

MEDICARE PLATINO 2021

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

Appendix C-7



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 2021 to all members enrolled in:

Product Identification: Platino Plus H5774-024

Description of 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 / Urgency – 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 (up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, including 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 each year for hearing aids.	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
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 6 visits per year to a nutritionist for services not otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
OTC – \$75 every three months	\$0	\$0	\$0	\$0

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Description of Benefits	Copay			
	100	110	120	130
<p>In-Home Support / Home Help – Benefit consists of 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 (four (4) hours per day for a maximum of 12 days in the calendar year).</p> <p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient’s home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient’s home • Post Inpatient stay for Acute Stroke with transition of care to patient’s home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient’s home 	\$0	\$0	\$0	\$0
<p>Groceries and cleaning services card- With CMS’ flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will provide a groceries and cleaning services card of \$225 every three months to allow members to shop for groceries, pay for groceries delivery charges and thorough house cleaning services.</p> <p>Allowance is not cumulative and is restricted to the following 2 combined benefits:</p>	\$0	\$0	\$0	\$0

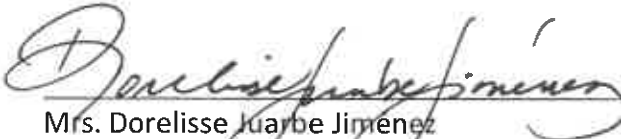


Description of Benefits	Copay			
	100	110	120	130
<ul style="list-style-type: none"> • Payment for thorough house cleaning performed by a contracted professional • Purchase of food and groceries delivery charges <p>Benefit will not include: Beer, wine, liquor, cigarettes, or tobacco Vitamins, medicines, and supplements Any nonfood items such as: Pet foods Cleaning supplies, paper products, and other household supplies. Hygiene items, cosmetics</p>				
<p>Transportation to Non-Health Related Destinations: With CMS' flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will allow these members to use their Non-Emergency Transportation described before for non-health related destinations.</p>	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services</p> <p>TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit</p>	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.	\$0	\$0	\$0	\$0
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services / Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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


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

04/01/2020
 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 2021 to all members enrolled in:

Product Identification: Platino Ultra H5774-025

Description of 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 / Urgency – 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 (up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, including 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 each year for hearing aids.	\$0	\$0	\$0	\$0




Description of Benefits	Copay			
	100	110	120	130
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 6 visits per year to a nutritionist for services not otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
OTC – \$75 every three months	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
<p>In-Home Support / Home Help – Benefit consists of 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 (four (4) hours per day for a maximum of 12 days in the calendar year).</p> <p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient’s home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient’s home • Post Inpatient stay for Acute Stroke with transition of care to patient’s home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient’s home 	\$0	\$0	\$0	\$0
<p>Groceries and cleaning services card- With CMS’ flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will provide a groceries and cleaning services card of \$225 every three months to allow members to shop for groceries, pay for groceries delivery charges and thorough house cleaning services.</p> <p>Allowance is not cumulative and is restricted to the following 2 combined benefits:</p>	\$0	\$0	\$0	\$0

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[Signature]

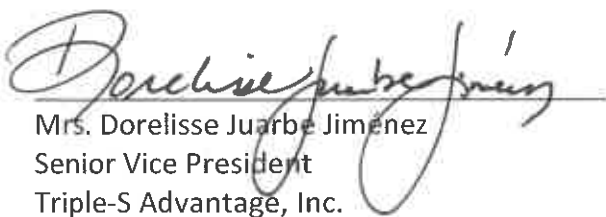


Description of Benefits	Copay			
	100	110	120	130
<ul style="list-style-type: none"> • Payment for thorough house cleaning performed by a contracted professional • Purchase of food and groceries delivery charges <p>Benefit will not include: Beer, wine, liquor, cigarettes, or tobacco Vitamins, medicines, and supplements Any nonfood items such as: Pet foods Cleaning supplies, paper products, and other household supplies. Hygiene items, cosmetics</p>				
<p>Transportation to Non-Health Related Destinations: With CMS' flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will allow these members to use their Non-Emergency Transportation described before for non-health related destinations.</p>	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services</p> <p>TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit</p>	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.	\$0	\$0	\$0	\$0
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services / Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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


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

06/01/2020
 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 2021 to all members enrolled in:

Product Identification: Platino Advance H5774-026

Description of 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 / Urgency – 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 (up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, including 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 \$1,000 every year.	\$0	\$0	\$0	\$0
Hearing Benefit – One (1) routine hearing exam.	\$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





