Provider: Baldwin Bone & Joint, PC

TIN: 63-1283588 Effective: 10/01/2001

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

I. Effective 07/28/2021: For services NOT listed in Paragraph I / Exhibit A shown above, PROVIDER will be reimbursed for the lesser of billed charges or a fee equal to 85% of the State of Alabama Department of Labor (DOL) fee schedule. (Previous Rate = 90% DOL)

II. **Diagnostic Services: Effective 07/30/2018** - PROVIDER will be reimbursed at the rates below as payment in full:

EXHIBIT A Diagnostic Services

| Description | Reimbursement |
|----------------------------|---------------|
| MRI | |
| MRI, Without Contrast | \$445.00 |
| MRI, With Contrast | \$445.00 |
| MRI, With/Without Contrast | \$595.00 |

III. In House Dispensing: Effective 03/17/2020 - Provider acknowledges that the Payor may have an agreement for negotiated rates with a Pharmacy Benefits Manager (PBM). Provider agrees to honor and accept the rates of the Payor's PBM if the Provider administers or dispenses prescription medication (1) out of the Provider's office or (2) uses a mail order pharmacy to any of the Payer's patients/claimants. To the extent that Provider is involved in the administration and delivery of prescription medication, Provider shall comply with all federal and state laws relating thereto.

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