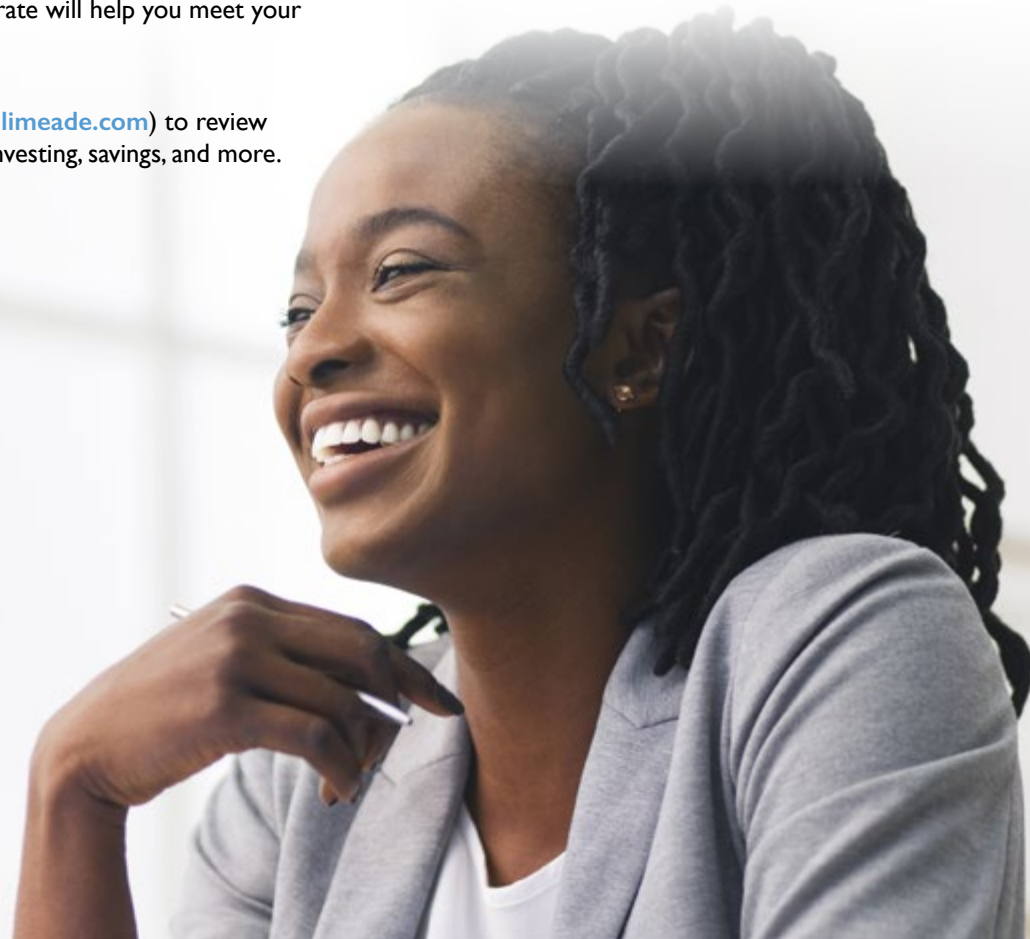
One of the key components to your retirement well-being is having a diversified investment portfolio that balances your risk tolerance and retirement objectives. Perrigo partners with Stifel | Pearl Street Investment Management to support you on your journey to retirement well-being success. Services are 100% paid by Perrigo and include:

- Investment advice
- Evaluating your current investment mix and strategy
- Distribution strategies
- And much more!

Vanguard also provides no-cost consultations to employees age 50 or older. If you are under age 50, a cost may apply. A financial advisor can assist with questions about:

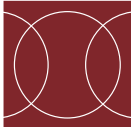
- Investments, saving for college, and transitioning into retirement
- Recommendations on an asset allocation strategy
- Determining whether your current savings rate will help you meet your retirement goals
- And much more!

Additionally, sign into **HEALTHY**you (perrigo.limeade.com) to review financial education topics such as budgeting, investing, savings, and more.



Work-Life, Community, and Diversity and Inclusion

Perrigo Core Values



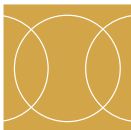
Integrity

We do what is right



Respect

We demonstrate the value we hold for one another



Responsibility

We hold ourselves accountable for our actions

Personal & Family Development

Perrigo's philosophy to invest in our employees and their families is key to why we have such remarkable, talented, and dedicated employees. The Work-Life dimension includes benefits for personal and family development:

Tuition Reimbursement

Perrigo will reimburse your education costs up to \$5,250 per calendar year (adjusted for part-time employees). Review the Tuition Reimbursement Program on the Perrigo Benefits Center for eligibility and benefits.

