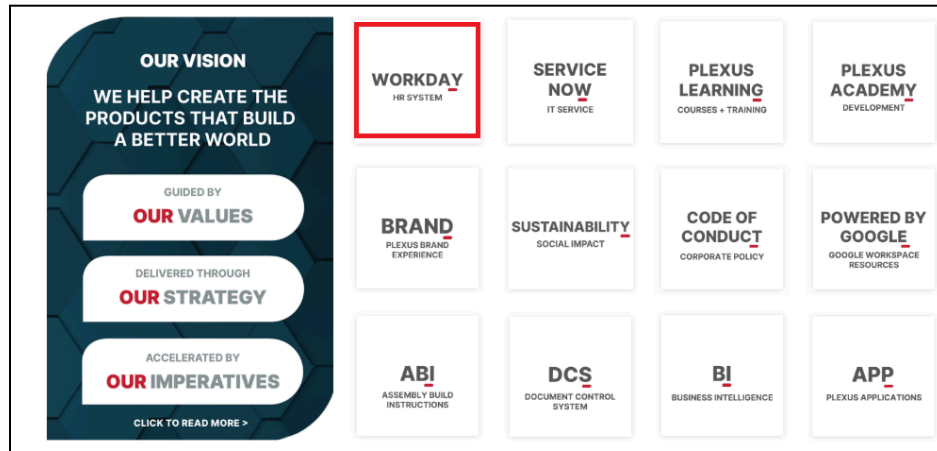


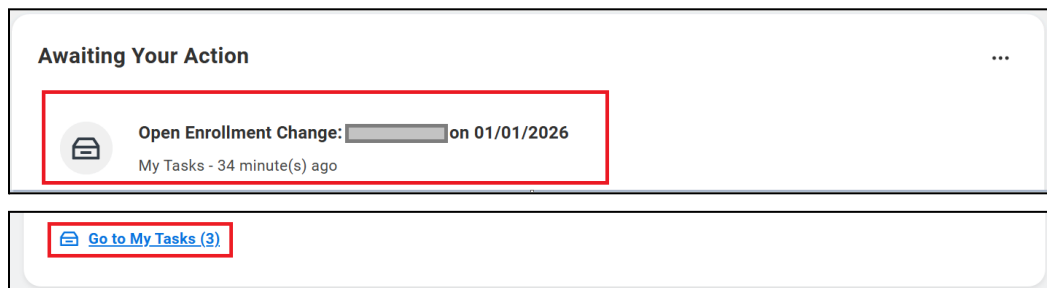


Benefits: Elect Benefits during Open Enrollment

1. From the CONNECT screen, click on Workday.



2. From the Workday home screen, select the "Open Enrollment Change" action or "Go to All Inbox Items."



3. On the left of the screen, you will see your action items. Select the "Open Enrollment Change" action. Then, select the "Let's Get Started" action.

The screenshot shows a web interface with a sidebar on the left titled "All Items" containing 3 items. A search bar is present with the text "Search: All Items" and a dropdown arrow. Below the search bar is a link for "Advanced Search". The first item in the list is "Open Enrollment Change:" with a date of "10/03/2025" and a star icon. Below this, it says "on 01/01/2026" and "Effective: 01/01/2026". The main panel on the right is titled "Change Benefits for Open Enrollment" and includes a "Let's Get Started" button highlighted with a red box. The main panel also shows a date range "Open Enrollment 10/03/2025-11/07/2025" and a prompt to "Choose new plans or re-enroll in the plans you currently have."

4. Elect your Medical, Dental, Vision, Critical Illness Insurance, Accident Insurance, and Hospital Indemnity Insurance benefits.
 - a. Select "Manage" or "Enroll" by the plan you would like to review and elect/waive. Your elections from the current year will be populated. Otherwise, Default is Waive.

