



# 2025 Benefits Summary for Active State Employees

Benefits for a Life Well Lived

A BRIEF GUIDE TO YOUR CALIFORNIA STATE EMPLOYEE BENEFITS

**Important information for you to know:**

CalHR is committed to offering a high-quality, comprehensive benefits package that provides valuable benefits for you and your family.

This 2025 Benefits Summary for Active State Employees guide briefly describes the benefits available to you as a state employee but does not include details of all covered expenses or exclusions and limitations. You can find more information about these programs by visiting the links that are provided. Please refer to each plan's evidence of coverage booklet for the specific terms and conditions of coverage.

**Please note you have 60 days after your date of hire or other qualifying event to change or enroll in the following benefits:**

Health, dental, vision, reimbursement accounts, cash options (or cash in lieu of benefits), group legal services insurance and group long-term disability insurance.

Changes can also be made during the annual Open Enrollment period. Please contact your departmental personnel office to learn more about eligibility and how to enroll.

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## What Does a Life Well Lived Mean to You?

Is it based on your health? Your wealth? Or is it something more? For most people, living the best life possible is not about a single issue. Instead, the best life is made up of many important elements and experiences.

In fact, Gallup studied the human behavior and wellbeing of more than **98% of the world's population**. They discovered what differentiates a thriving life from a struggling or suffering one. There are five universal elements of the human experience that describe a part of your life that **you can do something about**.

These five elements — career, social, financial, physical and community — are essential parts of a fulfilling life. You can connect Gallup's five elements of wellbeing to your employee benefits. Your benefits can enhance your overall sense of wellbeing both professionally and personally. Your wellbeing is important to your daily experience and long-term happiness.



### **Career wellbeing: *You like what you do every day.***

Career wellbeing is the foundation of your overall wellbeing. It is the most important of the five elements. For many people, a great job is what makes a great life possible.

**How your benefits help:** Your benefits support your career growth. Resources include training opportunities, coaching and manager support services. These resources help you build a meaningful and satisfying career, the bedrock for a thriving life.



### **Social wellbeing: *You have meaningful friendships in your life.***

Your social wellbeing is woven into all other aspects of your life. When your career and social wellbeing are strong, your perceived standard of living is higher, regardless of your income.

**How your benefits help:** The Statewide Engagement Program brings state employees together. You can connect with others through workplace activities and recognition initiatives. The program helps you form strong, supportive connections with your colleagues.



### **Financial wellbeing: *You manage your money well.***

For many people, money isn't everything. But if you set the right goals and manage your money well, you can have more choices and freedom to improve your quality of life.

**How your benefits help:** Reduce financial stress, achieve financial security and find peace of mind. We provide retirement benefits, employer-paid benefits, reimbursement accounts, insurance and legal services. We also have a benefits calculator to help you make decisions about your benefits.



### **Physical wellbeing: *You have energy to get things done.***

People with thriving physical wellbeing feel better and live longer. They manage their health, exercise regularly, make good dietary choices and get enough sleep.

**How your benefits help:** We want you feeling your best, both mentally and physically. We offer health insurance, health and wellness programs and mental health resources.



### **Community wellbeing: *You like where you live.***

Community wellbeing distinguishes a satisfactory life from an exceptional one. Those who excel in community wellbeing often say their life is better than they dreamed.

**How your benefits help:** Get involved with the community. You can feel proud of your impact through opportunities like Public Service Recognition Week and the EAP.

### **The Value for You: A More Fulfilling and Balanced Life**

When your benefits fit within these five elements of wellbeing, you create a support system for the most important areas of your life. Taking advantage of the benefits available to you not only helps you build a job you love but also the life you dream of.

## Health

You and your dependents can access various health insurance plans, with the state paying a portion of the premium. The California Public Employees’ Retirement System (CalPERS) administers the coverage. Please note that there are changes to 2025 health plans and premiums. It is important to visit the [California Public Employees’ Retirement System \(CalPERS\) website](#) before you enroll or make changes to your benefits during Open Enrollment.

For 2025 CoBen allowances, please see page 15.

### CalPERS 2025 Statewide Basic Monthly Health Premiums

#### Health Maintenance Organization Plans (HMO)

HEALTH PLANS	SINGLE	2-PARTY	FAMILY
Anthem Blue Cross Select HMO	\$1,021.71	\$2,043.42	\$2,656.45
Anthem Blue Cross Traditional HMO	\$1,309.07	\$2,618.14	\$3,403.58
Blue Shield Access+ HMO	\$965.86	\$1,931.72	\$2,511.24
Blue Shield Trio HMO	\$909.10	\$1,818.20	\$2,363.66
Health Net Salud y Mas	\$753.72	\$1,507.44	\$1,959.67
Kaiser Permanente	\$1,045.20	\$2,090.40	\$2,717.52
Kaiser Permanente Out of State	\$1,422.26	\$2,844.52	\$3,697.88
Sharp Performance Plus	\$868.45	\$1,736.90	\$2,257.97
UnitedHealthcare SignatureValue Alliance	\$961.35	\$1,922.70	\$2,499.51
UnitedHealthcare SignatureValue Harmony	\$820.13	\$1,640.26	\$2,132.34
Western Health Advantage HMO	\$914.27	\$1,828.54	\$2,377.10

#### Association Plans

HEALTH PLANS	SINGLE	2-PARTY	FAMILY
CAHP	\$930.09	\$1,805.63	\$2,361.59
CCPOA North	\$1,066.79	\$2,139.38	\$2,888.76
CCPOA South	\$879.45	\$1,764.63	\$2,384.88
PORAC	\$894.00	\$1,789.00	\$2,325.00

#### Preferred Provider Organization Plans (PPO)

HEALTH PLANS	SINGLE	2-PARTY	FAMILY
PERS Gold	\$943.70	\$1,887.40	\$2,453.62
PERS Platinum	\$1,335.30	\$2,670.60	\$3,471.78

**Note:** Some health plans are available only in certain counties and/or ZIP codes. Contact the health plan before enrolling to make sure they cover your ZIP code(s) and that their provider network is accepting new patients in your area. You may also use the [Health Plan Search by ZIP code tool](#) or [log in to your myCalPERS account](#) to see the health plans available in your area.

