

Appendix C-7



A handwritten signature in black ink, consisting of several loops and a long horizontal stroke extending to the right.

A handwritten signature in black ink, featuring a large loop on the left and a series of smaller loops on the right.

APPENDIX C (7)

Part C Supplementary Benefits Certification

I, Dorelisse Juarbe Jiménez as Senior VP of Operations, hereby certify that Triple-S Advantage, Inc. will be offering the following additional benefits not covered in the Wrap-Around 2020 to all members enrolled in:

Product Identification: Platino Plus 024

Description Benefits	Copay			
	100	110	120	130
Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Mental Health Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Worldwide Emergency / Urgent – The plan covers services Worldwide through reimbursement in accordance with Puerto Rico rates. Up to a \$75 coverage limit per incident.	\$0	\$0	\$0	\$0
Chiropractic Services – Routine chiropractic visit (for up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, includes the initial.	\$0	\$0	\$0	\$0
Outpatient Blood Services – Three (3) pint deductible waived.	\$0	\$0	\$0	\$0
Vision Benefit – One (1) routine eye exam every year. Up to \$850 each year for eyewear (frame and lenses) or contact lenses.	\$0	\$0	\$0	\$0
Comprehensive Dental Services – Maximum plan benefit coverage of \$2,500 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam. One (1) hearing aid fitting/evaluation every year. Up to \$2,000 every year for hearing aids.	\$0	\$0	\$0	\$0

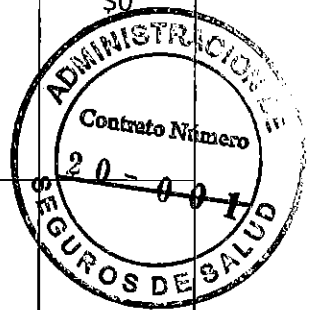
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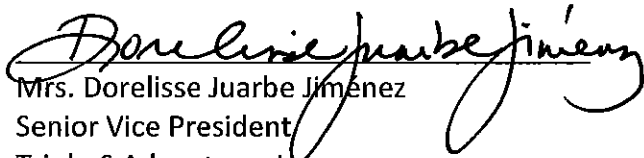
Teleconsulta – Nurse line for health consultations, available 24 hours, 7 days a week. If you are sick, hurt or need health related advice, the nursing professionals will offer you guidance to help you decide whether you should make a doctor’s appointment, visit an emergency room, or they will offer you self-care instructions to help alleviate your symptoms safely, in the comfort of your home.	\$0	\$0	\$0	\$0
Teleconsejo –Access to 24/7 orientation on emotional situations such as anxiety, emotional crisis, depression, life events such as loss of family members or friend, economic hardship or financial issues, among others. Health needs assessment on mental conditions and support to coordinate services or locate available community services. Coaching for developing treatment plans. Support in managing medications.	\$0	\$0	\$0	\$0
Health Education – this program provides health information and promotes healthier lifestyles. It includes interaction of qualified health professionals (health educators /Nutritionist) with you on specific disease conditions such as (but not limited to): hypertension, diabetes, congestive heart failure, and smoking/tobacco use. This program provides health education material, group interventions and telephone-based education on nutrition and weight management based on your health by health educators.	\$0	\$0	\$0	\$0
Alternative Medicine/Acupuncture – Up to twelve (12) combined visits every year.	\$0	\$0	\$0	\$0
Non- Emergency Transportation - Up to 24 one way trips every year. Other method of transportation, is available in an automobile through a contracted provider.	\$0	\$0	\$0	\$0
Nutritionist Visits – Up to 4 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
Erectile Dysfunction Drugs – Up to 6 pills per month of one of the following: <ul style="list-style-type: none"> • Sildenafil Citrate (25, 50 and 100mg) • Viagra (25, 50 and 100mg) • Cialis (10 and 20 mg) • Tadalafil (10 mg and 20 mg) 	\$0	\$0	\$0	\$0
OTC – \$75 every three months	\$0	\$0	\$0	\$0



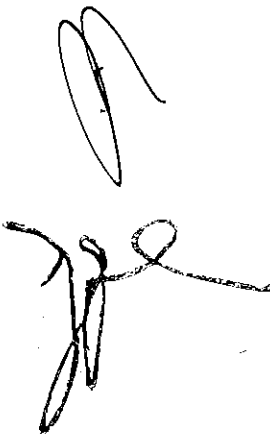
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These benefits are subject to change, according to final CMS approval and following the Medicare annual calendar.


