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General Enrollment & Cost Saving Tips

When will my Health & Welfare benefits with Jabil go into effect?

Your Health & Welfare benefits with Jabil will be effective July 1, 2025.

When is my benefits enrollment period?

May 28 - June 12, 2025.

When will my payroll deductions begin?

Benefit elections that require an employee contribution (i.e., medical coverage), your payroll deductions begin the first pay date following your benefits effective date. Any missed payroll deductions or adjustments will be automatically calculated by bswift.

How do I enroll for my Health & Welfare benefits with Jabil?

You can enroll online through the Jabil Benefits Service Center:

- <u>jabilbenefits.bswift.com</u>
 - Username: Your employee ID@jabil.com (e.g., <u>123456@jabil.com</u>) Reminder it's your Jabil WorkDay ID
 - Password: Last 4 digits of your Social Security Number
- Call the Jabil Benefits Service Center at 877.525.2363 (877.JBL.BENE) 8:00 a.m. 8:00 p.m. ET, M F
- bswift Mobile App download in the App Store or in Google Play

What can I do to keep my costs down?

Medical costs continue to be a challenge for all of us, but Jabil is committed to offering you the best benefits experience possible. Jabil also provides ways to help you pay for your benefits. You can help keep your costs down when you:

- Choose the right medical plan for you.
 - Healthcare needs tend to change over time, the medical plan you choose is an important decision each year.
 - Take time to learn more about your choices how they work and features unique to each option before making a choice. That way, you will choose the plan that best fits your individual healthcare needs and budget.
 - If you choose Healthy Plus with HSA or Healthy Premier with HRA, Jabil contributes to your account.
- Earn wellness incentives. Earn up to \$250 when you complete:
 - Health Assessment (\$125)
 - Health Screening through your doctor (\$125)
 - Plus earn up to \$250 more if your spouse is covered by a Jabil medical plan and completes the same activities.
- **Get your preventive care.** Once you choose a medical plan, take advantage of all its features, including preventive care, which can help identify medical issues early and before they become more costly to treat. In-network preventive care is 100% covered by Jabil medical plans, if coded as preventive and meets Aetna guidelines.
- Receive incentives under the Voluntary plans. If you are nrolled in Accident, Critical Illness, and/or Hospital Indemnity Insurance coverage, you can earn \$50 for completing health screenings and tests. This benefits is available to everyone enrolled you, your spouse, and dependent children.
- Use Health Advocate. Get guidance navigating the healthcare system, making informed decisions, even finding lower cost services. Call 866.695.8622 or go to HealthAdvocate.com/jabil (first time user registration code: U7LMHQQ, Organization: Jabil Inc.).
- Use Resources for Living: You and your family members get free confidential access to professional counseling together with work/life support, including advice for financial and legal issues, family and relationships, and more. The dedicated Resources for Living team will answer your calls 24/7. You are eligible for up to 8 free, confidential counseling visits per topic a year. And because Resources for Living is part of Aetna, they will seamlessly refer you to resources under your Jabil medical plan when you need them to.

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Where can I get answers to my benefits questions?

For questions about:

- **Healthcare benefits** Contact the Aetna Concierge Member Services at 833.361.0224 or the Jabil Benefits Service Center at 877.525.2363 (877–JBL–BENE). You can also contact Health Advocate at 866.695.8622 or go to HealthAdvocate.com/jabil (first time user registration code: U7LMHQQ, Organization: Jabil Inc.).
- Other benefits Contact the Jabil Benefits Service Center at 877.525.2363 (877-JBL-BENE).

Does Jabil offer resources to help me find healthcare providers?

Yes, Health Advocate is a *free* service for all benefit-eligible employees and their family members. This resource can help find a provider, schedule appointments, get a second opinion, find answers to questions about test results and medications, and review claims and billing issues.

- Call 866.695.8622.
- Go to <u>HealthAdvocate.com/members</u> (Organization: Jabil Inc.).
- Email answers@HealthAdvocate.com.

You can also use Aetna's Concierge Services. Call 833.361.0224, Monday – Friday, 8 a.m. to 6 p.m. in all time zones.

How do I learn more about each of the benefit plans and what specifically is included in them?