This information is provided for your convenience. Health benefits are administered by CalPERS.

For more information about this benefit, contact CalPERS at (888) 225-7377 or visit the [CalPERS website](#).



## Dental

CalHR offers state-sponsored dental plans to all eligible state employees and their eligible dependents. Your collective bargaining designation determines which plans are available to you. The state pays all or part of your premium, depending on the plan you select and the number of dependents you wish to cover.

**There are three types of dental plans available:**

### 1. Prepaid Plans

#### **DeltaCare USA, MetLife, Premier Access and Western Dental**

- The prepaid plans require you and your eligible dependents to use a dentist from a specific list of dentists who are located in California and who contract with your selected prepaid carrier.
- Dentists receive a flat fee for each member assigned to their offices.
- Most basic services are covered at no cost.

### 2. Indemnity Plans

#### **Delta Dental PPO plus Premier Basic and Enhanced Plans — Group No. 9949**

- The indemnity plans allow you to select the dentist of your choice throughout the United States and worldwide.
- You have access to the Delta Dental PPO and Premier networks; however, you will usually save the most when you visit a PPO dentist. You will generally have the highest out-of-pocket costs when you visit a non-Delta Dental dentist.
- The plans limit the amount of paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.

### 3. Preferred Provider Organization (PPO) Plan

#### **Delta Dental PPO – Group No. 9946**

- The PPO plan provides services through its network of participating dentists and allows you to see any dentist of your choice throughout the United States and worldwide and still be covered.
- Your present dentist may be a PPO member of Delta Dental; however, not all Delta Dental contracted dentists are members of the PPO network. If you receive services outside of the PPO network, your share of the dentist's fees may be substantially higher. You may contact Delta Dental to ensure there is a PPO provider available in your service area.
- When using a PPO provider, your cost for services is based on a fee-for-service agreement between Delta Dental and the PPO provider. The plan limits paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.

## Eligibility

All employees in Bargaining Units 1, 3, 4, 5, 6, 9, 10, 11, 12, 13, 14, 15, 20 and 21 have the option of enrolling in a prepaid plan for the first 24 months of employment. At the end of 24 months of state employment, those employees will have 60 days to enroll in the PPO or indemnity plan if they so choose. Employees in Bargaining Units 2, 7, 8, 16, 17, 18 and 19, and excluded employees may elect the Delta PPO plan or Delta PPO plus Premier plan at the time of hire and are not restricted to the state-sponsored prepaid plans. Some exceptions may apply. For more information, please visit the [CalHR Dental webpage](#).

Employees in Bargaining Unit 5, the California Association of Highway Patrolmen (CAHP), have the option of enrolling in a prepaid plan for the first 24 months of employment. Dues-paying members of Bargaining Unit 5 may enroll in the union-sponsored indemnity dental plan once they have completed 24 consecutive months in state service.

Dues-paying members of Bargaining Unit 6, the California Correctional Peace Officers Association (CCPOA), must be enrolled in a dental plan provided through their union-sponsored trust. CCPOA members must complete 12 months in the union-sponsored Western Dental plan before they are eligible to enroll in the union-sponsored indemnity plan.

## Recent Enhancements

The Delta Dental PPO, Delta Dental PPO plus Premier Basic, Delta Dental PPO plus Premium Enhanced, MetLife Standard, MetLife Enhanced, Premier Access and Western Dental plans have plan enhancements that were effective January 1, 2022. These enhancements included the addition of a third cleaning and coverage for implants to the Delta Dental PPO, Delta Dental PPO plus Premier Basic, and Delta Dental PPO plus Premium Enhanced plans.

The enhancements to the Delta PPO plans also included an increase to the dependent annual max and coinsurance.

## Coverage and Costs for Certain Procedures

PREPAID PLANS	DELTACARE USA, METLIFE STANDARD, PREMIER ACCESS AND WESTERN DENTAL	METLIFE ENHANCED
<b>Who is eligible?</b>	Employees and Dependents	Excluded Employees and Dependents
<b>Diagnostic and Preventive Benefits (two cleanings annually)</b>	No charge	No charge <sup>1</sup>
<b>Basic Benefits</b>	No charge	No charge
<b>Crowns</b>	\$50	No charge
<b>Bridges, Full and Partial Dentures</b>	\$65 and up	No charge
<b>Implants</b>	<b>Premier Access and Western Dental only</b>	Not covered
<b>Orthodontia</b>	\$1,000, plus up to \$250 for startup costs	\$1,000, plus up to \$250 for startup costs

<sup>1</sup> MetLife Enhanced provides the availability for a third cleaning to the employee and all enrolled dependents.



INDEMNITY AND PPO PLANS	DELTA DENTAL PPO PLUS PREMIER BASIC NO. 9949	DELTA DENTAL PPO PLUS PREMIER BASIC NO. 9949	DELTA DENTAL PPO PLUS PREMIER ENHANCED NO. 9949	DELTA DENTAL PPO IN-NETWORK <sup>2</sup> (PPO DENTISTS) NO. 9946	DELTA DENTAL PPO OUT-OF-NETWORK (NON-PPO DENTISTS) NO. 9946
Who Is Eligible?	Represented Employees	Dependents of Represented Employees	Excluded Employees and Dependents	Employees and Dependents	Employees and Dependents
<b>Diagnostic and Preventive Benefits (two cleanings annually)</b>	No charge <sup>3,4</sup>	No charge <sup>3,4</sup>	No charge <sup>3,4</sup>	No charge <sup>3,4</sup>	20% <sup>4</sup>
<b>Basic Benefits</b>	10%	10%	10%	10%	20%
<b>Crowns</b>	20%	50%	20%	20%	50%
<b>Bridges, Full and Partial Dentures</b>	50%	50%	50%	40%	50%
<b>Implants<sup>5</sup></b>	50%	50%	50%	50%	50%
<b>Orthodontia</b>	50%	50%	50%	50%	50%
<b>Lifetime Orthodontia Maximum</b>	\$1,000	\$1,000	\$1,000	\$1,000 adult/ \$1,500 children	\$1,000 adult/ \$1,000 children
<b>Annual Deductible</b>	\$50	\$50 person/ \$150 family	\$25 person/ \$100 family	\$25 person/ \$100 family	\$75 person/ \$200 family
<b>Calendar Year Maximum (CYM)</b>	\$2,000	\$1,500 per person	\$2,000 per person	\$2,000 per person	\$1,000 per person

