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

<u>DME</u>: For all durable medical equipment and medical supplies and services provided the PROVIDER will be reimbursed for the lesser of covered charges or a fee equal to 80% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule.

<u>ALL OTHER SERVICES</u>: For all services, treatments, expenses, or other charges, PROVIDER will be reimbursed for the lesser of covered charges or a fee equal to 85% of the State of Alabama Department of Labor maximum allowable charge for Workers' Compensation.