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

6/4/2019
Date






APPENDIX C (7)

Part C Supplementary Benefits Certification

I, Dorelisse Juarbe Jiménez as Senior VP of Operations, hereby certify that Triple-S Advantage, Inc. will be offering the following additional benefits not covered in the Wrap-Around 2020 to all members enrolled in:

Product Identification: Platino Ultra 025

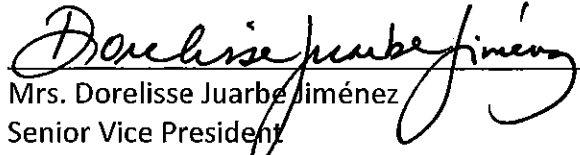
Description Benefits	Copay			
	100	110	120	130
Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Mental Health Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Worldwide Emergency / Urgent – The plan covers services Worldwide through reimbursement in accordance with Puerto Rico rates. Up to a \$75 coverage limit per incident.	\$0	\$0	\$0	\$0
Chiropractic Services – Routine chiropractic visit (for up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, includes the initial.	\$0	\$0	\$0	\$0
Outpatient Blood Services – Three (3) pint deductible waived.	\$0	\$0	\$0	\$0
Vision Benefit – One (1) routine eye exam every year. Up to \$1,000 each year for eyewear (frame and lenses) or contact lenses.	\$0	\$0	\$0	\$0
Comprehensive Dental Services – Maximum plan benefit coverage of \$3,000 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam. One (1) hearing aid fitting/evaluation every year. Up to \$2,000 every year for hearing aids.	\$0	\$0	\$0	\$0

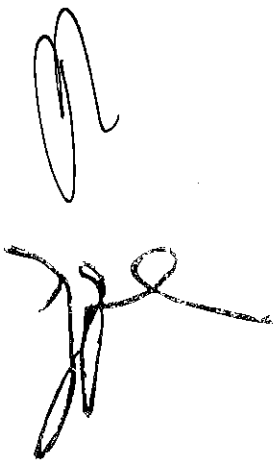

Teleconsulta – Nurse line for health consultations, available 24 hours, 7 days a week. If you are sick, hurt or need health related advice, the nursing professionals will offer you guidance to help you decide whether you should make a doctor’s appointment, visit an emergency room, or they will offer you self-care instructions to help alleviate your symptoms safely, in the comfort of your home.	\$0	\$0	\$0	\$0
Teleconsejo –Access to 24/7 orientation on emotional situations such as anxiety, emotional crisis, depression, life events such as loss of family members or friend, economic hardship or financial issues, among others. Health needs assessment on mental conditions and support to coordinate services or locate available community services. Coaching for developing treatment plans. Support in managing medications.	\$0	\$0	\$0	\$0
Health Education – this program provides health information and promotes healthier lifestyles. It includes interaction of qualified health professionals (health educators /Nutritionist) with you on specific disease conditions such as (but not limited to): hypertension, diabetes, congestive heart failure, and smoking/tobacco use. This program provides health education material, group interventions and telephone-based education on nutrition and weight management based on your health by health educators.	\$0	\$0	\$0	\$0
Alternative Medicine/Acupuncture – Up to twelve (12) combined visits every year.	\$0	\$0	\$0	\$0
Non- Emergency Transportation - Up to 24 one way trips every year. Other method of transportation, is available in an automobile through a contracted provider.	\$0	\$0	\$0	\$0
Nutritionist Visits – Up to 4 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
Erectile Dysfunction Drugs – Up to 6 pills per month of one of the following: <ul style="list-style-type: none"> • Sildenafil Citrate (25, 50 and 100mg) • Viagra (25, 50 and 100mg) • Cialis (10 and 20 mg) • Tadalafil (10 mg and 20 mg) 	\$0	\$0	\$0	\$0
OTC – \$75 every three months	\$0	\$0	\$0	\$0