- See the Medical and Prescription Drug and the Health Tips pages on the digital <u>Benefits & Well-Being Guide</u> (https://acquisition.jabilbenefitsguide.com/).
- Visit the <u>Jabil Benefits Service Center at jabilbenefits.bswift.com</u> or call them at 877.525.2363 (877.JBL.BENE) 8:00 a.m. 8:00 p.m. ET, M F.
- More resources can be found on the Jabil's microsite through Aetna, which is available at this link.

What happens if I do not enroll for benefits?

If you do not enroll before your benefits effective date, you will only have coverage for Jabil provided benefits - short-term disability (STD), post-tax long-term disability (LTD), and Basic Life and Accidental Death and Dismemberment (AD&D) Insurance. You will not be allowed to make changes or new elections unless you have a qualified life event or until the next annual open enrollment period. You will still want to log onto bswift and name a beneficiary for your life insurance.

How do I update my personal information - name, address, phone number, email address?

All personal information must be updated in WorkDay. Once you have updated information in WorkDay, it is recommended to check your information in bswift 48 hours after updating in WorkDay.

How will I know I have completed my benefits enrollment?

You have completed your enrollment once you have reviewed all your selections and have agreed to the below acknowledgement. In addition, you will have the option to view, print and/or email your confirmation statement.

Once You've Reviewed All Your Selections:

Thereby acknowledge I have read the statements contained herein, or they have been read to me, and the statements are true and complies to the best of my knowledge. I understand any misrapresentation or mission contained herein may be used to reduce or deny a chain or void the contract if such misrapresentation or mission affects excepted or the rich knowledge of Internative Windows and February (alignment of Internative Windows) and the contract if such misrapresentation combision affects excepted or the rich was placed above are required, I authorize such deductions from my earnings and understand that any premiums will be automatically deduction from my paycheck on a pretar basis (if eligiblic) unless i submit a declination election.

I certify that the dependents listed satisfy the eligibility criteria for group benefit coverage. I know that I am responsible for removing any errolled despendents with the present the state of the contraction of the coverage is the state of the coverage of the provided operation of the coverage of the coverage is the state of the coverage of the coverage is the coverage.

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How do I navigate back in the Benefits Service Center portal?

Do not use the browser back arrow. Use the Back to Benefits navigation button.



Where do I set up my beneficiary information?

- Life insurance beneficiary designations are made on bswift.
- HSA beneficiary designations are made on WEX.
- 401(k) beneficiary designations are made on Merrill.

When and how can I make changes to my benefit elections?

You may change coverage during the year only if you experience a Qualifying Life Event (QLE) such as birth, marriage, or divorce. You have 30 days from the date of the event to make your change, and the change must be consistent with your life event. Otherwise, your next opportunity to make changes will be during the next annual enrollment period in fall 2025.

You are allowed to change your HSA payroll contribution at any time. Changes to your payroll contributions for HSA will become effective first of the month following the date you made the change. To make a change to your HSA payroll, see the Health Savings and Flexible Spending Account section of this document.

You can enroll in Pet Insurance at any time during the year.

Medical Benefits

How do the Medical plans work?

- Base PP0
 - You pay copays for primary care physician (PCP) and specialist visits.
 - You don't pay the deductible before prescription drug copays/coinsurance.
 - All other services are subject to deductible and coinsurance.
- Healthy Premier with HRA
 - A medical plan with a Health Reimbursement Account (HRA) funded with Jabil contributions. You can't contribute your own money to the HRA.
 - Your HRA pays for your first dollars spent on eligible medical and prescription drug expenses.
 - Expenses are applied to your annual deductible.
 - You don't pay the deductible before prescription drug copays/coinsurance.
 - Any money left in your HRA at the end of the year rolls over if you stay in Healthy Premier.
- Healthy Plus with HSA
 - A high-deductible medical plan with a Health Savings Account (HSA), you will pay the negotiated cost before any medical expenses are paid by the plan.
 - Preventive care is covered at 100%, no deductible.
 - Prescriptions are subject to the deductible, and you pay the full cost of the drug until you have met the deductible. Once you meet the deductible, then you pay 20% of the cost. Preventive prescription drugs are covered at 100% without having to meet your deductible.
 - Jabil contributes toward the HSA a prorated amount based on the month you open your account:
 - \$750 for single
 - \$1,500 for family
 - You may also choose to contribute to your HSA, up to IRS limits. Jabil's contributions and your contributions all count toward the IRS limit. Medicare entitlement may affect eligibility to make or receive HSA contributions.

