



Office
of Group
Benefits



2027 Annual Enrollment Human Resources Training

A comprehensive operational guide for HR Liaisons on plan options, enrollment workflows, key-in deadlines, and administrative compliance.

Plan Year **2027** Coverage Year

Enrollment Window **Oct 1 - Nov 15, 2026**

Audience **State Agency HR Representatives**

Agenda & Key Training Pillars

1. Plan Year Updates

Overview of premium rate adjustments, Louisiana Blue plan changes, and member meeting formats (active & retirees).

2. Timelines & Deadlines

Critical dates for Annual Enrollment, LaGov HCM key-in cutoffs, and Non-LaGov eEnrollment schedules.

3. Enrollment Portals

Step-by-step guidance for LEO (LaGov) and the OGB Portal (Non-LaGov & retirees), including auto-renewal rules.

4. HR Responsibilities

Core duties, document submission rules to OGB.help@la.gov, and error prevention guidelines.

5. Health Life, Flex and Wellness Benefits

Health Plan options, Prudential Term Life EOI rules, Flexible Spending Account (FSA) deadlines, and HSA contribution rules.

6. Eligibility & Retirees

Dependent verification documents, QLE requirements, retiree state-share vesting schedule, and contacts.



PLAN YEAR CHANGES



Plan Year Changes & Member Meetings

+7.75%

Premium Rate Increase

Effective January 1, 2027 across all Pelican & Magnolia plans.

Member Meeting Formats

- ✓ **Active Employees:** Meetings are conducted exclusively Online/Virtual.
- ✓ **Retirees:** Dedicated In-Person regional informational sessions.
- ✓ Schedules & links are available on the main OGB website.

✓ Default Coverage Rule (No Action Required)

If active employees wish to remain in their current OGB health plan for 2027 with identical covered dependents, **no action is needed**—their health coverage carries over automatically. **Note: HSA & FSA elections NEVER roll over and MUST be re-elected annually.**



Active Employee & Rehired Retiree Meeting Schedule

ACTIVE EMPLOYEE & REHIRED RETIREE MEETING SCHEDULE



Annual Enrollment is October 1 - November 15

Join us at any of the meetings listed below to get details about your options. **There are two classroom-style presentations per day, each lasting about two hours.**

LSU First benefits will not be discussed at these meetings. Please contact LSU for information regarding LSU First annual enrollment meetings.

Interpreter for hearing-impaired members is available upon request submitted 48 hours in advance. Contact Customer Service at 1-800-272-8451.

DATE	LOCATION	START TIMES
Sept. 22	https://la-ogb.zoom.us/meeting/register/qNXrbDUmRxCzfwV9Cu1iA	9:00 AM
Sept. 22	https://la-ogb.zoom.us/meeting/register/rv1XnQoWQWebXSQASUCnHw	2:00 PM
Sept. 23	https://la-ogb.zoom.us/meeting/register/BoEv2w0PRniOWl7Dr8hfbA	9:00 AM
Sept. 23	https://la-ogb.zoom.us/meeting/register/SHvu-N2cTbm26b_DZExxCQ	2:00 PM



Retiree Meeting Schedules

NON-MEDICARE RETIREE MEETINGS SCHEDULE



Annual Enrollment is October 1 - November 15

Join us at any of the meetings listed below to get details about your options. **There are two classroom style presentations per day, each lasting about two hours.**

LSU First benefits will not be discussed at these meetings. Please contact LSU for information regarding LSU First annual enrollment meetings.

Interpreter for hearing-impaired members is available upon request submitted 1 week in advance. Contact Customer Service at 1-800-272-8451.

