



El plan que trabaja contigo

## COMPENSATION

In consideration to the services offered by the Provider in the area of **RHEUMATOLOGY** 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:

<i>CODES</i>	<i>DESCRIPTION</i>	<i>RATES</i>
99202-99205*	New Patient Office Visit	\$41.00
99211-99215*	Established Patient Office Visit	\$30.00

*\*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.1/2023

RHEUMATOLOGY	Description	Code	Fee
	Evaluation and Management		
		G2012	\$25.00
	Initial Hospital Care		
	New or Established Patient		
		99221	\$41.00
		99222	\$41.00
		99223	\$41.00
	Subsequent Hospital Care		
		99231	\$18.00
		99232	\$18.00
		99233	\$18.00
	Office or Other Outpatient Consultations		
	New or Established Patient		
		99241	\$48.00
		99242	\$48.00
		99243	\$48.00
		99244	\$48.00
		99245	\$48.00
	New or Establisehd Patient		
		99251	\$41.00
		99252	\$41.00
		99253	\$41.00
		99254	\$41.00
		99255	\$41.00
	Intra-Articular Injections		
		20550	\$43.00
		20551	\$45.00
		20552	\$43.50
		20553	\$49.00
		20555	\$230.00
		20560	\$0.00
		20561	\$0.00
		20600	\$38.00
		20605	\$38.00
		20605	\$38.00
		20606	\$38.00
		20610	\$43.00
		20611	\$43.00
		20500	\$40.00
		20501	\$40.00

RHEUMATOLOGY	Description	Code	Fee
		20520	\$221.00
		20525	\$311.00
		20526	\$51.00
		20527	\$65.00

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