Dependent Scholarships

The Perrigo Foundation funds scholarships for dependent children of eligible employees, up to \$10,000 per year. Learn more at MyHR on Inside Perrigo.

Adoption Assistance

You may receive up to \$5,000 in financial help to use in adopting a new family member. Find the Adoption Assistance Form and details on the Perrigo Benefits Center.

Corporate Social Responsibility

Perrigo encourages all employees to be engaged with our community and be the best corporate citizen possible. Perrigo's Corporate Social Responsibility (CSR) keeps us engaged with our communities. Community Volunteering helps boost employee morale, builds trust and engagement, and strengthens our bond with our most important stakeholders. Visit Corporate Responsibility on Perrigo.com for more information on CSR investments and global activity.

Environmental

During the last five years, Perrigo has reduced its global Greenhouse Gas emissions by over 22%; some sites have also increased recycling by over 400%. Perrigo has set aggressive energy, water, and waste reduction goals. You can help us by participating in programs through your CSR or Environmental Health & Safety team for what to do at home.

Community

In addition to the \$3.1 million donated to our communities in 2019:

- The Perrigo Foundation donates \$100 for every 10 hours that you volunteer in the Caring 4 Communities program.
- Last year, over 50 colleagues taught business classes in local schools or provided one-on-one mentoring to local students in the company's formal volunteer programs.
- Hundreds more participated in team-based or informal volunteer events.

Join us. Volunteering can help develop your skills, expand your network, and broaden your world view. Contact your supervisor or HR for volunteering opportunities.



Diversity and Inclusion

Diversity can be defined as the many ways we are similar and different, while inclusion refers to our sense of belonging.

By placing priority on Diversity & Inclusion (D&I), Perrigo continues to be an employer of choice and enables us to better compete with self-care consumer packaged goods companies. Our goal is to create an environment where everyone can show up at work as their authentic self and feel included as part of a Perrigo team. Creating a diverse and respectful work environment produces the ideal conditions for sharing creative ideas, building stronger teams, and getting employees to fully contribute their talents to our organization's vision.