Description of Benefits	Copay			
	100	110	120	130
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
Non-Emergency Transportation – Up to 10 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 6 visits per year to a nutritionist for services not otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
In-Home Support / Home Help – Benefit consists of 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 (four (4) hours per day for a maximum of 12 days in the calendar year).	\$0	\$0	\$0	\$0

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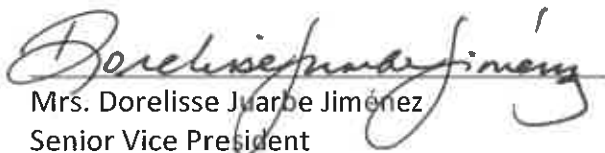



Description of Benefits	Copay			
	100	110	120	130
<p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient's home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient's home • Post Inpatient stay for Acute Stroke with transition of care to patient's home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient's home 				
<p>Value Based Insurance Design – Rebates Through the CMS VBID and with the Flexibility to Share Beneficiary Rebates Savings More Directly with Beneficiaries in the form of Cash or Monetary Rebates as a new mandatory supplemental benefit, Triple-S will provide a monthly monetary rebate of \$160 in the form of a debit card.</p>	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit</p>	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.	\$0	\$0	\$0	\$0
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services / Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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.

06/01/2020
 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 2021 to all members enrolled in:

Product Identification: Platino Blindao H5774-028

Description of 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 / Urgency – 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 (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 each year for hearing aids.	\$0	\$0	\$0	\$0

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Description of Benefits	Copay			
	100	110	120	130
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 6 visits per year to a nutritionist for services not otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
OTC – \$40 every three months	\$0	\$0	\$0	\$0



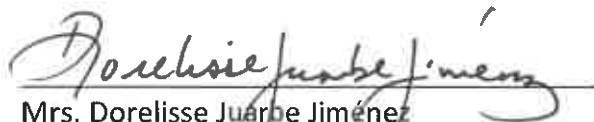
Description of Benefits	Copay			
	100	110	120	130
<p>In-Home Support / Home Help – Benefit consists of in-home support for activities of daily living such as: Help with bathing and with dressing, Transferring or mobility help in the home, Light housekeeping (cleaning, laundry, dishes), Meal preparation, 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 (four (4) hours per day for a maximum of 12 days in the calendar year).</p> <p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient’s home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient’s home • Post Inpatient stay for Acute Stroke with transition of care to patient’s home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient’s home 	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services</p> <p>TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA</p>	\$0	\$0	\$0	\$0

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Description of Benefits	Copay			
	100	110	120	130
will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit				
Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.	\$0	\$0	\$0	\$0
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services /Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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


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

6/2/2020
 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 2021 to all members enrolled in:

Product Identification: Platino Enlace H5774-032

Description of 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 / Urgency – 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 (up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, including 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 \$1,000 each year for hearing aids.	\$0	\$0	\$0	\$0




Description of Benefits	Copay			
	100	110	120	130
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 6 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
OTC – \$350 every three months	\$0	\$0	\$0	\$0



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Description of Benefits	Copay			
	100	110	120	130
<p>In-Home Support / Home Help – Benefit consists of 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 (four (4) hours per day for a maximum of 12 days in the calendar year).</p> <p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient’s home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient’s home • Post Inpatient stay for Acute Stroke with transition of care to patient’s home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient’s home 	\$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 \$150 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 18 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 \$1,500 per year as an added allowance value to the standard supplemental comprehensive dental benefit. 	\$0	\$0	\$0	\$0

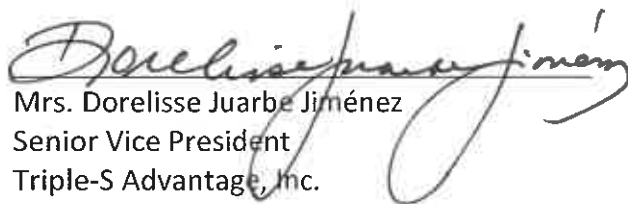


Description of Benefits	Copay			
	100	110	120	130
<p>Benefit follows the same restrictions as the standard supplemental benefit.</p> <ul style="list-style-type: none"> Hearing Aid - Up to \$1,500 per year as an added allowance value to the standard supplemental hearing aid benefit. Benefit follows the 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. 				
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services</p> <p>TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit</p>	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.</p>	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services /Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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.

