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**DEPARTMENT OF  
ADMINISTRATION**  
DIPATTAMENTON ATMENESTRASION  
DIRECTOR'S OFFICE  
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Telephone (Telifon): (671) 475-1101/1250



LOURDES A. LEON GUERRERO  
Governor (Maga'håga)  
JOSHUA F. TENORIO  
Lt. Governor (Sigundo Maga'låhi)

**DEPARTMENT OF ADMINISTRATION CIRCULAR NO.: 2025-037**

To: Department & Agency Heads

From: Director, Department of Administration

**SUBJECT: FY2026 Group Health Insurance (GHI)  
RE: Personnel & Payroll Officer Meeting and  
Open Enrollment – September 16-27, 2025**

***Buenas yan Hafa Adai!*** The Government of Guam announces the FY2026 Open Enrollment (OE) period for the Group Health Insurance (GHI) program under a self-insured plan administered by Third Party Administrators (TPAs): Calvo's SelectCare Insurance, Inc. (SelectCare) for medical, pharmacy & vision and NetCare Life & Health (NetCare) for dental.

The Open Enrollment period will begin on September 16, 2025 and end on September 27, 2025. Pursuant to DOA PR&R §8.402, department heads are requested to allow employees the opportunity to attend presentations and/or meet with insurance representatives during this time. The FY2026 GHI rates and schedule are attached for your reference.

Autonomous agencies and departments must remit both government and employee/retiree/survivor premium payments via ACH, accompanied by supporting data in the required Excel format provided by the DOA Division of Accounts. The data must include summary totals by plan and class to facilitate accurate calculation of TPA administrative fees. Please refer to the attached sample format. DOA Division of Accounts contact information below:

DOA Division of Accounts	
Contact numbers	671-477-5861 671-475-1166
Email Addresses:	<a href="mailto:Accounting-Insurance@doa.guam.gov">Accounting-Insurance@doa.guam.gov</a> . <a href="mailto:marygrace.edrosa@doa.guam.gov">marygrace.edrosa@doa.guam.gov</a> <a href="mailto:justine.carlos@doa.guam.gov">justine.carlos@doa.guam.gov</a> <a href="mailto:tiera.santos@doa.guam.gov">tiera.santos@doa.guam.gov</a>

Departments and agencies must continue submitting backup payment details, including enrollments, cancellations, and qualifying event changes directly to the respective TPAs. Agencies must submit payment details to DOA Accounting and the respective TPA no later than two (2) weeks after the pay period ending date. Each agency is responsible for auditing invoices received from TPAs to ensure accuracy. Failure to conduct timely audits may result in premium overpayment or balances owed.

Any employee, retiree, or survivor with outstanding premium balances from prior plan years will be ineligible to enroll in future government of Guam insurance plans to include being enrolled as a dependent. Agencies must ensure that subscribers do not have arrears from previous fiscal years. Coverage termination will be retroactive to the last date of payment received.

In the event that recovery efforts for unpaid premiums or claims fail, departments will be billed directly for ineligible members. For line agencies, DOA is authorized to deduct these amounts directly from their accounts. For autonomous agencies, DOA will issue a bill for any variances. The department will be required to pay both the employee and employer share directly to DOA. This policy reinforces the importance of conducting thorough audits and promptly transmitting changes to TPAs.

Department heads are reminded to remit premium payments to the DOA at the close of each pay period. Timely remittance is essential to maintain coverage and avoid administrative complications.

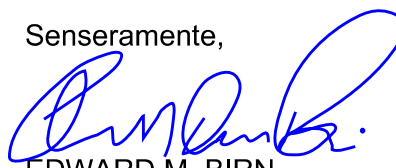
To support a smooth enrollment process and ensure compliance with audit and reporting requirements, DOA will host a virtual meeting for all personnel and payroll officers on September 11, 2025. Meeting details will be issued to all Points of Contact (POC) previously provided to DOA. This session will cover key updates, audit protocols, and submission procedures. Attendance is strongly encouraged.

Additionally, a dedicated in-person meeting will be held for department and agency accounting/payroll staff. This focused session will provide detailed guidance on accounting processes and offer an opportunity to address any questions or concerns with DOA and/or the TPAs. Further details will be shared soon.

Department heads are advised to promptly notify the DOA of any changes to POC's responsible for managing insurance related matters.

Should you have any questions or require further clarification, please contact the Department of Administration, Division of Accounts or you may call Insurance Division at 671-475-1197/1296.