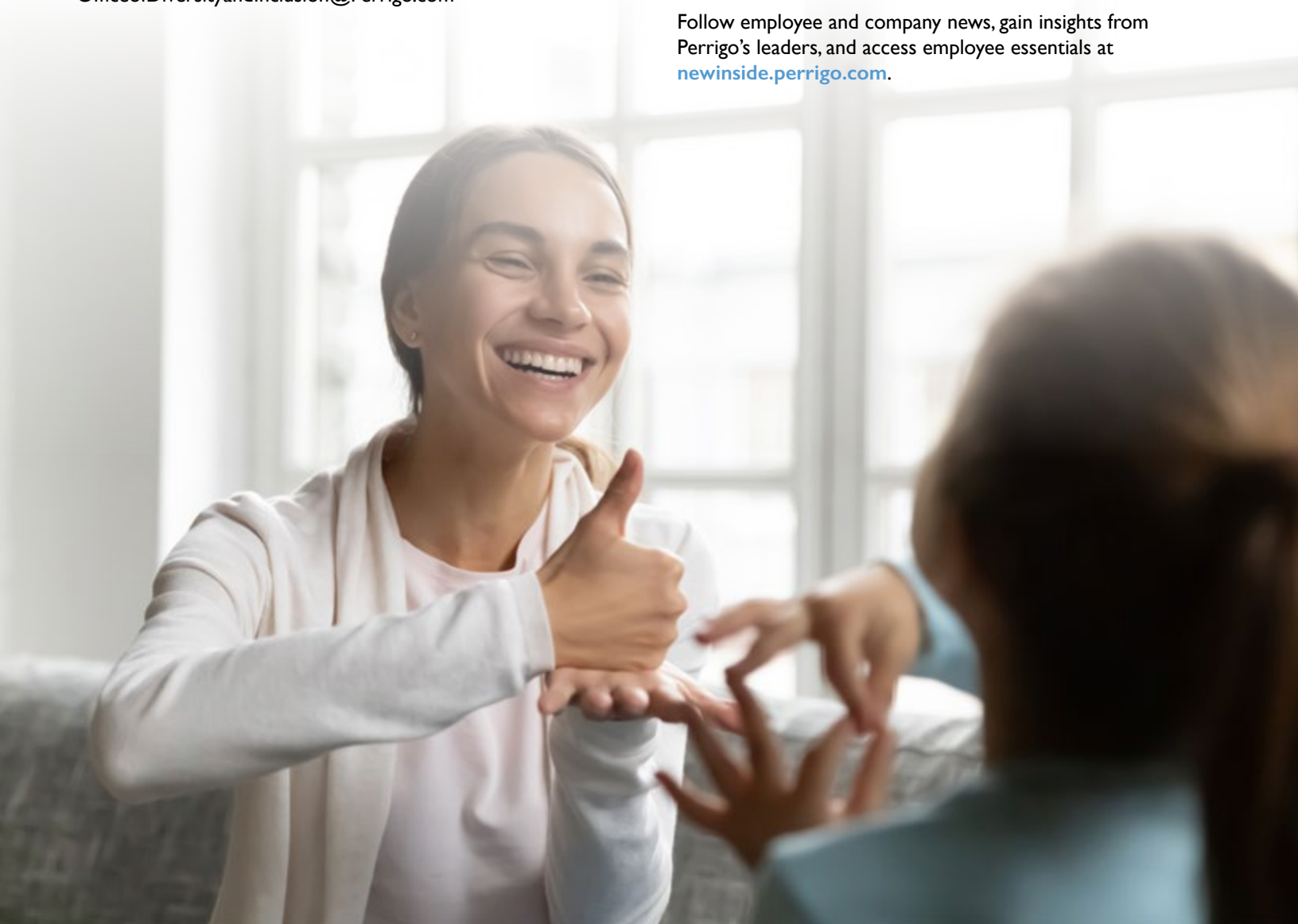
Since 2019, our Global Diversity & Inclusion Committee has initiated an active discussion of what "inclusion" means, recognized Pride Month globally for the first time, and continued supporting our Black Community and allies during times of social unrest. This has resulted in Men's Health magazine recognizing our "Movember" campaign.

TOGETHER, we make lives better.

To learn more about the Diversity & Inclusion's strategic direction, email:
OfficeofDiversityandInclusion@Perrigo.com

Inside Perrigo®

Follow employee and company news, gain insights from Perrigo's leaders, and access employee essentials at newinside.perrigo.com.



Benefits Eligibility

Employee Eligibility

You are eligible to elect benefits if you are regularly scheduled to work 30 or more hours a week.

Dependent Eligibility

If you enroll in a healthcare plan, you can add your:

- Legally married spouse
- Children up to age 26 if they are your:
 - Biological children
 - Legally adopted children or children placed with you for adoption
 - Stepchildren (your children or your legal spouse's children)
 - Children who reside with you and for whom you are appointed by the court as their legal guardian
 - Children covered under a medical support court order
 - Children of any age if they are certified as disabled before age 26. Please discuss with BCBSM for additional information.

If You Are Enrolling Your Spouse in a Medical Plan

You will need to certify if your spouse is eligible for their employer's medical plan. If so, a surcharge will be added to your paycheck contribution. See the spousal table footnote on page 8 for the surcharge amount.

Verifying Eligibility

If you enroll due to a life event and/or add your spouse and/or dependents, you will receive a Verification Request form to your address on file. Please respond by the listed deadline or your enrollment will be marked as "incomplete" and will be reversed. COBRA continuation of coverage will not be available.

Enrollment Deadlines

The deadlines to enroll are:

- 30 days from your hire or eligibility date
- 31 days from the date of a qualified life event, such as marriage, birth, divorce, or gain/loss of other coverage

For the 401(k) Plan: As a new hire or if newly eligible, you will automatically be enrolled after 30 days. You may adjust your contribution and investment strategy at any time.

Additional information on eligibility can be found in the Perrigo Company Employee Welfare Benefits Plan, available on the Perrigo Benefits Center (benefitscenter.perrigo.com or by calling 800.974.5176).

Information on the 401(k) Plan can be found in the Perrigo Company Profit-Sharing and Investment Plan.



