

Frequently Asked Questions

Are my medical plan options changing for 2026?

No. You will continue to have the same three medical plan choices for 2026:

- Base PPO,
- Healthy Premier with HRA, and
- Healthy Plus with HSA.

But, with healthcare costs continuing to rise, you will see an increase in your cost for coverage. To learn more about your medical plan options, see the enrollment quick guide mailed to your home in October and read What's New for 2026 in the Jabil Benefits & Wellbeing Guide.

What's changing for 2026?

- Medical plan costs are increasing. Your per paycheck amount will go up in 2026.
- The Health Savings Account (HSA), Flexible Spending Accounts (FSA), and Commuter limits are increasing.
 - HSA
 - \$4,400 for single coverage
 - \$8,750 for family coverage
 - Healthcare FSA
 - \$3,300
 - Dependent Care FSA
 - \$7,500 filing taxes jointly (\$3,750 filing separately)
 - Commuter
 - Mass Transit & Parking - \$325 per month
- Starting in 2026, legislation changes the way you can make a catch-up contribution to your 401(k). If you are age 50 or older and earned more than \$145,000 with Jabil in 2025, any catch-up contributions you choose to make in 2026 will be on a Roth after-tax basis. Your 2025 catch-up contribution choices will NOT continue in 2026. You must actively choose your catch-up contributions for 2026.

How can I learn more about my medical plan choices?

See the Medical and Prescription Drug page on the digital [Benefits & Wellbeing Guide](#).

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

Emma, bswift's virtual assistant, asks a few 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 learning map available on the digital [Benefits & Wellbeing Guide](#). Also, review [why 3 employees like you](#) chose the plan they enrolled in.

What can I do to keep my medical 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.
 - Because healthcare needs tend to change over time, the medical plan you choose is an important decision each year.

2026 Open Enrollment

October 13 – October 27, 2025

- 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.
- 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.
- 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 too.
- 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/members (organization: Jabil Inc.).
- Earn wellness incentives. If covered by a Jabil medical plan, 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.

Where can I get answers to my benefit questions?

For questions about:

- Healthcare benefits
 - Aetna Member Services: 833.361.0224
 - Jabil Benefits Service Center: 877.525.2363 (8 a.m. – 8 p.m. ET, Monday – Friday)
- Other benefits
 - Jabil Benefits Service Center: 877.525.2363

How do I log in to the Jabil Benefits Service Center?

- At work — use your OKTA sign-on and look for the bswift tile and click it for direct access to the Jabil Benefits Service Center.
- Traveling or at home — go to jabilbenefits.bswift.com and login using the on-screen instructions.
- bswift Mobile App – download in the App Store or in Google Play.
- For technical difficulties, please contact the Jabil Benefits Service Center.

What's my password to log into bswift?

- For initial access:
 - Username: Your employee [ID@jabil.com](#) (Example – [123456@jabil.com](#))
 - Password: The last four digits of your Social Security Number
- For current users:
 - Username: Your employee [ID@jabil.com](#) (Example – [123456@jabil.com](#))
 - Password: Previously established. If you have forgot your password, click on the “Forgot Password?” link to reset it or contact bswift at 877.525.2363, 8 a.m. – 8 p.m. ET, Monday – Friday.

2026 Open Enrollment

October 13 – October 27, 2025

If I am traveling outside the U.S. during Open Enrollment, how do I enroll or make changes?

Use the same information listed above or call Internationally 872.299.9719.

What happens if I don't enroll?

Your current benefit elections will carry over to 2026, at 2026 rates, except for FSAs and HSAs.

Every year, FSAs require you to enroll, and HSAs require you to elect new annual contribution amounts. These elections will have *** Selection Required** noted on the Jabil Benefits Service Center.

What benefits are required elections?

Every year, FSAs require you to enroll, and HSAs require you to elect new annual contribution amounts. These plans will have *** Selection Required** noted on the Jabil Benefits Service Center.

