

**AMENDMENT
TO THE PARTICIPATING PROVIDER GROUP AGREEMENT BETWEEN
THE FIRST HEALTH NETWORK
AND
MAINE NETWORK FOR HEALTH
BANGOR, MAINE**

The parties to the above entitled Agreement hereby amend said Agreement to be effective 4/1/09:

Appendix A is amended by deleting and replacing with the following:

**APPENDIX A
OUTPATIENT CARE NETWORK REIMBURSEMENT**

The following outlines reimbursement parameters associated with Participating Patients:

- A. Services shall be reimbursed at **135%** of the amounts specified in **2005 Medicare Fee Schedules** as adjusted and supplemented by First Health, except for those services defined under Sections B, C or D below.
- B. Anesthesia services (CPT range 00000-01999) shall be reimbursed using ASA units times a conversion factor of \$42.00 per unit.
- C. Maternity care billed as global services shall be reimbursed at the rate of \$2,400.00 for a Normal Delivery and \$2,640.00 for a C-Section.
- D. Durable Medical Equipment shall be reimbursed in accordance with **135%** of 2005 DMERC amounts.
- E. The following Immunization codes are to be reimbursed at 110% of 2009 AWP:

<u>Code</u>	<u>Rate</u>	<u>Code</u>	<u>Rate</u>	<u>Code</u>	<u>Rate</u>	<u>Code</u>	<u>Rate</u>
90633	\$ 39.31	90669	\$ 114.30	90700	\$ 28.82	90715	\$ 51.02
90648	\$ 31.19	90680	\$ 95.48	90707	\$ 63.37	90716	\$ 111.58
90649	\$ 172.07	90698	\$ 99.22	90713	\$ 32.65	90734	\$ 135.26
						90744	\$ 29.17

- F. Reimbursement for services that are billed with a procedure code for which there is no assigned First Health value as outlined in Sections A, B, C or D above shall be reimbursed according to the standard fee schedule for the services as determined by First Health.
- G. Reimbursement from Workers' Compensation Payors for services rendered to occupationally ill/injured employees shall be as follows:
 - (1) If any state law or regulation establishes rules or guidelines for the payment of health care services, reimbursement shall not exceed **100%** of the maximum amount payable under such rules or guidelines. Any procedure code which is unvalued shall be reimbursed pursuant to Section A, B, C, D, E or F of this Appendix. This rate of reimbursement shall apply whether such rules or guidelines are in existence at the time of execution of this agreement or established at a later time.
 - (2) In the absence of any state law or regulation set forth in Section G, Paragraph (1), reimbursement shall be **100%** of the billed amount not to exceed the usual and customary charge for the services, as determined by First Health or Payor.

H. Reimbursement from auto insurance payors for health care services rendered to auto insurance patients shall be as follows:

- (1) If any state law or regulation establishes rules or guidelines for the payment of health care services, reimbursement shall not exceed **100%** of the maximum amount payable under such rules or guidelines. Any procedure code which is unvalued shall be reimbursed pursuant to Section A, B, C, D, E or F of this Appendix. This rate of reimbursement shall apply whether such rules or guidelines are in existence at the time of execution of this agreement or established at a later time.
- (2) In the absence of any state law or regulation set forth in Section H, Paragraph (1), reimbursement shall be **100%** of the billed amount not to exceed the usual and customary charge for the services, as determined by First Health or Payor.

I. In no case shall reimbursement exceed Provider's usual and customary charge for the services rendered.

J. All billings shall be in accordance with established Medicare guidelines unless otherwise required by law.

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(Locality - 31142-99 Rest of Maine)

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All other terms and conditions of the Agreement and the Appendix shall remain in effect.

EXECUTION

GROUP certifies that this Amendment has not been altered in any way, and has accepted the Amendment as originally offered by First Health. A properly executed version of this Amendment, delivered by facsimile, is as valid as an original.

MAINE NETWORK FOR HEALTH

FIRST HEALTH GROUP CORP.

By: Stephen Ryan
(signature)

(signature)

Printed: Stephen Ryan

Title: President/CEO

Date: 2/24/09

Federal Tax Identification #