How to Enroll and Dependent Verification

Enroll at the Perrigo Benefits Center (PBC) in one of two options:

1. By calling the Perrigo Benefits Center (800.974.5176, Monday - Friday 8am - 7pm EST) to process your benefits enrollment over the phone (a language line is available)
2. On the Perrigo Benefits Center (benefitscenter.perrigo.com). Single sign-on is available from any computer or mobile device (if accessed outside of the Perrigo network, i.e., from a home computer, please use your Perrigo network user ID and password)

Note: The site is unavailable on Sundays in January - September 3am - 2pm EST and October - December 3am - 12pm EST

Contact the Perrigo Benefits Center to make benefit election changes, change beneficiaries for life insurance, process a qualified life event, or for answers to your questions.

Information You Need to Enroll

If you call the PBC, for confidentiality reasons, the customer service team will ask you questions to verify your identity. Additionally, whether calling or enrolling online, you will need:

- A valid email address. Note: Yahoo (@yahoo.com) and Google (@gmail.com) offer free email address set-up
- If you are enrolling a spouse and / or dependents, please have their social security numbers (or ITIN) available. Spouse and dependent names and SSN (or ITIN) need to be entered exactly as printed on the cards.
- A social security number will not be required for child(ren) under 3 months, but please update once the social security card is received.

While navigating through enrollment, be aware:

- Once you begin enrolling, please complete the process until you see a confirmation number Note: Your transaction history can be located on the enrollment home page in "Previous Confirmations"
- Please do not use the "back" or "forward" arrows on your browser as you may lose your progress, only use "Continue." You may edit elections on the Pre-Confirmation screen before submitting
- The Perrigo Benefits Center enrollment system will time-out after 15 minutes of inactivity and progress is not saved
- Please utilize the Perrigo Benefits Center customer service team if you have any questions (800.974.5176)

Once you complete your enrollment, please click Log Out (blue bar).

Spousal Surcharge

Please note, if you are paying the Spousal Surcharge, the amount will not appear on your Benefits Confirmation Statement, but will be applied through payroll deduction.

The Mercer team may send you a request to verify if your spouse is eligible for other medical coverage (this does not apply to Perrigo Spouse coverage). Please respond by the deadline noted in the letter or the Spousal Surcharge will apply and is non-refundable.

Verifying Dependent Information

When you sign into the Perrigo Benefits Center website, the system may ask you to verify your dependent information. This is part of an ongoing quality check.

Other considerations for spouse and dependent profiles are listed below:

- Children age 26 and over may not be added in the dependent section; you may add them as a beneficiary
- If your child is turning age 26, and is no longer eligible for coverage, Mercer will send a pre-notification to your address on file and will update the system on your behalf

What to Expect after You Enroll

Please check your confirmation statement for accuracy

ID and/or debit cards (as applicable) cards will be sent to your address on file (the Vision Plan does not have ID cards)

If you enroll in the CDH Plan, Perrigo will contribute to your Health Savings Account within 60 days, if eligible

Changing Elections after You Enroll

After the enrollment period ends, you cannot change your benefit elections unless you have a qualified life event, which includes:

- Marriage, divorce, annulment, or legal separation
- Dependent is no longer eligible
- If your job status changes from part-time to full-time
- Losing or gaining other health coverage (you or your dependent)
- The birth, adoption or guardianship placement for adoption of a child
- Death of a spouse or dependent

Your change in election must be consistent with the life event. For example, if you get married, you can drop your medical coverage or add your spouse to your current coverage.

To change your benefit elections because of a qualified life event, go to the Perrigo Benefits Center within 31 days of the event. If you miss that deadline, your change cannot be processed. However, you can change your benefit elections during the next Open Enrollment period (unless you have another qualified life event). Contact the Perrigo Benefits Center if you have questions.

Mercer will follow-up with requests to verify your qualified life event and/or dependent relationships. Please respond by the deadlines noted, otherwise, your enrollment requests will be reversed (without a COBRA opportunity).

Enrolling in the 401(k) Plan

Newly hired or newly eligible employees are automatically enrolled 30 days after date of hire. This includes an automatic deduction from paychecks to start savings. You may opt out of enrollment and adjust contributions and investments at any time. Contact Vanguard for more information.

Important Information

Go to the Perrigo Benefits Center for a copy of the Perrigo Summary Plan Descriptions (SPDs) and Summary of Benefits & Coverage (SBCs) for more information on the following:

Special Enrollment: If you declined coverage for yourself or your dependents in the PPO or CDH Plan because of Medicaid coverage or coverage under a state children's health insurance program, you may be able to enroll yourself and your dependents in the PPO or CDH Plan if you or your dependents lose eligibility for the other coverage.

