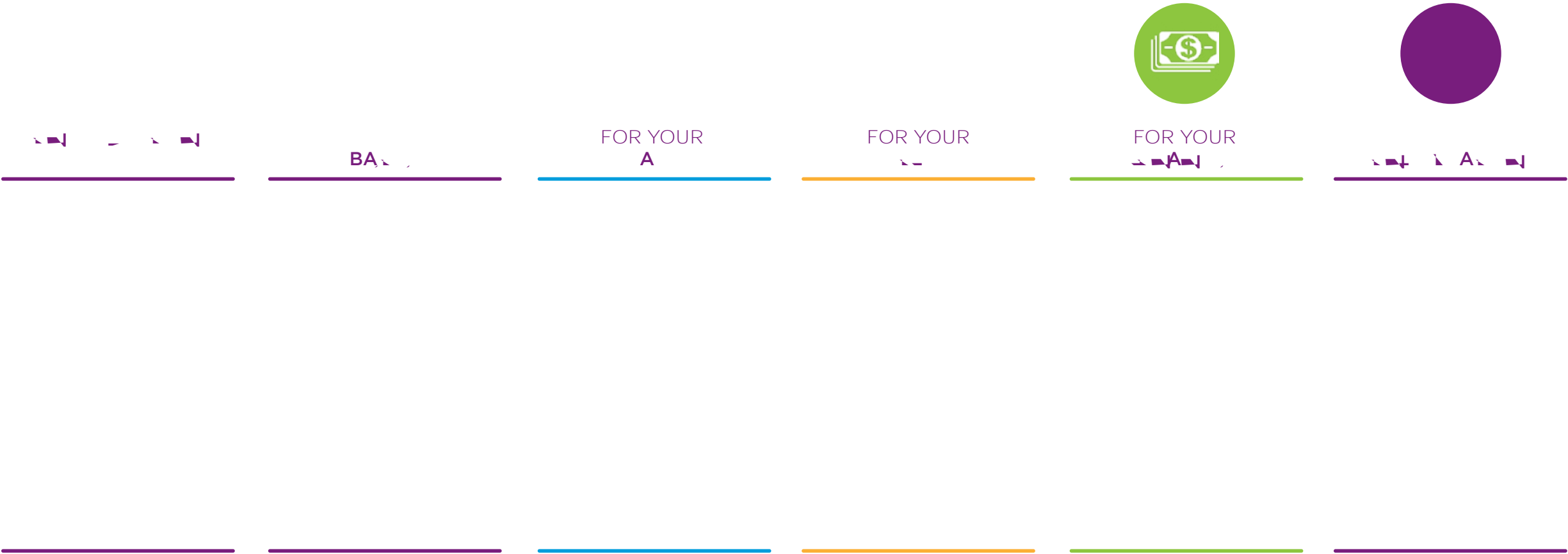


that matter

Business



What's Inside





What's New for 2024



Open Enrollment is your chance to review your options and make sure you have the coverage you need for the year ahead. Review





THE BASICS

ELIGIBILITY | NEW HIRES | HOW TO ENROLL |
MAKING CHANGES



Eligibility

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 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 [Employee Handbook](#))

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.



AB

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.

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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.



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.

