



ANY REPLY OR SUBSEQUENT REFERENCE SHOULD BE ADDRESSED TO THE FINANCIAL SECRETARY AND THE FOLLOWING REFERENCE NUMBER QUOTED:-

Telephone No. 92-28600-16
Website: <http://www.mof.gov.jm>
Email: info@mof.gov.jm

REF No. 11180/4

**MINISTRY OF FINANCE AND THE PUBLIC SERVICE
STRATEGIC HUMAN RESOURCE MANAGEMENT DIVISION
30 NATIONAL HEROES CIRCLE
P.O. BOX 512
KINGSTON
JAMAICA**

July 31, 2026

Circular No. 10

Cabinet Secretary
Permanent Secretaries
Heads of Departments
Chief Executive Officers

Re: 2026 Revision – Procedures for All Government of Jamaica Health Plans

The Government continues its administration of three health insurance plans, namely:

1. Government Employees Administrative Services Only (GEASO) Health Plan for Employees
2. Government Pensioners Administrative Scheme Only (GPASO) Health Plan for Pensioners
3. Senior Government Employees – Administrative Services Only (SGE-ASO) for Senior Executives e.g. Heads of Entities.

N.B.: Supplemental arrangements are facilitated for GEASO and GPASO subscribers who wish to access additional coverage.

The following guidelines must be observed by all pay sites and employees in managing and accessing the benefit. Failure to comply will result in termination from the respective Health Insurance Plan.

1. ENROLMENT

(a) Age Eligibility

Health Scheme	Employees	Pensioners	Dependent Spouse	Dependent Children
GEASO	18 to 65 years	Not eligible	18 years+	0 to 17 years
SGE-ASO	30 to 80 years	Not eligible	18 years+	0 to 17 years
GPASO	Not eligible	60 years+ (AGD Pensioners) 65 years+ (Public Bodies)	40 years+	Not eligible

- i. The following types of employees are not eligible for enrolment:
 - Seasonal employees
 - Casual daily paid/ weekend employees
 - Employees with less than a 40-hour work week
 - Employees with less than one-year contractual employment
- ii. A dependent child is not eligible for enrolment if he or she is:
 - over 17 years old
 - maintained by legal guardianship by the enrolled employee

(b) Eligibility Authorisation

Health Scheme	Authorised by	Conditions
GEASO	Human Resource Departments	Type of employment Duration of service
SGE-ASO	MOFPS	Entity's request to the MOFPS must be submitted along with the completed enrolment documentation.
GPASO	MOFPS / AGD	Retirement from the Public Service

- (c) Enrolment Documentation
- i. All documents are to be submitted on or before the third deduction, to enable processing to commence prior to the fourth monthly deduction.

✓ Enrolment Form

✓ Copy of the employee/pensioner’s birth certificate

✓ Copy of marriage certificate (in the case of a married name being added or addition of spouse by marriage)

✓ Copies of the respective birth certificates for the approved dependents.

ii. Enrolment forms and accompanying documentation are to be submitted on commencement of the employee’s deduction.

2. DEDUCTIONS

Payments are prepaid; therefore, deductions submitted in June are for July’s coverage.

- (a) Payment of Deductions
- The monthly subscriptions and premiums are to be submitted via electronic funds transfer (EFT) as below:

i.	Government Employees’ Administrative Services Only (GEASO)																
	<table> <tr><td>Bank Name</td><td>Bank of Nova Scotia Jamaica Ltd (BNS)</td></tr> <tr><td>Branch code</td><td>90365</td></tr> <tr><td>Bank Branch</td><td>Liguanea -125 Old Hope Road, Kingston 6</td></tr> <tr><td>Bank Account</td><td>74-12</td></tr> <tr><td>Type of Account</td><td>Current</td></tr> <tr><td>TRN on RTGS</td><td>000-137-243 Ext. 0037</td></tr> <tr><td>Name on Account</td><td>Sagicor Life Jamaica Limited - GEASO</td></tr> </table>	Bank Name	Bank of Nova Scotia Jamaica Ltd (BNS)	Branch code	90365	Bank Branch	Liguanea -125 Old Hope Road, Kingston 6	Bank Account	74-12	Type of Account	Current	TRN on RTGS	000-137-243 Ext. 0037	Name on Account	Sagicor Life Jamaica Limited - GEASO		
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ii.	Government Pensioners’ Administrative Services Only (GPASO)																
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iii.	Senior Government Executives Administrative Services Only (SGE-ASO)																
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iv.	Government Supplemental Health Insurance Plans (Medigap Plus, Parental Health & Life, Family Life and GPASO Medigap)																
	<table> <tr><td>Bank Name</td><td>Sagicor Bank Jamaica Limited (SBJ)</td></tr> <tr><td>Branch code</td><td>00021</td></tr> <tr><td>Bank Branch</td><td>Head Office - 17 Dominica Drive, Kingston 5</td></tr> <tr><td>Bank Account</td><td>5501858597</td></tr> <tr><td>Type of Account</td><td>Current</td></tr> <tr><td>TRN on RTGS</td><td>000-137-243 Ext. 0038</td></tr> <tr><td>Name on Account</td><td>SLJ Group Insurance Main Account</td></tr> </table>	Bank Name	Sagicor Bank Jamaica Limited (SBJ)	Branch code	00021	Bank Branch	Head Office - 17 Dominica Drive, Kingston 5	Bank Account	5501858597	Type of Account	Current	TRN on RTGS	000-137-243 Ext. 0038	Name on Account	SLJ Group Insurance Main Account		
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- v. Monthly payments are to be deposited to the respective Health Insurance Bank Account via Electronic Funds Transfer (**ACH or RTGS (bank to bank transfers)**) only. No cheque deposits, or by bearer bank deposits are to be made to the Bank Accounts or any Sagicor Office. The required reference information must be submitted along with the deduction and summary list to Sagicor within 24 hours of the transfer.
- vi. For each bank transfer, the following information (which should not exceed 30-character spaces) must be inserted in the description area on the commercial bank platform:
 - Name of Pay site/Entity
 - Period of Payment (e.g. July 2026)
 - Group and Account Number (i.e. 9X0000-0XXXX)
 - EFT Reference Number

Examples for each description:

 - **GEASO:** MOEYSI-Aug2026 (GEASOAC#XXXX)
 - **GPASO:** StMaryPC- Aug2026 (GPASOAC#08XX)
 - **SGE-ASO:** HOUSESOFPARL- Aug2026 (SGE-AC5000)
 - **Supplemental:** SERHA- Aug2026 (GEASOAC70001)
- vii. The monthly deduction and the Summary (i.e. additions, transfers and terminations) lists must be sent to the Administrator of the respective Health Plan and the following email addresses: geasomof@mof.gov.jm and slj_geaso@sagicor.com by the 5th working day following the deduction
- viii. All submissions to Sagicor and this Ministry (the payment advisory, enrolment/change forms, deduction and summary lists) must be sent from a government email address. **Submissions from personal email addresses will not be opened).**
- ix. Please note the implications of the following infractions:
 - ***Incorrect or incomplete description of the monies being transferred*** – the respective account will not be reconciled (i.e. no additions, terminations, or changes to the account will be completed) until the funds are identified and placed in the correct bank account and posted to the pay sites health account.
 - ***Transfer to the wrong account*** – a penalty of \$750 will be charged by the Administrator of the Health plan per ***infraction***. The amounts will be billed to the respective pay site for payment prior to the completion of the transfer.

(b) Monthly Deduction Listing

- i. Monthly deductions list (**in excel format only**) and the **Summary Form (in the excel format provided by MoFPS and Sagicor)** by pay sites, must be submitted along with the monthly deductions (**by the 5th working day after the deduction has been made**).
- ii. The **deduction list** should be sent as one (1) excel workbook for each health plan, with fortnightly and monthly employees on separate spreadsheets within the workbook). Multiple lists from any one pay site will not be reviewed until the entity complies with the submission requirements.
- iii. The deduction list must include the following information:
 - *Employee Name*
 - *TRN*
 - *Employee No. (if the entity does not use the TRN as the employment number)*
 - *Plan Type*
 - *Amount Paid*
 - *Status, i.e. New/Re-enrolled/Transferred (for re-enrolments – add the date of resumption or transfer – include the name of the former pay site)*

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- iv. Failure to submit the monthly payment and respective deduction lists will result in the following:
 - *Over one (1) month - written warning of suspension of the account of the respective pay site.*
 - *Over two (2) months - automatic termination of the account of the non-compliant pay site by the first working day of the third month.*
 - *Reinstatement will occur only on submission of full payment along with the accompanying summary and deduction list(s).*