The screenshot displays the "Health Care and Accounts" section with several insurance options, each with a "Manage" or "Enroll" button highlighted by a red box. The options are: Medical (UnitedHealthcare Consumer Choice 2000, Cost per paycheck \$68.23, Coverage Employee, Manage button), Dental (Waived, Enroll button), Vision (UPDATED, UnitedHealthcare Vision, Cost per paycheck \$0.98, Coverage Employee, Manage button), Basic Critical Illness (Waived, Enroll button), UPDATED Accident Insurance (Waived, Enroll button), Hospital Indemnity (Voya Financial Hospital Indemnity, Cost per paycheck \$4.62, Coverage Employee, Manage button), and Supplemental Critical Illness (Waived, Enroll button).

- b. Review your current elections if applicable. Select/Waive the plan you want to enroll in, then click "Confirm and Continue" to review Dependents.

Plans Available

Select a plan or Waive to opt out of Medical. The displayed cost of waived plans assumes coverage for Employee.

3 Items

Benefit Plan	*Selection	You Pay (Bi-weekly)	Company Contribution (Bi-weekly)
UnitedHealthcare Consumer Choice 2000	☐ Select ☒ Waive		
UnitedHealthcare Consumer Choice 4000	☐ Select ☒ Waive		
UnitedHealthcare Surest	☒ Select ☐ Waive		

Confirm and Continue Cancel

- c. Enroll any eligible dependents. Your coverage and premium will change as you elect your dependents.
 - i. If your dependents are already in Workday, select the Existing Dependent record to enroll them.

Dependents

Add a new dependent or select an existing dependent from the list below.

Coverage * EE + Child(ren)

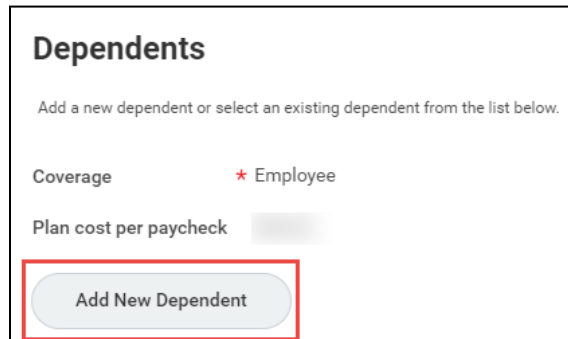
Plan cost per paycheck

Add New Dependent

2 Items

Select	Dependent	Relationship
☐	Spouse Dependent	Spouse
☒	Child Dependent	Child

- ii. If you need to add your dependents, click on "Add My Dependent" (See page 12 and 13 for instructions).



Dependents

Add a new dependent or select an existing dependent from the list below.

Coverage ★ Employee

Plan cost per paycheck

Add New Dependent

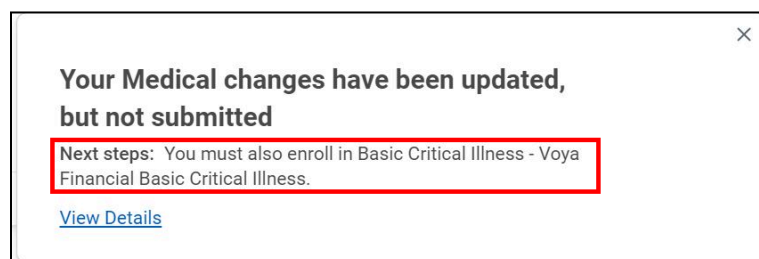
- d. Click "Save" to return to the main enrollment screen.



Save Cancel

NOTE: As you make your elections, your net cost will be displayed in the top left corner.

If you are electing the Consumer Choice 4000 plan, you also receive Employer Paid Basic Critical Illness Insurance at no cost to you. Make sure to elect the Basic Critical Illness plan so you have this free coverage. The Critical Illness Insurance is extended to any family members you are covering under your medical plan.



×

**Your Medical changes have been updated,
but not submitted**

Next steps: You must also enroll in Basic Critical Illness - Voya Financial Basic Critical Illness.

[View Details](#)



Basic Critical Illness
 Waived

Enroll

1 item

Benefit Plan	*Selection	You Pay (Bi-weekly)
Voya Financial Basic Critical Illness	☒ Select ☐ Waive	Included

- Once you've made your Medical, Dental, Vision, Critical Illness Insurance, Accident Insurance, and Hospital Indemnity Insurance elections, Review and Select/Waive Health Savings Account, Health Care Flexible Spending Account, and Dependent Care Flexible Spending Account coverage.