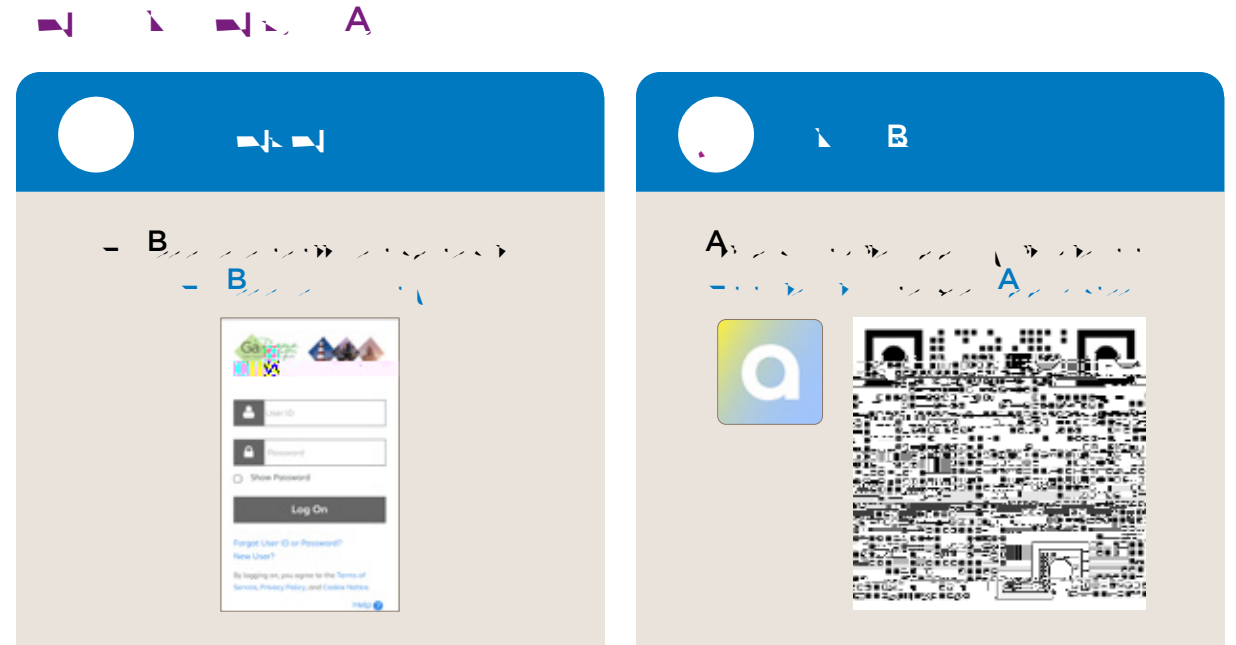



- Sign up for benefits
- Change current options
- Increase or decrease coverage levels and/or tier
- Discontinue your enrollment
- Add eligible dependents
- Drop covered dependents
- Add or change beneficiaries
- Update personal information



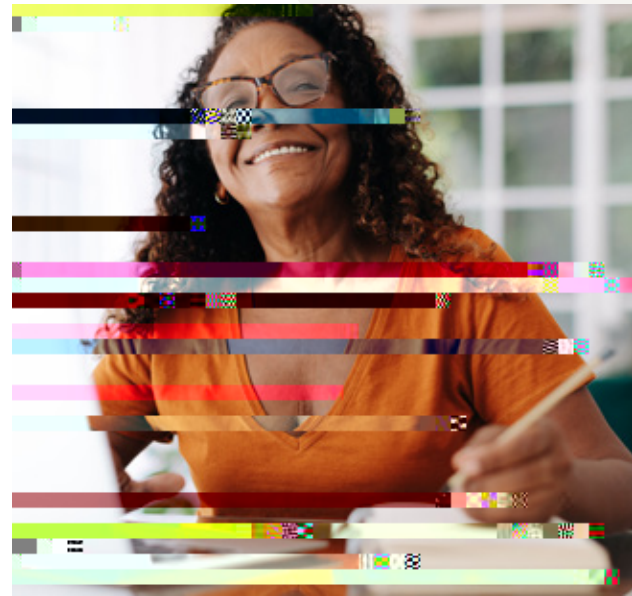
If you don't make changes during Open Enrollment, your benefit elections will carry over into the next year — with two exceptions:

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



1
Call GaBreeze at  weekdays, 8 a.m. to 5 p.m. ET

Go to [B...](#)



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

1. Log in to GaBreeze

- Enter the applicable updates (e.g., dependent information) and your requested benefit changes into [GaBreeze](#) — or contact the GaBreeze Benefits Center at [800-444-4444](tel:800-444-4444); 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 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 [800-444-4444](tel:800-444-4444).

