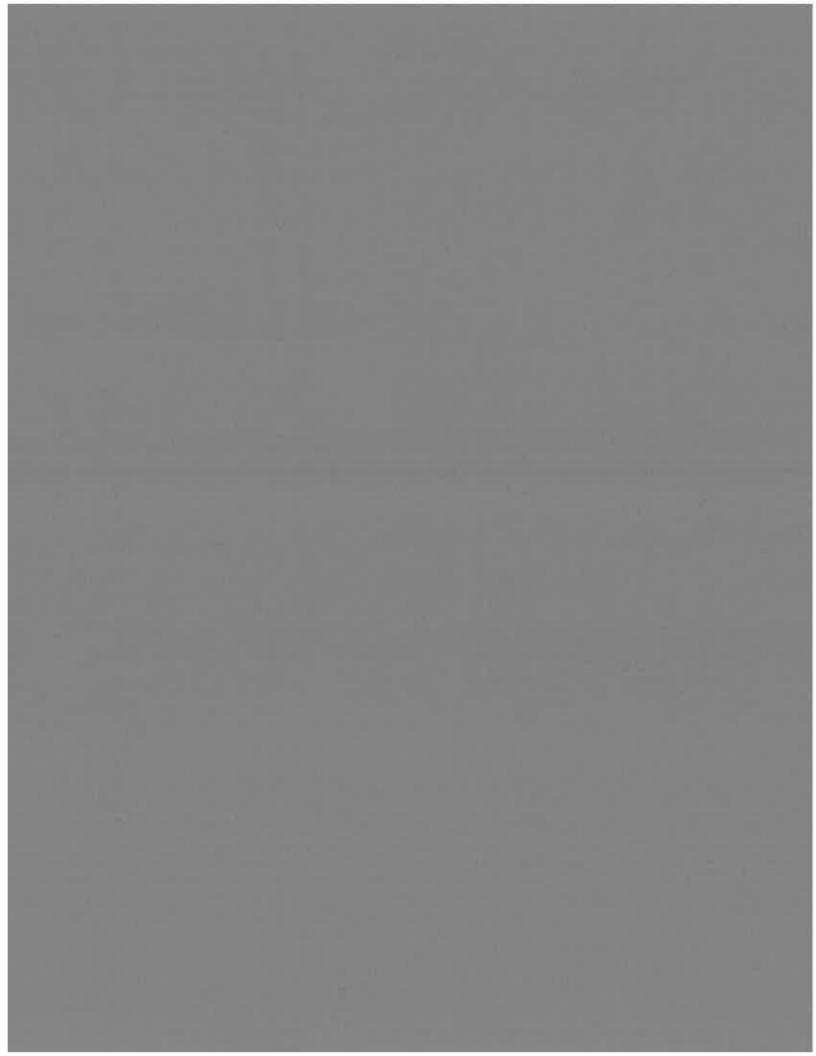
# MEDICARE PLATINO 2021

APPENDIX C (7) (21)
BENEFITS NOT-COVERED BY
WRAP AROUND



### Appendix C-7

Supplemental Benefits Certification (one certification per product)

PBP-H5577-002



#### **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u> as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>, <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

Product Identification: H5577 - 002

Description Banafita		Co	pay	
Description Benefits	100	110	120	130
1) Acupuncture	\$0	\$0	\$0	\$0
Limited to six (6) visits per year and must be ordered by a physician or a medical professional.				
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				
2) Therapeutic Massage	\$0	\$0	\$0	\$0
<ul> <li>Limited to six (6) visits per year and must be ordered by a physician or a medical professional.</li> </ul>				P. Contra
Additional visits are the enrollee's responsibility, and payable according to regular health care fees.				21 - m GURO
3) Foot Reflexology	\$0	\$0	\$0	\$0
<ul> <li>Limited to six (6) visits per year and must be ordered by a physician or a medical professional.</li> </ul>				
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				
4) Route to Wellness	\$0	\$0	\$0	\$0
We offer activities that promote social, emotional, intellectual, and				

Description Douglist	Сорау				
Description Benefits	100	110	120	130	
physical health to achieve a healthy balance quality of life. These include:					
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.					
Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.					
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.				OMINISTRA	
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.				Contrato Nú 21 - 0	
5) Healthy Welcome Program	\$0	\$0	\$0	\$0	
After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their					

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Deparintion Paratita		Co	pay	
Description Benefits	100	110	120	130
<ul> <li>physician.</li> <li>This service allows us to offers members the continuous and preventive care they need, according to their medical history.</li> <li>MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.</li> </ul>		71.70.70		
6) MCS En Alerta	\$0	\$0	\$0	\$0
Offers educational campaigns about safety measures regarding hurricanes, earthquakes, and other natural disasters, among other events. We provide health seminars, educational materials, media tours among others.				
7) Nutritional Benefit	\$0	\$0	\$0	\$0
<ul> <li>Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.</li> <li>Up to six (6) individual visits per year.</li> </ul>				
8) MCS Medilínea	\$0	\$0	\$0	\$0
This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions, drugs and their possible side effects, and lab			Contrato 21 -	0 3

D	Сорау					
Description Benefits	100	110	120	130		
results, among others.						
ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.						
) OTC Drugs	\$0	\$0	\$0	\$0		
\$50 every three months / \$200 per year						
No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.				Contrate 2 1		
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				MOURO		
0) Non-Emergency Transportation	\$0	\$0	\$0	\$0		
Twenty (20) one-way trips every year						
If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit cannot exceed the						