Health Savings Account
UPDATED
Waived

Enroll



Health Care Flexible Spending Account
Waived

Enroll



Dependent Care Flexible Spending Account
Waived

Enroll

If you elected a Consumer Choice plan, you have the option to contribute to a Health Savings Account.

- a. In order to receive the Employer Contribution, you must choose "Select". Click "Confirm and Continue."

The screenshot shows a web interface titled "Plans Available" with the instruction "Select a plan or Waive to opt out of Health Savings Account." Below this, a table lists available plans. The first plan is "Optum Bank". In the "*Selection" column for "Optum Bank", the "Select" radio button is chosen and highlighted with a red box. Below it, the "Waive" radio button is unselected. At the bottom of the screen, the "Confirm and Continue" button is highlighted with a red box, and the "Cancel" button is also visible.

Benefit Plan	*Selection	You Contribute (Bi-weekly)	Company Contribution (Bi-weekly)
Optum Bank	☒ Select ☐ Waive		

Confirm and Continue Cancel

- b. Then enter the amount you would like to contribute on a Per Paycheck or Annual basis. Click "Save."
- i. If you do not wish to contribute, enter \$0.00 so you still receive Plexus' contribution.

The screenshot shows a web interface titled "Contribute". It has two input fields: "Per Paycheck" with the value "10.00" and "Annual" with the value "260.00". Both input fields are highlighted with red boxes. To the right of the "Annual" field, it says "Total Paychecks 26". Below the input fields, it states "Maximum Annual Amount: \$4,300.00". Under the "Summary" section, it shows "Annual Company Contribution \$650.00" and "Total Annual HSA Contribution \$910.00". At the bottom, the "Save" button is highlighted with a red box, and the "Cancel" button is also visible.

Contribute

Per Paycheck 10.00

Annual 260.00 Total Paychecks 26

Maximum Annual Amount: \$4,300.00

Summary

Annual Company Contribution \$650.00

Total Annual HSA Contribution \$910.00

Save Cancel

- c. If you are eligible, a catch-up election will also appear. On the Contributions screen, step 1 of 2 will be regular HSA contributions and step 2 of 2 will be catch up HSA contributions.

Plans Available

Select a plan or Waive to opt out of Health Savings Account.

2 items

*Selection	Benefit Plan	You Contribute (Bi-weekly)	Company Contribution (Bi-weekly)
☒ Select ☐ Waive	Optum Bank		
☒ Select ☐ Waive	Optum Bank HSA Catch Up		

6. Click "Save" to return to the main enrollment screen.

7. Decide if you would like to enroll in a Healthcare and/or Dependent Care Flexible Spending Account.

- a. If you would like either spending account, click "Enroll" to "Select" the plan. Click "Confirm and Continue" to enter your annual contribution; either as a per paycheck amount or total amount for the year.

Plans Available

Select a plan or Waive to opt out of Health Care Flexible Spending Account.

1 item

Benefit Plan	*Selection	You Contribute (Bi-weekly)
UnitedHealthcare	☒ Select ☐ Waive	

- b. Enter your contribution on a Per Paycheck or Annual basis.

Contribute

Per Paycheck

50.00

Annual

1,300.00

Total Paychecks 26

Minimum Annual Amount: \$100.00

Maximum Annual Amount: \$2,600.00

Summary

Total Annual Contribution \$1,300.00

8. Click "Save" to return to the main enrollment screen.

Save

Cancel

9. Next, scroll down to your Life Insurance, Accidental Death & Dismemberment Insurance, and Long Term Disability (LTD) coverage options. Basic Life and AD&D and LTD coverages are automatically applied and are for informational purposes only.
- a. If you are electing Supplemental Life insurance for the first time or increasing your current amount, you will be required to go through the electronic EOI process after Open Enrollment has been finalized by the Benefits Team.

