

Annual Ambulette Survey for 2008

Providers of ambulette services are required to submit vehicle information on an annual basis in accordance with Title 18 NYCRR (New York Code, Rules and Regulations) 502.6(b):

Each provider of ambulette services must, during the month of January of each year, disclose to the department in writing, information concerning those vehicles currently owned or leased by the provider.

The information to be disclosed must include at a minimum the name and address of the provider, each vehicle's license number and Department of Transportation identification number and a statement regarding whether the vehicle is owned or leased.

A provider of ambulette services that fails to disclose this information may have its participation in the medical assistance program terminated.

The form on the following page **must** be returned by **February 15, 2008** to:

*New York State Office of the Medicaid Inspector General
Investigations & Enforcement
Attn: 2008 Ambulette Survey
800 North Pearl St, Lower Level
Albany , NY 12204*

Certified/Return Receipt mail is suggested. A copy of the form and proof of mailing should be retained for your records. In the event of non-receipt of the form by the Office of the Medicaid Inspector General, this proof will be used to validate compliance.