Special Enrollment

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 **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.





for your HEALTH

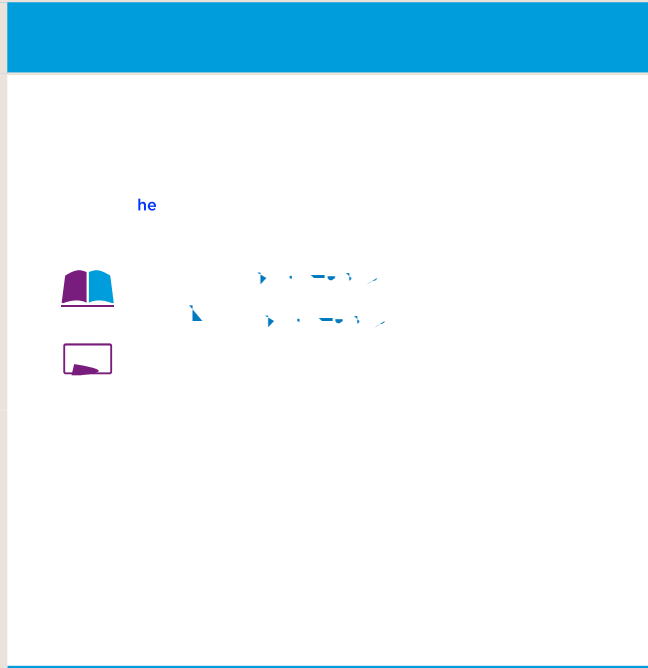
DENTAL | VISION | FLEXIBLE SPENDING ACCOUNTS

BENEFIT
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.

<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 • \$26 to \$118 for DPPO <p>Check Benevo to see your personal cost for coverage.</p>	<ul style="list-style-type: none"> • One of the few programs, anywhere, with a DHMO and DPPO 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 benefits, close to home • Flexibility to select richer coverage when you need it (like for extensive dental procedures or orthodontia) and lower coverage for those years you don't 	
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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

Vision Care



	Network Benefits per Calendar Year	
	\$10 copay	\$20 copay
	\$20 copay	\$25 copay
Single Bifocal Trifocal Lenticular	\$130 allowance every two calendar years (20% discount on leftover balance)	\$150 allowance each calendar year (20% discount on leftover balance)
	\$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)
	\$5 to \$15	\$9 to \$28

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





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.



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.

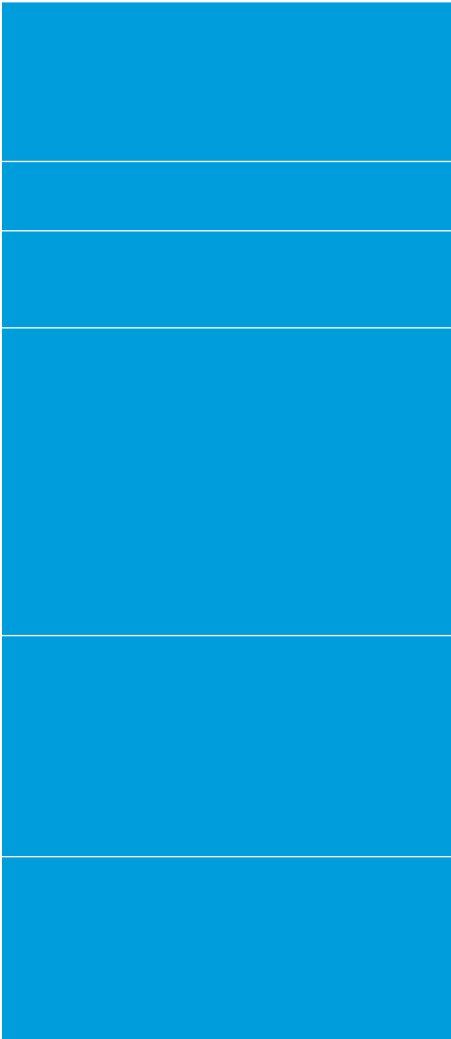
Flexible Spending Accounts

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.

<ul style="list-style-type: none">• Health Savings Account (HSA) — contribute up to \$3,050 in 2024• Child Care FSA — contribute up to \$4,922 in 2024	<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	 
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for your LIFE

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.

<ul style="list-style-type: none">• 1 to 10 X Pay• \$6,000 to \$250,000• \$3,000 to \$20,000 per child	<p>Check B to see your</p>		
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Navigation icons: Home, Back, Forward, Search, Print, Refresh, Close

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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

A B A A

Be sure to name a **1** whom you want to receive the proceeds of your life insurance and AD&D plans.