DATE	LOCATION	START TIMES
September 30	State Police Headquarters Auditorium (BLDG. A) 7901 Independence Blvd., Baton Rouge, LA 70806	9:00 AM or 2:00 PM
September 30	Alexandria Convention Center 2225 N MacArthur Dr., Alexandria, LA 71303	9:00 AM or 2:00 PM
October 13	University of New Orleans (University Center Ballroom) 2000 Lakeshore Drive, New Orleans, LA 70148	9:00 AM or 2:00 PM
October 13	West Monroe Convention Center 901 Ridge Avenue, West Monroe, LA 71291	9:00 AM or 2:00 PM
October 21	Southeastern Louisiana University Alumni Welcome Center 500 W University Ave, Hammond, LA 70401	9:00 AM or 2:00 PM
October 27	Houma - Terrebonne Civic Center 346 Civic Center Blvd., Houma, LA 70360	9:00 AM or 2:00 PM
October 27	Bossier City Civic Center 620 Benton Road, Bossier City, LA 71111	9:00 AM or 2:00 PM
November 3	Lake Charles Civic Center - Contraband Room 900 Lakeshore Drive, Lake Charles, LA 70602	9:00 AM or 2:00 PM
November 11	University of Louisiana-Lafayette Cecil J. Picard Center 200 East Devalcourt Street, Lafayette, LA 70506	9:00 AM or 2:00 PM

Visit ogb.la.gov or call 1-800-272-8451 for more information.

MEDICARE RETIREE MEETINGS SCHEDULE



Annual Enrollment is October 1 - November 15

Join us at any of the meetings listed below to get details about your options. **There are two classroom style presentations per day, each lasting about two hours.**

LSU First benefits will not be discussed at these meetings. Please contact LSU for information regarding LSU First annual enrollment meetings.

Interpreter for hearing-impaired members is available upon request submitted 1 week in advance. Contact Customer Service at 1-800-272-8451.

DATE	LOCATION	START TIMES
October 1	State Police Training Academy Auditorium (BLDG. A) 7901 Independence Blvd., Baton Rouge, LA 70806	9:00 AM or 2:00 PM
October 1	Alexandria Convention Center 2225 N MacArthur Dr., Alexandria, LA 71303	9:00 AM or 2:00 PM
October 14	University of New Orleans (University Center Ballroom) 2000 Lakeshore Drive, New Orleans, LA 70148	9:00 AM or 2:00 PM
October 14	West Monroe Convention Center 901 Ridge Avenue, West Monroe, LA 71291	9:00 AM or 2:00 PM
October 22	Southeastern Louisiana University Alumni Welcome Center 500 W University Ave, Hammond, LA 70401	9:00 AM or 2:00 PM
October 28	Houma - Terrebonne Civic Center 346 Civic Center Blvd., Houma, LA 70360	9:00 AM or 2:00 PM
October 28	Bossier City Civic Center 620 Benton Road, Bossier City, LA 71111	9:00 AM or 2:00 PM
November 4	Lake Charles Civic Center - Contraband Room 900 Lakeshore Drive, Lake Charles, LA 70602	9:00 AM or 2:00 PM
November 12	University of Louisiana-Lafayette Cecil J. Picard Center 200 East Devalcourt Street, Lafayette, LA 70506	9:00 AM or 2:00 PM

Visit ogb.la.gov or call 1-800-272-8451 for more information.



2027 Annual Enrollment Timeline & Deadlines

OCTOBER 1, 2026

Enrollment Opens

Annual Enrollment officially begins for all active employees and retirees.

NOVEMBER 15, 2026

Enrollment Closes

Final day for members to submit elections via LEO, OGB Portal, or HR.

NOVEMBER 22, 2026

LaGov HCM Key-In

Hard deadline for LaGov agencies to enter all AE changes into HCM.

JANUARY 1, 2027

Plan Year Effective

2027 benefit changes, deductions, and new coverage take effect.

Non-LaGov eEnrollment Action Type	Key-In Window	Effective Date
Coverage Increases (EE to EE+Spouse/Child/Family)	Nov. 15, 2026 - Dec. 14, 2026	January 1, 2027
Coverage Decreases / Cancellations (Family/Spouse to EE Only)	Dec. 1, 2026 - Dec. 31, 2026	January 1, 2027



How Members Enroll (LEO vs. OGB Portal)

LaGov Active Employees

Must enroll online via LEO (Louisiana Employees Online):

- 1 Log into LEO & select **My Benefits** tab
- 2 Click **Annual Enrollment** link
- 3 Make Health/Life elections & set FSA/HSA amounts

Rehired Retirees: Cannot use LEO. Must enroll directly through HR.

OGB Portal (ogb.la.gov)

Who uses this portal?

