

MEDICARE PLATINO CONTRACT

APPENDIX B (1) (23)

PREMIUM PAYMENT

**Monthly Payment of Premiums per Member
by Geographic Areas**

TRIPLE-S ADVANTAGE, INC.

<i>Service Area:</i>	<i>H5774-024 H5774-025 H5774-026 H5774-028 H5774-035 H5774-036</i>
East	\$20.00
Metro-North	\$20.00
North	\$20.00
North East	\$20.00
San Juan	\$20.00
South East	\$20.00
South-West	\$20.00
West	\$20.00

EMR