Senseramente,



EDWARD M. BIRN  
Director

Attachments



# GOVERNMENT OF GUAM

## FY2026 - SELF-INSURED GROUP HEALTH INSURANCE PROGRAM RATES

Actives - Bi-Weekly Rates | Retirees - Semi-Monthly Rates

**FY  
2026**

### MEDICAL, PHARMACY & VISION RATES

#### HEALTH SAVINGS ACCOUNT (HSA)

##### SELECTCARE - HSA2000

PLAN	CLASS	EMP/RET	GOV	TOTAL
HSA ACTIVE	I	\$2.04	\$159.25	\$161.29
	II	\$45.08	\$277.50	\$322.58
	III	\$36.21	\$229.92	\$266.13
	IV	\$58.83	\$376.66	\$435.49
HSA RETIREE	I	\$2.21	\$434.62	\$436.83
	II	\$48.84	\$824.82	\$873.66
	III	\$39.23	\$511.18	\$550.41
	IV	\$63.73	\$932.24	\$995.97

#### PREFERRED PROVIDER ORGANIZATION (PPO)

##### SELECTCARE - PPO1500

PLAN	CLASS	EMP/RET	GOV	TOTAL
PPO ACTIVE	I	\$77.36	\$313.43	\$390.79
	II	\$193.51	\$588.07	\$781.58
	III	\$145.71	\$499.10	\$644.81
	IV	\$239.13	\$816.01	\$1,055.14
PPO RETIREE	I	\$83.81	\$974.58	\$1,058.39
	II	\$209.64	\$1,907.14	\$2,116.78
	III	\$157.85	\$1,175.72	\$1,333.57
	IV	\$259.06	\$2,154.07	\$2,413.13

#### RETIREE SUPPLEMENTAL PLAN (RSP)

Medicare Eligibility Requirements - Enrolled in Medicare A & B  
Retirees who return to active employment with the government of Guam  
are not eligible to enroll under the RSP [Circular 2024-008].

##### SELECTCARE - RSP

PLAN	CLASS	RETIREE	GOV	TOTAL
RSP	I	\$0.00	\$247.46	\$247.46
	IIa	\$0.00	\$494.93	\$494.93
	IIb	\$25.00	\$1,155.03	\$1,180.03
	III	\$25.00	\$423.61	\$448.61
	IVa	\$25.00	\$1,401.96	\$1,426.96
	IVb	\$25.00	\$1,401.96	\$1,426.96

### DENTAL RATES

#### DENTAL

##### NETCARE - DENTAL 1500

PLAN	CLASS	EMP/RET	GOV	TOTAL
DENTAL ACTIVE	I	\$8.77	\$14.32	\$23.09
	II	\$28.38	\$21.27	\$49.65
	III	\$22.78	\$17.63	\$40.41
	IV	\$37.29	\$28.53	\$65.82
DENTAL RETIREE	I	\$9.05	\$15.97	\$25.02
	II	\$30.14	\$23.65	\$53.79
	III	\$24.19	\$19.59	\$43.78
	IV	\$39.59	\$31.71	\$71.30

#### HSA, PPO & DENTAL CLASSES

MEDICAL & DENTAL CLASSES	CLASS I	Subscriber Only (No Dependents)
	CLASS II	Subscriber + Spouse (Domestic Partner) Only
	CLASS III	Subscriber + Child/ren Only
	CLASS IV	Subscriber + Dependents (Spouse/Domestic Partner & Child/ren)

#### RSP CLASSES

MEDICAL RSP	CLASS I	RSP Subscriber Only
	CLASS IIa	RSP Subscriber + RSP Spouse/Domestic Partner (Medicare A & B Both Enrolled)
	CLASS IIb	RSP Subscriber + Non-Medicare Spouse/Domestic Partner
	CLASS III	RSP Subscriber + Non-Medicare Child/ren
	CLASS IVa	RSP Subscriber + Dependents (Spouse/Domestic Partner enrolled in Both Medicare A & B + Non-Medicare Child/ren)
	CLASS IVb	RSP Subscriber + Dependents (Non-Medicare Spouse/Domestic Partner + Child/ren)

\*Medical rates include gym benefit.

\*Subscribers with unpaid premiums from prior plan years are not eligible to enroll, including as dependents, until balances are cleared.

\*Please check your payroll deductions and report any issues promptly.

EDWARD M. BIRN, Director  
Department of Administration

August 29, 2025

DATE

## FY2026 GHI PAYMENT DETAIL REQUIRED FORMAT

Departments & Agencies must send details to DOA Division of Accounts & the TPAs (SelectCare & NetCare) on a bi-weekly (Active) or semi-monthly (Retiree/Survivor) basis. Details are due no later than the Wednesday after the payday date. Example: PPE: 10/4/2025 will be due 10/15/2025.

### REQUIRED FORMAT:

- I. Excel spreadsheet template provided by DOA
- II. SSN : Full SSN no dashes
- III. NAME: Separate Column for:  
Last Name / First Name / MI
- IV. SUBSCRIBER STATUS:  
(ACTIVE, RSP,DB RET/SURV,DC RET/SURV)
- V. CLASS: Numbers only 1-4  
RSP CLASSES: Number & tier (1, 2a, 2b, 3, 4a, 4b)
- VI. No Subtotals
- VII. Details in one file/spreadsheet
- VIII. No PDF or embedded images