- Health Savings Account (HSA – if enrolled in the Healthy Plus Medical Plan)
- Healthcare FSA
- Limited Purpose Healthcare FSA (if enrolled in the Healthy Plus with HSA Medical Plan)
- Dependent Care FSA (daycare expenses for children under 13 or elder care – NOT medical expenses)
- Mass Transit
- Parking

Do I need to enroll during the 2026 Open Enrollment period if my benefits were just effective November 1 or December 1?

If your effective date is November 1 or December 1, you must enroll for current year's benefits AND the next year's benefits, including electing FSA and HSA contribution amounts, if applicable. FSA and HSA contributions do not carry over from year to year.

I am on a leave of absence; do I need to participate in Open Enrollment?

Yes, you have the same enrollment window. Your elections for 2026 must be completed by October 27.

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

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

 **Back to Benefits**

How will I know I have completed my enrollment?

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

Once You've Reviewed All Your Selections:

I hereby acknowledge I have read the statements contained herein, or they have been read to me, and the statements are true and complete to the best of my knowledge. I understand any misrepresentation or omission contained herein may be used to reduce or deny a claim or void the contract if such misrepresentation or omission affects acceptance of the risk. I hereby enroll for benefits for which I am presently eligible, or for which I may become eligible, under my employer's group contract(s). If any deductions for the coverages listed above are required, I authorize such deductions from my earnings and I understand that any premiums will be automatically deducted from my paycheck on a pre-tax basis (if eligible) 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 enrolled dependent immediately when that person becomes ineligible, and that I may be required to provide proof of my dependent's eligibility.

☒ **I agree, and I'm finished with my enrollment**

2026 Open Enrollment

October 13 – October 27, 2025

How do I update my beneficiary information?

- Life insurance beneficiary designations are made on bswift.
- HSA beneficiary designations are made on WEX.
- Beneficiary designations for the 401(k) Retirement Plan are made on Merrill, or you can call 800.228.4015.
 - International beneficiaries will require a paper form obtained from Merrill.
- Voluntary benefits are made on MetLife.

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

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

When will I receive new medical ID cards?

New ID cards for medical will be produced and mailed in late December 2025. If you have opted to receive electronic delivery of your ID card, you will receive an email of your card. You can gain easy access to your digital ID card anytime by downloading the Aetna Health app. You can also log in to your member website to print an ID card – <http://aetna.com/>.

Where can I view the Open Enrollment presentation?

The presentation is available on the [Aetna Microsite](#).

I am currently covered under my spouse's health insurance, but we will be losing that coverage effective January 1, 2026. Can I enroll in Jabil insurance at that time?

Yes, losing coverage is a qualifying life event. You will have 30 days from the date you lose coverage to elect coverage through Jabil. Please refer to the Life Events section of the Jabil Benefits Guide – <https://jabilbenefitsguide.com/qualifying-life-events/>. Under Resources, you will find How to Make Benefit Changes.

I am transitioning off Tricare in May, should I enroll in Jabil coverage now during open enrollment?

No. Losing coverage is a qualifying life event. You will have 30 days from the date you lose coverage to elect coverage through Jabil. Please refer to the Life Events section of the Jabil Benefits Guide – <https://jabilbenefitsguide.com/qualifying-life-events/>. Under Resources, you will find How to Make Benefit Changes.

Where do we find the FAQs after you add them?

You can access the FAQs for Open Enrollment on the Jabil Benefits Guide under the 2026 Enrollment tab – <https://jabilbenefitsguide.com/2026-Enrollment/>. Look under Resources for Frequently Asked Questions.

You can access the Jabil Benefits FAQ on the Jabil Benefits Guide under the Enrolling tab \ Enrolling for the First Time – <https://jabilbenefitsguide.com/new-hire/>. Look under Resources for Jabil Benefits FAQ.

Does Aetna cover infusions under the Healthy Plus with HSA plan and if so, how much would they cover?

Each plan covers infusion therapy. There may be a requirement for pre-approval prior to coverage. If there is an approval in place, the cost would initially go towards your deductible until met and then the plan pays 80% of the cost until the out-of-pocket max is met for the year.

