

# Provider Agreement - test3

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Provider: test3

DBA: test

Address: test

NPI: 1233

Specialty: Imaging

## Rate Information

Rate Type: Wcfs

State	Procedure	WCFS %
NY	MRI w/o	8% of WCFS
NY	MRI w/	8% of WCFS
NY	MRI w/ & w/o	8% of WCFS
NY	CT w/o	8% of WCFS
NY	CT w/	8% of WCFS
NY	CT w/ & w/o	8% of WCFS
NY	XRAY	8% of WCFS
NY	Arthrograms	8% of WCFS
TX	MRI w/o	7% of WCFS
TX	MRI w/	7% of WCFS
TX	MRI w/ & w/o	7% of WCFS
TX	CT w/o	7% of WCFS
TX	CT w/	7% of WCFS
TX	CT w/ & w/o	7% of WCFS
TX	XRAY	7% of WCFS

TX	Arthrograms	7% of WCFS
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