

APPENDIX B-1



PLAN DOCUMENT FOR STUDENT ADMINISTRATIVE HEALTH FEES (SAHF)

EFFECTIVE DATE: July 1, 2023

For the most current information regarding the SAHF, notices, and general information, students should refer to [this web site](https://wit.edu/student-life/health-wellness/health-services):

<https://wit.edu/student-life/health-wellness/health-services>

TABLE OF CONTENTS

Section	Page(s)
I. Establishment of SAHF	1-2
II. Introduction	3
III. General Information	3
IV. Eligibility	4
V. Coordination of Benefits	4
VI. SAHF Covered Services and Supplies	5
VII. Exclusions	5
VIII. Confidentiality	6
IX. Procedures and Statement of Rights	6 - 13
X. Appeals	9
XI. Definitions	10
XII. Appendix 1 CPT Codes	12

Abbreviations and terms both capitalized and italicized are defined in [Section XI: Definitions](#) (e.g., *Urgent Care*). Capitalized terms without italics are either major or subsection headings in this Plan Document or are terms used to identify organizations or individuals in [Section III: General Information](#) (e.g., Claims Administrator, *SAHF Administrator*). For capitalized terms without italics with no specific section referral, see the Table of Contents and/or [Section III: General Information](#).

ESTABLISHMENT OF SAHF**Section I**

THIS INSTRUMENT sets forth the Plan Document for Student Administrative Health Fees (hereinafter, the SAHF) provided by Wentworth Institute of Technology (hereinafter, referred to as the *Plan Sponsor*).

- A. Establishment of SAHF.** Wentworth Institute of Technology hereby sets forth the SAHF under the following terms and conditions.
- (1) Nothing in this Plan Document or other documents pertaining to the SAHF provided by the *Plan Sponsor* shall/may be construed to constitute health insurance or an indemnification of risk that constitutes a contract of insurance.
 - (2) The *Plan Sponsor* provides the SAHF for the sole purpose of providing health care benefits and services to *SAHF Covered Students*. The SAHF is operated solely in the best interest of students and not for the purpose of profit or financial gain for the *Plan Sponsor*. Fees, if any, designated as “Student Administrative Health Fees” shall reflect actual operating costs. Any administrative costs charged by the *Plan Sponsor* shall be directly related to the operation of the SAHF and reflect fair market value costs.
 - (3) Any reserve funds will be encumbered for the sole purpose of providing SAHF benefits or services, and any long-term reserve funds will be credited with fair market value interest income.
 - (4) As specified in this Plan Document, SAHF will provide benefits on a primary payer basis before the student’s personal health insurance is billed in circumstances when there is a justification for not billing students’ personal health insurance.
 - (5) As specified in this Plan Document, SAHF may provide funding for benefits or services that result from remaining balances from students’ personal health insurance. Under no circumstance does such SAHF funding for benefits or services constitute waiving of charges. The SAHF funds these liabilities on a secondary payor basis, with the students’ personal health insurance plans providing benefits on a primary payor basis.
 - (6) All the SAHF costs and benefits will be equitable, to the extent the SAHF takes a secondary payor position and the students’ personal health insurance provides benefits on a primary payor basis. This includes having the *Plan Sponsor’s* student health insurance/benefit program incur costs that reflect fair market value relative to charges submitted to other in-network insurance providers.
 - (7) Benefits are administered based exclusively on the provisions in this Plan Document. There are no unpublished provisions. Benefits will be provided only as specified in [Section VI, SAHF Covered Services and Supplies](#).
- B. Effective.** The SAHF for the 2023-2024 *Academic Year*, as described herein, is effective July 1, 2023. The SAHF benefits and this Plan Document automatically renew for subsequent *Academic Years* unless SAHF benefits are terminated or amended by the *Plan Sponsor*.
- C. General Provisions.** The SAHF is subject to all of the conditions and provisions set forth in this document and subsequent amendments, which are made a part of this Plan Document.

IN WITNESS WHEREOF, Wentworth Institute of Technology has caused the SAHF to be executed by its duly authorized representative.

