

Appendix 1

Satellite Med, PLLC.

Satellite Med's Direct Primary Care Memberships include the following services

Urgent and Primary Care for children through senior adults, including:

1. Strep, Covid/Flu, and Mono Testing.
2. Acute sick walk-in visits as needed.
3. Flu and Tetanus shots.
4. Wellness evaluations: establishing patients with Satellite Med healthcare providers.
5. Physical examinations for athletics.
6. Preventative care and annual exams.
7. Medical management of chronic diseases.
8. Lab testing for annual exams. (See Appendix 3).
9. Lab testing for chronic disease management (See Appendix 3).
10. Laceration and wound repair within scope of practice.
11. Joint injections as directed by the provider.
12. X-ray, Ultrasound, and EKG testing.
13. Disability and FMLA paperwork assistance.
14. Prescription medications (see Appendix 4).
15. Referrals to specialists.
16. Telemedicine access for acute and primary care.
17. 24/7 Portal Access

****Not all services above are offered with every plan. Please review Appendix 2 for a breakdown of our services.***

Appendix 2 Satellite Med, PLLC.

Plans and Prices for DPC Membership Plans

Categories	Bronze	Silver	Gold
Monthly Fees	\$75/month	\$125/month	\$185/month
Annual Payment Discount	\$60/year	\$120/year	\$180/year
Annual Payment After Discount	\$840/year	\$1380/year	\$2040/year
Additional Member Fee (2-26 years old)	\$50/month	\$80/month	\$130/month
Telemedicine Access	Yes	Yes	Yes
Number of Sick or Well visits per year	5	10	Unlimited
Annual Physical	Yes	Yes	Yes
Routine Labs (Appendix 3)	1 panel per year	As Needed per Provider	As Needed per Provider
Diagnostic Labs (Appendix 3)	Discounted	Discounted	As Needed per Provider
Strep/Covid Flu/Mono Testing	As Needed per Provider	As Needed per Provider	As Needed per Provider
X-Ray	None	As Needed per Provider	As Needed per Provider
Ultrasound	None	As Needed per Provider	As Needed per Provider
EKG	None	As Needed per Provider	As Needed per Provider
Medications (Appendix 4)	None	Acute Meds Only	Acute and Chronic Meds
Laceration and Wound Repair	None	None	As Needed per Provider
Joint Injections	None	None	As Needed per Provider
Flu and Tetanus Shots	Yes	Yes	Yes
Referrals to Specialists	Yes	Yes	Yes



Appendix 3

Satellite Med, PLLC.

***Routine Labs included in Direct Primary Care Memberships
(Bronze, Silver, and Gold)
(Reflexed labs not included)***

COVID/Flu Swab	Strep Test	Monospot
CBC Panel	CMP Panel	Lipid Panel
Hemoglobin A1C Test	TSH Test	Free T4 Test
Urinalysis w/ Micro	PSA Test	Pap Smear
Estradiol	Progesterone	Testosterone

