

Provider: St. Vincent's East
TIN: 63-0578923
Effective: 6/1/1997

50 Medical Park East Drive
Birmingham, AL 35235
(205)838-3000

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

- I. **Inpatient Services:** A rate equal to 80% of the rate extended to the State of Alabama Department of Labor (DOL) pursuant to the Negotiated Participating Agreement between the DOL and the individual Hospital in effect at the date of discharge. The calculation for the AlaMed inpatient rate shall be inclusive of all methods of calculation in the Hospital's 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 Provided in Paragraphs III or IV below:** A rate equal to an "extra" 5% off of billed charges than that provided in the Negotiated Participating Agreement between the State of Alabama Department of Labor (DOL) and the individual Hospital in effect at the date of discharge.* For example, if the DOL rate is to pay 85% of billed charges, then the AlaMed rate is to pay 80% of billed charges.
- III. **Outpatient Physical Therapy:** A rate equal to 85% of the State of Alabama Department of Labor (DOL) workers' compensation fee schedule.
- IV. **Physician Services:** If billed by the Hospital, a rate equal to 90% 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.