Wentworth Institute of Technology

Robert L. Totino

Authorized Signature

Robert L. Totino
Vice President, Finance

Date: <DATE>

INTRODUCTION

Section II

Wentworth Institute of Technology, the *Plan Sponsor*, has prepared this document to help you understand your SAHF benefits. Please read it carefully. Your benefits are affected by certain limitations and conditions designed to encourage you to be a wise consumer of health services and to use only those services you need. Also, benefits are not provided for certain kinds of treatments or services (refer to Section VII, Exclusions).

Abbreviations and terms both capitalized and italicized are defined in [Section XI: Definitions](#). Capitalized terms without italics are either major or subsection headings in this Plan Document or are terms used to identify organizations or individuals in [Section III: General Information](#) (e.g., *SAHF Administrator*). For capitalized terms without italics with no specific Section referral, see the Table of Contents and/or [Section III: General Information](#).

The effective dates for the initial term of this SAHF shall include July 1, 2023, through August 31, 2024. As used in this document, the words *Academic Year* or *Year* means the period beginning September 1, 2023, and ending August 31, 2024, for the 2023-24 *Academic Year*. These same dates are applicable for subsequent *Academic Years* under the terms and conditions of this document.

GENERAL INFORMATION

Section III

Plan Name	Student Administrative Health Fees (SAHF).
Type of Plan	Student Administrative Health Fee – refer to CMS-9981-F (http://www.gpo.gov/fdsys/pkg/FR-2012-03-21/pdf/20126359.pdf).
Effective	July 1, 2023 Original Effective Date: September 1, 2016
<i>Plan Sponsor</i>	Wentworth Institute of Technology
<i>SAHF Administrator*</i>	Director of Compliance and Risk Management Wentworth Institute of Technology 550 Huntington Avenue Boston, MA 02115 Tel: 617-989-4413
Contracted Health Care Provider	Carbon Health Technologies, Inc. 2100 Franklin Street, Suite 355 Oakland, CA 94612 Carbon Health Medical Group of Florida, P.A. 2100 Franklin Street, Suite 355, Oakland, CA 94612

Agent for Service of Legal Process

Wentworth Institute of Technology
Attention: Vice President of Finance
550 Huntington Avenue
Boston, Massachusetts 02115

Termination and/or Modification of SAHF

The *Plan Sponsor* may terminate the SAHF at the end of any *Academic Year*, or change the provisions of the SAHF at any time during *Academic Year* by a written amendment signed by a duly-authorized officer of the *Plan Sponsor*. The consent of any *SAHF Covered Student* is not required to terminate or change the SAHF.

Carbon Student Health Services

The services provided by Carbon Health at the Tree House clinic location. Carbon Student Health Services does not include Carbon’s telehealth services that are not provided by the staff of the Tree House clinic or Carbon’s urgent care or other Carbon Health clinic locations.

ELIGIBILITY

Section IV

Student Eligibility

All active students who, during the then current semester, are enrolled and registered for classes at the Wentworth Institute of Technology, or who are registered for and who are on CoOp are covered by the SAHF. *SAHF Covered Students*, as referred to herein, shall be defined to mean all students who meet the Student Eligibility requirements defined in this section.

Dependent Eligibility

The spouse, domestic partner, child, stepchild, foster child, or other dependent of a *SAHF Covered Student* are not eligible for coverage under the SAHF or to receive services at the Carbon Student Health Services.

Pre-Matriculation Services

Consultations are provided for health-related questions/concerns for students who have been accepted and are planning to enroll at Wentworth Institute of Technology.

Coordination of Benefits

Section V

When SAHF is Primary in Coordination of Benefits with Students’ Personal Insurance

Unless otherwise specified, SAHF will pay up to the maximum benefits specified in Section VI before charges incurred at Carbon Student Health Services are billed to MassHealth, Tricare, or other governmental insurance plans/plan benefits that are required by federal or state law to be a payer of last resort in coordination of benefits with other individual or group health insurance coverage. This means SAHF will be the primary payer and MassHealth and Tricare will be the secondary payer in coordination of benefits.