With the HSA, will your yearly physical be 100% paid by the Jabil medical plan? Blood work also?

Preventive care completed by an in-network provider is covered at 100% under all three plans. See additional information surrounding preventive care at no extra cost on the Aetna Microsite – <https://www.aetnaresource.com/n/Jabil2026>

2026 Open Enrollment

October 13 – October 27, 2025

Not all blood work is considered preventive. See the guide on Aetna Microsite – <https://www.aetnaresource.com/n/Jabil2026>

The preventive health screenings are based on the recommendations of the U.S. Preventive Services Task Force (USPTF). Available at: <https://www.uspreventiveservicestaskforce.org/uspstf/>.

Will changing medical plans (ex. PPO to HRA) affect my availability of current doctors?

No. All three plans operate on the same network.

Is "deductible" referring to the Out-of-Pocket Max?

No. The deductible is the amount you would pay prior to insurance contributing. See <https://jabilbenefitsguide.com/medical/> for the plan grid outline. The Aetna Microsite has a wonderful guide under additional information called 'Healthcare 101 – Understanding our choices just got easier' – <https://www.aetnaresource.com/n/Jabil2026>.

Is the \$2,000 per year cap under the Dental plan per covered family member?

Yes, it's per participant. You can increase the \$2,000 cap by \$100 each year for 3 years by completing your annual cleaning. If you don't have your annual cleaning, you will lose any \$100 you may have gained. Your cleaning must be coded as a preventive "cleaning."

Can you elect dental and vision without medical insurance?

Yes, and you can cover different dependents under each plan.

Under the Dental plan, are the cleanings based on a rolling calendar year?

No. It is 2 per calendar year at any time and resets on January 1. The cleanings do not need to be 6 months apart.

Under the Vision plan, are frames once every 2 years based on a rolling calendar year?

No. Vision benefits run on a calendar year, and it does not have to be an exact 24 months or from the date of service. For example, if you purchase frames on 2/1/2024, you can purchase them again on 1/10/2026.

I'm enrolling in the medical plan for the first time, when will Aetna receive my enrollment and can confirm coverage?

New enrollments will be sent over to Aetna in December 2025 and coverage will be active January 1, 2026.

Does Jabil offer Reproductive Benefits (IVF)?

IVF or ART is not covered. Basic infertility is covered for diagnosis and treatment of underlying medical condition and includes artificial insemination and ovulation induction.

Which plan provides Basic infertility coverage?

The three plans have the same benefit coverage. Member cost share would be different (deductible, coinsurance, out of pocket max, and copays).

May I add dependents to my coverage during Open Enrollment period?

Yes, dependents may be added. For medical and dental coverage, you will need to provide documentation to verify your dependents.

For dependents under 26, does it matter if the home address is different than mine?

You can cover dependents who do not live at the same address, but a U.S. address is required. When enrolling, the site allows you to enter an alternate address for dependents. All dependents must go through 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 26;
 - Your child(ren) include:
 - Your natural child(ren);
 - Your stepchild(ren);
 - Your legally adopted child(ren);
 - 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 medical, dental, and/or vision benefits?

Coverage for dependent child(ren) automatically ends at the end of the month they turn 26 unless they are disabled. They will be offered COBRA to continue coverage at that time.

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.

To whom do I submit my dependent verification documents?

Upload your documents to the Jabil Benefits Service Center. Log on by visiting jabilbenefits.bswift.com. 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 so it can be correctly identified.

Some documents may be reviewed by AI. Correctly labeling your document is critical to avoid your documents being denied.



What documents are acceptable for dependent verification?

Dependent	Documentation Options to Verify Dependent	
Spouse	Date of marriage less than 12 months	Submit a copy of one of the following: • Government-Issued Marriage Certificate, or • Most recent federal tax return with both your name and your spouse's name, or • I-94 form plus a Government-Issued Marriage Certificate.