3. ADMINISTRATION**(a) Employee Termination/Separation**

- i. Where a subscriber's employment has been terminated, no deductions are to be taken for the month in which the termination becomes effective. For example, where an employee's termination is effective April 16th – no deduction must be taken from the April's payroll for this individual. Similarly, an employee to be terminated on May 31st – no deduction is to be submitted to Sagicor in the May payroll.
- ii. An exemption list which includes all the employees terminated (i.e. voluntary, by force or retirement) during the month should be sent to MOFPS and Sagicor via geasomof@mof.gov.jm and slj_geaso@sagicor.com by the last working day of each month. The list must be sent in excel format and should include the *employee's name, TRN, employee number, reason for termination and effective date of termination.*
- iii. The health cards for separated employees and their dependents are to be collected by/returned to HR by the last working day of employment.

(b) Changes to the employee/pensioner policy

- i. Pay sites are required to submit monthly (either at the first working day or the last working day of each month) the changes to their respective accounts. Daily or weekly submissions will no longer be accepted.
- ii. One/two employees should be assigned this duty and their contact information provided. Submissions from multiple parties will not be accepted. The monthly submissions to be included in the one email are:
 - New applications for enrolment
 - Subscriber Changes (name change, addition of dependents, contact details etc.)
 - Plan upgrade or downgrade
 - Overage Dependent status letters (from colleges or universities)
- iii. Any change to employee's information (i.e. addition/termination of dependents, contact details – telephone, email and address, change/addition of beneficiaries, and addition/change of banking information etc.) must be done via the Subscriber Change Request Form and routed through the respective HR Departments/Bursars. Sagicor will not accept the Subscriber Change Request Forms directly from employees.
- iv. Pay sites must ensure that for **name changes**, the payroll and the HR files must change the name on record, prior to the change request being sent to Sagicor. The generation of new cards bearing the changed name, will attract a replacement fee payable by the employee for the processing of this request. The card replacement form (attached) is required.
- v. Sagicor is authorised to instruct employers (pay-sites), to revert employees'/ pensioners' payments to the individual plan type, where no dependent is enrolled. Pay sites are advised to immediately act on the instructions of Sagicor, once received.

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(c) Dependent child(ren)

- i. On an annual basis, Sagicor will provide to the HR team a list of employees whose dependent child(ren) will attain age 19 within the plan year (i.e. August to July) and who maintain the family plan option with this child only. The HR representatives are to ensure that the employees submit the required status letter from the institution at which the child is currently studying for continuation under the GEASO or SGE-ASO Health Schemes.
- ii. Failure to submit the required status letter will result in the termination of the dependent child and reversion to the individual plan type where there are no other registered dependents. Sagicor/MoFPS will contact the HR and Accounts Department to revert the employee to the individual plan for the month following the child attaining age nineteen.
- iii. Once a reversion occurs, the child will not be eligible for reenrolment. For the employee to upgrade to the family plan, only a dependent spouse or another biological/adopted child up to the age of seventeen (17) can be enrolled to facilitate this upgrade.

(d) Queries and Requests

- i. Pay sites are being reminded that all queries relating to the following issues should be directed through their respective HR and Accounts Departments/Bursars only:
 - Status of Card (i.e. new or change of plan)
 - Addition/termination of dependents or beneficiaries
 - Policies for transfers, secondment, and termination
 - No-Pay leave/break in coverage
- ii. Sagicor will only respond directly to the employees via 876-929-8920-9 Option 3 or email: infoja@sagicor.com for queries relating to:
 - Claims and Benefit queries
 - Pre-Authorization Requests

(e) No-Pay Leave/Transfer/Secondment

- i. No pay leave for periods exceeding ten (10) days will require employees to pay 100% of the GEASO subscription. During this time, the government does not assume responsibility for the employee.
- ii. **Approval must be given by the MOFPS and Sagicor for employees to make over the counter payments.** Payments will not be accepted by the Sagicor representatives at the branches island-wide or via the GEASO Bank Account where this approval has not been granted.
- iii. All employees seconded or transferred will be required to complete a new enrolment form on submission of their first deduction under the current entity/pay site. This will ensure that the employee is current prior to the records being transferred to the new pay site.
- iv. Where an employee is being seconded from Central Government to a statutory entity, HR must seek the approval of this Ministry prior to the deductions for any of GOJ Health Scheme's commencement under the new pay site. The request must include, the employee's information, duration of secondment, position, confirmation that the new pay site is under GEASO and how the employee will be paid. Where the health insurance provider is not under GEASO, the plan and the insurance provider is to be stated. No deduction will commence until formal approval is provided by this Ministry.