***Diagnostic Labs included in Direct Primary Care Memberships
(Gold)
(Reflexed labs not included)***

ALLERGEN, GLUTEN IGE	IRON BINDING CAPACITY
ALPHA GAL x1	IRON,TOTAL
AMYLASE (S)	LEUKOCYTE ASSESSMENT FECAL
ANA	LIPASE
ANA TITER	LUTEINIZING HORMONE LH
BASIC METABOLIC PANEL	MAGNESIUM
BILIRUBIN, DIRECT	NATRIURETIC PEPTIDE (BNP)
BILIRUBIN TOTAL	NEISSERIA GONORRHOEAE AMP
BLOOD OCCULT	PREGNANCY TEST (URINE)
C DIFFICILE GDH	PROGESTERONE
CANCER ANTIGEN 125 (II)	PROLACTIN
CARCINOEMBRYONIC ANTIGEN-CEA	PROTEIN ELECTROPHORESIS
CARDIAC PANEL	PROTHROMBIN TIME WITH INR
CHEM 13 STAT	PTH INTACT
CHLAMYDIA TRACHOMATIS	RHEUMATOID FACTOR, QUANT
CLOSTRIDIUM DIFF/TOXIN AB	RPR SCREEN RFLX TITER
CORTISOL,TOTAL	RSV
CRP	SED RATE
D-DIMER	STREPTOLYSIN O ANTIBODY
ELECTROLYTES PANEL	TB SKIN TEST
ESTRADIOL	TESTOSTERONE,TOTAL
FOLIC ACID(FOLATE)	THYROID PEROXIDASE AB
FOLLICLE STIMULATING HORMONE FSH	TISSUE EXAM BY KOH SLIDE FOR FUNGI
GENERAL HEALTH PANEL	URIC ACID
GLUCOSE	URINALYSIS BY DIPSTICK
HEPATIC FUNCTION PANEL	VITAMIN B12
HERPES SIMPLEX 1	VITAMIN D,25-HYDROXY
HERPES SIMPLEX TYPE 2	WET PREP

**Discounted Labs included in Direct Primary Care Memberships
(Bronze, Silver, and Gold)**

(Reflexed labs not included)

ABO TYPING	HEMATOCRIT
ACUTE HEPATITIS PANEL	HEMATOLOGY REVIEW BY PATHOLOGY
AFP, TUMOR MARKER	HEMOGLOBIN
ALBUMIN	HEPATITIS B SURFACE AB
ALKALINE PHOSPHATASE	HAPTOGLOBIN
ALPHA GAL IGE	HLA-B27 ANTIGEN
CALCIUM TOTAL SERUM	HOMOCYSTEINE
CELIAC DISEASE AB PANEL	HIV I/II SCREEN W/REFLEX
CHLAMDIA/GC AMPLIFIED	IMMUNOGLOBULIN A (IGA) S
CHLORIDE	IMMUNOGLOBULIN IGE AB
CHOLESTEROL	IMMUNOGLOBULIN IGG
CO2 SERUM	IMMUNOGLOBULIN IGM
COVID /FLU - PCR	INSULIN FASTING
C-PEPTIDE	LITHIUM
CPK	LYME DISEASE IGG/IGM
CREATININE BLOOD	LYME WESTERN BLOT IGM
CREATININE CLEARANCE	PHOSPHATASE,ALKALINE
CRP, HIGH SENSITIVITY	PLATELET COUNT
CYCLIC CITRILLINE PEPTIDE	POTASSIUM
DHEA-SULFATE	PROTEIN TOTAL
DRUG TEST-FOR CONTROLLED SUBSTANCES	RENAL FUNCTION PANEL
EB VIRUS AB PANEL	RETICULOCYTE COUNT
EB Virus Anti vcm IGG,IGM	RH FACTOR
EHRlichia CHAFF IGM	RMSF IGG CUSTOM P 625
EHRlichia CHAFF. IGG	RMSF IGM CUSTOM P 625
EPSTEIN-BARR VCA IGG AB	SEX HORMONE BINDNG GLOBUL
EPSTEIN-BARR VIRAL CAPSID	SGOT (AST)
FACTOR V LEIDEN BY PCR	SGPT (ALT)
FERRITIN	SODIUM SERUM
FOOD ALLERGY PANEL	T3 FREE
GGT (GAMMA GLUTAMYL TRAN)	T3 TOTAL
GLIADIN ANTIBODY, IGA	T4 (THYROXINE) TOTAL
GLIADIN ANTIBODY, IGG	THYROGLOBULIN ANTIBODY
GLUCOSE TOLERANCE PANEL	THYROGLOBULIN
GLUTEN SENSITIVITY PAN	TRIGLYCERIDE
GTT 3 SPECIMEN	TSI
GTT 3HR SPECIMEN	TTG/ IGA
H PYLORI BREATHTEK	UREA NITROGEN
HCG,QUANTITATIVE (SERUM)	VALPROIC ACID
CALCIUM, 24 HOUR URINE	C DIFFICILE CDH
CATECHOLAMINES,FRACT,24U	CLOSTRIDIUM DIFF/TOXIN AB
CORTISOL, FREE,24 HR URINE	TTG IGA
CREATININE, 24 HOUR URINE	RETICULIN IGA
CULTURE URINE	GLIADIN ANTIBODY, IGA
METANEPHRINES, 24 HR	GLIADIN ANTIBODY, IGG
MICROALBUMIN- URINE	ENDOMYSIAL AB IGA
MICROALBUMIN/CREAT RAN	EPSTEIN-BARR VIRAL CAPSID
PROTEIN, 24HR URINE	EPSTEIN-BARR VCA IGG AB
PROTEIN/CREAT RATIO UR	EBV NUCLEAR ANTIGEN IGG
SODIUM, 24HR URINE	EB VIRUS EARLY ANTIGEN
GIARDIA/CRYPTO	GLIADIN ANTIBODY, IGA
OVA AND PARASITE	GLIADIN ANTIBODY, IGG
STOOL CULTURE CAMPYLOBACTER	TTG IGA



