

Provider: CareMaster Medical Services
TIN: 58-1782573
Effective: 10/17/2012

240 O'Dell Road
Griffin, GA 30224
(770)227-1264

Provider agrees to accept the following rates as payment in full for services provided:

For all services, treatments, supplies, expenses, or other charges, Provider will be reimbursed at a rate of the lesser of billed charges or a rate equal to 90% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule except for CNA services, which will be reimbursed at a rate of the lesser of billed charges or a rate equal to 95% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule.

These rates are as follows:

HCPCS Code	Description	Reimbursement
S9123	Private Duty, Skilled Nursing, RN, Hourly	\$45.56
S9124	Private Duty, Skilled Nursing, LPN, Hourly	\$38.40
S9122	Private Duty, CNA, Hourly	\$22.56
T1030	Skilled Nursing Visit, RN	\$125.66
T1031	Skilled Nursing Visit, LPN	\$125.66
SKNSU*	Supplies Per Visit	\$7.49

*Note: These supplies are considered the normal, miscellaneous supplies used in skilled nursing care (wound care). Prescription or special order supplies, as directed by a physician's orders, would be in addition to the visit supplies and would be billed separately.