2026 Open Enrollment

October 13 – October 27, 2025

Dependent	Documentation Options to Verify Dependent	
	Date of marriage greater than 12 months	Submit a copy of one of the following combinations: • Most recent federal tax return with both your name and your spouse's name and proof of joint ownership dated within the last six months (ex. Bank/Credit Card Statement; Lease/Mortgage Statement; Utility Bill), or • Government-Issued Marriage Certificate and proof of joint ownership dated within the last six months (ex. Bank/Credit Card Statement; Lease/Mortgage Statement; Utility Bill), or • I-94 form plus a Government-Issued Marriage Certificate.
Child(ren)	Submit a copy of one of the following: • 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 • Document of Legal Guardianship/Custody Document must list you and/or your verified spouse as the parent(s).	
Stepchild(ren)	Submit a copy of both of the following: • Government-Issued Marriage Certificate • Government-Issued Birth Certificate Document must list you and/or your verified spouse as the parent(s).	
Grandchild(ren) <i>Child(ren) of an employee's dependent child are eligible for coverage if the employee's dependent child is enrolled in Jabil's coverage.</i>	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	

If I have already verified my dependents, do I need to do it again?

No. if your dependents have already been verified, you do not need to do it again.

What happens if I do not want to contribute to the 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 any wellness incentives.

2026 Open Enrollment

October 13 – October 27, 2025

The open enrollment FAQ indicates the max HSA contribution is \$8,750 for family, but bswift shows a maximum of \$7,250.

The bswift site considers the Jabil contribution to help prevent you from going over the limit. And, if you are age 55 and over and eligible for the catch-up contribution, bswift will include that amount in your maximum.

Can I transfer an already existing HSA into my WEX HSA?

Yes. Refer to the Jabil Benefits FAQs located on the Jabil Benefits Guide under Resources – <https://jabilbenefitsguide.com/new-hire/> – for more information.

What can the HSA funds be used on?

You can use the HSA funds on qualified medical, dental, vision, and prescription drug expenses. See the HSA store for more – <https://hsastore.com/>.

What can the FSA funds be used on?

You can use the FSA funds on qualified medical, dental, vision, and prescription drug expenses unless you have the Limited FSA which is only for eligible dental and vision expenses. See the FSA store for more – <https://fsastore.com/>.

How much does Jabil contribute to the HRA?

If you're enrolled in the [Healthy Premier medical plan](#), you get a Health Reimbursement Account (HRA), funded by Jabil, to pay for a portion of your eligible healthcare expenses. Each year Jabil contributes \$300 for single coverage or \$600 for any level of family coverage. Unlike other accounts, you don't contribute your own money to an HRA.

Any [wellness incentives](#) you earn are also added to your HRA. Any HRA money you don't use by year-end rolls over if you stay in the Healthy Premier medical plan.

Because your HRA is managed by Aetna, the first dollars you spend on eligible medical and prescription drug expenses from your HRA are applied toward your annual deductible.

Why is the HSA not offered with all health insurance options?

The IRS sets strict rules about which health plans qualify for HSA eligibility. Only HDHPs—plans with higher deductibles and lower premiums—meet the criteria.

What's the minimum balance I need to have in the HSA before I can start investing?

You can invest in certain mutual funds through Healthcare Bank when your balance reaches \$1,000. More information about these options can be found when you log into your WEX account.

I had an HSA with WEX but went to another Jabil medical plan. If I decide to reenroll, will I need to open a new HSA account?

No. WEX will reopen your prior account, but you may have to go through the verification process again.

Can an individual have an HRA and FSA?

Yes.

If I choose not to contribute to the HSA will Jabil still contribute their portion to the HSA account?

If you elect to contribute \$0.00 and do not "waive" the HSA, you will receive the Jabil contribution.

2026 Open Enrollment

October 13 – October 27, 2025

Is the HSA a "use it or lose it" account?

No, it is yours to keep even if you leave Jabil.

If I have the HSA and a Limited FSA, will WEX apply my expenses to the Limited FSA first?

If coded correctly by the provider and the expenses are eligible under the Limited FSA (dental and vision expenses) they will be applied to the Limited FSA first. If WEX does apply it to the HSA first, you can contact WEX for a correction. Medical expenses will be applied to the HSA.

