



# Online Group Administration (OGA) Portal User Guide

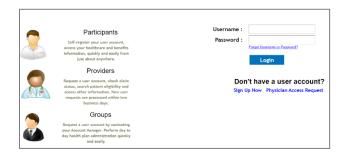
Plan administrators for the Hawaii Electricians Health & Welfare Fund medical plan may access member ID cards and manage enrollments and eligibility information securely through HWMG's client online portal. Visit https://hawaiielectricians.javelinaweb.com and login to your account from a web browser using a computer or mobile device, or follow the steps below to register as a new user. You may also visit hwmg.org/employers for instructions.

### **User Account Registration**

- 1. Complete an OGA Portal Registration Form and send it to OGAhelpdesk@hwmg.org. A separate form is required for each user.
- 2. HWMG's Billing Department will set up your account and provide instructions. First-time users should expect to receive this information within 5 business days from billingdept@hwmg.org via our SonicWall Secure Message Center. Once your account is created, your username cannot be modified.

## **User Account Login**

- Login at https://hawaiielectricians.javelinaweb.com using your username and password (case-sensitive) provided by billingdept@hwmg.org.
- 2. Upon your initial login, you will be required to choose a new password that meets the password requirements.
- 3. Select a security question and type in your answer (case-sensitive), then *Submit*. You must answer this question to verify your identity should you need to change or reset your password in the future. Enter your first and last name as your electronic signature.
- 4. Once logged into your account, you may access the following features:
  - Dashboard and resources
  - Member ID cards
  - View member eligibility and coverage
  - Enrollments\*
  - Terminations\*
  - Change member information\*
  - Employee group/division transfers\*
  - \* This feature is only accessible to select users.
- 5. When you are done, for security purposes be sure to log out of your account before closing your browser.



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Indicates Mandatory F	fields / Sections			
User ID :	oga-jtest1			
First Name * :	JILL			
Middle Name :				
Last Name * :	TEST			
Suffix :				
SUTTX :				
Password * :				
Password * :	Password Guideline			
Password * :	<ul> <li>Password sho</li> <li>Password sho</li> <li>Password sho</li> </ul>	uid have a minimum uid be less than or e uid have a minimum	of 9 characters qual to 32 characters of 1 characters in upper of 1 numbers or special	
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1. Select *Preferences* located at the top right of the screen to view your user information such as name, security question, and email address.

Preferences Print Logout
User: oga-jtest1 | Logged in at : 3:48:14 PM HST

- 2. To update your password, select *Change Password* and enter your new password, then click *Save*.
- 3. To update your name and email address, you will need to submit an OGA Portal Registration Form.

#### Forgot Username or Reset Password

- 1. Click Forgot Username or Password?
  - To reset your password, enter the username and email address associated with your account and *Continue* to receive Password Reset instructions via email from noreply@javelinaweb.com. You will be required to enter your security answer (case-sensitive) in order to change your password. Your new password cannot match your last 5 passwords.

Username :	
Password :	
	Forgot Username or Password?
	Login

- If you forgot your username, select *Click here if you forgot your username*. Enter the email address associated with your account and select *Next Step* to receive your username via email from noreply@javelinaweb.com.
- After three failed attempts to login to your user account, the system will temporarily disable your account and display a message that it has been locked. You will need to contact OGAhelpdesk@hwmg.org or your Account Manager to unlock your account. We highly recommend that you **reset your password beforehand** to prevent your account from being locked.

#### **Dashboard and Resources**

- 1. Upon login, your *Group Dashboard* will appear from the *Home* tab, where you will see a section for Latest News & Messages.
- 2. Select the *Resources* tab to view the Latest News & Messages, Member ID Cards, Helpful Links, Documents and Forms, and HWMG's Contact Information. If your account manages multiple locations/divisions, choose which affiliated location/division you want to view information for. To deselect your affiliation, click *Change Affiliation* or *Resume Own Role*.

### **Member ID Cards**

- 1. Select the *Resources* tab to view, print, or request an ID card for a member. If you manage multiple locations/divisions, you will need to select which affiliated location/division to view information for. To deselect your affiliation, click *Change Affiliation* or *Resume Own Role*.
- Select the search icon 
   to choose which member's ID card you want to request or view/print. Enter the member's ID number, name, and/or date of birth, then click Search.
  - If the member is found in our records, it will appear in the Search Results.
  - If the system cannot locate the member, you will need to contact HWMG for assistance.
- 3. Once you select the member from the search results, the portal will return to the Requests section for ID cards. Select the member from the drop-down field and click to request a card or view/print.

