

FLEXIBLE BENEFITS
FOR YOU

For *Moments*
that matter



What's Inside



INTRODUCTION

- 3 Flexible Benefits Program**



THE BASICS

- 5 Eligibility**
- 7 New Hires**
- 8 How to Enroll**
- 10 Making Changes**



FOR YOUR HEALTH

- 13 Dental Insurance**
- 16 Vision Care**
- 18 Flexible Spending Accounts**



FOR YOUR LIFE

- 22 Life Insurance**
- 25 Accidental Death and Dismemberment Insurance**



FOR YOUR FINANCES

- 27 Disability Insurance**
- 30 Enhanced Protection Coverage**
- 32 Critical Illness Insurance**
- 34 Accident Insurance**
- 36 Hospital Indemnity Insurance**
- 38 Cancer Insurance**
- 40 Long-Term Care**
- 41 Legal Benefits**



OTHER INFORMATION

- 44 Contacts**
- 45 Legal Notices**
- 45 Terms and Conditions**

Flexible Benefits for You

The Flexible Benefits Program protects your health, life, and finances, no matter what challenges come your way. With options that bolster your well-being and peace of mind, it helps you navigate the moments that matter most to you.

You'll find a range of choices for you and your family. From dental and vision care to life insurance and flexible spending accounts, we've got you covered. You can also protect the ones you love, and get the support you need, through options with unlimited access to legal services — and those that give you cash payouts in the event of serious illnesses, accidents, and hospital stays.

Each benefits plan ranks in the top tier of its respective market. You'll find a broad range of options and benefits levels, highly favorable plan features, and competitive, low premium rates.

Check out [Benefits at a Glance](#) for a quick look at coverages, premium rates, and contact information by plan and provider.

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
- Legal Benefits



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 the Flexible Benefits Program.





THE BASICS

ELIGIBILITY | NEW HIRES | HOW TO ENROLL |
MAKING CHANGES

FLEXIBLE
BENEFITS
FOR YOU



4



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 self-sustaining employment by reason of mental incapacity or physical disability (see [Disabled Dependents](#))

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

You must submit a Social Security number for each of the dependents on your account. If your dependent is less than 12 months old, or you don’t otherwise have their number, you must contact the GaBreeze Benefits Center as soon as you receive this information.

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

Retirement

Termination

IMPORTANT REMINDER

You can enroll any of your eligible disabled dependents during Open Enrollment. Just complete and return the DOAS/HRA Disabled Dependent Certification Form within 31 days of enrollment.

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 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.

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 enrolled in benefits and go on an unpaid leave of absence, all benefits other than the Dependent Care Flexible Spending Account 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**.

WHEN YOUR BENEFITS BEGIN

If you enroll on time, your benefits will go into effect on the first day of the month after you've completed a full calendar month of service. But if you miss the enrollment deadline, you will not be eligible for benefits in 2025. Should you experience a [Qualifying Life Event](#) during the year, you may be able to add certain coverages outside of the normal enrollment period. Otherwise, you will have to wait until Open Enrollment in October to make benefit elections for the following year (e.g., 2026).

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.

ONE-TIME OPPORTUNITIES

Certain options are available to you only during your first enrollment as a new hire. If you decline them now, you may be subject to a late-enrollment penalty, need to complete a statement of health, or lose the chance to add these options later.

- **Life Insurance:** As a new hire, 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 for your spouse.

Securing life insurance is easy right now, but it might not be as simple later. If you want to start your coverage in future years, you'll need to submit a health statement, and MetLife will assess your eligibility. But, if you enroll within your first 31 days of hire, you can get up to the guaranteed maximum coverage, with no hassle and no risk.

- **Short-Term Disability:** If you waive coverage now but want to add it later, you'll face a late-enrollment penalty — a 60-day waiting period before qualifying benefits begin.
- **Long-Term Disability:** If you waive coverage during your new-hire 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 now, adding it later will be contingent on proof of insurability acceptable to Unum.

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 elections during your eligible enrollment period, you will **not** be able to do so until Open Enrollment scheduled for Fall of 2025.