(f) Submission of Banking Information

- i. Effective December 2026, Sagicor will not pay claim reimbursement by cheque. All employees are therefore required to submit their commercial banking information to their respective HR Departments for upload to their health insurance policy.
- ii. Each pay site/entity will be provided with the list of employees who are non-compliant. HR should complete and submit to the MoFPS by September 30, 2026.

(g) Changes to Plan Accounts or Creation of New Account

- i. All Heads of Departments or Entities must give this Ministry formal notification of any intention for change of pay site name/separation or for requests for addition of a new account to the GEASO Health Scheme. Submissions must include the following documentation:
 - Letter of intent for changes/amendment of name
 - Approved Legislative documentation with the confirmed change(s)

Or

 - Letter requesting approval for addition to GEASO or GPASO
 - List of employees/pensioners – which should include their names, positions, Date of Birth, Age, TRN, employment status, duration of contract.
 - (If the entity subscribes to a health insurance plan) Current health plan details – which must include the most current annual claims utilization report, benefit schedule, premiums paid.
- ii. All additions/changes of accounts to any of the health insurance plans must be approved by the MOFPS.

(h) Training for HR and Accounts Representatives

- i. All HR and Accounts/Bursars representatives assigned the responsibility for the oversight of the GOJ health insurance at their respective pay sites are required to attend the annual HR and Accounts Seminar coordinated by this Ministry.
- ii. Where there are changes to the representatives assigned to your respective entity after the annual training, contact is to be made to Sagicor and this Ministry for the new assignee to be trained.
- iii. All pay sites are required to have the following local sessions which provide all pertinent information relating to the administration of the Health Insurance Schemes - an orientation session (for new employees), HR/Accounts training, general staff education and retirement planning (for employees scheduled to retire within the next 6-12 months) sessions at least once per year.
- iv. The MOFPS and/or Sagicor may request an audit or one-on-one session with any entity to ensure compliance is maintained.

(i) Contact Information

- i. HR and Accounts representatives may be contacted by team members of the offices of the Director of Public Service Accounts and Employee Welfare Management Section, MOFPS and/or the Government Business Unit, Sagicor Life Jamaica Limited.
- ii. All HR Directors, Principal Finance Officers and Bursars are to provide the following details of the personnel assigned to the GOJ Health Insurance (in excel format):
 - Name
 - Position
 - Email address (must be from a government email domain)
 - Mobile Number/CUG
 - Direct Landline

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Except for schools, HR and Accounts representatives cannot be the same individual. Also, both mobile number and direct landline are to be provided. The submission must be made to govhealthplans@mof.gov.jm via email in excel format.

- iii. The following officers may be contacted, to assist with the arrangement of orientation sessions, general staff training and retirement planning sessions:
- Ms. Leshai Thompson (Sagicor) – leshai_thompson@sagicor.com or 876-936-7678 / 876-515-4897
 - Ms. Donna Brown (MoFPS) – donna.brown@mof.gov.jm or 876-932-5357 / 876-331-0547

Kindly bring this to the attention of all HR and Accounts Departments and Bursars under your purview and anyone else assigned the responsibility of the government health portfolio within your respective entity. Your usual cooperation is anticipated.

In case of doubt or difficulty, please contact the Employee Welfare Management Section within the Strategic Human Resource Management Division of this Ministry.

This supersedes Circular No. 16 dated April 21, 2023.



Darlene Morrison, CD
Financial Secretary

Copy

GEASO Monitoring Committee
GPASO Monitoring Committee
SGE-ASO Monitoring Committee
Sagicor Life Jamaica Limited

Attachments

1. Summary List Form – Excel Format
2. GEASO Deduction Form
3. GEASO Enrolment Form
4. GEASO Supplemental Enrolment Form
5. GEASO Supplemental Deduction Form
6. SGE-ASO Enrolment Form
7. SGE-ASO Deduction Form
8. GPASO and GPASO Supplemental Enrolment Form
9. GPASO Deduction Form
10. GPASO Supplemental Deduction Form
11. Subscriber Change Request Form
12. Card Replacement Form and Change of Name Flyer