

Managed Care Program Annual Report (MCPAR) for Puerto Rico: Platino: Dual-Special Needs Plan (D-SNP)

Due date	Last edited	Edited by	Status
06/29/2026	05/15/2026	Hector Vazquez	Submitted

Indicator	Response
Exclusion of CHIP from MCPAR Enrollees in separate CHIP programs funded under Title XXI should not be reported in the MCPAR. Please check this box if the state is unable to remove information about Separate CHIP enrollees from its reporting on this program.	Not Selected
Did you submit or do you plan on submitting a Network Adequacy and Access Assurances (NAAAR) Report for this program for this reporting period through the MDCT online tool? If "No", please complete the following questions under	No (Excel submission)

Indicator

Response

each plan.

Section A: Program Information

Point of Contact

Number	Indicator	Response
A1	<p>State name</p> <p>Auto-populated from your account profile.</p>	Puerto Rico
A2a	<p>Contact name</p> <p>First and last name of the contact person. States that do not wish to list a specific individual on the report are encouraged to use a department or program-wide email address that will allow anyone with questions to quickly reach someone who can provide answers.</p>	Carlos A. Santiago Rosario
A2b	<p>Contact email address</p> <p>Enter email address. Department or program-wide email addresses ok.</p>	mcp@ases.pr.gov
A3a	<p>Submitter name</p> <p>CMS receives this data upon submission of this MCPAR report.</p>	Hector Vazquez
A3b	<p>Submitter email address</p> <p>CMS receives this data upon submission of this MCPAR report.</p>	hvazquez@ases.pr.gov
A4	<p>Date of report submission</p> <p>CMS receives this date upon submission of this MCPAR report.</p>	05/15/2026

Reporting Period

Number	Indicator	Response
A5a	Reporting period start date Auto-populated from report dashboard.	01/01/2025
A5b	Reporting period end date Auto-populated from report dashboard.	12/31/2025
A6	Program name Auto-populated from report dashboard.	Platino: Dual-Special Needs Plan (D-SNP)

Add plans (A.7)

Enter the name of each plan that participates in the program for which the state is reporting data.

Indicator	Response
Plan name	Triple S Advantage
	MCS Advantage
	Humana
	MMM Healthcare

Section B: State-Level Indicators

Topic I. Program Characteristics and Enrollment

Number	Indicator	Response
BI.1	<p data-bbox="313 107 586 176">Statewide Medicaid enrollment</p> <p data-bbox="313 201 722 516">Enter the average number of individuals enrolled in Medicaid per month during the reporting year (i.e., average member months). Include all FFS and managed care enrollees and count each person only once, regardless of the delivery system(s) in which they are enrolled.</p>	285,876
BI.2	<p data-bbox="313 569 657 680">Statewide Medicaid risk-based managed care enrollment</p> <p data-bbox="313 705 722 1083">Enter the average number of individuals enrolled in risk-based Medicaid managed care per month during the reporting year (i.e., average member months). Include all MCOs and at-risk PIHPs and PAHPs only, and count each person only once, even if they are enrolled in multiple managed care programs or plans.</p>	285,876