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

6/4/2019
Date





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Part C Supplementary Benefits Certification

I, Dorelisse Juarbe Jiménez as Senior VP of Operations, hereby certify that Triple-S Advantage, Inc. will be offering the following additional benefits not covered in the Wrap-Around 2020 to all members enrolled in:

Product Identification: Platino Advance 026

Description Benefits	Copay			
	100	110	120	130
Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Mental Health Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Worldwide Emergency / Urgent – The plan covers services Worldwide through reimbursement in accordance with Puerto Rico rates. Up to a \$75 coverage limit per incident.	\$0	\$0	\$0	\$0
Chiropractic Services – Routine chiropractic visit (for up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, includes the initial.	\$0	\$0	\$0	\$0
Outpatient Blood Services – Three (3) pint deductible waived.	\$0	\$0	\$0	\$0
Vision Benefit – One (1) routine eye exam every year. Up to \$100 each year for eyewear (frame and lenses) or contact lenses.	\$0	\$0	\$0	\$0
Comprehensive Dental Services – Maximum plan benefit coverage of \$600 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam.	\$0	\$0	\$0	\$0

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Teleconsulta – Nurse line for health consultations, available 24 hours, 7 days a week. If you are sick, hurt or need health related advice, the nursing professionals will offer you guidance to help you decide whether you should make a doctor’s appointment, visit an emergency room, or they will offer you self-care instructions to help alleviate your symptoms safely, in the comfort of your home.	\$0	\$0	\$0	\$0
Teleconsejo –Access to 24/7 orientation on emotional situations such as anxiety, emotional crisis, depression, life events such as loss of family members or friend, economic hardship or financial issues, among others. Health needs assessment on mental conditions and support to coordinate services or locate available community services. Coaching for developing treatment plans. Support in managing medications.	\$0	\$0	\$0	\$0
Health Education – this program provides health information and promotes healthier lifestyles. It includes interaction of qualified health professionals (health educators /Nutritionist) with you on specific disease conditions such as (but not limited to): hypertension, diabetes, congestive heart failure, and smoking/tobacco use. This program provides health education material, group interventions and telephone-based education on nutrition and weight management based on your health by health educators.	\$0	\$0	\$0	\$0
Nutritionist Visits – Up to 4 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
Erectile Dysfunction Drugs – Up to 6 pills per month of one of the following: <ul style="list-style-type: none"> • Sildenafil Citrate (25, 50 and 100mg) • Viagra (25, 50 and 100mg) • Cialis (10 and 20 mg) • Tadalafil (10 mg and 20 mg) 	\$0	\$0	\$0	\$0

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

6/4/2019
 Date



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Part C Supplementary Benefits Certification

I, Dorelisse Juarbe Jiménez as Senior VP of Operations, hereby certify that Triple-S Advantage, Inc. will be offering the following additional benefits not covered in the Wrap-Around 2020 to all members enrolled in:

Product Identification: Platino Blindao 028

Description Benefits	Copay			
	100	110	120	130
Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Mental Health Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Worldwide Emergency / Urgent – The plan covers services Worldwide through reimbursement in accordance with Puerto Rico rates. Up to a \$75 coverage limit per incident.	\$0	\$0	\$0	\$0
Chiropractic Services – Routine chiropractic visit (for up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, includes the initial.	\$0	\$0	\$0	\$0
Outpatient Blood Services – Three (3) pint deductible waived.	\$0	\$0	\$0	\$0
Vision Benefit – One (1) routine eye exam every year. Up to \$500 each year for eyewear (frame and lenses) or contact lenses.	\$0	\$0	\$0	\$0
Comprehensive Dental Services – Maximum plan benefit coverage of \$1,500 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam. One (1) hearing aid fitting/evaluation every year. Up to \$1,500 every year for hearing aids.	\$0	\$0	\$0	\$0