The *Plan Sponsor* reserves the right to use SAHF and/or other available funds to cover charges incurred by a student at Carbon Health Student Health Services, and not bill the student’s insurance, when the *SAHF Administrator* or their delegate determines that it is in the best interests of either the student or

Wentworth. Considerations for such a determination may include, but are not limited to, highly sensitive care situations where a student's wellbeing could be in jeopardy if charges were submitted to the student's personal health insurance and/or the student was required to pay for the service or supply. Such best-interest determinations will be made solely by the *Plan Administrator* or their delegate on a case-by-case basis.

When SAHF is Secondary in Coordination of Benefits with Students' Personal Insurance

When a student incurs expenses at Carbon Student Health Services at the Tree House clinic location for *Medically Necessary* services or supplies covered by SAHF (refer to Section VI), the student's insurance will be billed first as the primary payer and the SAHF will be the secondary payer in coordination of benefits. The maximum SAHF benefit for services or supplies covered by SAHF is \$35 per visit for any co-payments, coinsurance, deductible, or other balances remaining after a student's personal insurance has paid its maximum benefits.

Students may request that charges not be submitted to their personal health insurance plans, in which case those charges will remain the student's responsibility, except as provided in the preceding subsection.

SAHF Covered Services and Supplies **Section VI**

Examples of *Medically Necessary* SAHF Covered Services and Supplies include:

- Diagnosis and management of episodic and chronic health issues.
- Psychiatric consultations and treatment, in consultation with Wentworth's Counseling Services.
- Laboratory testing that is performed at Carbon Student Health Services.
- Immunizations.
- Screening for sexually transmitted infections (STIs).
- Pregnancy testing.
- Contraception care.
- Allergy injections.
- Sports physicals.
- [Preventive care services](#) as defined by the Affordable Care Act, including routine physical exams, that are provided by Carbon Student Health Services.
- Common skin conditions.

Specific *Medically Necessary* Covered Services by Current Procedural Terminology (CPT) code are attached to this SAHF as Appendix 1.

EXCLUSIONS **Section VII**

SAHF will not provide medical benefits for any of the items listed below, regardless of *Medical Necessity* or recommendations of a *Physician* or *Health Care Provider*.

- Any service or supply that is not customarily provided by Carbon Student Health Services.

- Any service or supply that is not specifically listed in [Section VI, SAHF Covered Services and Supplies](#). These costs may be covered by student’s personal health insurance or the fully insured coverage provided under the SHIP.
- Laboratory testing and services completed by a reference laboratory, regardless of whether the laboratory specimen was taken at the Carbon Student Health Services.
- Any services provided in a location other than at Carbon Student Health Services, including Carbon’s virtual health care services and not provided by the staff of Carbon Student Health Services.
- Expenses incurred for services rendered prior to the effective date of coverage under the SAHF or after coverage terminates, even though *Illness* or *Injury* started while coverage was in force.
- Employment physicals and other physicals unrelated to requirements for students by Wentworth.
- Services which are not *Medically Necessary, even if your personal Physician* or other personal *Health Care Provider* recommends the service or supply.
- The *Plan Sponsor* reserves the right to temporarily suspend and/or limit the availability of SAHF benefits, services, or supplies due to unforeseen closure of facilities, unavailability of professional or support staff, or other circumstances beyond the control of Carbon and/or the *Plan Sponsor*.

CONFIDENTIALITY

Section VIII

Refer to the website for Carbon Student Health Services for the confidentiality policies applicable to services provided under the SAHF.

PROCEDURES AND STATEMENT OF RIGHTS

Section IX

Explanation of Benefits

The SAHF does not provide Explanation of Benefit forms for students enrolled in the SAHF for *Covered Services and Supplies*.

Permissible Incongruity of Benefits, Services, or Supplies

Variability to benefits, services, or supplies may occur under the SAHF. For example, staffing at the Carbon Student Health Student Health Services may be increased during peak demand periods or decreased at other times.

Providing a benefit, services, or supply to a *SAHF Covered Student* does not obligate the *Plan Sponsor* to:

- continue providing the same benefits, services, or supplies while the student is enrolled at Wentworth Institute of Technology; provide access to comparable services to other *SAHF Covered Students*; or
- provide compensation for services or supplies received by *SAHF Covered Students* at locations other than the Carbon Student Health Services. This may be, for example, due to (1) services being needed when the Carbon Student Health Services is closed, (2) perceptions or recommendations that services at other health care providers would be more appropriate at health care providers other than Carbon Student Health Services, (3) dissatisfaction with benefits, services, or supplies provided by

the SAHF, and/or (4) determination by the *Plan Sponsor* to deny requests for modification of services, benefits, or supplies under the SAHF, regardless of *Medical Necessity* or convenience for access to care.

