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June 4, 2019

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I hereby certify that I am a Member of the American Academy of Actuaries. I am familiar with the requirements for preparing Medicare Advantage and Prescription Drug bid submissions and meet the Academy's qualification standards for doing so. These bid(s) have been prepared for the Centers for Medicare & Medicaid Services to approve a benefit plan under a contract in calendar year 2020 as identified below. The term "bid" in the context of this certification refers to the actuarial pricing of a benefit package (as submitted in the Bid Pricing Tool) for plans under contract number H5774 bids 024, 025, 026, 028 and 032.

I hereby certify that, to the best of my knowledge and judgment, the entire bid(s) identified in this certification are in compliance with the applicable laws<sup>1</sup>, rules<sup>2</sup>, CY2020 bid instructions, current CMS guidance, and also comply with the appropriate Actuarial Standards of Practice. In making this statement, I certify that:

- In accordance with Federal law, the bid(s) are based on the "average revenue requirements in the payment area for a Medicare Advantage/Prescription Drug enrollee with a national average risk profile."
- The data and assumptions used in the development of the bid(s) are reasonable for the plan's benefit package (PBP).
- The bid(s) were prepared in compliance with the current standards of practice as promulgated by the Actuarial Standards Board of the American Academy of Actuaries.

<sup>1</sup> Social Security Act Sections 1851 through 1859; and Social Security Act Sections 1860D-1 through 1860D-42.

<sup>2</sup> 42 CFR Parts 400, 403, 411, 417, 422, and 423.



In preparing these bid(s), I have reviewed any data and assumptions provided by reliancees for reasonableness and consistency, in compliance with ASOP No. 23. Information about the reliance on information provided by others has been uploaded with the bid(s) as supporting documentation.

The impact of unanticipated events subsequent to the date of this bid submission is beyond the scope of this certification.

In assisting with the preparation of these bid(s), I relied upon others for certain data, information and assumptions. I have performed no independent audit of this data or information. The data and information was checked for general reasonableness. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. Actual experience will not conform exactly to the assumptions used in this analysis. If actual experience is different from the assumptions used in the projections, the actual amounts will also deviate from the projected amounts.

In submitting the bid(s), we developed administrative expenses in compliance with GAAP accounting standards, as required by regulations and per CMS bid instructions.

This opinion covers Triple-S Advantage's bids for coverage of member's covered under the ASES Platino program for 2020. Triple-S Advantage holds a contract under plan number H5774 with the Centers for Medicare and Medicaid services. As of the date of this opinion this contract is in good standing.

We will provide confirmation of the CMS certification process as soon as the bid submission process is completed.



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