

Provider: American Health Imaging of Alabama, LLC  
TIN: 63-1226975  
Effective: 08/17/2017

2101 4<sup>th</sup> Avenue South, Suite 100  
Birmingham, AL 35233  
(205) 251-1300

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

Description	Reimbursement
<b>MRI</b>	
MRI, Without Contrast	\$460.00
MRI, With Contrast	\$460.00
MRI, With/Without Contrast	\$650.00

PROVIDER agrees to accept a fee equal to 80% of the State of Alabama Department of Labor workers' compensation fee schedule for CT's with or without contrast.

**For all services, treatments, supplies, expenses, or other charges provided by the PROVIDER at a location other than their own facility, PROVIDER will be reimbursed for the lesser of billed charges or a fee equal to 80% of the State of Alabama Department of Labor workers' compensation fee schedule.**