FLEXIBLE BENEFITS FOR YOU | Georgia Department of Administrative Services

Open Enrollment for Plan Year 2026 is October 20th at 1 a.m. ET – November 8th at 12:59 a.m. ET

Your Guide to the Flexible Benefits Program

Benefits you deserve for the service you provide

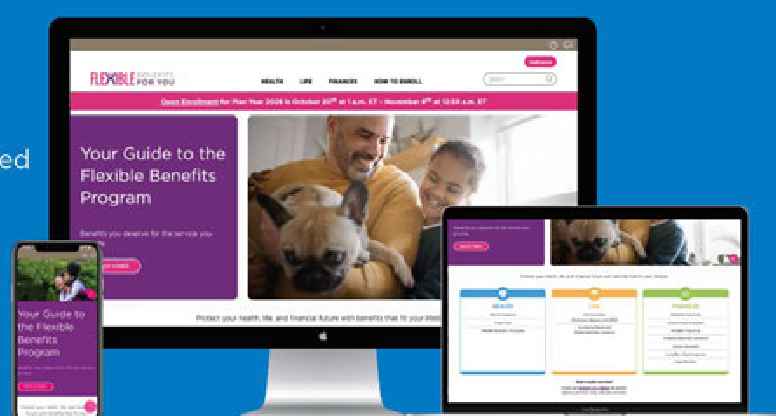
WATCH VIDEO

WHAT'S NEW

Want to experience the fully interactive version of this guide? Go to **GAFlexibleBenefits.com**.

You'll find:

- **"Find Your Why" Decision Quiz:** Answer a few questions and in seconds you'll see a personalized list of flexible benefits that fit your world.
- **Smart Search:** Type in a word or question and the search engine brings the content to you.
- **Flexible Benefits for You (FB4U) Network:** Stream quick tips, real talk, and behind-the-scenes insights at this new digital hub.
- And more!



Protect your health, life, and financial future with benefits that fit your lifestyle.

HEALTH

- Dental Insurance
- Vision Care
- Flexible Spending Accounts

LIFE

- Life Insurance (Employee, Spouse, and Child)
- Accidental Death and Dismemberment Insurance

FINANCES

- Disability Insurance
- Critical Illness Insurance
- Accident Insurance
- Hospital Indemnity Insurance
- Cancer Insurance
- Long-Term Care Insurance
- Legal Benefits

Want a quick overview?

Check out **Benefits at a Glance** for benefit options, premium rates, and plan contacts.

DON'T GUESS—FIND YOUR WHY!

Which options best fit *your* health, life, and finances?

Take a quick quiz to get your personal plan.

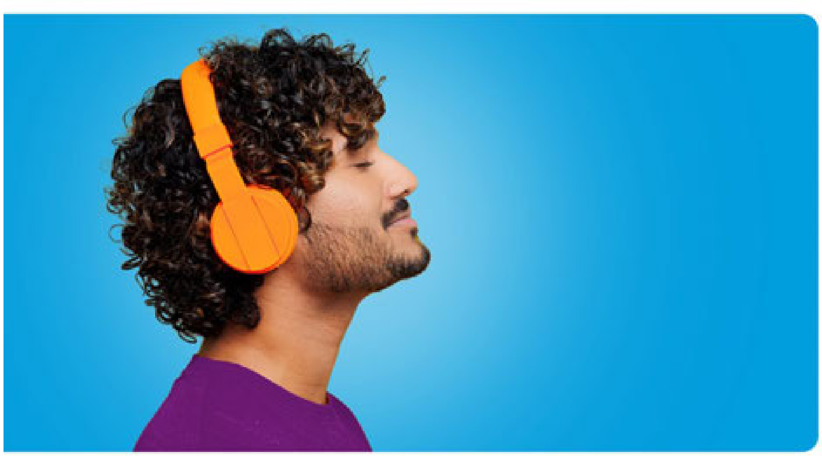
SHOW ME

NEW EMPLOYEE?

You have **31 days** from your date of hire (or becoming eligible for benefits) to enroll. Explore your options, compare rates, and review enrollment information.

VIEW MORE INFO

Ready to sign up? Go to **GaBreeze** to make your selections.



FB4U NETWORK

Turn on. Tune in. Take charge.

Channels that cover quick tips, real talk, and insider insights from the FB4U Network—your 24/7 digital hub for making flexible benefits work for you.

START STREAMING

for your
HEALTH

Dental Insurance

Protect your smile and your overall health with comprehensive dental coverage. Get access to preventive care and affordable treatment options.

Your Choices	Your Costs
• Dental Care® DHMO • Dental PPO Select • Dental PPO Select Mid • Dental PPO Select Plus	Pre-tax deduction **View rates** Check **GaBreeze** to see your personal cost for coverage.

Why Choose Dental Coverage

- Large Dental PPO network in Georgia
- Strong Dental HMO network in metro areas
- Flexible coverage levels to match your needs (like for extensive dental procedures or orthodontia when you need it and lower coverage in the years you don't)

OPTIONS OVERVIEW

	Dental PPO Options			Dental Care® DHMO
	Dental Select	Dental Select Mid	Dental Select Plus	
Annual Deductibles	$50 per person / $150 for family			No deductibles
Diagnostic and Preventive Services[1]	100% coverage (no deductible applies)			All services delivered at fixed co-payments[2]
Basic Services (restorative, including oral surgery)	80%	80%	90%	
Major Services (crowns, inlays, TMJ, and more)	50%	50%	60%	
Eligible Implants (subject to annual maximum benefit)	Not a covered service	50%	50%	
Orthodontia Allowance (lifetime per adult and child)	Not a covered service	50% coverage, up to $1,500 (no deductible)	50% coverage, up to $2,000 (no deductible)	
Maximum Annual Benefit (per person)	$750	$1,500	$2,000	No limits
Monthly Premium	Lowest	Middle	Highest	$23 to $63
	Range from $28 to $122			

[1] *Diagnostics and preventive care services do not count toward your annual maximum benefit*

[2] *See the DHMO Plan Guide*

OPTIONS KEY FEATURES

Dental PPO Benefits

Three PPO options give you flexibility to choose richer benefits when needed and lower coverage in other years.

Key Features

- In-network and out-of-network coverage
- Preventive cleanings at no cost
- Orthodontia for adults and children
- Dental implants (coverage under the Select Mid and Select Plus options)
- Emergency care at 100% (network providers)
- "Tele-dental" services for remote consultations

Dental Care® (DHMO)

Predictable costs with no deductibles, coinsurance, or annual benefit limits — all covered services at fixed copays. And there is no annual limit on the benefits you can receive.

