

2027

SUMMARY OF
BENEFITS

MMM Supremo
(HMO C-SNP)



2027 Summary of Benefits

The information provided is a summary of benefits of what MMM Supremo (HMO C-SNP) covers and what you will pay.

For a complete list of the services and benefits we cover, call us and request an “Evidence of Coverage,” or you can access the document by visiting our website.

The formulary, pharmacy network, and/or providers’ network may change at any time. You will receive notice when necessary .

This information is available in other formats such as braille, large print, and audio.

Questions? We're here to help. Please call Sales Department at: 787-620-2396, 1-833-647-9555 (toll free) or Member Services at: 787-620-2397, 1-866-333-5470 (toll free) for additional information. TTY users call 7-1-1. We are available for phone calls Monday to Sunday, from 8:00 a.m. to 8:00 p.m.

Calls to these numbers are free.

Visit our website at: www.mmmpr.com.

If you wish to learn more about the coverage and costs of Original Medicare, read the current “Medicare & You 2027” handbook. View it online at: <http://www.medicare.gov> or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

MMM Supremo (HMO C-SNP) has established a network of doctors, hospitals, pharmacies, and other providers. If you use providers that are not in our network, the plan may not pay for those services.

You must use network pharmacies to fill your prescriptions for covered Part D drugs.

Plans may offer supplemental benefits in addition to Part C and Part D benefits.

You can see our prescription drugs formulary and provider and pharmacy directory on our website (www.mmmpr.com), or if you want a printed copy, call us and we will send you the requested document.

To join MMM Supremo (HMO C-SNP), you must be entitled to Medicare Part A, be enrolled in Medicare Part B, and live in our service area. Our service area includes the 78 municipalities of Puerto Rico.

Covered services, hospital, and prescription drug benefits

Services with a 1: may require prior authorization

Services with a 2: \$0 copayment for services available at MMM Multiclinic.

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Monthly plan premium	\$0	
Deductible / Out-of-Pocket Limit	- Deductible You pay nothing - Out-of-Pocket Limit \$3,250	This plan does not have a deductible.
Inpatient ¹ / Outpatient hospital coverage ¹	- Inpatient hospital coverage - Preferred Network: You pay nothing You pay nothing at Unidad Dorada - General Network: \$50 copay - Outpatient hospital coverage \$25 copay	Our plan covers an unlimited number of days for an inpatient hospital stay
Ambulatory Surgical Center ¹	You pay nothing	
Doctor visits (Primary Care Provider and Specialists)	- Primary Care Provider You pay nothing - Specialists You pay nothing	
Preventive care ¹	You pay nothing	Any additional preventive services approved by Medicare during the contract year will be covered.

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Emergency care / Urgently needed services Maximum plan limit \$500 for worldwide coverage	- Emergency Care \$75 copay - Worldwide coverage: \$100 copay - Urgently needed services You pay nothing - Worldwide coverage: \$100 copay	If you are admitted to the hospital within 1 day because of the same condition, you do not have to pay your share of the cost for emergency care. See the “Inpatient Hospital Care” section of this booklet for other costs
Diagnostic Services/Labs/ Imaging¹ - Diagnostic radiology service (e.g., MRI) ² - Lab services² - Diagnostic tests and procedures - Outpatient X-rays	\$0-\$25 copay 0%-20% of the cost You pay nothing You pay nothing	

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Hearing Services/Dental Services/ Vision Services Hearing services¹ •Hearing services covered by Medicare •Supplemental hearing aids •Routine Hearing Exam •Supplemental hearing aid fitting evaluation service Dental Services¹ •Diagnostic and Preventive Services •Medicare-covered services •Post and core buildup and/or individual crown* •Prosthodontics - Removable* - Fixed bridge* - Implants* *Certain limits and restrictions apply. Vision Services¹ •Exams to diagnose and treat diseases and conditions of the eye •Routine eye exam •Supplemental Eyeglasses and/or contact lenses	• You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing • You pay nothing	\$1,000 every three (3) years for the purchase of hearing aids for both ears. One supplemental routine hearing exam per year and one supplemental fitting/evaluation for hearing aid per year. \$2,500 annually for all supplemental comprehensive dental services. The maximum plan limit does not apply to preventive, diagnostic, or Medicare covered services. \$500 per year for the purchase of eyeglasses (frames and lenses) and/or contact lenses. One supplemental routine eye exam service per year. Maximum benefit amount applies for both In-Network and Out-of-Network.

