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Flexible Benefits for You

The Flexible Benefits Program offers coverage to protect your health, life, and finances from whatever may come your way. It provides protection and peace of mind in the moments that matter, and *for those* who matter most — to you.

You'll find a broad range of choices for you and your family. From dental and vision benefits, to life insurance and flexible spending accounts, we have you covered. You'll find benefits for the "what-ifs" of life that can catch you by surprise — like injuries, accidents, serious health conditions, and hospital stays. You can even get year-round access to "sky's-the-limit" legal expertise — for less than it costs to see an attorney for a single hour.

Each plan ranks in the top tier of its respective market, with features and provisions designed for you. You can secure these benefits at favorable rates — some among the lowest in Georgia.



HEALTH

- Dental Insurance
- Vision Care
- Flexible Spending Accounts



LIFE

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



FINANCES

- Disability Insurance
- Enhanced Protection Coverage
- Critical Illness Insurance
- Accident Insurance
- Hospital Indemnity Insurance
- Cancer Insurance
- Long-Term Care Insurance





Find Your WHY

Look for the WHYs posted throughout this guide. They'll give you insights into plans and features that may be especially valuable to you. Finding your WHY can help you use these options to your advantage — and make the most of **Flexible Benefits for You**.

What's New for 2024

Open Enrollment for Plan Year 2024 Flexible Benefits — October 16 through November 4, 2023 (at 12:59 a.m.)

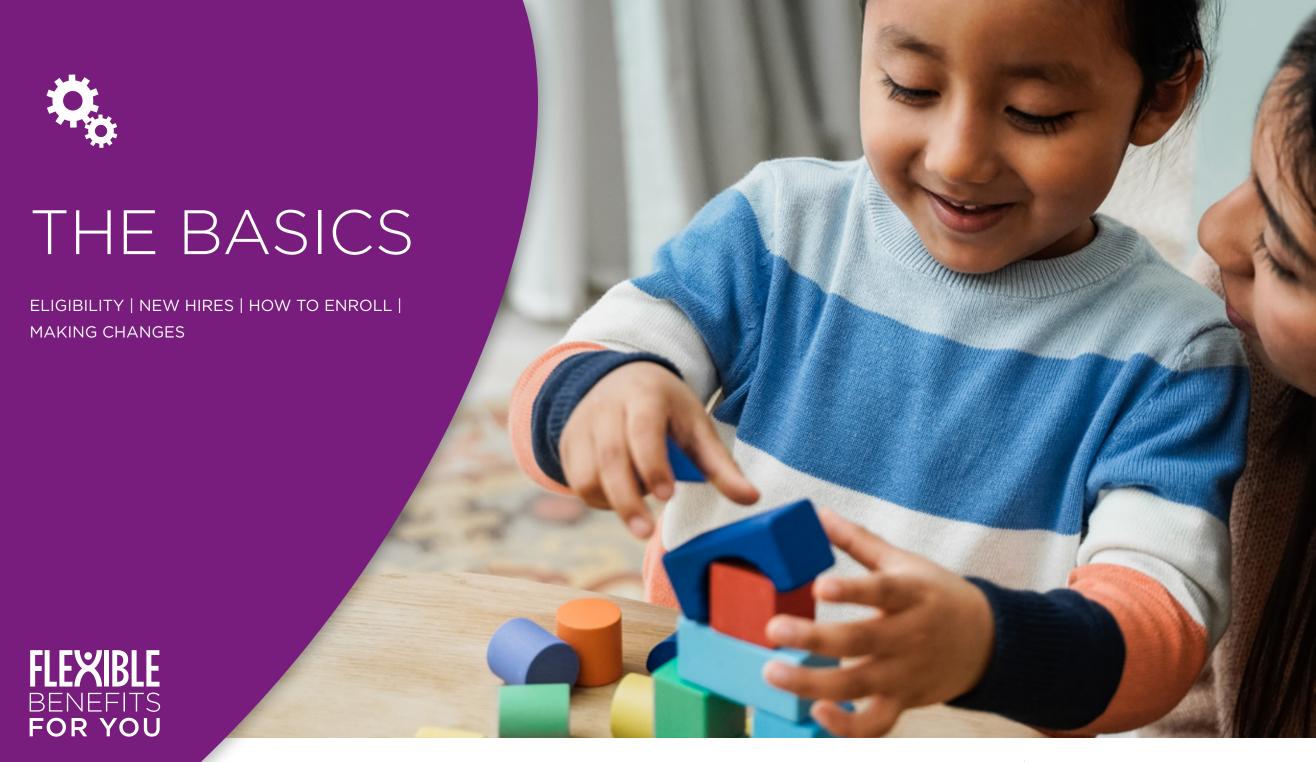
Open Enrollment is your chance to review your options and make sure you have the coverage you need for the year ahead. Review the **2024 What's New Highlights Brochure** to see what's new for 2024, how to enroll, and important enrollment reminders.













Eligibility

FULL-TIME EMPLOYEES

You are eligible to participate in the Flexible Benefits Program if you are:

- A full-time, regular employee who works a minimum of 30 hours a
 week and expected to work for at least nine months. Employees who
 work in a sheltered workshop or work transition program, contingent
 employees, temporary employees, and student employees are
 not eligible.
- A public-school teacher, working at least 17.5 hours per week and employed in a professionally certified capacity, or working half time or more and not considered a "temporary" or "emergency" employee.
- An employee of a local school system holding a non-certificated position. You must be eligible to participate in the Teachers Retirement System (TRS) or its local equivalent, and you must work 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).
- An employee of a local school system 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 you are eligible to participate in the Public-School Employees' Retirement System (PSERS).
- An employee of a county or regional library and work at least 17.5 hours per week.
- Deemed eligible by Federal or Georgia law.

If you aren't sure whether you're eligible, contact your Human Resources/Payroll Office.

DEPENDENTS

Dependents eligible for coverage under the Flexible Benefits Program include your:

- Legal spouse, and
- Your dependent children (i.e., natural and legally adopted children of you and your spouse; and legal ward/guardianship) who are either
 - Under age 26, or,
 - Age 26 or more, if disabled before age 26 and incapable of selfsustaining employment by reason of mental incapacity or physical disability (see <u>Disabled Dependents</u>)

Be aware that, when requested by Human Resources Administration (HRA), you must provide supporting documentation (e.g., marriage certificate, birth certificate) to verify your dependent's eligibility to participate in the Flexible Benefits Program.

Want to know more about eligibility for Flexible Benefits? It's easy! Click below for the information you need.

Retirement

Termination







DISABLED DEPENDENTS

Dependent children who are disabled before age 26, and incapable of self-sustaining employment by reason of mental incapacity 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 a Disabled Dependent Certification Form to Human Resources Administration (HRA) within 31 days of enrolling for coverage. Otherwise, your disabled dependent child cannot participate in flexible benefits. Be aware that the State Health Benefit Plan (SHBP) is a separate program, so disability certification for SHBP benefits does not transfer to these plans.

LEAVE OF ABSENCE

If you are on unpaid leave of absence and enrolled in benefits, your coverage will continue. GaBreeze will bill you for premiums directly, and you are solely responsible for making timely payments. Failure to do so will result in the termination of your coverage.











New Hires

You have 31 days from your date of hire to enroll in the Flexible Benefits Program. Your coverage will begin on the first day of the following month after you have completed a full month of continuous employment.

ENROLLING FOR COVERAGE

Watch for an enrollment worksheet, mailed to your home, with your benefit options and premiums. Then, enter your elections into the **GaBreeze** portal. If you need to make any changes during your 31-day enrollment window, contact the GaBreeze Benefits Center at **877-342-7339**.

ONE-TIME OPPORTUNITIES

Certain options are available to you only during your first enrollment as a new hire. If you waive these coverages now, you may not be eligible to add them in the future.

• **Life Insurance:** You can obtain up to \$200,000 in Employee Life Insurance, no medical questions asked. You can also secure guaranteed coverage for your children and up to \$30,000 in life insurance for your spouse.

Your new-hire privileges are especially important when it comes to life insurance. In future years, your ability to add this benefit is not guaranteed. Based on your submission of a mandatory statement of health, MetLife will determine whether or not to approve your request for coverage. But, during your initial enrollment, you can obtain benefits up to the guaranteed levels shown above — no hassle and risk-free.

