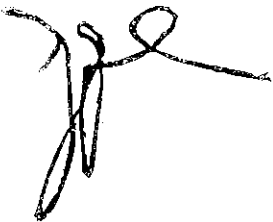


Appendix C-3



APPENDIX C (3)

Immunization Certification

The following services are not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH)

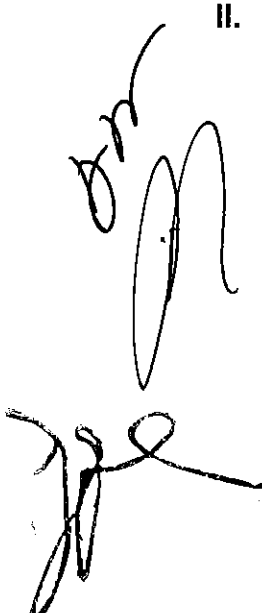
Product Platino Identification: Platino Plus 024

I. ¹Vaccines for children from 0-20 years of age (inclusive)

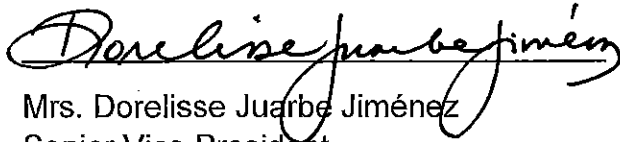
- Hepatitis B
- Rotavirus (RV)
- DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
- HIB (Vacuna conjugada HIB)
- PCV13 Y PPSV23 (Vacunas antineumocócicas)
- Polio (IPV)
- ²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
- MMR
- Varicela (VAR)
- Hepatitis A
- Vacunas Antimeningocócicas - Hib-MenCY [MenHibrix], MenACWY-D [Menactra], MenACWY-CRM (Menveo) MenB (Meningeococos serogrupo B Men B -4C [Bexserol] y Men B- FHbp [Trumenba]
- Tdap
- Virus Papiloma Humano (VPH)

II. Vaccines for adults from 21 > 65 years of age

- ²Influenza
- Td /Tdap (Tetanus Disphtheria, Pertusis)
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)
- Neumococo 13 Conjugada (PCV13)
- Meningococo
- Hepatitis A
- Hepatitis B



These benefits are subject to change, according to final CMS approval and following the Medicare annual calendar.



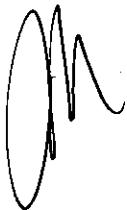
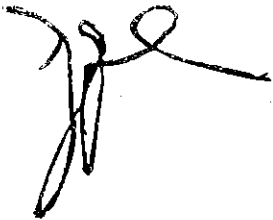
Mrs. Dorelisse Juarbe Jiménez
Senior Vice President
Triple-S Advantage, Inc.

6/4/2019

Date

¹The MAO should consult Public Policy documents regarding vaccination and immunization guidelines recommended detailed

²View Recommends influenza vaccination 2017-2018



APPENDIX C (3)

Immunization Certification

The following services are not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH)

Product Platino Identification: Platino Ultra 025

I. ¹Vaccines for children from 0-20 years of age (inclusive)

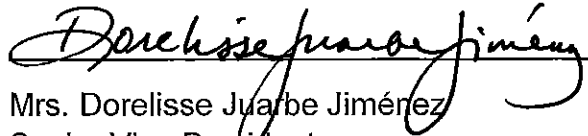
- Hepatitis B
- Rotavirus (RV)
- DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
- HIB (Vacuna conjugada HIB)
- PCV13 Y PPSV23 (Vacunas antineumocólicas)
- Polio (IPV)
- ²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
- MMR
- Varicela (VAR)
- Hepatitis A
- Vacunas Antimeningocólicas - Hib-MenCY [MenHibrix], MenACWY-D [Menactra], MenACWY-CRM (Menveo) MenB (Meningococos serogrupo B Men B -4C [Bexserol] y Men B- FHbp [Trumenba]
- Tdap
- Virus Papiloma Humano (VPH)

II. Vaccines for adults from 21 > 65 years of age

- ²Influenza
- Td /Tdap (Tetanus Dispteria, Pertusis
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)
- Neumococo 13 Conjugada (PCV13)
- Meningococo
- Hepatitis A
- Hepatitis B



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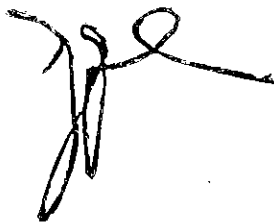
Mrs. Dorelisse Juarbe Jimenez
Senior Vice President
Triple-S Advantage, Inc.

