



**Connecticut Medical Assistance Program**  
**Policy Transmittal 2024-20**

Provider Bulletin 2024-48  
October 2024

Andrea Barton Reeves, J.D., Commissioner

Effective Date: 07/01/2024  
Contact: [yvonne.pallotto@ct.gov](mailto:yvonne.pallotto@ct.gov)

**TO: Ambulance Providers**

**RE: Establishing Intracity / Intown Mileage Procedure Code**

The purpose of this policy transmittal is to notify ambulance providers that the Department of Social Services is adding a procedure code to the Transportation (basic/advance) Fee Schedule, effective for dates of service 07/01/2024 and forward.

Procedure code 4701Y - Medical Transportation, Per Mile should be used for calculation of intracity/in town mileage. This procedure code applies to only non-emergency services for purposes of transporting eligible Medicaid members to Medicaid covered appointments.

**Please note** - There is **no mass adjustment** for the addition of the procedure code to the fee schedule. In order to be paid ambulance providers will need to submit their claims to Gainwell Technologies for the above procedure code to receive reimbursement for dates of service 07/01/2024 and forward.

**Accessing the Fee Schedule:**

The updated, Transportation Basic/Advanced fee schedule can be accessed and downloaded by accessing the Connecticut Medical Assistance Program (CMAP) Web site: [www.ctdssmap.com](http://www.ctdssmap.com) From this Web page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to click on the appropriate fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select "Open".

For questions about billing or if further assistance is needed to access the fee schedule on the CMAP Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

**Posting Instructions:**

Policy transmittals can be downloaded from the Web site at [www.ctdssmap.com](http://www.ctdssmap.com).

**Distribution:**

This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by Gainwell Technologies.

**Responsible Unit:**

DSS, Division of Health Services, NEMT Unit/Section; Yvonne Pallotto, Manager NEMT, email [yvonne.pallotto@ct.gov](mailto:yvonne.pallotto@ct.gov)

**Date Issued:** October 2024