If you or your dependents become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under the PPO or CDH Plan, you may be able to enroll yourself and your dependents. However, you must request enrollment in connection with a loss of Medicaid coverage or state children's health insurance coverage or eligibility for premium assistance (as applicable) within 60 days from the date of the loss of coverage or the date of the determination of eligibility for premium assistance (as applicable).

If you declined coverage in the PPO or CDH Plan for you or your dependents because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in the PPO or CDH Plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage).

However, you must request enrollment within 31 days of when your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage). In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days of the marriage, birth, adoption, or placement for adoption event. To request special enrollment or obtain more information, contact the Perrigo Benefits Center at 800.974.5176.

Health Insurance Portability and Accountability Act of 1996

(HIPAA): Under the HIPAA privacy regulations, the Perrigo health plans are required to protect the privacy and security of your protected health information. A copy of the Plan's Notice of Privacy Practices can be found on the Perrigo Benefits Center or requested by contacting your Perrigo Benefits Center at 800.974.5176.

Notice Regarding Wellness Program: **HEALTHYyou** is a voluntary wellness program available to all eligible employees and spouses who are enrolled in a Perrigo medical plan. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others.

If you choose to participate in the wellness program, you will be asked to complete a voluntary well-being assessment or "WBBA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You are not required to complete the WBBA.

However, employees and spouses enrolled in a Perrigo medical plan who choose to participate in the wellness program will receive a medical premium discount (see the *Total Rewards Guide* on the Perrigo Benefits Center for discount details) for completion of Level I and Level II program guidelines. Although you are not required to complete the WBBA, it is a component of the wellness program, for those who wish to participate. You are eligible to receive a Partial Wellness Discount (Level I) or a Full Wellness Discount (Level II) based on the completion of program guidelines.

Incentives on your medical premiums are available if you participate in certain health-related activities (see the **HEALTHYyou** Guide on the Perrigo Benefits Center for discount details) or achieve certain health outcomes (Tobacco Free and meeting 2 of 4 Healthy Standards). If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting Limeade (**HEALTHYyou** administrator) at 855.439.4534 or via email at support@Limeade.com.

The information from your WBBA will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as health coaching.

You are encouraged to share the results or concerns with your doctor.

Note that you and your spouse are required to adhere to the online conduct rules of the Perrigo wellness program, found in the Limeade Terms of Service.

Protections from Disclosure of Medical Information: We are required by law to maintain the privacy and security of your personal identifiable health information. Although the wellness program and Perrigo, Inc. may use aggregate information it collects to design a program based on identified health risks in the workplace, **HEALTHYyou** will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you, that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personal identifiable health information are the wellness program administrator (Limeade), the health coaching administrator (Aduro), and other third-party vendors as deemed necessary by the employer in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Additionally, we comply with HIPAA and Privacy requirements with respect to such information. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Perrigo Benefits Center at 800.974.5167 Monday-Friday between 8 a.m. and 7 p.m., EST.

Newborns' and Mothers' Health Protection Act: Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

Women's Health and Cancer Rights Act of 1998: Federal law requires under the Women's Health and Cancer Rights Act, and subject to all Welfare Program provisions, that a group health plan provide coverage for the following services to an individual receiving plan benefits in connection with a mastectomy:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce symmetrical appearance; and
- Prostheses and treatment for physical complications of all stages of mastectomy, including lymphedema (swelling associated with the removal of lymph nodes).

The group health plan must determine the manner of coverage in consultation with the attending physician and patient. Coverage for breast reconstruction and related services will be subject to deductibles and coinsurance amounts that are consistent with those that apply to other benefits under the plan. If you would like more information on these benefits, contact bcbsm.com or 866.684.8213.

Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP): If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these

programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren’t already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

Alabama – Medicaid Website: http://myalhipp.com/ Phone: 1-855-692-5447	COLORADO – Health First Colorado (Colorado’s Medicaid Program) & Child Health Plan Plus (CHP+) Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: https://www.colorado.gov/pacific/hcpf/child-health-plan-plus CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program HIBI Customer Service: 1-855-692-6442
ALASKA – Medicaid The AK Health Insurance Premium Payment Program Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	FLORIDA – Medicaid Website: http://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162 ext 2131
ARKANSAS – Medicaid Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	GEORGIA – Medicaid Website: https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162 ext 2131
CALIFORNIA – Medicaid Website: https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_cont.aspx Phone: 916-440-5676	INDIANA – Medicaid Healthy Indiana Plan for low-income adults 19-64 Website: http://www.in.gov/fssa/hip/ Phone: 1-877-438-4479 All other Medicaid Website: https://www.in.gov/medicaid/ Phone 1-800-457-4584
IOWA – Medicaid and CHIP (Hawki) Medicaid Website: https://dhs.iowa.gov/ime/members Medicaid Phone: 1-800-338-8366 Hawki Website: http://dhs.iowa.gov/Hawki Hawki Phone: 1-800-257-8563	MONTANA – Medicaid Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084
KANSAS – Medicaid Website: http://www.kdheks.gov/hcf/default.htm Phone: 1-800-792-4884	NEBRASKA – Medicaid Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178
KENTUCKY – Medicaid Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPPPROGRAM@ky.gov KCHIP Website: https://kidshealth.ky.gov/Pages/index.aspx Phone: 1-877-524-4718 Kentucky Medicaid Website: https://chfs.ky.gov	NEVADA – Medicaid Medicaid Website: http://dhcfp.nv.gov Medicaid Phone: 1-800-992-0900
LOUISIANA – Medicaid Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)	NEW HAMPSHIRE – Medicaid Website: https://www.dhhs.nh.gov/oii/hipp.htm Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218

MAINE – Medicaid	NEW JERSEY – Medicaid and CHIP
Enrollment Website: https://www.maine.gov/dhhs/ofi/applications-forms Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applications-forms Phone: -800-977-6740. TTY: Maine relay 711	Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamcare.org/index.html CHIP Phone: 1-800-701-0710
MASSACHUSETTS – Medicaid and CHIP	NEW YORK – Medicaid
Website: http://www.mass.gov/eohhs/gov/departments/masshealth/ Phone: 1-800-862-4840	Website: https://www.health.ny.gov/health_care/medicaid/ Phone: 1-800-541-2831
MISSOURI – Medicaid	OREGON – Medicaid
Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005	Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075
MINNESOTA – Medicaid	NORTH CAROLINA – Medicaid
Website: https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp Phone: 1-800-657-3739	Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100
MISSOURI – Medicaid	NORTH DAKOTA – Medicaid
Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005	Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-844-854-4825
OKLAHOMA – Medicaid and CHIP	UTAH – Medicaid and CHIP
Website: http://www.insureoklahoma.org Phone: 1-888-365-3742	Medicaid Website: https://medicaid.utah.gov/ CHIP Website: http://health.utah.gov/chip Phone: 1-877-543-7669
OREGON – Medicaid	VERMONT – Medicaid
Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075	Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427
PENNSYLVANIA – Medicaid	VIRGINIA – Medicaid and CHIP
Website: https://www.dhs.pa.gov/providers/Providers/Pages/Medical/HIPP-Program.aspx Phone: 1-800-692-7462	Website: https://www.coverva.org/hipp/ Medicaid Phone: 1-800-432-5924 CHIP Phone: 1-855-242-8282
RHODE ISLAND – Medicaid and CHIP	WASHINGTON – Medicaid
Website: http://www.eohhs.ri.gov/ Phone: 1-855-697-4347, or 401-462-0311 (Direct Rlte Share Line)	Website: https://www.hca.wa.gov/ Phone: 1-800-562-3022
SOUTH CAROLINA – Medicaid	WEST VIRGINIA – Medicaid
Website: https://www.scdhhs.gov Phone: 1-888-549-0820	Website: http://mywvhipp.com/ Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)
SOUTH DAKOTA – Medicaid	WISCONSIN – Medicaid and CHIP
Website: http://dss.sd.gov Phone: 1-888-828-0059	Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002
TEXAS – Medicaid	WYOMING – Medicaid
Website: http://gethipptexas.com/ Phone: 1-800-440-0493	Website: https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/ Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since July 31, 2020, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
 Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
 1-866-444-EBSA (3272)

& Medicaid Services
www.cms.hhs.gov
 1-877-267-2323, Menu Option 4, Ext. 61565

U.S. Department of Health and Human Centers for Medicare

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

Summary of Material Modifications

This document is intended to highlight certain benefits available to eligible Perrigo employees. It does not include all benefit plan rules and details. For additional information about plan details, refer to the applicable summary plan descriptions (SPDs). If there are any inconsistencies between this document and the official plan documents, the plan documents control. To obtain copies of the plan documents, see your benefits representative.