What is the difference between an HRA and an HSA?

An HSA is an employee-owned account that you and Jabil can contribute to. It is always yours to keep. An HRA is employer-owned and funded. You cannot contribute to an HRA and should you change medical plans, any HRA funds not used are lost. Aetna has an educational presentation on the microsite 'Healthcare 101' under Additional Information - <https://www.aetnaresource.com/n/Jabil2026>.

If I am on leave of absence January 1, 2026, and I've enrolled in the HSA, when will I receive the employer contribution?

The employer contribution will be made with the first bi-weekly pay of the year.

Can Mass Transit and Parking carry over next year?

Yes.

Will I need to complete a SOH (statement of health) for increases to my life insurance made during Open Enrollment?

Yes, any increases to your life insurance or your spouse's life insurance will require a SOH.

If I decline Supplemental Life coverage as a new hire but elect it during Open Enrollment, will I be subject to a SOH – Statement of Health?

Yes, if you decline Supplemental Life coverage as a new hire and decide to elect it during Open Enrollment, 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.

Will there be any age reductions to my life insurance as I age?

Yes, your Basic Life and AD&D and Supplemental Life Insurance coverage will decrease when you turn 65. If you are:

- Age 65 but less than 70, your benefit reduces to 65%.
- Age 70 but less than 75, your benefit reduces to 45%.
- Age 75 or older, your benefit reduces to 25%.

Once your benefit reduces, you can convert it to an individual policy without providing proof of good health. Your spouse's life insurance will also decrease when they turn 65 using the same table above.

On Life insurance, was the age reduction of 65% on the 2.5x base salary or 65% of base salary?

The reduction applies to both basic (2.5x) and supplemental.

October 13 – October 27, 2025

Is the Will preparation and Estate planning free if you have supplemental life?

Yes. Supplemental Life coverage comes with FREE [estate planning services](#). Get professional help with your estate planning, including will preparation, and beneficiary designation guidance.

Aetna Resources for Living (EAP) offers free legal resources. Does that mean we don't need to pay for extra legal services that's offered?

The legal services are different. Under the legal plan provided by MetLife, you will receive a greater benefit. You will want to compare the 2 to see which meets your needs. Refer to the Voluntary Policies section of the guide – <https://jabilbenefitsguide.com/voluntary-policies/> – Legal Services.

At what age does my dependent child life insurance end?

Life insurance coverage for a dependent child ends on the day the child turns 26.

What does the MetLife Legal plan cover?

MetLife's [Legal Services](#) plan gives you access to a network of attorneys who can help with a wide range of legal services including:

- Money matters,
- Home and real estate issues and transactions,
- Wills and estate planning,
- [Traffic violations](#) and other driving matters,
- Adoption and family law,
- Elder care issues,
- Guidance on immigration matters,

Refer to the Jabil Benefits Guide for more information – <https://jabilbenefitsguide.com/voluntary-policies/#legal-services>.

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

No. The EAP is only available to Benefit Eligible employees – full-time employees. 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, per year, through Resources for Living. Resources for Living can also help find a provider in the Aetna network if more visits are needed.

Is the Wellness Program available to all Jabil employees?

All employees (except contingent workers) and their dependents are eligible to participate in the wellness program offered through Asset Health. Only employees and spouses enrolled in a Jabil medical plan can participate in the 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:

- Base PPO > Cash amount paid out in your paycheck (amount you earn is taxable). Processed bi-weekly.

2026 Open Enrollment

October 13 – October 27, 2025

- Healthy Premier > Health Reimbursement Account (HRA). Deposited into your HRA account monthly.
- Healthy Plus > Health Savings Account (HSA). Deposited into your HSA account with WEX bi-weekly.

What document do I need to submit to Asset Health for my annual physical incentive and how do I submit it?

Have your doctor complete the Annual Physical Health Screening form (https://jabilbenefitsguide.com/wp-content/uploads/Jabil_PhyForm_2025.pdf) and log into Asset Health (<https://www.assethealth.com/jabil>) to upload the form. Refer to the Jabil Benefits Guide for more information – <https://jabilbenefitsguide.com/asset-health/>.