- **Short-Term Disability**: If you waive coverage now and want to add it in the future, you'll incur a late-enrollment penalty (a mandatory 60-day wait period before qualifying benefits begin).
- Long-Term Disability: If you waive coverage during your initial enrollment period, a future request for this benefit will require a statement of health and must be reviewed for insurability by The Standard Insurance Company (The Standard).
- Long-Term Care: If you waive coverage during your initial enrollment period, a future request for this benefit will require Evidence of Insurability.



Find Your WHY

As a new hire, you have a unique opportunity to obtain life insurance, disability coverage, and long-term care (if your entity is eligible to participate), guaranteed. It's a great way to secure coverage for moments that really matter to you.







How to Enroll

Elections you make during the enrollment period will be the coverage you have until the next Open Enrollment period, unless you have a Qualifying Life Event (QLE) that allows for a change in coverage.

WHAT CAN I DO WHEN I ENROLL?

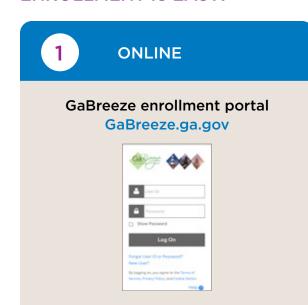
- Sign up for benefits
- Change current options
- Increase or decrease coverage levels and/or tier
- Discontinue your enrollment
- Add eligible dependents
- Drop covered dependents
- Add or change beneficiaries
- Update personal information

WHAT HAPPENS IF I DON'T ENROLL?

If you don't make changes during Open Enrollment, your benefit elections will carry over into the next year — with two exceptions:

- 1 If you want to continue a Flexible Spending Account (FSA) you must make new contribution elections each year.
- 2 If you want to continue Child coverage for Critical Illness or Accident Insurance in 2024, you must make an election to enroll them.

ENROLLMENT IS EASY!





Questions about the enrollment system?

Call GaBreeze at 877-342-7339 weekdays, 8 a.m. to 5 p.m. ET



Find Your WHY

If you don't enroll, you may miss out on special enrollment opportunities that are available only during Open Enrollment or when you are first eligible to enroll for benefits.









YOUR GaBreeze CHECKLIST

Before Enrollment

- ☐ Review the Open Enrollment materials, e.g., 2024 Flexible Benefits Guide, What's New Highlighter.
- ☐ Make sure you know your GaBreeze User ID and Password. If not, reset them on GaBreeze before you enroll.
- ☐ Log in to GaBreeze to review your current coverages, dependents, and beneficiaries.
- □ Update personal information, including email and text preferences.

During Enrollment

- ☐ Check to see if supporting documentation is required for coverage (e.g., dependent verification documents, statement of health).
- ☐ Add or change your beneficiary designation(s).
- ☐ Select **Complete Enrollment** when finished making elections.

After Enrollment

- ☐ Review and print your **Completed Successfully** page and report discrepancies immediately to the GaBreeze Benefits Center. Follow up to ensure that corrections are made.
- ☐ Compare your paycheck statement(s) to your coverage elections. Contact your Human Resources Department if you find any discrepancies.

FIRST TIME USING THE ENROLLMENT PORTAL?

- 1 Go to GaBreeze
- 2 Click on New User? and follow the prompts to create your User ID and Password
- 3 Once you have completed the registration, log in to GaBreeze.
- 4 Follow the **Change Benefit Elections** prompts to choose benefits

When accessing GaBreeze, use the most current versions of these browser platforms: Google Chrome, Firefox, Microsoft Edge, and Safari.

Three Ways to Save Time

- 1 Schedule an appointment online to speak with a GaBreeze Customer Care Specialist. You'll get reminders by text or email. Go to GaBreeze, or use the Alight mobile app, to book your appointment.
- 2 Hear estimated wait times when you call the GaBreeze Benefits Service Center during busy periods. If the wait is long, choose to receive a call-back or schedule a call for a more convenient time.
- 3 Download the Alight mobile app to make elections from anywhere and on the go.









Making Changes

When Open Enrollment ends, your benefit elections are locked in for 2024. You can make changes if you experience a Qualifying Life Event (QLE).

QUALIFYING LIFE EVENTS

Your benefit elections apply to the full plan year. If you experience a QLE, like those below, you may be able to add, drop, or modify certain coverages during the year.

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

If you experience a QLE, you can make certain benefit changes — as long as you complete the following steps within 31 days of the qualifying event:

- Enter the applicable updates (e.g., dependent information) and your requested benefit changes into GaBreeze — or contact the GaBreeze Benefits Center at 877-342-7339; and
- Submit the appropriate supporting documents, such as a marriage certificate or court order.

Please remember that the State Health Benefit Plan (SHBP) and the Flexible Benefits Program are separate. If you're covered under both programs, you must declare separate QLEs to make changes in your coverage within the required time frame.

CHANGES IN EMPLOYMENT STATUS

Changes in your employment status — such as a leave of absence, break in employment, return to a benefits-eligible position, termination, or retirement — have an effect on your benefits. When your employment status changes, explore your options on GaBreeze, or contact the GaBreeze Benefits Center at 877-342-7339.

Welcoming a new addition to your family?

When you have a baby or adopt a child, the first month can be hectic. For that reason, you have extra time to enroll your new dependent. Instead of the normal 31 days, you have **up to 90 days** after birth or adoption to update your benefits and submit the required documentation. If you do, the change will be backdated to the date of birth or adoption.









RETIREMENT

When your employment ends, your benefits typically continue for 30 days after your most recent premium has been paid. You can continue your dental coverage during retirement, as well as certain other coverages through COBRA or by arrangements with a benefits vendor.

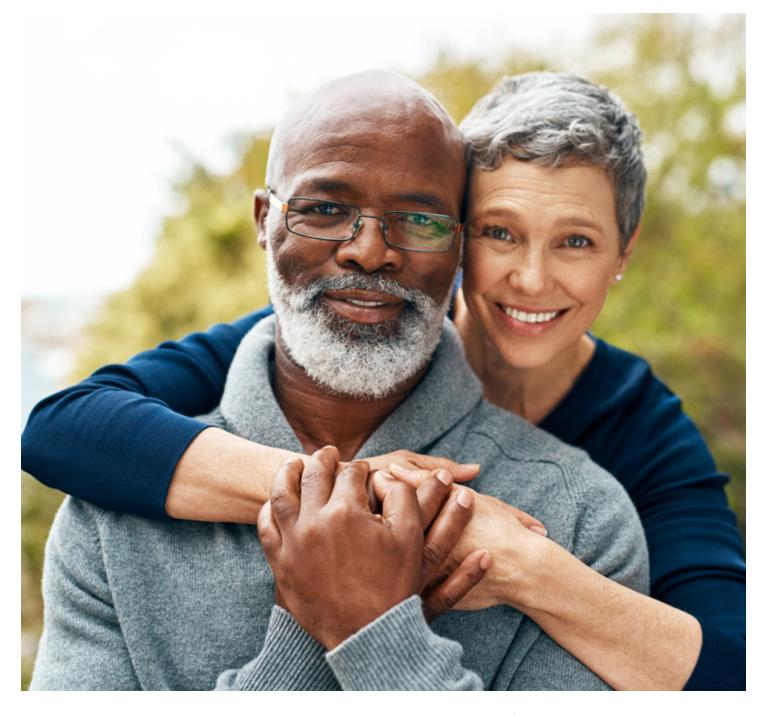
Dental Benefits

- If you are enrolled in a dental plan when you retire, it will continue automatically. Each year, you have the option to change your coverage during the Retiree Option Change Period (ROCP).
- You also have the option to drop coverage at retirement or at any time throughout the plan year. Be aware that this decision is permanent. You will not be able to re-enroll at a later date.
- Retiree dental premiums are normally deducted from your pension.
 If you arrange to pay through direct bill instead, you must submit your premiums on time to avoid cancellation of coverage.

Other Benefits

- You can continue your vision coverage, through COBRA, for up to 18 months.
- If you're enrolled in a Health Care FSA, your COBRA coverage is available only through the end of the plan year.
- Short- and Long-Term Disability coverage ends on the last day of the month that you retire.
- You have the option to continue Life Insurance, AD&D, Long-Term Care, Legal plans, and the new Voya plans after you retire.

You can find details on GaBreeze.