PREMIUMS AND BENEFITS

MMM Supremo (HMO C-SNP)

WHAT YOU SHOULD KNOW

Mental health services¹

- Inpatient hospital coverage
- Outpatient group therapy visit²
- Outpatient individual therapy visit²

- **\$50** copay
- **\$0-\$7** copay
- **\$0-\$7** copay

190 days, in a lifetime, for inpatient mental health care in a psychiatric hospital.

90 days for an inpatient hospital stay.

60 "lifetime reserve days."

ADDITIONAL BENEFITS

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Part B Premium Reduction	\$25 monthly	
Skilled nursing facility (SNF) ¹	You pay nothing	100 days in an SNF.
Physical Therapy ¹	\$4 copay	
Ambulance	You pay nothing	Authorization required, except for emergencies.
Supplemental Transportation ¹	You pay nothing	Sixteen (16) one-way trips per year to locations related to the health care, such as: appointments with a doctor, for medical treatment, for medical procedures, and/or to pick up medical results or from laboratory studies and medications. Unlimited transportation to and from the Multi Specialty Clinics.
Medicare Part B Drugs¹ • Chemotherapy drugs • Other Part B drugs • Generic Immunosuppressants • Brand Immunosuppressants	• 20% of the cost • 20% of the cost • \$35 for insulin drugs • You pay nothing • You pay nothing	Step Therapy may apply from Part B to Part B and from Part D to Part B. You may see a coinsurance of less than 20% for some Part B and chemotherapy drugs with prices that have increased faster than the rate of inflation.

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Foot Care (podiatry services)¹ • Medicare covered services • Supplemental services	• You pay nothing • You pay nothing	This plan covers six (6) routine visits for supplemental podiatry services per year.
Durable Medical Equipment / Medical Supplies¹ • DME (e.g., wheelchairs, oxygen) • Prosthetics (e.g., braces, artificial limbs) • Medical supplies • Diabetic supplies	• You pay nothing • You pay nothing • You pay nothing • You pay nothing	
Wellness programs	You pay nothing	Programs focused on health conditions such as high blood pressure, cholesterol, asthma, and special diets. • Programs for weight management, fitness, and stress management. • Nursing hotline (24/7) • Printed health education materials • Nutritional training

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Chiropractic care¹ • Medicare covered services • Supplemental services	• \$7 copay • \$7 copay	\$750 annually for a maximum of six (6) routine visits for supplemental chiropractic services.
Over the counter items (OTC)	You pay nothing	\$55 every three (3) months for over-the-counter items or medications. For more details, you can refer to the OTC List available in our OTC at Your Door Catalog or on our website. Benefit combined with a single amount of maximum benefit shared for OTC, Home and Bathroom Safety Devices and Modifications, and Fitness Benefit (exercise items only). Limits in the number of items per category may apply.
Post-discharge Meal Benefit ¹	You pay nothing	Two (2) meals per day up to five (5) days. Two (2) times a year. Maximum of twenty (20) meals.

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
Acupuncture¹ Medicare covered services	\$7 copay	
Nutritionist	You pay nothing	You are eligible for six (6) supplemental Nutritionist visits per year.
Alternative Therapies Naturopath	You pay nothing	Twelve (12) visits per year for naturopath services

PREMIUMS AND BENEFITS

MMM Supremo
(HMO C-SNP)

WHAT YOU SHOULD KNOW

**Home and Bathroom Safety
Devices and Modifications**

You pay nothing

\$55 every three (3) months to be used towards the purchase of the following items covered through the OTC catalog:

- Medical Bathmat
- Raised Toilet Seat
- Handheld Shower Head
- Reacher
- Nightlight

For more details, you can refer to the OTC List available in our OTC at Your Door Catalog or on our website. This is a combined benefit with a single, shared maximum benefit amount for OTC, Home and Bathroom Safety Devices and Modifications, and Fitness Benefit (exercise items only). Limits in the number of items per category may apply.

PREMIUMS AND BENEFITS

MMM Supremo
(HMO C-SNP)

WHAT YOU SHOULD KNOW

Fitness

You pay nothing

\$55 every three (3) months to use for the purchase of the following items through the OTC catalog.

- Pedals for physical exercise
- Elastic bands for stretching

For more details, you can refer to the List available in our OTC catalog at Your Door or on our website. Benefit combined with a single amount of maximum benefit shared for OTC, Home and Bathroom Safety Devices, and Modifications and Fitness Benefit (exercise items only). Limits in the number of items per category may apply.

