



Commonwealth of Puerto Rico
Office of the Commissioner of Insurance
Report Covered by Category and Line of Authority
Company- Health Maintenance Organization

NAME	ADDRESS	PHONE NUMBER	EMAIL	DOMICILE TYPE	COMPANY NUMBER	BUSINESS FAX	ORGANIZATION WEBSITE	LINES OF BUSINESS	EXPIRATION DATE
Constellation Health, LLC	P. O. Box 364547 San Juan PR 00936	787-645-7870	icolon@costellationhealth.com	Domestic	893329		www.constellationhealthpr.com	Health Services	6/30/2016
First Medical Health Plan, Inc.	PO Box 191580 San Juan PR 00919-1580	787-474-3999	j.losa@firstmedicalpr.com	Domestic	892880	787-474-3994		Health Services	6/30/2016