Key Features

- Choose one network dentist from the Cigna DHMO network for all care
- Most preventive services covered at 100%
- Fixed, low copays for fillings, crowns, root canals
- Dental implants at low, fixed charges
- Orthodontia for adults and children

Important: Coverage is available through DHMO network providers *only*. Other than emergency treatment, there is no out-of-network coverage. Note that the DHMO network is smaller than the Dental PPO network.

DHMO Network

Live in a metro area? If your dentist is in the DHMO network, or if you're open to seeing one who is, you may want to consider the DHMO option. With low premiums and fixed co-pays, the DHMO could be your best value.

Find Your WHY

Managing pregnancy, diabetes, or heart disease? These conditions affect your dental health. All four plans offer Oral Health Integration — extra coverage for gum disease and tooth decay treatment. Register at myCigna.com.

REGISTER NOW

SUPPORT & RESOURCES

Cigna Customer Support

- 24/7 live operators: 888-764-0099
- Language line available for non-English speakers

Find A Dentist

- Go to myCigna.com, select **Care & Costs**
- Search by **Doctor by Name** (to check on a specific provider) or **Doctor by Type** (for choices of network dentists, pediatric dentists, and orthodontists).

No ID Card Needed

When you use a network provider, you don't need to bring your Dental ID card. Just provide your Social Security Number when you check in – and you're good to go.

Guides

- DPPO Plan Guide
- DHMO Plan Guide

Cigna healthcare

- myCigna.com
- 888-764-0099, 24 hours a day, seven days a week
- Mobile App – Find dentists, track claims, view benefits
  Google | Apple

for your HEALTH

Vision Care

Protect your vision with annual eye exams and screenings that can prevent future problems. This coverage supplements your State Health Benefits Plan with allowances for prescription eyeglasses and contact lenses.

Your Choices	Your Costs
• Vision Select Plan • Vision Select Plus Plan	Pre-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

Why Choose Vision Care

- Largest provider network in Georgia
- Customized network includes private practice ophthalmologists and retail chains
- Network-level coverage at Walmart and Sam's Club
- Low-cost or free lens upgrades on UV, scratch, and anti-reflective treatment and progression transition lenses
- Free upgrades for children under 19 (at network providers only)
- 40% discount on second pair each year

Find Your WHY

Children under 18 are more active and need better eyewear protection. Get scratch-resistant, impact-resistant, and transition lenses for your kids at no additional cost.

Options Overview

	Network Benefits per Calendar Year	
Available Benefits	**Vision Select Plan**	**Vision Select Plus Plan**
Annual Exam	$10 copay	$20 copay
Standard Lenses Single | Bifocal | Trifocal | Lenticular	$20 copay	$25 copay
Frames*	$130 allowance every two calendar years (20% discount on leftover balance)	$150 allowance each calendar year (20% discount on leftover balance)
Contact Lenses*	$105 each calendar year (no cost to you if contacts are non-elective)	$150 each calendar year (no cost to you if contacts are non-elective)
Monthly Premiums	$6 to $16	Range from $9 to $29

** Benefits cover either one pair of glasses (lenses and frames) or one prescription for contact lenses*

SUPPORT & RESOURCES

Find a Provider

Download the Anthem mobile app to locate providers and view benefits.

Google Play | App Store

No ID Card Needed

Providers can verify benefits using your Social Security Number.

Guides

- Select Plan Benefits
- Select Plus Plan Benefits

Anthem

- anthem.com
- 855-556-4844, 24 hours a day, seven days a week
- Mobile App – Download to find in-network providers and view benefits
  Google | Apple

for your
HEALTH

Flexible Spending Accounts

Thousands of state employees save money each year with Flexible Spending Accounts (FSAs).

You can set aside pre-tax dollars to pay for eligible expenses and increase your take-home pay. By using contributions taken from your paycheck — on a before-tax basis — you cover your eligible expenses and take home more pay.

Your Choices	Your Contributions
• **Health Care FSA:** Contribute up to $3,252 in 2026 • **Dependent Care FSA:** Contribute up to $4,956 in 2026	Pre-tax deductions

Important: FSAs do not automatically roll over. You must re-enroll each year and make a new contribution election.

Why Choose FSAs

- Set aside money in advance for predictable expenses
- Reduce taxable income with pre-tax contributions
- Spread costs throughout the year to reduce the burdens of medical and childcare costs
- Access full Health Care FSA allocation on January 1

OPTIONS OVERVIEW

Health Care FSA

What You Can Pay	Eligible out-of-pocket medical, dental, and vision care costs, like deductibles, copays, coinsurance; certain over-the-counter medications See qualifying expenses
2026 Maximum Contribution	$3,252
Availability of Funds	Your total annual contribution is available to you, up front, at the start of the plan year — or as soon as your enrollment is processed (if you're a new employee)
Paying Expenses	• When you first enroll, TASC mails you a debit card to pay for your eligible expenses. • It arrives funded with the entire amount you have allocated for the plan year. If you'd like, you can request additional cards for your eligible dependents (or to replace a lost debit card). • You have the option to use direct pay instead of filing for reimbursement.
Spending Timeframe & Grace Period	• The IRS requires that you use all your FSA funds between January 1 and December 31. For the Health Care FSA, you have a grace period — an extra 2½ months — to spend the funds in your account. You can continue to spend 2026 contributions through March 15, 2027. • Per IRS regulations, any funds remaining after that time are forfeited.
Getting Reimbursed	• Per IRS regulations, any 2026 contributions not spent by March 15, 2027, must be forfeited. • For eligible expenses not paid with your FSA debit card, you have until April 30, 2027, to submit requests for reimbursement.

Monthly Administrative Fees: $1.15 per FSA (DOAS/HRA) plus a fixed $2.35 (TASC); if you enroll in both FSAs, TASC waives the second fee.

Find Your WHY

Almost everyone needs a Health Care FSA, even if they don't realize it. Whether you're covering routine expenses, planned procedures, or ongoing medication for conditions like diabetes, high blood pressure or ADHD, an FSA saves your 20% to 35% on costs you can't avoid. Use pre-tax FSA contributions instead – and keep more money in your pocket.

Dependent Care FSA

What You Can Pay	Eligible child or elder care expenses if you and your spouse are unable to provide care due to your work or school schedules. Your eligible dependents include children under age 13 and any other dependents living with you (at least eight hours a day) who are unable to care for themselves due to a physical or mental disability. See qualifying expenses
2026 Maximum Contribution	• If married, filing jointly, or single: $4,956 • If married, filing separately: $2,478
Availability of Funds	Your contributions accumulate on a per-paycheck basis. They are deducted a month in advance, so are available for you to use starting the following month.
Paying Expenses	You can advance the cost and submit a claim for eligible expenses at georgiafsatasc.com.
Spending Timeframe & Grace Period	The IRS requires that you use all your FSA funds between January 1 and December 31.
Getting Reimbursed	You have until April 30, 2027, to file claims incurred through December 31, 2026.