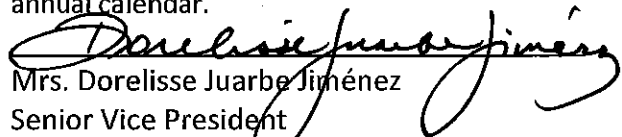
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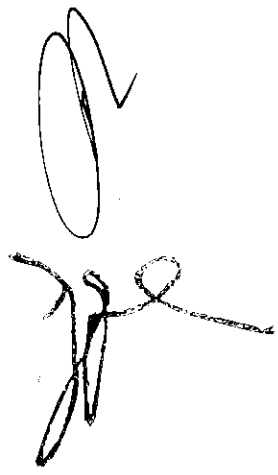
Teleconsulta – Nurse line for health consultations, available 24 hours, 7 days a week. If you are sick, hurt or need health related advice, the nursing professionals will offer you guidance to help you decide whether you should make a doctor’s appointment, visit an emergency room, or they will offer you self-care instructions to help alleviate your symptoms safely, in the comfort of your home.	\$0	\$0	\$0	\$0
Teleconsejo –Access to 24/7 orientation on emotional situations such as anxiety, emotional crisis, depression, life events such as loss of family members or friend, economic hardship or financial issues, among others. Health needs assessment on mental conditions and support to coordinate services or locate available community services. Coaching for developing treatment plans. Support in managing medications.	\$0	\$0	\$0	\$0
Health Education – this program provides health information and promotes healthier lifestyles. It includes interaction of qualified health professionals (health educators /Nutritionist) with you on specific disease conditions such as (but not limited to): hypertension, diabetes, congestive heart failure, and smoking/tobacco use. This program provides health education material, group interventions and telephone-based education on nutrition and weight management based on your health by health educators.	\$0	\$0	\$0	\$0
Alternative Medicine/Acupuncture – Up to twelve (12) combined visits every year.	\$0	\$0	\$0	\$0
Non- Emergency Transportation - Up to 20 one way trips every year. Other method of transportation, is available in an automobile through a contracted provider.	\$0	\$0	\$0	\$0
Nutritionist Visits – Up to 4 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
Erectile Dysfunction Drugs – Up to 6 pills per month of one of the following: <ul style="list-style-type: none"> • Sildenafil Citrate (25, 50 and 100mg) • Viagra (25, 50 and 100mg) • Cialis (10 and 20 mg) • Tadalafil (10 mg and 20 mg) 	\$0	\$0	\$0	\$0
OTC – \$40 every three months	\$0	\$0	\$0	\$0



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

6/4/2019
Date



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Part C Supplementary Benefits Certification

I, Dorelisse Juarbe Jiménez as Senior VP of Operations, hereby certify that Triple-S Advantage, Inc. will be offering the following additional benefits not covered in the Wrap-Around 2020 to all members enrolled in:

Product Identification: Platino Enlace 032

Description Benefits	Copay			
	100	110	120	130
Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Mental Health Hospitalization – The plan covers additional days to Medicare-covered services.	\$0	\$0	\$0	\$0
Worldwide Emergency / Urgent – The plan covers services Worldwide through reimbursement in accordance with Puerto Rico rates. Up to a \$75 coverage limit per incident.	\$0	\$0	\$0	\$0
Chiropractic Services – Routine chiropractic visit (for up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, includes the initial.	\$0	\$0	\$0	\$0
Outpatient Blood Services – Three (3) pint deductible waived.	\$0	\$0	\$0	\$0
Vision Benefit – One (1) routine eye exam every year. Up to \$200 each year for eyewear (frame and lenses) or contact lenses.	\$0	\$0	\$0	\$0
Comprehensive Dental Services – Maximum plan benefit coverage of \$1,000 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam. One (1) hearing aid fitting/evaluation every year. Up to \$500 every year for hearing aids.	\$0	\$0	\$0	\$0

