



2015 Retiree Benefits

How much will my insurance cost when I retire?

The amount of your premium depends on the number of years you've had insurance coverage. If you were enrolled with OGB (formally known as the State Employees Group Benefits Program) prior to November 14, 2001, then you are vested with OGB and your premium will be subsidized 75% by the State. If you were not vested by this time, then the percentage of State Subsidy is reduced depending on the number of years you carried health insurance prior to retirement.

<u>Years of Participation</u>	<u>Percentage State Pays</u>
10 or fewer	State pays 19% of total premium
>10, but < 15	State pays 38% of total premium
>15, but < 20	State pays 56% of total premium
20 or more	State pays 75% of total premium

When you retire you may keep the health insurance through OGB. As a courtesy to the retiree, TRSL and LSERS will deduct your Health & State offered Life Insurance from your retirement check; however, it takes several months for this to occur. In the meantime, you will pay LPPS until you see the insurance deduction from your retirement check.

Effective July 2014

Office of Group Benefits Vested Retiree Rates

<u>Magnolia Open Access</u> Blue Cross Blue Shield			
	NO MEDICARE	1 MEDICARE	2 MEDICARE
SINGLE	163.32	98.82	N/A
W/SPOUSE	530.54	365.15	177.63
+1 or CHILDREN	235.08	171.07	N/A
FAMILY	534.04	486.51	219.95
PHONE: (800) 392-4089		http://www.bcbsla.com/ogb	

<u>Magnolia Local Plus</u> Blue Cross Blue Shield			
	NO MEDICARE	1 MEDICARE	2MEDICARE
SINGLE	157.10	97.02	N/A
W/SPOUSE	510.26	354.60	173.91
+1 or CHILDREN	226.10	166.90	N/A
FAMILY	515.34	471.98	215.33
PHONE: (800) 392-4089		http://www.bcbsla.com/ogb	

<u>Magnolia Local</u> Blue Cross Blue Shield			
	NO MEDICARE	1 MEDICARE	2MEDICARE
SINGLE	138.98	84.09	N/A
W/SPOUSE	451.46	310.70	151.16
+1 or CHILDREN	200.02	145.56	N/A
FAMILY	454.42	413.99	187.16
PHONE: (800) 392-4089		http://www.bcbsla.com/ogb	

<u>Pelican HRA 1000</u> Blue Cross Blue Shield			
	NO MEDICARE	1 MEDICARE	2MEDICARE
SINGLE	102.46	62.00	N/A
W/SPOUSE	332.80	229.04	111.43
+1 or CHILDREN	147.54	107.33	N/A
FAMILY	334.96	305.16	137.97
PHONE: (800) 392-4089		http://www.bcbsla.com/ogb	

Employee Owes:

Health: _____

Life: _____

Total: _____

First Financial Group of America administers the following:

AMERICAN FIDELITY Cancer, Long Term Disability, Long Term Care	800-323-3748 8006-662-1113
AMERICAN HERITAGE/ALLSTATE Group Cancer, Critical Illness & Heart/ Stroke	800-521-3535 800-348-4489
AMERICAN UNITED LIFE (AUL) Annuity	800-249-6269
AMERITAS Dental & Vision	800-487-5553
FIRST FINANCIAL	866-541-5096 Fax: 985-893-7663
FLEX Medical/Dependent	800-523-8422
FTJ Fund Choice Annuity	800-379-2513
KMG -Short Term Disability, Critical Life-Term	877-378-1505
LINCOLN	800-254-6265
LSW-457 Deferred Comp	800-579-2878
TEXAS LIFE —Life	800-283-9233

If you have any of the above listed benefits, please contact each vendor to notify them of your retirement date. Keep in mind, after retirement you will no longer receive a paycheck from LPPS so your premiums will not be paid. You will need to make arrangements with each vendor if you choose to continue coverage on any of the above listed plans after retirement.

<https://www.empben.com/FirstFinancial/livingstonpsd/index.html>

Important Information for Retirees

- The Office of Group Benefits (OGB) Annual Open Enrollment for Health Insurance occurs in October. As a Retiree, it is your responsibility to attend the Open Enrollment meeting to keep up with changes to your health insurance. Changes to your insurance carrier can only be made during Open Enrollment. OGB will notify Retirees through the mail regarding the date, time and location of the Annual Open Enrollment meeting.
- Please notify this office in writing of any change of address.
- Please include Employee # and Social Security # on all correspondence. My Employee # is: _____
- If you are eligible for Medicare, this office must receive a copy of your Medicare Card. We will send a copy to OGB. OGB will not reduce your insurance premium until they receive a copy of your Medicare Card.
- You MUST have insurance in place prior to retiring or you will NOT be eligible for benefits through OGB.

When do I start paying LPPS for my insurance?

Insurance premiums are deducted from your paycheck in advance. For example, January 25th paycheck pays for February Insurance Premium. Refer to the chart below.

Insurance Premium deducted from:	Pays for:
January Paycheck	February Premium

February Paycheck	March Premium
March Paycheck	April Premium
April Paycheck	May Premium
May Paycheck	June Premium
June Paycheck	July Premium
July Paycheck	August Premium
August Paycheck	September Premium
September Paycheck	October Premium
October Paycheck	November Premium
November Paycheck	December Premium
December Paycheck	January Premium

My Retirement Date is:_____. _____is the last month insurance was deducted from my payroll check. This deduction pays for insurance coverage through _____, so I will begin sending payments to LPPS in _____, to pay for my insurance coverage and will continue to do so every month until I see the deduction for insurance coverage on my Retirement check. You will need to contact Amanda Glascock when you see your deduction taken from your Retirement check.

Send Payment to:

LPPS, P.O. Box 1130, Livingston, LA 70754

Attention: Amanda Glascock, Insurance Clerk

Please note: Payment for insurance coverage must be received by the 10th of the month.

Phone: 225-686-4230

Fax: 225-686-4363

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