Dental Insurance

Dental coverage keeps you smiling and helps you stay healthy. When you enroll for dental coverage, you have access to check-ups, no-cost preventive care, and affordable services. By protecting your dental health, you help take care of the rest of you.

| Choices | Cost | Advantages to Consider | For More Information |
|---|---|---|--|
| Dental Care® DHMO Dental PPO Select Dental PPO Select Mid Dental PPO Select Plus | Monthly premiums range from: • \$22 to \$61 for DHMO • \$26 to \$118 for DPPO 2024 Flexible Benefits Rates | One of the few programs, anywhere, with a DHMO and three DPPO options Strong DHMO network in metropolitan areas, making it an attractive option in those locations Largest PPO network in Georgia, giving you | DPPO Plan Guide DHMO Plan Guide |
| Coverage | Check GaBreeze to see your personal cost for coverage. | convenient access to services, and maximum benefits, close to home • Flexibility to select richer coverage when you need it | myCigna.com 888-764-0099 |
| You, your spouse, and your children | | (like for extensive dental procedures or orthodontia) and lower coverage for those years you don't | Download the mobile app to find in-network dentists, track claims, and view benefits Google Apple |







YOUR DENTAL OPTIONS

| | | Dental PPO Options | | Dental Care® DHMO |
|---|-----------------------|--|--|--|
| | Dental Select | Dental Select Mid | Dental Select Plus | |
| Annual Deductibles | \$5 | 50 per person / \$150 for fam | ily | No deductibles |
| Diagnostic and Preventive Services ¹ | 100% | coverage (no deductible ap | pplies) | |
| Basic Services (restorative, including oral surgery) | 80% | 80% | 90% | |
| Major Services (crowns, inlays, TMJ, and more) | 50% | 50% | 60% | All services delivered at fixed co-payments ² |
| 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 Premiums | Lowest | Middle | Highest | \$22 to \$61 |
| | | Range from \$26 to \$118 | | \$22 to \$61 |

A Network Dentist is Just a Click Away

It's easy to find a participating dentist in your area. Go to myCigna.com, click Find a Doctor, Dentist or Facility and search the appropriate network (DHMO or DPPO).

Lighten Your Wallet

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!

Find more information about your dental options at the Virtual Benefits Fair.



Find Your WHY

Are you being treated for such conditions as pregnancy, diabetes, or heart disease? They can all affect your dental health. That's why all four options offer Oral Health Integration. If you have a qualifying condition, this feature reimburses you for services to treat (or prevent) gum disease and tooth decay. Go to **myCigna.com** for information and registration.



Find Out More!

DPPO Plan Guide | DHMO Plan Guide







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

² See the DHMO Plan Guide

CIGNA DENTAL PPO OPTIONS

Flexible Benefits is one of the few programs anywhere that offers a choice of three PPOs. This range of options gives you the flexibility to select richer benefits when you need them, and switch to lower coverage in years you don't.

- Largest network of participating providers, both in Georgia and nationwide
- Coverage for services both in and out of network
- Preventive cleanings at no cost to you
- Orthodontia services for adults and dependent children, and dental implant coverage available under Dental Select Mid and Dental Select Plus
- Emergency dental care covered at 100% when you see a network provider
- Low-cost "tele-dental" services for when you can't get to a dentist
- MyCigna mobile app not only helps you find network dentists. It also has a cost-comparison tool to identify the most cost-effective providers.

CIGNA DENTAL CARE® (DHMO)

When you choose the Cigna DHMO, you won't be surprised by unexpected expenses. The DHMO has no deductibles or coinsurance — as all covered services are delivered at fixed, copays. And there is no annual limit on the benefits you can receive.

- Choose a dentist from the Cigna DHMO network for all your dental care needs
- Most preventive services, such as exams, X-rays, and cleanings are covered 100%
- Fillings, crowns, root canals, and other services are available at fixed, low copays
- The DHMO covers dental implants at low, fixed charges

Other than emergency services, the DHMO provides benefits *only* when you use DHMO network providers. There is no out-of-network coverage. Plus, DHMO networks are smaller than PPO networks.



The good news is that the DHMO has strong networks in metropolitan areas. If you live in any of those on this map, have a look at the DHMO network. If your dentist is in the network (or you're open to one who is) you may want to consider the DHMO. With low premiums and fixed co-payments, the DHMO may be the best choice for you.

Help Is A Phone Call Away

Cigna's call center offers live operators 24 hours a day, seven days a week, all year round. It even has a language line to help non-English speaking participants navigate care. Just dial **888-764-0099**.







Vision Care

The value of good vision is plain to see. Imagine being unable to read, drive, watch TV — or enjoy seeing the beautiful faces of the people you love!

Your vision care options provide for annual eye exams and screenings that can head off future problems — and protect your irreplaceable eyesight.

This coverage goes beyond what is included in the State Health Benefits Plan. It includes allowances toward the purchase of prescription eyeglasses and contact lenses.

| Choices | Cost | Advantages to Consider | For More Information |
|--|---|--|---|
| Vision Select PlanVision Select Plus Plan | Monthly premiums range from: • \$5 to \$16 for Select • \$9 to \$29 for Select Plus 2024 Flexible Benefits Rates | Customized network, Vision Access Value, includes private practice ophthalmologists and retail chains Broadest benefits, including network-level coverage at Walmart and Sam's Club Free and low-cost lens upgrades, saving you money on UV, scratch, and anti-reflective treatment, | Select Plan Benefits Select Plus Plan Benefits anthem.com |
| Coverage | Check GaBreeze to see your personal cost for coverage. | progressive transition lenses, and others (including free upgrades for children under age 19, when | 855-556-4844 |
| You, your spouse, and your children | | received from network providers) • Second pair of frames at a 40% discount each year | Download the Anthem mobile app to find in-network providers and view benefits Google Apple |









YOUR VISION OPTIONS

| | 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 | \$5 to \$15 | \$9 to \$28 | |

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



Find Your WHY

Children under 18 tend to be more active than we are — so need more eyewear protection. That's why our plans give them extra coverage. You can get your children such lens upgrades as scratch-resistant coating and impact-resistant, thin polycarbonate, and transition lenses — at no additional cost.



Find Out More!

Select Plan Benefits | Select Plus Plan Benefits



Vision ID Cards

Under the Flexible Benefits Program you don't need a Vision ID card to receive care. Your network provider can look up your benefits, and process your claim, with your Social Security Number.







Flexible Spending Accounts

Thousands of employees across the State save big each year by participating in a Flexible Spending Account (FSA). How about you? FSAs stretch your dollars and make your budget work smarter. By using contributions taken from your paycheck — on a before-tax basis — you cover your eligible expenses and take home more pay.

Choices

- Health Care FSA contribute up to \$3,000 in 2024
- Dependent Care FSA contribute up to \$4,992 in 2024

Coverage

Tax-favored account you can use to pay for eligible recurring, predictable health care or dependent care expenses

Advantages to Consider

- Set aside money in advance for expenses you know you'll pay during the year
- Before-tax contributions reduce taxable income — and increase your take-home pay
- Spread costs throughout the year to reduce the burdens of medical or childcare costs
- Access to the full year's allocation of Health Care FSA contributions on January 1

For More Information

Health**Equity**

HealthEquity/WageWorks



Learn.HealthEquity.com/doas



877-924-3967



Download the HealthEquity mobile app to manage your FSA, see balances, and track claims Google | Apple











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 | |
| 2024 Maximum Contribution | \$3,000 | |
| Availability of Funds | Your total annual contribution is available to you, in advance, at the start of the plan year — January 1, 2024. | |
| Paying Expenses | When you first enroll, HealthEquity/WageWorks 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 also have the option to pay expenses up front and file 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 in 2025 — to spend the funds in your account. You can continue to spend 2024 contributions through March 15, 2025. Per IRS regulations, any funds remaining after that time is forfeited. | |
| Getting Reimbursed | Per IRS regulations, any 2024 contributions not spent by March 15, 2025, must be forfeited | |
| | For eligible expenses not paid with your FSA debit card, you have until April 30, 2025, to submit requests for reimbursement. | |

\$3.20 monthly administrative fee for the Health Care FSA

Find Your WHY

Not everyone signs up for a Health Care FSA. But, it's a benefit *nearly everyone needs*. For some, it may be to cover planned procedures. For others, it's paying regular, predictable health care expenses each year. And, for most of us, it's maintenance medication for such common conditions as ADHD, high-blood pressure, diabetes, cholesterol, thyroid, sleep disorders, and anxiety.

You can certainly cover these costs on your own with take-home pay — the amount left over after FICA, State, and Federal Income taxes are withheld. But these taxes are *not* withheld from your contributions to the FSA. They don't even leave your paycheck. They get paid, instead — to you. Depending on your tax bracket, the savings could be as much as 20% to 35%. That's a healthy boost in your take-home pay!