These annual enrollment materials also constitute a summary of material modifications to the summary plan descriptions for the Perrigo Summary Plan Descriptions, effective January 1, 2021.

Perrigo reserves the right to change or discontinue any or all of its benefits programs or to change the cost of coverage at any time for any reason. Receiving this document is not a guarantee of employment or eligibility for benefits.

Notes

Benefit Contacts

Benefit	Vendor	Website	Phone	Group
Perrigo Benefits Center	Mercer	benefitscenter:perrigo.com	800.974.5176	
Medical	Blue Cross Blue Shield of Michigan	bsbsm.com	866.684.8213	71350
Health Savings Account	Optum Bank	optumbank.com	844.326.7967	
Prescription Drugs	CVS Caremark	caremark.com	800.552.8159 Prior Authorization: 800.294.5979	
Specialty Rx	PrudentRx	caremark.com	800.578.4403	
Diabetes Care	Livongo	welcome.livongo.com	800.945.4355	Perrigo
Hypertension	Livongo	welcome.livongo.com	800.945.4355	Perrigo
HEALTHYyou Program	Limeade	perrigo.limeade.com	855.439.4534	
Mindfulness	Whil (Limeade)	perrigo.limeade.com	855.439.4534	
Telemedicine	Blue Cross Blue Shield of Michigan	bcbsmonlinevisits.com	844.606.1608	
Nurseline	Blue Cross Blue Shield of Michigan	bcbsm.com	800.775.2583	
Chronic Condition Management	Blue Cross Blue Shield of Michigan	bcbsm.com	800.775.2583	
Transparency Tool	Healthcare Bluebook	healthcarebluebook.com/cc/perrigo	800.341.0504	
Dental	Delta Dental of Michigan	deltadentalmi.com	800.524.0149	
Vision	VSP Vision Care	vsp.com	800.877.7195	
Employee Assistance Program	Magellan Health	magellanascend.com	800.424.3506	Perrigo
Retirement Plan	Vanguard	vanguard.com/retirementplans	800.523.1188	099087
Retirement Plan Financial Advisors	Stifel Pearl Street Investment Mgmt	pearlstreetinvestmentmanagement.com	844.854.5846	
Flexible Spending Accounts	Discovery Benefits	discoverybenefits.com	866.451.3399	
Life Insurance	Reliance Standard	reliancestandard.com	800.351.7500	
Short Term Disability	Matrix	matrixabsence.com	877.202.0055	
Long Term Disability	Reliance Standard	reliancestandard.com	800.351.7500	
Identity Theft Protection	ID Watchdog	idwatchdog.com	800.970.5182	
Pet Discount Program	Pet Assure	petassure.com	888.789.PETS (7387)	
Dependent Verification	Mercer	dependentverification.mercer.com/ Perrigo	866.962.6369	
Perrigo Medical Center	Premise Health	mypremisehealth.com	269.673.9000	
Fitness Funds	Perrigo Rewards	Benefitscenter:perrigo.com	800.974.5176	
Adoption Assistance	Perrigo Rewards	Benefitscenter:perrigo.com	800.974.5176	
Tuition Reimbursement	Perrigo Rewards	Benefitscenter:perrigo.com	800.974.5176	
Caring 4 Communities	Perrigo Charitable Foundation	Inside Perrigo>Perrigo Perks	269.686.1840	
Diversity and Inclusion	Email: OfficeofDiversityandInclusion@Perrigo.com			
COBRA Administrator	Discovery Benefits	discoverybenefits.com	866.451.3399	
Auto & Home Group Insurance	MetLife	metlife.com/mybenefits	800.GETMET8 (800.438.6388)	Perrigo
Legal Services	Hyatt Legal Services	info.legalplans.com	800.821.6400	6090646
Critical Illness & Cancer	ManhattanLife	manhattanlife.com	855.448.6982	
Accident Coverage	ManhattanLife	manhattanlife.com	855.448.6982	

To make lives better by bringing *Quality, Affordable Self-Care Products™* that consumers trust everywhere they are sold



Empowering Your Self-Care

Global Total Rewards – Benefits

Perrigo Benefits Center (PBC)
benefitscenter.perrigo.com
800.974.5176, Mon-Fri: 8 am-7 pm EST