

MEDICAID TRANSPORTATION PROGRAM

**POLICY REGARDING REIMBURSEMENT
OF
TRAVEL-RELATED EXPENSES**



Travel Related Expenses Policy Guidance Manual

The policy included in this Manual is designed to guide the Department's contracted Medicaid Transportation Managers in the reimbursement of prior authorized non-emergency travel expenses and personal vehicle mileage according to the provisions and policies of this Department, developed in accordance with approved guidelines regarding such reimbursement established by the federal government. Please review this Manual for more information.

Generally, all medical appointments must be prior authorized by the applicable prior authorization official to be eligible for expense reimbursement. The Transportation Manager will only reimburse for approved travel related expenses and/or personal vehicle mileage reimbursement for an eligible Medicaid enrollee. When medically necessary and prior approved, the Transportation Manager will pay for appropriate expenses for a second person (i.e., an attendant) to accompany a Medicaid enrollee to their medical appointments and will reimburse or pay appropriate expenses per person per day.

Personal Vehicle Mileage reimbursement is available, with prior approval from the Transportation Manager, to transport an eligible Medicaid enrollee to/from a qualified service covered by the Medicaid program both for short trips and longer distance trips.

Please note, reimbursement of emergency transportation, including air lift to a regional trauma center and ground ambulance emanating from a 9-1-1 call, is excluded from this Manual.

Section I – Personal Vehicle Mileage Reimbursement

The following information relates to reimbursement for the use of a personal vehicle to travel to and from pre-approved medical appointments.

Requesting Approval for a Trip

For the Medicaid program to consider reimbursement of transportation and travel related expenses, the following three steps are required:

Step 1

Obtain prior approval for all trips by calling the Transportation Manager. Trip requests can be made by telephone or online, and must be made no less than 72 hours prior to the medical appointment. You must provide:

- The enrollee's Medicaid number;
- The enrollee's date of birth;
- The enrollee's current address;
- The enrollee's current telephone number;
- The name and telephone number of the person scheduling the trip;
- The date of appointment;
- The reason for the medical appointment;
- The enrollee's primary care physician or physician ordering the trip;
- The exact address of the destination, including zip code;



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- If someone other than the enrollee is driving; and
- Any additional information required by the Transportation Manager.

Step 2

Request an invoice number for every trip for your records and proof of approval.

Step 3

Request the operator mail the reimbursement forms to you prior to the medical appointment.

Requesting Reimbursement

To request reimbursement, complete the following steps.

Step 1

Complete the reimbursement form.

If someone other than the enrollee is driving the enrollee or there is a volunteer driver involved, the form must be signed by the driver once the trip is completed. (The driver's social security number is **required** for the first reimbursement. Future claims listing the same driver will not require social security numbers).

Step 2

On the day of the medical appointment, request the medical practitioner or other medical facility staff member to sign the designated area of the reimbursement form to support attendance.

Step 3

Save and attach all **ORIGINAL** receipts pertaining to parking/toll/meal expenses **and** write amounts in the appropriate spaces provided.

Save copies of all information to be sent to the Transportation Manager for your personal records.

Step 4

No later than **90 days of the date of the trip**, mail the completed form with any original receipts to the Transportation Manager.

Customer Service

For any questions concerning your claim, call the Transportation Manager. Please be sure to have handy the trip number/s you are calling in reference to.



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Claim Certification Statement

Please review the following statement prior to submitting your claim form to the Transportation Manager. If you have any questions concerning this statement, please contact the Transportation Manager.