- ✓ Non-LaGov Active Employees & Retirees
- ✓ LaGov Retirees changing plans (with same covered dependents)

Portal Limitation: Cannot add/remove dependents via portal. Dependent changes require GB-01 submission to HR.



HR LIAISON'S RESPONSIBILITIES



HR Liaison Responsibilities & Document Rules

Core Liaison Duties

- ✓ **Communicate:** Distribute OGB enrollment rules and eligibility guidelines.
- ✓ **Support:** Assist employees with benefit plan options and portal navigation.
- ✓ **Process:** Enter changes into eEnrollment or LaGov HCM Benefits Module.
- ✓ **Update:** Collect GB-01 forms for dependent additions/drops.

Strict Document Submission Rules

- ⚠ **Single PDF Rule:** Never bundle multiple members in one PDF document.
- ⚠ **No Alterations:** Altered or whited-out forms will be rejected.
- ⚠ **Key-In First:** Enter into eEnrollment/LaGov *before* sending to OGB.
- ⚠ **Retirement Window:** Submit retirement docs within **60 days** of date.

 **Doc Submissions Only:** OGB.help@la.gov

 **Inquiries/Helpdesk:** eEnrollment.Helpdesk@la.gov | **1-844-860-0307**



2027 OGB HEALTH & MEDICARE OPTIONS



Benefit Plans



Active & Non-Medicare Retirees

5 Self-Insured Plans

Pelican HRA1000	Low premium, employer funded HRA account
Pelican HSA775	Active EEs only; paired with HSA account
Magnolia Local Plus	Nationwide network; quality care focus
Magnolia Open Access	Out-of-network coverage options included
Magnolia Local	Limited local provider network option*

**Please check residential requirement for eligibility*



Benefit Plans

Medicare Retiree Options

Medicare Advantage Plans:

Blue adVantage

Humana

Peoples Health

Via Benefits

OGB Secondary Self-Insured Plans:

- ✓ Pelican HRA1000
- ✓ Magnolia Local / Local Plus / Open Access



HSA ACCOUNTS & DEDUCTIONS



HSA Contribution Guidelines & Limits



2027 IRS HSA Contribution Limits

EMPLOYEE-ONLY COVERAGE

\$4,500

FAMILY COVERAGE

\$9,000

ADDITIONAL CATCH-UP (AGE 55+)

+\$1,000



Contribution Rules & Funding Methods

- ✓ **Flexible Payment Options:** You can contribute through payroll deductions or personal direct payments – both count toward your overall IRS annual limit.
- ✓ **Plan Eligibility:** HSA contributions are restricted strictly to active participants enrolled in the **Pelican HSA775** health plan.



Compliance, Excess & Medicare Rules

- ⚠ **Over-Contribution Liability:** Contributions over the IRS allowed limit will be flagged on the **Enrollee Monitoring Report (EMR)**. Your employing agency is responsible for reimbursing excess funds.
- ⊘ **Medicare Rule:** Once eligible for Medicare, you can **no longer contribute** to an HSA, even if you remain actively employed.

i Key Takeaway: Monitor all payroll deductions and personal deposits closely to avoid exceeding IRS contribution caps.



Health Savings Account (HSA) Enrollment Workflow

Current HSA participants **MUST** re-enroll every year

DO NOT send paper forms to HealthEquity

Agency **MUST** request account promptly to avoid effective date delays

1 Enrollment Options

NON-LAGOV AGENCIES

Enroll online or complete form **GB-79** and enter the information into **eEnrollment**.

LAGOV AGENCIES

Enroll in **LEO** or complete form **GB-79** and enter the information into the **HCM Benefits Module**.

2 Open the HSA Account

Email monthly contribution information directly to:
HealthSavingsAccounts@la.gov

OGB will submit contributions to HealthEquity after the account is established.

Once established, employee names will appear in the "HSA Opened Accounts" folder under "Miscellaneous Documents".

3 Enter Payroll Deductions

NON-LAGOV: Enter monthly deductions in eEnrollment after HealthEquity opens the account.

LAGOV: Enter monthly deductions into HCM Benefits Module after account is open.

Members may adjust monthly contribution amounts anytime if desired.

⚠ Agency Responsibility: It is the agency's responsibility to request the account. Unrequested accounts will lead to delayed effective dates.