If my annual physical is during November or December 2025, can it apply to the Wellness annual physical incentive for 2025?

No, but it would count for 2026. You would have your doctor complete the Annual Physical/Health Screening form and submit it to Asset Health in January of 2026.

Does it matter if my annual physical is under a different insurance plan to receive the incentive?

To be eligible for the incentive you must be covered under a Jabil medical plan.

Where is the Annual Physical/Health Assessment you need to get the HSA benefit incentive?

The Annual Physical/Health Assessment form can be located on Asset Health (<https://www.assethealth.com/jabil>) or on the Jabil Benefits Guide – <https://jabilbenefitsguide.com/asset-health/>.

How does my spouse log into Asset Health?

The same instructions for logging in apply for both employees and spouses:

Login Information

Username: first initial + last name + last four digits of SSN (Name is the same as what is used in Workday)

Password: date of birth (mmddyyyy)

First-time users: You will be asked to change your username and password after logging in.

Questions? Contact us at support@assethealth.com or 855-444-1255.

I'm 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](https://www.medicare.gov). In addition, you can use Aetna Medicare Friends and Family which provides added resources. Contact a licensed professional at 844.619.9899 or go online to check out the resources – [Aetna Medicare Friends and Family](#).

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 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.

2026 Open Enrollment

October 13 – October 27, 2025

How do I enroll in the 401(k) or make change to my 401(k) contributions.

You can enroll, change your contribution rate, investment direction, or cancel your participation at any time through [Merrill](#) or call [800.228.4015](tel:800.228.4015).

Does Jabil's 401(k) plan allow after-tax (non-Roth) contributions?

No.

Effective January 1, 2026, the 401(k) catch-up contributions will be Roth. Given that there is a 5-year rule on Roth distributions, is there an age exemption? If over 59½, is there an option to keep catch-up contribution as non-Roth?

Under a Roth, both the 5-year rule and age 59½ requirements need to be met for the earnings on those Roth dollars to be tax free. The 5-year rule starts with the initial contribution the participant makes in that Roth bucket, regardless of if it is a regular Roth contribution, or Roth catch-up. It is a one-time start date, not based on each Roth contribution that comes in.

Will all catch-up contributions be Roth whether you are over \$145,000 or not?

No. The Roth is only required for those who make \$145,000 or more in the prior year.

When can we make changes to our ESPP?

You may change your contribution election one time during each Offering Period by completing the ESPP Change and Termination Form. Your new contribution election will continue into the next Offering Period unless you elect to stop contributing. The ESPP Change and Termination Form can be found on the bswift portal under the Resource Library, Financial Health – https://apps.bswift.com/user_portal/en/library.

If you do choose to stop contributing, the contributions collected during the Offering Period will be used to purchase shares on your behalf at the end of the Offering Period. You may re-enroll during a future ESPP open enrollment.

When can I enroll in the ESPP?

If eligible, you can enroll in the ESPP during the enrollment periods specific to the ESPP. You're eligible to participate in the ESPP if you were hired on or before 90 days before the start of the Offering Period.

Jabil has two ESPP Offering Periods:

- **Offering Period 1** begins January 1 and ends June 30. You enroll December 1 – December 15.
- **Offering Period 2** begins July 1 and ends December 31. You enroll June 1 – June 15.

Watch for enrollment information emailed or posted at your worksite before each Offering Period.

I tried to sign into UBS, but they asked for an account number. Where do we get that information?

UBS opens an account for you *after* your first shares are purchased through the ESPP (in the month after the Offering Period closes). At this time, you will be able to access your account using your Workday Employee ID as your UBS ID. You cannot access your account before this time. Your online account gives you access to your purchase history, plan information, and financial and support tools.

While the information in this FAQ is intended to be helpful, it is a brief overview of some of the questions regarding Jabil's benefits programs available to U.S. employees. 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 document and the plan or policy documents, the plan or policy documents will govern.