Monthly Administrative Fees: $1.15 per FSA (DOAS/HRA) plus a fixed $2.35 (TASC); if you enroll in both FSAs, TASC waives the second fee.

What's Covered

- Daycare, nursery school, preschool
- Before/after-school programs, summer camps
- Care inside or outside your home (but not by one of your dependents for income tax purposes)

What's Not Covered

- Care by your spouse or older children
- Healthcare expenses or child support
- Educational services or meals
- Babysitting (unless work-required)

Important: You can use this FSA with the dependent care tax credit, but not for the same expenses. Compare both options or consult your financial advisor to maximize savings.

Find Your WHY

Working parents with childcare or eldercare expenses can benefit from the Dependent Care FSA. It helps you budget predictably while reducing your taxes.

SUPPORT & RESOURCES

TASC

- georgiafsatasc.com
- 877-586-1702
- Mobile App – Download to manage your FSA, see balances, and track claims
  Google | Apple

for your
LIFE

Life Insurance

Life is unpredictable. But you can protect your family's future with life insurance coverage that safeguards those you love most. Benefit from the security of knowing you have coverage to protect them — now and in the years ahead.

Your Choices	Your Costs
• Employee Life • Spouse Life • Child Life	Pre-tax or post-tax deductions for Employee Life Post-tax deductions for Spouse and Child Life **View rates** Check **GaBreeze** to see your personal cost for coverage.

Why Choose Life Insurance

- Up to $2 million in benefits
- Portable and convertible coverage when employment ends or you retire
- Free legal services for a last will and estate planning documents

MetLife's One-Up Campaign is Back!

During Open Enrollment, you can increase your Employee Life insurance by 1 X Pay, guaranteed — regardless of your health and with no medical questions asked. This is an opportunity to add to your coverage or obtain it for the first time.

Find Your WHY

Life insurance protects more than just your loved ones. It protects their hopes, dreams, and future plans. Everyone needs life insurance, and many need more than they currently have.

OPTIONS OVERVIEW

Employee Life	Spouse Life*	Child Life*
1 to 10 X Pay, up to $2 million	$6,000 to $250,000	$3,000 to $20,000 per child
Accidental Death and Dismemberment (AD&D) Insurance Pays additional 1 to 10 X Pay, up to $2 million, if due to covered accident; lump-sum benefits for qualifying disabilities		
Legal Services Last will and testament, advanced health care directive, and durable power of attorney included		

* *These benefits are available if you have enrolled in Employee Life insurance. Spouse life coverage cannot be more than yours.*

OTHER INFORMATION

How Benefits Are Calculated

Your benefits are based on your Annual Benefit Base Rate, which includes:

- your base salary and
- regular salary supplements that are regular, non-temporary.

The rate is not more than the amount on which your retirement contributions are calculated and is used as your pay for benefits purposes throughout the plan year.

Age Reductions

See the certificate for the age reduction charts in the policy.

Added Value

When you enroll in Employee life Insurance, the following are included at no cost:

- Will preparation with a MetLife Legal Benefit attorney
- Grief counseling services
- Funeral planning assistance and discounts
- Estate resolution services for matters related to probating your estate
- Accelerated benefits for terminal illness

Beneficiary Information

Choose your **beneficiary** for life insurance and AD&D plans.

- Can be a person, business, charity, or trust
- You can have multiple beneficiaries
- You are the beneficiary for spouse and child life insurance coverage

Name a **contingent beneficiary**.

- Receives benefits if primary beneficiary dies
- Prevents benefits from going to probate

Important: Do not name minor children as beneficiaries. MetLife cannot pay benefits to children under 18, which delays access to funds.

New Employee Advantage

Guaranteed coverage available during your first 31 days — no medical questions or evidence of insurability required.

Don't wait: This opportunity disappears after your initial enrollment period. Future coverage requires medical approval.

	Employee	Spouse	Child
Benefit Options	1 to 10 X Pay	$6,000 to $250,000	$3,000 to $20,000
Maximum Benefit	$2 Million	$250,000	$20,000
Guaranteed Issue (no statement of health)	$200,000, or, if your pay is higher, 1 X Pay up to $300,000	$30,000	$20,000

Requests for coverage above Guaranteed Issue levels require a statement of health, are subject to medical review, and are

SUPPORT & RESOURCES

Guides

- Life Insurance Overview

MetLife

- metlife.com/info/georgia
- 877-255-5862
- Mobile app – Download the MetLife mobile app
  Google | Apple

for your
LIFE

Accidental Death and Dismemberment Insurance

Accidental Death and Dismemberment (AD&D) insurance provides extra financial protection if you have an accident that results in death or dismemberment.

Your Choices	Your Costs
Coverage Levels: 1 to 10 times your annual pay, up to $2 million	Pre-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

Why Choose AD&D Insurance

- Separate from Life insurance — choose different benefit levels
- Up to $2 million in benefits with more choices
- Portable coverage you can take with you when your employment ends, or you retire

Find Your WHY

Between ages 1 and 49, accidents are the leading cause of death. AD&D is the most affordable life insurance option and pays benefits for both accidental death and accident-related disabilities.

OTHER INFORMATION

Beneficiary Information

Choose your **beneficiary** for life insurance and AD&D plans.

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SUPPORT & RESOURCES

MetLife

- metlife.com/info/georgia
- 877-255-5862
- Mobile app – Download the MetLife mobile app
  Google | Apple

Disability Insurance

If illness or injury prevents you from working, disability insurance replaces up to 60% of your pay. The Flexible Benefits Program gives you options for Short- and Long-Term Disability insurance.

Your Choices	Your Costs
• Short-Term Disability • Long-Term Disability	Post-tax deduction **View rates** Check **GaBreeze** to see your personal cost for coverage.

Why Choose Disability Insurance

- Choice of waiting periods for short-term benefits
- Rehabilitation support and return-to-work assistance
- Up to $25,000 for accommodations to help you return to work
- Coverage continues through end of employment month (gives you a little extra financial cushion)
- Long-term coverage is portable (you can take it with you if you leave)
- Premiums waived while receiving benefits

OPTIONS OVERVIEW

Short-Term Disability

Short-Term Disability (STD) coverage protects your income when a qualifying injury or illness prevents you from performing your job responsibilities

Benefits Begin	Your choice of two plan options: • After a **7-day** waiting period following your accident or injury; or • After a **30-day** waiting period
Benefit Paid	• An amount that, combined with other deductible income you receive (if any),* replaces 60% of your pay (up to $130,000) • Maximum weekly benefit: $1,500
Benefit Duration	Up to six months (remaining 173 days under the 7-day waiting period option; 150 days under the 30-day waiting period option)

** See the **STD Highlights** for more information on this and other plan provisions*

Waiting period options

You can choose short-term disability coverage based on the length of waiting period, which is the number of days following your injury or illness before benefits begin.

