

**Legal Notice Published in Newspapers on December 31<sup>st</sup> 2012**

**NON-EMERGENCY AMBULANCE (SPA 13-007)**

Effective on or after January 1, 2013, under SPA 13-007, the Department will reduce reimbursement for non-emergency ambulance transportation. Effective July 1, 2011, the Department reduced emergency ambulance rates pursuant to SPA 11-023. As a result, the rates for non-emergency services have been greater than the rates for emergency services. This amendment is necessary to bring the non-emergency rates in line with the emergency rates.

**Fiscal Information -Estimated Annual Medicaid Expenditures**

The Department estimates that this rate change will result in gross savings of \$500,000 in SFY 2013. Savings have not yet been determined for SFY 2014.

These changes will take effect on or after January 1, 2013.

In accordance with federal requirements governing the Medicaid program, upon request the Department will provide copies of the proposed amendment to the Medicaid State Plan. In addition, copies of the proposed amendment may be obtained at each of the DSS regional offices and on the DSS web site: <http://www.ct.gov/dss>. Go to "Publications" and then to "Updates".

Written, phone, and e-mail requests should be directed to: Patricia McCooey, Department of Social Services, 25 Sigourney Street, Hartford, CT 06106-5033 (phone: 860-424-4873, Fax: 860-424-5799, E-mail: [patricia.mccooey@ct.gov](mailto:patricia.mccooey@ct.gov).) Please reference the relevant SPA number(s).

Members of the public may also submit written comments on the SPAs, by mail or email. Written comments must be submitted by January 15, 2013. Please reference the relevant SPA number(s).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: CONNECTICUT

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**24. Methods and Standards for Establishing Rates – Other types of Care**

A(1) Transportation.

Fees for emergency medical transportation services were set as of July 1, 2011 and are effective for services provided on or after that date.

Fees for non-emergency ambulance services were set as of January 1, 2013 and are effective for services provided on or after that date.

Fees for emergency conventional air ambulance services (rotary wing) were set as of December 1, 2012 and are effective for services provided on or after that date. All rates are published at [www.ctdssmap.com](http://www.ctdssmap.com).

TN # 13-007

Supersedes

TN # 11-032

Approval Date \_\_\_\_\_ Effective Date 1/1/2013