### SAMPLE MEDICAL DETAIL TEMPLATE

COUNT	DEPT/ AGENCY	EMP/RET NO.	SSN	LAST NAME	FIRST NAME	MI	SUBSCRIBER STATUS	STATUS DETAIL AS APPLICABLE	TPA	PLAN NAME	CLASS	EMP SHARE	GOVT SHARE	TOTAL	PPE DATE	ARREARS	REMARKS

### SAMPLE DENTAL DETAIL TEMPLATE:

COUNT	DEPT AGENCY	EMP NUMBER	SSN	LAST NAME	FIRST NAME	MI	SUBSCRIBER STATUS	STATUS	TPA	DENTAL CLASS	EMP SHARE	GOVT SHARE	TOTAL	PPE DATE	ARREARS	REMARKS

For more information, please contact DOA Division of Accounts at 671-477-5861 or 671-475-1166 or you may email the following:

[Accounting-Insurance@doa.guam.gov](mailto:Accounting-Insurance@doa.guam.gov), [marygrace.edrosa@doa.guam.gov](mailto:marygrace.edrosa@doa.guam.gov), [gaudencio.rosario@doa.guam.gov](mailto:gaudencio.rosario@doa.guam.gov),  
[justine.carlos@doa.guam.gov](mailto:justine.carlos@doa.guam.gov) & [tiera.santos@doa.guam.gov](mailto:tiera.santos@doa.guam.gov)



# GOVERNMENT OF GUAM SELF-INSURED GROUP HEALTH INSURANCE

## FY2026 OPEN ENROLLMENT SCHEDULE



GUAM MUSEUM | 193 Chalan Santo Papa Juan Pablo Dos Hagatna, Guam 96910 | Doors open at 8:30am

SEPTEMBER 2025	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	15	16	17	18	19	20
		<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 9am – 12pm
		<b>Presentations</b>	<b>Presentations</b>	<b>Presentations</b>	<b>Medicare Outreach</b>	<b>Presentations</b>
		<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 10am-12pm	<b>Museum Theater:</b> 10am
		<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 10am-12pm	<b>Virtual:</b> 10am
	22	23	24	25	26	27
	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 8:30am – 3pm	<b>Multipurpose Room</b> 9am – 12pm
	<b>Presentations</b>	<b>Presentations</b>	<b>Presentations</b>	<b>Presentations</b>	<b>Presentations</b>	<b>Presentations</b>
	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 9am & 1pm	<b>Museum Theater:</b> 10am
	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 9am & 1pm	<b>Virtual:</b> 10am

You may enroll or speak with a representative at SelectCare or NetCare's Office between 3pm-5:30pm.  
For more information, please contact your HR.

## FY2026 GOVGUAM GROUP HEALTH INSURANCE OPEN ENROLLMENT (OE)

<b>Satellite Location</b>	Guam Museum	
<b>OE Period</b>	Sept. 16, 2025 – Sept. 27, 2025	
<b>Days</b>	<b>Date</b>	<b>Time</b>
<b>Monday -Friday</b>	Sept 16-19 & 22-26	8:30am – 3pm
<b>Saturday's</b>	Sept. 20 & 27	9am-12pm
<b>SelectCare &amp; NetCare OE Office Hours</b>	Monday – Friday 3pm-5:30pm	

<b>TPA:</b>	<b>SELECTCARE</b>	<b>NETCARE</b>
<b>FY2026 Benefit:</b>	<b>MEDICAL</b>	<b>DENTAL</b>
<b>Online Enrollment Portal:</b>		
<b>Contact Number:</b>	<b>(671) 477-9808</b>	<b>(671) 472-3610</b>
<b>Email Address:</b>	<a href="mailto:service@calvos.com">service@calvos.com</a>	<a href="mailto:GovGuam@netcarelifeandhealth.com">GovGuam@netcarelifeandhealth.com</a>
<b>Website:</b>	<a href="http://www.calvos.net">www.calvos.net</a>	<a href="http://www.netcarelifeandhealth.com">www.netcarelifeandhealth.com</a>
<b>Hours of Operation:</b>	Monday - Friday 8:30am - 5:30pm	Monday - Friday 8:00am to 5:00pm
<b>Virtual Presentation Link:</b> Please refer to schedule for presentation dates & times	Join Zoom Meeting <a href="https://us02web.zoom.us/j/85140081287?pwd=uAUlachfrVIHLLWKlu1W6UygXGzjWV.1">https://us02web.zoom.us/j/85140081287?pwd=uAUlachfrVIHLLWKlu1W6UygXGzjWV.1</a> Meeting ID: 851 4008 1287 Passcode: 874321	

### FY2026 GHI OE ENROLLMENT GUIDELINES

No Changes – Rollover	New Enrollment	Change of Status (COS)	Cancel Coverage
No Action required  Medical and/or Dental benefits will continue for FY2026.  Rates will remain the same.	Completion of enrollment form required.  Please ensure supporting documents are submitted with enrollment as applicable.	Completion of enrollment form required. <ul style="list-style-type: none"> <li>▪ Add/Delete Dependent</li> <li>▪ Change Plan/Class</li> <li>▪ Update Info</li> </ul>	Completion of COS form required.