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
MMM Flexi Card You will get a card in which the allotted monthly amount will be deposited. What you don't use, rolls over to the next month during contract year 2027. Limits and restrictions may apply. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive care coordination to manage chronic conditions such as hyperlipidemia, diabetes mellitus, arterial hypertension, cardiovascular disorders, and peripheral vascular disease. For a full list of chronic conditions, refer to Ch. 4 of the Evidence of Coverage.	You pay nothing	\$55 per month (for a total amount of \$660 per year) while active in the plan. You will receive a monthly amount which you will be able to use for the following services: • Prepared Meals • Food & Groceries • Gasoline • Cleaning Products • Entertainment (concerts/theater/movies, etc.) • Utilities • Additional OTC items, including Homeopathic / Natural Medicine • Home and Bathroom Safety Devices • Fitness Benefit (Physical exercise and Gym Membership) • Memory and Cognitive Function Support items, such as: memory cards, board games, sudoku or other items that help the member exercise their memory • Copayments/Coinsurances • Pet Care • Gardening/Hardware Items • Towels, Linens, and Clothing • Additional Roadside Assistance and In-Home Minor Repairs and Other Services • Eyewear (lenses and frames, Contact lenses or Upgrades) • Hearing Services (Fitting/Evaluation for Hearing Aid, Hearing Aids (all types))

PREMIUMS AND BENEFITS

MMM Supremo (HMO C-SNP)

WHAT YOU SHOULD KNOW

MMM Flexi Card

(Continuation)

You will get a card in which the allotted monthly amount will be deposited. What you don't use, rolls over to the next month during contract year 2027. Limits and restrictions may apply. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive care coordination to manage chronic conditions such as hyperlipidemia, diabetes mellitus, arterial hypertension, cardiovascular disorders, and peripheral vascular disease. For a full list of chronic conditions, refer to Ch. 4 of the Evidence of Coverage.

You pay nothing

- Comprehensive and Diagnostic Dental Services (Oral exams, Dental X-Rays, Restorative, Endodontics, Periodontics, Removable Prosthodontics, Implant Services, Fixed Prosthodontics, Oral/Maxillofacial Surgery, Adjunctive General Services, and Other Diagnostic Dental Services)

PREMIUMS AND BENEFITS	MMM Supremo (HMO C-SNP)	WHAT YOU SHOULD KNOW
MMM Assistance The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive care coordination to manage chronic conditions such as hyperlipidemia, diabetes mellitus, arterial hypertension, cardiovascular disorders, and peripheral vascular disease. For a full list of chronic conditions, refer to Ch. 4 of the Evidence of Coverage.	You pay nothing	Up to 12 services, \$300 per event for roadside assistance and some In-Home minor repairs. \$200 per event for appliance repair services (one (1) service per semester (2 per year)). Handyman services (One (1) event per year, two (2) hours). Pest control (one (1) visit for basic fumigation, inside or outside, per semester). Indoor Air Quality Equipment Services (A/C cleaning services (one (1) visit per semester)). Limits and restrictions may apply. Service must be coordinated through the plan's contracted vendor.

PRESCRIPTION DRUGS

PHASE	DRUG TIER	COPAY/ COINSURANCE Retail Pharmacy (30-days)	COPAY/ COINSURANCE Retail Pharmacy and Mail Order (90-days)
Deductible	\$0		
Initial Coverage (what you pay until your out-of-pocket costs reach \$2,400)	Preferred Generic	\$0 copay	\$0 copay
	Generic	\$0 copay	\$0 copay
	Preferred Brand	\$0 copay	\$0 copay
	Non Preferred Drugs	\$0 copay	\$0 copay
	Specialty Drugs	33% cost \$35 copay for insulin	Not available
	Select Care Drugs	\$0 copay	\$0 copay
Catastrophic Coverage (what you pay after your out-of-pocket costs reach \$2,400)	If you reach the Catastrophic Coverage Stage, you pay nothing for Part D drugs.		

Important Message About What You Pay for Vaccines - Our plan covers most adult Part D vaccines at no cost. Call Member Services for more information.

Important Message About What You Pay for Insulin - You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on.



BENEFITS BEYOND ORIGINAL MEDICARE





MULTICLINIC

YOUR SPECIALISTS IN ONE PLACE

***Get to know the
clinic network***



**Our multiclinics throughout the Island
provide you with exclusive care.**



TO MAKE YOUR APPOINTMENT, CALL AT:
787-522-CITA (2482)

Monday to Friday, from 7:30 a.m. to 4:30 p.m.



UNLIMITED²
transportation to your
appointments



On all the services,
without referrals!