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- Use the HSA to pay for eligible healthcare expenses for you, your spouse, and your tax dependents (even if they're not enrolled in the medical plan).
- Your HSA is yours to keep for future eligible expenses even if you change medical plans or jobs or retire.

Where can I get help choosing the right benefit plans for my situation?

Emma, bswift's virtual assistant, asks you some simple questions, and then suggests medical plan options — along with their costs— based on what you tell her. To learn more about Healthy Plus with HSA, check out the <u>HSA Learning Map</u> available on the digital <u>Jabil Benefits Guide</u>. Also review why <u>3 employees like you</u> choose the plan they enrolled in.

How can I learn more about my medical plan choices?

See the Medical and Prescription Drug and the Health Tips pages on the digital Jabil Benefits Guide.

When will I receive my medical ID cards?

Medical ID cards will be mailed to your address located in WorkDay within 30 days of your effective date. If you need an ID card, you can create your Aetna account at http://aetna.com/, login, and download a copy of your card.

Does Jabil offer virtual care?

Yes. If you are enrolled in a Jabil medical plan, you can use Teladoc services for doctor's visits, specialists, or urgent care. Call 855.835.2362 or go to www.Teladoc.com/Aetna.

What other resources does Aetna offer?

- MinuteClinic® is available at some CVS Pharmacy locations that offer services for things like minor illnesses and injuries, skin conditions, annual wellness exams, physicals, flu shots vaccinations and injections. Go to www.cvs.com/minuteclinic to find a location and make an appointment.
- Nurseline is a 24-hour phone service you can call to discuss symptoms, medication, and side effects. Call 800.556.1555.

Aetna's Concierge Services is available for anyone covered under a Jabil medical plan. This service can help you find the right specialist, find out about what is covered under your plan, and provide guidance based upon certain diagnosis. Call 833.361.0224, Monday – Friday, 8 a.m. to 6 p.m. in all time zones.

Pharmacy Benefits

What is the PrudentRx (does not apply to the Healthy Premier Plan - HRA) program?

Jabil partners with PrudentRx to save you money on certain specialty medications. The PrudentRx team will work with drug manufacturers and members to obtain manufacturer copay card assistance, and if you take a specialty medication that is part of the PrudentRx program you will be contacted by PrudentRx to enroll in the program. Once enrolled, you will pay \$0 for your specialty medication (members who are enrolled in Jabil's Healthy Plus with HSA plan will pay \$0 for their specialty medication after they meet their plan's deductible). Once contacted by PrudentRx, if you choose to opt-out of the program, of if you do not enroll in the program, you will be responsible for the full cost share of your specialty medication.

If I missed my enrollment into the PrudentRx program, how do I contact them to begin?

You can reach a PrudentRx Member Advocate by calling 800–578–4403, Monday through Friday from 8:00 a.m. to 8:00 p.m. ET. Eligibility for this program is based on certain covered specialty medications. Medications on the PrudentRx specialty drug list may change at any time, with or without notice. This program does not apply to the Healthy Premier Plan – HRA.

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Where can I find the Formulary list for Pharmacy?

You can access the Aetna formulary, or drug list, from the Aetna member portal. The formulary is also linked from Jabil's microsite, which is available at this link. Scroll down and click on "Pharmacy Formulary Guide" to view the drug list.

Dental Benefits

Is orthodontia covered for adults?

Yes, adult and child(ren) are covered at 50% with a lifetime Maximum of \$1,500 per person.

If I currently have braces or Invisalign paid with my current employer's plan, will that be covered with the Aetna Dental plan?

Dental care you are receiving before you enroll in the plan, is not covered. Limitations, waiting periods, and exclusions may apply for certain other services. Contact Aetna directly for further review of your covered services.

Is there a website to look up participating providers for Dental?