7-Day Waiting Period

- Traditional coverage
- Benefits start on day 8 of qualifying condition

30-Day Waiting Period

- Ideal if you have substantial leave time
- Benefits start on day 31

Find Your WHY

Disabilities last longer than you think. The average duration is 2-3 years, with some lasting 5+ years or permanently. How would you pay your bills and support your family? Nearly 60% of State employees don't have this coverage. That's why we urge you to consider this benefit. It might come in handy for the moments that matter.

How 30-Day Option Works

- Days 1-30: Use your leave time (100% pay)
- Days 31+: Disability benefits begin (60% pay)

Both plans provide up to six months of coverage, but the 30-day option costs less and allows you to maintain 100% pay longer if you have adequate leave time.

30-Day Option Advantages

- Lower cost: Can be nearly half the premium of 7-day option
- Higher pay, longer: Keep 100% salary for 30 days using leave
- Same total coverage: Up to six months of income protection
- Best for: Employees with substantial vacation and sick leave

Long-Term Disability

Long-Term Disability (LTD) coverage protects your income when a serious condition keeps you from working for an extended time	
Benefits Begin	• After a 180-day waiting period • If you have STD coverage, your LTD benefits can begin when STD ends
Benefit Paid	• An amount that, combined with other deductible income you may receive,* replaces 60% of your pay (up to $200,000) • Maximum monthly benefit: $10,000
Benefit Duration	Benefits can continue until you are no longer disabled, or (in most cases) reach your Social Security Normal Retirement Age

** See the **LTD Highlights** for more information on this and other plan provisions*

Important Update on Short-Term Disability (STD) and Long-Term Disability (LTD)

During Plan Year 2025, the system (GaBreeze) update to extend disability coverage through the end of the month that employment ended extended coverage through the end of the following month if deductions for STD and/or LTD were withheld in the last pay period of the month that employment ended.

Example: Participant's employment ended on August 21, 2025. If your entity withheld your STD and/or LTD premiums from your last paycheck in August, your STD and/or LTD coverage would terminate on September 30, 2025.

Effective January 1, 2026, STD and LTD coverage will terminate at the end of the month employment ends.

SUPPORT & RESOURCES

Guides

- **STD Highlights**
- **LTD Highlights**

The Standard

- **sites.standard.com/edu/state-georgia/80731**
- 888-641-7186

Critical Illness Insurance

Critical Illness Insurance pays cash benefits if you're diagnosed with serious conditions that are leading causes of death and healthcare costs in the United States.

Your Choices	Your Costs
• **For You:** $5,000, $10,000, $20,000, or $30,000 cash benefit levels • **Spouse:** $5,000, $10,000, $20,000, or $30,000 (up to your coverage amount) • **Children:** $5,000, $10,000, or $15,000 (up to your coverage amount, same regardless of number of children)	Post-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

Critical Illness coverage for your spouse or your children cannot be more than your own coverage.

WHAT'S COVERED

Common Covered Conditions

- Addison's Disease
- Advanced Dementia, including Alzheimer's Disease
- Benign Brain Tumor
- Cancer
- Coma
- Complete loss of hearing, sight, speech
- Coronary Artery Bypass Surgery
- COVID-19 Hospital Admissions
- End Stage Renal Failure
- Heart Attack
- Lou Gehrig's Disease (ALS)
- Major Organ Transplant
- Multiple Sclerosis
- Muscular Dystrophy
- Osteomyelitis
- Paralysis
- Sickle Cell Amenia
- Stroke
- Systemic Lupus
- Tuberculosis

Additional Coverage

Many other conditions included, plus childhood diseases.

Real-Life Example

See how Critical Illness Insurance pays when every minute matters. You can also find a benefits summary and costs.

LEARN MORE

Why Choose Critical Illness Insurance

- Full benefits for recurring conditions
- Premium waiver if you become disabled
- Portable coverage you can take with you
- **$100 annual wellness benefit per covered family for** common health screenings
- Convenient, efficient way to file a claim

Get Paid to Stay Healthy

Voya's Enhanced Protection plans offer more than financial security – they actually pay you cash for staying on top of your health. Complete qualifying health screenings, and Voya sends you a check. Enrolled in multiple plans? You can receive payouts for each plan, for each covered family member.

LEARN MORE

Other Enhanced Protection plans:

Accident Insurance ›

Hospital Indemity Insurance ›

Cancer Insurance ›

Enhanced Protection Coverage

Life's unexpected moments shouldn't break your budget.

The Flexible Benefits Program can protect you from life's "What Ifs." These plans give you cash payments directly. Use it for childcare, transportation, or whatever matters most while you focus on healing.

Real protection. Real peace of mind.

SUPPORT & RESOURCES

Filing Claims Online:
Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, select the benefit, and click to get started.

Guides

- Explore Critical Illness Insurance
- presents.voya.com/EBRC/stateofgeorgia

for your
FINANCES

Accident Insurance

Accident Insurance pays cash benefits for one of life's most common "what ifs" — an accident or injury. You can receive cash benefits for the conditions they cause and the services needed to treat them.

Your Choices	Your Costs
Available Tiers • Employee only • Employee + Spouse • Employee + Children (to age 26) • Employee + Family	Post-tax deduction **View rates** Check **GaBreeze** to see your personal cost for coverage.

Why Choose Accident Insurance

- 24/7/365 coverage
- Cash benefits for conditions and treatment services
- Extra benefits for organized sports injuries
- Accidental death and dismemberment benefits
- Travel assistance services 100+ miles from home at no cost
- Portable coverage you can take with you
- **$60 annual wellness benefit per covered family for common health screenings**
- Convenient, efficient way to **file a claim**

WHAT'S COVERED

Voya pays cash benefits directly to you when qualified accidents or injuries result in:

Treatment Services

- Physician, urgent care, or emergency room visits
- Emergency ambulance transportation
- Hospital confinement

See benefits summary and costs.

Injury Conditions

- Concussions
- Dislocations
- Fractures
- Other accident-related injuries

Plus, **Travel Accident Services** are included.