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 |
|-----------------------------------|---|
| 2024 Maximum Contribution | If married, filing jointly, or single: \$4,992If married, filing separately: \$2,500 |
| Availability of Funds | Your contributions accumulate on a per-paycheck basis. You can use this FSA to pay for eligible child or elder care services as soon as there's enough money in your account to cover the charge. |
| Paying Expense | You can advance the cost and submit a claim for eligible expenses at member.my.healthequity.com. |
| Spending Timeframe & Grace Period | The IRS requires that you use all your FSA funds between January 1 and December 31. |
| Getting Reimbursed | The IRS requires that you use all your FSA funds between January 1 and December 31. You have until April 30, 2025 to file claims incurred through December 31, 2024. |

What to Know About Care

- Generally, you can use funds to send your child to day care, nursery school, preschool, before- and after-school programs, and summer day camp.
- Care may be provided inside or outside your home, but not by one
 of your dependents for income tax purposes (for example, not your
 spouse or older child).
- Health care expenses, child support payment, and babysitting (unless required so you can work) are not eligible expenses. Services must be for the physical care of the child and not for such purposes as education and meals.
- You can use this FSA in conjunction with the dependent care tax credit, but not with the same dollars. Because everyone's financial situation is unique it may be best to compare savings under the two approaches or speak with your financial advisor, before deciding to enroll.

Find Your WHY

The Dependent Care FSA can be valuable if you are a working parent who requires care for a child or adult dependent while you are at work. The FSA will help you budget more effectively by having a predictable way to cover these costs. Also, it will reduce your taxes.











LIFE INSURANCE | AD&D INSURANCE





Life Insurance

Life is unpredictable. But you can stay prepared with life insurance to safeguard the future for those you love most. When you enroll for coverage, you can feel secure knowing you have coverage to protect them — now and in the years ahead.

| Choices | Cost | Advantages to Consider | For More Information |
|--|---|---|--|
| Employee Life: 1 to 10 X Pay Spouse Life: \$6,000 to \$250,000 Child Life: \$3,000 to \$20,000 per child | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage. | More coverage choices and up to \$2 million in benefits Coverage that's both portable (you can take it with you) and convertible (switch to a Whole Life policy), whichever you prefer, when your employment ends or you retire Access to legal services for creating a last will and | MetLife Life Insurance Overview metlife.com/info/georgia 877-255-5862 |
| Coverage | | other estate planning documents — at no cost — either online or by working directly with an attorney | Download the MetLife mobile app Google Apple |
| You, your spouse, and your children | | | |







YOUR LIFE INSURANCE OPTIONS

| 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.

WHAT PAY IS USED TO CALCULATE MY INSURANCE?

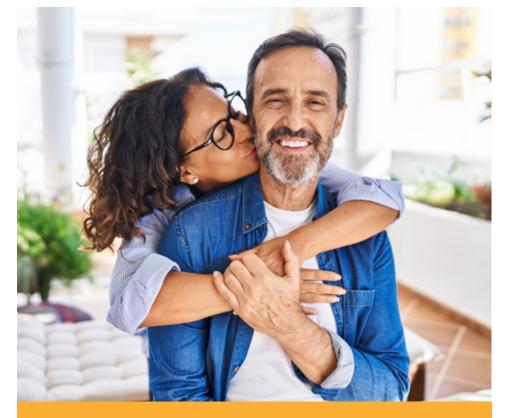
Benefits are based on your Annual Benefit Base Rate. It includes your base salary and salary supplements that are regular, non-temporary, and not more than the amount on which retirement contributions are calculated. Your Annual Benefit Base Rate is reflected on **GaBreeze** and is used as your pay for benefits purposes throughout the plan year.

Employee and Spouse Life Insurance coverage is reduced starting at age 65. Premiums are calculated at the reduced coverage level. See the certificate for the age reduction charts.

ADDED VALUE FOR YOU

MetLife helps protect those you love in the moments that matter. When you enroll in MetLife Employee Life Insurance, the following legal services are included at no additional cost.

- Will preparation with a MetLife Legal Benefit attorney, by phone or in person
- Estate resolution services to address matters related to probating your estate.
- Accelerated Benefit Option for advance access to life insurance proceeds in the event of a terminal illness
- Funeral discount and planning services for planning with a licensed counselor and access to discounted funeral services
- Grief counseling by phone or in person, to help cope with loss and related life changes



Special Opportunity During 2024 Open Enrollment

This year, you have a special enrollment opportunity. Between now and November 4 (at 12:59 a.m.) you can increase your Employee Life Insurance — or obtain coverage for the first time — by 1 X Pay, guaranteed, no medical questions asked. If you've ever been concerned about life insurance, this is the perfect time to act!



Find Out More!

Life Insurance Overview







^{*} Once you elect employee coverage, you may add insurance for your spouse and children.

TAKE IT WITH YOU

When your employment ends or you retire, you don't have to leave life insurance behind. You have the option to continue your MetLife group term coverage at competitive rates or you can choose to convert it to individual Whole Life insurance. For help with conversion, contact Transition Solutions at 877-ASK-MET7 (877-275-6387).

IMPORTANT BENEFICIARY INFORMATION

Be sure to name a **beneficiary** whom you want to receive the proceeds of your life insurance and AD&D plans.

- Your beneficiary can be a person, business, charity, or trust.
- You can have multiple beneficiaries.
- You are the beneficiary of Spouse and Child life insurance.

Be sure to name a **contingent beneficiary**. Here's why.

- In the event a beneficiary is no longer alive, life insurance proceeds will go to the contingent beneficiary.
- If you have not named a contingent beneficiary, the benefits will be subject to probate.

It can be tempting to name your children as beneficiaries — but don't. MetLife can't deliver proceeds to children under age 18. If you name a minor child as recipient, you will only delay their access to the funds they need.

ARE YOU A NEW EMPLOYEE?

As a new hire, you have the opportunity to sign up for life insurance. Some coverage levels are guaranteed, meaning no medical questions are asked and no statement of health is required. If you waive life insurance when you are hired and want to add it in the future, you may not qualify. So take advantage of this chance to secure the life insurance you need!

| | 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 | \$30,000 | \$20,000 |

Levels of coverage above the guarantees require a statement of health, are subject to medical review, and are contingent on a finding of insurability.





Find Your WHY

No one likes to think about death. But it does happen. Life insurance protects not only those we love. It also protects the hopes, aspirations, and dreams we have for those who matter most. We all need life insurance. Many need more than we have. And, one in every three State employees has **no coverage at all**.









Accidental Death and Dismemberment Insurance

Accidental Death and Dismemberment (AD&D) insurance provides extra financial protection. It will help meet your family's needs if you have an accident that leads to dismemberment or death.

| Choices | Cost | Advantages to Consider | For More Information |
|----------------------------------|---|---|---|
| 1 to 10 X Pay, up to \$2 million | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage. | AD&D coverage is separate from life insurance, so you can select different benefit levels for each More coverage choices and up to \$2 million in benefits Ability to take AD&D coverage with you when your employment ends or you retire | MetLife metlife.com/info/georgia 877-255-5862 |
| Coverage | | | Download the MetLife mobile app Google Apple |
| You only | | | |

Find Your WHY

From ages 1 through 49, you're more likely to die as the result of an accident or injury than from any other cause. AD&D is the lowest-cost form of life insurance. It can also provide benefits when an accident leads to a disability.









for your FINANCES

DISABILITY | ENHANCED PROTECTION COVERAGE | LONG-TERM CARE | LEGAL BENEFITS





Disability Insurance

Flexible Benefits for You gives you options for Short- and Long-Term Disability insurance. If you can't perform your job responsibilities due to illness or injury, these benefits can help replace up to 60% of your pay.

| Choices | Cost | Advantages to Consider | For More Information |
|--|--|---|--|
| Short-Term Disability • 7-day waiting period • 30-day waiting period Long-Term Disability • 180-day waiting period Coverage You only | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | A choice of waiting periods before Short-Term Disability benefits begin — including an option especially well-suited for State employees Comprehensive support to help you recover, including rehab incentives, and up to \$25,000 for accommodations to help you return to work Stable, low-cost premiums Option to take Long-Term Disability insurance with you when you leave the State Waiver of premiums — Premiums are waived while you are receiving STD and/or LTD benefits | STD Highlights LTD Highlights sites.standard.com/edu/state- georgia/80731 888-641-7186 |







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 | Your choice of two plan options: |
|---------------------|---|
| Begin | 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 (max. of 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



Find Out More! STD Highlights

Special Enrollment Opportunity

During this year's Open Enrollment, you can add Short-Term Disability insurance without a late-enrollment penalty. If you have a qualifying disability, you won't have a mandatory 60-day waiting period before benefits begin. This limited-time opportunity is available only between October 16 and November 4, 2023 (at 12:59 a.m.).

