

Investor Presentation

November 2018

Safe Harbor Statement

*This document contains forward-looking statements, as defined in the Private Securities Litigation Reform Act of 1995. Forward-looking statements include information about possible or assumed future sales, results of operations, developments, regulatory approvals or other circumstances. Sentences that include "believe", "expect", "plan", "intend", "estimate", "anticipate", "project", "may", "will", "shall", "should" and similar expressions, whether in the positive or negative, are intended to identify forward-looking statements.

All forward-looking statements in this news release reflect management's current views about future events and are based on assumptions and subject to risks and uncertainties. Consequently, actual results may differ materially from those expressed here as a result of various factors, including all the risks discussed and identified in public filings with the U.S. Securities and Exchange Commission (SEC).

In addition, the Company operates in a highly competitive, constantly changing environment, influenced by very large organizations that have resulted from business combinations, aggressive marketing and pricing practices of competitors, and regulatory oversight. The following factors, if markedly different from the Company's planning assumptions (either individually or in combination), could cause Triple-S Management's results to differ materially from those expressed in any forward-looking statements shared here:

- Trends in health care costs and utilization rates
- Ability to secure sufficient premium rate increases
- Competitor pricing below market trends of increasing costs
- Re-estimates of policy and contract liabilities
- Changes in government laws and regulations of managed care, life insurance or property and casualty insurance
- Significant acquisitions or divestitures by major competitors
- Introduction and use of new prescription drugs and technologies
- A downgrade in the Company's financial strength ratings
- A downgrade in the Government of Puerto Rico's debt
- Litigation or legislation targeted at managed care, life insurance or property and casualty insurance companies
- Ability to contract with providers consistent with past practice
- Ability to successfully implement the Company's disease management, utilization management and Star ratings programs
- Ability to maintain Federal Employees, Medicare and Medicaid contracts
- Volatility in the securities markets and investment losses and defaults
- General economic downturns, major disasters, and epidemics

This list is not exhaustive. Management believes the forward-looking statements in this release are reasonable. However, there is no assurance that the actions, events or results anticipated by the forward-looking statements will occur or, if any of them do, what impact they will have on the Company's results of operations or financial condition. In view of these uncertainties, investors should not place undue reliance on any forward-looking statements, which are based on current expectations. In addition, forward-looking statements are based on information available the day they are made, and (other than as required by applicable law, including the securities laws of the United States) the Company does not intend to update or revise any of them in light of new information or future events.

Readers are advised to carefully review and consider the various disclosures in the Company's SEC reports.

Introduction to Triple-S

Who we are

- Largest and most experienced managed care organization (MCO) in Puerto Rico
- Exclusive BCBS licensee for Puerto Rico, Costa Rica and U.S. Virgin Islands
- NYSE: GTS

Solid Financials

- Premiums earned 4-year CAGR of 6.4%
- 2017 medical loss ratio (MLR) of 85.6%
- As of September 30, 2018, approximately \$107 million in cash and \$30 million of debt on balance sheet

Recent Developments

- Received upgraded 4.5-star quality rating for Medicare Advantage HMO product and 4.0 stars for its PPO product for premium year 2020
- Consolidating Commercial and Medicare Advantage PBM with Abarca Health
- Established and expanding ambulatory clinic network in Puerto Rico
- Expanded share repurchase program in February 2018 by \$25 million

Investment Highlights



Strong balance sheet and robust repurchase program in place



Well regulated market = strong barrier to entry



Upgrading infrastructure/technology to improve service, lower costs and enhance long-term margins



Rebuilt management team with deep managed care expertise leveraging 50+ year experience and brand equity



Well positioned to grow business as Puerto Rico recovers

Progressing and Creating Value

Then

Founded in 1959; received Blue Shield exclusive license six years later; operated initially as “non-profit”, became “for-profit in 1990s

IPO: December 2007

Went public with dual class structure

19 member Board; siloed management structure

Underinvested in business

In recent years, focused on short term; top-line growth at expense of bottom line

vs

Now

Rationalizing and stabilizing Managed Care business

More disciplined underwriting

Vast majority of shares outstanding in single class

Rebuilt an experienced management team focused on long-term value and profitability