ENROLLMENT IS EASY!

1 ONLINE

GaBreeze enrollment portal
GaBreeze.ga.gov



2 ALIGHT MOBILE APP





Questions about the enrollment system?

Call the GaBreeze Benefits Call Center at **877-342-7339** (toll-free) weekdays, 8 a.m. to 5 p.m. ET



Find Your WHY

If you don't sign up on time, you may miss out on special coverage opportunities that are available only when you are first eligible to enroll for benefits.

YOUR GaBreeze CHECKLIST

Before Enrollment

- Review the Flexible Benefits Program Guide.
- 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 options and rates.
- 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.**

2025 FEES AND RATES

Looking for 2025 fees and rates? Your [Benefits at a Glance](#) summary has an overview for you, with more detail on cost structure in the [2025 Flexible Benefits Rate Sheet](#).

For *personalized* information, including costs specific to your coverage, benefit levels, and age, head to [GaBreeze](#) — where you can see the exact cost of each option, down to the penny.

Each plan option has a monthly administrative fee of \$1.15. These funds are used to your advantage. They are reinvested in the Program to enhance services and improve your customer experience.

YOUR OPINION MATTERS

After you complete your enrollment, use the link in GaBreeze to fill out a quick survey. Your input will help us keep benefit services responsive to your needs.

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 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 your enrollment eligibility period ends, your benefit elections are locked in for the rest of the year. You can make changes during the year only 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 shown 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 through the end of the following month 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 Voya plans after you retire.

You can find details on [GaBreeze](#).





for your HEALTH

DENTAL | VISION |
FLEXIBLE SPENDING ACCOUNTS

FLEXIBLE
BENEFITS
FOR YOU



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
<ul style="list-style-type: none"> • Dental Care® DHMO • Dental PPO Select • Dental PPO Select Mid • Dental PPO Select Plus 	<p>Monthly premiums range from:</p> <ul style="list-style-type: none"> • \$22 to \$61 for DHMO • \$27 to \$118 for DPPO <p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage.</p>	<ul style="list-style-type: none"> • One of the few programs, anywhere, with a DHMO and <i>three</i> DPPO options • Strong DHMO network in metropolitan areas, making it an attractive option in those locations • Largest PPO network in Georgia, giving you convenient access to services — and maximum network benefits — close to home • Flexibility to elect richer coverage when you need it (like for extensive dental procedures or orthodontia) and lower coverage in the years you don't 	 <ul style="list-style-type: none">  DPPO Plan Guide  DHMO Plan Guide  myCigna.com  888-764-0099 24 hours a day, seven days a week  Download the mobile app to find in-network dentists, track claims, and view benefits Google Apple
Coverage			
<p>You, your spouse, and your children</p>			



YOUR DENTAL OPTIONS

	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 Services¹	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	
Monthly Premiums	Lowest	Middle	Highest	
	Range from \$27 to \$118			\$22 to \$61

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

² See the [DHMO Plan Guide](#)

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](#)

A Network Dentist is Just a Click Away

With access to the largest provider network in Georgia, it's easy to find a participating dentist. Go to [myCigna.com](#), select **Care & Costs**, and click **Doctor by Name** (to check on a specific provider) or **Doctor by Type** (for choices of network dentists, pediatric dentists, and orthodontists).

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!