Home Enrollmo Home > Resources Resources	ent Member Resources							
Resources								
Affiliation Type :	Client Change Affligation							
News & Me	ssages							
Requests								
	View, Print, Request A New or Replacement	t ID Card						
Member • :	Select 🗸 🔍	Request New ID Card(s)	View and Print ID Card					
r*:Select Select Doe John	× •	<u>Click Here</u>	<u>Click Here</u>					
	Member Search							
	* Indicates Mandatory Fields / Section	ĸ						
	Search	-						
	Search Options * :	Both Members and De	pendents 🗸					
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drop-	Patient ID * :							
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Me

- If you request a new ID card, a confirmation message will appear on the screen that your request was submitted. The ID card will be mailed within two business days.
- If you choose to view and print the member's ID card, an image of the card will appear for you to view, save, and/or print.

## **Member Eligibility and Coverage**

- 1. Select the *Member* tab to view a member's eligibility, plan benefits, coverage status, and contact information.
- 2. Enter the member's ID, name, and/or date of birth, then Search.
  - If the member is found in our records, it will appear in the Search Results.
  - If the system cannot locate the member, contact HWMG for assistance.
- 3. Once you select the member from the search results, the portal will display their eligibility and coverage information for medical benefits. You can also select *View Coverage History* to verify when a member's coverage status was active or terminated.

An employee coverage census is not available in OGA at this time.

4. Select the Plan benefit number to view, save, and/or print the member's plan document.

Status :	Active	Original Benefit Effective Date: 10/01/2		10/01/2023	Coverage Th	ru Date :	
Location/Division : 1000		Current Benefit Effective Date :		11/01/2023			
						View C	overage Histo
Prod	uct	Coverage	Plan		Level of Coverage	COB	Provider
Major M	edical	Yes	110		Employee and One Dependent	No	

* Indicates Mand Search	atory Fields / S	ections		
Searc	h Options * :	Both Mem	pers and De	pendents v
	First Name :			
м	iddle Name :			
I	Last Name * :			
D	ate of Birth :		8	<b>\$</b>
	Patient ID * :			
		Connab	Class	Canad
		Search	Clear	Cancel

Coverage History			
Name: Mary Jane Doe			
Coverage			
Status : Terminated	Effective Date: 10/01/20	2	Coverage Thru Date :
Location/Division : 1000			
Product	Coverage	Plan	COB Provider
Major Medical	Yes	110	No
major medica:	165		ND
Coverage	163		NO
	Effective Date: 01/01/20		Coverage Thru Date : 09/30/20
Coverage			
Coverage Status : Active			

## **Enrollments (if applicable)**

- 1. Select *Perform Enrollments* from the *Enrollments* tab drop-down menu. If your account manages multiple locations/divisions, choose which affiliated location/division you will need the member to be enrolled under. To deselect your affiliation, click *Change Affiliation* or *Resume Own Role*.
  - For newly eligible employees with a qualifying event or during Open Enrollment, enter the member information under the **New Hire** section.



- For individuals enrolling within 31 days of a Qualifying Event, enter the Changes information.
- For existing members during Open Enrollment, go to the **Open Enrollment** section and search for the subscriber by entering their ID, name, and/or date of birth, then *Search*. The Open Enrollment option is only available during your group's renewal month and one month prior.

- 2. Follow the prompts to enroll the member. An asterisk (\*) indicates fields where information is required. Helpful tips:
  - Social Security Number. If the employee's SSN will not be provided, a waiver form must be submitted to HWMG. An alternative method is to enter five leading zeros followed by the last 4 digits of their SSN. If the system identifies the SSN as a duplicate of another member, the transaction will not be processed.
  - **Employment Begin Date.** Enter the employee's date of hire or date began working 20+ hours.
  - Member Status. Select Active for new coverage.
  - **Effective Date.** Enter the employee's coverage effective date.
  - **Residence address**. Enter the mailing address.
  - **Qualifying Event.** Select *New Hire* unless a different status type applies (e.g, Just began working 20+ hours, Loss of Other Coverage, Open Enrollment, or Re-Hire). If you are an Applicable Large Employer (ALE) group that follows the ACA's hire rule, select *ALE Hire rule*.
  - **Location/Division.** Choose which location/division number this member will be enrolled under.
  - **Medicare Coverage Type**. Select *No Medicare* or the employee's Medicare coverage.
  - **Bracket code**. Select the plan the member will need to be covered under. The drop-down lists the plan option applicable to the affiliated division.
  - **Other Insurance.** Select *Yes* if the employee has other health coverage and enter the information for their other insurance.
- 3. Enter the dependent(s) information if enrolling under this employee. If there are none, select *I do not have any dependents*.
  - Dependent Status: Select *Disabled* if the dependent needs coverage after age 26 due to disability.