Description Bonefite		Co	pay	
Description Benefits	100	110	120	130
maximum number of twenty (20) one-way trips every year combined. See below the eligibility requirements.	3.00			
<ul> <li>People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.</li> </ul>				
<ul> <li>Benefit must be used for pre-approved locations and acquired through a plan- contracted supplier.</li> </ul>				
11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0
Coverage is managed through reimbursement based on different fee schedules allowed by our plan, less applicable member cost share.				
12) Chiropractic Services	\$0	\$0	\$0	\$0
<ul> <li>Routine care, six (6) visits every year</li> </ul>				
13) Outpatient Blood Services	\$0	\$0	\$0	\$0
<ul> <li>Three (3) pint deductible waived</li> </ul>				
14) Dental Services	\$0	\$0	\$0	\$0
MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, prosthodontics and oral surgery, \$2,500 plan maximum every year.			2 1	TRACION OF THE STATE OF THE STA
Dental implants and prostheses related to implants (including crowns) are covered.	0%-20%	0%-20%	0%-20%	0%-20%
Maxillofacial surgery is not covered under dental benefit. Maxillofacial				

Description BoneSte	Copay				
Description Benefits	100	110	120	130	
surgery is covered through medical surgery benefit.		111117			
<ul><li>15) Vision Care</li><li>One (1) routine eye exam</li></ul>	\$0	\$0	\$0	\$0	
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and frames); Eyeglass lenses;     Eyeglass frames); \$400     every year for supplemental eyewear					
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.					
16) Hearing Services	\$0	\$0	\$0	\$0	
One (1) routine hearing exam					
One (1) fitting/evaluation for hearing aid(s)				OWN STE	
Two (2) hearing aids every year; maximum plan coverage amount of \$2,000 every year for both ears combined.				Contrato 21 -	
Benefit and maximum plan coverage amount includes benefit for repair for devices.					
17) Food and Produce (healthy groceries) and Utilities	\$0	\$0	\$0	\$0	
This is a quarterly allowance of \$160 for groceries, electricity, water, phone, internet, and gas for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria.					

Deparintion Paradita		Col	pay	
Description Benefits	100	110	120	130
See below the eligibility requirements.				
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				
The maximum plan benefit coverage amount is for the following two (2) benefits, <u>combined</u> :				
o Food and Produce;				
o Utilities				
18) General Supports for Living	\$0	\$0	\$0	\$0
Home assistance services:     plumbing, electricity,     locksmith, pest control and     preventive home     cleaning/disinfection for     people that have been     diagnosed by a qualified     provider with certain chronic     conditions and meet certain     criteria. See below the     eligibility requirements.				
<ul> <li>Services are limited to eight (8) visits per year (two per quarter).</li> </ul>				
If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.				
19)Virtual medical visits	\$0	\$0	\$0	\$0
Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member has access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician. Virtual visits can be done by smartphone, computer or			OMINIST Contra 2 1	RACION ON O



Description Benefits	Copay		pay		
Description Benefits	100	110	120	130	
tablet.					
Additional telehealth services to receive medical attention for primary care physician services, physician specialist services, individual sessions for mental health specialty services and psychiatric services, and diabetes selfmanagement training.					

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

James P. O'Drobinak Chief Executive Officer

Date

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#### Eligibility requirements:

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

- 1. Chronic alcohol and other drug dependence;
- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder;
- 5. Chronic heart failure;
- 6. Dementia;



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- 7. Diabetes mellitus:
- 8. End-stage liver disease;
- 9. End-stage renal disease (ESRD) requiring dialysis;
- 10. Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplatic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS:
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension;
- 13. Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder:
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
- 15. Stroke.

This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee), but may not be present on the list."



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## PBP-H5577-017





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#### **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u> as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>. <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

Product Identification: <u>H5577 - 017</u>

Description Demotits		Со	рау	
Description Benefits	100	110	120	130
1) Acupuncture	\$0	\$0	\$0	\$0
Limited to six (6) visits per year and must be ordered by a physician or a medical professional.				
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				
2) Therapeutic Massage	\$0	\$0	\$0	\$0
Limited to six (6) visits per year and must be ordered by a physician or a medical professional.				On IMIS Centra
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				21 -
3) Foot Reflexology	\$0	\$0	\$0	\$0
Limited to six (6) visits per year and must be ordered by a physician or a medical professional.				
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				
4) Route to Wellness	\$0	\$0	\$0	\$0
We offer activities that promote social, emotional, intellectual, and				

	Сорау			
Description Benefits	100	110	120	130
hysical health to achieve a ealthy balance quality of life. hese include:				
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.				
Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.				
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.				INISTRACIO
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.			C. A.	Centrato Númer 2 1 - 0 0
Healthy Welcome Program     After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their physician.	\$0	\$0	\$0	\$0

Description Benefits	Copay				
Description Benefits	100	110	120	130	
<ul> <li>This service allows us to offers members the continuous and preventive care they need, according to their medical history.</li> <li>MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.</li> </ul>					
6) MCS En Alerta	<b>\$0</b>	\$0	\$0	\$0	
Offers educational campaigns about safety measures regarding hurricanes, earthquakes, and other natural disasters, among other events. We provide health seminars, educational materials, media tours among others.					
7) Nutritional Benefit	\$0	\$0	\$0	\$0	
<ul> <li>Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.</li> </ul>					
Up to six (6) individual visits per year.					
8) MCS Medilínea	\$0	\$0	\$0	\$0	
This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions, drugs and their possible			21	rate Número  - 0 0 3	

