All the Fee Screen files can be opened by most word processing, spread sheet and database programs.

The entire collection of Fee Screens contain fourteen *.DAT files with fee screens for the following provider types (PT):

Ambulance (ambul.dat) PT = 18
Chiropractor (chiropra.dat) PT = 14
Community Mental Health Board (cmhb.dat) PT = 21
Dental (dental.dat) PT = 12 (SEE NOTE BELOW)
Family Planning (famplan.dat) PT = 23
Home Health (hhealth.dat) PT = 15
Laboratory (lab.dat) PT = 16
Long Term Care (ltc.dat) PT = 60, 61, 62
Medical Clinic (clinic77.dat) PT = 77
Outpatient Hospital (ophosp.dat) PT = 40, 41, 75
Podiatrist (podiatri.dat) PT = 13
Practitioner (pract.dat) PT = 10, 11
Special Services (ss.dat) PT = 80, 85, 86, 87, 88, 90, 94, 95, 98
Substance Abuse (subabuse.dat) PT = 31

Fee Screen data is organized as below with a six character procedure code, two character procedure type, and the amount.

```
072010 09     41.68
072020 09     13.97
072040 09     20.97
072070 09     21.15
072080 09     21.53
072090 09     26.15
072100 09     21.53
072110 09     31.04
072120 09     29.02
072170 09     16.49
072190 09     24.43
072200 09     16.88
072202 09     20.97
072220 09     18.24
777777 99      **.**
```

The 2-digit code following the procedure code indicates
08 = Technical Surgical Assistance
09 = Global
08 = Technical Surgical Assistance
OK = Technical Component (billed by Facility)
OP = Professional Component (billed by Practitioner)

. means individual pricing.
Always check your manual for the procedure codes you are eligible to bill.

DENTAL NOTE: For duplicate procedure codes - Proc. Type "00" is the fee for beneficiaries under age 19.
Proc. Type "19" is the fee for beneficiaries age 19 and over.