Provider: Sonos Imaging TIN: 47-3518989 Effective: 03/25/2022

2715 Legends Parkway Prattville, AL 36066 (334) 676-4520

For diagnostic services provider will be reimbursed for the following as payment in full:

Description	Reimbursement
MRI	
MRI, Without Contrast	\$500.00
MRI, With Contrast	\$525.00
MRI, With/Without Contrast	\$650.00
СТ	
CT, Without Contrast	\$225.00
CT, With Contrast	\$250.00
CT, With/Without Contrast	\$275.00

For all other services, treatments, supplies, expenses, or other charges, PROVIDER will be reimbursed for the lesser of billed charges or a fee equal to 80% of the Alabama Department of Labor workers' compensation fee schedule. Reimbursement will not exceed the Alabama Department of Labor fee schedule.

Exhibit: AM_500 Page 1 of 1