6/4/2019

Date

¹The MAO should consult Public Policy documents regarding vaccination and immunization guidelines recommended detailed

²View Recommends influenza vaccination 2017-2018



APPENDIX C (3)

Immunization Certification

The following services are not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH)

Product Platino Identification: Platino Advance 026

I. ¹Vaccines for children from 0-20 years of age (inclusive)

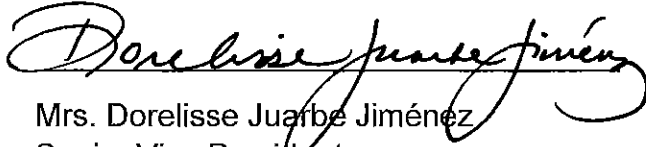
Hepatitis B
Rotavirus (RV)
DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
HIB (Vacuna conjugada HIB)
PCV13 Y PPSV23 (Vacunas antineumocócicas)
Polio (IPV)
²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
MMR
Varicela (VAR)
Hepatitis A
Vacunas Antimeningocócicas - Hib-MenCY [MenHibrix], MenACWY-D [Menactra], MenACWY-CRM (Menveo) MenB (Meningococos serogrupo B Men B -4C [Bexserol] y Men B- FHbp [Trumenba]
Tdap
Virus Papiloma Humano (VPH)

II. Vaccines for adults from 21 > 65 years of age

²Influenza
Td /Tdap (Tetanus Disphtheria, Pertusis)
Varicela
VPH Virus Papiloma Humano
Zoster
MMR
Neumococo Polisacárido (PPSV23)
Neumococo 13 Conjugada (PCV13)
Meningococo
Hepatitis A
Hepatitis B



These benefits are subject to change, according to final CMS approval and following the Medicare annual calendar.



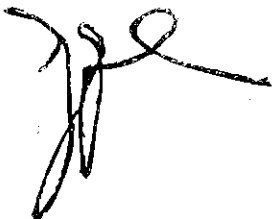
Mrs. Dorelisse Juarbe Jiménez
Senior Vice President
Triple-S Advantage, Inc.

6/4/2019

Date

¹The MAO should consult Public Policy documents regarding vaccination and immunization guidelines recommended detailed

²View Recommends influenza vaccination 2017-2018



APPENDIX C (3)

Immunization Certification

The following services are not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH)

Product Platino Identification: Platino Blindao 028

I. ¹Vaccines for children from 0-20 years of age (inclusive)

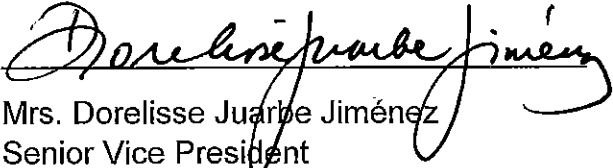
- Hepatitis B
- Rotavirus (RV)
- DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
- HIB (Vacuna conjugada HIB)
- PCV13 Y PPSV23 (Vacunas antineumocócicas)
- Polio (IPV)
- ²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
- MMR
- Varicela (VAR)
- Hepatitis A
- Vacunas Antimeningocócicas - Hib-MenCY [MenHibrix], MenACWY-D [Menactra], MenACWY-CRM (Menveo) MenB (Meningeococos serogrupo B Men B -4C [Bexserol] y Men B- FHbp [Trumenba]
- Tdap
- Virus Papiloma Humano (VPH)

II. Vaccines for adults from 21 > 65 years of age

- ²Influenza
- Td /Tdap (Tetanus Disphtheria, Pertusis)
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)
- Neumococo 13 Conjugada (PCV13)
- Meningococo
- Hepatitis A
- Hepatitis B



These benefits are subject to change, according to final CMS approval and following the Medicare annual calendar.




Mrs. Dorelisse Juarbe Jiménez
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6/4/2019

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²View Recommends influenza vaccination 2017-2018



APPENDIX C (3)

Immunization Certification

The following services are not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH)

Product Platino Identification: Platino Enlace 032

I. ¹Vaccines for children from 0-20 years of age (inclusive)

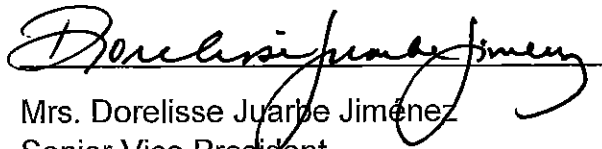
- Hepatitis B
- Rotavirus (RV)
- DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
- HIB (Vacuna conjugada HIB)
- PCV13 Y PPSV23 (Vacunas antineumocócicas)
- Polio (IPV)
- ²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
- MMR
- Varicela (VAR)
- Hepatitis A
- Vacunas Antimeningocócicas - Hib-MenCY [MenHibrix], MenACWY-D [Menactra], MenACWY-CRM (Menveo) MenB (Meningococos serogrupo B Men B -4C [Bexserol] y Men B- FHbp [Trumenba]
- Tdap
- Virus Papiloma Humano (VPH)

II. Vaccines for adults from 21 > 65 years of age

- ²Influenza
- Td /Tdap (Tetanus Disphtheria, Pertusis
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)
- Neumococo 13 Conjugada (PCV13)
- Meningococo
- Hepatitis A
- Hepatitis B



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Mrs. Dorelisse Juarbe Jimenez
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Triple-S Advantage, Inc.

6/4/2019

Date

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²View Recommends influenza vaccination 2017-2018