CIGNA DENTAL PPO OPTIONS

DOAS' program 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

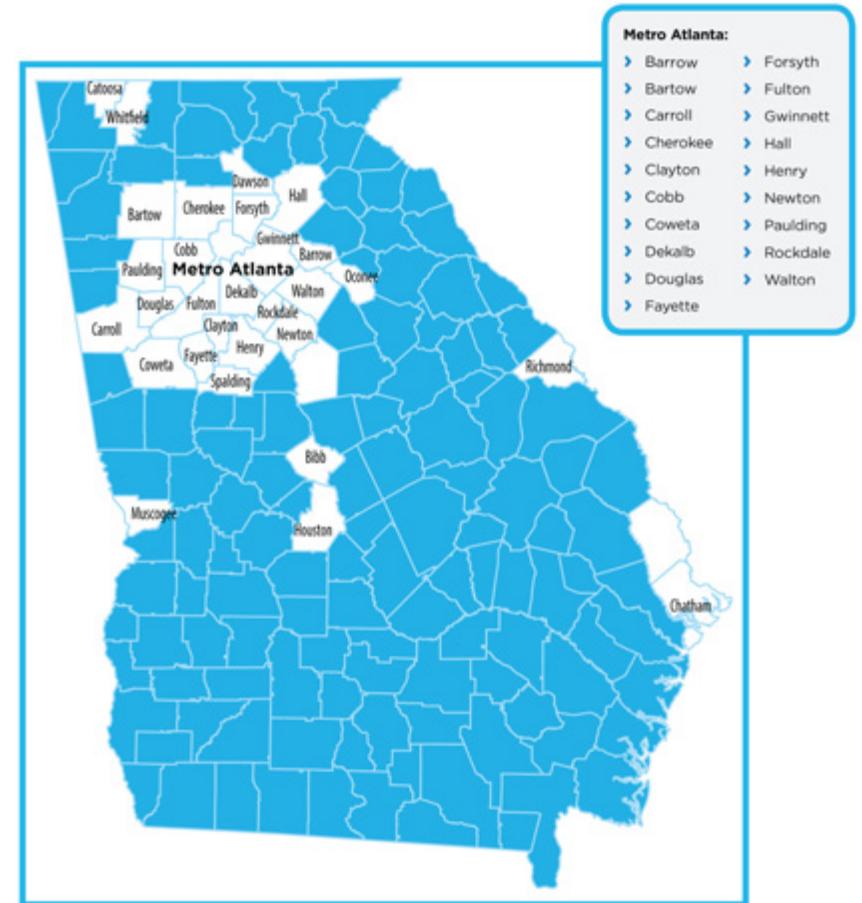
MyCigna mobile app not only helps you find network dentists. It also has a cost-comparison tool to identify the most cost-effective providers.

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 has 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
<ul style="list-style-type: none"> • Vision Select Plan • Vision Select Plus Plan 	<p>Monthly premiums range from:</p> <ul style="list-style-type: none"> • \$6 to \$16 for Select • \$10 to \$29 for Select Plus <p>2025 Flexible Benefits Rates</p>	<ul style="list-style-type: none"> • Customized network, <i>Vision Access Value</i>, includes private practice ophthalmologists and retail chains • Largest provider network and broadest benefits in the state, 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, progressive transition lenses, and others (including free upgrades for children under age 19, when received from network providers) • Second pair of frames at a 40% discount each year 	<p>Anthem </p> <ul style="list-style-type: none">  Select Plan Benefits Select Plus Plan Benefits  anthem.com  855-556-4844  Download the Anthem mobile app to find in-network providers and view benefits Google Apple
<p>Coverage</p>	<p>Check GaBreeze to see your personal cost for coverage.</p>		
<p>You, your spouse, and your children</p>			



YOUR VISION OPTIONS

Available Benefits	Network Benefits per Calendar Year	
	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	\$10 to \$29

* 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	Advantages to Consider	For More Information
<ul style="list-style-type: none">• Health Care FSA — contribute up to \$3,156 in 2025• Dependent Care FSA — contribute up to \$4,956 in 2025	<ul style="list-style-type: none">• 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	  georgiafsatasc.com  877-586-1702  Download the TASC mobile app to manage your FSA, see balances, and track claims Google Apple
Coverage		
<p>Tax-favored account you can use to pay for eligible recurring, predictable health care or dependent care expenses</p> <p>FSA elections do not automatically roll over. You need to re-enroll and make a new contribution election each year.</p>		

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
2025 Maximum Contribution	\$3,156
Availability of Funds	Your total annual contribution is available to you, up front, as soon as your enrollment is processed.
Paying Expenses	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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 2026 — to spend the funds in your account. You can continue to spend 2025 contributions through March 15, 2026. • Per IRS regulations, any funds remaining after that time are forfeited.
Getting Reimbursed	<ul style="list-style-type: none"> • Per IRS regulations, any 2025 contributions not spent by March 15, 2026, must be forfeited. • For eligible expenses not paid with your FSA debit card, you have until April 30, 2026, to <i>submit</i> 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

Not everyone opts for a Health Care FSA. But it's a benefit almost everyone needs. For some of us, it's to cover regular health-related expenses and planned medical or dental procedures. For others, it's to ease the recurring cost of ongoing medications for conditions like ADHD, high blood pressure, anxiety, and diabetes. No matter your condition, an FSA can save you money on expenses you can't avoid.