The dental plan is with Aetna. Go to <u>www.aetnadental.com</u>. You will need to be signed up for Dental to use provider search on the website. Or you can call your provider and ask if they are an "in-network" provider with Aetna Dental.

Vision Benefits

Is there a website to look up participating providers for Vision?

Both vision plans are with Aetna. Go to <u>www.aetnavision.com</u> > click on find a provider > enter zip code and start searching. (no need to sign in or register to view the public provider locator).

Well-Being Resources

Does Jabil have a Wellness Program and how does it work?

Yes, Jabil's Wellness Program is through Asset Health. All employees (except contingent workers) and their dependents may participate. Employees and spouses enrolled in a Jabil medical plan can take part in the Wellness incentive program.

What are the Wellness Incentives earned through Asset Health?

If enrolled in the Jabil medical plans, you are eligible to earn \$125 for completing the health assessment and \$125 for submitting your annual health screening from your doctor. In addition, your enrolled spouse can receive \$125 for completing the same activities.

Where your incentives go depends on your medical plan election:

- Base PPO > Cash amount paid out in your paycheck (amount you earn is taxable.) Processed bi-weekly.
- Healthy Premier > Health Reimbursement Account (HRA). Deposited into your HRA account with Aetna monthly.
- Healthy Plus > Health Savings Account (HSA). Deposited into your HSA account with WEX bi-weekly.

How do I navigate back in the Asset Health portal?

Do not use the browser back arrow. Use the tabs at the top of the page.

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Does Asset Health have a Mobile App?

Yes, download Asset Health Mobile from the <u>App Store</u> or <u>Google Play</u>. Open the app, tap Begin Activation, then follow the instructions to enter the authorization token and the email address associated with your wellness account. (You will need to sign into your wellness account on your desktop or mobile device to complete the authorization process.) Set your four-digit PIN. You will use this PIN to access your mobile app from now on.

May I set-up my fitness device with Asset Health?

Yes. Please refer to the instructions under Program Guide on the Asset Health portal.

Does Jabil offer an EAP?

Yes, Jabil uses Aetna's Resources for Living. Call 833-657-2097 to talk with a Resources for Living counselor 24/7. Employees can receive up to 8 free mental health visits per topic through Resources for Living. Resources for Living can also help find a provider in the Aetna network if more visits are needed.

Go to the Resources for Living website at www.resourcesforliving.com/login for more resources.

Username: JabilPassword: EAP

Is Aetna Resources for Living - EAP available to all Jabil employees?

No. The EAP is only available to Benefit Eligible employees – only full-time. This excludes part-time, temporary, interns, and contingent workers.

How many mental health visits are available through Jabil's EAP, Resources for Living?

Employees can receive up to 8 free mental health visits per topic through <u>Resources for Living</u>. Resources for Living can also help find a provider in the Aetna network if more visits are needed.

Username: JabilPassword: EAP

Life and AD&D Insurance

How much in Basic Life do I receive?

Upon initial enrollment, Jabil automatically provides you with Basic Life and Accidental Death and Dismemberment. Coverage is equal to 2.5x your base annual earnings, up to \$500,000. This benefit is provided at no cost to you.

Why am I seeing a charge for my Basic Life insurance coverage provided by Jabil?

Currently, the IRS excludes from taxes the first \$50,000 of coverage under a group-term life insurance policy that is paid for by an employer. If the total amount of your basic life insurance exceeds \$50,000, the imputed cost of the coverage more than \$50,000 must be included as income and is subject to Social Security and Medicare taxes.

As a New Hire, how much Supplemental Life can I elect without having to provide a Statement of Health (SOH)?

You can elect up to 5x your base annual earnings, up to a maximum of \$400,000 without completing a SOH. You can elect for your spouse up to \$35,000 without a SOH. Electing or increasing during annual enrollment will require a SOH.

If I decline Supplemental Life coverage as a new hire but elect it during the annual enrollment period, will I be subject to a SOH?

Yes, if you decline Supplemental Life coverage as a new hire and decide to elect it during the annual open enrollment

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period, you will be required to complete a SOH. Coverage does not go into effect until the SOH is approved.

What is a Statement of Health (SOH)?

A SOH is a form asking questions about your medical history. MetLife will use this form to determine if your increase in life insurance is approved or denied.

