## Flexible Benefits for Plan Year 2012

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Contact Numbers</th>
<th>Types of Coverage</th>
<th>Premium</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Concordia</td>
<td>1 866 215-2356</td>
<td>Employee (Ee)</td>
<td>Regular</td>
<td>Benefits will begin the first day of the month after one full calendar month of employment.</td>
</tr>
<tr>
<td>Cigna</td>
<td>1 800 642-5810</td>
<td>Ee + Spouse</td>
<td>$34.49</td>
<td>Employee only*</td>
</tr>
<tr>
<td></td>
<td>1 800 638-3120</td>
<td>Ee + Children</td>
<td>$68.07</td>
<td>Employee only*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ee + Family</td>
<td>$71.42</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Optum Health</td>
<td>404 522-1660</td>
<td>Employee (Ee)</td>
<td>$70.19</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Minnesota Life</td>
<td>1 888 641-7186</td>
<td>Ee + Spouse</td>
<td>$52.06</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Minnesota Life</td>
<td>1 886 849-2958</td>
<td>Ee + Children</td>
<td>$54.62</td>
<td>Employee only*</td>
</tr>
<tr>
<td>The Standard</td>
<td>1 888 764-3539</td>
<td>Ee + Family</td>
<td>$70.19</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Continental American Insurance Co. (CAIC)</td>
<td>1-800-821-6400</td>
<td>Employee (Ee)</td>
<td>$71.42</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Unum</td>
<td>1 800 893-6763</td>
<td>Ee + Spouse</td>
<td>$68.07</td>
<td>Employee only*</td>
</tr>
<tr>
<td>Hyatt Legal Plans</td>
<td></td>
<td>Ee + Children</td>
<td>$71.42</td>
<td>Employee only*</td>
</tr>
<tr>
<td>SHPS</td>
<td></td>
<td>Ee + Family</td>
<td>$70.19</td>
<td>Employee only*</td>
</tr>
</tbody>
</table>

### Dental (Regular & PPO Options)

- **Regular**: Ee + Spouse $150.44
- **PPO**: Ee + Spouse $34.49

### Dental (DHMO Option)

- **Regular**: Ee + Spouse $150.44
- **PPO**: Ee + Spouse $34.49

### Vision (Select & Select Plus Plans)

- **Regular**: Ee + Spouse $150.44
- **PPO**: Ee + Spouse $34.49

### Employee, Spouse, and Child Life

- **Employee**: Ee + Spouse $150.44
- **Spouse**: Ee + Spouse $34.49
- **Children**: Ee + Spouse $56.87

### Accidental Death & Dismemberment

- **Employee**: Ee + Spouse $150.44
- **Spouse**: Ee + Spouse $34.49
- **Children**: Ee + Spouse $56.87

### Short Term & Long Term Disability

- **STD**: Ee + Spouse $150.44
- **LTD**: Ee + Spouse $34.49

### Specified Illness

- **Employee**: Ee + Spouse $150.44

### Long Term Care

- **Employee**: Ee + Spouse $150.44

### Legal (Select & Select Plus Plans)

- **Employee**: Ee + Spouse $150.44

### Spending Accounts (Health Care & Dep. Care)

- **Employee**: Ee + Spouse $150.44

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For detailed information on each Flexible Benefit, please visit the GaBreeze web site: www.GaBreeze.ga.gov

*Employee only*: Based on Employee’s Age, Salary, Social Security eligibility, and Retirement eligibility plus admin. fee. Child coverage is provided at no additional cost.

*Employee only*: Based on CAIC’s premium rate chart.

*Employee only*: Based on Unum’s premium rate chart.

For this Annual Enrollment: Employee’s Guaranteed Issue up to $30,000. Spouse’s rate will be based on the employee’s age. Child coverage is provided at no additional cost.

Monthly contribution by employee. Please refer to the web site for minimum and maximum contribution amounts.

A monthly admin fee of $3.20 will apply.