

Choose Employer: *State of Florida*



Access MyBenefits
Type and select your organization.

☐ Remember my selection
[Next](#)

Register:

State of Florida

[My Group Benefits](#) [Forms](#) [Customer Support](#)

State of Florida employee.



View your State of Florida benefits
Log in to view your policies
[Looking for a different Employer or association](#)
[LOGIN](#)
[REGISTER](#)
[Who can register?](#)

Complete Registration:

Already Registered?

 Personal Information

 Identity Verification

 Username & Password

Register to view your MetLife policies online

All fields required unless otherwise noted.

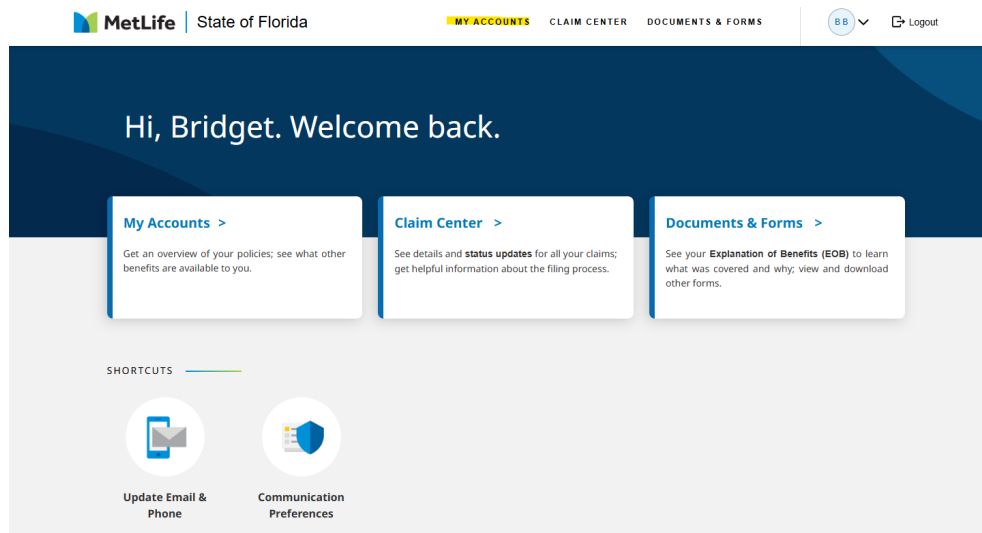
First Name is a required field.

Personal email is recommended.

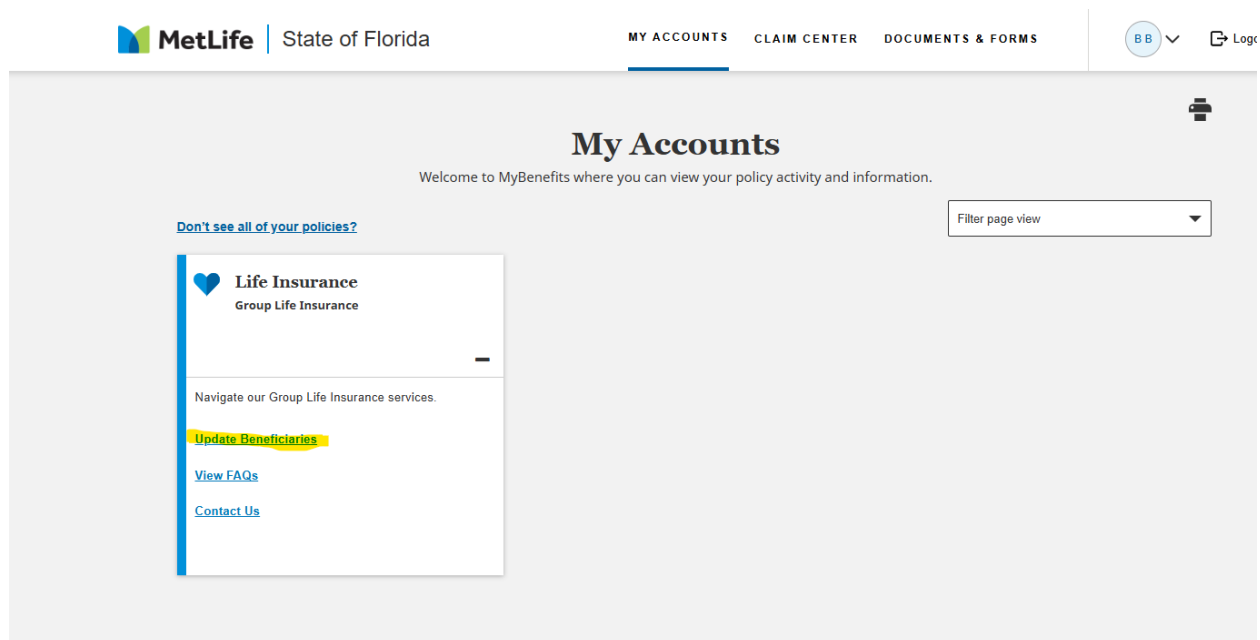
mm/dd/yyyy

State of Florida
Please enter the following information to identify as an associate of this organization.
☐ Verify with Social Security Number
☐ Verify with ID Number
[NEXT](#)

Choose: “My accounts”



Choose: “update beneficiaries”



Follow the prompts from there. If your beneficiaries are correct, you will still need to follow through to confirm them. Once completed it will show the previous beneficiaries and the updated beneficiaries. This allows you to update any beneficiary that may need to be added or removed.