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

HCPCS Code	Rate
59123	\$157.25
\$9123	\$76.50
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S9097/99350	\$148.75
S9123	\$76.50
99345	\$174.25
S9097/99350	\$102.00
S9124	\$72.25
S9122/99509	\$29.75
S9131/97799	\$161.50
97001	\$165.75
S9129	\$161.50
97003	\$165.75
S9128	\$165.75
	S9123 S9123 S9123 S9097/99350 S9097/99350 S9123 99345 S9097/99350 S9097/99350 S9124 S9124 S9122/99509 S9131/97799 97001 S9129 97003

AL, GA, FL, MS, TN