Use Benefits Any Way You Choose

You can use your cash benefits any way you'd like:

- Out-of-pocket medical costs
- Mortgage or rent payments
- Daily living expenses (transportation, meals, phone service, utilities)
- Recovery services

Real-Life Example

See how Accident Insurance pays when every minute matters. You can also find a list of cash benefits available.

LEARN MORE

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LEARN MORE

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SUPPORT & RESOURCES

Filing Claims Online:
Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, select the benefit, and click to get started.

Guides

- Explore Accident Insurance
- Presents.voya.com/EBRC/stateofgeorgia
- 844-262-6042

for your
FINANCES

Hospital Indemnity Insurance

Get cash benefits for eligible stays — both planned and unexpected.

Your Choices	Your Costs
Available Tiers • Employee • Employee + Spouse • Employee + Children (to age 26) • Employee + Family	Post-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

WHAT'S COVERED

Voya pays a cash benefit, directly to you, for a hospital confinement. You can use the cash for out-of-pocket medical costs, living expenses — anything you choose.

Benefits	Coverage
Hospital Admission	$1,000 (minimum 23 hours; one confinement per year)
Daily Hospital Confinement	Starting Day 2, $200/day (up to 31 days per confinement)
Critical Care Unit	Starting Day 2, $600/day (up to 10 days per confinement)

One of the best features is that the plan covers both unexpected hospital stays and planned procedures. For some of you, this benefit could be an obvious choice.

For example, let's say you need an eligible surgical procedure you can't get scheduled until next year; or you're pregnant, with a delivery date after January 1. You can get a cash benefit of $1,000 when you're admitted to the hospital — and, starting on Day 2, $200 a day for your hospital stay.

Real-Life Example

See how Hospital Indemnity Insurance pays when every minute matters.

LEARN MORE

Why Choose Hospital Indemnity Insurance

- Cash benefits for both unexpected stays and planned procedures
- Portable coverage you can take with you
- **$60 annual wellness benefit per covered family for common health screenings**
- Convenient, efficient way to file a claim

Get Paid to Stay Healthy

Voya's Enhanced Protection plans offer more than financial security – they actually pay you cash for staying on top of your health. Complete qualifying health screenings, and Voya sends you a check. Enrolled in multiple plans? You can receive payouts for each plan, for each covered family member.

LEARN MORE

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Accident Insurance ›

Cancer Insurance ›

Enhanced Protection Coverage

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Guides

- Explore Hospital Indemnity Insurance
- Presents.voya.com/EBRC/stateofgeorgia
- 844-262-6042

for your FINANCES

Cancer Insurance

Get cash benefits for cancer treatment and services following a covered diagnosis.

Your Choices	Your Costs
Available Tiers • Employee only • Employee + Spouse • Employee + Children (to age 26) • Employee + Family	Post-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

Why Choose Cancer Insurance

- Benefits tailored to cancer treatment needs
- Portable coverage you can take with you
- Premium waiver if you become disabled
- **$60 annual wellness benefit per covered family for common health screenings**
- Convenient, efficient way to file a claim

WHAT'S COVERED

Cancer-Specific Benefits

Cash benefits for cancer diagnoses, treatment, and services that start after coverage begins, including:

- First occurrence (initial diagnosis)
- Chemotherapy and radiation
- Stem cell transplant
- Cancer-related surgery
- Hospital confinement
- Blood and plasma treatments
- Hospice care

Tailored Coverage

Cancer insurance is specifically designed for cancer treatment needs. Click here for more on the plan, its many covered treatments and services, and benefit limits.

Get Paid to Stay Healthy

Voya's Enhanced Protection plans offer more than financial security – they actually pay you cash for staying on top of your health. Complete qualifying health screenings, and Voya sends you a check. Enrolled in multiple plans? You can receive payouts for each plan, for each covered family member.

LEARN MORE

Other Enhanced Protection plans:

Critical Illness Insurance ›

Accident Insurance ›

Hospital Indemity Insurance ›

Real-Life Example

Check out this real-life example showing how Cancer Insurance pays in those times when every minute matters.

LEARN MORE

HOW DOES THIS PLAN DIFFER FROM CRITICAL ILLNESS INSURANCE?

	Critical Illness Insurance	Cancer Insurance
Coverage	Cancer, plus a range of serious, potentially life-threatening medical conditions	Cancer only
Benefits	Initial diagnosis, recurrence, and eligible subsequent occurrences	Initial diagnosis, plus a range of benefits for treatment and services specific to Cancer

Enhanced Protection Coverage

Life's unexpected moments shouldn't break your budget.

The Flexible Benefits Program can protect you from life's "What Ifs." These plans give you cash payments directly. Use it for childcare, transportation, or whatever matters most while you focus on healing.

Real protection. Real peace of mind.

SUPPORT & RESOURCES

Filing Claims Online:
Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, select the benefit, and click to get started.

Guides

- Explore Cancer Insurance
- presents.voya.com/EBRC/stateofgeorgia
- 844-262-6042

for your
FINANCES

Long-Term Care Insurance

Long-Term Care insurance helps you maintain quality of life when health challenges arise. It provides cash benefits to offset the cost of personal care, and health and social services for chronic conditions or long-lasting disabilities.

Important!

Long-Term Care is available only through participating entities offering this coverage.

Your Choices	Your Costs
Available Tiers • Employee only • Employee + Spouse • Employee + Children (to age 26) • Employee + Family **Extended Family Coverage** • Also available for your parents and parents-in-law.	Post-tax deduction View information and rates

WHAT'S COVERED

Services Included:

- Personal care assistance
- Health and social services
- Chronic condition care
- Long-term disability support

Learn how coverage works and benefit payment details ›

SUPPORT & RESOURCES

Guides

- Long-Term Care Enrollment Workbook

unum

- unuminfo.com/sog
- 888-764-3539

Legal Benefits

Legal Benefits provide support for services you'll need — both expected and unexpected. Choose from three plans to get the legal expertise you need, when you need it.

Your Choices	Your Costs
• **Select:** Basic coverage • **Select Plus:** Expanded coverage • **Select Premium:** Broadest coverage	Post-tax deduction View rates Check GaBreeze to see your personal cost for coverage.

WHO'S COVERED

Employee, spouse, and children up to age 26.

WHAT'S COVERED

Unlimited access to MetLife Legal attorneys for a wide range of legal matters. And no additional costs for covered services — no waiting periods, copays, deductibles, or out-of-pocket expenses.