Elections

- 4. Select the member's plan benefits by clicking the circle box next to each plan. Helpful tips:
  - **Plan Name.** View the plan name description and document from the plan code link.
    - **Coverage Options.** Select *Member and One Dependent* to enroll the subscriber and one child. If it is with a spouse, select *Member and Spouse.*
    - Individuals to be Covered. Select which individuals will be covered under the elected plan(s).

Plan Elections for Plan Period : 01/01/2024					
Medical Plans	01	do not v	wish to elect any of the plans	offered in the below	section (Waive C
Plan Name Network Choice	Coverage Options	Ind	lividuals To Be Covered	Status	Relations
2252	Select	•	Jane Doe	Active	self
Prescription Plans		to not v	wish to elect any of the plans	offered in the below	v section (Waive Co
Plan Name Network Choice	Member and Spouse Family	Ind	lividuals To Be Covered	Status	Relations
~	Family	-			

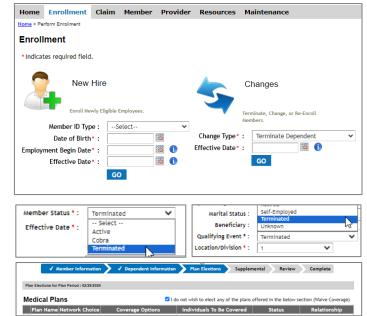
- 5. Upon your review the transaction request summary, enter your first and last name in the *Acceptance* section followed by any comments or information for HWMG to consider for their review when processing.
- 6. Submit your request. Requests submitted before 12 pm HST will be reflected the next business day. Requests submitted after 12 pm HST will be reflected within 2 business days.
  - If HWMG declines a transaction, you will receive an email from billingdept@hwmg.org via our SonicWall Secure Message Center with an explanation, and the status will be Denied in OGA.



	Residence Address
Residence Address1 * :	123 LANE STREET
Residence Address2 :	
Residence Address3 :	
Postal Code * :	96813
city * :	Honolulu
State * :	HAWAII
County :	Hopolulu Select Employment Status
Country :	180 Days ALE Hire Rules
Home Phone 1 :	Active Active Military - Overseas
Home Phone 2 :	Active Military - USA
Work Phone 1 :	Employed Part Time Full-time
Work Phone 2 :	Just began working 20 Plus Hours
Mobile Phone 1 :	Leave of Absence Loss of Other Coverage
Mobile Phone 2 :	New Hire
Fax 1 :	Not Employed On Active Military Duty Open Enrollment
nployment Begin Date :	Part-time Retired
Marital Status :	Self-Employed
Beneficiary :	Terminated
Qualifying Event * :	Select Employment Status
Location/Division * :	
Contraction of the state of the	
edicare Coverage Type * :	Select 💙
Bracket Code * :	Select 🗸
	Select

## **Terminations (if applicable)**

- 1. Select *Perform Enrollments* from the *Enrollments* tab drop-down menu.
- 2. Under the **Changes** section, select *Terminate Employee* or *Terminate Dependent* from the drop-down menu.
- 3. Enter the **Effective Date** for the termination which would be the **1st** day of the month following the date of termination.
- 4. Select the appropriate Location/Division the member will be terminated from.
- 5. Enter the Change information and follow the prompts to terminate the member. Helpful tips:
  - Member Status. Select Terminated.
  - Qualifying Event. Select Terminated.
  - **Plan Elections.** Select *I do not wish to elect any of the plans offered.*



- 6. Requests submitted before 12 pm HST will be reflected the next business day. Requests submitted after 12 pm HST will be reflected within 2 business days.
  - If HWMG declines a transaction, you will receive an email from billingdept@hwmg.org via our SonicWall Secure Message Center with an explanation, and the status will be Denied in OGA.