results, among others.  • Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilinea, available 24 hours a day, seven (7) days a week.  9) OTC Drugs  • \$75 every three months / \$300 per year  • No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.  • Maximum allotted quarterly amount does not roll over/accumulate from one	Description Description		Col	pay	
results, among others.  Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.  9) OTC Drugs \$0 \$0 \$0  \$75 every three months / \$300 per year  No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.	Description Benefits	100	110	120	130
ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.  8) OTC Drugs \$0 \$0 \$0  \$75 every three months / \$300 per year  No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.  Maximum allotted quarterly	results, among others.		53.5		
<ul> <li>\$75 every three months / \$300 per year</li> <li>No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.</li> <li>Maximum allotted quarterly</li> </ul>	ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day,				
<ul> <li>No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.</li> <li>Maximum allotted quarterly</li> </ul>	9) OTC Drugs	\$0	\$0	\$0	\$0
physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual- purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.  Maximum allotted quarterly					
	physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.  • Maximum allotted quarterly				21-0
	10) Non-Emergency Transportation	<b>\$</b> 0	\$0	\$0	\$0
	<ul> <li>Thirty-two (32) one-way trips every year</li> </ul>				
Transportation  Thirty-two (32) one-way	• If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit cannot exceed the				

Decemention Reposits	Copay					
Description Benefits	100	110	120	130		
maximum number of thirty- two (32) one-way trips every year combined. See below the eligibility requirements.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.=0			
People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.						
Benefit must be used for pre-approved locations and acquired through a plancontracted supplier.						
11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0		
Coverage is managed through reimbursement based on different fee schedules allowed by our plan, less applicable member cost share.						
12) Chiropractic Services	\$0	\$0	\$0	\$0		
Routine care, six (6) visits every year						
13) Outpatient Blood Services	\$0	\$0	\$0	\$0		
Three (3) pint deductible waived						
14) Dental Services	\$0	\$0	\$0	\$0		
MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, prosthodontics and oral surgery, \$3,000 plan maximum every year.			OMINISTR Contrato	Ussion U		
Dental implants and prostheses related to implants (including crowns) are covered.			OUROS	OESP OF		
Maxillofacial surgery is not covered under dental benefit. Maxillofacial			US	0.6		





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Description Benefits	100	110	120	130		
surgery is covered through medical surgery benefit.						
15) Vision Care	\$0	\$0	\$0	\$0		
One (1) routine eye exam						
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and frames); Eyeglass lenses;     Eyeglass frames);\$1,000     every year for supplemental eyewear						
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.						
16) Hearing Services	\$0	\$0	\$0	\$0		
One (1) routine hearing exam						
One (1) fitting/evaluation for hearing aid(s)				OMINISTRAC		
Two (2) hearing aids every year; maximum plan coverage amount of \$3,000 every year for both ears combined.				Contrate Núm		
Benefit and maximum plan coverage amount includes benefit for repair for devices.						
17) Food and Produce (healthy groceries) and Utilities	\$0	\$0	\$0	\$0		
This is a quarterly allowance of \$125 for groceries, electricity, water, phone, internet and gas for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria.						

Description Descrite	Copay				
Description Benefits	100	110	120	130	
See below the eligibility requirements.					
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.					
<ul> <li>The maximum plan benefit coverage amount is for the following two (2) benefits, <u>combined</u>:</li> </ul>					
o Food and Produce;					
<ul> <li>Utilities</li> </ul>					
18) General Supports for Living	\$0	\$0	\$0	\$0	
Home assistance services: plumbing, electricity, locksmith, pest control and preventive home cleaning/disinfection for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria. See below the eligibility requirements.					
Services are limited to eight (8) visits per year (two per quarter).					
If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.					
19)Virtual medical visits	\$0	\$0	\$0	\$0	
Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member has access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician.			Control 2 1	RAC/ON ON TO Número 0 0 3 ON S DE SE	

Description Populito		Col	рау	
Description Benefits	100	110	120	130
smartphone, computer or tablet.				
Additional telehealth     services to receive medical     attention for primary care     physician services,     physician specialist     services, individual sessions     for mental health specialty     services and psychiatric     services, and diabetes selfmanagement training.				

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

James/P. O'Drobinak Chief Executive Officer **Date** 

Contrato Número

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#### Eligibility requirements:

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

- 1. Chronic alcohol and other drug dependence;
- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- 4. Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder:
- 5. Chronic heart failure;



- 6. Dementia:
- 7. Diabetes mellitus;
- 8. End-stage liver disease;
- 9. End-stage renal disease (ESRD) requiring dialysis;
- 10. Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplastic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS:
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension;
- 13. Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder;
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
- 15. Stroke.

This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee), but may not be present on the list."







PBP-H5577-028



#### **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u>, as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>, <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

Product Identification: <u>H5577 - 028</u>

			Co	pay	
_	Pescription Benefits	100	110	120	130
1) A	cupuncture	\$0	\$0	\$0	\$0
y b	imited to six (6) visits per ear and must be ordered by a physician or a medical professional.				
e p	additional visits are the enrollee's responsibility, and eayable according to regular lealth care fees.				
2) 7	herapeutic Massage	\$0	\$0	\$0	\$0
y	imited to six (6) visits per ear and must be ordered by physician or a medical rofessional.				E CO
e	additional visits are the nrollee's responsibility, and ayable according to regular ealth care fees.				SECUP
3) F	Foot Reflexology	\$0	\$0	\$0	\$0
y	imited to six (6) visits per ear and must be ordered by physician or a medical rofessional.				
e p	additional visits are the inrollee's responsibility, and ayable according to regular ealth care fees.				
4) F	Route to Wellness	\$0	\$0	\$0	\$0
	r activities that promote emotional, intellectual, and				