Get your **appointments**
within a reasonable
timeframe

The most in-demand specialties¹ in Puerto Rico:

- | | | |
|--------------------|-----------------|-----------------|
| ■ Cardiology | ■ Nephrology | ■ Orthopedics |
| ■ Dermatology | ■ Pulmonology | ■ Podiatry |
| ■ Endocrinology | ■ Neurosurgery | ■ Psychology |
| ■ Pharmacist | ■ Neurology | ■ Rheumatology |
| ■ Gastroenterology | ■ Nutrition | ■ Urology |
| ■ Gynecology | ■ Ophthalmology | ■ Urogynecology |

Other services¹:

- | | |
|---|-----------------------------------|
| ■ Wound and ulcer care | ■ Holter monitoring |
| ■ Dermoscopy | ■ Mammogram and Breast Ultrasound |
| ■ Echocardiogram (Echo, Doppler, Arterial, Venous, and Carotid) | ■ Vaccinations |
| ■ Electrocardiogram (EKG) | |
| ■ Diagnostic tests and procedures | |
| ■ Eye exam (Diabetic Retinopathy) | |

SCAN THE QR CODE

to access our
**Specialists
Directory** for MMM
Multiclinics.





FLEXI CARD

***FOR YOUR
GROCERIES!***



***ACCESS MORE
PRODUCTS AND SERVICES***

With the MMM Flexi Card[®], you can pay for:



Groceries



Hardware items



Gas



Garden supplies



Prepared meals



Entertainment



OTC products



Gym

You will get a card in which the allotted monthly amount will be deposited. What you don't use, rolls over to the next month during contract year 2027. Limits and restrictions may apply. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive



FLEXI CARD

1234 4567 7890 1234

AFILIADO SALUDABLE

VALID
THRU

ATH



ROLLOVER!

**The money you
don't use** adds up
for the next month

HOW CAN YOU CHECK YOUR BALANCE?

- ✓ **Automated phone system (IVR)**
from Evertec (24/7): **787-281-8470**
- ✓ **MMM Mobile App**
- ✓ **Banco Popular ATM's (BPPR)**
- ✓ **Regional offices** available Monday to
Friday, from 8:00a.m. to 5:00 p.m.
- ✓ **MMM Member Services.**
Call Monday to Sunday, from
8:00 a.m. to 8:00 p.m.

SCAN THE QR CODE

to view the list of
all **participating**
merchants.





ASSISTANCE¹

**WE'RE
HERE FOR
WHATEVER
YOU NEED**



AT YOUR HOME:



NEW

Handyman

Minor home repairs and maintenance



Appliance repair

Repair of appliances, such as refrigerators and stoves



Electrical

Circuit breaker replacement due to short circuit



Locksmith

Regain access to your house



Plumbing

Sanitary drain cleaning



Fumigation (basic service)²

Fumigation against ants and roaches, inside or outside the home.

1. The benefits described are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you are at high risk of hospitalization and require intensive care coordination to manage chronic conditions such as hyperlipidemia, diabetes mellitus, hypertension, cardiovascular disease, and peripheral vascular disease. For a complete list of chronic conditions, refer to Chapter 4 of the Evidence of Coverage. Services will be coordinated through the provider contracted by the plan. Limitations and restrictions may apply. Up to 12 services, with a \$300 limit

NEW

Air conditioner cleaning³

Basic equipment maintenance.

ON THE ROAD⁴



Tires

Flat tire change



Battery

Battery recharge



Towing

Towing service up to 65 miles distance



Fuel supply

Fuel supply, up to two (2) gallons



Locksmith

Regain access to your vehicle



Extraction

Vehicle extraction

per event for roadside assistance and certain minor home repairs. Up to \$200 per event for appliance repair services (2 per year). Handyman services (1 per year, for 2 hours). 2. Pest control. Limited to standard pest treatment for ants and cockroaches, both inside and outside the home (separate service events). One (1) service every six months, for a total of two (2) services per year. 3. Air conditioner cleaning. One (1) service every six months, for a total of two (2) services per year. 4. The vehicle must be 15 years old or newer.



**ENJOYING YOUR
OTC PRODUCTS
HAS NEVER BEEN
MORE CONVENIENT!**



IT'S AS EASY AS:



1 CHOOSE

from the 2027
OTC Catalog



2 ORDER

by phone or in the
MMM Mobile App



3 RECEIVE

right at your
doorstep

NO LINES. NO HASSLE.

Order
BY PHONE:

787-620-2397

Monday to Friday,
8:00 a.m. to 6:00 p.m.

In the
MMM MOBILE APP



**DOWNLOAD IT
TODAY!**



MMM Medicare
y Mucho Más
MMM Holdings, Inc.



