Acu-Care Payor Summary & Election to Participate with Curative

Employer-Sponsored Health Plan, All Products and Networks

Acu-Care, Inc. has negotiated the following reimbursement rates with Curative on behalf of participating Acu-Care members. By signing below, you elect to participate in the Curative network through Acu-Care and agree to accept the contracted rates outlined in this document for services rendered to Curative members.

Contracted Reimbursement Rates: Acupuncture Services

CPT Code	Description	Rate
97810	Acupuncture, w/o electrical stimulation, initial 15 min	$63.25 / unit
97811	Acupuncture, w/o electrical stimulation, each addl 15 min	$43.70 / unit
97813	Acupuncture, w/ electrical stimulation, initial 15 min	$71.30 / unit
97814	Acupuncture, w/ electrical stimulation, each addl 15 min	$48.30 / unit

Additional Modality Rates

CPT Code	Description	Rate
97799, 97039, 97139	Unlisted Modalities: Cupping, Red-Light Therapy & Other	$51.75 / service
97026	Infrared / Red Light Therapy	$45.00 / service

Adjunctive Therapy Services

Adjunctive therapy codes (including 97140, 97110, 97112, 97530, 97032, 97033, 97035, 20560, 20561) are reimbursed at 85% of the current Medicare Physician Fee Schedule under the Physical, Occupational & Speech Therapies category. Rates are based on the Medicare locality applicable to the rendering provider's service location.

Important Information and Guidelines

- **Plan Design:** Curative plans have low cost sharing, with many options having no deductible and no copays for members.
- **Acupuncture Benefit:** Curative members have an acupuncture benefit of 20 visits per plan year. Visits are counted once per date of service, not per code or unit. No specific modifier is required for acupuncture CPT codes 97810-97814.
- **National Coverage:** This agreement covers all 50 states and the District of Columbia. As Acu-Care expands into new states, participating providers may be added through the same roster submission process.
- **Claims Submission:** Participating providers submit claims directly to Curative. Claims should be submitted electronically. For claims submission details, refer to the Curative Provider Manual at curative.com/for-providers.
- **Payer ID:** CURTV
- **EFT Enrollment:** Each participating provider must complete the Curative EFT Enrollment Form to receive electronic payments. The form and enrollment guide are included in the participation packet.

Disclaimer

The reimbursement rates listed above represent the contracted allowable amounts negotiated between Acu-Care, Inc. and Curative. Final payment is subject to the member's individual benefits, plan provisions, claim adjudication, and applicable utilization review. Rates are subject to change in accordance with the terms of the master agreement between Acu-Care, Inc. and Curative.

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Acupuncture IN Managed Care

curative

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Provider Election & Signature Page

I hereby agree to provide health care services and benefits to Beneficiaries of the above named Payor in accordance with the terms and conditions of the Agreement and this Payor Summary.

_____

Name

_____ _____

Signature Date