Insurance

 **Supplemental Life**
Waived

Enroll

 **Supplemental ADD**
Waived

Enroll

 **Spouse Life**
Waived

Enroll

 **Dependent Life**
Waived

Enroll

 **Basic Life and ADD**
2 Plans

Manage

 **Long Term Disability**
Unum LTD (Employee)

Coverage 60% of Salary

Manage

- b. To enroll or update your supplemental Life and/or AD&D, click “Enroll or Manage.” Keep the plan selected, or waive coverage (whichever is applicable to you). If you are waiving coverage, click “Save.” If selecting coverage, click “Confirm and Continue” to elect your coverage amount and designate a beneficiary.

Benefit Plan	*Selection	You Pay (Bi-weekly)
Unum SUPP LIFE (Employee)	☒ Select ☐ Waive	

- c. Select your Coverage amount.

Coverage

Calculated Coverage

Coverage ☒ Search

Plan cost per paycheck

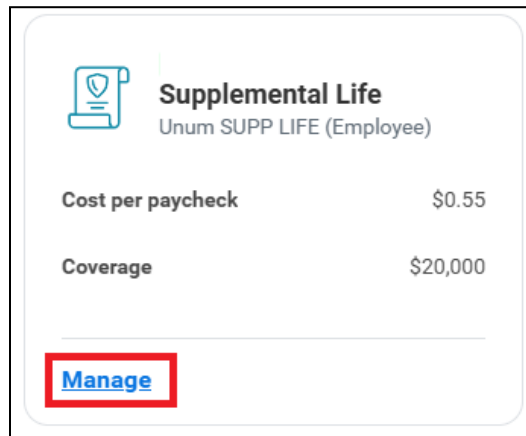
- ☒ \$10,000
- ☐ \$20,000

10. Elect your Primary and Secondary Beneficiaries (see Step 12 for detailed instruction).

11. Click “Save” to return to the main enrollment screen.

12. Next you will need to designate your Life Insurance beneficiaries. It is required for Supplemental Life and Supplemental AD&D plans, but optional for Basic Life and Basic AD&D. Although it is optional for Basic Life and Basic AD&D, it is highly recommended that you still complete this step.

- a. Click manage on the insurance plan you want to designate your beneficiary to.



- b. Review the election, then click "Confirm and Continue".
- c. In the beneficiary section, click the plus (+) sign next to the Beneficiary column. Click the 3 bars on the right side of the Beneficiary text box.

Beneficiaries

Select an existing or add a new beneficiary person or trust to this plan. You can also adjust the percentage allocation for each beneficiary.