By submitting a claim, the claimant certifies that:

- I am qualified to provide such services for which I am submitting for reimbursement.*
- I have furnished or caused to be furnished the care, services and supplies itemized in accordance with applicable federal and state laws and regulations.*
- The amounts listed are due and, except as noted, no part thereof has been paid by, or to the best of my knowledge, is payable from any source other than the Medicaid Program.*
- Payment of fees made in accordance with established schedules is accepted as payment in full; other than a claim rejected or denied or one for adjustment, no previous claim for the care, services and itemized supplies has been submitted or paid.*
- All statements made hereon are true, accurate and complete to the best of my knowledge.*
- No material fact has been omitted from this form.*
- I understand that payment and satisfaction of this claim will be from federal, state and local public funds and that I may be prosecuted under applicable federal and state laws for any false claims, statements or documents or concealment of a material fact.*
- Taxes from which the State is exempt are excluded.*
- All records pertaining to the care, services and supplies provided including all records which are necessary to disclose fully the extent of care, services and supplies provided to individuals under the New York State Medicaid Program will be kept for a period of six years from the date of payment, and such records and information regarding this claim and payment therefore shall be promptly furnished upon request to the Health Department, the State Medicaid Fraud Control Unit of the New York State Office of Attorney General or the Secretary of the Department of Health and Human Services.*
- There has been compliance with the Federal Civil Rights Act of 1964 and with section 504 of the Federal Rehabilitation Act of 1973, as amended, which forbid discrimination on the basis of race, color, national origin, handicap, age, sex and religion.*



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- *I agree to comply with the requirements of 42 CFR Part 455 relating to disclosures by providers; the State of New York through its fiscal agent or otherwise is hereby authorized to
 - (1) make administrative corrections to this claim to enable its automated processing subject to reversal by provider, and
 - (2) accept the claim data on this form as original evidence of care, services and supplies furnished.*
- *By making this claim I understand and agree that I shall be subject to and bound by all rules, regulations, policies, standards, rates and procedures of the Health Department as set forth in Title 18 of the New York Official Compilation of Codes, Rules and Regulations of New York State and other Department publications.*
- *I understand and agree that I shall be subject to and shall accept, subject to due process of law, any determinations pursuant to said rules, regulations, policies, standards, fee codes and procedures, including, but not limited to, any duly made determination affecting my (or the entity's) past, present or future status in the Medicaid Program and/or imposing any duly considered sanction or penalty.*
- *I understand that my signature on the claim form incorporates the above certifications and attests to their truth.*

Frequently Asked Questions

What are the current reimbursement rates?

Effective January 1, 2015, the Internal Revenue Service has established the following personal vehicle mileage reimbursement rates:

- Self-drive/In-home relative, caregiver or friend: 23 cents per loaded mile.
- Out-of-home family member/neighbor/friend/volunteer: 58 cents per loaded mile.

If I drive myself to my medical appointment, can I be reimbursed?

Yes, if you are eligible for Medicaid on the date of your medical appointment, and you have received prior approval for the trip, you can be reimbursed for your mileage reimbursement.

Medicaid enrollees who receive prior approval and drive themselves to and from medical appointments receive the self-drive rate listed above.

If someone else drives me who will be paid?

If someone else drives you, they will be reimbursed by the Medicaid program. If the driver is a family member that lives in your home, they will be paid the self-drive rate. If they are a family member, friend, neighbor, or a volunteer driver, who does not live with you, they will be paid the volunteer driver rate.



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Must I track/report my miles?

You can track your mileage, but do not need to track or report your miles. The Transportation Manager uses an automated mileage calculation system similar to *MapQuest* and *Google Maps* to calculate the distance traveled. The mileage calculated is based on the shortest distance route determined by the system. If you travel a route other than the shortest calculated distance, additional justification may be required.

Mileage/Travel Reimbursement is paid for loaded mileage (actively transporting a Medicaid Enrollee) only.

What expenses will the Medicaid program reimburse?

The Medicaid program will reimburse for the pre-approved round-trip loaded miles to and from your qualified medical appointment. Loaded miles are the miles traveled in which the Medicaid enrollee having an appointment is transported to and from their home address to the appointment location.

Please see the “Non-Compensable Expenses” section below for those expenses not considered reimbursable by the Medicaid program.

Section II - Travel Expenses and Reimbursement

The following section details Medicaid policy for the reimbursement of meals, lodging and incidental expenses.