Instead of using your take-home pay — what's left after taxes — why not contribute to the FSA? It's tax-free, and the savings stay in your pocket, working for you. Depending on your bracket, FSA can save you 20% to 35%. That's a big 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
2025 Maximum Contribution	<ul style="list-style-type: none">• 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 Expense	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, 2026 to file claims incurred through December 31, 2025.

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 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.



for your LIFE

LIFE INSURANCE | AD&D INSURANCE

FLEXIBLE
BENEFITS
FOR YOU



Life Insurance

Life is unpredictable. But you can stay protected with life insurance to safeguard the future for those you love most. Benefit from the security of knowing you have coverage to protect them — now and in the years ahead.

Choices	Cost	Advantages to Consider	For More Information
<ul style="list-style-type: none"> • Employee Life: 1 to 10 X Pay • Spouse Life: \$6,000 to \$250,000 • Child Life: \$3,000 to \$20,000 per child 	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage.</p>	<ul style="list-style-type: none"> • 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 other estate planning documents — at no cost — either online or by working directly with an attorney 	 <ul style="list-style-type: none">  Life Insurance Overview  metlife.com/info/georgia  877-255-5862
<p>Coverage</p>			
<p>You, your spouse, and your children</p> <p>To cover your dependents, you must first enroll in Employee Life insurance. Your spouse's coverage cannot be more than your own.</p>			 <p>Download the MetLife mobile app Google Apple</p>



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		

* To cover your dependents, you must first enroll in Employee Life insurance. Your spouse's coverage cannot be more than your own.

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



Find Out More!
[Life Insurance Overview](#)

IMPORTANT BENEFICIARY INFORMATION

Be sure to name a **beneficiary** 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.

NEW EMPLOYEE? LOCK IN YOUR LIFE INSURANCE — GUARANTEED!

As a new hire, you can sign up for life insurance with guaranteed coverage levels — no medical questions or evidence of insurability required! But this opportunity is available during your initial enrollment period only. If you pass on coverage now, you may not be able to qualify for it in the future. Don't miss your chance to get all the life insurance you need. Sign up now!

	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
Maximum Guaranteed Issue (no statement of health required)	\$200,000	\$30,000	\$20,000

Requests for coverage above guaranteed levels requires medical review and approval by MetLife



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	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage.</p>	<ul style="list-style-type: none"> 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 	<p> MetLife</p> <p> metlife.com/info/georgia</p> <p> 877-255-5862</p> <p> Download the MetLife mobile app Google Apple</p>
Coverage			



Find Your WHY

Between ages 1 and 49, accidents and injuries are the leading cause of death. That's why AD&D coverage is a smart choice. It's the most affordable type of life insurance. And it provides benefits not only in the event of accidental death, but also if an accident results in disability.





for your FINANCES

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

FLEXIBLE
BENEFITS
FOR YOU



Disability Insurance

The Flexible Benefits Program 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
<p>Short-Term Disability</p> <ul style="list-style-type: none"> • 7-day waiting period • 30-day waiting period <p>Long-Term Disability</p> <ul style="list-style-type: none"> • 180-day waiting period 	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	<ul style="list-style-type: none"> • 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 • Disability coverage continues until the end of the month your employment ends, providing an extra cushion of protection • Waiver of premiums — Premiums are waived while you are receiving STD and/or LTD benefits 	 <p>STD Highlights LTD Highlights</p> <p>sites.standard.com/edu/state-georgia/80731</p> <p>888-641-7186</p> 
<p>Coverage</p>			
<p>You only</p>			

ARE YOU A NEW EMPLOYEE?