Does the SOH require a doctor's visit?

Not typically; however, based on your SOH, you may be asked to complete a Physicians Statement (APS) form or a paramedical exam.

What is a paramedical exam and why would need one?

A paramedical exam is a physical exam, arranged by MetLife and performed by a medical professional, which includes taking blood samples and urine samples. It takes approximately 30 minutes, they come to you, and there is no cost to you.

Does my life insurance decrease at a certain age?

Yes, on or after turning 65, the amounts of your Basic Life Insurance, Supplemental Life Insurance, your Spouse Life Insurance, and Accidental Death and Dismemberment Insurance will be determined by applying a percentage from the below table to the amount of your insurance in effect on the day before your 65th birthday:

- Age 65 but less than 70 65%
- Age 70 but less than 75 45%
- Age 75 or older 25%

At what age does my dependent child life end?

Coverage for a dependent child ends on the day the child turns age 26.

What information do I need to provide to set up my beneficiary(ies) for my Life insurance?

The only information that is required when adding a beneficiary is the Relationship and the Name.

Disability Insurance

How can I find out more information on disability insurance at Jabil?

Refer to the Disability Insurance section located on the digital Jabil Benefits Guide.

Dependents and Dependent Verification

Who can I cover as a dependent under my benefit plans?

You can enroll the following family members as dependents under the medical, dental and/or vision plans:

- Your spouse (opposite or same-sex spouse);
- Your dependent child(ren) through the end of the month in which they turn age 26;
 - Your child(ren) include:
 - Your natural child(ren);
 - Your stepchild(ren);
 - Your legally adopted child(ren);

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- Child(ren) placed with you during the adoption period or child(ren) not placed with you during the adoption period but for whom you have assumed legal obligation to support;
- Your grandchild when his/her parent is already covered as a dependent under this Plan; and
- Children for whom the medical plan must provide coverage under a Qualified Medical Child Support Order.

How long can I continue to cover my dependent child(ren) under my benefits?

Coverage for dependent child(ren) automatically ends at the end of the month they turn age 26 (unless they are disabled) except for the dependent child life which ends on the day the dependent turns 26.

May I add dependents to my coverage?

You can add dependents during your initial enrollment, during annual enrollment, or if you have a Qualifying Life Event (QLE).

Why do I need to provide documentation to verify my dependents?

Documentation is needed to verify your dependents to prove they meet the definition of a dependent that can be covered under the plan. This verification is required if electing coverage under the medical and/or dental plans. You have 30 days to provide documentation, or your dependents will not have coverage.

What documents are acceptable for dependent verification?

Dependent	Documentation Options to Verify Dependent		
Spouse	Most recent federal your spouse's name	Marriage Certificate, or tax return with both your name and	
	 Most recent federal your spouse's name within the last six m Statement; Lease/M Government-Issued joint ownership date Bank/Credit Card St Statement; Utility Bi 	the following combinations: tax return with both your name and and proof of joint ownership dated onths (ex. Bank/Credit Card lortgage Statement; Utility Bill), or Marriage Certificate and proof of ed within the last six months (ex. catement; Lease/Mortgage ill), or vernment-Issued Marriage	
Child(ren)	 Government-Issued Birth Certificate Hospital Birth Record (if the date of birth is vicoverage effective date) Adoption Certificate/Placement Agreement Document of Legal Guardianship/Custody 	 Most recent federal tax return with your child's name Government-Issued Birth Certificate Hospital Birth Record (if the date of birth is within 90 days of your child's coverage effective date) Adoption Certificate/Placement Agreement 	
Stepchild(ren)	Submit a copy of both of the following: Government-Issued Marriage Certificate Government-Issued Birth Certificate	Submit a copy of both of the following: • Government-Issued Marriage Certificate	

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Dependent	Documentation Options to Verify Dependent
	Document must list you and/or your verified spouse as the parent(s).
Grandchild(ren) Child(ren) of an employee's dependent child are eligible for coverage if the employee's dependent child is enrolled in Jabil's coverage.	 Submit a copy of one of the following: Most recent federal tax return of enrolled dependent child with your grandchild's name Government-Issued Birth Certificate showing enrolled dependent child as Mother or Father Hospital Birth Record showing enrolled dependent child as Mother or Father (if the date of birth is within 90 days of your grandchild's coverage effective date) Adoption Certificate/Placement Agreement of enrolled dependent child Document of Legal Guardianship/Custody of enrolled dependent child

To whom do I submit my dependent verification documents?