2 The level of benefits and covered services are based on services provided by a PPO plan dentist; for services provided by a non-PPO plan dentist, the level of benefits is lower.  
 3 Diagnostic and preventive benefits are exempt from the deductible.  
 4 Includes a third cleaning for high-risk patients.  
 5 Implants subject to the CYM.

## 2024 vs. 2025 Dental Premium Comparison

The following tables show a comparison of dental program rate changes from 2024 to the 2025 benefit plan year the indemnity and PPO plans.

### Delta Dental PPO plus Premier Basic (for Represented Employees)

LEVEL OF COVERAGE	2024	2025
Employee Only	\$50.83	\$49.31
Employee + 1	\$88.75	\$86.10
Employee + Family	\$128.28	\$124.44

### Delta Dental PPO plus Premier Enhanced (for Excluded Employees)

LEVEL OF COVERAGE	2024	2025
Employee Only	\$52.87	\$51.29
Employee + 1	\$104.06	\$100.95
Employee + Family	\$146.18	\$141.81

### Delta Dental Preferred Provider Option (PPO)

LEVEL OF COVERAGE	2024	2025
Employee Only	\$46.45	\$45.06
Employee + 1	\$90.31	\$87.61
Employee + Family	\$135.88	\$131.82

CalHR offers state-sponsored dental plans to all eligible state employees and their eligible dependents. Your collective bargaining designation determines which plans are available to you. The state pays all or part of your premium, depending on the plan you select and the number of dependents you wish to cover.

## 2025 Dental Premiums

The following tables show dental premiums effective January 1, 2025. For employees in Consolidated Benefits (CoBen), the state share and employee share do not apply, and the total dental premium will be deducted from the monthly CoBen allowance.

### Prepaid Dental Plans

The state will pay 100% of the premium for employees who are not in CoBen.

LEVEL OF COVER-AGE	DELTACARE USA	METLIFE STANDARD	METLIFE ENHANCED	PREMIER ACCESS	WESTERN DENTAL
Employee Only	\$19.44	\$13.85	\$16.06	\$14.21	\$15.77
Employee + 1	\$31.90	\$22.44	\$27.18	\$23.02	\$26.02
Employee + Family	\$44.13	\$31.42	\$33.48	\$32.24	\$36.91

### Delta Dental PPO plus Premier Basic Plan for Represented Employees – Group No. 9949

LEVEL OF COVER-AGE	STATE SHARE	EMPLOYEE SHARE	TOTAL PREMIUM
Employee Only	\$36.98	\$12.33	\$49.31
Employee + 1	\$64.58	\$21.52	\$86.10
Employee + Family	\$93.33	\$31.11	\$124.44

### Delta Dental PPO plus Premier Enhanced Plan for Excluded Employees – Group No. 9949

LEVEL OF COVER-AGE	TOTAL PREMIUM
Employee Only	\$51.29
Employee + 1	\$100.95
Employee + Family	\$141.81

### Delta Dental PPO for Excluded and Represented Employees – Group No. 9946

LEVEL OF COVER-AGE	STATE SHARE	EMPLOYEE SHARE	TOTAL PREMIUM
Employee Only	\$33.80	\$11.26	\$45.06
Employee + 1	\$65.71	\$21.90	\$87.61
Employee + Family	\$98.87	\$32.95	\$131.82

## Union-Sponsored Dental Plans

Employees in Bargaining Units 5 and 6 should contact their Benefit Trust for information on their union-sponsored dental plan premiums and benefits.

- For CCPOA, contact: (800) 468-6486
- For CAHP, contact: (800) 734-2247

For more information on dental plans, please contact your departmental personnel office or visit the [CalHR Dental webpage](#). Please consult each dental plan's evidence of coverage for detailed information and plan limitations. To obtain a list of each plan's member dentists, please call or visit the websites of the plans listed below.

## Carrier Contact Information

### Prepaid Dental Plans

- **DeltaCare USA**  
P.O. Box 1803  
Alpharetta, GA 30023  
(800) 422-4234  
[deltadentalins.com/state](http://deltadentalins.com/state)
- **MetLife\***  
P.O. Box 14410  
Lexington, KY 40512-4401  
(800) 880-1800  
[metlife.com/safeguard/soc](http://metlife.com/safeguard/soc)
- **Premier Access**  
8890 Cal Center Drive Sacramento, CA 95826  
(888) 534-3466  
Fax: (877) 648-7748  
[socdhmo.com](http://socdhmo.com)
- **Western Dental Plan**  
530 South Main Street, 1st Floor  
Orange, CA 92868  
(866) 859-7525  
[westerndental.com/state-of-ca](http://westerndental.com/state-of-ca)

### Delta Dental Plans

- **Delta Dental**  
P.O. Box 997330  
Sacramento, CA 95899-7330  
(800) 225-3368  
[deltadentalins.com/state](http://deltadentalins.com/state)

*\*Benefits are provided by SafeGuard Health Plans, Inc., a MetLife company.*

## Vision

CalHR offers two vision plans through Vision Service Plan (VSP), the Basic Vision Plan and the Premier Vision Plan. The Basic Vision Plan automatically provides family coverage and the state pays the full premium. The Premier Vision Plan is an enhanced plan that employees may enroll in. Employees pay the difference in monthly premiums for themselves and their dependents when they enroll in the Premier Vision Plan. Both plans include an in-network eye exam every year, coverage for lenses and an allowance to help with the cost of frames or contacts. The Premier Vision Plan provides a higher frame and contact allowance and lower out-of-pocket costs for lens enhancements such as standard progressive lenses.

