

Provider: Infirmiry Long Term Acute Care Hospital  
TIN: 20-3713023  
Effective: 4/1/2006

5 Mobile Infirmiry Circle  
Mobile, AL 36607  
(251)435-5822

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

- I. **Inpatient Services:** A rate equal to 82% 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 at the effective 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:** 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 at the effective date of discharge. For example, if the state fee schedule is to pay 85% of billed charges, then the AlaMed rate is to pay 80% of billed charges.

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