Appendix 4

Satellite Med, PLLC.

Medications included in Gold Direct Primary Care Memberships

*No Meds included for Bronze Members.

*Silver Members receive Acute Meds highlighted in Blue.

*Patients are financially responsible for meds prescribed outside of this list.

*Meds included only available at Satellite Med Dispensary.

ACYCLOVIR TAB 400MG	FLUCONAZOLE TAB 150MG	METOPROLOL TAB 50MG ER
ACYCLOVIR TAB 800MG	FLUOXETINE CAP 10MG	METRONIDAZOLE TAB 500MG
Albuterol Neb	FLUOXETINE CAP 20MG	METROPOL SUC 100MG ER
ALLOPURINOL TAB 100MG	FLUOXETINE CAP 40MG	METROPOL SUC 125MG ER
ALLOPURINOL TAB 300MG	FLUTICASONE SPR 50MCG	METOPROLOL SUC 50MG
AMITRIPTYLIN TAB 25MG	FUROSEMIDE TAB 20MG	MONTELUKAST TAB 10MG
AMLODIPINE TAB 10MG	FUROSEMIDE TAB 40MG	MUPIROCIN OIN 2%
AMLODIPINE TAB 5MG	GABAPENTIN CAP 100MG	NAPROXEN TAB 500MG
AMOX/CLAV 875/125MG	GABAPENTIN CAP 300MG	NITROFUR MAC CAP 100MG
AMOX/K CLAV TAB 500-125	GABAPENTIN TAB 600MG	OMEPRAZOLE CAP 20MG
AMOXICILLIN CAP 500MG	GLIMEPIRIDE 4MG	OMEPRAZOLE CAP 40MG
AMOXICILLIN SUS 250/5ML	GLIPIZIDE TAB 10MG	ONDANSETRON TAB 4MG ODT
AMOXICILLIN TAB 875MG	GLIPIZIDE TAB 5MG	PANTOPRAZOLE TAB 40MG
ANASTROZOLE TAB 1MG	HYDRALAZINE TAB 50MG	PAROXETINE TAB 20MG
ATENOLOL TAB 25MG	HYDROCHLOROT CAP 12.5MG	PHENTERMINE TAB 37.5MG
ATENOLOL TAB 50MG	HYDROCHLOROT TAB 25MG	PIOGLITAZONE TAB 30MG
ATORVASTATIN TAB 20MG	HYDROXYZ HCL TAB 25MG	PREDNISONE TAB 10MG
ATORVASTATIN TAB 40MG	HYDROXYZ PAM TAB 50MG	PREDNISONE TAB 20MG
ATORVASTATIN TAB 80MG	IBUPROFEN TAB 800MG	PREDNISONE TAB 5MG
AZITHROMYCIN TAB 250MG	LANSOPRAZOLE CAP 30MG DR	PROMETHAZINE TAB 25MG
AZO PAIN REL TAB 95MG	LEVOFLOXACIN TAB 750MG	RIZATRIPTAN TAB 10MG
B-100 NATUREMADE	LEVOTHYROXIN TAB 100MCG	ROSUVASTATIN TAB 10MG
BENAZEPRIL TAB 10MG	LEVOTHYROXIN TAB 112MCG	ROSUVASTATIN TAB 20MG
BENAZEPRIL TAB 40MG	LEVOTHYROXIN TAB 150MCG	ROSUVASTATIN TAB 5MG
BENZONATATE CAP 200MG	LEVOTHYROXIN TAB 200MCG	SERTRALINE TAB 100MG
BUPROPN HCL TAB 150MG XL	LEVOTHYROXIN TAB 25MCG	SERTRALINE TAB 50MG
BUSPIRONE TAB 10MG	LEVOTHYROXIN TAB 50MCG	SILDENAFIL TAB 20MG
CARVEDILOL TAB 25MG	LEVOTHYROXIN TAB 75MCG	SIMVASTATIN TAB 10MG