HSA Billing Info: Sending Funds to HealthEquity



Prerequisites to Process HSA Contributions

- **Funds & Worksheet Submission:** The agency must send funds along with the official HSA contribution worksheet to **OGB**.
- **Active eEnrollment Amount:** Member must have an active eEnrollment contribution amount recorded (Submit **GB-79 Enrollment/Change Form** if required).
- **Account Status:** The employee's HSA account **MUST** be open with HealthEquity before processing.



Strict Transfer Deadline Requirement



30-Day Mandatory Transfer Window

OGB is required by policy to transfer received contribution funds to **HealthEquity** within **30 days** of receiving them.

- ✓ Ensuring all 3 prerequisites are met prior to sending funds guarantees compliance within this 30-day window.



Account Opening Inquiries
HealthSavingsAccounts@la.gov



Deductions, Billing & EMR Support
OFSS-OGB.Invoicing@la.gov



Summary: Always confirm account opening and active enrollment before transferring contribution funds.



OTHER BENEFIT OFFERINGS

COBRA, Term Life Insurance, Flexible Benefits, Wellness & Disease Management



COBRA & FSA COBRA Overview



When is a GB-01 Form Required?

Required to determine COBRA eligibility following Qualified Life Events (QLE):

For Covered Employee:

- Employment ends (excluding gross misconduct)
- Work hours are reduced

For Spouse or Dependent Child:

- Employee's job ends or work hours are reduced
- Employee becomes eligible for Medicare
- Divorce, legal separation, or annulment
- Death of the employee
- Child loses dependent status under OGB rules



FSA COBRA Guidelines

✓ Eligibility Requirements:

- Enrolled in GPFSA or LPFSA
- Claims do not exceed total contributions made
- Agrees to continue contributions (+ admin fee) through plan year end

i If FSA COBRA is Not Accepted:

- Must submit claims by end of run-out period for expenses incurred while actively enrolled

Example Timeline:

- Coverage Period: 02/15/2027 - 06/15/2027
- Reimbursement applies only to expenses incurred 02/15-06/15
- Claims Deadline: April 30, 2027



Questions? cobra@la.gov



TERM LIFE INSURANCE



TERM Life Insurance

Coverage Plan Options & Schedule

Plan Name	Employee Coverage	Option 1 (Spouse / Child)	Option 2 (Spouse / Child)
Basic Life	\$5,000	\$1,000 / \$500	\$2,000 / \$1,000
Enhanced Basic	\$15,000	\$1,000 / \$500	\$2,000 / \$1,000
Basic Plus Supplemental	Schedule to max of \$50,000*	\$2,000 / \$1,000	\$4,000 / \$2,000



Special Provision: School Boards & Commission Members

- Maximum face value for supplemental life policy is \$20,000.
- Salary entries must match scheduled policy face values (e.g., \$15,000 policy requires \$8,666.66 salary entry; \$20,000 policy requires \$11,333.34 salary entry).



TERM LIFE INSURANCE

Evidence of Insurability (EOI) Rules

Enrollment Timelines & Rules

- ✓ **New Hires (30-Day Window):** No EOI required if enrolled within 30 days of employment start date.
- ⚠ **Late Enrollment:** Must wait for Annual Enrollment and submit EOI for Prudential approval.
- 👤+ **Coverage Changes:** Adding spouse coverage or increasing existing coverage requires EOI.
- 👤 **Dependent Children:** Can be added at any time without EOI.
- 📅 **Effective Dates:** Annual changes take effect Jan 1st (or 1st of month following EOI approval).

Online Application Process

HR provides members with a link to the **EOI Short Form** or a dedicated QR code.

Required Application Data:

- ✓ Full name of applicant
- ✓ Proof of Good Health answers (member & spouse)
- ✓ Social Security Numbers for member & spouse

 Access online portal via QR code or official Prudential link provided by HR.



TERM Life Insurance

⚠ Policy Rules: Age & Life Events



Age 65 Reduction

25% Automatic Reduction

Effective **January 1st** following the plan member's 65th birthday. Premium rates adjust to reflect reduced coverage.



Age 70 Reduction

Additional 25% 50% Total Reduction

An additional 25% automatic reduction takes effect **January 1st** following the 70th birthday.



