

Invitational Travel Authorization (ITA) Request Worksheet

1. Patient's Name: _____ 2. Patient's Date of Birth: _____
3. Patient's Category (Circle One): DEP/RET/DA CIVILIAN (**INFORM ITA COORDINATOR IF DOD EMP**)
4. Sponsor's SSN: _____ 5. Patient's SN: _____
6. Patient's Address: _____
7. Patient's Day Time Phone Number: _____
8. TDY Purpose: _____
9. Is this a case management issue (i.e., complex medical needs/multiple systemic issues)? Are you being managed? (Circle One): Yes No
10. Approximate number of TDY Days (including travel): _____
11. Proceed Date: _____ Return Date: _____
12. Itinerary: **From: Fox Army Health Center, RSA** To (if medical appointment, include doctor's name/location): _____ **Return To: Fox Army Health Center, RSA**
(Example: To: Dr. Smith, Kirklin Clinic, Birmingham, AL)
13. Inpatient or Outpatient (Circle One)
14. Transportation Mode (Circle One): POV Commercial Air Other _____
15. If flying Commercial, will you require a rental car? Yes ___ No ___
16. Copy of Referral Required (**BEFORE TRAVEL. Must be speciality treatment network provider**)
17. Will there be an attendant/escort (Must be authorized by primary care manager): Yes ___ No ___
18. Name of Attendant: _____
19. Attendant's Relationship to Traveler: _____ DEP/RET/Other (Circle One)
20. Attendant's SSN: _____

NOTE: Airfare is authorized for trips over 400 miles one way. If the traveler chooses to drive instead of fly, reimbursement will be limited **ONLY** to what it would cost for airfare, CTO fee, baggage fee and taxes. If the traveler chooses to drive, mileage reimbursement will **ONLY** be for the most direct route to and from the specialty treatment network provider

Direct questions about completing this worksheet to the ITA Coordinator, Jacqueline Roach (256)955-8888 Ext. 1616 or to Valeria Hills, Chief of Medical Records, (256)955-8888, Ext. 1600.

Privacy Act of 1974 and HIPAA are applicable when worksheet is completed.

Routing Instructions and Approval for ITA (Continued)

1. _____
ITA Coordinator _____ Date Forwarded _____
- Obtain copy of referral paperwork from patient.
 - If no copy of referral paperwork from patient available, attach copy of referral authorization from CHCS or HMHS before routing to Chief, Clinical Support Division.
 - Have patient complete DFAS worksheet to process electronic fund transfer (this is required to be completed only once).

2. _____
Group Practice Manager (or designee) _____ Date Forwarded _____
Approved/Disapproved/Reason for Disapproval _____
- Check for case management validation.
 - Verify need to send outside local area, considering clinical vs. TRICARE components.
 - Route to Chief, Resource Management Division.

3. _____
Chief, Resource Management Division (or designee) _____ Date Forwarded _____
Approved/Disapproved/Reason for Disapproval _____
- Verify if appointment within travel guidelines.
 - Route to ITA Coordinator.

4. After approval with signatures above, ITA Coordinator creates an authorization in the Defense Travel System (DTS) which is routed via DTS through the Resource Management Division (RMD) for review to Authorizing Official (AO), Valeria Hills, for approval.
5. After AO approval, ITA Coordinator prints a copy of travel order for the patient and notifies patient for pick up.
6. Patient picks up travel orders and ITA Coordinator advises patient to keep receipts and to return within 5 days after conclusion of travel for final processing of ITA.

In general, receipts if **under** 12 hours

Parking.
Mileage reimbursed at the rate of \$0.16 per mile.

In general, receipts if **over** 12 hours

Parking, 3 meals/day (up to per diem) and lodging (up to per diem).

NOTE: Airfare is authorized for trips over 400 miles one way. If the traveler chooses to drive instead of fly, reimbursement will be limited **ONLY** to what it would cost for airfare, CTO fee, baggage fee and taxis. If the traveler chooses to drive, mileage reimbursement will **ONLY** be for the most direct route to and from the specialty treatment network provider.

7. Patient returns to ITA Coordinator with receipts. IF POSSIBLE, ITA Coordinator will complete DD 1351-2 (Travel Voucher or Subvoucher) and DD 1351-3 (Statement of Actual Expenses – if applicable) and obtain patient's signature at this same visit. Otherwise, patient will have to return to sign the form(s). Scan signed DD 1351-2 and DD 1351-3 (if applicable), along with receipts into PAD Database, ITA Vouchers.
8. ITA Coordinator creates a voucher in DTS from the pertinent authorization which is routed via DTS through BOD for review to AO for approval.

ITA INFORMATION SHEET

SELF ONLY TRAVEL (12 hours or under):

1. Will be reimbursed for parking, valet parking is not reimbursable.
2. Mileage reimbursed at the rate of \$0.16 per mile from RSA to speciality clinic.
3. No reimbursement for meals.
4. Receipts must be legible with date and time.
5. Will not accept credit card statements as a receipt.