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Description Benefits	100	110	120	130
physical health to achieve a healthy balance quality of life. These include:			1.25	V-27
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.				
Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.				
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.				
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.				Onthis Tours
5) Healthy Welcome Program	\$0	\$0	\$0	\$0
After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their				



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	Description Reposits		Co	pay	
	Description Benefits	100	110	120	130
•	physician. This service allows us to offers members the continuous and preventive care they need, according to their medical history. MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.				
Offers about hurrica natura events semin	MCS En Alerta s educational campaigns safety measures regarding anes, earthquakes, and other al disasters, among other s. We provide health hars, educational materials, a tours among others.	<b>\$0</b>	\$0	\$0	<b>\$0</b>
7)	Nutritional Benefit  Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.  Up to six (6) individual visits per year.	<b>\$0</b>	\$0	\$0	\$0
8)	This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions,	\$0	\$0	SMINIST Contrato	\$0  ACION DE SAN



December Develte	Copay					
Description Benefits	100	110	120	130		
side effects, and lab results, among others.						
Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.						
9) OTC Drugs	<b>\$0</b>	\$0	\$0	\$0		
\$40 every three months / \$160 per year						
<ul> <li>No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.</li> <li>Maximum allotted quarterly</li> </ul>				Centrato N		
amount does not roll over/accumulate from one term into the next.				SEGUROS		
10) Non-Emergency Transportation	\$0	\$0	\$0	\$0		
Ten (10) one-way trips every year						
If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit						

	Description Descrite		Co	рау	
	Description Benefits	100	110	120	130
	maximum number of ten (10) one-way trips every year combined. See below the eligibility requirements.				
	<ul> <li>People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.</li> </ul>				
	<ul> <li>Benefit must be used for pre-approved locations and acquired through a plan- contracted supplier.</li> </ul>				
	11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0
rein fee	verage is managed through nbursement based on different schedules allowed by our plan, s applicable member cost share.				
	12) Chiropractic Services	\$0	\$0	\$0	\$0
	<ul> <li>Routine care, six (6) visits every year</li> </ul>				
	13) Outpatient Blood Services	\$0	\$0	\$0	\$0
	<ul> <li>Three (3) pint deductible waived</li> </ul>				
	14) Dental Services	\$0	\$0	\$0	\$0
Y	<ul> <li>MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, prosthodontics and oral surgery, \$2,000 plan maximum every year.</li> </ul>			2 1	a Número  0 0 3
rela	ntal implants and prostheses ated to implants (including owns) are covered.	0%-30%	0%-30%	0%-30%	0%-30%
	xillofacial surgery is not covered der dental benefit. Maxillofacial				





Description Benefits		Co	pay	
Description Benefits	100	110	120	130
surgery is covered through medical surgery benefit.				
15) Vision Care	\$0	\$0	\$0	\$0
One (1) routine eye exam				
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and frames); Eyeglass lenses;     Eyeglass frames); \$300     every year for supplemental eyewear				
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.				
16) Hearing Services	\$0	\$0	\$0	\$0
One (1) routine hearing exam				
<ul> <li>One (1) fitting/evaluation for hearing aid(s)</li> </ul>				
Two (2) hearing aids every year; maximum plan coverage amount of \$2,500 every year for both ears combined.				Ontrato Contrato
<ul> <li>Benefit and maximum plan coverage amount includes benefit for repair for devices.</li> </ul>				SKGUROS
17) Food and Produce (healthy groceries) and Utilities	\$0	\$0	\$0	\$0
This is a quarterly allowance of \$60 for groceries, electricity, water, phone, internet, and gas for people that have been diagnosed by a qualified provider with certain chronic conditions				

Description Densite		Co	pay	
Description Benefits	100	110	120	130
and meet certain criteria. See below the eligibility requirements.				
<ul> <li>Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.</li> </ul>				
<ul> <li>The maximum plan benefit coverage amount is for the following two (2) benefits, <u>combined</u>:</li> </ul>				
<ul> <li>Food and Produce;</li> </ul>				
<ul> <li>Utilities</li> </ul>				
18) General Supports for Living	\$0	\$0	\$0	\$0
Home assistance services: plumbing, electricity, locksmith, pest control and preventive home cleaning/disinfection for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria. See below the eligibility requirements.				
<ul> <li>Services are limited to eight (8) visits per year (two per quarter).</li> </ul>				
<ul> <li>If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.</li> </ul>				
19)Virtual medical visits	\$0	\$0	\$0	\$0
<ul> <li>Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member have access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician.</li> <li>Virtual visits can be done by</li> </ul>			Contrate 2 1	Número DE SE

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Department Panefite		Co	pay	
Description Benefits	100	110	120	130
smartphone, computer or tablet.				
Additional telehealth     services to receive medical     attention for primary care     physician services,     physician specialist     services, individual sessions     for mental health specialty     services and psychiatric     services, and diabetes selfmanagement training.				

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

James P. O'Drobinak Chief Executive Officer Date

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Contrato Número

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## Eligibility requirements:

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

- 1. Chronic alcohol and other drug dependence;
- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- 4. Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder:



- 5. Chronic heart failure:
- 6. Dementia;
- 7. Diabetes mellitus:
- End-stage liver disease;
- End-stage renal disease (ESRD) requiring dialysis;
- Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplastic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS;
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension;
- 13. Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder;
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
- 15. Stroke.

This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee), but may not be present on the list."



