

Travel Reimbursement Voucher



To be eligible, you must be traveling 100 miles or more from your PCP office to receive required health care services.

Please return form to: CHRISTUS Health Plan
 Attn: Claims Department
 919 Hidden Ridge
 Irving, TX 75038

Member's Name		
Last	First	Middle Initial
Member's US Family Health Plan ID Number		
Member's Home Address		
Number and Street	City	State and Zip Code
Primary Care Provider Name and Address		
Primary Care Provider Name		
Number and Street	City	State and Zip Code
Specialist Name and Address		
Specialist Name		
Number and Street	City	State and Zip Code
Travel Claim Information		
Dates of Travel:	Lodging—number of nights and total cost:	
	<i>NOTE: Itemized lodging receipts required. Per diem reimbursement rate applies.</i>	
Method of Travel: <input type="checkbox"/> Automobile <input type="checkbox"/> Train/Bus <input type="checkbox"/> Plane	Mileage (total miles driven):	
Meals (total number of meals and cost):	Member's Daytime Phone Number: (_____) _____	
<i>NOTE: Itemized meal receipts required. Per diem reimbursement rate applies.</i>		

Member Signature _____ Date: _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

Important Note: If this form and required documents are not included the claim will be denied due to lack of documentation. Appeals should not be submitted until a determination letter for this claim is received. Please contact member services if you have additional questions.

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(Important Information)



Eligibility

1. The benefit only applies if there are no other specialists available within 100 miles (one way) of the PCM's office who can meet your medical/behavioral health needs.
2. Government rates will be used to estimate the reasonable costs for allowable expenses.
3. Travel expenses will not be authorized for elective procedures or non-covered benefits.
4. Travel claims must be filed no later than one year after the qualifying travel date.

Non - Medical Attendant

1. If medically necessary, ONE non-medical attendant (NMA) may also be authorized for travel expense reimbursement.
2. When the patient is an adult, age 18 or older, the provider MUST verify in writing that the NMA is medically necessary to travel with patient. The NMA can be a parent, spouse, other adult family member (age 21 years or older) or a legal guardian.
3. For chronic medical conditions the provider may request the NMA letter be valid for up to one year. When the patient is a child, age 17 and younger, a NMA letter from the provider is not required

Reimbursement

Government per diem rates will be used to estimate the reasonable costs for allowable expenses. USFHP will reimburse the actual costs of lodging (including taxes) and the actual cost of meals (including taxes and reasonable tips but excluding alcoholic beverages) up to the government maximum per diem allowance for the specialty care provider's area. To review lodging and meal per diem rates, visit <https://www.gsa.gov/travel/plan-book/perdiem-rates>. Claimant is responsible for the first 100 miles of travel.

1. Itemized receipts are required when making a claim. This includes, but is not limited to:
 - a. Meals
 - b. Lodging
 - c. Parking
 - d. Tolls
 - e. Commercial Transportation
 - f. Plane or Train Tickets
 - g. Approved Rental Cars
 - h. Taxis
2. Lodging booked through vacation rental sites cannot be reimbursed as official lodging. Examples include, but are not limited to: Airbnb, HomeAway, VRBO.
3. All invoices or receipts must be in the name of the authorized claimants.
4. All invoices or receipts must show valid travel dates.
5. All invoices or receipts must show billing itemization.
6. All invoices or receipts must show payment in full (zero balance).
7. Air or Rail Travel: Reimbursement is limited to "economy" class unless otherwise prior approved.
8. Car Rental: Reimbursement is limited to "compact" class unless otherwise prior approved.
9. Lodging: Reimbursement may not exceed local per diem rate for lodging at the specialty provider's ZIP code.
10. Be aware that reservations made through discounted hotel or travel programs do not normally provide itemized receipts. Receipts that are not itemized (i.e. booking fees and taxes not separated) will have those non-itemized expenses omitted from reimbursement.
11. Claimant is expected to use the least costly mode of transportation. Optional expenses (e.g. rental car GPS, additional insurance, fuel top-off at rental return, pre-boarding charges) are not reimbursable.
12. For authorized rental cars, reasonable, actual fuel expenses are reimbursed. Therefore, fuel receipts are ALWAYS needed. Pre-pay and Premium gas receipts are not reimbursable.

Information above is not all inclusive. Other guidelines may apply when appropriate.