Upload your documents to the Jabil Benefits Service Center. Log on by visiting <u>jabilbenefits.bswift.com</u>. Once logged in, click on the Upload Documentation link under the Common Actions section of the Home Page. Be sure to select the correct type of document you are uploading and that your document is labeled correctly so it can be identified. Some documents may be reviewed by Al. Correctly labeling your document is critical to avoid your documents being denied.



Health Savings and Flexible Spending Accounts

Does Jabil offer Flexible Spending Accounts (FSA)?

Yes. Jabil offers a Healthcare FSA, a Limited Purposed Healthcare FSA and a Dependent Care FSA.

- Healthcare FSA All employees are eligible except those enrolled in the Healthy Plus plan. The IRS limits for 2025 are \$200 minimum and \$3,200 maximum.
- Limited Purpose Healthcare FSA only employees enrolled in the Healthy Plus plan can enroll in this FSA. The IRS limits are the same as the Healthcare FSA.
- Dependent Care FSA all employees are eligible to enroll in this FSA who have dependents that meet the eligibility criteria. The IRS limit is \$5,000 or \$2,500 if married and filing separate tax returns.

Will my current FSA balance be carried over to the Jabil FSA Plan? N_{O}

What happens if I do not want to contribute to the Health Saving Account (HSA)?

You do not have to contribute to the HSA; however, if you "waive" the HSA account instead of setting your contribution to \$0.00, you will also "waive" the Jabil employer contribution and will not be eligible to receive wellness incentives.

Does the HSA have an investment option?

Yes, once your balance reaches \$1,000, you may invest in a choice of investment options through Healthcare Bank. More information about these options can be found when you log into your <u>WEX</u> account.

If I have an HSA account today, can I rollover my balance to the HSA account with Jabil?

Yes, but you must first have an active HSA account with WEX, Jabil's HSA vendor. You will need to enroll in the HSA during your enrollment period.

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- Rollover contributions A rollover contribution is any amount distributed from one HSA and then contributed to another HSA of the same accountholder. The deposit into the second HSA must occur within 60 days after the distribution from the first HSA is received by the accountholder. If not, the distributed funds may be subject to an added 20% tax.
 - Only one rollover is allowed per HSA accountholder in a 12-month period, and the rollover cannot consist of funds other than the HSA distribution. When counting the days, include weekends and holidays. Rollover funds do not count against your annual HSA contribution limit or, if applicable, the HSA catch-up contribution for HSA accountholders who are 55 years of age or older.
 - To start a rollover, request a distribution from your current HSA custodian or trustee. Then complete one of the following options to contribute the funds to your WEX HSA:
 - If the distribution was by check, endorse the check received from your previous custodian over to WEX.

 Mail the endorsed check to us along with a completed Health Savings Account (HSA) Contribution Form.
 - Deposit the check you received from your previous custodian into a personal bank account. Write a
 personal check to WEX for your rollover. Mail the check to us along with a completed Health Savings
 Account (HSA) Contribution Form.
- Transfers A direct custodian-to-custodian transfer moves funds between HSAs without ever being distributed to the accountholder. You are allowed an unlimited number of custodian-to-custodian HSA transfers and are not limited to just one per 12-month period.
 - To start a transfer of funds from your current HSA to your WEX HSA, complete one of the following options:
 - Complete the Health Savings Account (HSA) Transfer Request Form and send it to your current custodian.
 - Complete and return the transfer form provided by your current custodian. The current custodian will then start the direct transfer of your HSA funds to WEX. If applicable, and unless otherwise directed in writing, any liquidation of non-cash assets in the current HSA will be completed by your current HSA custodian.
 - The Health Savings Account (HSA) Transfer Request Form can be obtained online from WEX once you have opened your account.

What is the verification process that is required to set-up my HSA account with WEX?