PBP-H5577-029



# **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u> as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>, <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

**Product Identification: H5577 – 029** 

Description Reposite		Co	pay	
Description Benefits	100 110		120	130
Limited to six (6) visits per year and must be ordered by a physician or a medical professional.	\$0	\$0	\$0	\$0
<ul> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>				
<ul> <li>2) Therapeutic Massage</li> <li>Limited to six (6) visits per year and must be ordered by a physician or a medical professional.</li> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>	<b>\$0</b>	\$0	\$0	\$0
<ul> <li>3) Foot Reflexology</li> <li>Limited to six (6) visits per year and must be ordered by a physician or a medical professional.</li> <li>Additional visits are the enrollee's responsibility, and payable according to regular health care fees.</li> </ul>	\$0	\$0	\$0 Cont	TRACION DE TO Número  to Número  0 0 3 0
4) Route to Wellness We offer activities that promote social, emotional, intellectual, and	\$0	\$0	\$0	\$0

	Copay			
Description Benefits	100	110	120	130
physical health to achieve a healthy balance quality of life. These include:		3,034		
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.				
<ul> <li>Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.</li> </ul>				
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.				
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.			(	Contrato Número O O O O O O O O O O O O O O O O O O O
5) Healthy Welcome Program	\$0	\$0	\$0	\$0
After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their			M	

Description Panelite		Co	pay	
Description Benefits	100	110	120	130
<ul> <li>physician.</li> <li>This service allows us to offers members the continuous and preventive care they need, according to their medical history.</li> <li>MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.</li> </ul>				
6) MCS En Alerta	\$0	\$0	\$0	\$0
Offers educational campaigns about safety measures regarding hurricanes, earthquakes, and other natural disasters, among other events. We provide health seminars, educational materials, media tours among others.				
7) Nutritional Benefit	\$0	\$0	\$0	\$0
<ul> <li>Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.</li> <li>Up to six (6) individual visits per year.</li> </ul>				
8) MCS Medilínea	\$0	\$0	\$0	\$0
This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions, drugs and their possible side effects, and lab			Contrate Con	ACION DR Número 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0



Description Descripts		Co	pay	
Description Benefits	100	110	120	130
results, among others.				
Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.				
9) OTC Drugs	\$0	\$0	\$0	\$0
<ul><li>\$20 every three months / \$80 per year</li></ul>				
<ul> <li>No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.</li> <li>Maximum allotted quarterly</li> </ul>			9	Contrato Núme
amount does not roll over/accumulate from one term into the next.				CUROSDE
10) Non-Emergency Transportation	\$0	\$0	\$0	\$0
<ul> <li>Six (6) one-way trips every year</li> </ul>				
If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit				

Description Description		Co	pay	
Description Benefits	100	110	120	130
maximum number of six (6) one-way trips every year combined. See below the eligibility requirements.				
People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.				
Benefit must be used for pre-approved locations and acquired through a plancontracted supplier.				
11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0
Coverage is managed through reimbursement based on different fee schedules allowed by our plan, less applicable member cost share.				
12) Chiropractic Services	\$0	\$0	\$0	\$0
Routine care, six (6) visits every year				
13) Outpatient Blood Services	\$0	\$0	\$0	\$0
Three (3) pint deductible waived				
14) Dental Services	\$0	\$0	\$0	\$0
MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, and oral surgery, \$2,000 plan maximum every year.			MINIST	RACION DE
mplants and prostheses related to mplants are not covered.			2.1 -	Número M
Prosthodontics are not covered.			10 TO	107
Maxillofacial surgery is not covered under dental benefit. Maxillofacial			CURO.	SDESA





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Description Banefite	Copay				
Description Benefits	100	110	120	130	
urgery is covered through medical urgery benefit.		10112			
15) Vision Care	\$0	\$0	\$0	\$0	
One (1) routine eye exam					
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and frames); Eyeglass lenses;     Eyeglass frames); \$200     every year for supplemental eyewear					
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.					
16) Hearing Services	\$0	\$0	\$0	\$0	
One (1) routine hearing exam					
<ul> <li>One (1) fitting/evaluation for hearing aid(s)</li> </ul>					
Two (2) hearing aids every year; maximum plan coverage amount of \$1,000 every year for both ears combined.				SMINISTRA Contrato Nu	
Benefit and maximum plan coverage amount includes benefit for repair for devices.				21 - 0 POS	
17) General Supports for Living	\$0	\$0	\$0	\$0	
Home assistance services:     plumbing, electricity,     locksmith, pest control and     preventive home     cleaning/disinfection for     people that have been     diagnosed by a qualified					

Description Panelita		Col	pay	
Description Benefits	100	110	120	130
provider with certain chronic conditions and meet certain criteria. See below the eligibility requirements.				
Services are limited to eight (8) visits per year (two per quarter).				
If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.				
18)Virtual medical visits	\$0	\$0	\$0	\$0
Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member has access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician.  Virtual visits can be done by smartphone, computer or tablet.				
Additional telehealth     services to receive medical     attention for primary care     physician services,     physician specialist     services, individual sessions     for mental health specialty     services and psychiatric     services, and diabetes selfmanagement training.			(2 1	sTRACION trato Número - 0 0 3

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

Jim O'Drobinak

**Chief Executive Officer** 

Date

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#### **Eligibility requirements:**

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

- 1. Chronic alcohol and other drug dependence;
- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery OMNISTRACION disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder;
- Chronic heart failure;
- 6. Dementia:
- 7. Diabetes mellitus;
- End-stage liver disease;
- End-stage renal disease (ESRD) requiring dialysis;
- 10. Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplastic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS;
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension:
- 13. Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder:
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
- 15. Stroke.

This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee). but may not be present on the list."