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Teleconsulta – Nurse line for health consultations, available 24 hours, 7 days a week. If you are sick, hurt or need health related advice, the nursing professionals will offer you guidance to help you decide whether you should make a doctor’s appointment, visit an emergency room, or they will offer you self-care instructions to help alleviate your symptoms safely, in the comfort of your home.	\$0	\$0	\$0	\$0
Teleconsejo –Access to 24/7 orientation on emotional situations such as anxiety, emotional crisis, depression, life events such as loss of family members or friend, economic hardship or financial issues, among others. Health needs assessment on mental conditions and support to coordinate services or locate available community services. Coaching for developing treatment plans. Support in managing medications.	\$0	\$0	\$0	\$0
Health Education – this program provides health information and promotes healthier lifestyles. It includes interaction of qualified health professionals (health educators /Nutritionist) with you on specific disease conditions such as (but not limited to): hypertension, diabetes, congestive heart failure, and smoking/tobacco use. This program provides health education material, group interventions and telephone-based education on nutrition and weight management based on your health by health educators.	\$0	\$0	\$0	\$0
Alternative Medicine/Acupuncture – Up to twelve (12) combined visits every year.	\$0	\$0	\$0	\$0
Non- Emergency Transportation- Up to 18 one way trips every year. Other method of transportation, is available in an automobile through a contracted provider.	\$0	\$0	\$0	\$0
Nutritionist Visits – Up to 4 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
Erectile Dysfunction Drugs – Up to 6 pills per month of one of the following: <ul style="list-style-type: none"> • Sildenafil Citrate (25, 50 and 100mg) • Viagra (25, 50 and 100mg) • Cialis (10 and 20 mg) • Tadalafil (10 mg and 20 mg) 	\$0	\$0	\$0	\$0
OTC –\$250 every three months	\$0	\$0	\$0	\$0

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<p>In-Home Support / Home Help - Benefit consists in home support for activities of daily living such as: Help with bathing and with dressing, Transferring or mobility help in the home, Light housekeeping (cleaning, laundry, dishes), Meal preparation, Help with medication reminders. This benefit provides for an in-home health aide on activities of daily living due to health issues not otherwise covered under any other Medicare benefit. Covers up to 48 hours of care in a calendar year (maximum of four (4) hours per day for a maximum of 12 days in the calendar year). Benefit eligibility will be based on medical recommendation, and the following conditions: Post Inpatient stay with transition of care to patient's home, with Heart Failure (CHF), any class, Chronic Obstructive Pulmonary Disease (COPD), and Acute Stroke, Oncology Members with active chemo by infusion inpatient stay IP or Infusion Center.</p>	\$0	\$0	\$0	\$0
<p>Extended Care Package (La Ñapa)- Member may choose to add, at zero (\$0) extra cost, only one of the following supplemental benefits:</p> <ul style="list-style-type: none"> • Eyewear - Up to \$175 per year as an added allowance value to the standard supplemental eyewear benefit. Benefit follows the same restrictions as the standard supplemental benefit. • Transportation - Up to 12 trips per year as an added benefit to the standard supplemental benefit. Benefit follows the same restrictions as the standard supplemental benefit. • Dental - Up to \$500 per year as an added allowance value to the standard supplemental comprehensive dental benefit. Benefit follows the same restrictions as the standard supplemental benefit. • Hearing Aid- Up to \$1,000 per year as an added allowance value to the standard supplemental hearing aid benefit. Benefit follows the same restrictions as the standard supplemental benefit. • OTC - Up to \$25 every 3 months as an added allowance value to the standard supplemental OTC benefit. Benefit follows the same restrictions as the standard supplemental benefit. 	\$0	\$0	\$0	\$0

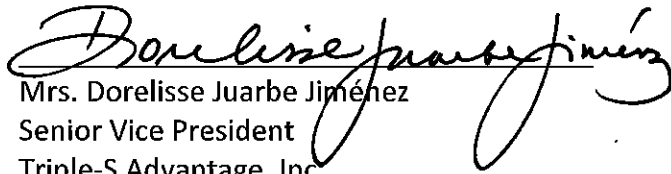
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Mrs. Dorelisse Juarbe Jiménez
Senior Vice President
Triple-S Advantage, Inc.

6/4/2019
Date