Select	Select Plus	Select Premium
The Select option provides benefits for the following services • Wills and codicils • Reduced fee benefit (25% discount) • Living wills • Powers of Attorney • Traffic ticket defense (no DUI) • Affidavits • Deeds and Mortgages • Promissory notes • Elder law matters • Personal Injury (25% maximum fee) • Sale, purchase, and refinancing of your primary residence and second or vacation home • Home equity loans for your primary residence and second zor vacation home • Debt collection defense • Identity theft defense	**Select Plus provides the same services as Select, plus the following** • Probate proceedings • Protection from domestic violence • Consumer protection matters • Personal Wage Earner Plan • Tax audits • Civil litigation defense • Administrative hearing representation • Incompetency defense • Change or establishment of custody order or visitation rights • Adoption and legitimization • Divorce/Dissolution/Annulment (20 hours of services) • Enforcement or modification of support orders • Guardianship/conservatorship • Immigration assistance • Eviction and tenant problems (tenant only) • Name change • Juvenile court defense • Security deposit assistance (tenant)	**Select Premium provides all the services for Select and Select Plus, plus the following** • Personal property protection • Boundary title disputes (primary residence) • Small Claim assistance • Demand letters • Prenuptial agreement • Property tax assessments • Zoning applications • Restoration of driving privileges • Living Trusts

Why Choose Legal Benefits

- Unlimited access to experienced
- Support by phone, online, or in person
- No copays, deductibles, or claim forms
- No out-of-pocket charges for covered services

Find Your WHY

Get unlimited access to experienced attorneys — by phone, online, or in person — for just $5-$10 per month. No additional charges for covered services. Get all the legal help your family needs for less than the cost of one meeting with an attorney.

SUPPORT & RESOURCES

Guides

- Legal Plan Overview

MetLife

- metlife.com/info/georgia
- 800-821-6400, Monday-Friday, 8 a.m. to 8 p.m. ET
- Download the MetLife Legal Plan mobile app
  Google | Apple

How to Enroll

Who's Eligible

Here's who is eligible to participate in the Flexible Benefits Program.

Full-Time State Employees

Regular employee (30+ hours/week, 9+ months expected)

Note: You are not eligible if you are a temporary, contingent, or student employee, or work in a sheltered workshop or work transition program.

Education Employees

- Public-school teacher working 17.5+ hours/week in certified capacity or working half time or more and not considered a "temporary" or "emergency" employee
- Local school system employee holding a non-certificated position and eligible for the Teachers Retirement System (TRS) or its local equivalent, working a minimum of 20 hours a week (or 60% of the time necessary to carry out the duties of the position if that's more than 20 hours)
- Local school system employee working at least 15 hours (or 60% of the time necessary to carry out the duties of your position if that's more than 15 hours) and eligible for the Public-School Employees' Retirement System (PSERS)

Other Eligible Employees

- County or regional library employee working 17.5+ hours/week
- Those deemed eligible by federal or Georgia law

Questions about eligibility? Contact your Human Resources/Payroll Office.

Questions about eligibility?

Contact your Human Resources/Payroll Office.

Eligible Dependents

Whom You Can Cover

- Legal spouse
- Dependent children under age 26 (i.e., natural and legally adopted children of you and your spouse; and legal ward/guardianship)
- Disabled dependents age 26+ (if disabled before age 26)

Disabled Dependents

Dependent children who are disabled before age 26, and incapable of self-sustaining employment due to mental or physical disability, are eligible for coverage if:

- The disabled child is already a participant and turning age 26. To maintain eligibility, submit documentation of the disability within 31 days of their reaching age 26.
- The child was disabled before age 26 and is enrolling as a newly eligible dependent. You must provide proof of the child's disability within 31 days of enrollment.
- You must submit the DOAS/HRA Disabled Dependent Certification Form within 31 days of enrollment. Otherwise, you can enroll your disabled dependent child during the next Open Enrollment period, or if he or she experiences a **Qualifying Life Event** during the year.

Documentation Required

You may need to provide applicable support documentation, like marriage certificate or birth certificate, to verify eligibility.

Important: State Health Benefit Plan (SHBP) disability certification does *not* transfer to the Flexible Benefits Program.

OTHER INFORMATION

Leave of Absence

If you are on unpaid leave of absence and enrolled in benefits, your coverage will continue except for the Dependent Care FSA. GaBreeze will bill you directly for premiums. You must make timely payments to avoid coverage termination.

Retirement

Learn what you need to know about your eligibility for benefits when you retire ›

Termination

Be sure to review **eligibility and coverage rules** that apply to your flexible benefits coverage if you are terminated.

How to Enroll

New Hires

As a new employee, you have unique enrollment opportunities and important deadlines to secure your Flexible Benefits Program coverage.

Find Your WHY

As a new hire, you can secure guaranteed coverage for life and disability insurance guaranteed — with no medical questions asked. This opportunity is available to you only during your first 31 days of eligibility. Act now so you don't miss out!

New Employee Enrollment

Timing

- 31 days from date of hire (or benefits eligibility) to enroll
- Coverage starts the first day of the month after you complete one full calendar month of continuous employment
- Coverage lasts for the full calendar year. You can change your elections during the next Open Enrollment period (or sooner, if you have a **Qualifying Life Event** that allows for a change).

How to Enroll

1. Review your enrollment worksheet (mailed to your home)
2. Access GaBreeze portal
3. Select your benefits
4. Complete your enrollment

First-Time Portal Users

Getting started:

1. Go to **GaBreeze**
2. Click on **New User?** and create your login (User ID and Password)
3. Log in to **GaBreeze**
4. Follow prompts to choose benefits (select **Change Benefit Elections** to get started)

Browser Requirements: Use current versions of Chrome, Firefox, Microsoft Edge, and Safari.

New Hire Advantages

Here are the unique advantages available to you during your initial benefits enrollment period:

Life Insurance

- Employee coverage of up to $200,000, or, if your pay is higher, 1 X Pay up to $300,000 — no medical questions asked
- Guaranteed coverage for children and up to $30,000 for spouse
- Future enrollment requires submission of health statements and vendor approval of coverage

View guaranteed coverage amounts ›

Disability Coverage

- Short-Term: Avoid 60-day waiting period in the event of an illness-related claim should you choose to apply in the future
- Long-Term: No medical evidence required now (but mandatory if applied for later)

Long-Term Care

- No health requirements during new hire enrollment
- Future enrollment requires proof of insurability

Available only if your employer currently offers this benefit

How to Enroll

Enrolling for Benefits

YOUR ENROLLMENT OPTIONS

- Enroll in new benefits
- Modify current coverage levels
- Add or remove dependents
- Cancel coverage you no longer need
- Update beneficiaries
- Change personal information

What Happens If You Don't Enroll

Most benefits automatically continue to the next year. **Exception: FSAs require annual re-enrollment,** or you'll lose this benefit. If you want to continue FSA contributions, you must re-enroll during Open Enrollment.