Divorce Rules (QLE C-2)

Ineligible Immediately Upon Divorce

Must drop coverage for ex-spouse & step-children within **30 days** of divorce decree or during Annual Enrollment.

⊘ **Dependent life claims WILL NOT be paid for ex-spouses or step-children.**



TERM Life Insurance

Agency Responsibilities & Contacts

Agency Operational Duties

- ✔ Maintain life records & beneficiary designations for active/retired employees.
- ✔ Verify premium payments and complete annual Salary Attestation Reports.
- ✔ Distribute EOI Short Form links/QR codes & submit Long Forms to Prudential when required.
- ✔ Complete and process Group Life claim forms promptly.

Prudential Contact Directory

 EOI Form Submissions
medical.uw@prudential.com

 EOI Fax Line **877-605-6671**

 Group Life Claims Processing
grouplifeclaims@prudential.com



FLEXIBLE BENEFITS



FSA Options & Enrollment Windows

Available FSA Plans

No OGB health plan enrollment required to participate.

- ✓ **General-Purpose FSA (GPFSA):** Covers eligible medical, dental, and vision expenses.
- ✓ **Limited-Purpose FSA (LPFSA):** Restricted to dental and vision; strictly for HSA participants.
- ✓ **Dependent Care FSA (DCFSA):** For eligible child or adult care services.
- ✓ **Premium Conversion:** Enables pre-tax deduction of health insurance premiums.

When to Enroll

- ✓ **Annual Enrollment:** October 1 - November 15 each plan year.
- ✓ **New Hires & Newly Eligible:** Must enroll upon hire or eligible status change.
- ✓ **Qualifying Life Events (QLE):** Submit paperwork within **30 days** of the event.

Key Rule - Premium Conversion:

Automatically enrolled and auto-renews annually unless explicitly opted out during Annual Enrollment or a QLE.



Dependent Care FSA

Dependent Care FSA (DCFSA) Guidelines

Eligible Expenses

Child care for dependents **under age 13**, or care for an older dependent/spouse incapable of self-care while you work.

Contribution & Renewal Rules

- ✓ **Minimum:** \$600/year across all accounts.
- ✓ **Reimbursement Limit:** Capped at current account balance.
- ✓ **Annual Action:** Must re-enroll every year; requires IRS Form 2441 at tax time.

IRS Maximum Annual Contribution Limits for DCFSA

Tax Filing Status	Maximum Annual Amount	Eligible Dependents
Single / Married Filing Separately	\$2,500	Child under age 13; or dependent incapable of self-care
Single Head of Household	\$5,000	Child under age 13; or dependent incapable of self-care
Married Filing Jointly	\$5,000	Child under age 13; or dependent/spouse incapable of self-care



FSA Enrollment Process & GB-02 Requirements

How to Submit Enrollment

LaGov Employees:

Re-enroll online via LEO Enrollment Application, or submit a signed GB-02 form through HR.

Non-LaGov Employees:

Re-enroll via OGB Annual Enrollment Portal, or submit a signed GB-02 form through HR.

GB-02 Form Mandatory Rules

- ✓ **Dual Signatures:** Must be signed and dated by both the employee and agency representative.
- ✓ **Correct Plan Year:** Ensure usage of valid plan year form (e.g., 2027 GB-02).
- ✓ **Transfers:** Inter-agency forms must be emailed to:
FlexibleSpendingAccounts@la.gov
- ✓ **Minimum Contribution:** Minimum \$600/year required across all FSA elections.



Using Your FSA & TASC Card

TASC Claim Card Rules

- ✓ **Debit Usage:** Use like a debit card for eligible medical expenses. *Always keep itemized receipts.*
- ✓ **New Enrollees:** Mailed in a plain white envelope—do not discard as junk mail.
- ✓ **Re-Enrollees:** Continue using your existing card until the expiration date printed on the front.
- ✓ **Deactivation Trigger:** Card deactivates on employment separation, loss of eligibility, or failure to re-enroll.

Account Access & Support

Online Portal:

Log in at tasconline.com to check balances, review transactions, and upload receipts.