Investing considerably in infrastructure to enhance long-term margins

Positioned to grow Managed Care despite ongoing Puerto Rico macro issues

Deep Senior Management Expertise



Roberto García-Rodríguez
President & CEO

- 25+ years of health care / legal industry experience
- Has held various roles since joining Triple-S in 2008, including COO from 2013-2016
- Member of the Board of Directors of the Blue Cross Blue Shield Association



Juan José Román-Jiménez
Executive VP & CFO

- 30+ years of financial and health care industry experience, CPA
- Prior to rejoining Triple-S, was CFO of EVERTEC, a NYSE-listed payments services company
- Previously spent 15 years at Triple-S and its subsidiaries in various positions



Madeline Hernández-Urquiza
Executive VP & COO
President - Triple-S Salud and Triple-S Advantage

- 30+ years of health care and financial industry experience
- Held various positions at Triple-S, including Chief Risk Officer for Commercial and Medicaid businesses
- Successfully reorganized company's Medicare Advantage subsidiary, leading to upgraded 4-Star HMO rating in late 2016



Arturo Carrión-Crespo
President – Triple-S Vida

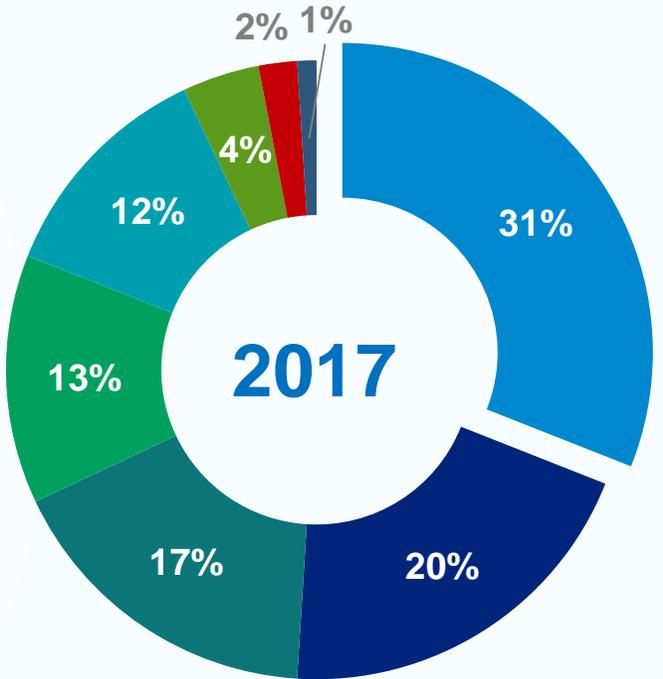
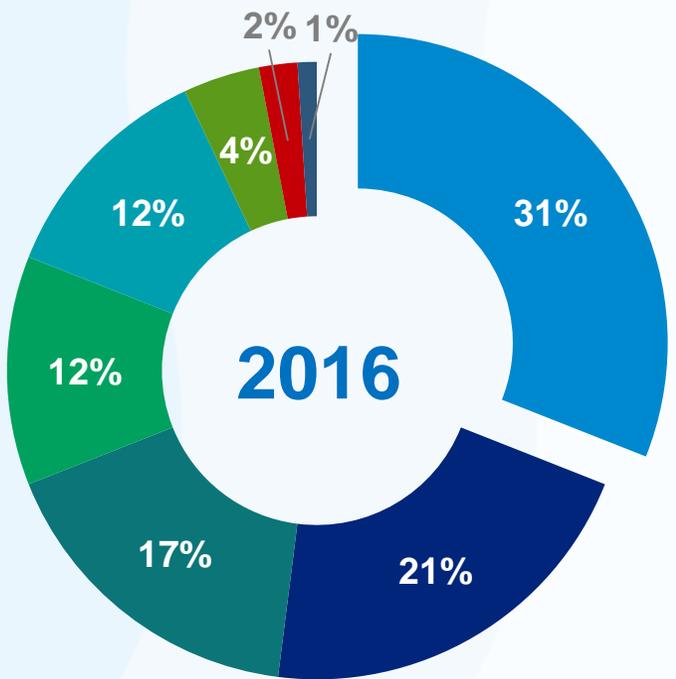
- 30+ years of life/health insurance industry experience
- President of Triple-S Vida since 1998
- Also spent 11 years at Great American Life Assurance Company of Puerto Rico