MAKING YOUR ELECTIONS

Your benefit choices remain in effect until the next Open Enrollment period, unless you experience a **Qualifying Life Event (QLE) that allows for mid-year changes**.

OTHER INFORMATION

Enrollment Checklist

Before Enrollment

- Review the Flexible Benefits Guide
- Confirm your GaBreeze login credentials (User ID and Password). You can reset them on GaBreeze before you enroll.
- Update personal information and preferences (email and text)

During Enrollment

- Upload required documentation (if needed)
- Update (or add) beneficiary designations
- Select **Complete Enrollment** when finished

After Enrollment

- Review and print your confirmation page
- Report discrepancies to GaBreeze Benefits Center immediately
- Check your paycheck against your elections and contact your Human Resources Department if you find any discrepancies

Important!

Don't miss special enrollment opportunities available only during Open Enrollment or your initial eligibility period.

Where to Enroll

1. Online

Enroll online at **www.GaBreeze.ga.gov**.

Tip: Make sure you know your User ID and Password before you enroll. But, if you don't, no problem. You can reset them by clicking "Forgot User ID or Password" directly below the Log On button.

2. Mobile

Enroll on the Alight Mobile app, available at **Google Play** or the **App Store**.

Tip: Make sure you have a current mobile phone number on file with Alight to receive security codes for logging on to the mobile app.

Questions? Go to **GaBreeze** or call 877-342-7339 (toll-free), Monday-Friday, 8 a.m. to 5 p.m. ET.

Get Personal Help

Schedule an appointment to speak one-on-one with a GaBreeze Customer Care Specialist.

Schedule an Appointment

- Visit **GaBreeze.ga.gov** or use the Alight mobile app
- Choose your preferred time slot
- Receive text or email reminders

Can't Schedule? Call Instead.

Phone: 877-342-7339
Hours: Monday-Friday, 8 a.m. to 5 p.m. ET
Busy times: Choose call-back option

Fees and Rates

- Find an overview on the **Benefits at a Glance** summary
- View details on the **Flexible Benefits Rate Sheet**
- Get personalized costs on **GaBreeze** (includes costs specific to your coverage, levels, and age)

Administrative Fee

DOAS/HRA administrative fee of $1.15 per month per plan. These funds enhance program services and improve your experience.

Your Opinion Matters

Complete the post-enrollment survey in **GaBreeze**. Your feedback helps us improve our services.

How to Enroll

Making Changes

Qualifying Life Events

When Can You Make Changes

Your benefit elections normally last the full plan year. You can make certain changes mid-year if you experience a Qualifying Life Event (QLE):

- Marriage or divorce
- Birth, adoption, or legal guardianship
- Death of a qualified dependent
- Gain or loss of coverage under another benefit plan

Required Steps (within 31 days)

1. Update information in GaBreeze or call 877-342-7339
2. Submit supporting documents (i.e., marriage certificate or court order)

Important: The State Health Benefit Plan (SHBP) and the Flexible Benefits are separate programs. You must report QLEs to each program separately.

New baby or adoption?

You have 90 days (instead of 31) to enroll your new dependent. Coverage will be backdated to the birth or adoption date.

Employment Status Changes

When Status Changes Affect Benefits

- Leave of absence
- Break in employment
- Return to benefits-eligible position
- Termination or retirement

When your employment status changes, check your options on GaBreeze or call 877-342-7339.

Benefits When You Retire

Most benefits continue through the end of the month following your retirement (if premiums are current).

Dental Coverage

- Automatic continuation if enrolled at retirement
- Annual changes during Retiree Option Change Period (ROCP)
- Payment typically is deducted from pension. If you pay through direct bill instead, you must submit your premiums on time to avoid cancellation of coverage

Important: Your decision to drop dental coverage is permanent. You cannot re-enroll later.

Find information on retiree dental benefits ›

Vision Care

- Available to continue through COBRA for up to 18 months

Life Insurance & Related Plans

Option to continue Life Insurance, AD&D, Long-Term Care (if eligible), Legal Benefits, and Voya plans (Critical Illness, Accident, Hospital Indemnity, Cancer). GaBreeze will send the retiree a packet and instructions on how to convert coverage to an individual policy and other portability rules.

Benefits That End at Retirement

- Health Care FSA: COBRA through end of plan year only
- Disability Insurance: Ends last day of your retirement month

Contacts

Whom to Contact for Assistance		
Contact the Flexible Benefits Vendors	**Contact GaBreeze**	**Contact the Entity**
• Benefit questions • Help finding a network provider • ID cards • Claims status • Claims appeals	• Eligibility and enrollment questions/changes (QLEs) • Eligibility appeals • Premiums questions • Enrolling or removing dependents • Password reset/access to GaBreeze	• Updating your contact details (non-Team Works) • Payroll questions • Leave Without Pay questions

GaBreeze Benefits Center	GaBreeze 877-342-7339 Monday–Friday, 8 a.m. to 5 p.m. ET	GaBreeze.ga.gov

Benefit Type	Name & Contact Information	Website
Dental Insurance	Cigna DPPO and DHMO 888-764-0099 (24/7, 365 days a year)	cigna.com
Vision Care	Anthem Blue Cross Blue Shield (Anthem) 855-556-4844 Monday–Saturday, 7:30 a.m. to 11 p.m. ET Sunday, 11 a.m. to 8 p.m. ET	anthem.com
Flexible Spending Accounts (starting January 1)	TASC 877-586-1702 Monday–Friday, 8 a.m. to 8 p.m. ET	georgiafsatasc.com
Employee, Spouse, Child Life Insurance and Accidental Death and Dismemberment	MetLife 877-255-5862 Monday–Thursday, 8 a.m. to 8 p.m. ET Friday, 8 a.m. to 5 p.m. ET	metlife.com/info/georgia
Disability Insurance	The Standard 888-641-7186 Monday–Friday, 8 a.m. to 8 p.m. ET	sites.standard.com/edu/state-georgia/80731 standard.com
Critical Illness, Accident, Hospital Indemnity, and Cancer Insurances	Voya 844-262-6042 Monday–Friday, 9 a.m. to 8 p.m. ET	presents.voya.com/EBRC/stateofgeorgia
Long-Term Care	Unum 888-SOG-FLEX (888-764-3539) Monday–Friday, 8 a.m. to 8 p.m. ET	unuminfo.com/sog
Legal Benefits	MetLife Legal Plans 800-821-6400 Monday–Friday, 8 a.m. to 8 p.m. ET	metlife.com/info/georgia legalplans.com

Other Information

Terms and Conditions

Important: These terms govern your participation in the Flexible Benefits Program. Review them carefully.