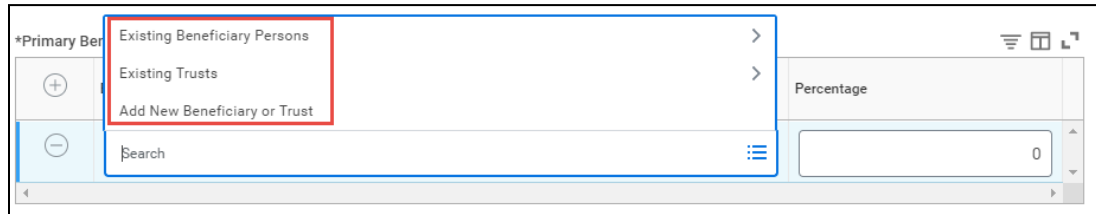
*Primary Beneficiaries 1 item

	Beneficiary	Percentage
		
		 0

Secondary Beneficiaries 0 items

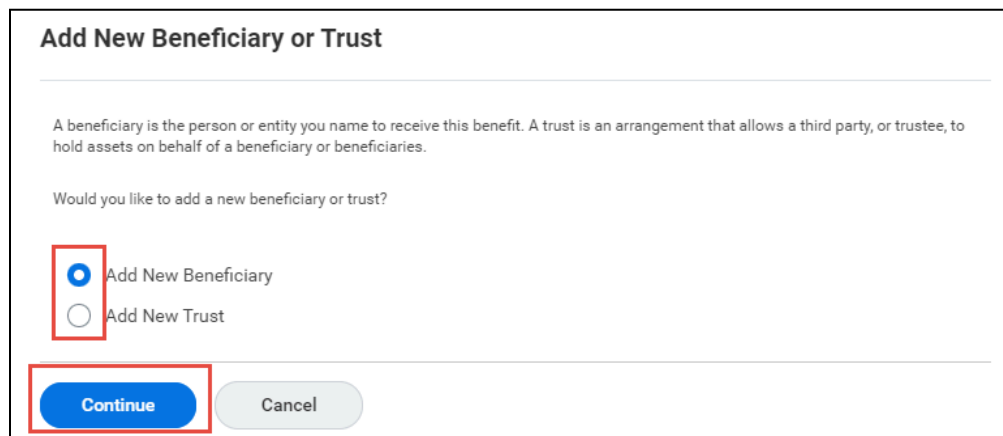
	Beneficiary	Percentage
		
No Data		

- d. Select an "Existing Beneficiary Persons" or "Existing Trusts." If you do not have an existing beneficiary or trust, select "Add New Beneficiary or Trust."



A screenshot of a software interface showing a dropdown menu. The menu is open, displaying three options: "Existing Beneficiary Persons", "Existing Trusts", and "Add New Beneficiary or Trust". The "Add New Beneficiary or Trust" option is highlighted with a red box. To the right of the menu, there is a "Percentage" field with a value of "0".

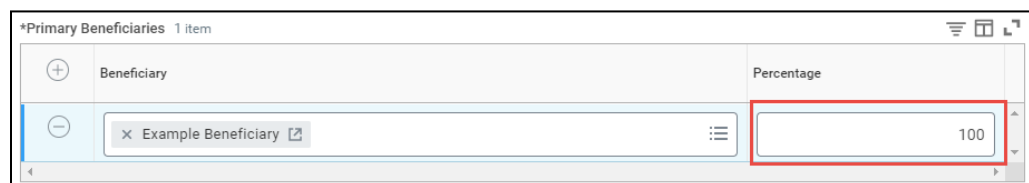
- e. To Add New Beneficiary or Trust, select the type and click "Continue."



A screenshot of a dialog box titled "Add New Beneficiary or Trust". The dialog box contains a paragraph explaining the difference between a beneficiary and a trust. Below this, there is a question: "Would you like to add a new beneficiary or trust?". There are two radio buttons: "Add New Beneficiary" (which is selected and highlighted with a red box) and "Add New Trust". At the bottom of the dialog box, there are two buttons: "Continue" (highlighted with a red box) and "Cancel".

- f. Fill out the required information. Click "OK." The new record just created will automatically populate.

- g. Enter a percentage.



A screenshot of a table titled "Primary Beneficiaries" with 1 item. The table has two columns: "Beneficiary" and "Percentage". The "Beneficiary" column contains the text "Example Beneficiary" with a red box around it. The "Percentage" column contains the value "100" with a red box around it.

h. Repeat this process to add a Secondary Beneficiary.

The screenshot displays two sections for beneficiary selection. The top section, titled '*Primary Beneficiaries 1 item', contains a table with columns 'Beneficiary' and 'Percentage'. It lists 'Example Beneficiary' with a percentage of 100. The bottom section, titled 'Secondary Beneficiaries 1 item', is highlighted with a red border and contains a similar table with 'Example Beneficiary 2' and a percentage of 100.

i. Click "Save" and repeat for all Life and AD&D insurance plans.

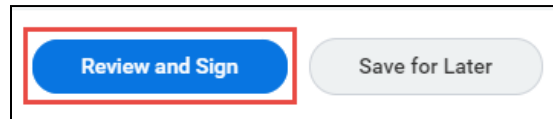
This image shows two buttons: a blue 'Save' button and a grey 'Cancel' button. The 'Save' button is highlighted with a red rectangular border.

13. Next, scroll down to review your Additional Benefits including Identity Protection, Legal Insurance, Employee Assistance Plan (EAP), Short Term Disability (STD), and FMLA.

The 'Additional Benefits' section displays five cards: 'Identity Protection' (Waived, Enroll), 'Legal Insurance' (Waived, Enroll), 'Employee Assistance Plan' (Spring Health, Manage), 'Short Term Disability' (Unum STD, Manage), and 'FMLA' (Unum Family and Medical Leave Act, Manage).

- a. You may choose to enroll/waive Identity Protection. Coverage is offered as Employee only or Family. You do not need to add dependents to the plan.
- b. EAP, STD and FMLA are automatically applied and listed for information purposes only.