As a new hire, you can obtain any of these disability coverages by signing up within your first 31 days. If you waive these benefits now but want to add them in the future, you will face some restrictions. Your Short-Term Disability waiting period will be 60 days. And, your application for Long-Term Disability insurance will require that you submit evidence of insurability. Why risk these complications? Sign up now and get the income protection you need!



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	<p>Your choice of two plan options:</p> <ul style="list-style-type: none"> • After a 7-day waiting period following your accident or injury; or • After a 30-day waiting period
Benefit Paid	<ul style="list-style-type: none"> • 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](#)

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.
 - Many State employees build up a lot of vacation and sick leave. Selecting the 30-day waiting period provides the same coverage as the other plan — at less than half the cost.
 - During the waiting period, you can use accumulated 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 a full 30 days. (Under the 7-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.

Short-Term Disability (STD) insurance applies to your eligible pay up to \$130,000. The maximum weekly benefit is \$1,500.



Find Your WHY

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

Benefits Begin	<ul style="list-style-type: none">• After a 180-day waiting period• If you have STD coverage, your LTD benefits can begin when STD ends
Income Replaced	<ul style="list-style-type: none">• 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

Long-Term Disability (LTD) insurance applies to your eligible pay up to \$200,000. The maximum monthly benefit is \$10,000.



Find Out More!
[LTD Highlights](#)



Scan below for interactive resources on disability benefits.



Enhanced Protection Coverage

Protection Against Life's "What-ifs"



The Flexible Benefits Program offers a suite of benefits options that can 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 to stay in a hospital?

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 Extended Protection 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.

Enhanced Protection Coverage

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

GET PAID TO STAY HEALTHY

Voya’s plans offer more than financial security — they pay out for preventive care. Complete qualifying health screenings, many of which are free, and Voya will send you a check.

Here is how much you can earn:

- Critical Illness Insurance: \$100
- Accident Insurance: \$60
- Hospital Indemnity Insurance: \$60
- Cancer Insurance: \$60

Plus, if you’re enrolled in more than one option, you can receive separate payouts for each plan, as well as for your enrolled spouse and children.

Eligible screenings can include colonoscopies, mammograms, chest X-rays, pap smears, biopsies, well child exams — typical components of age- and gender-based checkups. Submitting your documentation is easy online or with Voya’s mobile app.

With these generous “rebates,” your coverage could nearly pay for itself.



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.

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
<ul style="list-style-type: none"> • 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) 	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	<ul style="list-style-type: none"> • Full benefits for reoccurrence/additional occurrences of specified conditions • Waiver of Premium provision to cover Employee premiums if you suffer a qualifying disability • Coverage is portable — you can take it with you when your employment ends or you retire • Annual wellness benefit of \$100 for each covered family member who completes a covered health screening test 	 <p> Explore Critical Illness Insurance</p> <p> presents.voya.com/EBRC/stateofgeorgia</p> <p> 844-262-6042</p> 
<p style="text-align: center;">Coverage</p> <p>You, your spouse, and children up to age 26</p>			



WHAT'S COVERED

Voya's Critical Illness plan provides cash benefits if you or a covered dependent is diagnosed with a serious medical condition. These conditions contribute significantly to healthcare costs in the U.S. and are leading causes of death. Protect your family's finances when it matters most with Voya Critical Illness insurance.

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 Anemia
- Stroke
- Systemic Lupus
- Tuberculosis