Notice of Change for SAHF Benefits, Services, or Supplies

Benefits, services, and supplies provided by the SAHF are subject to change without notice to SAHF *Covered Students*.

Allocation of Authority

The *SAHF Administrator* will control and manage the operation and administration of the SAHF. The *SAHF Administrator* shall have the sole and exclusive right and discretion:

- (1) to interpret the SAHF, the Plan Document, and any other writings affecting the establishment or operation of the SAHF, both as to legal import and as to the application of the provisions of any such documents to the facts of a particular claim for benefits, and to decide all matters arising under the SAHF, including the right to remedy possible ambiguities, inconsistencies, or omissions; and
- (2) to make factual findings and decide conclusively all questions regarding any claim for benefits made under the SAHF.

All determinations of the *SAHF Administrator* with respect to any matter relating to the administration of the SAHF will be conclusive and binding on all persons.

Powers and Duties of SAHF Administrator

The *SAHF Administrator* will have the following powers and duties:

- (1) to require any person to furnish such reasonable information as the *SAHF Administrator* may request for the proper administration of the SAHF as a condition to receiving any benefits, services, or supplies under the SAHF;
- (2) to make and enforce such rules and regulations and prescribe the use of such forms as the *SAHF Administrator* will deem necessary for the efficient administration of the SAHF;
- (3) to decide on questions concerning the SAHF, or the eligibility of any person to participate in the SAHF, in accordance with the provisions of the SAHF;
- (4) to determine the benefits, services, or supplies that will be payable or provided to any person, in accordance with the provisions of the SAHF;
- (5) to inform *SAHF Covered Student(s)*, as appropriate, of the amount of such benefits, services, or supplies payable or provided, in accordance with the provisions of the SAHF;
- (6) to provide a full and fair review to any *SAHF Covered Student* whose claim for benefits, services, or supplies under the SAHF has been denied in whole or in part;
- (7) to designate other persons to carry out any duty or power that would otherwise be a fiduciary or clerical responsibility of the *SAHF Administrator* under the terms of the SAHF;

- (8) to retain such actuaries, accountants, consultants, third-party administration services, legal counsel, or other specialists, as the *SAHF Administrator* may deem appropriate and necessary for the SAHF's effective administration; and
- (9) to perform any other functions or actions that would commonly be within the purview of a similarly situated administrator for a student health insurance/benefits plan.

Delegation by the SAHF Administrator

The *SAHF Administrator* may employ the services of such persons or organizations as necessary or desirable in connection with the administration of claims, benefits, services, or supplies, or other operations of the SAHF.

The *SAHF Administrator* will also have the power and duty to retain the services of one or more health care professionals, for the purpose of reviewing benefit claims, services, or supplies that are under Appeal for reasons based on medical judgment, such as *Medical Necessity* or *Experimental or Investigational* treatments.

The *SAHF Administrator* (and any person to whom any duty or power in connection with the operation of the SAHF is delegated) may rely upon all tables, valuations, certificates, reports, and opinions furnished by any duly-appointed actuary, accountant, consultant, third-party administration service, legal counsel, or other specialist, and the *SAHF Administrator* or such delegate will be fully protected in respect to any action taken or permitted in good faith in reliance upon such table, valuations, certificates, etc.

Payment of Administrative Expenses

All reasonable costs incurred in the administration of the SAHF including, but not limited to, administrative fees and expenses owed to any third-party administrative service, actuary, consultant, accountant, specialist, or other person or organization that may be employed by the *SAHF Administrator* in connection with the administration thereof, will be paid by the *Plan Sponsor* unless the *SAHF Administrator* directs the SAHF to pay such expenses and such payment by the SAHF is permitted by law.

Fiduciary Liability

To the extent permitted by law, neither the *SAHF Administrator* nor any other entity or person will incur any liability for any acts or failure to act.