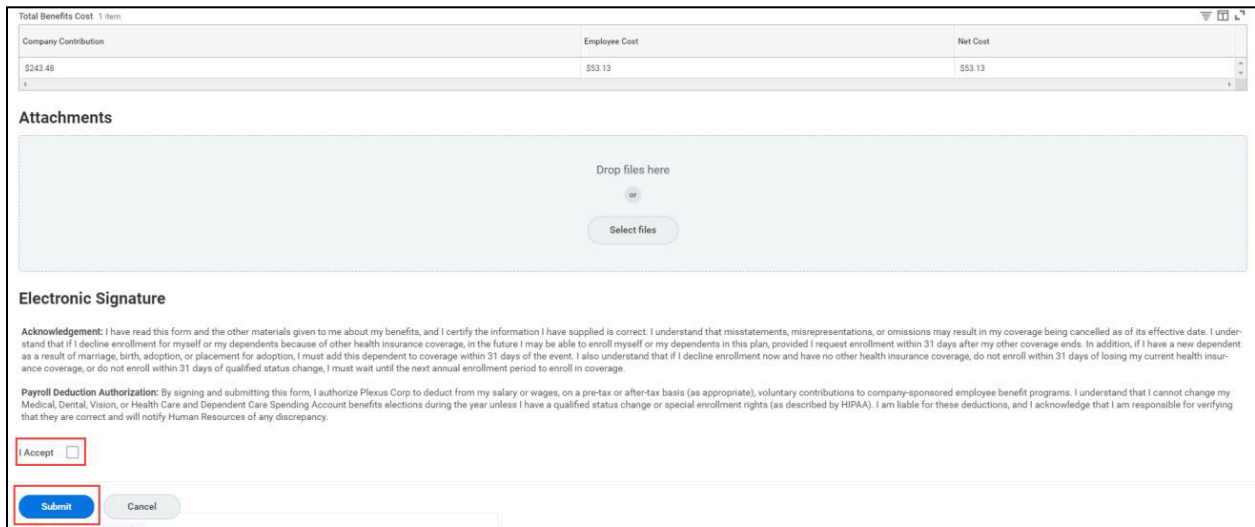
14. Click "Review and Sign."



The image shows two buttons side-by-side. The first button is blue with the text "Review and Sign" in white. The second button is light gray with the text "Save for Later" in gray. Both buttons are enclosed in a thin black rectangular border.

15. Review your Open Enrollment benefit elections.

- a. If your elections are accurate, check the box to the right of I Accept, and then click Submit.
- b. If your elections are not accurate and you need to make revisions, click Cancel to go back.



The image shows a screenshot of an Open Enrollment form. At the top, there is a table with three columns: "Company Contribution", "Employee Cost", and "Net Cost". The "Company Contribution" column shows a value of \$243.48, and the "Employee Cost" and "Net Cost" columns show a value of \$53.13. Below the table is a section titled "Attachments" with a "Drop files here" area and a "Select files" button. Below that is a section titled "Electronic Signature" with a paragraph of text. At the bottom, there is a row with a checkbox labeled "I Accept" and a "Submit" button. The "Submit" button is highlighted with a red border.

Company Contribution	Employee Cost	Net Cost
\$243.48	\$53.13	\$53.13

Attachments

Drop files here

Select files

Electronic Signature

Acknowledgement: I have read this form and the other materials given to me about my benefits, and I certify the information I have supplied is correct. I understand that misstatements, misrepresentations, or omissions may result in my coverage being cancelled as of its effective date. I understand that if I decline enrollment for myself or my dependents because of other health insurance coverage, in the future I may be able to enroll myself or my dependents in this plan, provided I request enrollment within 31 days after my other coverage ends. In addition, if I have a new dependent as a result of marriage, birth, adoption, or placement for adoption, I must add this dependent to coverage within 31 days of the event. I also understand that if I decline enrollment now and have no other health insurance coverage, do not enroll within 31 days of losing my current health insurance coverage, or do not enroll within 31 days of qualified status change, I must wait until the next annual enrollment period to enroll in coverage.