CELECOXIB CAP 200MG	LEVOTHYROXIN TAB 88MCG	SIMVASTATIN TAB 20MG
CEPHALEXIN 500 MG	LISINOP/HCTZ TAB 20-12.5	SIMVASTATIN TAB 40MG
CETIRIZINE TAB 10MG	LISINOP/HCTZ TAB 20-25	SMZ-TMP DS TAB 800-160
CHLORTHALIDONE TAB 25MG	LISINOPRIL TAB 10MG	SPIRONOLACT TAB 25MG
CIPRO TAB 500MG	LISINOPRIL TAB 20MG	SUDOGEST TAB 30MG
CITALOPRAM TAB 20MG	LISINOPRIL TAB 40MG	SUMATRIPTAN TAB 100MG
CITALOPRAM TAB 40MG	LISINOPRIL TAB 5MG	SUMATRIPTAN TAB 50MG
CLARITHROMYC TAB 500MG	LORATADINE 10MG	TADALAFIL TAB 20MG
CLINDAMYCIN CAP 300MG	LOSARTAN POT TAB 100MG	TAMSULOSIN CAP 0.4MG
CLONIDINE TAB 0.1MG	LOSARTAN POT TAB 40MG	TESTOST CYP INJ 200MG/ML
CLONIDINE TAB 0.2MG	LOSARTAN POT TAB 50MG	TIZANIDINE
CLOTRIMAZOLE 1%	MAG OXIDE TAB 400MG	TOPIRAMATE TAB 100MG
CYCLOBENZAPR TAB 10MG	MECLIZINE TAB 12.5MG	TOPIRAMATE TAB 25MG
DICLOFENAC TAB 75MG DR	MECLIZINE TAB 25MG	TOPIRAMATE TAB 50MG
DICYCLOMINE 10MG	MELOXICAM TAB 15MG	TRAZODONE TAB 150MG
DOCUSATE SOD CAP	MELOXICAM TAB 7.5MG	TRAZODONE TAB 50MG
DOXAZOSIN TAB 2MG	METFORMIN TAB 1000MG	TRIAMT/HCTZ TAB 37.5-25
DOXYCYCLINE TAB 100MG	METFORMIN TAB 500MG	VALACYCLOVIR TAB 1GM
DOXYCYCL HYC TAB 100MG	METFORMIN TAB 500MG ER	VALACYCLOVIR TAB 500MG
DULOXETINE CAP 30MG	METHOCARBAMOL TAB 500MG	VENLAFAXINE CAP 150MG ER
ESCITALOPRAM TAB 10MG	METHYLPRED TAB 4MG	VENLAFAXINE CAP 37.5MG
ESCITALOPRAM TAB 20MG	METOPROL TAR TAB 100MG	VENLAFAXINE CAP 75MG
ESTRADIOL TAB 1MG	METOPROL TAR TAB 25MG	VITAMIN D-3 TAB 2000UNIT
FAMOTIDINE TAB 20MG	METOPROL TAR TAB 50MG	VITAMIN D-3 TAB 5000UNIT
		ZOLPIDEM TAB 10MG