### Recent Enhancements

VSP has implemented PremierMax, a new way to enhance coverage by using benefits at a VSP Premier Edge location. Some features included in the PremierMax option are a \$0 exam copay and a \$0 retinal screening copay. The PremierMax option is available as part of the Basic and Premier Plans for active employees and retirees. Additionally, the Premier Plan for active employees has increased the frame allowance to \$250.

For more information about PremierMax, please visit the [Dental Bookshelf in the Virtual Library](#).



## 2024 vs. 2025 Vision Premium Comparison

Premiums will decrease by 2.05% for active employees for the 2025 plan year for the VSP Basic plan. The VSP Basic plan is of no cost to state employees. The 2.05% decrease in the VSP Basic plan is a rate guarantee decrease from VSP to the State of California.

The VSP Premier plan, an employee-paid plan, applied an increase of \$0.17 (\$2.04 annually) for employees enrolled in this plan. This increase is due to the \$50 frame allowance and the benefit addition of PremierMax. These changes and other additional benefits result in more out-of-pocket savings for members.

The following tables show a comparison of vision program rate changes from 2024 to the 2025 benefit plan year.

### VSP Basic (Total Premium)

LEVEL OF COVERAGE	2024	2025
Employee Only	\$8.27	\$8.10
Employee + 1	\$8.27	\$8.10
Employee + Family	\$8.27	\$8.10

### VSP Premier (Employee Cost)

LEVEL OF COVERAGE	2024	2025
Employee Only	\$8.46	\$8.63
Employee + 1	\$16.92	\$17.09
Employee + Family	\$27.24	\$27.41

The vision rates shown reflect the premiums which will be effective January 1, 2025.

Be sure to take advantage of the annual WellVision exam these plans offer. An annual WellVision exam checks the health of your eyes and can even detect more serious health issues such as diabetes, high blood pressure, high cholesterol and thyroid disease. In addition, both plans include additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma and more.

### To enroll, cancel or make changes to their vision plan with the following steps:

- Visit the [VSP website](#) and click the **Enroll Now or Make Changes** button.
- Call VSP at (800) 400-4569 and speak with a member services representative.

For more information about these benefits, visit the [CalHR Vision webpage](#) or the [VSP website](#), or call VSP at (800) 400-4569.

## Benefits Calculator

The Benefits Calculator is a handy tool that helps you make informed financial decisions about your health, dental and vision benefits by calculating premiums for different benefit plans and viewing contribution rates based on your bargaining unit. In addition, you will see how much will be deducted from or added to your paycheck based on which benefit plan you choose.

With the recent upgrades, state employees can easily compare premiums between bargaining units and will have the option to populate a dental and/or vision enrollment form.

Employees are encouraged to review the [Benefits Calculator User Guide](#) for further instructions. For more information, visit the [CalHR Benefits Calculator webpage](#).



## Enrolling Family Members

You can add the following family members in health, dental and/or vision at the time of your enrollment, during the annual Open Enrollment period, or with a qualifying event:

- Spouse or registered domestic partner
- Natural/adopted children up until age 26
- Step and domestic partner children up until age 26

Upon enrollment and on a triennial basis, you will be required to provide documents to verify your dependent(s) eligibility to remain enrolled in benefits as part of the Dependent Re-Verification Process (DRV).

The following family members can be enrolled in health, dental and/or vision benefits but are subject to specific eligibility, enrollment and certification and recertification rules and regulations:

- Children in a Parent-Child Relationship up until age 26, unless enrolled as a disabled dependent
- Disabled child over the age of 26

If you choose to enroll your family members in the health, dental and/or vision benefits, you may select one of the following enrollment options:

- Self
- Self and one eligible family member
- Self and two or more eligible family members\*

*\*Once you've added two or more family members, additional dependents will not change your premium amount.*

Contact your departmental personnel office for more information about your family member(s) eligibility and enrollment requirements.



## Consolidated Benefits (CoBen)

Represented employees in Bargaining Units 2, 7, 8, 16, 17, 18, 19 and excluded employees receive a Consolidated Benefits (CoBen) Allowance, a combined employer contribution that is applied toward an employee’s health, dental and vision insurance.

### 2025 Consolidated Benefits (CoBen) Allowances and Employer Health Benefit Contributions by Bargaining Unit

BARGAINING UNIT	SINGLE	2-PARTY	FAMILY
1	\$974	\$1,780	\$2,262
2*	\$851	\$1,689	\$2,204
3	\$974	\$1,780	\$2,262
4	\$974	\$1,780	\$2,262
5	\$860	\$1,666	\$2,148
6	\$809	\$1,615	\$2,097
7*	\$851	\$1,689	\$2,204
8*	\$902	\$1,740	\$2,255
9	\$860	\$1,666	\$2,148
10	\$809	\$1,615	\$2,097
11	\$974	\$1,780	\$2,262
12	\$809	\$1,615	\$2,097
13	\$809	\$1,615	\$2,097
14	\$974	\$1,780	\$2,262
15	\$974	\$1,780	\$2,262
16*	\$851	\$1,689	\$2,204
17*	\$1,016	\$1,854	\$2,369
18*	\$851	\$1,689	\$2,204
19*	\$851	\$1,689	\$2,204
20	\$974	\$1,780	\$2,262
21	\$974	\$1,780	\$2,262
Excluded*	\$907	\$1,750	\$2,262

\*CoBen Unit

**Note:** The CoBen and health contributions for Bargaining Units 1, 3, 4, 11, 14, 15, 17, 20 and 21 (SEIU units) include an additional \$165 supplemental health benefits contribution.

For more information about this benefit, Visit the [CalHR CoBen webpage](#).