Payroll Deduction Authorization: By signing and submitting this form, I authorize Plexus Corp to deduct from my salary or wages, on a pre-tax or after-tax basis (as appropriate), voluntary contributions to company-sponsored employee benefit programs. I understand that I cannot change my Medical, Dental, Vision, or Health Care and Dependent Care Spending Account benefits elections during the year unless I have a qualified status change or special enrollment rights (as described by HIPAA). I am liable for these deductions, and I acknowledge that I am responsible for verifying that they are correct and will notify Human Resources of any discrepancy.

I Accept ☐

Submit Cancel

16. To save a copy of your Benefits Statement, click "View 20XX Benefits Statement" then "Print." If you do not want to save a copy of your statement, click "Done."

You've submitted your elections.

IMPORTANT MESSAGE:
Don't forget to save or print your Benefit Confirmation for your records and compare it to your first paycheck.

To review the 2026 rates, click [here](#).

Important Dates:

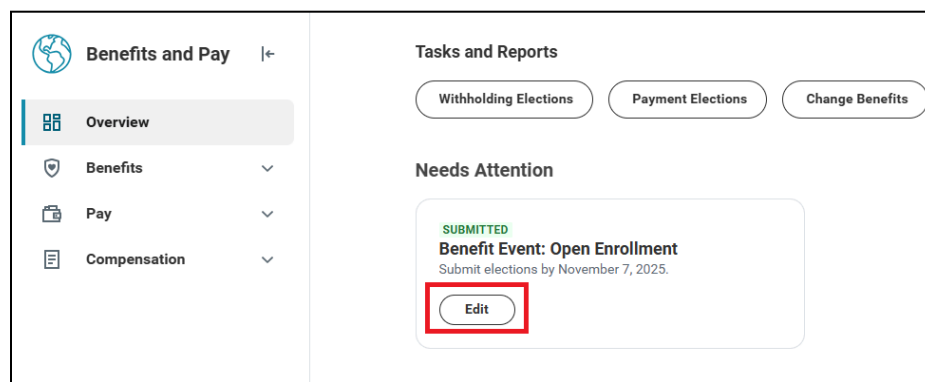
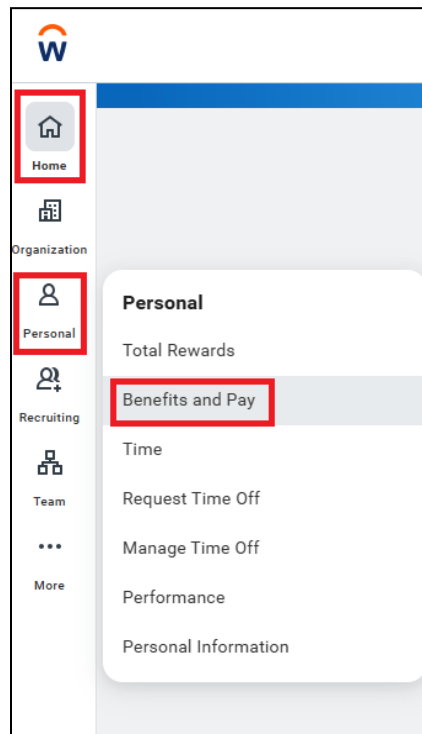
Benefits go into effect	01/01/2026
Final day to update benefits	11/07/2025

[View 2026 Benefits Statement](#)

[Done](#)

Congratulations! You have completed your Open Enrollment!

If at any time, you wish to change your benefit elections after you've submitted them, you may do so. This must be done prior to the end of Open Enrollment. From the Workday homepage, click Home, Personal, then Benefits and Pay. Then click on Edit under Benefit Event: Open Enrollment to open your event to make changes.



Adding a New Dependent

1. After clicking Add New Dependent, a pop up will appear with more information on Dependents. Click OK to continue, or click Cancel if you do not wish to continue.