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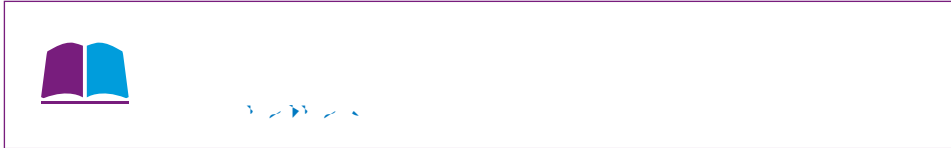


<p>1 -</p> <ul style="list-style-type: none"> • 7-day waiting period • 30-day waiting period <p>1 -</p> <ul style="list-style-type: none"> • 180-day waiting period 	<p>1 -</p> <p>Check B to see your personal cost for coverage</p>	<ul style="list-style-type: none"> • A choice of waiting periods before 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,ee80-O -1.4 Td{2eerco , J0ng perw1 (o -o)30 (vGS0 gs/ 0.485 miumbility benefits begin — includ 	
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	<ul style="list-style-type: none">• Following a 180-day waiting period• If you have STD coverage, your LTD benefits can begin when STD ends
	<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
	Benefits continue until you are no longer disabled, or (in most cases) reach your Social Security Normal Retirement Age

* See the [link](#) for more information on this and other plan provisions

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.



Scan below for interactive resources on disability benefits.

ENHANCED PROTECTION COVERAGE

Protection Against Life's "What-ifs"

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?

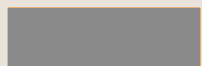
Unexpected events like these can happen to anyone, at any time. When they do, they create emotional and financial stress. Serious health conditions are disruptive and can often be terrifying. They generate uncertainty along with potentially significant out-of-pocket costs. You'll have new expenses to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

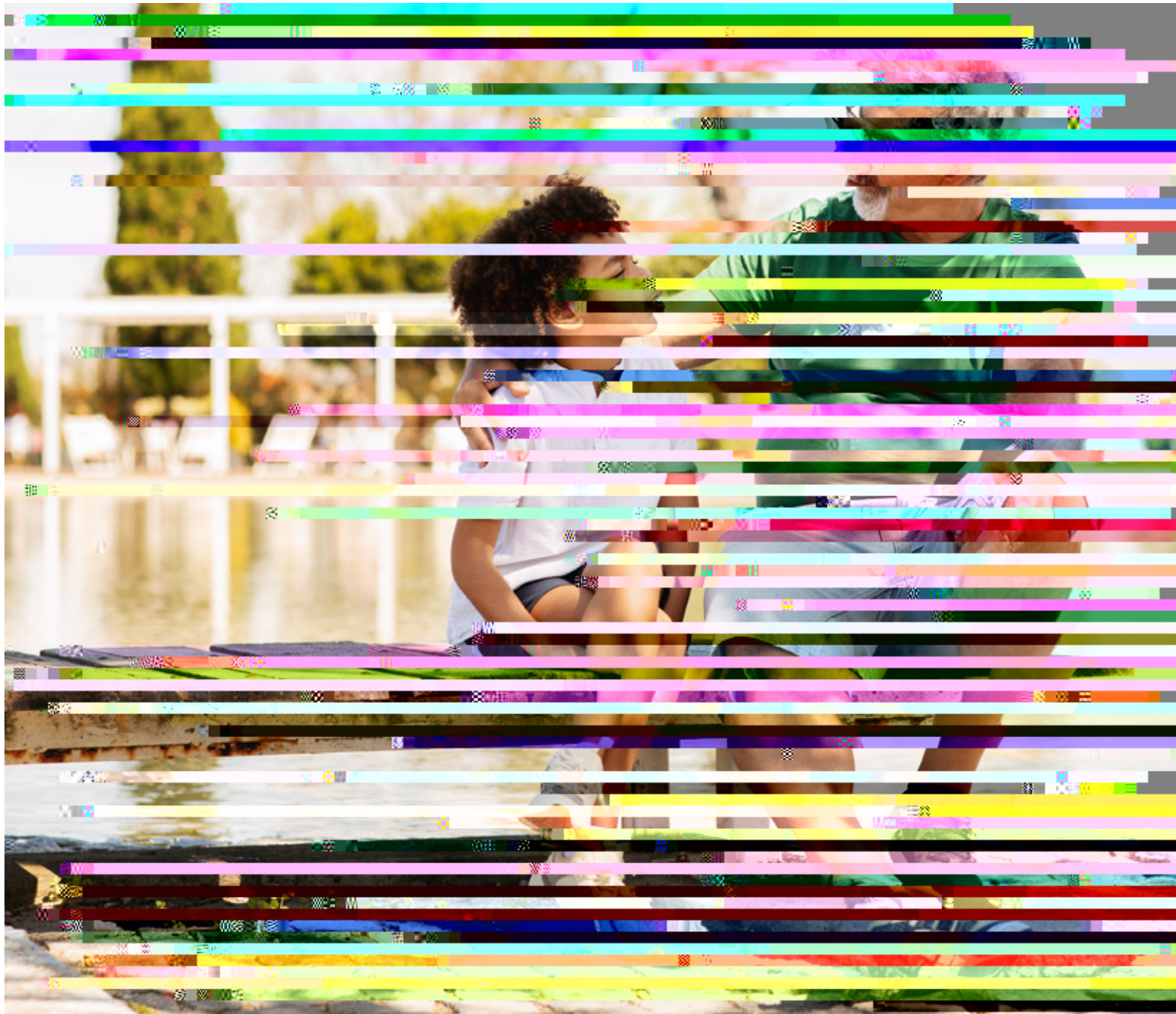
That's where these new benefit options come in. While triggered by medical conditions, they are not medical insurance. The plans provide only one form of benefit — — paid directly to you, to use as you see fit.