06/01/2020
 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 2021 to all members enrolled in:

Product Identification: Platino Alcance H5774-035

Description of 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 / Urgency – 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 (up to 5 every year).	\$0	\$0	\$0	\$0
Podiatry – Routine foot care, up to four (4) visits per year, including 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 \$750 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 \$1,000 each year for hearing aids.	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
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 48 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 6 visits per year to a nutritionist for services not-otherwise covered by Original Medicare.	\$0	\$0	\$0	\$0
OTC – \$50 every three months	\$0	\$0	\$0	\$0

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Description of Benefits	Copay			
	100	110	120	130
<p>In-Home Support / Home Help – Benefit consists of 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 (four (4) hours per day for a maximum of 12 days in the calendar year).</p> <p>Benefit eligibility will be based on medical recommendation, and the following conditions:</p> <ul style="list-style-type: none"> • Post Inpatient stay for Heart Failure (CHF), any class with transition of care to patient’s home • Post Inpatient stay for Chronic Obstructive Pulmonary Disease (COPD), with transition of care to patient’s home • Post Inpatient stay for Acute Stroke with transition of care to patient’s home • Oncology Members with active chemo by infusion inpatient stay (IP) or infusion • Patients discharged from open heart surgery or hip surgery or knee surgery with transition of care to patient’s home 	\$0	\$0	\$0	\$0
<p>Groceries and cleaning services card- With CMS’ flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will provide a groceries and cleaning services card of \$375 every three months to allow members to shop for groceries, pay for groceries delivery charges and thorough house cleaning services.</p> <p>Allowance is not cumulative and is restricted to the following 2 combined benefits:</p>	\$0	\$0	\$0	\$0

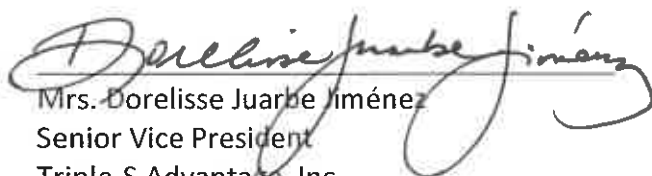


Description of Benefits	Copay			
	100	110	120	130
<ul style="list-style-type: none"> • Payment for thorough house cleaning performed by a contracted professional • Purchase of food and groceries delivery charges <p>Benefit will not include: Beer, wine, liquor, cigarettes, or tobacco Vitamins, medicines, and supplements Any nonfood items such as: Pet foods Cleaning supplies, paper products, and other household supplies. Hygiene items, cosmetics</p>				
<p>Transportation to Non-Health Related Destinations: With CMS' flexibilities for members with chronic conditions who meet all mandated requirements for the Special Supplemental Benefits for the Chronically Ill (SSBCI), Triple-S will allow these members to use their Non-Emergency Transportation described before for non-health related destinations.</p>	\$0	\$0	\$0	\$0
<p>Value Based Insurance Design – Hospice Through the CMS VBID, Triple-S will incorporate the current Medicare hospice (as defined by the SSA) benefit into our covered benefits in combination with offering palliative care services outside the hospice benefit for enrollees with serious illness and providing individualized transitional concurrent care services</p> <p>TSA will be administering all hospice interventions for all new hospice-eligible members starting on January 1st, 2021. Intervention will include orientation on hospice offering and regulations, and, for members who chose not entering a hospice intervention, TSA will offer a palliative care approach. Members who elect entering hospice intervention with a contracted provider, will be provided additionally the In-Home Support Benefit</p>	\$0	\$0	\$0	\$0



Description of Benefits	Copay			
	100	110	120	130
Value Based Insurance Design – Hospice In-Home Support Benefit: The benefit consists of qualified staff in-home support for activities of daily living such as: Help for bathing and dressing, transferring or assistance for mobility at home, light housekeeping (cleaning, laundry, cleaning dishes), meal preparation and help with medication reminders. One 4-hour visit per week as long as the member participates in the hospice program with a contracted in-network provider.	\$0	\$0	\$0	\$0
Additional Telehealth: Covered services are Primary care physician consultations / Specialists consultations / Kidney Disease Education Services /Diabetes Self Training / Psychiatrist (individual consultations) / Psychologists (individual consultations)	\$0	\$0	\$0	\$0
COVID-19 Food Allowance: Benefit consists of a \$50 allowance for the purchase of food after being diagnosed with Covid-19 during a public health emergency for Covid-19 with a stay at home order. Up to 2 allowances per year.	\$0	\$0	\$0	\$0
COVID-19 Groceries Delivery Charge Payment: Benefit consists of a \$10 allowance to pay for delivery charges. Benefit is limited to one time per month for affected enrollees during a public health emergency for COVID-19 with a stay at home order.	\$0	\$0	\$0	\$0

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


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

06/01/2020
 Date