Phone Support: 1.844.237.9222

- **24/7 IVR System:** Automated info (requires 12-digit Participant ID).
- **Live Customer Support:** Mon-Fri, 8:00 AM - 5:00 PM (Local Time).



Inter-Agency Employee Transfers Workflow

Applies when employees move between separate payroll systems (LaGov <> Non-LaGov) to prevent double deduction of contributions.

STEP 1

Election Amount

Confirm employee's total annual FSA election for current plan year.

STEP 2

Final Pay Stub

Request final pay stub from former agency showing YTD contributions.

STEP 3

Calculate Balance

Subtract YTD Paid from Total Election = **Remaining Balance**.

STEP 4

Submit GB-02

Email GB-02 with remaining balance to OGB FSA team.

STEP 5

TASC Setup

TASC executes work order, transfers balance, and mails new card.

⚠ Critical Administrative Rules:

- **Exemptions:** Internal transfers within LaGov-to-LaGov and LCTCS system do NOT require these steps.
- **Re-hires:** Returning employees within 13 weeks (26 weeks for institutions) must follow this workflow and *cannot increase* their election.
- **Card Gap:** Employees with early-month appointments may pay out-of-pocket temporarily and submit manual claim upon receiving new card.



Agency Reporting & Payment Checklist

NON-LAGOV AGENCIES

1. Email Reporting

Send payment breakdowns after each pay period to:

FlexibleSpendingAccounts@la.gov
DepositGroup@la.gov

Mandatory Breakdown Included:

- Medical FSA
- Limited FSA
- Dependent Care FSA
- Admin Fees

2. Mailing Checks

Send physical checks directly to:

Office of Group Benefits
Attn: FSA
P.O. Box 66678
Baton Rouge, LA 70896

3. Vendor SFTP Portal

Agency designated contact must:

1. Log in to SFTP portal.
2. Use standard vendor template.
3. Upload contribution spreadsheet after each pay period.

Manual uploads allowed only if confirmed prior to due date.



FSA UNSUBSTANTIATED CLAIMS: PROCESS & TIMELINE



What HR Needs to Know

When employees use TASC FSA cards without submitting required itemized receipts, claims become **unsubstantiated**.

TASC issues automated reminders at **30-60, 90-120, 160-180, and 180 days** via mail/email.



2026 Plan Year Key Dates

December 31, 2026 — Plan Year Ends

Last day of standard period to incur 2026 FSA expenses.

March 15, 2027 — Grace Period Ends

Extra time to incur new expenses using 2026 funds. Unused funds forfeited after this date.

April 30, 2027 — Final Run-Out Deadline

Absolute cutoff to submit and verify all receipts for 2026 claims with TASC.



Strict April 30 Run-Out Cutoff

All receipts and substantiations must be fully processed and approved by **April 30**. On **May 1**, unverified claims move to the official Unsubstantiated List. **Neither TASC nor OGB can review or remove claims after April 30.**



FSA UNSUBSTANTIATED CLAIMS: HR CHECKLIST & EMPLOYEE GUIDANCE

1. Email Accuracy

Ensure employees update their personal email in **LEO** (LaGov) or via **HR** (non-LaGov). Personal emails are pushed to TASC for portal access and deadline alerts.

2. Portal Inspection

Advise employees to log into **tasconline.com** or the **TASC Mobile App** regularly and check spam/junk folders for pending substantiation notices.

3. Verification Responsibility

Remind employees that it is **their sole responsibility** to confirm uploaded receipts were received, approved, and cleared by TASC prior to April 30.



WELLNESS & DISEASE MANAGEMENT



OGB Wellness & Disease Management

Part 1: Preventive Care & Wellness Incentives

Your Health Matters to Us

The Office of Group Benefits (OGB) is committed to supporting your long-term well-being with proactive health initiatives, zero-cost preventive care, and valuable member savings.



Live Better Louisiana

Wellness Credit Eligible

- **Proactive Care:** Simple 1-step annual process to prevent illness and catch health risks early.
- **Free Screenings:** On-site OGB clinics check cholesterol, glucose, and liver function.
- **Personalized Plan:** Receive tailored health goals and specialist referrals directly after screening.