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

Voya is committed to making a positive difference in the lives of people with disabilities and special needs — and those





Check
qualifying disability

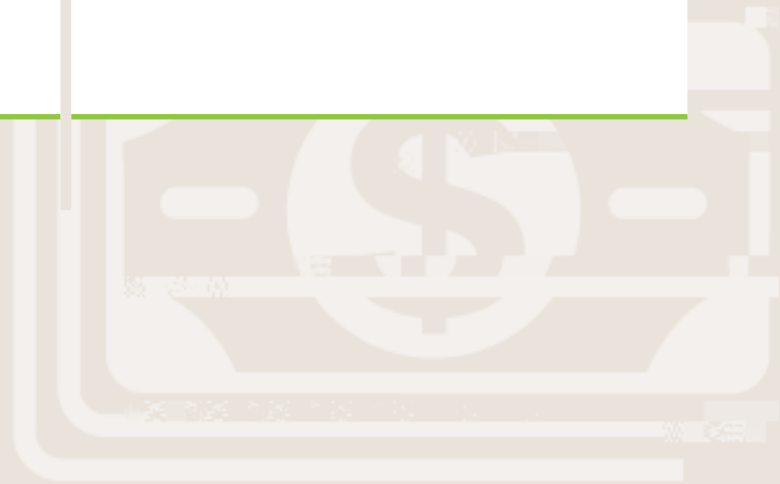




Accident Insurance

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.

<ul style="list-style-type: none"> • Employee • Employee + Spouse • Employee + Children (to age 26) • Employee + Family 	 <p>Check  B 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 health screening benefit of \$60 for each covered family member 	 
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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 [A](#)

