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## **INPATIENT**

## **Updated Provider Manual**



## **Updated Provider Manual**

The following manual has been updated for Inpatient providers:

 Request for Single Case Agreement for Enhanced Rate of Pay for Out-o-State Medical Treatment - Referral Form

Contact Details: 1-800-343-9000 emednyalert@gdit.com

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The Department has attempted to ensure that the information contained in these notifications is as accurate as possible. However, no e-mail transmittals or materials provided are intended to constitute legal or medical advice.