



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

Telephone No. 923-8600-14
Webster: <http://mof.gov.jm>
Email: info@mof.gov.jm

Ref No.:12732

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

December 2, 2025

Circular No. 15

**Accountant General's Department
Approved Agencies**

**Government Pensioner's Administrative Services Only (GPASO) Health Scheme
Increased Benefits and Premiums - December 1, 2025**

Resulting from the GoJ procurement process, approval has been granted for the award of a contract for the provision of Administrative Services for the Government Pensioners' Administrative Services Only (GPASO) Health Scheme to Sagicor Life Jamaica Limited. The benefits to the pensioners have been improved with effect from December 1, 2025 and are set out in the attached Benefit Schedule. These revisions resulted in increased monthly subscriptions. The increased subscription rates are set out below:

Plan Type	Existing Subscription Rates		Revised Subscription Rates effective December 1, 2025	
	Pensioners (20%) \$	Government (80%) \$	Pensioners (20%) \$	Government (80%) \$
Individual	847.40	3,389.60	1,204.00	4,816.00
Family	1,492.60	5,970.40	2,084.00	8,336.00

As you are aware, the subscriptions for the GPASO Health Scheme are pre-paid; consequently the initial deductions for the **increased payments should have been taken from the November 2025 pension**. Considering this, the deductions for the January to February 2026 payrolls are reflected below:

Plan Type	Subscription Rates for JANUARY AND FEBRUARY 2026		Revised Subscription Rates (March 2026 and onwards)	
	Pensioners (20%) \$	Government (80%) \$	Pensioners (20%) \$	Government (80%) \$
Individual	1,560.60	6,242.40	1,204.00	4,816.00
Family	2,675.40	10,701.60	2,084.00	8,336.00

The pensioner's portion of the subscription is to be deducted in the usual manner and paid over to the Administrator, Sagicor Life Jamaica Limited, monthly by the fifth working day after the deduction is taken. The usual Summary Forms and deduction listings are to be forwarded to Sagicor Life Jamaica Limited and copied to the Ministry of Finance and the Public Service.

The Accountant General's Department and the Ministry of Finance and the Public Service will continue to pay the employer's portion of subscription for the approved pay sites.

Additionally, effective January 1, 2026, GPASO claims' reimbursements will be made via Electronic Fund Transfer (EFT) only. All pay sites are to ensure that their respective pensioners (see the list attached for your respective location) submit their commercial banking information to Sagicor Life Jamaica Limited via the **GPASO Customer Information Form** before **January 31, 2026**.

Kindly ensure that this circular is brought to the attention of the approved locations attached.


**Darlene Morrison CD
Financial Secretary**

Attchs

Circular No. 15, Ref. No. 12732 dated December 02, 2025, titled Government Pensioner's Administrative Services Only GPASO Health Scheme Increased Benefits and Premiums - December 1, 2025 is applicable ONLY to the following entities:

1. ACCOUNTANT GENERAL'S DEPARTMENT
2. SOCIAL DEVELOPMENT COMMISSION
3. KSAC - PARISH COUNCIL
4. ST. MARY PARISH COUNCIL
5. ST. THOMAS PARISH COUNCIL
6. ST.CATHERINE PARISH COUNCIL
7. PORTLAND PARISH COUNCIL
8. MANCHESTER PARISH COUNCIL
9. HANOVER PARISH COUNCIL
10. CLARENDON PARISH COUNCIL
11. ST JAMES PARISH COUNCIL
12. WESTMORELAND PARISH COUNCIL
13. ST. ANN PARISH COUNCIL
14. ST. ELIZABETH PARISH COUNCIL
15. TRELAWNY PARISH COUNCIL
16. MICO COLLEGE CARE CENTRE
17. SAGICOR PAID PENSIONERS
18. FIXED TERM CONTRACTS
19. GUARDIAN PAID PENSIONERS
20. ADMINISTRATOR GENERAL'S DEPARTMENT
21. CONSUMER AFFAIRS COMMISSION
22. JAMAICA INFORMATION SERVICE (JIS)
23. NATIONAL LAND AGENCY
24. REAL ESTATE BOARD



**GOVERNMENT PENSIONERS' ADMINISTRATIVE SERVICES ONLY
(GPASO) HEALTH SCHEME
PENSIONER INFORMATION FORM**

Pensioner's Name: _____
FIRST NAME MIDDLE INITIAL MAIDEN NAME SURNAME

TRN: _____ - _____ - _____ Email Address: _____

DOB.: ____/____/____ GENDER: M ☐ F ☐ Mobile. No.: _____
MM DD YY

Current Mailing Address: _____

Name of Pension Pay Site: _____

POLICY/CARDHOLDER NO.: 0000920000 - _____ - _____ Pensioner's Number: _____

ELECTRONIC FUND TRANSFER – This will solely be used for the purpose of health claims payment:

BANK DATA	
Name of Commercial Bank:	
Name of Account Holder:	
Branch:	
Address of Bank:	
Account Number:	
Account Type:	Savings: <input type="checkbox"/> Chequing: <input type="checkbox"/>

Pensioner's Signature: _____

Date: _____
DD / MM / YYYY

Please return the completed form to:

Employee Welfare Management Unit, Strategic Human Resource Management Division,
Ministry of Finance & the Public Service, 30 National Heroes Circle, Kingston 4.