Through the
OTC CATALOG

Scan the QR Code to
access more than 400
essential items in the
2027 OTC Catalog.





UNIDAD
DORADA

VIPCARE

THAT MAKES YOUR HOSPITALIZATION EASIER



During your hospital stay:

- Items to help make your hospital stay more comfortable, as needed
- MMM clinical and administrative staff providing follow-up on your treatment
- Physician specializing in wound care
- Mental health and social work services, if needed

After discharge:

- Discharge planners
- Coordination of appointments, services, and medical equipment needed after discharge
- Prescription medications ready for you when you leave the hospital



Participant hospitals:

- Bayamón Medical Center
- Doctors' Center, Carolina
- Hospital Pavía, Caguas
- Manatí Medical Center
- Mayagüez Medical Center
- Hospital Episcopal San Lucas, Ponce



**FOR THOSE MOMENTS
WHEN YOU NEED
IMMEDIATE CARE
WITHOUT AN
APPOINTMENT**



VISIT THEM IF YOU HAVE:

- Cough or flu symptoms
- Minor respiratory problems
- Fever and muscle aches
- Mild dizziness
- Indigestion
- Minor burns
- Stomach virus
- Mild to moderate abdominal pain
- Earache or headache
- Skin rash and allergic reactions
- Other types of general discomfort that are not life-threatening
- Among others



**ON ALL
SERVICES**

Scan the QR code to
find the nearest Urgency
Center locations:



COMPREHENSIVE DENTAL

**GET THE
MOST OUT
OF YOUR BENEFITS!**



**THE CARE YOU NEED
TO HELP YOU ACHIEVE
YOUR BEST SMILE.**



Crowns



Bone surgery



Partial dentures



Complete dentures



Frenectomy



Implants



Fixed bridges

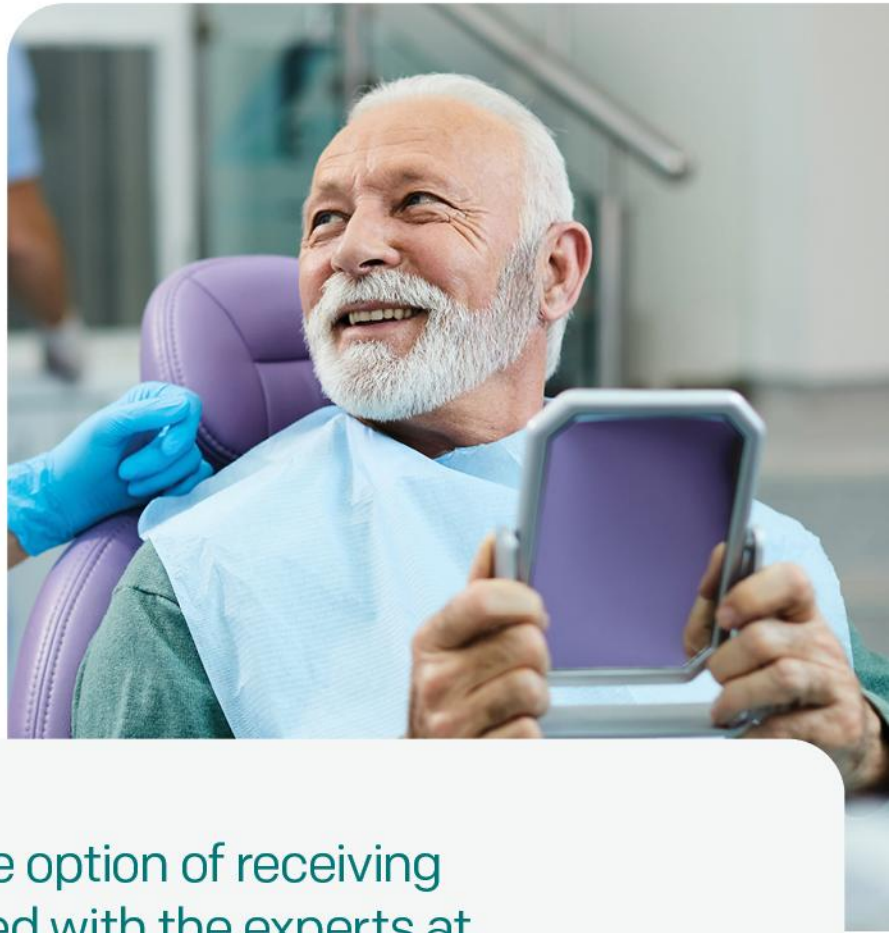


Torus removal



DENTAL SERVICES

at participating Multiclinics.