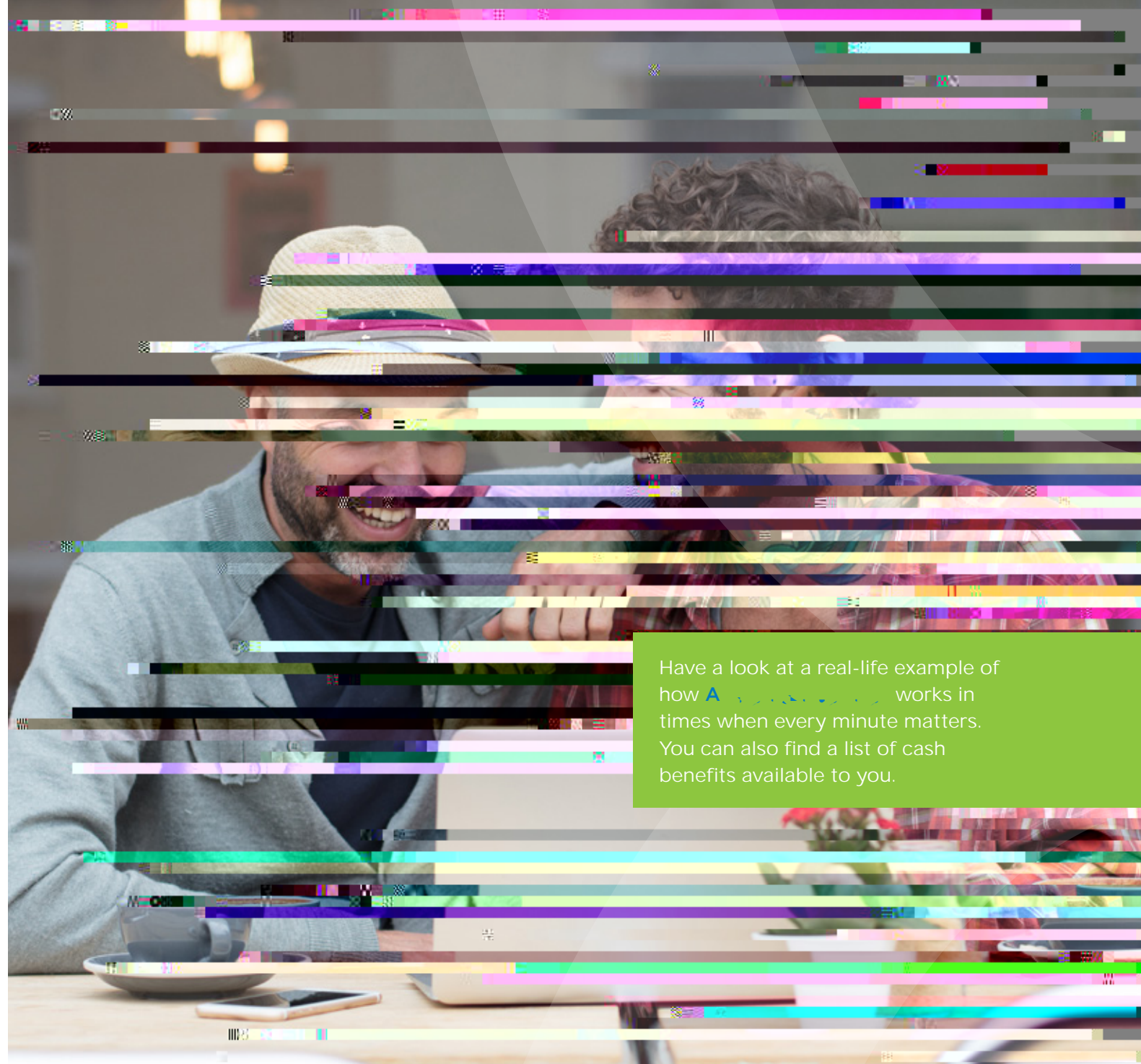
You can use your cash benefits any way you'd like, such as:

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

Go to [B](#), click [and follow the easy, step-by-step instructions.](#)



