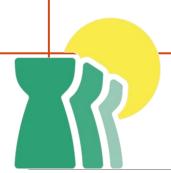
FY2026 GROUP HEALTH INSURANCE

PERSONNEL & PAYROLL OFFICER MEETING



SEPTEMBER 11, 2025



AGENDA

- I. FY2026 PLAN BENEFITS
- II. OPEN ENROLLMENT INFORMATION
- III. ENROLLMENT/CANCELATION PROCEDURES
- IV. COVERAGE ACTIVATION PROCESS
- V. ELIGIBILITY GUIDELINES
- VI. QUALIFYING EVENTS

VII.TRANSMITTAL PROCESS

VIII.SUBSCRIBER STATUS

IX. DOA ACCOUNTING PRESENTATION

X. SELECTCARE PRESENTATION

XI. NETCARE PRESENTATION

XII. DISCUSSION

XIII.CONTACT INFORMATION

FY2026 Government of Guam Self-Funded Group Health Insurance

SELF-FUNDED EXCLUSIVE DENTAL
NetCare Life & Health Insurance
DENTAL 1500

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FY2026 OPEN ENROLLMENT INFORMATION

- I. OE DATES: SEPTEMBER 16, 2025 SEPTEMBER 27, 2025
- II. EFFECTIVE DATE OF COVERAGE
 - OCTOBER 1, 2025

III.FIRST DEDUCTION

- ACTIVE- PPE: OCTOBER 4, 2025
- RETIREES/SURVIVORS- PPE: OCTOBER 15, 2025

FY2026 OPEN ENROLLMENT INFORMATION

LOCATION

- SATELLITE LOCATION
 - GUAM MUSEUM MULTIPURPOSE ROOM
 - Monday –Friday | 8:30AM 3:00PM
 - Saturday, Sept. 20 & 27, 2025 | 9AM 12:00PM

FY2026 OPEN ENROLLMENT INFORMATION

PRESENTATIONS

TPA PRESENTATIONS

GUAM MUSEUM AUDITORIUM/THEATER- In Person

- September 16-18 & 20-27 | 9am & 1pm | Monday to Friday
- September 19 | 10am-12pm | Friday Medicare Outreach (for Retirees & Survivors)
- September 20 & 27 | 10am | Saturday

VIRTUAL PRESENTATIONS

- 9am & 1pm | Mon to Friday
- 10am | Saturdays
- Please refer to DOA Circular 2025-038 attached OE Calendar

Links will be on the DOA Website & attached to the circular



ENROLLMENT GUIDELINES

NO CHANGES -ROLLOVER	NEW ENROLLMENT	CHANGE OF STATUS	TERMINATION
NO ACTION REQUIRED	ACTION REQUIRED	ACTION REQUIRED	ACTION REQUIRED
MEDICAL AND DENTAL INSURANCE BENEFITS WILL CONTINUE WITH THE AWARDED TPA AT THE NEW RATES FOR FY2026	COMPLETION OF ENROLLMENT FORM REQUIRED	 ADD/DELETE DEPENDENT NAME CHANGE CHANGE CLASS/PLAN UPDATE INFO 	COMPLETION OF A SC or NC TERMINATION FORM REQUIRED
Please have employees verify current coverage and deductions to ensure proper enrollment.		COMPLETION OF ENROLLMENT FORM REQUIRED	

[•]Please ensure supporting documents are submitted with enrollment as applicable.



ELIGIBILITY GUIDELINES

SUBSCRIBER	DEPENDENT
 Active: Must be working 30 hours or more per week excluding retirees returning to active status Retiree or Survivor of GovGuam Must be a resident of Guam 	 Legal Spouse – MC may be required Domestic Partner (DP) DP Affidavit Required* Legal children Natural born child/ren – BC may be required if different last name Step Child/ren – MC & BC required* Court Legal guardianship – BC & Court Documents required* Disabled dependents above legal age –documents required* *Supporting documents required

^{*}PLEASE ENSURE ALL FORMS SUBMITTED ARE COMPLETE TO INCLUDE SUPPORTING DOCUMENTS TO AVOID DISCREPANCIES.