## FlexElect Reimbursement Accounts

CalHR offers employees two Reimbursement Accounts: Medical and Dependent Care. These programs allow employees to set aside money to pay for certain kinds of expenses. You specify the amount to be deducted from your paycheck, and the deduction occurs before tax withholding, reducing tax liability.

That money is deposited into the appropriate account(s) for you. Once you incur an eligible expense, you submit a claim for reimbursement. Your reimbursement check is mailed to you, or you can request direct deposit into your checking or savings account.

Enrollments are in effect for one plan year (January 1-December 31). Employees must re-enroll each year during the annual open enrollment for the next plan year.

The annual maximum amount employees may contribute to a Medical Reimbursement Account is \$3,200 for 2025. Please visit the [CalHR FlexElect Reimbursement Accounts webpage](#) for more information.

### FlexElect Medical Reimbursement

You may claim reimbursement for out-of-pocket health care services and/or supplies provided to you, your spouse and your eligible dependents (as defined under IRC section 152) even if you are not covered under the same health plan. Examples of eligible expenses include office visit copays, prescription drugs, dental services and prescription glasses.

Expenses that are deemed cosmetic or only benefit general health are not reimbursable. For example, health club expenses for general good health purposes are not reimbursable.

### FlexElect Dependent Care Reimbursement

Expenses for childcare, elder care, and care for a disabled dependent are reimbursable if the care is necessary for you to work or look for work. If you are married, your spouse must also work unless they are a full-time student or physically or mentally incapable of caring for themselves.

Dependent care services may be provided in your home or someplace else, including family day care homes and day care centers that comply with applicable state and local laws. Day camp expenses qualify as eligible expenses, but overnight camp expenses do not qualify.

For more information about this benefit, visit the [CalHR FlexElect Reimbursement Accounts webpage](#).

## Cash Options

### Cash Options Through CoBen and FlexElect

If you have qualifying group health coverage through another source, such as your spouse, domestic partner or parent, you may opt to receive cash in lieu of both your state-sponsored health and dental coverage or for your state-sponsored health coverage only. Employees who are not covered by CoBen also have the option to receive cash in lieu of dental coverage only. Employees enrolled in individual coverage, such as TRICARE, Medicare, Medi-Cal and Covered California, are not eligible to receive cash in lieu of other health coverage.

Your bargaining unit determines which of the two cash option benefits you are eligible for. All cash option payments are considered taxable income.

Employees must enroll in this program at the time of hire, during the annual open enrollment or upon experiencing a qualifying event. Re-enrollment is not required each year except for permanent intermittent employees.

Excluded employees and employees in Bargaining Units 2, 7, 8, 16, 17, 18 and 19 are covered by CoBen.

The cash option for employees in Bargaining Units 1, 3, 4, 5, 6, 9, 10, 11, 12, 13, 14, 15, 20 and 21 are available through FlexElect, not CoBen.

For more information about these benefits, visit the [CalHR CoBen Cash](#) and [Non-CoBen Cash](#) webpages.

## Consolidated Omnibus Budget Reconciliation Act (COBRA)

COBRA requires that employers who maintain group health plans (includes medical, dental, vision and medical reimbursement accounts) offer continuation of benefit coverage for a specific period of time to covered employees, spouses, domestic partners (State of California legislation) and dependent children who lose group coverage due to a “qualifying event.”

A COBRA qualifying event is an event which results in a loss of group coverage and provides continuation coverage for a specific number of months. An individual must be covered under the plan before the qualifying event date to be eligible for COBRA.

### Employee Responsibilities

As a state employee, you must be aware of your COBRA rights in the event you or your enrolled dependents lose coverage due to a qualifying event. You also have the responsibility to report a qualifying event to your departmental personnel office within 60 days of the event. Failure to report a qualifying event timely may result in the loss of COBRA continuation rights.

For more information about this benefit, visit the [CalHR COBRA](#) webpage.

## Group Legal Services Insurance Plan

The Group Legal Services Insurance Plan is a voluntary, employee-paid plan that provides comprehensive legal coverage. It is designed to meet the most common personal legal needs of an individual and their family. Covered services include 100% paid-in-full network attorney fees for most covered matters, including coverage for in-office advice, representation and consultation.

### Recent Enhancements

A plan enhancement was made in 2024 that added the Family Law and DEI package. A new update to Elder Law under Wills and Durable Power of Attorney has been implemented. This enhancement will broaden the availability of coverage to members by including their parents and grandparents without needing to be designated as the guardian or conservator.

### 2025 Group Legal Services Insurance Plan Premiums

There are no changes to the premium rates.

The following table shows the monthly premiums for coverage effective January 1, 2025:

**Group Number:** 10202

**Org. Code:** 075-081

PARTY CODE	TOTAL PREMIUM
Individual	\$10.27
Family	\$17.87

The monthly administrative fee is \$0.85 and is included in the premium.

## Carrier Contact Information for Group Legal Services Insurance Plan

To install the Group Legal Services Insurance Plan app on your device, visit the App Store (Apple) or Google Play (Android) and search for ARAG. For more information, call (866) 762-0972.

### Employees can enroll, cancel or make changes to their legal plan with the following steps:

- Visit ARAG Insurance website and click on the Open Enrollment button.
- Contact Member Services at (866) 762-0972.
- Fax enrollment form to (515) 246-8816.
- Email the enrollment form to [forms@araglegal.com](mailto:forms@araglegal.com).
- Mail the enrollment form to:

**ARAG Insurance Company**

500 Grand Ave, Suite 100

Des Moines, IA 50309-9958

Toll-free: (866) 762-0972

Fax: (515) 246-8816

[ARAGlegal.com/SOCinfo](https://ARAGlegal.com/SOCinfo)

ARAG is the current plan vendor. For more information about this benefit, visit the [CalHR Group Legal Services webpage](#) or the [ARAG website](#).

For the complete list of covered services, visit the [ARAG website](#).