Access2Day Health

\$0 Out-of-Pocket

- **Walk-in Clinic Access:** Immediate primary & urgent care with zero copays or appointments.
- **VIP Priority:** OGB members present their card for front-of-line priority medical service.
- **Full Services:** Covers acute care, minor injuries, routine physicals, and full lab diagnostics.



Blue365 Discounts

%Lifestyle Member Savings

- **Gym Memberships:** Access 11,000+ national fitness centers starting at just \$19/month.
- **Wearable Tech:** Save up to 20% on Fitbit & Garmin smartwatches and activity trackers.
- **Health & Wellness:** Year-round discounts on healthy meal delivery, LASIK, and fitness gear.



OGB Wellness & Disease Management

Part 2: Chronic Disease Support & Targeted Care



Louisiana Blue Care Management

Dedicated Nurse Coaching

Tailored support for members managing ongoing or complex health conditions:

- **Covered Conditions:** Diabetes, Heart Disease (CAD/CHF), Asthma, and COPD.
- **Specialized Case Support:** Extra help for rare conditions, high-risk pregnancy, cancer, and organ transplants.
- **Prescription Savings:** Eligible generic drugs at \$0 and name-brand medications capped at \$20-\$50.
- **Proven Results:** Participants are **65% less likely** to require hospital admission.



Omada Diabetes Prevention

16-Week Online Lifestyle Program

Targeted intervention for members diagnosed with prediabetes or at high risk for Type 2 Diabetes:

- **Personal Health Coach:** Professional 1-on-1 guidance to build long-term healthy habits.
- **Connected Tools:** Members receive a free cellular smart scale that syncs directly with their profile.
- **Peer Group Support:** Interactive small-group format for encouragement and shared progress.
- **Flexible & Digital:** Available online anytime for active OGB plan participants.



100% OGB Supported

Included with eligible Pelican & Magnolia plans



Direct Access

Call 1-800-363-9159 to enroll in Care Management



Better Health Outcomes

Lower out-of-pocket costs and improved daily care



ELIGIBILITY



Dependent Verification Rules & Documentation

Dependent Category	Max Attainment Age	Mandatory Verification Documents Required
Natural / Adopted / Stepchild	Age 26	Birth Certificate / Birth Letter + Marriage Cert (for stepchildren)
Legal Custody / Guardianship Child	Age 18	Court-ordered custody decree (granted prior to age 18) + Birth Cert
Grandchild (Legal Custody)	Age 26	Court custody decree granted prior to 18 + Birth Cert (must reside with EE)

Newborn Addition Workflow

Submit GB-01 and Birth Letter to HR within **30 days of birth**. HR must follow up to collect Social Security card within **6 months**.

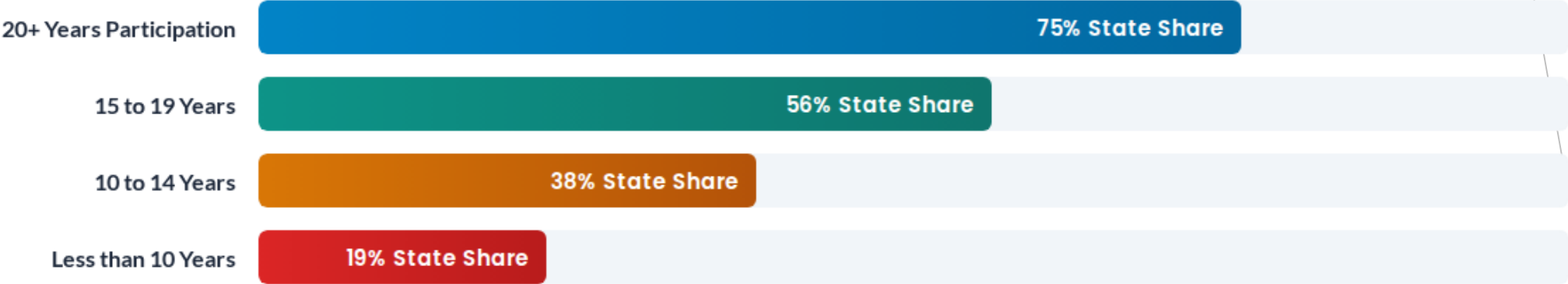
30-Day Rule Notice

If documentation is missed within 30 days of a Qualified Life Event, the dependent cannot be added until the next Annual Enrollment.