Email address: govhealthplans@mof.gov.jm

Tel. No: 876-932-5357



Government Pensioners' Administrative Services Only (GPASO) Information Sheet

HEALTH CARDS

- Protect your health plan by reporting lost/stolen/misplaced cards immediately via our Contact Centre at 876-929-8920-9 Option 3. We will issue a new card on completion of the Replacement Form and payment. The replacement cost per card is \$500.00.
- Do not lend your swipe cards for use for anyone other than yourself. Your health plan is based on you and is not transferable. To put it in perspective, if you allow others to use your health cards, you are in fact committing fraud. This type of fraud leads to termination from the GPASO Health Scheme and possible charges.
- You can coordinate your benefits, once you maintain an active status as a member/dependent. Please include the policy number(s) for each plan on your claim form and submit all cards for use at each Provider visit.

DEPENDENTS

- Dependent spouses can only be covered under one (1) Sagcor policy, as a dependent spouse. For dependent spouses who are found on multiple policies, as a dependent spouse, the individual will be contacted to select one policy to remain as a dependent spouse and will be terminated from all other policies they were reflected as a dependent spouse.

PRE AUTHORIZATION

- For all surgical/major medical procedures, a request for pre-authorization should be submitted at least two weeks prior to the elective surgery.
- Pre-authorization is not required for emergency service obtained overseas. When overseas, members are required to contact Global Medical Management Inc (GMMI) within 24-48 hours of the emergency (critical cases only - life and death emergencies only). Please see the FAQ for the definition of Overseas Emergency Services.

GMMI contact details are as follows:

(a copy of this can also be found on the back of your benefit card)

GMMI Toll Free Number:	855-705-8809
GMMI Local Number:	954-334-7029
Email address:	SagcorTeam@GMMI.com

CLAIMS









- The submission period for all claim(s) is 90 days (from the original date of service). Failure to submit the claim(s) within the 90 day period will result in the non-payment of the claims.
- When signing a claim form, ensure the Provider completes the form with your correct information, including the diagnosis, the card number and the amount you were required to pay if applicable. Claims can be submitted by email to slj_healthclaims@sagcor.com, in pdf format (a completed claim form, detailed breakdown of the services and the receipts reflect payment must be submitted, as one attachment).

WAITING PERIOD

- Please see below the waiting period for accessing your benefits:
 - (a) **Dental - Dental Prophylaxis (cleaning):** every 6 months & Examination: every 12 months
 - (b) **Optical - Lens:** every 12 months, Frames: every 24 months & Examination: every 12 months
 - For optical and dental services, the waiting periods are applied based on your last date of service.
 - (c) **Major Medical/Surgical/Hospitalization:** 7 months from the effective date of the enrollment and commencement of deductions.

Government Pensioners' Administrative Services Only (GPASO) Health Scheme

Schedule of Benefits for Pensioners & their Dependents - Effective December 1, 2025
(DECEMBER 2025 - NOVEMBER 2028)

MAJOR MEDICAL (MM) per person, per contract year		J\$
 PRE-AUTHORIZATION REQUIRED, EXCEPT FOR EMERGENCY		
Room & Board (per day, max. 120 days per disability)		\$1,000
Radiotherapy (per contract year)		80% of Cost (max of \$200,000)
Chemotherapy (per contract year)		80% of Cost (max of \$400,000)
Renal Dialysis (2 sessions per week, per year)		80% of R&C (max of \$12,000 per session)
 HOSPITAL SERVICES (per contract year)		
Room & Board (max per day) max 120 days per disability		\$2,500
Hospital Miscellaneous (max. per disability)		\$20,000
Hospital Out-patient Services (max. per disability)		\$8,000
Intensive Care and/or Critical Care (per day, max. 5 days per disability)		\$25,000
Private Duty Nurse (referral - per 8 hours shift, max 15 shifts per disability)		\$2,000
Ambulance per trip (max. per round trip)		\$6,000
In-hospital visit (per day, max. 120 per disability)		\$1,500
 SURGICAL BENEFITS per person, per surgery and subject to R&C		
Surgeon's fee (up to)		\$45,000 + MM
Assistant Surgeon's Fee (40% of Surgeon's fee)		\$20,000 + MM
Anesthetist (40% of Surgeon's fee)		\$20,000 + MM
 LIFETIME MAXIMUM (LOCAL) per person		
Maximum per claim		\$2,500,000
Deductible (per disability)		\$750,000
 FULLHOUSE BENEFITS (Combined Benefit for pensioner & their dependent)		
Prescription Drugs, Optical and Dental (20% co-payment)		
Individual		\$35,000
Family		\$60,000
 DOCTOR'S VISIT per person, per contract year		
Home Visit (per visit, emergency only)		\$1,700
Office Visit (per visit)		\$1,700
Consultation Visit (per visit, 4 visits per contract year)		\$3,000
Specialist's Visit (per visit, max. 5 visits per contract year)		\$2,500
Physiotherapy (per visit, max. 10 sessions)		80% of cost up to \$2,000
Chiropractor and/or Podiatrist (per visit, max. 4 visits per contract year)		\$2,500
 DIAGNOSTIC SERVICES per person, per contract year		
Mass Screening services are not covered		
Lab, X-ray & ECG/EKG		\$10,000 + MM
MRI, CT SCAN & Ultrasound		80% of R&C
 OVERSEAS EMERGENCY Pensioner Only		
Per trip for 30 days (maximum ONCE per annum)		US\$100,000
Contact GMMI within 48 hours of the emergency		
Contact information located on the back of your benefit card		