QUALIFYING EVENT

Qualifying Event	Detail	Effective Date
New Employee	May enroll within 31 days from the Date of Hire.	Beginning of the next pay period based on date submitted.
Newborn	May add newborn within 31 days from birth	Coverage effective when child/ren is born. Effective date for premium payments retroactive to pay period closest to date of birth.
Legal Guardian Appointment or Adoption	May add dependent within 31 days from the effective date of Court Order Approval	
Change of Work Schedule to 30 hours or more	May enroll within 31 days from work schedule change	Beginning of the next pay period upon completion of a change of status form within 31 days of status change
Marriage	Date of Marriage	Beginning of the next pay period based on date submitted.
Survivor of a Retiree (Surviving Spouse Enrollment)	May enroll for coverage within 31 days from survivorship	Beginning of the next pay period upon completion of a change of status form within 31 days of status change
Resignation	Date of Separation	Last pay period ending or last deduction.
Death of Subscribers	Date of Death If subscriber deceased: Form shall be completed by the respective departments and transmitted to the TPA. If deceased dependent: Change of status form to be completed to delete dependent and change class deduction as applicable.	Last pay period ending or last deduction.
Divorce	May enroll within 31 days from date on Divorce Decree or; Change of Status form required to delete dependent and change class if currently enrolled.	Beginning of the next pay period upon completion of a change of status form within 31 days of status change
Long Term Disability	Date of Disability	Date of disability
Military Leave	May terminate plan prior to date of active orders. May enroll within 31 days of return from active orders. Military orders submission required.	Beginning of the next pay period upon completion of a change of status form within 31 days of status change
Loss of coverage	May enroll within 31 days from coverage loss. HIPAA certification required to enroll.	Beginning of the next pay period upon completion of a change of status form within 31 days of status change
New Medicare Part B Recipient	May enroll within 31 days from effective date of Part B. Must have both Part A & B to enroll under the Retiree Supplemental Plan.	Beginning of the next pay period upon completion of a change of status form. Pursuant to 4GCA 4301 (b) Medicare Part A & B eligible must enroll under the RSP should they elect to participate in GovGuam health plan.

PERSONNEL, PAYROLL & ACCOUNTING MEETING

ENROLLMENT LOCK-IN NOTICE

Once enrolled in a health insurance plan under GovGuam, subscribers and their enrolled dependents are subject to a lock-in provision. This means:

- * Coverage cannot be canceled or changed outside of the annual Open Enrollment (OE) period.
- * Exceptions apply only if the subscriber experiences a Qualifying Event (QE) or becomes eligible for a Special Enrollment Period (SEP).

Please note that enrollment in another health insurance policy does not qualify as a life event and will not allow cancellation of your current coverage outside of OE.

All requests for changes due to QE or SEP must be submitted with supporting documents within 31 days from the effective date for review.

Open Enrollment Transmittal Process

TPA FORM INTAKE

GUAM MUSEUM-VENUE

HARDCOPY

ONLY COMPLETED
FORMS
W/ATTACHMENTS SHALL
BE RECEIVED

TPA will transmit daily to the respective Dept to validate Employment Status & Eligibility

HR to transmit to Payroll

ONLINE ENROLLMENT

ONLINE ENROLLMENT

TPA to validate complete enrollment forms

TPA to transmit to HR

HR to validate and transmit to Payroll.



LINE & AUTONOMOUS AGENCIES

AUDIT DEDUCTIONS

- PPE 10/4/2025- Active
- PPE 10/15/2025 Ret/Sur

IDENTIFY DISCREPANCIES

REPORT CORRECTIONS
TO PAYROLL & TPA

**PLEASE ADVISE EMPLOYEES/RETIREES/SURVIVORS TO MONITOR THEIR DEDUCTIONS AND IMMEDIATELY REPORT ANY DISCREPANCIES.

After OE Transmittal Process

METHOD OF ENROLLMENT

ONLINE – PREFERRED METHOD

QR CODE & LINKS AVAILABLE

SOFT COPIES WILL BE PROVIDED IN BATCHES BY THE TPA TO THE RESPECTIVE DEPTS.