MMM Multiclinic¹ offers the option of receiving oral health care² coordinated with the experts at **Masters Dental Clinic.**

You can get services such as:



Implants



Cleaning



Bridges

At the facilities of
Masters Dental Clinic in **Aibonito,**
Canóvanas, and **Humacao.**



on dental
services
coordinated for
MMM members
through **MMM
Multiclinic.**

1. Services vary per clinic. Other providers are available in our network. Exclusively for MMM members

2. Subject to the maximum limit of your coverage with MMM.

EYEGLASSES

FOR A NEW PERSPECTIVE ON YOUR WELL-BEING



**Get the most out of
your vision coverage for
eyeglasses, contact lenses,
sunglasses, and lens repairs:**



**Regular, bifocal, trifocal, or
transition lenses**



**Anti-glare and anti-scratch
treatments**



Eyeglasses repair



Variety of frames



Optical shops in our network

Benefits vary per coverage.



TO YOUR
APPOINTMENT

YOUR TRUSTED TRANSPORTATION

With this service, we arrange for a driver to take you to your medical appointment, laboratory, or diagnostic testing center anywhere in the Island.

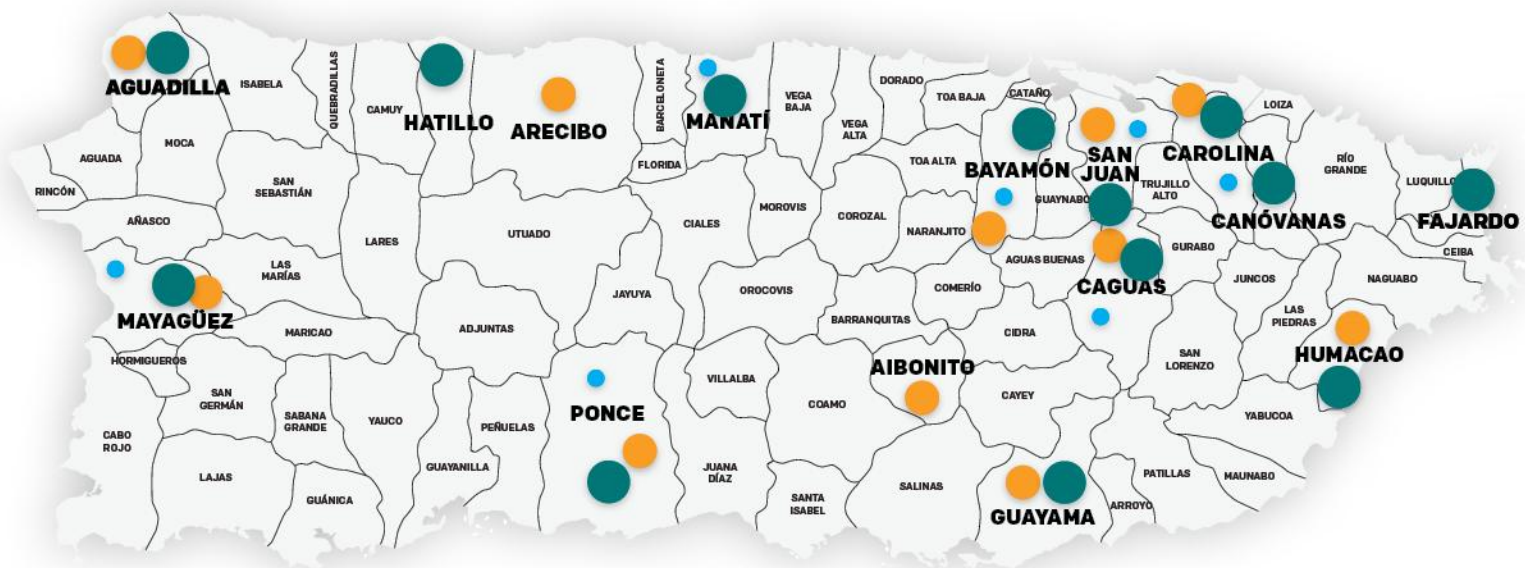


To schedule the services, just:

- 1** **Schedule a medical appointment** with your healthcare provider.
- 2** Call us **5 business days** before your appointment.
- 3** **Stay tuned!** We'll send you a text message with a link so you can track the driver who will pick you up.



TRAVEL SAFE, TRAVEL SECURE.