Contrato Número

PBP-H5577-036



### **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u> as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>. <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

Product Identification: <u>H5577 - 036</u>

	Description Populita		Co	pay	
	Description Benefits	100	110	120	130
1)	Acupuncture  Limited to six (6) visits per year and must be ordered by a physician or a medical professional.  Additional visits are the	\$0	\$0	\$0	\$0
	enrollee's responsibility, and payable according to regular health care fees.				
2)	Therapeutic Massage	\$0	\$0	\$0	\$0
•	Limited to six (6) visits per year and must be ordered by a physician or a medical professional.				
• •	Additional visits are the enrollee's responsibility, and payable according to regular health care fees.				
3)	Foot Reflexology	\$0	\$0	\$0	\$0
•	Limited to six (6) visits per year and must be ordered by a physician or a medical professional.			DMINIS Contr	TRACION ON THE RESERVE OF THE PROPERTY OF T
•	Additional visits are the enrollee's responsibility, and payable according to regular health care fees.			2000	SDESA
We of	Route to Wellness  ffer activities that promote I, emotional, intellectual, and	\$0	\$0	\$0	\$0





Desired C. D. C.	Сорау				
Description Benefits	100	110	120	130	
chysical health to achieve a nealthy balance quality of life. These include:		Tall-			
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.					
Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.					
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.					
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.				Contrato Núm 2 1 - 0 0	
Healthy Welcome Program     After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their physician.	\$0	\$0	\$0	\$0	

Danielia - Banelia		Co	pay	
Description Benefits	100	110	120	130
<ul> <li>This service allows us to offers members the continuous and preventive care they need, according to their medical history.</li> <li>MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.</li> </ul>				
6) MCS En Alerta	\$0	\$0	\$0	\$0
Offers educational campaigns about safety measures regarding hurricanes, earthquakes, and other natural disasters, among other events. We provide health seminars, educational materials, media tours among others.				
7) Nutritional Benefit	\$0	\$0	\$0	\$0
<ul> <li>Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.</li> </ul>				
Up to six (6) individual visits per year.				
8) MCS Medilínea	\$0	\$0	\$0	\$0
This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions, drugs and their possible side effects, and lab			Contrate (2)	RACION OFFI





Description Descrite	Сорау					
Description Benefits	100	110	120	130		
results, among others.						
Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.						
9) OTC Drugs	\$0	\$0	\$0	\$0		
\$60 every three months / \$240 per year						
No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.				Contrato Núm 2 1 - 0 0		
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				SE LAOS DE		
10) Non-Emergency Transportation	\$0	\$0	\$0	\$0		
Fifty-two (52) one-way trips every year						
If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit						

Description Panalita		Co	pay		
Description Benefits	100	110	120	130	
maximum number of fifty- two (52) one-way trips every year combined. See below the eligibility requirements.					
People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.					
Benefit must be used for pre-approved locations and acquired through a plancontracted supplier.					
11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0	
Coverage is managed through eimbursement based on different ee schedules allowed by our plan, ess applicable member cost share.					
12) Chiropractic Services	\$0	\$0	\$0	\$0	
Routine care, six (6) visits every year					
13) Outpatient Blood Services	\$0	\$0	\$0	\$0	
Three (3) pint deductible waived					
14) Dental Services	\$0	\$0	\$0	\$0	
MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, prosthodontics and oral surgery, \$2,000 plan maximum every year.			On NISTR	ACION On lúmero	
Dental implants and prostheses or crowns related to implants (including crowns) are covered.			21 -	0 0 3	
Maxillofacial surgery is not covered under dental benefit. Maxillofacial			TOS	DF	





Depointion Bouefite	7	Co	pay	
Description Benefits	100	110	120	130
urgery is covered through medical urgery benefit.				
15) Vision Care	\$0	\$0	\$0	\$0
One (1) routine eye exam				
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and     frames); Eyeglass lenses;     Eyeglass frames);\$600     every year for supplemental     eyewear				
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.				
16) Hearing Services	\$0	\$0	\$0	\$0
One (1) routine hearing exam				
<ul> <li>One (1) fitting/evaluation for hearing aid(s)</li> </ul>				
Two (2) hearing aids every year; maximum plan coverage amount of \$2,500 every year for both ears combined.			(	MINISTRACI  Contrato Núm  2 1 - 0 0
Benefit and maximum plan coverage amount includes benefit for repair for devices.				ROSD
17) Food and Produce (healthy groceries) and Utilities	\$0	\$0	\$0	\$0
This is a quarterly allowance of \$300 for groceries, electricity, water, phone, internet, and gas for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria.				

Description Banefite		Co	pay	,
Description Benefits	100	110	120	130
See below the eligibility requirements.				
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				
<ul> <li>The maximum plan benefit coverage amount is for the following two (2) benefits, combined:</li> </ul>				
o Food and Produce;				
o Utilities				
18) General Supports for Living	\$0	\$0	\$0	\$0
Home assistance services:     plumbing, electricity,     locksmith, pest control and     preventive home     cleaning/disinfection for     people that have been     diagnosed by a qualified     provider with certain chronic     conditions and meet certain     criteria. See below the     eligibility requirements.				
Services are limited to eight (8) visits per year (two per quarter).				
If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.				
19)Virtual medical visits	\$0	\$0	\$0	\$0
Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member has access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician.  Virtual visits can be done by			2 1 -	RACION OR Número 0 0 3 S





Description Benefits		Co	pay	
	100	110	120	130
tablet.				
Additional telehealth     services to receive medical     attention for primary care     physician services,     physician specialist     services, individual sessions     for mental health specialty     services and psychiatric     services, and diabetes selfmanagement training.				

