

Fee Schedule Code	Fee Schedule Name	START DATE	END DATE
B01	Breast And Cervical Cancer Program	12/1/2001	12/31/2999
C01	Colorectal Program Fee Schedule	4/16/2002	12/31/2999
C02	Comprehensive Waiver Adult Fee Schedule	4/1/2014	12/31/2999
C03	Comprehensive Waiver Child Fee Schedule	4/1/2014	12/31/2999
C04	CHPR Case Management per CSR0278	7/1/2014	12/31/2999
D01	Dental Health Services 85% of Billed Charge	7/1/2014	No longer in use
D02	Maternal Dental Care Services (Plan MDCS)	7/1/2002	No longer in use
D03	D4355 Debridement	7/1/2014	12/31/2999
D04	D0191 Dental Assessment in Nursing Home	7/1/2014	12/31/2999
E01	ESRD Fee Schedule Effective 8.1.10.	9/1/1999	12/31/2999
M01	Master Fee Schedule Current Medicaid Fee Schedule	1/1/1987	12/31/2999
NOT Applicable	Not Applicable		
P01	This fee schedule is reserved for PACE procedure codes only.	11/1/2014	12/31/2999
S01	Supports waiver child fee schedule	4/1/2014	12/31/2999
S02	Supports waiver adult fee schedule	4/1/2014	12/31/2999
T01	Title 25		
W01	New DD child waiver fee schedule effective for plans of care beginning 07/01/08 or greater.	7/1/2008	May no longer be in use
W02	New DD adult waiver fee schedule effective for plans of care beginning 07/01/08 or greater.	7/1/2008	May no longer be in use
W03	New DD ABI waiver fee schedule effective for plans of care beginning 07/01/08 or greater.	7/1/2008	12/31/2999
W04	Public partnership LLC (PPL) fee schedule . Tax251x00000x.	4/1/2014	12/31/2999