

COMPENSATION

In consideration to the services offered by the Provider in the area of **Chiropractic** to the subscribers of Auxilio Salud Plus, Inc., according to the contract of services subscribe among the parts, the Plan compromises to pay the Provider the rates of ASP, less the applicable co pays:

| CODES | DESCRIPTION | RATES |
|--------------|----------------------------------|---------|
| 99202-99205* | New Patient Office Visit | \$50.00 |
| 99211-99215* | Established Patient Office Visit | \$30.00 |
| 98940* | Manipulation and Treatment | \$35.00 |
| 98941* | Manipulation and Treatment | \$35.00 |
| 98942* | Manipulation and Treatment | \$35.00 |
| 72040* | X-RAY Neck Spine | \$32.00 |
| 72070* | X-RAY Thoracic Spine | \$33.00 |
| 72100* | X-RAY Lower Spine | \$34.00 |

^{*}Less the applicable co-pay/coinsurance

Note: Always verify if the contracted procedures are covered in the subscriber's policy. If you have doubts, please call our offices 787-756-5971.

These rates apply to services offered by the Provider from the execution of the contract by both parties.

| Auxilio Salud Plus | Provider |
|--------------------|-----------------|
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| | |
| | License Number: |
| | NPI Number: |

Rev.9/2023