

PREVAILING RATE/MAXIMUM FEE SCHEDULE
FOR AMBULATORY SURGERY CENTERS

<u>FACILITY NAME</u>	<u>DISCOUNT RATE</u>	<u>EFF. DATE</u>
Alabama Outpatient Surgery Center	15%*	5/19/2008
American Surgery Center	10%	6/15/2008
Birmingham Outpatient Surgery Center, LTD	15%*	5/19/2008
Birmingham Surgery Center, The	15%*	7/15/2007
Children's South Outpatient Center	#	1/1/2008
# - The lesser of \$2,400.00 or 70% of charges		
Colon & Digestive Disease Center, PC	10%	11/1/2007
Cullman Surgery Center	12%*	10/1/2007
Dale Medical Center ASC	25%	3/1/2008
Dauphin West Surgery Center	7%	6/15/2008
Decatur Ambulatory Surgery Center	7%	11/1/2007
Dothan Surgery Center	15%**	12/15/2007
Eye Surgery Center of North Alabama	10%	5/19/2008
Florence Surgery Center	10%*	5/19/2008
Gadsden Surgery Center	10%*	5/19/2008
Gulf Coast Surgical Partners d/b/a The Orthopaedic Center at Springhill	15%*	11/1/2007
Infirmity Eastern Shore ASC	15%	7/1/2007
Lamar Healthcare Services (Closed 01/01/2006)	15%*	9/1/2005
Madison Surgery Center	10%*	1/1/2008
Medplex Outpatient Surgery Center	20%	1/1/2008
Mobile Surgery Center	7%*	5/19/2008
Montgomery Eye Surgery Center	15%	5/19/2008
Montgomery Surgical Center	15%*	9/1/2007
North River Surgical Center, Inc.	15%	1/1/2008
Northeast Alabama Eye Surgery Center	25%	5/19/2008
Outpatient Services East	15%*	7/1/2008
Shelby Baptist Ambulatory Surgery Center	17.5%	4/1/2008
South Alabama Outpatient Services Surgery Center of Decatur LP	12%*	10/1/2007
Surgery Center of Decatur LP	7%	11/1/2007
Surgery Center (Oxford), The	15%*	5/19/2008
Surgery Center of Huntsville, The	12%	6/15/2008
Surgicare of Mobile, Ltd.	10%*	5/19/2008
Tuscaloosa Endoscopy Center	10%	8/7/2008
Tuscaloosa Surgical Center	10%*	5/19/2008
U. of Alabama Health Services Foundation (Kirklin Clinic)	15%	8/30/2007
UAB Medical West ASC, LLC	15%	4/1/2008
Valley Surgery Center	15%	9/1/2007
Vision Correction Center	10%	9/1/2007
Visionary Usa.COM Surgery Institute	10%	1/1/2008

* The identified surgery centers have agreed to a maximum reimbursement of cost plus 10 percent for hardware, implants and prosthesis used in authorized workers' compensation outpatient surgery cases that cost over \$200.00. Copies of invoices are to be included with submitted claims.

** The identified surgery center has agreed to a maximum reimbursement of cost plus two (2) percent for hardware, implants and prosthesis used in authorized workers' compensation outpatient surgery cases that cost over \$200.00. Copies of invoices are to be included with submitted claims.