

File specifications for DMAP fee-for-service fee schedule

This document lists the fields used in DMAP’s fee-for-service fee schedule formats, as read from left to right.

Current file specifications

Field	Description
Procedure Code	Procedure Code - For billing purposes, DMAP uses Current Procedural Terminology (CPT), Level III National Codes (HCPCS) and Current Dental Terminology (CDT).
Description	Procedure code description
Modifier 1	First modifier associated with procedure code. (Blank indicates no modifier.)
Rate Type	"A" = Ambulatory surgical rate "P" = Oregon’s primary care rate "F" = 2013-2014 federal primary care rate If this field is blank, the rate is not an ambulatory surgical rate or a primary care rate.
RBRVS Place of Service	"Fac" = RBRVS Facility rate "Non" = RBRVS Non-Facility rate If this field is blank, the rate is not based on the Resource-Based Relative Value Scale (RBRVS).
Price	Price effective during month reported.
Effective Date	Date current price became effective (YYYYMMDD)

July 2011 to December 2013

Field	Description
Procedure Code	Procedure Code - For billing purposes, DMAP uses Current Procedural Terminology (CPT), Level III National Codes (HCPCS) and Current Dental Terminology (CDT).
Description	Procedure code description
Modifier 1	First modifier associated with procedure code. (Blank indicates no modifier.)
Modifier 2	Second modifier associated with procedure code. (Blank indicates no modifier.)
Rate Type	"A" = Ambulatory surgical rate "P" = Oregon’s primary care rate "F" = 2013-2014 federal primary care rate If this field is blank, the rate is not an ambulatory surgical rate or a primary care rate.
Price	Price effective during month reported.
Effective Date	Date current price became effective (YYYYMMDD)

March 2009 to May/June 2011

Field	Description
Procedure Code	Procedure Code - For billing purposes, DMAP uses Current Procedural Terminology (CPT), Level III National Codes (HCPCS) and Current Dental Terminology (CDT).
Description	Procedure code description
Modifier 1	First modifier associated with procedure code. (Blank indicates no modifier.)
Modifier 2	Second modifier associated with procedure code. (Blank indicates no modifier.)
ASC	A "Y" in this field indicates that this rate is an ambulatory surgical rate. If this field is blank, the rate is not an ambulatory surgical rate.
Price	Price effective during month reported.
Effective Date	Date current price became effective (YYYYMMDD)