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

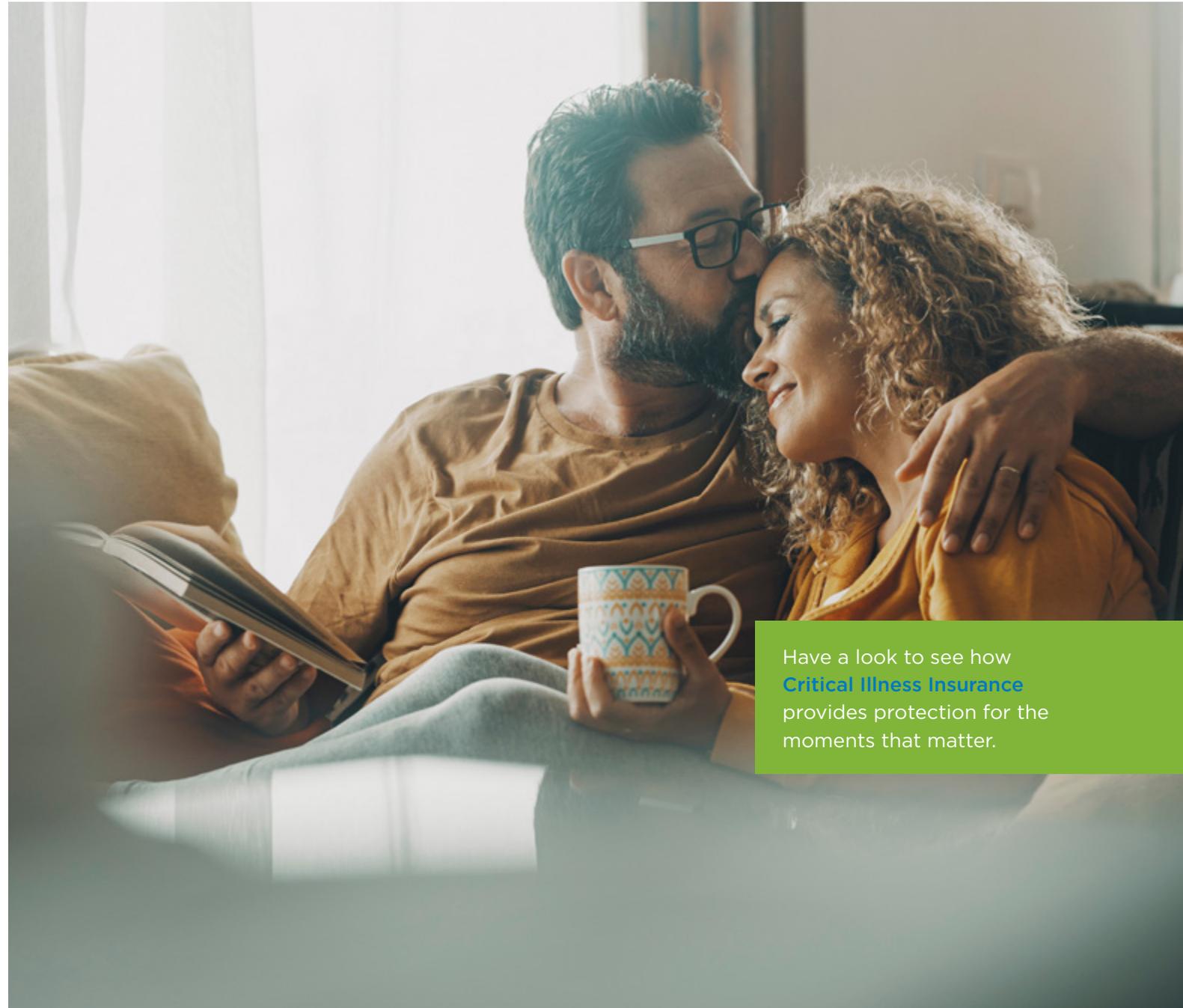
Filing Voya Claims

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](#)



Have a look to see how **Critical Illness Insurance** provides protection for the moments that matter.

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 cash benefits both for the conditions they cause — and the services you need to treat them.

Coverage	Cost	Advantages to Consider	For More Information
<ul style="list-style-type: none"> • Employee • Employee + Spouse • Employee + Children (to age 26) • Employee + Family 	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	<ul style="list-style-type: none"> • 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 wellness benefit of \$60 for each covered family member who completes a covered health screening test 	<p>VOYA FINANCIAL</p> <p> Explore Accident Insurance</p> <p> presents.voya.com/EBRC/stateofgeorgia</p> <p> 844-262-6042</p> 



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/fileclaim/stateofgeorgia, click **File a Claim** and follow the easy, step-by-step instructions.



Find Out More!