The USA Patriot Act requires all financial institutions to obtain, verify, and record information that identifies each individual who opens an HSA. An HSA is a savings account with a bank which requires this verification of identity.

WEX is required to verify a participant's name, street address, date of birth, and social security number (SSN). If WEX is unable to verify one or more of these pieces of information, they will reach out to you via the email address in bswift to ask you to submit proof of your identity. Documents submitted to validate your identity can't be expired and must match what has been provided to WEX (using full legal name).

Nonresident aliens may be eligible to open an HSA after submitting copies of their SSN or Individual Taxpayer Identification Number (ITIN) card along with their permanent resident card, passport, or U.S. Visa.

Documentation is required within 60 days from your initial enrollment. If not received, the HSA account will be closed, and contributions returned to Jabil. Any participant contributions deducted from an employees pay will be refunded back to the employee.

To upload documents in the online account, complete the following steps:

- Log in to your online account WEX.
- Under the Tasks section of the Home page, click "Upload Documents."
- Click "Upload Documents" on the Accounts tab.

To upload documents in the mobile app, complete the following steps:

- Download the app from the <u>Apple App Store</u> or <u>Google Play</u>.
- Under "Action Required" in the Tasks section, tap "Upload Documents to open your account."

How can I make changes to my HSA payroll contribution amount?

You are allowed to change your HSA payroll contribution at any time. Changes to your payroll contributions for HSA will

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become effective first of the month following the date you made the change. To make a change to your HSA payroll contribution, log into bswift, and locate the "Change HSA Election" in the middle of the page.



When will I receive my WEX benefits card?

Your WEX Benefits Card will be mailed to your home address (on file in Workday) within 14 days of your enrollment date. Cards have an expiration date located on the front of the card. A new card will be automatically mailed to you before the card expires.

Can I still contribute to my HSA if I enroll in Medicare?

No. Six months before you enroll in Medicare, stop making contributions to your HSA or you may pay a tax penalty.

Does the Commuter benefit cover electric vehicle fees?

The expense itself must be related to the purpose of parking for going to work. If the parking station serves as a place to park while at work, then the parking fee could be considered eligible. If the parking fee is simply an additional expense in relation to charging the vehicle, then it would not be eligible.

Medicare

I am reaching age 65, where can I learn more about Medicare and how it works with my Jabil benefits?

For complete information about Medicare coverage, costs, enrollment, deadlines and more, visit Medicare.gov.

What is the enrollment period for Medicare coverage?

You must enroll on time to avoid penalties or denied coverage.

- There is a 7-month period to sign up: three months before your 65th birthday month, your birthday month, and three months after your birthday month.
- To make sure you have Medicare coverage when you turn 65, sign up during the 3 months before you turn 65.
- You must enroll in Medicare within 8 months of when your employer coverage ends to avoid penalties.

Can I still contribute to my HSA if I enroll in Medicare?

No. Six months before you enroll in Medicare, stop making contributions to your HSA or you may pay a tax penalty.

Voluntary Plans

What voluntary plans are available through Jabil?

Jabil offers the following voluntary policies that you pay the full cost of through after-tax payroll deductions, except for Pet Insurance which is billed directly from MetLife. These benefits are not sponsored by Jabil and are not part of the welfare plan.

- Hospital Insurance
- Critical Illness Insurance
- Accident Insurance

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- Pet Insurance
- Identity Theft Protection
- Legal Services

Why is Pet Insurance a required selection during my enrollment?

Pet Insurance is administered by MetLife and is not payroll deducted. On the bswift enrollment screen, you must click "View Information" to continue the enrollment process. If you wish to enroll in Pet Insurance, click the MetLife link provided on the enrollment page or click "Continue" to Waive. Pet Insurance can be elected at any time. Enroll at https://www.metlifepetinsurance.com or call 888.448.0993.

Employee Stock Purchase Plan (ESPP)

When can I enroll in the ESPP?

You can enroll in the Plan for the first Offering Period beginning after your 90th day of employment. For the Offering Period that begins January 1st, the Open Enrollment Period is December 1st – December 15th. For the Offering Period starting July 1st, the Open Enrollment period is June 1st – June 15th.

Is there a length of time that stock purchased through ESPP must be held before being sold?

