

2026 Commercial Group Benefit Changes and Clarification

Benefit changes and clarification that will be implemented to commercial plans for 2026. These changes are effective for plans effective or renewing beginning October 1, 2025, unless stated otherwise.

Guam Medical Plan Changes:

- Coverage for oxygen including necessary supplies provided part of the approved home health treatment and/or Durable Medical Equipment (DME) benefits; and
- Health Savings Account ("HSA") qualified High Deductible Health Plans ("HDHP") individual and family deductible will increase to \$1,700 and \$3,400 respectively.

CNMI Medical Plan Changes:

- Coverage for oxygen including necessary supplies provided part of the approved home health treatment and/or Durable Medical Equipment (DME) benefits;
- Coverage for allergy testing up to \$500 per eligible member per benefit year; and
- Health Savings Account ("HSA") qualified High Deductible Health Plans ("HDHP") individual and family deductible will increase to \$1,700 and \$3,400 respectively.

Guam and CNMI Dental Plans

• Coverage for dental emergency services.

Travel Benefit

• Now includes Philippines, Taiwan and South Korea

Benefit Clarification for Medical Plans:

- If a deductible applies within the network, the benefit is subject to the deductible unless otherwise specified.
- Applicable and separate member share applies to diagnostic services and procedures in an emergency room setting in addition to the emergency room care services member share.

Benefit Clarification for Dental Plans:

- Dental services are covered in the Philippines without any applicable copayment and/or co-insurance subject to the benefit maximum limitation
- Orthodontic benefits are equally paid during the active treatment period
 while the member is still eligible under the TakeCare plan. An orthodontic
 treatment plan together with a valid payment receipt for the treatment must
 be submitted with the reimbursement form to be eligible for coverage.

Supplemental Plan Changes:

- Massage benefit is covered up to 12, 15, or 20 visits per eligible member per benefit year based on the eligible member's plan coverage. The monthly benefit limitation was eliminated.
- Organ transplant is covered in the Philippines without any applicable copayment and/or co-insurance subject to any applicable deductible and benefit maximum limitation.
- End Stage Renal Disease ("ESRD") treatment requires Prior Authorization ("PA") every effective/renewal date of the eligible member's coverage plan.





