

Provider: Preferred Medical Network
TIN: 31-1573142
Effective: 09/22/2016

309 Towne Park Circle, Ste 100
Louisville, KY 40243
(888) 586-4650

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

Transportation and Translation:

- For all services, treatments, supplies, expenses, or other charges, Provider will be reimbursed for the lesser of billed charges or a rate equal to 78% of the State of Alabama Department of Labor workers' compensation fee schedule

Durable Medical Equipment

- For all services, treatments, supplies, expenses, or other charges, Provider will be reimbursed for the lesser of billed charges or a rate equal to 78% of the State of Alabama Department of Labor workers' compensation fee schedule. Except for the following DME items listed below.
- Transparent Cost + 15% on the following specialized electrotherapy, DME, and bone growth stimulators: Breg, RS Medical, VQ OrthoCare Electrotherapy, Electronic Waveform Lab, Zynex, EMSI, KCI, DynaSplint, Joint Active Systems, Biomet/EBI, Bioventus/Exogen, DonJoy, and Orthofix. If CPT code is within State fee schedule and provider has not requested a brand name, payer will only pay up to the State fee schedule.

Diagnostics

- For all services, treatments, supplies, expenses, or other charges, Provider will be reimbursed for the lesser of billed charges or a rate equal to 78% of the State of Alabama Department of Labor workers' compensation fee schedule.

All other terms set forth in the Agreement referred hereinabove shall be the same as specified in the Agreement, and they are hereby affirmed and ratified by the parties.