## Group Long-Term Disability Insurance (LTD) (Excluded Employees Only)

LTD is a voluntary insurance plan available to eligible excluded state employees only. This benefit replaces a portion of your income in the event you cannot work for six months or more due to a covered illness or injury. By protecting your income and helping you to meet your financial commitments in a time of need, this benefit can be key to maintaining your standard of living. The current LTD vendor is Standard Insurance Company.

### Recent Enhancements

January 1, 2025, eligible active employees that are enrolled in a Health Insurance Plan are now eligible for the new plan enhancement: Accident and Critical Illness Insurance (AI & CI).

### 2025 LTD Premiums

The following table shows the factors used to calculate the monthly premiums for coverage effective January 1, 2025.

**Group Number:** 643146

**Org. Code:** 075-111

**Org. Code:** 075-119

AGE	075 - 111 65% COVERAGE	075 - 119 55% COVERAGE
Under 30	\$0.026	\$0.012
30-39	\$0.073	\$0.037
40-49	\$0.173	\$0.087
50-59	\$0.347	\$0.175
Over 60	\$0.384	\$0.195

The monthly administrative fee is \$0.80.

Employees can calculate their monthly premium by multiplying the monthly base salary by the age-benefit option plus the admin fee (Month Base Salary x Age-Benefit Option + Admin Fee = Monthly Premium Rate).

## Carrier Contact Information for LTD Insurance

Employees can enroll, cancel or make changes to their disability plan with the following steps:

- Visit the Standard Insurance website and click on the Enroll Now button.
- Contact Member Services at (971) 321-8150.
- Email the LTD Enrollment Form to [Socltdforms@standard.com](mailto:Socltdforms@standard.com).
- Mail the enrollment form to:

**National Accounts Services SOC Team Standard Insurance Company**

900 SW 5th Avenue

Portland, OR 97204-9805

Direct line: (971) 321-8150

Toll-free: (888) 641-7193

Email: [socltdforms@standard.com](mailto:socltdforms@standard.com)

[standard.com/mybenefits/california](https://standard.com/mybenefits/california)

Pay Agencies (e.g., Cal Expo, Fairs, Legislative Analyst Office) employees must complete the [LTD Enrollment Form](#) and submit it to their departmental personnel office for processing.

Active Military employees must complete and mail or email the [LTD Enrollment Form](#) to Standard Insurance for processing.

For more information about this benefit, visit the [CalHR Group Long-Term Disability webpage](#) or the [Standard's website](#).

## Basic Group Term Life Insurance and Voluntary Supplemental Life Insurance (Excluded Employees Only)

An employer-paid Basic Group Term Life Insurance Plan is provided to active state employees who are designated managers, supervisors, confidential, and other specified excluded employees. Employees designated supervisory and confidential have \$25,000 of basic insurance coverage, and employees designated exempt and managerial have \$50,000 of coverage.

Voluntary Supplemental Life Insurance is an employee-paid benefit available to employees who are enrolled in the Basic Group Term Life Insurance Plan. Employees who purchase \$20,000 or more in Voluntary Supplemental Life Insurance may also purchase life insurance for a spouse or domestic partner and dependent child(ren) up to age 23. MetLife Insurance is the current vendor for this program.

**The following table provides the rates for employees and dependents for supplemental coverage effective January 1, 2025.**

**Org. Code:** 075-107

### Employee Coverage

AGE	RATE PER \$10,000 COVERAGE
Under 25	\$0.060
25-29	\$0.064
30-34	\$0.078
35-39	\$0.085
40-44	\$0.105
45-49	\$0.150
50-54	\$0.222
55-59	\$0.402
60-64	\$0.609
65-69	\$1.158
70-74	\$1.869
75 and Over	\$2.075



**Dependent Coverage**

SPOUSE/DOMESTIC PARTNER	CHILD(REN) COV-ERAGE	EMPLOYEE AGE IS LESS THAN 65	EMPLOYEE AGE IS GREATER THAN 65
\$7,500	\$7,500	\$1.85	\$7.25
\$15,000	\$7,500	\$3.71	\$14.51
\$25,000	\$7,500	\$6.18	\$24.18
\$50,000	\$7,500	\$12.35	\$48.35

The monthly administrative fee is \$0.50. Employees can calculate the monthly premium by multiplying age by factor plus the admin fee (Age x Factor + Admin Fee = Monthly Premium Rate).

**Carrier Contact Information for Supplemental Life Insurance**

**Metropolitan Life Insurance (MetLife)**

Policy number 74503  
 MetLife Customer Service  
 Recordkeeping Center  
 P.O. Box 14402  
 Lexington, KY 40512-4402  
 Toll-Free: (800) 252-8524

[metlife.com/info/soc](http://metlife.com/info/soc)

**Employees can enroll, cancel or make changes to their life plan with the following steps:**

- Visit the MetLife website to complete the Supplemental Life Enrollment Form. Print and mail or fax the enrollment form.
- Contact Member Services at (800) 252-8524.
- Fax enrollment form to (859) 825-6719.
- Mail enrollment form to:

**MetLife Recordkeeping Center**

P.O. Box 14402  
 Lexington, KY 40512-4402

For more information about these benefits, visit the [CalHR Basic Group Term Life webpage](#) or [MetLife's website](#).

## Savings Plus

Savings Plus is a voluntary program offering a 401(k) and a 457(b) Plan, which allows employees to direct pre-tax and designated Roth payroll deductions to investments that will supplement their retirement benefits. This program is available to all permanent employees. Automatic payroll deductions from your paycheck are invested in your choice of funds from the Savings Plus investment lineup. Interactive tools are available to help you determine if you are on track to meet your projected retirement income needs.

For more information about this benefit, visit the [CalHR Savings Plus webpage](#) and the [Savings Plus website](#).

## Commute Programs

The Commute Programs provide bicycle, transit and vanpool incentives to all eligible state employees. The goal of the Commute Programs is to reduce the number of vehicles on the road by encouraging employees to explore and use alternate means of transportation to commute to and from work. Fewer vehicles on the road means an improvement in air quality and less traffic congestion.