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

James P. O'Drobinak
Chief Executive Officer

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#### **Eligibility requirements:**

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

- 1. Chronic alcohol and other drug dependence;
- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- 4. Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder;

- 5. Chronic heart failure:
- 6. Dementia:
- 7. Diabetes mellitus;
- 8. End-stage liver disease;
- 9. End-stage renal disease (ESRD) requiring dialysis;
- 10. Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplastic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS;
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension;
- 13. Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder:
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
- 15. Stroke.

This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee), but may not be present on the list."





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PBP-H5577-037



### **APPENDIX C (7)**

#### **Part C Supplementary Benefits Certification**

I, <u>James P. O'Drobinak</u> as <u>Chief Executive Officer</u>, hereby certify that <u>MCS Advantage</u>. <u>Inc.</u>, will be offering the following additional benefits not covered in the Wrap-Around 2021 to all members enrolled in:

Product Identification: H5577 - 037

Description Bonefite		Со	рау	
Description Benefits	100	110	120	130
1) Acupuncture	\$0	\$0	\$0	\$0
<ul> <li>Limited to six (6) visits per year and must be ordered by a physician or a medica professional.</li> </ul>	ıl			
<ul> <li>Additional visits are the enrollee's responsibility, ar payable according to regul health care fees.</li> </ul>				
2) Therapeutic Massage	\$0	\$0	\$0	\$0
<ul> <li>Limited to six (6) visits per year and must be ordered in a physician or a medical professional.</li> </ul>	by			
<ul> <li>Additional visits are the enrollee's responsibility, ar payable according to regula health care fees.</li> </ul>				
3) Foot Reflexology	\$0	\$0	\$0	\$0
<ul> <li>Limited to six (6) visits per year and must be ordered a physician or a medical professional.</li> </ul>	by		STANUST Contrato	Número m
<ul> <li>Additional visits are the enrollee's responsibility, ar payable according to regul- health care fees.</li> </ul>			21 -	OE SAY
4) Route to Wellness	\$0	\$0	\$0	\$0
e offer activities that promote cial, emotional, intellectual, and	4			-/

Description Benefits		Co	pay	
Description Benefits	100	110	120	130
physical health to achieve a healthy balance quality of life. These include:				
Health lectures: Includes topics for Care Management such as chronic health conditions including diabetes, cardiovascular health, chronic kidney disease, respiratory conditions, bone health among others; preventive health which include mental health, health monitoring, nutrition and physical activity.				
<ul> <li>Preventive reminders: To promote healthy actions that leads to early detection and management of certain health conditions.</li> </ul>				
Support interventions:     Provide interventions to     improve quality of life in a     holistic approach. The topics     include financial education,     social services, hygiene,     gardening, arts among     others.				TRACIO
Exercise Program: This benefit allows members to participate in exercise sessions offered by certified fitness instructors, and other health professionals through which they will learn about concepts and techniques aimed at helping them maintain an active life. They will be able to participate in exercise sessions held at various places in the Island.			Cont	to Número  0 0 3
5) Healthy Welcome Program	\$0	\$0	\$0	\$0
After enrollment, members will receive a call to help them coordinate their first complete health evaluation appointment with their				





		Co	рау	
Description Benefits	100	110	120	130
<ul> <li>physician.</li> <li>This service allows us to offers members the continuous and preventive care they need, according to their medical history.</li> <li>MCS Classicare will help members establish an effective relationship with their physicians and become more involved in the decisions about their healthcare.</li> </ul>				
6) MCS En Alerta	\$0	\$0	\$0	\$0
Offers educational campaigns about safety measures regarding hurricanes, earthquakes, and other natural disasters, among other events. We provide health seminars, educational materials, media tours among others.				
7) Nutritional Benefit	\$0	\$0	\$0	\$0
<ul> <li>Personal evaluation and diet plan designed by a licensed dietitian according to the patient's health needs, including exercise suggestions.</li> <li>Up to six (6) individual visits</li> </ul>				
per year.				
8) MCS Medilínea	\$0	\$0	\$0	\$0
This is a free health consultation phone service staffed by registered nurses 24 hours a day, seven (7) days a week. This nursing staff, supported by physicians and specialized clinical personnel, offers practical help and guidance about common conditions, drugs and their possible side effects, and lab			Contrate 21	Número  Número  O 3  OE SE



Description Bonefite		Col	pay	
Description Benefits	100	110	120	130
results, among others.		241,3000		
Whenever members feel ill and don't know what they should do, have any doubts about the use of a drug, or have an emergency situation, they contact MCS Medilínea, available 24 hours a day, seven (7) days a week.				
9) OTC Drugs	\$0	\$0	\$0	\$0
• \$125 every month / \$1,500 per year				
No written note needed from physician to obtain OTC drugs or items, except for dual-purpose items, which could require a written note from physician or a verbal discussion with the enrollee's personal health care provider as a condition for purchase of eligible dual-purpose items. See Chapter 4, Section 40.4 of the Medicare Managed Care Manual for more information.				
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				
10) Non-Emergency Transportation	\$0	\$0	\$0	\$0
Twenty-four (24) one-way trips every year			USTDA	
If the member have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria, the member may use this benefit for medical and non-medical needs.  Transportation benefit		SE	Contrato Núm 21 - 00	10E



