

Provider: Vestavia Hills Imaging Center
TIN: 20-2640268
Effective: 05/18/2018

2017 Canyon Road, Suite 25
Vestavia, AL 35216
(205) 824-8262

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

Description	Reimbursement
MRI	
MRI, Without Contrast	\$446.00
MRI, With Contrast	\$446.00
MRI, With/Without Contrast	\$595.00
CT	
CT, Without Contrast	\$255.00
CT, With Contrast	\$255.00
CT, With/Without Contrast	\$255.00

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 85% of the State of Alabama Department of Labor workers' compensation fee schedule.