

MEDICARE PLATINO CONTRACT

APPENDIX C (3) (22)

SERVICES PROVIDED BY
THE DEPARTMENT OF
HEALTH



A handwritten signature in blue ink, consisting of several loops and a long horizontal stroke.



Humana Health Plans of Puerto Rico, Inc.
383 Ave FD Roosevelt
San Juan PR 00918-2131
Humana.pr

APPENDIX C (3)

Immunization Certification

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

Product Platino Identification: H4007-016

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

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

II. ³Vaccines for adults from 21 years of age

²Influenza
Td /Tdap (Tetanus Disphtheria, Pertusis)
Varicela
VPH Virus Papiloma Humano
Zoster
MMR
Neumococo Polisacárido (PPSV23)



AW

Neumococo 13 Conjugada (PCV13)
Meningococo
Hepatitis A
Hepatitis B

III. COVID 19 Vaccine - not included in the Medicaid Wrap Around but are provided by the Department of Health (DOH). MAO must follow the instructions provided by CMS.

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



Luis A. Torres Olivera
President



Date

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

²View Recommends influenza vaccination 2017-2018

³Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection. Recommended vaccination for adults with an additional risk factor or another indication





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

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

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Td /Tdap (Tetanus Disphtheria, Pertusis
Varicela
VPH Virus Papiloma Humano
Zoster
MMR
Neumococo Polisacárido (PPSV23)



Neumococo 13 Conjugada (PCV13)
Meningococo
Hepatitis A
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- Hepatitis B
- Rotavirus (RV)
- DTaP (Toxoides de Diphtheria y vacuna pertussis acelular)
- HIB (Vacuna conjugada HIB)
- PCV13 Y PPSV23 (Vacunas antineumocócicas)
- Polio (IPV)
- ²Vacunas contra la influenza (Virus atenuado LAIV o la IIV).
- MMR
- Varicela (VAR)
- Hepatitis A
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- Virus Papiloma Humano (VPH)

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- ²Influenza
- Td /Tdap (Tetanus Disphtheria, Pertusis
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)



Neumococo 13 Conjugada (PCV13)
Meningococo
Hepatitis A
Hepatitis B

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APPENDIX C (3)

Immunization Certification

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

Product Platino Identification: H4007-022

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

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

II. ³Vaccines for adults from 21 years of age

- ²Influenza
- Td/Tdap (Tetanus Disphtheria, Pertusis)
- Varicela
- VPH Virus Papiloma Humano
- Zoster
- MMR
- Neumococo Polisacárido (PPSV23)



Neumococo 13 Conjugada (PCV13)
Meningococo
Hepatitis A
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6/8/2021

Date

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