[Explore Accident Insurance](#)

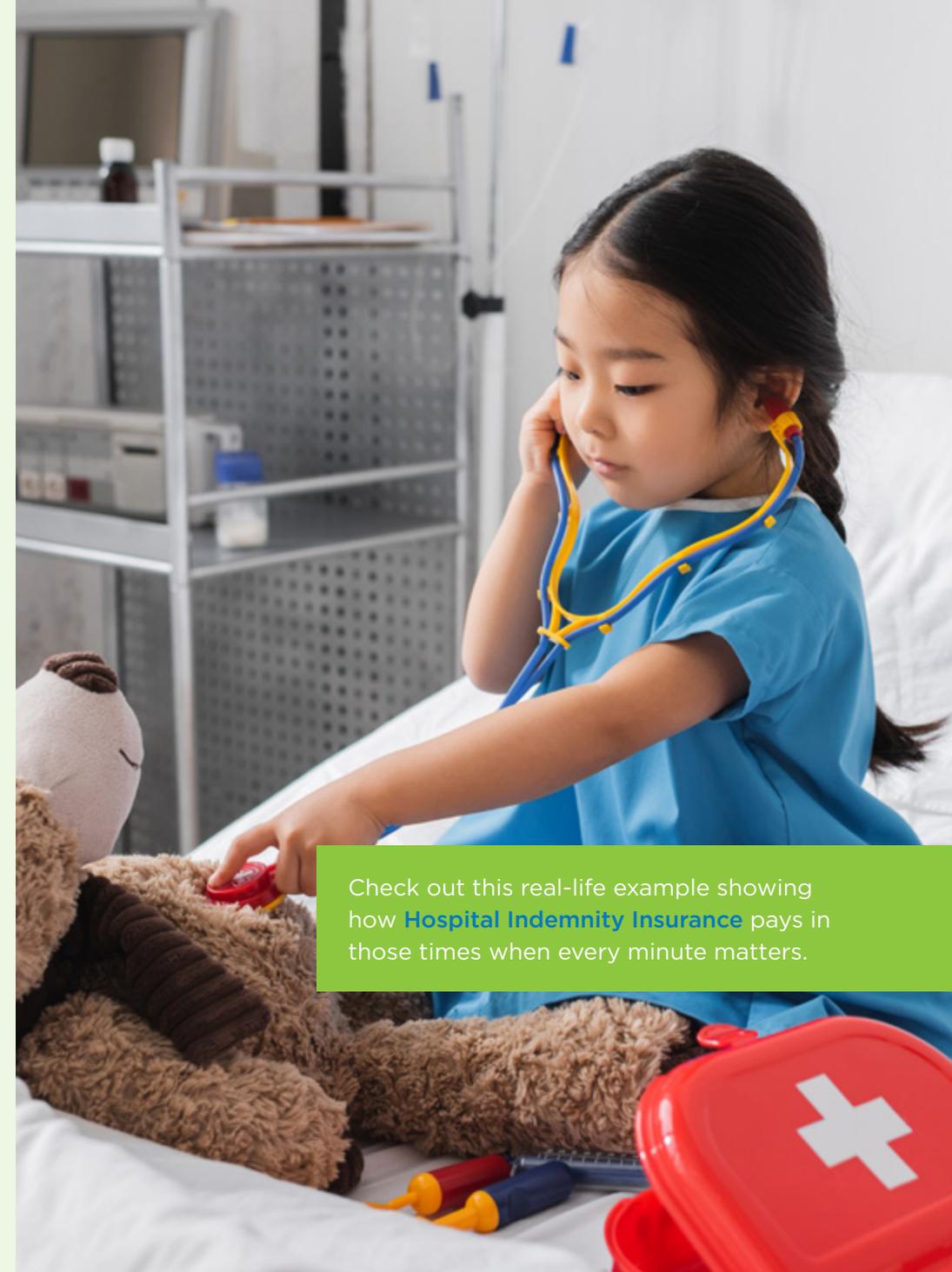


Have a look at a real-life example of how [Accident Insurance](#) works in times when every minute matters. You can also find a list of cash benefits available to you.