Amendment

The *SAHF Administrator* has the right to amend this SAHF in any and all respects at any time, and from time to time, without prior notice to the extent such Amendment constitutes a benefit or service increase or enhancement.

Any such amendment will be by a written instrument signed by a duly-authorized Officer of the *Plan Sponsor*. The *SAHF Administrator* will notify all *SAHF Covered Students* of any amendment modifying the material terms of the SAHF as soon as is administratively feasible after its adoption.

Termination of SAHF

Regardless of any other provision of the SAHF, the *Plan Sponsor* reserves the right to terminate the SAHF at any time without prior notice. Such termination will be evidenced by a written resolution of the *Plan Sponsor*. The *SAHF Administrator* will provide notice of the SAHF's termination as soon as administratively feasible.

Necessary Information

When a *SAHF Covered Student* requests and/or seek benefits, services, or supplies under the SAHF, the student must furnish all the information (e.g., primary insurance coverage) required to implement plan provisions.

Waiver and Estoppel

No term, condition, or provision of the SAHF shall be deemed to be waived, and there shall be no estoppel against enforcing any provision of the SAHF, except through a writing of the party to be charged by the waiver or estoppel. No such written waiver shall be deemed a continuing waiver unless explicitly made so, and it shall operate only with regard to the specific term or condition waived, and it shall not be deemed to waive such term or condition in the future, or as to any act other than as specifically waived. No *SAHF Covered Student* or eligible beneficiary other than as named or described by class in the waiver shall be entitled to rely on the waiver for any purpose.

Non-Vested Benefits

Nothing in the SAHF shall be construed as creating any vested rights to benefits in favor of any *SAHF Covered Student*.

Interests Not Transferable

The interests of the *SAHF Covered Student* and under the SAHF are not subject to the claim of their creditors and may not be voluntarily or involuntarily transferred, alienated, or encumbered without the written consent of the *SAHF Administrator*.

Severability

If any provision of the SAHF shall be held invalid or illegal for any reason, any invalidity or illegality shall not affect the remaining parts of the SAHF, but the SAHF shall be construed and enforced as if the invalid or illegal provision had never been inserted. The *Plan Sponsor* shall have the privilege and opportunity to correct and remedy those questions of invalidity or illegality by amendment as provided in the SAHF.

Headings

All Section headings in this Plan Document have been inserted for convenience only and shall not determine the meaning of the content thereof.

In General

Any and all rights provided to any *SAHF Covered Student* under the SAHF shall be subject to the terms and conditions of the SAHF. This Plan Document shall not constitute a contract between the *Plan Sponsor* and any *SAHF Covered Student*, nor shall it be consideration or an inducement for the initial or continued enrollment of any *Student* by the *Plan Sponsor*. Likewise, maintenance of this SAHF shall not be construed to give any *SAHF Covered Student* the right to be retained as a *SAHF Covered Student* by the *Plan Sponsor* or the right to any benefits not specifically provided by the SAHF.

APPEALS

X

Any complaint or concern for services provided at Carbon Student Health Services should first be addressed with the Medical Director and/or Clinic Manager of Carbon Student Health Services. If a student is not satisfied with the response to a complaint or concern, or the student believes the matter requires consideration by the *SAHF Administrator*, a written appeal may be submitted pursuant to the requirements specified

in this Section. Examples for appeals include, but are not limited to, the insurance requirement imposed by the *Plan Sponsor* for students or requests for special accommodations that have been denied at the Carbon Student Health Services. The *Plan Sponsor* may engage external or internal consultants and/or medical experts to assist the *SAHF Administrator* to consider Appeals.

Under no circumstance will a decision by the *SAHF Administrator* in response to an appeal require Carbon Health to provide services to a student who has been dismissed by Carbon Health as a patient. Likewise, no decision by the *SAHF Administrator* in response to an appeal will compel Carbon Health to provide services or supplies which are not included in this Plan Document as *Covered Services and Supplies/Covered Expenses(s)*.

DEFINITIONS

XI

The following terms define specific wording used in the SAHF.