TPA TO PROVIDE AN EXCEL FILE OF ENROLLMENTS/COS FOR HR REVIEW & PROCESS

HARDCOPY

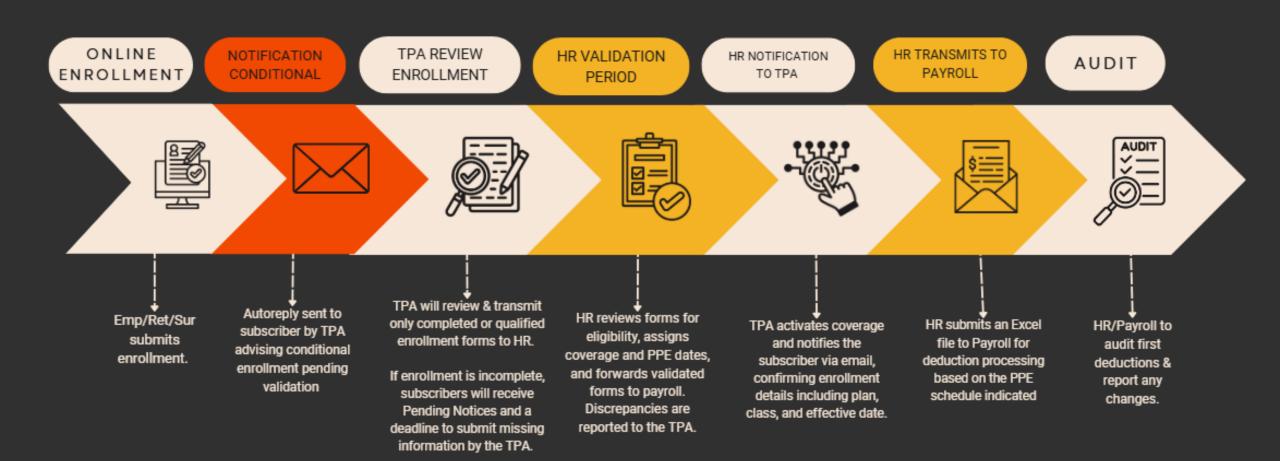
TRANSMIT AS USUAL

LIMITED DISTRIBUTION WILL BE SENT TO AUTONOMOUS AGENCIES

FILLABLE FORMS AVAILABLE ONLINE

AFTER OPEN ENROLLMENT

FY2026 GHI ONLINE ENROLLMENT WORKFLOW





COVERAGE ACTIVATION PROCESS

CONTRACT LANGUAGE

The effective date of coverage is based on the receipt of a completed Enrollment or Change of Status (COS) form. Coverage will begin on the first day of the next pay period following the submission date. Exceptions apply for dependents: coverage for newborns begins on the date of birth, and coverage for adopted dependents begins on the date custody is assumed.

*Please refer to the QE Chart

Any claims incurred prior to the effective date will not be covered.

EXAMPLES

ACTIVE EMP

Please reference QE chart

EXAMPLE 1: New Employee	
Enrollment received	Monday, October 6
Effective date of Coverage	PPB: October 19
First Deduction	PPE: November 1

EXAMPLE 2: Change of Status – Add new born						
Enrollment received	Friday, October 31					
Dependent DOB	10/8/2025					
Effective date of Coverage	10/8/2025 - retro to DOB					
First Deduction	PPE: 10/18/2025					

Month	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
OCT	5	6	7	8	9	10	11	12	13	14	15	16	17	18
OCT/ NOV	19	20	21	22	23	24	25	26	27	28	29	30	31	1
NOV	2	3	4	5	6	1	8	9	10	11	12	13	14	15

EXAMPLES

RETIREES

Please reference QE chart

EXAMPLE 1: New Retiree								
Monday, October 6								
PPB: October 16								
PPE: October 31								

EXAMPLE 2: Change of Status – Medicare Eligible for Part A & B – RSP							
Coverage	PPO 1500 C1						
Date effective Part B	November						
COS received to enroll in RSP	Wednesday, December 3 Note: Only plan change allowed. Class to remain the same.						
Effective Date of Coverage	PPB: December 16						
First Deduction	PPE: December 31						

	(OCT	гов	ER				N	OV	EME	BER					D	EC	EME	BER		
UN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	6	SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4	5						1			1	2	3	4	5	6
5	6	7	8	9	10	11	2	3	4	5	6	7	8		7	8	9	10	11	12	13
12	13	14	15	16	17	18	9	10	11	12	13	14	15		14	15	16	17	18	19	20
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26	27	28	29	30	31		30								- 3						

CANCELLATION OF COVERAGE PROCESS

POLICY

The final payroll deduction and coverage termination date are contingent upon the employee's official separation or termination effective date. To qualify for coverage through the final pay period, the employee must have worked or been on paid leave for a minimum of 32 hours within that pay period.

Circular regarding this policy is forthcoming.

EXAMPLES

Please reference QE chart

EXAMPLE 1: Separation	
Date of Separation	Monday, October 13
Final Deduction & Last date of coverage	PPE: October 18
EXAMPLE 2: Resignation	
Date of Resignation	Monday. October 20
Final Deduction & Last date of coverage	PPE: 10/18/2025
Reason	Did not meet the 32 hour requirement

EXAMPLE 3: Transfer Employee with no break in service. Emp elects to continue benefits								
Separating from Dept A	October 24							
Final Deduction & Last date of coverage	November 1							
Hired at Dept B	October 27							
First deduction	PPE: November 15							

Month	Sun	Mon	Tue	Wed	Thu	Fri	Sat	5	Sun	Mon	Tue	Wed	Thu	Fri	Sat
OCT	5	6	7	8	9	10	11	12		13	14	15	16	17	18
OCT/ NOV	19	20	21	22	23	24	25	26		2/	28	29	30	31	1
NOV	2	3	4	5	6	7	8	9		10	11	12	13	14	15

APPPROVED LEAVE WITHOUT PAY

POLICY – Government Contributions

Employees must work or be on paid leave for at least 32 hours per pay period to receive the government's contribution toward health insurance. If the 32 hour threshold is not met, the employee is responsible to pay government & employee share to maintain coverage.