MMM Service Offices

Aguadilla

Plaza Victoria Shopping Center

Bayamón

Plaza Tropical Shopping Center

Caguas

Edificio Gatsby Plaza

Canóvanas

Centro Comercial Plaza Rial

Carolina

Century Business Park

Fajardo

Carr. #3, km 44.1

Guayama

Edificio FISA II, Paseo del Pueblo

Hatillo

Hatillo Town Center

Humacao

Boulevard Plaza
Office Center

Manatí

El Trigal Plaza

Mayagüez

Complejo Office Park III

Ponce

San Jorge Mall

San Juan

Bechara Industrial Park,
Ave. Kennedy

IMPORTANT CONTACTS



MULTICLINIC

Schedule your appointment by calling:

787-522-CITA (2482)

Customer Service:

Monday to Friday, from 7:30 a.m. to 5:00 p.m.

Clinics:

Monday to Friday, from 7:30 a.m. to 4:40 p.m.



FLEXI CARD

787-281-8470

to learn your PIN or balance

TTY: 711

(hearing impaired)

24 hours, 7 days a week



OTC^{AT YOUR} DOOR

787-620-2397

1-866-333-5470

(toll free)

TTY: 711

(hearing impaired)

Monday to Friday, from 8:00 a.m. to 8:00 p.m.

Saturdays, from 8:00 a.m. to 1:00 p.m.



HACIENDO CONTACTO

1-866-677-0779

(toll free)

TTY: 711

(hearing impaired)

24 horas al día, los 7 días de la semana.

Your 24/7 medical consultation line.



ASSISTANCE

787-620-2397

1-866-333-5470

(toll free)

TTY: 711

(hearing impaired)

24 hours, 7 days a week

We're here for whatever you need, at home and on the road.



TO YOUR APPOINTMENT

Schedule your transportation 5 days in advance.

787-620-2397

1-866-333-5470

(toll free)

TTY: 711

(hearing impaired)

Monday to Friday, from 8:00 a.m. to 8:00 p.m.

WHAT'S NEXT?



You will receive a letter with your coverage's start date once CMS has confirmed your registration.



You will get your member ID card after receiving your confirmation notice.



Within 90 days of the start of your health plan, you will receive a call to complete a health survey.

MMM Healthcare, LLC., is an HMO C-SNP plan with a Medicare contract. Enrollment in MMM depends on contract renewal. MMM Healthcare, LLC., complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. MMM Healthcare, LLC., cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

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Discrimination is Against the Law

MMM Healthcare, LLC. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. MMM Healthcare, LLC., does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

MMM Healthcare, LLC.:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact the Member Services Department.

If you believe that MMM Healthcare, LLC., has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Appeals and Grievances Department, PO Box 71114, San Juan PR 00936-8014, 787-620-2397, 1-866-333-5470 (toll free), 711 TTY (hearing impaired), 787-622-0485 (fax), mmm@mmhlc.com (email). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Member Services Department is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, DC 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



List of Eligibility Criteria for MMM Flexi Card and MMM Assistance

These benefits have been designed for patients with chronic conditions, diagnosed by a physician. If you have been diagnosed by a doctor with one or more of these conditions and your coverage includes MMM Flexi Card and MMM Assistance, then you qualify to benefit from them.

- **Chronic alcohol or another drug dependence**
- **Autoimmune disorders**
 - Polyarteritis nodosa
 - Polymyalgia rheumatica
 - Polymyositis
 - Dermatomyositis
 - Rheumatoid arthritis
 - Systemic lupus erythematosus
 - Psoriatic Arthritis
 - Scleroderma
- **Cancer**
- **Cardiovascular disorders**
 - Cardiac arrhythmias
 - Coronary artery disease
 - Peripheral vascular disease
 - Valvular heart disease
 - Hyperlipidemia
- **Chronic cardiac failure**
- **Dementia**
- **Diabetes mellitus**
 - Pre-diabetes (Fasting blood glucose: 100-125 mg/dL or Hgb A1c: 5.7-6.4%)
- **Overweight, obesity, and metabolic syndrome**
 - Hyperlipidemia
- **Chronic gastrointestinal disease**
 - Chronic liver disease
 - Non-alcoholic fatty liver disease (NAFLD)
 - Hepatitis B
 - Hepatitis C
 - Pancreatitis
 - Irritable bowel syndrome
 - Inflammatory bowel disease
- **Chronic kidney disease (CKD)**
 - CKD requiring dialysis / End-stage renal disease (ESRD)
 - CKD not requiring dialysis
- **Severe hematologic disorders**
 - Aplastic anemia
 - Hemophilia
 - Immune thrombocytopenic purpura
 - Myelodysplastic syndrome
 - Sickle-cell disease (excluding sickle-cell trait)
 - Chronic venous thromboembolic disorder
- **HIV / AIDS**
- **Chronic lung disorders**
 - Asthma
 - Chronic bronchitis
 - Cystic fibrosis
 - Emphysema
 - Pulmonary fibrosis
 - Pulmonary hypertension
 - Chronic obstructive pulmonary disease (COPD)
- **Chronic and disabling mental health conditions**
 - Bipolar disorders
 - Major depressive disorders
 - Paranoid disorder
 - Schizophrenia
 - Schizoaffective disorder
 - Post-traumatic stress disorder (PTSD)
 - Eating disorders
 - Anxiety disorders
- **Neurologic disorders**
 - Amyotrophic lateral sclerosis (ALS)
 - Cerebral palsy
 - Epilepsy
 - Extensive paralysis (such as hemiplegia, quadriplegia, paraplegia, monoplegia)
 - Huntington's disease
 - Parkinson's disease
 - Polyneuropathy
 - Multiple sclerosis
 - Fibromyalgia
 - Chronic fatigue syndrome
 - Spinal cord injuries
 - Spinal stenosis
 - Stroke-related neurologic deficit
 - Traumatic brain injury
- **Stroke**
- **Post-organ transplantation care**
- **Immunodeficiency and immunosuppressive disorders**