For more information about these benefits, visit the [CalHR Commute Programs webpage](#).

## Third-Party Pre-Tax Parking Reimbursement Account Program

The Third-Party Pre-Tax Parking Reimbursement Account Program is a voluntary payroll deduction program that allows you to withhold funds from your paycheck on a pre-tax basis to pay for work-related parking expenses. This program is intended for state employees who do not have access to state-controlled parking spaces or a department-sponsored parking program. The funds withheld from your paycheck go into a special reimbursement account, and you can claim reimbursement from that account by submitting your parking receipts to the vendor. CalHR contracts with a third-party vendor, Application Software, Inc. (ASI), for record keeping and claims adjudication.

For more information about this benefit, visit the [CalHR Parking Reimbursement webpage](#) and the [ASI website](#).

## Retirement

CalPERS administers the employer-sponsored defined benefit plan for eligible state employees. CalPERS Provides retirement, disability, and survivor benefits established in CalPERS' law. The retirement benefit consists of a formula that includes the employee's age, years of service and salary. Employees are required to contribute a percentage of their gross monthly income towards the retirement benefit. The contribution is not subject to federal and state taxes.

For more information about retirement benefits, visit the [CalPERS website](#).

### Part-Time, Seasonal and Temporary (PST) Retirement Program

Employees who are not eligible for CalPERS retirement are required to participate in the PST Retirement Program administered by CalHR in lieu of Social Security. Employees enrolled in this program contribute 7.5% of their gross wages, on a pre-tax basis, to a retirement account that is available upon separation of employment.

For more information about this benefit, visit the [CalHR PST Program webpage](#) or the [Savings Plus Program website](#).

## Long-Term Care Program (LTC)

CalPERS LTC coverage helps participants pay for the cost of care when they need assistance with their daily living activities. For more information, contact CalPERS LTC at (800) 982-1775 or visit them online at [lhcpolicyhub.com/calpers](http://lhcpolicyhub.com/calpers).

**CalPERS has temporarily suspended enrollment for the LTC program due to current uncertainty in the long-term care market.**

For policyholder information, visit the [CalPERS LTC webpage](#).

## Common Carrier Travel and Accident Insurance (Excluded Employees Only)

CalHR provides employer-paid Common Carrier Travel and Accident Insurance for active state employees designated as manager, supervisor, confidential and other specified excluded employees. This \$150,000 accidental death and dismemberment insurance policy insures against job-related accidental death or dismemberment on commercial carriers licensed by the Public Utilities Commission.

For more information about these benefits, visit the [CalHR Travel Insurance webpage](#).

## Statewide Engagement Program

The Statewide Engagement Program is a benefit designed to holistically support the overall wellbeing of state employees. The program offers voluntary benefit services to active state employees, retirees and eligible dependents all year round through the following four programs:

### 1. Employee Engagement Program

In collaboration with our thought partners at Gallup, this program provides people leaders and individual contributors with resources to build a culture of engagement through Gallup's five elements of wellbeing. The employee engagement program also celebrates Public Service Recognition Week and the use of Californians Serving California virtual backgrounds. There is no charge to active state employees.

For more information about this benefit, visit the [Employee Engagement Program webpage](#).

### 2. Employee Assistance Program (EAP)

In partnership with Magellan Healthcare, the State of California offers active state employees and their eligible dependents valuable resources to support mental health and promote overall wellbeing. Whether facing challenging times or seeking advice for everyday issues, the EAP provides expert guidance at no cost to the employee. Enrollment is automatic, ensuring employees have seamless access to help when they need it most. Employees can get started by using the [EAP website](#) or calling 1-866-EAP-4SOC (1-866-327-4762) TTY: 711.

For more information about this benefit, visit [CalHR Employee Assistance Program webpage](#) or [EAP website](#).

### 3. Employee Wellness Program

Featuring our wellness platform Healthier U Connections, this program offers active state employees wellness and wellbeing resources that include statewide wellbeing challenges, healthy recipes, exercise and meditation videos, and much more at no cost to employees. Employees must register on the [Healthier U Connections website](#) to participate (registration code: StateofCA).

For more information about this benefit, visit the [CalHR Employee Wellness Program webpage](#).

### 4. Merit Award Program

Established by the California Legislature in 1950 as an incentive award system to recognize employee contributions to state government, the Merit Award Program partners with department Merit Award Administrators to deliver the following awards: Governor's State Employee Medal of Valor Award, Employee Suggestion Program, Superior Accomplishment Award, Sustained Superior Accomplishment Award, 25-Year Service Award, 25-Year Retirement Award and the Robert L. Negri Human Resources Achievement Award. There is no charge to state active or retired employees. Employees are encouraged to connect with their department personnel office or Merit Award Administrator to learn more about how their department participates in this program.

For more information about these benefits, visit the [CalHR Merit Award Program webpage](#).

## Benefit Program Contacts

Please contact your departmental personnel office for information on how to enroll in these benefits and to learn more about eligibility.

