## ANNUAL RFP #1690

## INTERPRETATION ONLY

MINIMUM REQUIREMENTS – RADIOLOGICAL DIAGNOSTIC SERVICES (Prices must include all Radiological Diagnostic' Services and Fees)

A. Charges for X- RAY INTERPRETATION ONLY services on an as needed basis. $ 19.00 EA X 150 PR/MO = $ 2,850.00 TOTAL PR/MO

B. Charges for SONOGRAM INTERPRETATION ONLY services on an as needed basis. $ 35.00 EA X 10 PR/MO = $ 350.00 TOTAL PR/MO

TOTAL PR/ MONTH $3,200.00

All prices and %'s must include all Radiology services and fees, as well as all delivery fees.

Proposer Texas Health Care Mobile Imaging, LLC.

Address 1460 North Expy #77/83

Brownsville, TX. 78520
(City/State/Zip)

Signature

Telephone 956-792-5270 Date May 17, 2022

**Approved by Commissioners' Court**
**on 07/19/2022**

## MISCELLANEOUS

| ITEM # | DIAGNOSTIC PROCEDURE | SPECIFY PRICE PER PER X-RAY TO INCLUDE INTERPRETATION |
|---|---|---|
| | X-RAY OF: | |
| 01 | Hand | $69.00 |
| 02 | Finger | $69.00 |
| 03 | Arm | $69.00 |
| 04 | Knee | N/A |
| 05 | Ankle | $69.00 |
| 06 | Leg | $69.00 |
| 07 | Face | $69.00 |
| 08 | Skull | $69.00 |
| 09 | Spine | $69.00 |
| 10 | Abdomen (Flat) | $69.00 |
| 11 | Sonogram | $149.00 |
| 12 | Chest | $69.00 |

## MISCELLANEOUS

On all other miscellaneous (currently in your catalog) radiology procedures, **not listed**, Cameron County will receive 0 % off list price.

On all new (not in the catalog as yet) miscellaneous radiology procedures, **not listed**, Cameron County will receive 0 % over your cost price.

All prices and %'s must include all Radiology services and fees, as well as all delivery fees.

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Signature

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