Medical Coverage

Understanding the Medical Plan
Diageo provides you with a choice of medical options with varying coverage levels, deductibles, out-of-pocket maximums and per-paycheck contributions. The Company pays the majority of the cost of services.

Please review carefully so you understand each of the options and select the one that best meets your needs and the needs of your family.

The UnitedHealthcare Provider Network
Our primary medical carrier – UnitedHealthcare (UHC) – maintains a provider network with 490,000 primary care physicians and specialists, and more than 5,000 hospitals. You can use Find-a-Doctor, the UHC online provider directory, to find network providers near you. Just visit www.myuhc.com, look under “Find a Doctor” > “Find Physicians and Facilities” and fill in the requested information. The UHC provider directory lets you search for doctors, hospitals, facilities and other providers, as well as providers of medical equipment and supplies. You can search for a specific doctor, all doctors in a given area, specialists, doctors recognized by the National Committee for Quality Assurance (NCQA) and more. You can also refine your search by gender and language preferences.

Your UHC Options
Your options include:

- UHC Consumer Driven Health Plan A (CDHP Plan A)
- UHC Consumer Driven Health Plan B (CDHP Plan B) (New for 2018)
- UHC Plan 90

IMPORTANT: UHC Plan 100 and UHC HMO Will Not be Offered in 2018
As previously announced, the UHC Plan 100 and UHC HMO will no longer be offered as of January 1, 2018. If you are currently enrolled in either of these plans you will need to make an active election to another plan or you will be automatically enrolled in CDHP Plan A with “Employee Only” coverage for 2018.

The UHC Consumer-Driven Health Plans
The UHC CDHP options give you the opportunity to manage how you spend your health care dollars. There are two parts to a CDHP – the medical plan that is offered through UHC, and the Health Savings Account (HSA) offered through Fidelity. In order to have an HSA, you need to be enrolled in a specific type of medical plan – or a “qualified CDHP.” The UHC Consumer-Driven Health Plan is a qualified plan. If you are new to the plan for 2018, an HSA will be automatically opened for you at Fidelity.

Why do I want a Health Savings Account?
- Diageo will contribute to your HSA in a lump sum at the beginning of the year – $500 if you elect employee coverage; $1,000 if you elect family coverage (this is prorated if enrolling during the year).
- You pay no taxes on amounts you contribute to your HSA or on Diageo’s contribution (up to annual limits set by the IRS – $3,450 for employee coverage and $6,850 for family coverage).
- If you are age 55 or older, you can contribute an additional $1,000 to your HSA.
• As long as you use the money in your HSA to pay eligible medical expenses, the money is never taxed.
• Any amounts remaining in your HSA at year-end carry over and build tax-free. There’s no limit on the amount you can accumulate and the account is yours to keep even if you leave Diageo.
• You can use your HSA dollars to pay future expenses, including expenses you may incur during retirement – even if you are no longer enrolled in the HSA Plan.

We encourage you to review the IRS Guidelines for Health Savings Accounts under the “Important Legal Notices” section of the microsite, www.DNAtotalrewards.com. If you are age 65 or older, we encourage you to talk with your tax advisor to determine if this plan is right for you.

The UHC Plan 90
Beginning January 1, 2018, you will continue to have access to the UHC Plan 90; however, you will no longer pay a copay for services. Instead, all services will be subject to the deductible and coinsurance.

Coinsurance means you will pay a percentage of each medical visit after you meet the deductible. Generally, after you meet your deductible, you will pay 10% of services offered by in-network providers and 30% of services offered by out-of-network providers. All other services and plan details will remain unchanged.

UHC Advocate 4Me
UHC has a team of people dedicated to help you with questions about your medical plan. From understanding your claims to estimating costs ahead of time, they can help. If you are considering bariatric surgery or fertility-related services, you will need to call UHC and register so you can receive plan benefits. You will be assigned to a nurse consultant who will review your care needs and help you select an approved provider. To learn more, you can contact the UHC Advocate4Me at 1-888-697-9063 from Monday through Friday during business hours or send them an email to Advocate4Me@UHC.com.

Aetna International Benefits Expatriate Medical Plan
If you are an expatriate, you are eligible to participate in the Aetna International Benefits Expatriate Medical Plan. For more information, call 1-800-231-7729 (or use AT&T’s international toll-free service calling instructions), or log on to www.aetna.com/agb/.

How Do I Choose?
Diageo gives you a variety of medical options to choose from, so it’s up to you to enroll in the plan that best suits your needs. To decide there are several things you should consider:

• Look at your general level of health. Are you and your family members in good health? Do you eat right and exercise?
• Review how frequently you use medical services. How many times do you and your family members generally go to the doctor in a year? Is there a specialist one of you sees on a regular basis? How many prescriptions do you fill each year?
• Think about your anticipated needs for 2018. Are you expecting a baby or any other type of planned hospitalization?
• Compare the coverage that Diageo offers with other coverage available to you. Is another group’s medical plan available to you, such as through your spouse’s or domestic partner’s employer.
For assistance with your medical plan decision, use the UHC Plan Cost Estimator tool, which will be available during Open Enrollment on www.diageo.welcometouhc.com under “How much will my plan cost me” section. Simply enter some general information about your family’s health care needs for the coming year, and the tool will do the rest.

Express Scripts Prescription Drug Plan under the UHC Options

There is one prescription drug plan offered for our UHC plans through Express Scripts. This policy makes elections easier, and ensures that you and your family are receiving a comprehensive prescription plan. The following prescription drug coverage is included with your medical election, regardless of which plan you choose.

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<tr>
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Things to remember about the prescription plan

- **Generic vs. Brand-Name Prescription Drugs.** Many of the drugs on Tier 1 are what are called “generic” drugs. These are approved by the Food and Drug Administration (FDA) as equivalent to brand name drugs. They have the same active ingredients, are proven to be equally effective and cost less – so make sure to discuss your alternatives with your doctor. If he or she thinks a generic drug is appropriate for you, you’ll pay less for your prescription.

- **Step Therapy** programs are in place for some prescriptions. You will be required to begin with a Tier 1 medication before receiving a Tier 2 or 3 medication. Tier 1 medications are in many cases just as effective and can be less expensive for both you and the company. If the Tier 1 medication does not work, or your physician wants to have you on another medication, you will be transitioned to find the best match for your situation.

- **Prior Authorization** will be in effect to help prevent improper use of prescription drugs that may not be the best choice for your health condition. Be sure to give yourself extra time at the pharmacy to allow the pharmacist to complete the authorization process with your insurance company and ensure your prescription is medically valid.

Be sure to carefully review the 2018 Medical Comparison for additional details.