PLAN TYPE	PROVIDER	PHONE	WEBSITE
Health	CalPERS	(888) 225-7377	<a href="http://calpers.ca.gov">calpers.ca.gov</a>
Dental	Premier Access	(888) 534-3466	<a href="http://socdhmo.com">socdhmo.com</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/">https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/</a>
Dental	Western Dental	(866) 859-7525	<a href="http://westerdental.com/state-of-ca">westerdental.com/state-of-ca</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/">https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/</a>
Dental	DeltaCare USA	(800) 422-4234	<a href="http://deltadentalins.com/state">deltadentalins.com/state</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/">https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/</a>
Dental	MetLife	(800) 880-1800	<a href="http://metlife.com/safeguard/soc">metlife.com/safeguard/soc</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/">https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/</a>
Dental	Delta Dental	(800) 225-3368	<a href="http://deltadentalins.com/state">deltadentalins.com/state</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/">https://benefits.calhr.ca.gov/state-employees/general-benefits/dental/</a>
Vision	Vision Service Plan	(800) 400-4569	<a href="http://stateofcaemployee.vspforme.com">stateofcaemployee.vspforme.com</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/vision/">https://benefits.calhr.ca.gov/state-employees/general-benefits/vision/</a>
Consolidated Benefits (CoBen)	N/A	Contact your departmental personnel office	<a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/consolidated-benefits-coben/">https://benefits.calhr.ca.gov/state-employees/general-benefits/consolidated-benefits-coben/</a>
Cash Options	N/A	Contact your departmental personnel office	CoBen Cash Option: <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/cash-option-coben/">https://benefits.calhr.ca.gov/state-employees/general-benefits/cash-option-coben/</a> Non-CoBen Cash Option: <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/cash-option-non-coben/">https://benefits.calhr.ca.gov/state-employees/general-benefits/cash-option-non-coben/</a>
Reimbursement Accounts (FlexElect)	ASI	(800) 659-3035	<a href="http://asiflex.com/CA">asiflex.com/CA</a> <a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/flexelect-reimbursement-accounts/">https://benefits.calhr.ca.gov/state-employees/general-benefits/flexelect-reimbursement-accounts/</a>
Consolidated Omnibus Budget Reconciliation Act (COBRA)	N/A	Contact your departmental personnel office	<a href="https://benefits.calhr.ca.gov/state-employees/general-benefits/cobra/">https://benefits.calhr.ca.gov/state-employees/general-benefits/cobra/</a>

PLAN TYPE	PROVIDER	PHONE	WEBSITE
<b>Group Legal Services Insurance Plan</b>	ARAG	(866) 762-0972	<a href="https://benefits.calhr.ca.gov/state-employees/insurance/group-legal-services/">ARAGlegal.com/socinfo</a> <a href="https://benefits.calhr.ca.gov/state-employees/insurance/group-legal-services/">https://benefits.calhr.ca.gov/state-employees/insurance/group-legal-services/</a>
<b>Group Long-Term Disability Insurance (LTD)</b>	Standard Insurance	(888) 641-7193	<a href="https://benefits.calhr.ca.gov/state-employees/insurance/group-long-term-disability/">standard.com/mybenefits/california</a> <a href="https://benefits.calhr.ca.gov/state-employees/insurance/group-long-term-disability/">https://benefits.calhr.ca.gov/state-employees/insurance/group-long-term-disability/</a>
<b>Savings Plus</b>	Nationwide Retirement Solutions	(855) 616-4776	<a href="https://savingsplusnow.com">savingsplusnow.com</a> <a href="https://calhr.ca.gov/employees/Pages/savings-plus.aspx">calhr.ca.gov/employees/Pages/savings-plus.aspx</a>
<b>Commute Programs</b>	N/A	Contact your departmental personnel office	<a href="https://calhr.ca.gov/employees/Pages/Commute-Program.aspx">calhr.ca.gov/employees/Pages/Commute-Program.aspx</a>
<b>Third-Party Pre-Tax Parking Reimbursement Account Program</b>	ASI	(800) 659-3035	<a href="https://asiflex.com/CA">asiflex.com/CA</a> <a href="https://benefits.calhr.ca.gov/state-employees/work-resources/third-party-pre-tax-parking-reimbursement-account-program/">https://benefits.calhr.ca.gov/state-employees/work-resources/third-party-pre-tax-parking-reimbursement-account-program/</a>
<b>Retirement</b>	CalPERS	(888) 225-7377	<a href="https://calpers.ca.gov">calpers.ca.gov</a>
<b>Part-Time, Seasonal and Temporary (PST) Retirement Program</b>	Nationwide Retirement Solutions	(855) 616-4776	<a href="https://savingsplusnow.com">savingsplusnow.com</a> <a href="https://calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual-pst.aspx">calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual-pst.aspx</a>
<b>Long-Term Care Program (LTC)</b>	CalPERS	(800) 982-1775	<a href="https://ltcpolicyhub.com/calpers">ltcpolicyhub.com/calpers</a>
<b>Basic Group Term Life Insurance and Voluntary Supplemental Life Insurance</b>	MetLife Inc.	(800) 252-8524	<a href="https://metlife.com/soc">metlife.com/soc</a> <a href="https://benefits.calhr.ca.gov/state-employees/insurance/basic-group-term-life-insurance/">https://benefits.calhr.ca.gov/state-employees/insurance/basic-group-term-life-insurance/</a>
<b>Common Carrier Travel and Accident Insurance</b>	N/A	Contact your departmental personnel office	<a href="https://benefits.calhr.ca.gov/state-employees/insurance/common-carrier-travel-and-accident-insurance/">https://benefits.calhr.ca.gov/state-employees/insurance/common-carrier-travel-and-accident-insurance/</a>
<b>Employee Engagement Program</b>	N/A	Contact your departmental personnel office	<a href="https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-engagement/">https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-engagement/</a>
<b>Employee Assistance Program (EAP)</b>	Magellan Health Services	(866) 327-4762	<a href="https://eap.calhr.ca.gov">eap.calhr.ca.gov</a> <a href="https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-assistance-program/">https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-assistance-program/</a>
<b>Employee Wellness Program</b>	N/A	Contact your departmental personnel office	<a href="https://calhrwellness.com">calhrwellness.com</a> <a href="https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-wellness-program/">https://benefits.calhr.ca.gov/state-employees/engagement-resources/employee-wellness-program/</a>
<b>Merit Award Program</b>	N/A	Contact your departmental personnel office	<a href="https://benefits.calhr.ca.gov/state-employees/engagement-resources/merit-award-program/">https://benefits.calhr.ca.gov/state-employees/engagement-resources/merit-award-program/</a>

**GALLUP®**

**World Headquarters**

The Gallup Building  
901 F Street, NW  
Washington, D.C. 20004

**t** +1.877.242.5587

**f** +1.888.500.8282



**Benefits Division**

1515 S Street,  
North Building, Suite 500  
Sacramento, CA 95811

**t** (916) 909-2863

**f** (916) 322-3769