Academic Year. The period beginning September 1, 2023, through August 31, 2024. The SAHF benefits and this Plan Document automatically renew for subsequent Academic Years unless SAHF benefits are terminated or amended by the Plan Sponsor.

Covered Services and Supplies/Covered Expenses(s): A health service or supply that is eligible for benefits when performed by a *Health Care Provider* and that is specifically identified in the [Section VI, SAHF Covered Services and Supplies](#) as being covered by the SAHF and not otherwise excluded by the SAHF.

Health Care Provider(s). A *Physician, nurse, Hospital or Specialized Treatment Facility* as those terms are specifically defined in this Section.

Health Care Provider includes, but is not limited: a *Physician*, Doctor of Dental Surgery (D.D.S.), Doctor of Dental Medicine (D.M.D.), Doctor of Podiatry Medicine (D.P.M.), Doctor of Chiropractic (D.C.), Doctor of Optometry (O.D.), Certified Nurse Midwife (C.N.M.), Certified Registered Nurse Anesthetist (C.R.N.A.), Registered Physical Therapist (R.P.T.), Psychologist (Ph. D., Ed. D., Psy. D., MA), Registered Nurse (R.N.), Nurse Practitioner (A.R.N.P.), Certified Diabetes Educator, Licensed Clinical Social Worker (L.C.S.W.), Master of Social Work (M.S.W.), Speech Therapist, Occupational Therapist, Physician's Assistant, Registered Respiratory Therapist, Nutritionist, Naturopath (N.D.) or Pastoral Counselor. Spiritual Directors as designated by Wentworth Institute of Technology will be treated as health care providers.

Physician. A licensed Doctor of Medicine or Doctor of Osteopathy practicing within the scope of their license and who is not a close family member of the *SAHF Covered Student* receiving services.

Plan Sponsor. Wentworth Institute of Technology is the sole sponsor of the SAHF, and exercises all discretionary authority and control over the administration of the SAHF and the management and disposition of plan assets.

SAHF: The Student Administrative Health Fees explained in this Plan Document and provided by Wentworth Institute of Technology.

SAHF Covered Student: A person who is eligible for coverage under the SAHF.

SHIP: The Student Health Insurance Program provided by Wentworth Institute of Technology.

Students. Students enrolled at Wentworth Institute of Technology during the current *Academic Year*.

Carbon Student Health Services: The services provided by Carbon Health at the Tree House clinic location. Carbon Student Health Services does not include Carbon's telehealth services that are not provided by the staff of the Tree House clinic or Carbon's urgent care or other community health care clinic locations.

Appendix – 1**CPT Codes**

Specific Medically Necessary Covered Services by Current Procedural Terminology (CPT) code are as follows:

10060 I & D ABSCESS, SIMPLE/SINGLE
 10061 I & D ABSCESS, COMPLICATED/ MULTIPLE
 10080 I & D PILONIDAL CYST, SIMPLE
 10120 REMOVE FOREIGN BODY, SIMPLE
 10121 REMOVE FOREIGN BODY, COMPLICATED
 10140 DRAINAGE OF HEMATOMA/FLUID
 10160 PUNCTURE DRAINAGE, ABSCESS/HEMATOMA/CYST
 12001 SIMPLE REPAIR, <2.6CM-SCALP/NECK/TRUNK/EXTREM/GENIT
 12002 SIMPLE REPAIR, 2.6CM-7.5CM SCALP/NECK/TRUNK/EXTRE/GENIT
 12004 SIMPLE REPAIR, 7.6CM-12.5CM SCALP/NECK/TRUNK/EXTREM/
 12005 SIMPLE REPAIR, 12.6CM-20.0CM SCALP/NECK/TRUNK/EXTREM
 12006 SIMPLE REPAIR, 20.1CM-30.0CM SCALP/NECK/TRUNK/EXTREM
 12007 SIMPLE REPAIR, >30.0CM SCALP/NECK/TRUNK/EXTREM
 12011 SIMPLE REPAIR <2.6CM-FACE/EAR/EYEL/NOSE/LIP
 12013 SIMPLE REPAIR 2.6-5CM-FACE/EAR/EYEL/NOSE/LIP
 12014 SIMPLE REPAIR, 5.1-7.5CM-FACE/EAR/EYELID/NOSE/LIP
 12015 SIMPLE REPAIR, 7.6-12.5CM-FACE/EAR/EYELID/NOSE/LIP
 12016 SIMPLE REPAIR, 12.6-20.0CM-FACE/EAR/EYELID/NOSE/LIP
 12017 SIMPLE REPAIR, 20.1-30.0CM-FACE/EAR/EYELID/NOSE/LIP
 12018 SIMPLE REPAIR, >30.0CM-FACE/EAR/EYELID/NOSE/LIP
 12031 INTERMED REPAIR, < 2.6CM-SCALP/EXTREMITY/TRUNK/AXIL
 12032 INTERMED REPAIR, 2.6-7.5CM-SCALP/EXTREMITY/TRUNK/AX
 12034 INTERMED REPAIR 7.6-12.5CM-SCALP/EXTREMITY/TRUNK/A
 12035 INTERMED REPAIR 12.6-20.0CM-SCALP/EXTREMITY/TRUNK/A
 12036 INTERMED REPAIR 20.1-30.0CM-SCALP/EXTREMITY/TRUNK/A
 12037 INTERMED REPAIR >30CM-SCALP/EXTREMITY/TRUNK/A
 12041 INTERMED REPAIR, <2.6CM-NECK/HAND/FEET/EXT.GENITAIL
 12042 INTERMED REPAIR, 2.6-7.5CM-NECK/HAND/FEET/EXT. GEN
 12044 INTERMED REPAIR 7.6-12.5CM-NECK/HAND/FEET/EXT GEN
 12045 INTERMED REPAIR 12.6-20.0CM-NECK/HAND/FEET/EXT GEN
 12046 INTERMED REPAIR 20.1-30.0CM-NECK/HAND/FEET/EXT GEN
 12047 INTERMED REPAIR >30CM-NECK/HAND/FEET/EXT GEN
 12051 INTERMED REPAIR <2.6-5CM-FACE/EARS/EYELID/NOSE/LIP
 12052 INTERMED REPAIR, 2.6-5.0CM-FACE/EARS/EYELID/NOSE/LIP
 12053 INTERMED REPAIR, 5.1-7.5CM-FACE/EARS/EYELID/NOSE/LIP
 12054 INTERMED REPAIR, 7.6-12.5CM-FACE/EARS/EYELID/NOSE/LIP
 12055 INTERMED REPAIR, 12.6-20.0CM-FACE/EARS/EYELID/NOSE/LIP
 12056 INTERMED REPAIR, 20.1-30.0CM-FACE/EARS/EYELID/NOSE/LIP
 12057 INTERMED REPAIR, >30CM-FACE/EARS/EYELID/NOSE/LIP
 15853 Removal of sutures or staples not requiring anesthesia
 15854 Removal of sutures and staples not requiring anesthesia
 16000 INITIAL TREATMENT OF BURN(S)
 16020 DRESS/DEBRID P-THICK BURN(S) <5% TOTAL BODY SURFACE

17000 Destruction one wart
17003 Destruction of warts 2-15
26010 I & D FINGER ABSCESS, SIMPLE
26011 I & D FINGER ABSCESS, COMPLEX
29105 APPLY LONG ARM SPLINT
29125 APPLY FORARM SPLINT
29130 APPLICATION OF FINGER SPLINT, STATIC
29131 APPLICATION OF FINGER SPLINT, DYNAMIC
29200 STRAPPING - THORAX
29240 STRAPPING - SHOULDER
29260 STRAPPING - ELBOW/WRIST
29280 STRAPPING OF HAND OR FINGER
29345 APPLY LEG CAST - LONG
29505 APPLY LEG SPLINT - LONG, THIGH TO TOES
29515 APPLY LEG SPLINT - SHORT, CALF TO FOOT
29530 STRAPPING - KNEE
29540 STRAPPING - ANKLE/FOOT
29550 STRAPPING - TOES
29700 REMOVAL BOOT/BODY CAST
29705 REMOVAL FULL CAST, ARM/LEG
30901 CONTROL OF NOSEBLEED SIMPLE
30906 CONTROL OF NOSEBLEED SUBSEQUENT
36415 Venipuncture, venous
36416 Venipuncture, capillary
65220 FB RMVL-CORNEAL
69209 RM IMPACTED CERUMEN USING IRR/LAV, UNI
69210 REM IMPAC EAR WAX
81002 Urinalysis dip stick
81003 URINE DIP
81025 Urine Pregnancy
82272 OCCULT BLOOD FECES
82962 Fingerstick Glucose
83986 Vaginal pH
86308 Heterophile Monospot
86328 COVID - 19 Assay
86580 PPD (TB Skin Test)
86769 COVID-19 Antibody
87210 Wet Prep (office test)
87220 KOH (office test)
87426 COVID 19 Antigen Rapid
87502 FLU, AMP PROBE
87635 COVID 19 Molecular Rapid
87636 MULTIPLEX (COVID, FLU)
87637 MULTIPLEX (COVID, FLU, RSV)
87804 Rapid Flu
87811 RAPID ANTIGEN COVID TEST
87880 Rapid Strep
90371 HEPATITIS B IMMUNE GLOBULIN
90471 IMMUNIZATION ADMIN, 1st INJ