- **Conditions that may cause cognitive impairment**
 - Alzheimer's disease
 - Intellectual and developmental disabilities
 - Traumatic brain injuries
 - Disabling mental illness associated with cognitive impairment
 - Mild cognitive impairment
- **Conditions that may cause similar functional challenges and require similar services**
 - Spinal cord injuries
 - Paralysis
 - Limb loss
- Stroke
- Arthritis
- **Chronic conditions that impair vision, hearing (deafness), taste, touch, and smell**
- **Conditions that require continued therapy services in order for individuals to maintain or retain functioning**
- **Other:**
 - Hypertension
 - Osteoporosis
 - Chronic back pain

MMM Healthcare, LLC., is an HMO-POS plan and an HMO C-SNP plan with a Medicare contract. Enrollment in MMM depends on contract renewal. MMM Healthcare, LLC., is an HMO D-SNP plan with a Medicare contract and a contract with the Puerto Rico Medicaid program. Enrollment in MMM depends on contract renewal. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you have a high risk for hospitalization and require intensive care coordination to manage chronic conditions such as hyperlipidemia, diabetes mellitus, arterial hypertension, cardiovascular disorders, and peripheral vascular disease. For a full list of chronic conditions, refer to Ch. 4 of the Evidence of Coverage. MMM Healthcare, LLC. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. MMM Healthcare, LLC. cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Y0049_2027 4010 0001 1_M



Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at 787-620-2397, 1-866-333-5470 (toll free), TTY: 711 (hearing impaired).

Understanding the Benefits

- ☐ The Evidence of Coverage (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit www.mmmpr.com or call 787-620-2397, 1-866-333-5470 (toll free), TTY: 711 (hearing impaired), Monday to Sunday, 8:00 a.m. to 8:00 p.m., to view a copy of the EOC.
- ☐ Review the provider directory (or ask your doctor) to make sure the doctors you see now are in network. If they are not listed, it means that you will likely have to select a new doctor.
- ☐ Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- ☐ Review the formulary to make sure your drugs are covered.

Understanding Important Rules

- ☐ **Effect on Current Coverage**
Your current health care coverage will end once your new Medicare coverage starts. For example, if you are in Tricare or a Medicare plan, you will no longer receive benefits from that plan once your new coverage starts.
- ☐ In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- ☐ Benefits, premiums and/or copayments/coinsurance may change on January 1, 2027.
- ☐ Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).



☐ **For HMO-POS Plans**

Our plan allows you to see providers outside of our network (non-contracted providers). However, while we will pay for certain covered services provided by a non-contracted provider, the provider must agree to treat you. Except in an emergency or urgent situations, non-contracted providers may deny care. In addition, you will pay a higher co-pay for services received by non-contracted providers.

☐ **For C-SNP Plans**

This plan is a chronic condition special needs plan (C-SNP). Your ability to enroll will be based on verification that you have a qualifying specific severe or disabling chronic condition.

☐ **For D-SNP Plans**

This plan is a dual eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

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This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



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AT MMM, WE WALK TOGETHER!

787-620-2396

1-833-647-9555

(TOLL FREE)

TTY: 711

(HEARING IMPAIRED)

**MONDAY TO SUNDAY,
FROM 8:00 A.M. TO 8:00 P.M.**



www.mmmpr.com



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SALES **REPRESENTATIVE**

REPRESENTATIVE **PHONE NUMBER**

YOUR PLAN **NAME**



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