Description Benefits	Сорау			
	100	110	120	130
maximum number of twenty- four (24) one-way trips every year combined. See below the eligibility requirements.				
People who do not meet the eligibility requirements must use this benefit for medical needs purposes only.				
Benefit must be used for pre-approved locations and acquired through a plancontracted supplier.				
11) Worldwide Emergency/ Urgent Coverage	\$0	\$0	\$0	\$0
Coverage is managed through reimbursement based on different fee schedules allowed by our plan, less applicable member cost share.				
12) Chiropractic Services	\$0	\$0	\$0	\$0
Routine care, six (6) visits every year				
13) Outpatient Blood Services	\$0	\$0	\$0	\$0
Three (3) pint deductible waived				
14) Dental Services	\$0	\$0	\$0	\$0
MCS will cover the following services under the comprehensive dental benefit: non-routine, diagnostic, restorative, endodontics, periodontics, extractions, prosthodontics and oral surgery, \$2,000 plan maximum every year.			SMINIST	RACION ON
Dental implants and prostheses related to implants (including crowns) are covered.			21	Número   3   3   3   3   3   3   3   3   3
Maxillofacial surgery is not covered under dental benefit. Maxillofacial			URO	DESA





Description Benefits	Copay			
	100	110	120	130
surgery is covered through medical surgery benefit.				
15) Vision Care	\$0	\$0	\$0	\$0
One (1) routine eye exam				
Supplemental eyewear     (Contact lenses;     Eyeglasses (lenses and frames); Eyeglass lenses;     Eyeglass frames);\$500     every year for supplemental eyewear				
Eyewear benefit maximum amount includes repair of eyewear. Provider and/or member must verify remaining combined maximum plan benefit coverage amount available.				
16) Hearing Services	\$0	\$0	\$0	\$0
One (1) routine hearing exam				
One (1) fitting/evaluation for hearing aid(s)				
Two (2) hearing aids every year; maximum plan coverage amount of \$2,000 every year for both ears combined.				
Benefit and maximum plan coverage amount includes benefit for repair for devices.				
17) Food and Produce (healthy groceries) and Utilities	\$0	\$0	\$0	\$0
This is a quarterly allowance of \$80 for groceries, electricity, water, phone, internet, and gas for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria.	coal.		SE	00/



Description Benefits	Сорау			
Description Benefits	100	110	120	130
See below the eligibility requirements.				
Maximum allotted quarterly amount does not roll over/accumulate from one term into the next.				
<ul> <li>The maximum plan benefit coverage amount is for the following two (2) benefits, <u>combined</u>:</li> </ul>				
<ul> <li>Food and Produce;</li> </ul>				
<ul> <li>Utilities</li> </ul>				
18) General Supports for Living	\$0	\$0	\$0	\$0
Home assistance services: plumbing, electricity, locksmith, pest control and preventive home cleaning/disinfection for people that have been diagnosed by a qualified provider with certain chronic conditions and meet certain criteria. See below the eligibility requirements.				
<ul> <li>Services are limited to eight (8) visits per year (two per quarter).</li> </ul>				
If the full number of visits is not used in a trimester, the balance of visits is not carried over to be used in the next trimester.				
19)Virtual medical visits	\$0	\$0	\$0	\$0
Virtual medical consultation services to receive medical attention from anywhere within Puerto Rico 365 days a year. The member has access to health consultations, for a minor illness, with a family doctor, general practitioner, internist or licensed pediatrician. Virtual visits can be done by smartphone, computer or			Contrato Contrato	003





Description Benefits	Сорау			
	100	110	120	130
tablet.				
Additional telehealth services to receive medical attention for primary care physician services, physician specialist services, individual sessions for mental health specialty services and psychiatric services, and diabetes self- management training.				

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

James P. O'Drobinak Chief Executive Officer Date

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Disclaimers:

No referral required for services within the Special Network.



Eligibility requirements:

To be eligible for these additional benefits, the member must meet the following requirements: The member must have one or more comorbid and medically complex chronic conditions that are life-threatening or significantly limit her/his health or general functioning - see the list of applicable conditions below. In addition, the member must have a high risk of hospitalization or other adverse health outcomes; and must require intensive care coordination.

Eligible chronic conditions according to Chapter 16b of the Medicare Managed Care Manual:

1. Chronic alcohol and other drug dependence;

- 2. Autoimmune disorders limited to: Polyarteritis nodosa, Polymyalgia rheumatica, Polymyositis, Rheumatoid arthritis, and Systemic lupus erythematosus;
- 3. Cancer, excluding pre-cancer conditions or in-situ status;
- Cardiovascular disorders limited to: Cardiac arrhythmias, Coronary artery disease, Peripheral vascular disease, and Chronic venous thromboembolic disorder:
- 5. Chronic heart failure;
- Dementia;
- 7. Diabetes mellitus;
- End-stage liver disease;
- 9. End-stage renal disease (ESRD) requiring dialysis;
- 10. Severe hematologic disorders limited to: Aplastic anemia, Hemophilia, Immune thrombocytopenic purpura, Myelodysplastic syndrome, Sickle-cell disease (excluding sickle-cell trait), and Chronic venous thromboembolic disorder;
- 11. HIV/AIDS;
- 12. Chronic lung disorders limited to: Asthma, Chronic bronchitis, Emphysema, Pulmonary fibrosis, and Pulmonary hypertension;
- Chronic and disabling mental health conditions limited to: Bipolar disorders, Major depressive disorders, Paranoid disorder, Schizophrenia, and Schizoaffective disorder;
- 14. Neurologic disorders limited to: Amyotrophic lateral sclerosis (ALS), Epilepsy, Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia), Huntington's disease, Multiple sclerosis, Parkinson's disease, Polyneuropathy, Spinal stenosis, and Stroke-related neurologic deficit; and
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This list is not exhaustive. As explained in 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1): "Further, an MA plan may consider ANY chronic condition not identified on this list if that condition is life-threatening or significantly limits the overall health or function of the enrollee." CMS recognizes "that there may be some conditions or a subset of conditions in a plan population that may meet the statutory definition of a chronic condition (for purposes of the statutory definition of a chronically-ill enrollee), but may not be present on the list."



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