## **Change Member Information (if applicable)**

- 1. Select *Perform Enrollments* from the *Enrollments* tab drop-down menu.
- 2. Select the Location/Division the member will be enrolled under.
- 3. Enter the Change information and follow the prompts to modify the member's information. Helpful tips:
  - **Change Employee Demographic.** Select if only changing the employee's name or demographic such as address.
  - **Change Family Demographic.** Select if changing the entire family members' demographic information such as address.
  - **Change Classification.** Select if changing the member's plan benefits outside of Open Enrollment (e.g, job promotion).
- 4. Requests submitted before 12 pm HST will be reflected the next business day. Requests submitted after 12 pm HST will be reflected within 2 business days.
  - If HWMG declines a transaction, you will receive an email from billingdept@hwmg.org via our SonicWall Secure Message Center with an explanation, and the status will be Denied in OGA.

## **Employee Division Transfers (if applicable)**

- 1. Select *Perform Enrollments* from the *Enrollments* tab drop-down menu.
- 2. Select the Location/Division the member will be enrolled under.
- Enter the Change information and follow the prompts to transfer the employee to a different division. Requests submitted before 12 pm HST will be reflected the next business day. Requests submitted after 12 pm HST will be reflected within 2 business days.



## Search Member Transactions (if applicable)

- 1. Select *Search* from the *Enrollments* tab drop-down menu.
- 2. If your account manages multiple locations/divisions, choose which affiliated location/division you want to view information for. To deselect your affiliation, click *Change Affiliation* or *Resume Own Role*.

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AS	sume chemosroup			Block of Bus	iness :	H0003			
	Block of Business	Client/Group	Location/Division(s)	Client/G	roup :	54321			
۲	H0003, Hawaii Electricians	54321, ABC Company Inc	01, Active Employees	Location/Div			0		
				Memb	er ID :		ID Type :	Member ID	
0	H0003, Hawaii Electricians	54321, ABC	03, Active Employees	Member First M	lame :				
Ŭ	rious, naman cleccricians	Company Inc	os, Active Employees	Member Last M	lame :				
As	sume Client/Group					Search Clea	r Cancel	I	

- 3. Once you assume your selected affiliation, enter the member's information for the search criteria.
- 4. Select the member's name to view or edit your transaction request.

### **View Transaction Requests (if applicable)**

- 1. Select *Pending Requests* from the *Enrollments* tab drop-down menu.
- 2. If your account manages multiple locations/divisions, choose which affiliated location/division you want to view information for. To deselect your affiliation, click *Change* 4

Vie	w By Status * : Subi	mitted	View By Review (	Queue : A	ıy	✓ Search		
Sho	w 10 🗸 records per page					~	First   < Previous   Nex	t >   Las
	Member Name	Client/Group	Location/Division	Туре	Status	Submitted By	Submitted On	Que
								Admi

for. To deselect your affiliation, click *Change Affiliation* or *Resume Own Role*.

- 3. Once you assume your selected affiliation, the portal will display all transaction requests.
- 4. You can filter the results to view by status type (submitted, complete, incomplete) and by review queue.
- 5. You can view your submitted transaction request or resume editing an incomplete request.
- 6. Existing requests can also be viewed and exported to a CSV file by selecting *Perform Enrollments* from the Enrollments tab drop-down menu.

Client/Group Reports

Report Na

M202402077410884-8272-1.

- You will receive an Enrollment Request Export email from noreply@javelinaweb.com when the file is ready to export.
- Select *Reports* from the *Enrollments* tab drop-down menu and click on the report to download the file.

#### **Employee Coverage Census**

An employee coverage census is not available in OGA at this time. To obtain a census, please send a request to your HWMG Account Manager.

#### Assistance

If you have questions or need assistance, please contact **OGAhelpdesk@hwmg.org** or your HWMG Account Manager at **(808) 591-0088** or toll-free at **(800) 621-6998** (TTY: 711), 8 am to 4 pm Monday through Friday (excluding holidays).

DISCLAIMER: The information provided by HWMG's online portal is not a guarantee of benefits or eligibility, and is subject to change since coverage for clients/groups or members may change or terminate retroactively.

The instructions in this User Guide conform to the requirements of HWMG's online portal powered by Javelina Web. In case of any conflict between this Guide and the online portal, the online portal takes precedence. Nothing in this Guide shall be considered a binding representation or contractual declaration by HWMG. Although HWMG makes every reasonable effort to ensure the accuracy and validity of the information provided in this Guide, HWMG acknowledges that errors and omissions may occur, and information sometimes changes before those changes can be reflected in this Guide. HWMG does not warrant the content of this Guide and does not assume liability for its completeness, accuracy, or any losses or damages resulting from its use or application.

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