Your STD Options

Unlike most plans, the Flexible Benefits Program offers you a choice of STD waiting periods — the number of days following your injury or illness before benefits begin.

- 1. The **7-day waiting period** is the traditional approach to STD. Benefits would start on the eighth day of your qualifying condition.
- 2. The **30-day waiting period** option is not common. But it is particularly well-suited for State employees. Here's why.
 - Like many State employees, you may have built up a lot of vacation and sick leave. If so, selecting the 30-day waiting period gives you the same coverage as the other plan — at less than half the cost.
 - During the waiting period, you can use leave time to continue 100% of your pay. Then, once benefits begin, you'll receive a total of 60% of pay. If you choose the 30-day waiting period option, you'll keep 100% of your pay for 30 days before benefits begin. (Under the seven-day option, you'll have fewer days at 100% and more at 60%).
 - Both plans can get you through six months of disability. But, if you
 have enough leave time, consider choosing the 30-day waiting
 period. You will pay a lot less and draw 100% of pay a lot longer.

NEW! Starting January 1, STD benefits apply to more pay — all the way up to \$130,000. The new maximum weekly benefit is \$1,500 — an increase of 50%. If your salary is more than Plan Year 2023 maximum Benefit salary of \$86,684, your 2024 premiums will reflect the extended coverage.

Find Your WHY

Most of us appreciate the importance of life insurance. But we need disability insurance just as much — if not even more. That's because, during our working years, we're far more likely to experience a disability than we are to die.

Disabilities last longer than you may think. The average duration is two to three years. Some continue for at least five years, and, in some cases, for life.

What if it happened to you? How would you pay bills and support your family?

Close to 60% of State employees do not have this coverage. That's WHY we urge you to view this benefit with fresh eyes — and see WHY it is so advantageous to you.







LONG-TERM DISABILITY

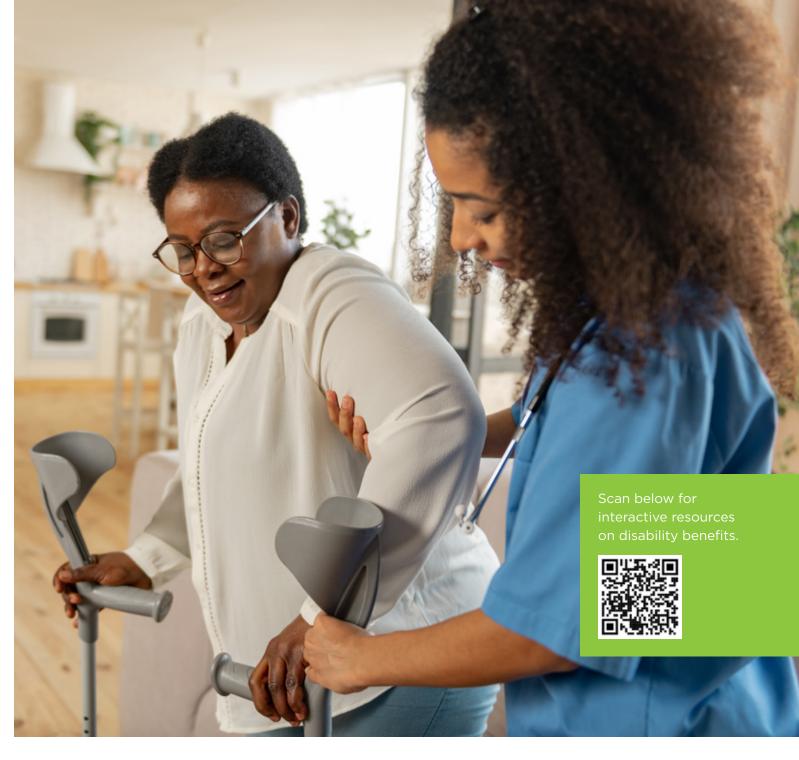
Long-Term Disability (LTD) coverage protects your income when a serious condition keeps you from working for an extended time.

| serious contait | tion keeps you from working for all extended time. |
|---------------------|---|
| Benefits | Following a 180-day waiting period |
| Begin | If you have STD coverage, your LTD benefits can begin when STD ends |
| Income Replaced | 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 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

NEW! Starting January 1, LTD benefits apply to more pay — all the way up to \$200,000. The new maximum monthly benefit is \$10,000 — an increase of 50%. If your salary is more than Plan Year 2023 maximum Benefit salary of \$100,000, your 2024 premiums will reflect the extended coverage.

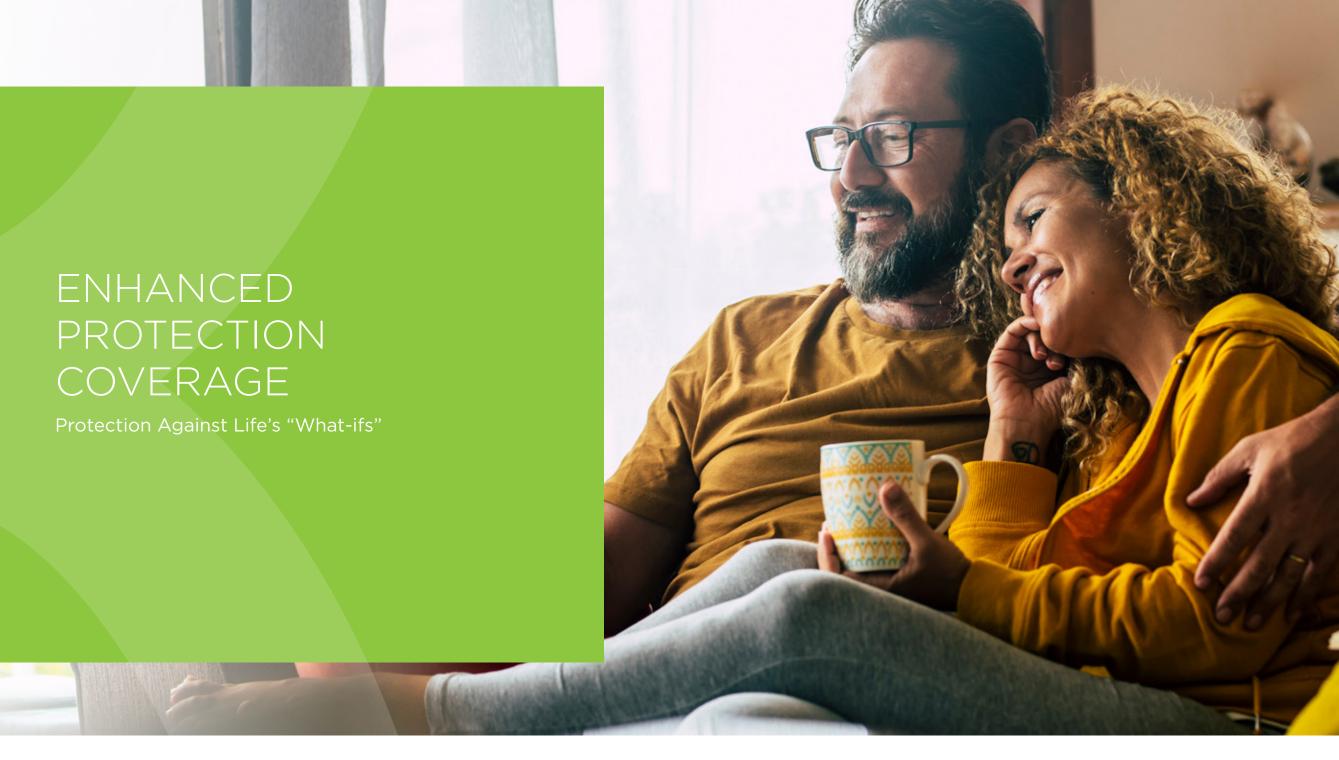
















The Flexible Benefits Program is pleased to introduce a new benefits vendor, Voya, and a suite of new benefit options. They protect you from the "What Ifs" of life. Like WHAT IF you, or someone you love, has a heart attack or stroke? Is diagnosed with a serious illness? Has an accident, or needs an extended hospital stay?