José Del Amo-Mojica
President – Triple-S Propiedad and Triple-S Insurance Agency

- 29+ years of property and casualty insurance industry experience
- Joined the company in 1998
- Held various positions of increasing responsibility including Surety Manager, Manager, VP and Senior VP of Underwriting and, Senior VP of Underwriting and Claims

Market Share – Health Insurance All Segments



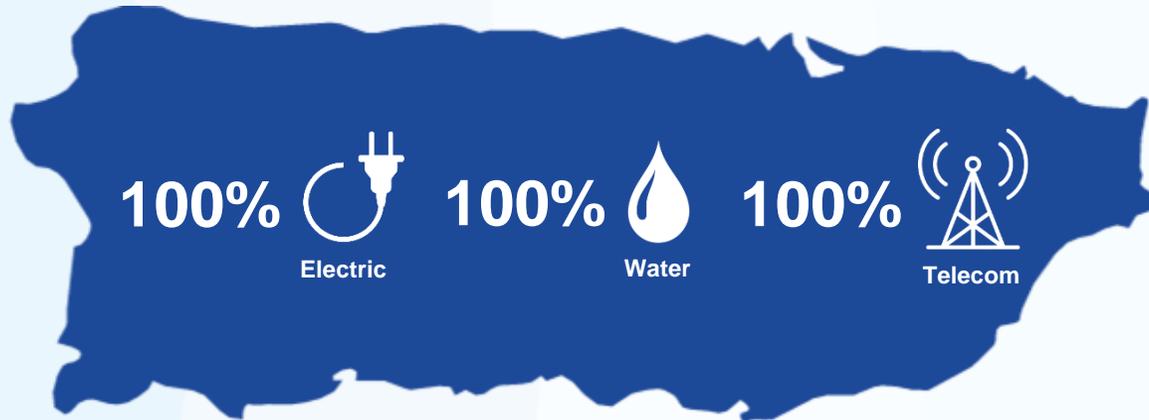
-  **TRIPLE-S SALUD**
BlueCross BlueShield of Puerto Rico
-  **First MEDICAL**
HEALTH PLAN, INC.
-  **MMM**
-  **MCS**
-  **MOLINA HEALTHCARE**
-  **Humana**
-  **MAPFRE**
-  **Constellation HEALTH**

***Total Member per Month**

*Based on Member Months per annual statutory filings, as of 12/31/2017.

Puerto Rico – Island Update

Services Online



Deep experience navigating through challenging environments

Macro

- Puerto Rican economy expected to grow in fiscal 2019, which would end the current 12-year recession
- Government working on restructuring debt
- Fiscal plan approved by PROMESA

Hurricane Maria

- Hurricane caused significant displacement/migration to continental U.S.
- Essential services all back on line
- Rebuilding process underway (\$16B relief package from Washington, \$18.5B from HUD) plus property insurance payments

Recent Government Developments

Federal Aid Package



February 2018 – disaster recovery package signed in Washington

Puerto Rico receiving \$16 billion in Federal aid

\$5 billion earmarked to Medicaid, funding PR Medicaid program for next two years and avoiding “Medicaid Cliff”

Remainder going to infrastructure, businesses, home repair/rebuild

Still require permanent solution to “Medicaid Cliff” by 2020

Medicaid – New Model



In November 2018, Triple-S commenced participation in new Medicaid health plan

MCOs must participate in both risk pools – one for general population, one for “high cost, high need”

In new model, MCOs bear full risk but must serve and compete for membership across the island

Medicaid membership expected to decline in 4Q as GTS was assigned 280,000 beneficiaries, below membership under previous plan

Consolidation of Pharmacy Benefits Management (PBM)



- Triple-S recently entered into a three-year strategic agreement with Abarca Health to consolidate the management of pharmacy benefits of its Commercial and Medicare Advantage businesses
- Abarca is Triple-S's current Medicare Advantage PBM – the collaboration has contributed to our recent upgrades in CMS star ratings
- Abarca will provide prescription drug claim processing, pharmacy network management, and delivery of clinical programs
- Chosen for its innovative technology, products and services, analytic rigor, and customer focus
- Agreement expected to improve Triple-S's care management and create operational efficiencies, ultimately reducing expenses and generating long-term value for customers and shareholders
- Transition expected by January 2019