SUBSCRIBER STATUS

	ACTIVE, RETIREE & SURVIVOR			
APPROVED LEAVE WITHOUT PAY (LWOP)	MILITARY LEAVE WITHOUT PAY (MLWOP)	FAMILY MEDICAL LEAVE ACT (FMLA)	UNDETERMINE STATUS UNAUTHORIZED LEAVE	NON-PAYMENT
Emp must pay both GG and Emp Share to maintain coverage. Prior to going on this status. Emp must work or be on paid leave status for 32hrs or more per pay period for Gov't to pay its share	GG will pay both shares if employee did not cancel coverage.	GG will remit for their share when Emp share is received for the duration on this status.	Termination retro to the last day of payment.	Termination retro to the last day of payment.

- Autonomous agencies are authorized to terminate coverage for employees, retirees or survivors whose status changes.
- Please report any employee/s separating from your department/agency to the TPAs.
- DOA is authorized to pull from line agencies and autonomous agencies will be billed for both shares for failure to timely terminate coverage. DOA Circular 2025-037

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DOA DIVISION OF ACCOUNTS

ACCOUNTING PRESENTATION

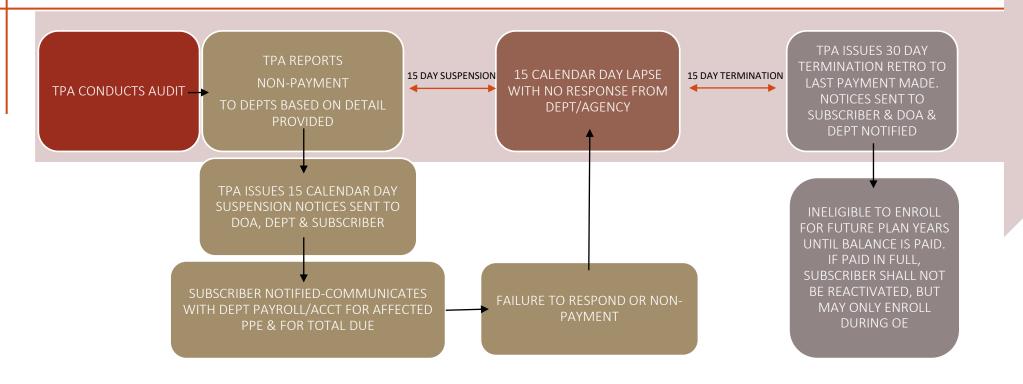
INVOICE & PAYMENT PROCESS

BILLING/INVOICE RECEIVED FROM TPA

ACCOUNTING TO AUDIT INVOICE AGAINST PREMIUMS PREMIUM
REMITTANCE TO DOA
WITH DETAIL

DOA TO REMIT TPA FEES TO CARRIER

PAYMENT AND AUDIT FLOW PROCESS



NON-PAYMENT

NON-PAYMENT OR NO DEDUCTIONS

DEPT TO REMIT FULL PREMIUMS

(Gov & Emp/Ret Share)

DEPT TO COLLECT FROM EMP/RET

DEPT TO TERMINATE COVERAGE AFTER 2 TOTAL NON-PAYMENT REPORTINGS



TPA CONTACT INFORMATION

Select Care HEALTH PLANS	Net Care Life & Health Insurance		
SELECTCARE	NETCARE		
(671) 477-9808	(671) 472-3610		
115 Chalan Santo Papa	424 West O' Brien Drive,		
P.O. Box FJ	Julale Center Suite 200		
Hagåtña, Guam 96932	Hagatna, Guam 96910		
Mon-Fri: 8:30am - 5:30pm	Mon-Fri: 8:30am - 5:00pm		

Email: GovGuam@netcarelifeandhealth.com

Website: www.netcarelifeandhealth.com

Email: service@calvos.com

Website: www.calvos.net



DEPARTMENT OF ADMINISTRATION

Insurance Division	Division of Accounts
671-475-1296/1197/1121/1179	671-477-5861 or 671-475-1166
590 S. Marine Corps Drive	590 S. Marine Corps Drive
1st Floor, ITC Building Suite 142	7th Floor, ITC Building
Tamuning, Guam 96913	Tamuning, Guam 96913
Email: healthinsurance@doa.guam.gov	Email: Accounting-Insurance@doa.guam.gov
Website: www.hr.doa.guam.gov/insurancedivision	Website: https://da.doa.guam.gov/



QUESTIONS