Definition of Travel-Related Expenses

- **Breakfast** is defined as meals consumed by the traveler/s between the hours of 5:00 am- 10:00 am.
- **Lunch** is defined as meals consumed by the traveler/s between the hours of 10:01 am and 3:00 pm.
- **Dinner** is defined as meals consumed by the traveler/s between the hours of 3:01 pm and 10:00 pm.
- **Incidentals** are defined as snacks and/or beverages consumed in addition to breakfast, lunch and dinner; or consumed outside of the defined timeframes defined for meals as noted above.

Non-Compensable Expenses

The following expenses are not reimbursable by the Medicaid program:

- Tobacco and tobacco-like products;
- tips;
- alcoholic beverages;



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- internet services;
- laundry services;
- hotel amenities such as movies and entertainment;
- excessive meal expenses;
- fuel;
- vehicle repairs and supplies;
- rental vehicles;
- traffic and/or parking tickets and associated fees;
- medical supplies;
- pillows and blankets;
- over the counter medications; and
- other personal items.

Daily Meal & Incidental Expense Allowance

Daily Travel is defined as pre-approved travel of less than one full day or travel time that is approximately eighty (80) miles or more each way; or an appointment time greater than four (4) hours but does not require an overnight stay; or the combined appointment and travel time exceeds ten (10) hours total. The Medicaid Program understands that the time of day of an appointment may determine the meal or meals a traveler may consume and approved expenses that may be reimbursed. Being in travel status for less than one full day does not guarantee the full federal per diem is available for each traveler in its entirety.

Overnight Travel is defined as pre-approved travel requiring an overnight stay. This may apply when the enrollee must travel on the day prior to an appointment to arrive on time or prepare for the appointment or upon completion of the appointment returning home does not make sense or is not feasible for the enrollee to immediately return home.

The Transportation Manager will reimburse for up to three (3) meals per day, up to seventy-five (75) percent of the federal per diem rate based upon location, according to the following guidelines.

The daily maximum reimbursable meal expenses is \$46.00 to \$71.00 for full day or overnight travel, depending on the city where the medical service takes place. The Transportation Manager will reimburse for reasonable meal expenses according to receipts submitted. This does not guarantee the entire daily per diem amount will be reimbursed for each person when travel to approved medical appointments is not overnight travel.

A reasonable reimbursement guideline for meal expenses for less than full day travel is:

- Breakfast - 15% of the daily allowance;
- Lunch - 25% of the daily allowance;
- Dinner - 50 % of the daily allowance; and
- Incidental expenses - 10% of the daily allowance (to include snacks) in accordance with the federal rates and guidelines for per diem meals.



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The Transportation Manager may reimburse approved expenses for one to two reasonable meals per day or one meal and/or reasonable incidentals according to the following guidelines for daily travel where the travel or appointment time that is less than one full day. At no time will the Transportation Manager reimburse an entire day's meal expense for a single meal. The enrollee must provide receipts in order to be reimbursed for meal expenses.

Daily Travel

Breakfast

On a day an eligible Medicaid enrollee or attendant is beginning to travel to a medical appointment that has been prior authorized, it is expected that breakfast is consumed prior to engaging in travel and is therefore not an eligible travel expense.

Lunch

On a day an eligible Medicaid enrollee or other person is traveling to a prior authorized medical appointment, lunch may be consumed and is therefore an eligible travel expense that may be submitted in accordance with these guidelines. Lunch reimbursement shall not exceed the lower of the receipted amount or 25% of the medical location's federal per diem rate.

Please note that travel commencing later in the day does not automatically guarantee lunch expenses to be reimbursed as it is not unreasonable to eat a meal at home prior to traveling.

Dinner

On a day an eligible Medicaid enrollee or other person is beginning to travel to a prior authorized medical appointment where the appointment or travel time will not allow them to consume dinner prior to leaving home, dinner may be consumed prior to returning home, and is therefore an eligible travel expense that may be submitted in accordance with these guidelines. Dinner reimbursement shall not exceed the lower of the receipted amount or 50% of the location's federal per diem rate.