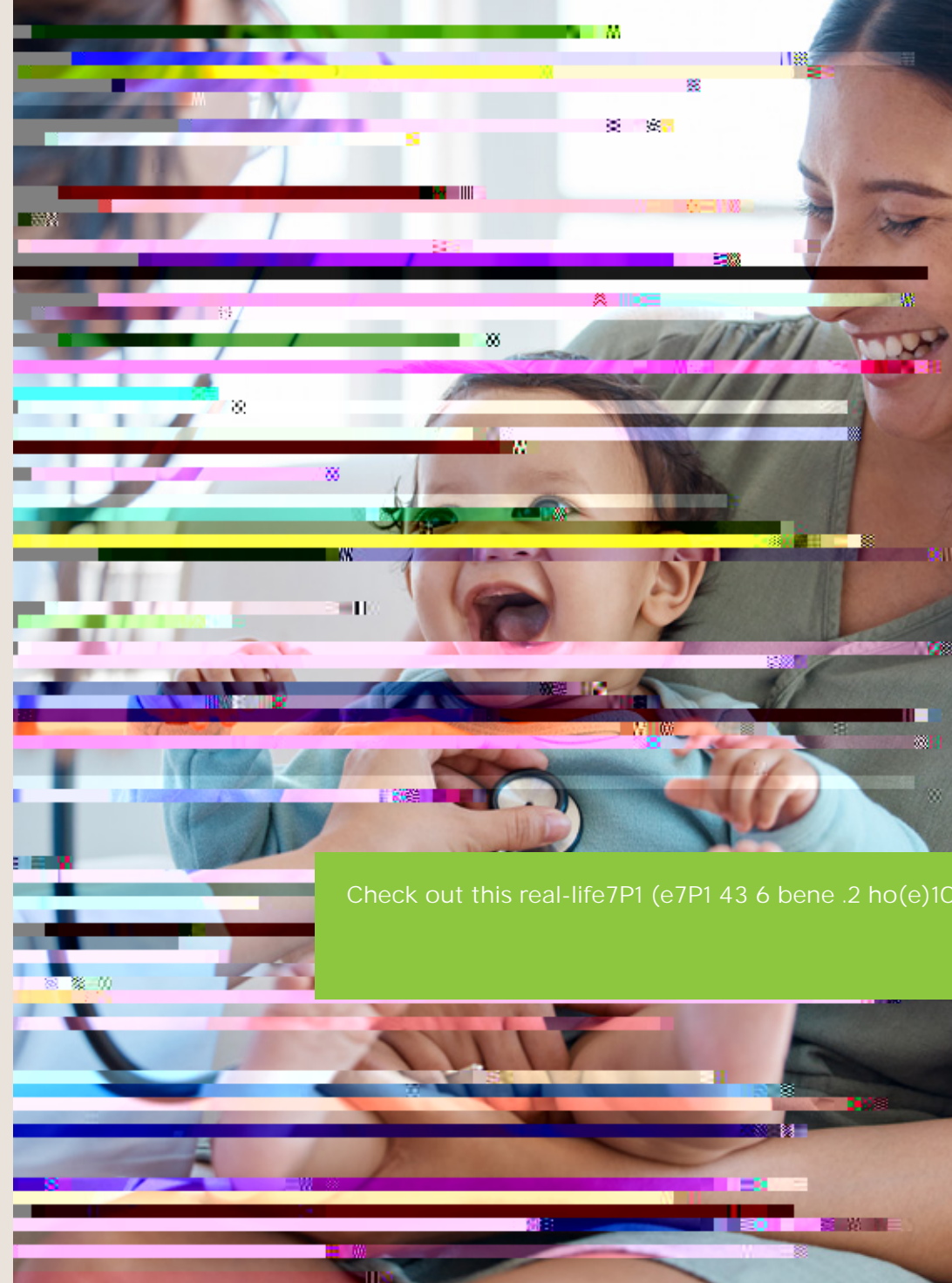
[A](#)



Have a look at a real-life example of how [A](#) 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.



Check out this real-life7P1 (e7P1 43 6 bene .2 ho(e)10

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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.

	\$1,000 (minimum 23 hours; one confinement per year)
	Starting Day 2, \$200/day (up to 31 days per confinement)
	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.

Go to [B](#), click [here](#) and follow the easy, step-by-step instructions.



See how [unclear] can benefit you.

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.



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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.



Contacts

Whom to Contact for Assistance		
1	1	1
<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

		1
	Cigna DPPO and DHMO 888-764-0099 (24/7, 365 days a year)	
	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	
1	HealthEquity/WageWorks 877-924-3967 Monday–Friday, 8 a.m. to 8 p.m. ET	
1	MetLife 877-255-5862 Monday–Thursday, 8 a.m. to 8 p.m. ET Friday, 8 a.m. to 5 p.m. ET	
1	The Standard 888-641-7186 Monday–Friday, 8 a.m. to 8 p.m. ET	
1	Voya 844-262-6042 Monday-Friday, 9 a.m. to 8 p.m. ET	B
	Unum 888-SOG-FLEX (888-764-3539) Monday–Friday, 8 a.m. to 8 p.m. ET	
	MetLife Legal Plans 800-821-6400 Monday–Friday, 8 a.m. to 8 p.m. ET	
	GaBreeze 877-342-7339 Monday–Friday, 8 a.m. to 5 p.m. ET	B

Legal Notices

You can find the following federal notices on

- 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

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