Section C: Program-Level Indicators

Topic I: Program Characteristics

Number	Indicator	Response
C11.1	<p>Program contract</p> <p>Enter the title of the contract between the state and plans participating in the managed care program.</p>	<p>ADMINISTRACION DE SEGUROS DE SALUD DE PUERTO RICO (ASES) and MAO for PROVISION OF MEDICAID WRAPAROUND COVERAGE FOR THE GOVERNMENT HEALTH INSURANCE MEDICARE AND MEDICAID DUAL-ELIGIBLE POPULATION</p>
N/A	<p>Enter the date of the contract between the state and plans participating in the managed care program.</p>	07/01/2024
C11.2	<p>Contract URL</p> <p>Provide the hyperlink to the model contract or landing page for executed contracts for the program reported in this program.</p>	<p>https://www.ases.pr.gov/medicare-platino#Aseguradoras-Contratadas</p>
C11.3	<p>Program type</p> <p>What is the type of MCPs that contract with the state to provide the services covered under the program? Select one.</p>	Primary Care Case Management (PCCM) Entity
C11.4a	<p>Special program benefits</p> <p>Are any of the four special benefit types covered by the managed care program: (1) behavioral health, (2) long-term services and supports, (3) dental, and (4) transportation, or (5) none of the above? Select one or more.</p> <p>Only list the benefit type if it is a covered service as specified in a contract between the state and managed care plans participating in the program. Benefits available to eligible program enrollees via fee-for-service should not be listed here.</p>	<p>Behavioral health</p> <p>Dental</p>
C11.4b	<p>Variation in special benefits</p> <p>What are any variations in the availability of special benefits within the program (e.g. by service area or population)? Enter "N/A" if not applicable.</p>	N/A
C11.5	<p>Program enrollment</p> <p>Enter the average number of individuals enrolled in this</p>	285,876

managed care program per month during the reporting year (i.e., average member months).

C11.6

Changes to enrollment or benefits

There were no major changes to the population or benefits during the reporting year

Briefly explain any major changes to the population enrolled in or benefits provided by the managed care program during the reporting year. If there were no major changes, please enter "There were no major changes to the population or benefits during the reporting year" as your response. "N/A" is not an acceptable response.

Section D: Plan-Level Indicators

Topic I. Program Characteristics & Enrollment

Number	Indicator	Response
D1I.1	<p>Plan enrollment</p> <p>Enter the average number of individuals enrolled in the plan per month during the reporting year (i.e., average member months).</p>	<p>Triple S Advantage 31,740</p> <p>MCS Advantage 148,822</p> <p>Humana 11,770</p> <p>MMM Healthcare 93,544</p>
D1I.2	<p>Plan share of Medicaid</p> <p>What is the plan enrollment (within the specific program) as a percentage of the state's total Medicaid enrollment? Numerator: Plan enrollment (D1.I.1)Denominator: Statewide Medicaid enrollment (B.I.1)</p>	<p>Triple S Advantage 11.1%</p> <p>MCS Advantage 52.1%</p> <p>Humana 4.1%</p> <p>MMM Healthcare 32.7%</p>
D1I.3	<p>Plan share of risk-based Medicaid managed care</p> <p>What is the plan enrollment (regardless of program) as a percentage of total Medicaid enrollment in risk-based managed care?Numerator: Plan enrollment (D1.I.1)Denominator: Statewide Medicaid risk-based managed care enrollment (B.I.2)</p>	<p>Triple S Advantage 11.1%</p> <p>MCS Advantage 52.1%</p> <p>Humana 4.1%</p> <p>MMM Healthcare 32.7%</p>
D1I.4: Parent	<p>Organization: The name of the parent entity that controls the Medicaid Managed Care Plan.</p> <p>If the managed care plan is owned or controlled by a separate entity (parent), report the name of that entity. If the managed care plan is not</p>	<p>Triple S Advantage GuideWell Mutual Holding Corporation</p> <p>MCS Advantage MCS Advantage, Inc.</p>

controlled by a separate entity,
please report the managed
care plan name in this field.

Humana

Humana Health Plan of Puerto Rico,
Inc.

MMM Healthcare

Elevance Health

Topic VIII. Sanctions

Describe sanctions that the state has issued for each plan. Report all known actions across the following domains: sanctions, administrative penalties, corrective action plans, other. The state should include all sanctions the state issued regardless of what entity identified the non-compliance (e.g. the state, an auditing body, the plan, a contracted entity like an external quality review organization).

42 CFR 438.66(e)(2)(viii) specifies that the MCPAR include the results of any sanctions or corrective action plans imposed by the State or other formal or informal intervention with a contracted MCO, PIHP, PAHP, or PCCM entity to improve performance.

Sanction total count:

0 - No sanctions entered

Section F: Notes

Notes

Use this section to optionally add more context about your submission. If you choose not to respond, proceed to "Review & submit."

Number	Indicator	Response
F1	Notes (optional)	Not answered