

Provider: Dr. Richard Harris
TIN: 20-0073046
Effective: 02/02/2018

33650 US-43
Thomasville, AL 36784
(334) 636-6262

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

Independent Medical Examinations (IME's)

For all Independent Medical Examinations (IME's) PROVIDER will be reimbursed at the following rates as payment in full:

- IME = \$1,250.00 per exam paid prior to appointment (*less than 500 pages)
Additional \$500 fee for records exceeding 500 pages
- No show / late / cancellation fee = \$250.00
Exams not cancelled 24 hours prior to appointment time.
- Testimony Fees = \$1,000.00 per hour
- Record Review Only (less than 100 pages) = \$600.00

All Other Services

For all services, treatments, supplies, expenses, or other charges, PROVIDER will be reimbursed for the lesser of billed charges or a fee equal to the Blue Cross Blue Shield (PMD) fee schedule plus three percent (3%).