Whole shares of stock are purchased after each Offering Period. The stock for each employee is placed in an account with UBS. Participants can access their accounts to sell or transfer stock once the stock is placed in their account approximately 3 weeks after the end of the Offering Period. You may want to consult your tax advisor about any potential tax liability. A 1099 will be issued for the tax year in which you sold shares. Please review the Plan's prospectus.

When is the Stock purchased in ESPP?

The ESPP allows eligible Jabil employees the option to purchase Jabil stock (JBL on the New York Stock Exchange) at a discounted price. Employees are eligible to contribute up to 10% of their pay to purchase company stock at a discounted price during an Offering Period. At the end of the Offering Period, employee contributions are used to purchase stock at an 15% discount over the lower of the share price at the beginning of the period or the share price at the end of the period.

What happens to my contributions made during the Offering Period if I leave Jabil before the end of the offering period?

All contributions that accumulated during that offering period will be refunded to you through payroll after your termination of employment. Your refund will be processed as soon as administratively possible after your term date.

Where can I find more information on the ESPP?

Visit the digital <u>Jabil Benefits Guide</u> and the <u>ESPP FAQ</u> for more information.

401(k) Retirement Plan

Does my 401(k) automatically rollover to the Jabil 401(k) Plan?

No, you will need to request a distribution from your current Plan administrator to rollover your account balance to the Jabil Plan. Merrill will be onsite in the coming months and HR will have forms to complete this process.

How do I rollover my 401(k) account balance?

• For a Direct Rollover, you will need to contact your prior Plan's administrator and request a rollover distribution check made payable to "Trustee for Jabil 401(k) Retirement Plan, FBO (your name)".

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- If spacing on the check is an issue, use: "TTEE for Jabil 401k FBO (participant name)"
- Have this distribution check sent to your home address, do not have it sent directly to Merrill.
- Complete and sign the Merrill Rollover Contribution Form and then mail the form with the check to Merrill (the address is listed on the last page of the form).
- Include the distribution summary or check stub that shows that the **source of the dollars** is from a qualified plan, or a copy of your closing statement showing the amount that was distributed.

When will I be eligible to participate in the Jabil 401(k) plan?

You are eligible to participate in the 401(k) Retirement Plan after completing 30 days of employment. If you want to make your own contribution choices, you have these options:

- Pre-tax and/or Roth 401(k) contributions, between 1% and 75% of your eligible compensation, up to \$23,500 for 2025
- Catch-up contributions if you are age 50 or older during the calendar year, up to \$7,500 for 2025.
 - Catch-up contributions need to be elected as they don't happen automatically.

If you do not want to participate in the Plan, you will need to contact Merrill during the 30-day opt-out period. If you take no action, Jabil will automatically enroll you at 5%.

How often can I change my contribution rate in the Jabil 401(k) plan?

You can enroll, change your contribution rate, investment direction, or cancel your participation at any time through Merrill (https://benefits.ml.com) or call 800.228.4015. You will find investment election information here as well.

How do I enroll in the 401(k) plan?

Jabil will automatically enroll you.

- Beginning with the first payroll cycle (following the 30-day opt-out period), 5% of your eligible compensation will be deducted from your paycheck on a pre-tax basis. Your first contribution will begin approximately 60 days after the date in your eligibility letter.
- Your contributions will be invested in a Vanguard Target Retirement Fund based on your year of anticipated retirement at age 65.
- If you do not want to participate in the Plan, contact Merrill during the 30-day opt-out period.

Contacts

Where can I locate the contact information for all of the benefit vendors?

You can locate phone numbers and websites for our vendors on the digital <u>Jabil Benefits Guide</u>. There is also an option to print the contact list located on this page.

While the information in this guide is intended to be helpful, it is a summary overview of the benefits programs available to Jabil Inc.'s U.S. employees. The contents of this guide are not intended to be a contract. For official descriptions of the individual benefit plans or to find detailed information for each plan including conditions, exclusions, and limitations, please contact the benefits provider, and review the plan's summaries, certificates, or riders, or contact your local Human Resources representative. If there is any conflict between the information in this guide and the plan or policy documents, the plan or policy documents will govern.

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