P&C Hurricane Losses

*Gross losses as of September 30, 2018



Irma
\$11.6M



Maria
\$968M

- Hurricane Maria gross reserves increased \$69M during 3Q18, resulting in \$52M unfavorable prior period development, net of reinsurance, during the quarter
- Hurricane Maria gross reserve established based on specific tangible data, including full review of top 100 commercial accounts and largest claims
- As of November 6, 2018, the Company has closed approximately 91% of claims received and paid \$513M of claims related to Hurricane Maria

Up to \$829.0M

of gross losses covered by catastrophe reinsurance

17,645 claims

received as of November 6, 2018; new claims decelerating over time

*Estimated using available data, actual results could vary

Reinforcing P&C to Capitalize on Opportunities



- Increased reinsurance coverage effective April 1, 2018 to \$905 million, protecting company for losses caused by future catastrophic event with probability of occurring once in 200-250 years
- In November, signed retroactive reinsurance agreement that provides the segment with additional capital and surplus, improving its RBC ratio, reducing the contribution required from the parent, and allowing Triple-S to preserve capital to continue our strategic transformation
- Post-hurricanes, commercial markets in Puerto Rico experiencing increases in pricing and modifications on policy conditions, which is typical following natural catastrophe events
- Stabilized P&C now positioned to benefit from “hard market”

Strong and Stable Balance Sheet

Continuing to prudently
allocate capital



As of September 30, 2018:

- Investment portfolio of \$1.6 billion; generated net investment income of \$51.6 million in 2017, an increase of 5.5% from prior year
- Limited exposure to Puerto Rico devaluations; PR government obligation has fair value of \$8 million, representing <1% of portfolio
- Approximately \$107 million in cash and cash equivalents
- Long-term debt of \$30 million



Expanded existing \$30 million share repurchase program by an additional \$25 million in February 2018; as of November 7, 2018, \$12.5 million of availability remained

Significantly Upgraded Medicare Advantage Product



Legacy

Inconsistent product
Lack of cost control



2013 - 2016

Reposition
Reorganize



Late 2016

HMO Plan Receives
4-star Designation



Late 2018

HMO Plan Upgraded to
4.5-star Designation
and PPO Plan Upgraded
to 4.0 stars

Competitive MA Offering Expands Growth Opportunities

Achieved 4.5-star and 4.0-star designation in the HMO and PPO, respectively,
provides company with growth engine



Consistency

MA product conservative with benefits



Choice

75% of eligible consumers choose an MA plan



Cash

Designation provides additional premium in 2020



Can price

premiums more competitively than in prior years



Continuing

to optimize costs in segment to drive improving bottom line

Optimizing Commercial Segment

Segment focused on disciplined underwriting

- Triple-S maintains significant market share in Commercial segment in Puerto Rico
- Focus in last couple of years to methodically reduce membership in order to clean up portfolio and remove unprofitable accounts, thus improving MLR
- With portfolio underwriting improving, plan to carefully restart growth initiatives

	Commercial Members (as of year-end)	Annual Medical Loss Ratio (MLR)	Adjusted Annual Medical Loss Ratio (MLR)*
2015	547,634	84.2%	86.6%
2016	509,157	85.2%	83.6%
2017	475,026	77.5%	76.9%

*Adjusts for effect of prior period reserve developments and hurricanes; hurricane favorable impact on utilization in 2017 accounted for 310 basis points

Modernizing Infrastructure

Partnership



OPTUM[®]

Expanding
Long-Term
Profitability

Transition core IT
and business
processes

Modernize
and simplify
business
functions

Upgrade
customer
service and
overall efficiency

Become more
competitive; focus
on developing
business / products

Well-Positioned to Grow Long-Term

Creating long-term value by growing within Puerto Rico – can be accomplished despite migration



Focus on retaining current Medicare Advantage client base and using more competitive offering to win new business and capture additional market share



Continue modernizing infrastructure to further improve level of service while creating additional efficiencies to reduce costs



Expand ambulatory clinic network – leverage as additional platform to provide better medical access, cost, quality, and build into additional competitive advantage

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