90472 IMMUNIZATION ADMIN, EA ADD VACCINE
90632 Hep A Vaccine
90649 HPV (Gardasil)
90651 HPV Vaccine
90653 FLU VACCINE, INACTIVATED, IM
90654 FLU VACCINE, TRIVALENT NO PRESERV
90656 Flu Vaccine, No Preservatives
90657 FLU VACCINE NO PRESERV .25ML, IM
90658 Flu Vaccine
90660 Flu Vaccine, Intranasal
90662 FLU VACCINE, SPLIT NO PRESERV, IM
90672 FLU VACCINE, QUADRIVALENT, INTRANASAL
90674 FLU VACCINE, QUADRIVALENT, NO PRESERV/ANTIBODY .05ML, IM
90682 FLU VACCINE, RIV4, NO PRESERV/ANTIBODY, IM
90686 FLU VACCINE, SPLIT NO PRESERV, 0.5ML, IM
90687 FLU VACCINE, SPLIT NO PRESERV, 0.25ML, IM
90688 FLU VACCINE, QUADRIVALENT, 0.5ML, IM
90703 Td vaccine
90707 MMR
90710 MMRV
90714 TD VACCINE PRESERVE-FREE
90715 TDAP
90734 MENINGOCOCCAL VACCINE
90740 HEP B
90743 HEP B
90744 HEPB VACC PED/ADOL 3 DS IM
90746 HEP B VACCINE, ADULT IM
93000 EKG WITH INTERPRETATION
94150 PEAK FLOW
94640 AIRWAY INHALATION TREATMENT. NEBULIZER
95117 IMMUNOTHERAPY 2+INJ
96372 INJECTION, SC/IM
99201 Office Visit New Patient
99202 Office Visit New Patient
99203 Office Visit New Patient
99204 Office Visit New Patient
99205 Office Visit New Patient
99211 Office Visit Established Patient
99212 Office Visit Established Patient
99213 Office Visit Established Patient
99214 Office Visit Established Patient
99215 Office Visit Established Patient
99384 Periodic Comp Preventive Med
99385 Periodic Comp Preventive Med
99386 Periodic Comp Preventive Med
99394 Periodic Comp Preventive Med
99395 Periodic Comp Preventive Med
99396 Periodic Comp Preventive Med
99401 Preventive Med Individual Counseling

99402 Preventive Med Individual Counseling
99403 Preventive Med Individual Counseling
A4565 Sling
A6219 BANDAID
A6260 WOUND CLEANING
A6449 ACE BANDAGE
E0114 Crutches
G2023 COVID Specimen Collection
H0033 Oral med administration
J0171 Epi injection
J0696 ROCEPHIN INJ 250MG
J05696 Ceftriaxone injection
J1885 Toradol injection
J7603 ALBUTEROL INHALATION SOLUTION
J7613 ALBUTEROL INHALATION SOLUTION
J8499 ORAL MEDICATION
L1830 Knee immobilizer
L1832 Adjustable knee brace
L3215 orthopedic shoe female
L3219 Orthopedic shoe
L3908 Wrist splint
L4350 Ankle air cast