

Provider: SportsMed Orthopaedic Surgery & Spine Center
 TIN: 63-1262177
 Effective: 10/24/2016

4715 Whitesburg Drive
 Huntsville, AL 35802
 (256)881-5151

For all services, treatments, supplies, expenses, or other charges, PROVIDER will be reimbursed for the lesser of billed charges or a fee equal to 103% of the Blue Cross Blue Shield of Alabama's Preferred Medical Doctor (PMD) fee schedule except diagnostic rates listed in Exhibit A.

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

EXHIBIT A: DIAGNOSTIC RATES

CPT Code	Description	Reimbursement
MRI, Without Contrast		
70336	Bilateral TMJ	\$525.00
70540	Orbit, Face & Neck	\$525.00
70551	Brain, Stem	\$525.00
71550	Chest, Mediastinum	\$525.00
72141	Cervical Spine	\$525.00
72146	Thoracic Spine	\$525.00
72148	Lumbar Spine	\$525.00
72196	Pelvis	\$525.00
73220	Upper Extremity	\$525.00
73221	Upper Extremity Joint	\$525.00
73720	Lower Extremity	\$525.00
73721	Lower Extremity Joint	\$525.00
74181	Abdomen	\$525.00
75552	Myocardium	\$525.00
MRI, With Contrast		
70552	Brain Stem	\$525.00
72142	Cervical Spine	\$525.00
72147	Thoracic Spine	\$525.00
72149	Lumbar Spine	\$525.00
MRI, With/Without Contrast		
70553	Brain Stem	\$700.00
72156	Cervical Spine	\$700.00
72157	Thoracic Spine	\$700.00
72158	Lumbar Spine	\$700.00