



2912 Springboro West
Suite 201
Dayton, OH 45439

•

Phone 937.297.8999

•

Fax 937.298.9673

•

www.provmedgroup.com

Fees for providing copies of medical records — July, 2026

In accordance with Ohio revised code 3701.742 dated 2/19/2026,
the following fee schedule applies for supplying medical records:

**Medical records requested by the patient or patient's personal
representative, i.e., parent, guardian, executor of estate, or life
insurance company:**

- A fee of \$3.99 per page for the first ten pages.
- A fee of \$0.84 per page for pages eleven through fifty.
- A fee of \$0.33 per page for pages fifty-one and higher.

For data resulting from an x-ray, magnetic resonance imaging (MRI), or
computed axial tomography (CAT) scan and recorded on paper or film:

- A fee of \$2.73 per page

In addition, a fee for the actual cost of any related postage incurred.

**Medical records requested by other than the patient or patient's
personal representative:**

- An initial fee of \$24.58 for records search.
- A fee of \$1.62 per page for the first ten pages.
- A fee of \$0.84 per page for pages eleven through fifty.
- A fee of \$0.33 per page for pages fifty-one and higher.

For data resulting from an x-ray, magnetic resonance imaging (MRI), or
computed axial tomography (CAT) scan and recorded on paper or film:

- A fee of \$2.62 per page

In addition, a fee for the actual cost of any related postage incurred.