Future Retirees - OGB Health Plan Participation

For state service starting on or after Jan 1, 2002, the State's monthly health premium contribution is determined by total years of **OGB Plan Participation**:



Pre-Retirement Checklist: Employees should request an official OGB Participation Summary 4 months prior to retirement and establish post-retirement premium payment arrangements 3 months prior.



Plan-recognized Qualified Life Events

The Office of Group Benefits (OGB) provides a comprehensive chart detailing when plan changes are permitted outside of standard annual enrollment.



Agency Access

Agencies can access the official QLE chart directly through the OGB secure website.



Frequently Accessed Materials



CONTACT INFORMATION



OGB Contact Quick Guide

General Support & Portals

HR Help Desk

 1-844-860-0307  eEnrollment.helpdesk@la.gov

Customer Service

 1-800-272-8451 (Opt. 6)  OGB.CustomerService@la.gov

Document Submissions

 OGB.help@la.gov

Official Website & Portal

 ogb.la.gov

Specialized Contacts (HR Reps Only)

Billing, Invoicing & HSA Deductions

 OFSS-OGB.Invoicing@la.gov

FSA (Flexible Spending Accounts)

 FlexibleSpendingAccounts@la.gov

COBRA Administration

 cobra@la.gov

HSA Eligibility Questions

 HealthSavingsAccounts@la.gov

Term Life Insurance

 PrudentialLifelns@la.gov

 **HR Representative Policy:** Specialized email addresses listed above are strictly for agency HR reps. Do not forward or provide these emails directly to general employees.



Vendor Contact Information

Louisiana Blue

Medical / Health

📞 1-800-392-4089

🌐 www.lablue.com/ogb

Peoples Health

Medicare Advantage

📞 1-866-912-8304

🌐 peopleshealth.com

Liviniti

Prescription Coverage

📞 1-833-925-2770

🌐 microsite.liviniti.com

SilverScript

Prescription PDP

📞 1-888-996-0104

🌐 caremark.com

Blue Advantage

Medicare Advantage

📞 1-866-508-7145

🌐 blueadvantage.louisianablue.com

TASC

FSA Administrator

📞 1-844-237-9222

🌐 tasconline.com

Humana

Medicare Advantage

📞 1-877-889-9885

🌐 humana.com

Via Benefits

Retiree Exchange

📞 1-855-663-4228

🌐 my.viabenefits.com/ogb

HealthEquity

HSA Provider

📞 1-866-346-5800

🌐 theequity.com





**Office
of Group
Benefits**



Questions?



**Office
of Group
Benefits**



Appendix

Term Life Insurance Forms

Enrollment & Insurability

Prudential Beneficiary Designation

PRIMARY PDF

Designate or update primary and contingent beneficiaries for life coverage.

Evidence of Insurability (EOI) Short Form

ONLINE / QR

Expedited digital medical underwriting application for fast mobile submission.

Evidence of Insurability (EOI) Standard

STANDARD PDF

Full health questionnaire required when requesting coverage over guarantee limits.

Claims & Payout Statements

Group Life Claim Form (Beneficiaries)

CLAIM FILING

Official claim form completed by named beneficiaries to initiate death benefit payout.

Preferential Beneficiary's Statement

SPECIAL CASE

Utilized when no specific beneficiary designation is recorded on file.

Online Prudential Portal

DIRECT LINK

Access fast digital submission directly via gi.prudential.com.



Term Life Insurance Forms

Form Guidance & Submission Rules



Beneficiary Designation

- Ensure total beneficiary allocation percentages equal exactly 100%.
- Specify both Primary and Contingent beneficiaries clearly.
- Update form promptly following major life events (marriage, birth, divorce).



Evidence of Insurability

- Required when applying for coverage above guaranteed issue amounts.
- Use the QR Code short form for fast mobile medical underwriting.
- Complete all medical questions accurately to prevent processing delays.



Claim Submission

- Beneficiaries must attach a certified copy of the death certificate.
- Submit completed forms to your Agency Benefit Header or OGB.
- Use Preferential Statement if no active designation exists on file.

OFFICE OF GROUP BENEFITS (OGB) SUPPORT

For assistance with policy questions or form verification



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