Hospital Indemnity Insurance

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

Coverage	Advantages to Consider	For More Information
<ul style="list-style-type: none">• Employee• Employee + Spouse• Employee + Children (to age 26)• Employee + Family	<ul style="list-style-type: none">• 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• Annual wellness benefit of \$60 for each covered family member who completes a covered health screening test	  Explore Hospital Indemnity Insurance  presents.voya.com/EBRC/stateofgeorgia  844-262-6042 
Cost		
<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>		



Check out this real-life example showing how [Hospital Indemnity Insurance](#) pays in those times when every minute matters.

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 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](#)



See how [Hospital Indemnity Insurance](#) can benefit you.

Cancer Insurance

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

Coverage	Cost	Advantages to Consider	For More Information
<ul style="list-style-type: none">• Employee• Employee + Spouse• Employee + Children (to age 26)• Employee + Family	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	<ul style="list-style-type: none">• 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• Annual wellness benefit of \$60 for each covered family member who completes a covered health screening test	<p></p> <p> Explore Cancer Insurance</p> <p> presents.voya.com/EBRC/stateofgeorgia</p> <p> 844-262-6042</p> 



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)
- Blood & Plasma
- Chemotherapy & radiation
- Stem Cell Transplant
- Hospital Confinement
- Hospice
- Surgery

This 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/fileclaim/stateofgeorgia, click **File a Claim** and follow the easy, step-by-step instructions.



Find Out More!

[Explore Cancer Insurance](#)



Check out this real life example showing how [Cancer Insurance](#) pays in those times when every minute matters.

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
<ul style="list-style-type: none"> • 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 long-lasting disability 	<p>Available to you, your spouse, your parents, and your parents-in-law</p>	<p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	  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](#).



Please be aware that Long-Term Care is available only to currently participating entities.

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
<ul style="list-style-type: none"> • Select: Basic coverage • Select Plus: Expanded coverage • Select Premium: Broadest coverage 	<p>Premiums range from \$6 to \$11 a month</p> <p>2025 Flexible Benefits Rates</p> <p>Check GaBreeze to see your personal cost for coverage</p>	<ul style="list-style-type: none"> • 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 professional service 	 <ul style="list-style-type: none">  Legal Plan Overview  metlife.com/info/georgia  800-821-6400 Monday–Friday, 8 a.m. to 8 p.m. ET
Coverage			
<p>You, your spouse, and your children up to age 26</p>			



WHAT'S COVERED

MetLife's Legal Benefits provide you and your family with unlimited access to attorneys for a wide range of legal matters. No waiting periods, copays, deductibles, or out-of-pocket costs for covered services — just the legal support you need, for as long as you need it.

Select	Select Plus	Select Premium
<p>The Select option provides benefits for the following services</p> <ul style="list-style-type: none"> • Wills and codicils • 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 or vacation home • Debt collection defense • Identity theft defense • Reduced fee benefit (25% discount) 	<p>Select Plus provides the same services as Select, plus the following</p> <ul style="list-style-type: none"> • Probate proceedings • 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) • Protection from domestic violence 	<p>Select Premium provides all the services for Select and Select Plus, plus the following</p> <ul style="list-style-type: none"> • 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-to-face. 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](#)



OTHER INFORMATION

CONTACTS | LEGAL NOTICES |
TERMS AND CONDITION

FLEXIBLE
BENEFITS
FOR YOU



Contacts

Whom to Contact for Assistance		
Contact the Flexible Benefits Vendors	Contact GaBreeze	Contact the Entity
<ul style="list-style-type: none"> Benefit questions ID cards Claims status Claims appeals Help finding a network provider 	<ul style="list-style-type: none"> Eligibility and enrollment questions/changes (QLEs) Premiums questions Enrolling or removing dependents Password reset/access to GaBreeze Eligibility appeals 	<ul style="list-style-type: none"> 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	TASC 877-586-1702 Monday-Friday, 8 a.m. to 8 p.m. ET	georgiafsatasc.com
Employee, Spouse, Child Life Insurance and Accidental Death & 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.