Read the complete Terms and Conditions of the Flexible Benefits Program ›

Other Information

Frequently Asked Questions

General

Why do I need this program?

Flexible Benefits provide protection and peace of mind in the moments that matter — and for those who matter most to you. This Open Enrollment, take a fresh look at your options. Consider not only what the coverages offer but also why they are important.

What happens if I don't enroll or sign up?

Your benefit elections will carry over into 2026 — with one exception. If you want to contribute to a Flexible Spending Account (FSA) in 2026, you must make new elections during Open Enrollment.

How long does the coverage last?

The options you choose during Open Enrollment remain in effect for the entire 2026 Plan Year. This means any current coverage that continues 2026 — as well as new elections you make for 2026 — will be in place from January 1 through December 31, 2026. You do, though, have the ability to make certain coverage changes during the year if you experience a Qualifying Life Event (QLE). The interactive benefits guide covers QLEs in detail.

What if I have questions about enrolling for flexible benefits?

Call the GaBreeze Benefits Center at **877-342-7339** to speak with a GaBreeze Customer Care Specialist.

When you call the GaBreeze Benefits Center during busy periods, you will hear estimated wait times for your call to be answered. If the wait is too long, choose to receive a call-back or schedule a call for a more convenient time. You can also schedule an appointment ahead of time to speak with a GaBreeze Customer Care Specialist. You'll receive reminders by text or email. Go to GaBreeze, or use the Alight mobile app, which can be downloaded on Google Play or the App Store, to book your appointment.

Can I enroll for or make changes in my State Health Benefit Plan coverage through the GaBreeze enrollment portal?

No. You will need to access the State Health Benefit Plan (SHBP) enrollment portal to make changes in your state health benefits.

What action should I take if my name is not on the enrollment portal?

Contact your entity's Human Resources Department for assistance.

I plan to retire in 2026. Should I enroll for dental coverage during Open Enrollment this year?

Yes, you should enroll in dental coverage during this year's Open Enrollment. You **must be enrolled in a dental option before retiring** to qualify for retiree dental coverage.

If you are enrolling during this Open Enrollment, your retirement date must be effective on or after February 1, 2026, to be eligible for retiree dental coverage. During the Retiree Dental Option Change Period (ROCP), which is the same period as Open Enrollment each year, you can only make changes or discontinue your dental coverage.

GaBreeze

It's my first time using the enrollment portal. How do I log on?

Go to GaBreeze. Click on "New User?" and follow the prompts to complete the login process. Note that when accessing GaBreeze, you should use the most current versions of the following browsers: Google Chrome, Firefox, Microsoft Edge, and Safari.

How do I reset my User ID/Password if I can't remember them?

You can go to GaBreeze and request a password reset. If you aren't sure of your log-in information, go online before Open Enrollment begins so that you'll have it when you're ready to sign up for benefits. If you have questions about the enrollment system, call the GaBreeze Benefits Center at **877-342-7339**.

Why can't I access GaBreeze using Internet Explorer?

You must use the most current versions of these browsers to access GaBreeze and the enrollment system: Google Chrome, Firefox, Microsoft Edge, and Safari.

What if I can't get logged on to the GaBreeze enrollment portal?

Call the GaBreeze Benefits Center at **877-342-7339**, Monday-Friday, 8 a.m. to 5 p.m. ET.

Coverage changes

Can I drop coverage that I no longer need in 2026?

Go to GaBreeze or access the enrollment portal using Alight Mobile, which can be downloaded on Google Play or the App Store, by November 8 at 12:59 a.m. ET, to drop coverage for 2026. You can only discontinue coverage during Open Enrollment (October 20 at 1 a.m. ET through November 8 at 12:59 a.m. ET) unless you experience a Qualifying Life Event (QLE).

Can I make changes during Open Enrollment?

Yes, you can access the enrollment portal as many times as needed to make changes or review your enrollment. However, after November 8, 2025, at 12:59 a.m. ET, you can no longer change your 2026 benefit elections.

I'm on leave without pay (LWOP) during Open Enrollment. What happens to my flexible benefits?

When you are on LWOP, you will receive a direct billing from GaBreeze for your flexible benefits. You must pay the premium(s) to avoid cancellation of your benefits. You can only discontinue flexible benefits coverage for 2026 during Open Enrollment (October 20 at 1 a.m. ET through November 8 at 12:59 a.m. ET). Upon return from LWOP, you will have 31 days to contact GaBreeze to re-enroll or make changes in your flexible benefits.

How can I request a name change?

You must contact your Human Resources department to have your name changed in the system.

Dependents

Whom can I cover under the Flexible Benefits Program?

Eligibility information for dependents can be found **here** or on **GaBreeze**. Generally, you can cover your legal spouse and dependent children through age 26. Disabled dependents that were disabled prior to age 26 may be eligible if they meet the requirements. However, you should refer to the eligibility information to see any special circumstances that might apply.

Are my grandchildren considered dependents?

You **must** have legal custody or guardianship to enroll a grandchild in flexible benefits. Eligibility information for the Flexible Benefits Program can be found **here** or on **GaBreeze**.

Do I need to submit a birth certificate or marriage license to enroll a dependent for coverage?

You must provide proof to GaBreeze that your dependents meet the eligibility requirements for coverage under the Flexible Benefits Program. Be sure the names of your dependents are listed on your enrollment page and that you select the boxes next to their names to enroll them in coverage. If your dependent's name is not checked, they will not have coverage for 2026. GaBreeze will prompt you if dependent verification documents are needed. You do not need to act until requested to do so.

Statement of Health

How do I provide a statement of health (or evidence of insurability)?

If a statement of health is required for enrollment in a benefit option, you'll see prompts after you submit your elections. These prompts will appear on your Completed Successfully page, in your Reminders, and throughout the GaBreeze website. A detailed instruction guide is also available as a PDF on the GaBreeze website.

Confirmation

How can I check to see that my elections are accurately reflected in the system?

After you complete your enrollment on GaBreeze.ga.gov or using Alight Mobile, you will receive a **Completed Successfully** message along with a confirmation number. Please review your information, confirm that your elections and dependents are accurate, and print a copy to keep for your records.

If you enroll by phone with the GaBreeze Benefits Center, a confirmation statement will be emailed to your email address on file with GaBreeze. If there is no email address on file for you, a paper copy will be mailed to your home mailing address.

How do I change my elections after I've completed online enrollment?

If the enrollment period has not ended, you can log back online and make changes. You will receive a confirmation of enrollment after you complete your enrollment. Be sure to review your statement. If you notice any errors, contact the GaBreeze Benefits Center immediately, at **877-342-7339.**