

Provider: Greene County Hospital
TIN: 32-0222103
Effective: 10/01/2020

509 Wilson Avenue
Eutaw, AL 35462
(205) 372-3388

EXHIBIT A

HOSPITAL FEE SCHEDULE

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

- I. **Inpatient Services:** For all services, treatments, supplies, expenses, or other charges, Hospital will be reimbursed at a rate equal to 80% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule at the effective date of discharge. The calculation for the AlaMed inpatient rate shall be inclusive of all methods of calculation in the AlaMed inpatient state fee schedule, including but not limited to the stop-loss provisions in the event the state fee schedule includes a stop-loss.*
- II. **Outpatient Services not covered in Paragraph III below:** For all services, treatments, supplies, expenses, or other charges, Hospital will be reimbursed at a rate equal to 80% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule.*
- III. **Greene County Physicians Clinic Tax ID 63-6005451:** For all services, treatments, supplies, expenses, or other charges, Hospital will be reimbursed at a rate equal to 80% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule.

*Note: To calculate the AlaMed rate, first calculate the state rate, and then apply the applicable discount.