Add My Dependent From Enrollment

You may enroll the following family members in health and life insurance plans:

- Your legal spouse
- Children (biological, step and adopted) up to age 26
- Foster children including any children placed with you for adoption
- Any children whom you are responsible under court order
- Grandchildren in your court-ordered custody
- Unmarried children of any age who are incapable of supporting themselves due to a mental or physical disability and who are totally dependent on you

NOTE: Dependent verification is required when adding a dependent for the first time. To ensure dependents covered on your Plexus medical, dental and/or vision plans meet the definition of eligibility, check the "eligible dependent" definition in the Summary Plan Description found on usbenefits.plexus.com. Dependent verification forms can be found in the [US Benefits Google Drive](#). Completed forms can be sent to the Plexus Benefits Team at PLXS-GHQ.Benefits.Team@plexus.com.

Cancel

OK

2. Complete the fields. The fields with a red asterisk are required.

Add My Dependent From Enrollment

Name

Country *
United States of America
Recommended
Indonesia Malaysia
Mexico

Prefix

First Name *

Middle Name

Last Name *

Suffix

Allow Duplicate Name ☐

Check this box only when there is more than one dependent with the same name.

Personal Information

Relationship *

Date of Birth *
MM/DD/YYYY

Age
(empty)

Gender *

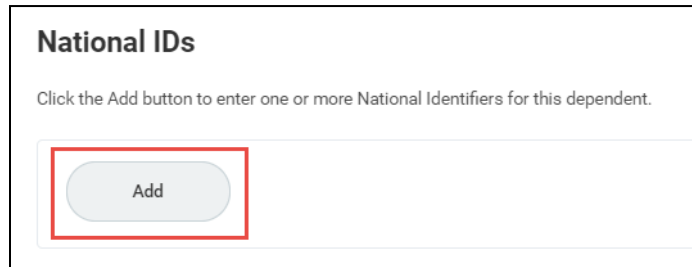
Full-time Student ☐

Student Status Start Date

Student Status End Date

Disabled ☐

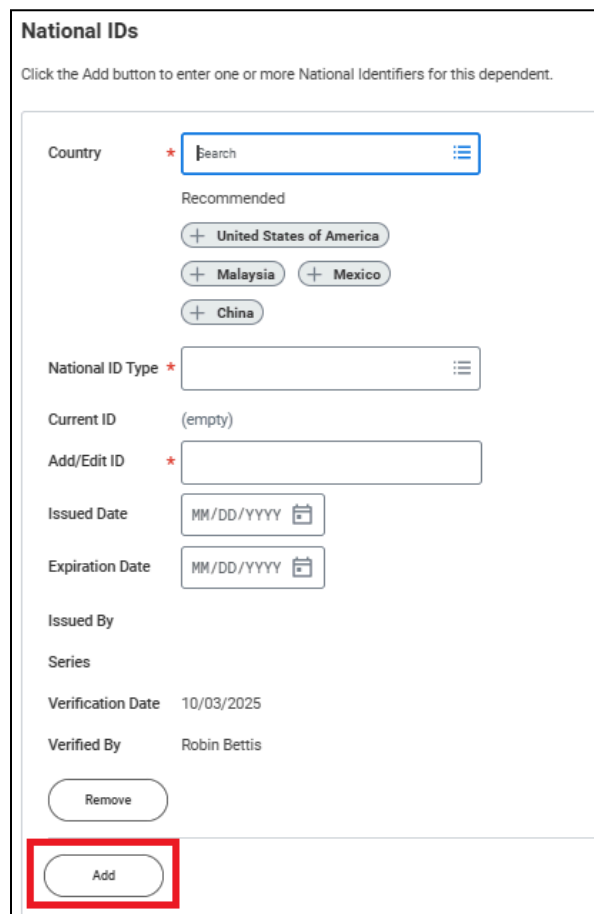
3. Click Add to add your dependent's Social Security Number



National IDs

Click the Add button to enter one or more National Identifiers for this dependent.

4. Select the correct Country. Select "Social Security Number" under National ID Type.
5. Enter your dependents Social Security Number in the Add/Edit ID field.



National IDs

Click the Add button to enter one or more National Identifiers for this dependent.

Country *

Recommended

National ID Type *

Current ID (empty)

Add/Edit ID *

Issued Date

Expiration Date

Issued By

Series

Verification Date 10/03/2025

Verified By Robin Bettis

6. Verify the Contact Information at the bottom of the page is accurate.

7. Click Save



8. Repeat for any additional dependents that need to be added.