Unexpected events like these can happen to anyone, at any time. When they do, they create emotional and financial stress. Serious health conditions are disruptive and can often be terrifying. They generate uncertainty along with potentially significant out-of-pocket costs. You'll have new expenses to cover along with all your family's other normal monthly bills.

That's where these new benefit options come in. While triggered by medical conditions, they are not medical insurance. The plans provide only one form of benefit — **cash** — paid directly to you, to use as you see fit.

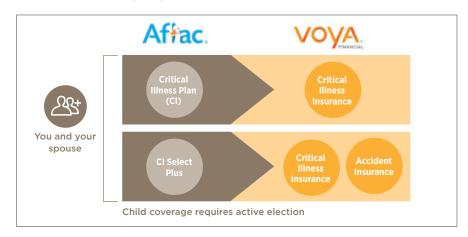
You'll find it a lot easier to focus on recovery — when you don't have to worry about providing for your family.

Visit Voya Videos

Check out Voya's **Benefit Basics videos** to learn about each coverage and how it works. You'll find highlights, FAQs, and real-life examples.

IF YOU HAVE AFLAC COVERAGE

Effective January 1, Voya will be added to payroll deduction, and Aflac will be removed. Your coverage, age band, and payroll deductions will transfer to the Voya option.



If you have basic Aflac Critical Illness (CI) coverage, you'll move to the Voya CI plan, as will your spouse if also covered by Aflac.

If you have Aflac CI Select Plus, you'll be enrolled in two plans: Voya Critical Illness Insurance and Accident Insurance, respectively. So will your spouse if also covered by Aflac.

Unlike the Aflac plan, Voya child coverage is a benefit *option*. If you want to cover your children in 2024, you must enroll them during Open Enrollment.

ABOUT YOUR AFLAC COVERAGE

Aflac will continue to administer claims for services received through Dec. 31, 2023. You can download claim forms at **aflacgroup.com** and submit them in any of the following ways:

- Mail Post Office Box 84075, Columbus, GA 31993
- Email groupclaimfiling@aflac.com
- Fax 866-849-2970

If you have questions about your coverage, call **800-433-3036**. To appeal a denied claim, submit your written appeal, with all supporting documents within 31 days of denial.

Caring for Those You Love

Voya is committed to making a positive difference in the lives of people with disabilities and special needs — and those who care for them. That's why all four Voya plans include Voya Cares. This no-cost feature gives you access to resources, thought leadership, and advocacy for disability inclusion

Enhanced Protection Coverage

- Critical Illness Insurance
- Accident Insurance
- Hospital Indemnity Insurance
- Cancer Insurance







Critical Illness Insurance

Critical Illness Insurance pays cash benefits in the event of certain serious conditions. These health conditions account for the vast majority of U.S. health care costs and are the nation's leading causes of death.

| Choices | Cost | Advantages to Consider | For More Information |
|---|--|--|--|
| For You: \$5,000, \$10,000, \$20,000, or \$30,000 cash benefit levels For Your Spouse: \$5,000, \$10,000, \$20,000, or \$30,000, up to the amount you elect for your coverage For Your Children: \$5,000, \$10,000, or \$15,000, up to the amount you elect for your coverage (at the same cost regardless of number of children) | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | Costs less than the current plan — and provides benefits for more covered conditions Full benefits for reoccurrence/additional occurrences of specified conditions Waiver of Premium provision to cover Employee premiums if you suffer a qualifying disability Higher annual health screening benefit — \$100 — for each covered family member | Explore Critical Illness Insurance presents.voya.com/EBRC/ stateofgeorgia 844-262-6042 |
| Coverage You, your spouse, and children up to age 26 | | Coverage is portable — you can take it with you when your employment ends or you retire | |







WHAT'S COVERED

More in 2024!

Voya's Critical Illness insurance pays a cash benefit directly to you if you or a covered dependent receives a new diagnosis for a serious medical condition. These conditions account for the lion's share of U.S. health care costs and are the nation's leading causes of death.

Examples

- Addison's Disease
- Advanced Dementia, including Alzheimer's Disease
- Advanced Parkinson'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
- Osteoporosis
- Paralysis
- Sickle Cell Amenia
- Stroke
- Systemic Lupus
- Tuberculosis

View the many **other conditions** that are covered, including childhood diseases.

Filing Voya Claims

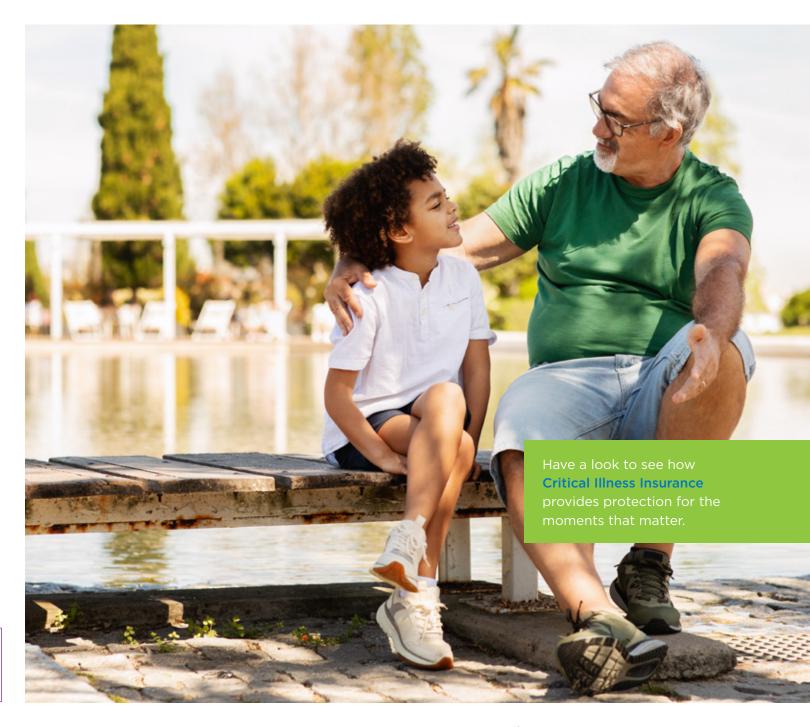
Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, click File a Claim and follow the easy, step-by-step instructions.

Find Out More!

Explore Critical Illness Insurance













Accident Insurance

Accident Insurance pays cash benefits in the event of one of life's most common "What Ifs" — an accident or injury. You can receive a cash benefit for both the conditions that they cause — and the services you need to treat them.

| Coverage | Cost | Advantages to Consider | For More Information |
|---|--|--|--|
| Employee Employee + Spouse Employee + Children (to age 26) Employee + Family | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | Stand-alone plan with coverage, 24/7/365 Cash benefits for both the conditions caused by the incident and the services needed to treat them Extra benefits paid for injuries related to organized sports Accidental death and dismemberment benefits Travel Assistance Services at no cost for help with accidents/injuries 100 miles or more from home Coverage is portable — you can take it with you when your employment ends or you retire Annual health screening benefit of \$60 for each covered family member | Explore Accident Insurance presents.voya.com/EBRC/ stateofgeorgia 844-262-6042 |









WHAT'S COVERED

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

- A visit to your physician, urgent care, or the emergency room
- Emergency transportation in an ambulance
- Hospital confinement.

You can also receive cash benefits for the conditions resulting from the incident, like concussion, dislocation, fractures, and more. Plus, your coverage includes **Travel Accident Services**.