Please note that travel commencing later in the day does not automatically guarantee dinner expenses to be reimbursed as it is not unreasonable to eat a meal at home prior to traveling or returning home.

Incidentals

Incidental expenditures, including snacks and beverages, may come up throughout the trip and reimbursement may be submitted in accordance with these guidelines. Reimbursement for incidentals shall not exceed the lower of the receipted amount or 10% of the medical location's federal per diem rate.

Overnight Travel

Breakfast

On a day an eligible Medicaid enrollee and/or attendant has travelled to a prior authorized medical appointment, or must return home the morning after the appointment, accrued



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breakfast travel expenses may be submitted in accordance with these guidelines and additional breakfast expenses may be submitted on each subsequent travel day prior to returning home.

Breakfast reimbursement shall not exceed the lower of the receipted amount or 15% of the medical location's federal per diem rate.

When the lodging establishment provides a continental breakfast, no breakfast reimbursement shall be provided.

Reimbursement for breakfast is not available after the travelers have returned home.

Lunch

On a day an eligible Medicaid enrollee or attendant is traveling to and from a prior authorized medical appointment or is at the medical appointment, lunch may be consumed and is an eligible travel expense that may be submitted in accordance with these guidelines.

Lunch reimbursement shall not exceed the lower of the receipted amount or 25% of the location's federal per diem rate.

Reimbursement for lunch is not available after the travelers have returned home.

Dinner

On a day an eligible Medicaid enrollee or attendant has travelled to a prior authorized medical appointment or is at a medical appointment and the Medicaid enrollee's appointment or travel time will not allow them to consume dinner prior to leaving home, dinner may be consumed after the appointment, prior to returning home and is therefore an eligible travel expense that may be submitted in accordance with these guidelines.

Dinner reimbursement shall not exceed the lower of the receipted amount or 50% of the location's federal per diem rate.

Reimbursement for dinner is not available after the travelers have returned home.

Hotel Selection

The prior authorization official selects reasonable value rated hotels, other reasonably priced hotels or hotels with arranged preferred medical rates with each medical facility using the federally established lodging expense per diem list as a guideline. The Transportation Manager will attempt to make hotel arrangements with the closest most appropriate hotel to the enrollee's medical appointment to minimize additional expenses.

When enrollees make their own travel arrangements, the Transportation Manager anticipates the same guidelines to be used or reasonable travel expenses to be submitted for reimbursement.



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Unreceipted Stay

This method provides for flat rate allowances for meals, lodging and incidental expenses regardless of where lodging is obtained, as well as circumstances where an official receipt cannot be generated including lodging with relatives or friends. Rates are established based on the county where lodging is obtained or the location to which the enrollee was traveling (whichever rate is less), and such location must be indicated. No receipts are required when using this method.

Current rates are as follows:

• New York City, Nassau, Suffolk, Rockland and Westchester Counties	\$50.00
• Albany, Broome, Erie, Monroe and Onondaga Counties	\$40.00
• All other Counties within New York State	\$35.00
• Out of State	\$50.00

Exclusions & Additional Information

Many lodging establishments include a continental breakfast. When a continental breakfast is included, the Transportation Manager will not reimburse for incurred breakfast expenses. When the enrollee is making their own travel arrangements for a prior approved medical appointment, breakfast will be part of the approved reimbursement when a hotel does not offer continental breakfast as part of a hotel stay.

The Transportation Manager will consider for reimbursement receipted parking, tolls, and additional local travel expenses directly related to receipt of medical care.

The Transportation Manager may reimburse for prior approved rental vehicle utilization when considered on an ad hoc basis and when such utilization is directly related to the provision of necessary medical care. Note that, when prior approved, the rental car may not exceed the size or accommodation needs of the enrollee and/or his/her attendant. For example, the prior authorization official shall not reimburse for a luxury car when a mid-size vehicle is appropriate.

Questions

Questions concerning this Manual may be directed to Department's Medicaid Transportation Unit via email to MedTrans@health.ny.gov or telephone to (518) 473-2160.