You Choose How to Use

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

- Out-of-pocket medical costs
- Your mortgage or rent
- Daily living expenses, like transportation, meals, phone service, and utilities
- Services needed while you recover

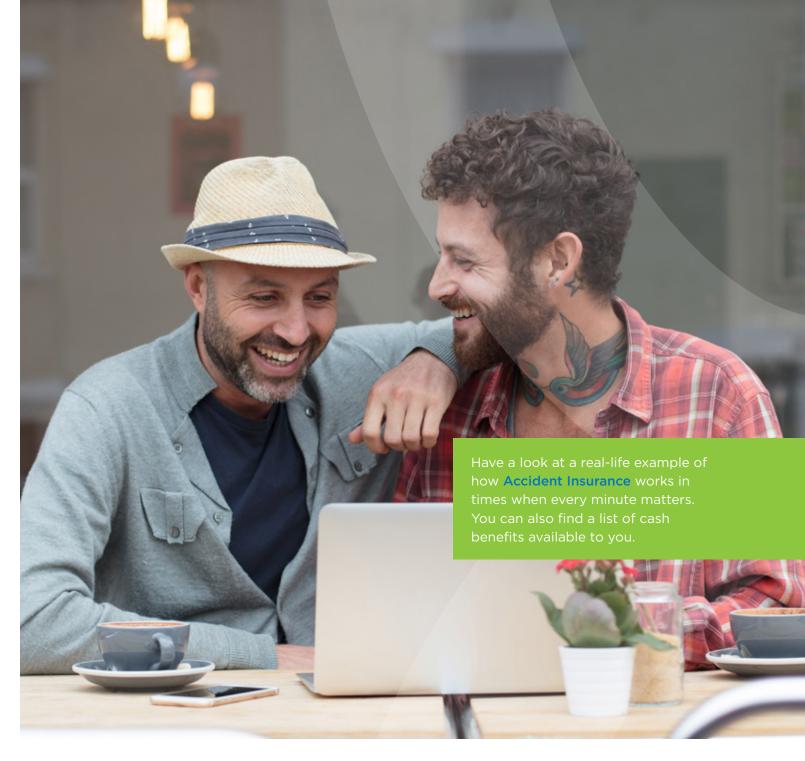
Filing Voya Claims

Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, click File a Claim and follow the easy, step-by-step instructions.



Find Out More!

Explore Accident Insurance









Hospital Indemnity Insurance

Get cash benefits for eligible stays in a covered medical facility — and use the funds any way you'd like.

Coverage

- Employee
- Employee + Spouse
- Employee + Children (to age 26)
- Employee + Family

Cost

2024 Flexible Benefits Rates

Check **GaBreeze** to see your personal cost for coverage

Advantages to Consider

- Cash benefits for both unforeseen hospital stays and planned procedures
- Coverage is portable you can take it with you when your employment ends or you retire
- \$60 annual wellness benefit paid for all covered family members who complete health screening

For More Information



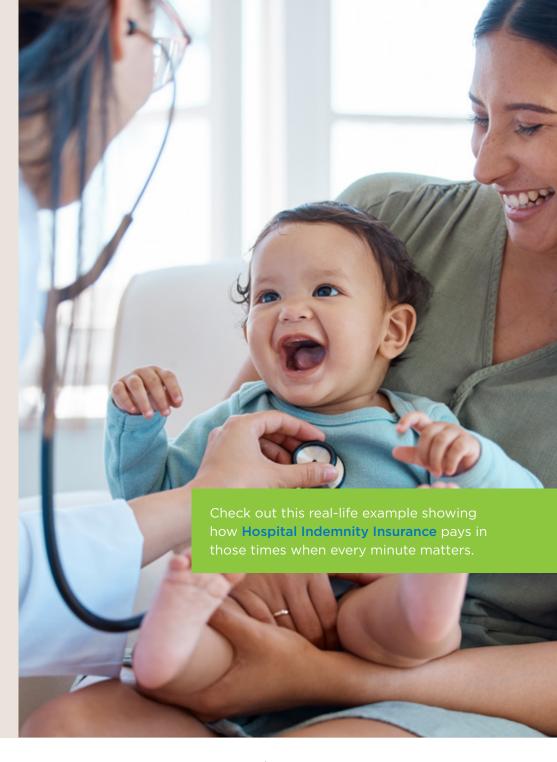


Explore Hospital Indemnity Insurance presents.voya.com/ EBRC/stateofgeorgia



844-262-6042













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 — whatever 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 plan features is that it 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. Hospital Indemnity Insurance may be just right for you! 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.

Filing Voya Claims

Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, click File a Claim and follow the easy, step-by-step instructions.



Find Out More!

Explore Hospital Indemnity Insurance









Cancer Insurance

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

| Coverage | Cost | Advantages to Consider | For More Information |
|---|--|---|--|
| Employee Employee + Spouse Employee + Children (to age 26) Employee + Family | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | Extensive benefits specific to the needs of those navigating a cancer diagnosis Coverage is portable — you can take it with you when your employment ends or you retire Waiver of Premium provision to cover employee premiums if you suffer a qualifying disability \$60 annual incentive paid for all family members who complete an eligible cancer screening | Explore Cancer Insurance presents.voya.com/ EBRC/stateofgeorgia 844-262-6042 |







WHAT'S COVERED

Cancer Insurance provides cash benefits for cancer diagnoses, treatment, and services that start after coverage begins. These include the following examples.

- First Occurrence (Initial Diagnosis) Hospital Confinement
- Blood & Plasma

- Hospice
- Chemotherapy & radiation
- Surgery

• Stem Cell Transplant

This new benefit is tailored to the needs of those dealing with cancer. Click here for more on the plan, its many covered treatments and services, and benefit limit.

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 |

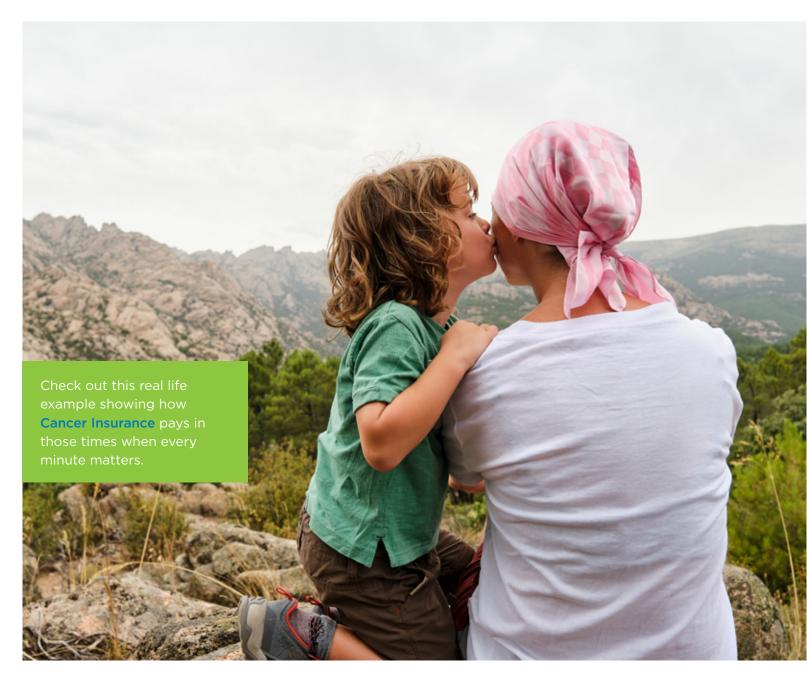
Filing Voya Claims

Go to presents.voya.com/EBRC/fileaclaim/stateofgeorgia, click File a Claim and follow the easy, step-by-step instructions.



Find Out More!

Explore Cancer Insurance







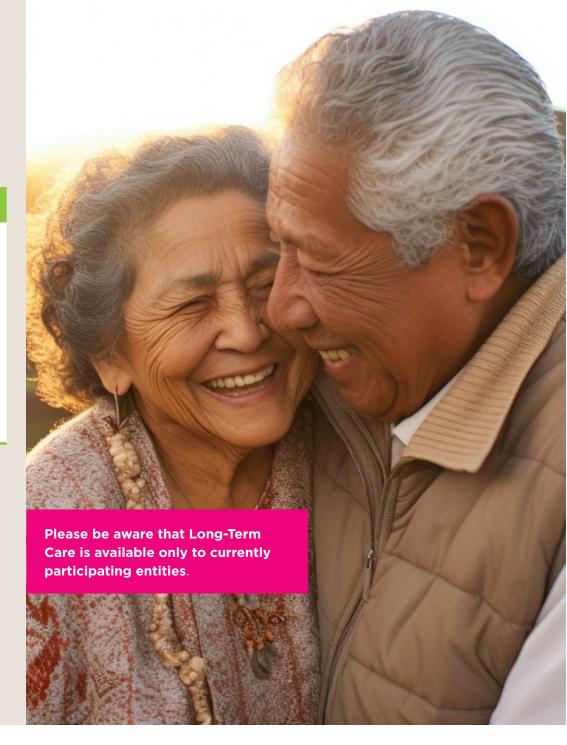


Long-Term Care

It's important to maintain quality of life even when health challenges arise. Long-Term Care insurance can help you obtain the services you need while protecting yourself, and your family, from the financial burdens of care.

| Choices | Coverage | Cost | For More Information |
|---|---|--|---|
| Four coverage options Cash benefits to offset the cost of personal care, and health and social services, in the event of a chronic condition or longlasting disability | Available to you, your spouse, your parents, and your parents-in-law | 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | Long-Term Care Enrollment Workbook unuminfo.com/sog 888-764-3539 |

If you are currently enrolled in the plan and need information about your coverage, filing claims, or where to get additional details, view the Long-Term Care Enrollment Workbook.









Legal Benefits

Legal Benefits offer support for services we'll all need at some point — and for those we can't anticipate. With a choice of three plans, you can get the expertise you need, when you need it.

| Choices | Cost | Advantages to Consider | For More Information |
|---|--|---|--|
| Select: Basic coverage Select Plus: Expanded coverage Select Premium: Broadest coverage | Premiums range from \$6 to \$11 a month 2024 Flexible Benefits Rates Check GaBreeze to see your personal cost for coverage | Unlimited access to experienced, highly qualified attorneys Support available by phone, online, or in person No copays, deductibles, or claim forms and no out-of-pocket charges for | MetLife Legal Plan Overview metlife.com/info/georgia 800-821-6400 |
| Coverage | | professional service | Monday-Friday, 8 a.m. to 8 p.m. ET |
| You, your spouse, and your children up to age 26 | | | Download the MetLife Legal Plan mobile app Google Apple |









WHAT'S COVERED

MetLife's Legal Benefits give you and your family access to attorneys to help with a range of legal matters. There are no waiting periods, copays, deductibles — or any other out-of-pocket charges for covered professional services. And there are no limits on your access to attorneys. You have all the legal support you need until matters are resolved.

• Protection from domestic violence

| Select | Select Plus | |
|---|--|------|
| The Select option provides benefits for the following services | Select Plus provides the same services as Select, plus the following | Selo |
| Wills and codicils | Probate proceedings | plu |
| Living wills | Consumer protection matters | • P |
| Powers of Attorney | Personal Wage Earner Plan | • S |
| Traffic ticket defense (no DUI) | Tax audits | • [|
| Affidavits | Civil litigation defense | • P |
| Deeds and Mortgages | Administrative hearing representation | • P |
| Promissory notes | Incompetency defense | • Z |
| Elder law matters | Change or establishment of custody order | • R |
| Personal Injury | or visitation rights | • L |
| (25% maximum fee) | Adoption and legitimization | • B |
| Sale, purchase, and refinancing of your primary residence and | Divorce/Dissolution/Annulment (20 hours of services) | (|
| second or vacation home | Enforcement or modification | |
| Home equity loans for your | of support orders | |
| primary residence and second or vacation home | Guardianship/conservatorship | |
| | Immigration assistance | |
| Debt collection defense | Eviction and tenant problems (tenant only) | |
| Identity theft defense | Name change | |
| Reduced fee benefit (25% discount) | Juvenile court defense | |
| (23/0 discount) | Security deposit assistance (tenant) | |

Select Premium

Select Premium provides all the services for Select and Select Plus, plus the following

- Personal Property Protection
- Small Claim Assistance
- Demand Letters
- Prenuptial Agreement
- Property Tax Assessments
- Zoning applications
- Restoration of Driving Privileges
- Living Trusts
- Boundary Title Disputes (Primary Residence)

Find Your WHY

The Flexible Benefits Program gives you many ways to support the people you love. Why not add legal protection?

With Legal Benefits, you have **unlimited access** to experienced, highly qualified
attorneys — by phone, online, or face-toface. And your total charges for covered
professional services? *Nothing*. All you pay is
the fixed cost of your monthly premium — \$5
to \$10, depending on the option you select.

This benefit gives you all the legal services you and your family need, all year long — for less than the cost of *one meeting* with an attorney.

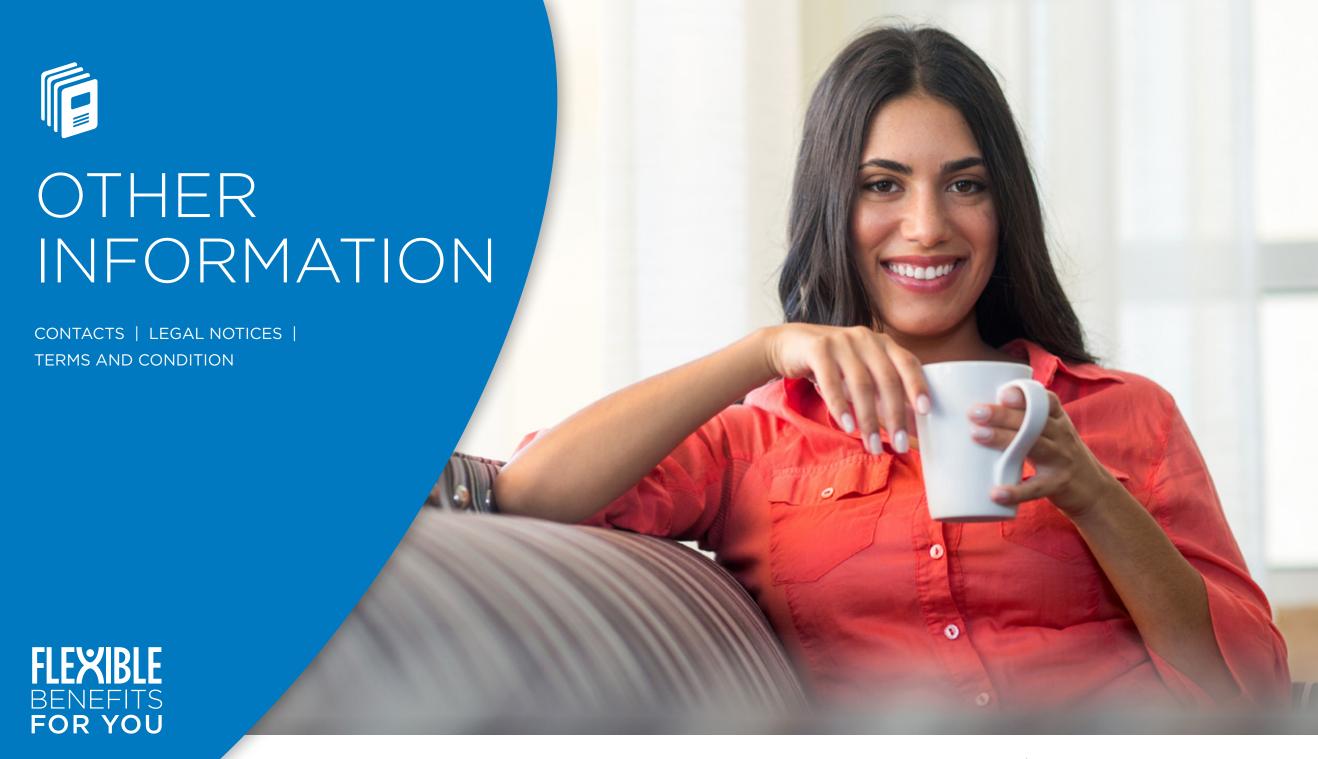


Find Out More!
Legal Plan Overview









Contacts

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

| 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 | HealthEquity/WageWorks 877-924-3967 Monday-Friday, 8 a.m. to 8 p.m. ET | learn.healthequity.com/doas |
| 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 |
| GaBreeze Benefits Center | GaBreeze 877-342-7339 Monday-Friday, 8 a.m. to 5 p.m. ET | GaBreeze.ga.gov |







Legal Notices

You can find the following federal notices on GaBreeze.

- Health Insurance Portability and Accountability Act of 1996 (HIPAA) Notification of Privacy
- Women's Health and Cancer Rights Act (WHCRA) of 1998
- Medicare Part D Notification
- Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)
- Exchange Notice
- Notice of Patient Protections
- COBRA Coverage

Terms and Conditions

Click here to read important Terms and Conditions of the Flexible Benefits Program.









FLEXIBLE BENEFITS FOR YOU

This guide summarizes the benefits you can choose through the State of Georgia Flexible Benefits Program. A more detailed explanation of benefit provisions is provided in each Benefit Summary Plan Description. In the event of conflict between this guide and the official plan descriptions and/ or contracts, the terms of the official plan descriptions and contracts prevail. The Flexible Benefits Program is governed by current tax law and is subject to and operated in accordance with regulations of the Internal Revenue Service (IRS). If changes in the Flexible Benefits Program are necessary, updates will be made to comply with applicable IRS regulations.