TRAVEL WITH AUTHORIZED NONMEDICAL ATTENDANT (12 hours or under):

1. The nonmedical attendant will be reimbursed for parking, but not valet parking.
2. Mileage reimbursed at the rate of \$0.16 per mile from RSA to speciality clinic.
3. No reimbursement for meals.
4. Receipts must be legible with date and time.
5. Will not accept credit card statements as a receipt.

SELF ONLY TRAVEL (OVERNIGHT)

1. Will be reimbursed for parking (not valet) and up to per diem limit for lodging and meals. The 1st and last day of travel is 75% of per diem for meals.
2. Mileage reimbursed at the rate of \$0.16 per mile from RSA to speciality clinic.
3. Receipts must be legible with date and time.
4. Meal receipts must be itemized.
5. Will not accept credit card statements as a receipt.
6. If traveling with a non-authorized individual, that individual is responsible for his/her on expenses (meals, lodging, etc). **(Must maintain separate receipts.)**

TRAVEL WITH AUTHORIZED NONMEDICAL ATTENDANT (OVERNIGHT)

1. The nonmedical attendant will be reimbursed for parking and up to per diem limit for lodging and meals. **Invoices and receipts must be in the attendant's name.** The 1st and last day of travel is 75% of per diem for meals.
2. The patient will be reimbursed for meals (up to per diem) on the days he/she is not in the hospital.
3. Mileage reimbursed at the rate of \$0.16 per mile from RSA to speciality clinic.
4. Separate receipts must be kept separate by patient and the nonmedical attendant.
5. Receipts must be legible with date and time.
6. Meal receipts must be itemized.
7. Will not accept credit card statements as a receipt.
8. If traveling with a non-authorized individual, that individual is responsible for his/her on expenses (meals, lodging, etc). **Must maintain separate receipts.**

Submit worksheet at least 7 days in advance of appointment/travel.

PLEASE NOTE:

If the patient/NMA is required to fly to/from the appointment, the ITA coordinator will schedule the flight in DTS. If a rental car is needed, this can be scheduled by the ITA Coordinator in DTS at the government rate. The patient/NMA will pay for the rental car when they pick it up, and bring the receipt back for reimbursement as above. If the patient/NMA chooses to make their own rental car arrangements, reimbursement will be based on the government rate of a compact size vehicle (INSURANCE AND EXTRAS ARE NOT REIMBURSEABLE). The patient/NMA will provide the rental car receipt as above for reimbursement.

Please do NOT highlight information on receipts.

If patient or nonmedical attendant is active duty, they **MUST** obtain travel orders from their respective unit.

Per diem varies from area to area.

Claim for reimbursement expenditures must be submitted within 5 days after completion of travel.

If any questions, please call Jacqueline Roach at 256-955-8888, Extension 1616.

Any unresolved issues or disagreements must be submitted in writing to the Chief of Medical Records, Ms. Valeria Hills at 256-955-8888, Extension 1600.

Travel Reimbursement Information
(for TRICARE Prime Enrollees)

Under provisions of the 2001 National Defense Authorization Act, TRICARE Prime beneficiaries referred by their primary care manager (PCM) for services at a location more than 100 miles (one way) from their PCM may be eligible to have their “**reasonable** travel expenses” reimbursed.

To qualify for medical travel reimbursement, the following applies:

- Must be enrolled to TRICARE Prime and must have a PCM at Fox Army Health Center. *If the patient’s PCM is not at Fox, patient must contact TRO South Prime Travel at 1-800-554-2397 to be reimbursed for travel benefits.*
- Patient must have an authorization from Humana (TRICARE)
- The specialty care provider’s office where the patient is being treated must be more than 100 miles (one way) from Fox Army Health Center.

The following disqualifies a TRICARE Prime patient from travel reimbursement:

- If the patient elects to see a provider outside of the 100-mile radius from Fox when they were referred to a specialty provider **within** a 100-mile radius of Fox
- If the reason for the appointment is not a benefit covered by TRICARE
- If the patient does not request travel orders **BEFORE** the date of service to the specialty provider. Retroactive reimbursement is **NOT** authorized unless in cases of extreme emergency (i.e., the threat of or potential loss of life, limb or eyesight). In the event of an emergency, an oral travel order, conveyed by any medium, may be given. When this occurs, the Authorizing Official (AO) at Fox Army Health Center must promptly issue a confirmatory written travel order.

To begin, complete and submit the attached Invitational Travel Authorization (ITA) Request Worksheet (insert link to [ITA Request Worksheet here](#)) at least seven days BEFORE travel, to Ms. Jacqueline Roach, ITA Travel Coordinator. Ms. Roach is located on the 2nd floor Rm 2C-13. If this is the first time you are requesting reimbursement, you will also need to complete and submit the Invitational Traveler (ITA) Worksheet (insert link to [ITA Traveler Worksheet here](#)).

Government rates will be used to estimate the reasonable cost. The actual costs of meals (including taxes and tips, but excluding alcoholic beverages) may be reimbursed up to the government rate for the area concerned.

For travel reimbursement, the patient must provide the following:

- Itemized food receipts dated on the appointment date or authorized travel dates. Alcoholic beverages are excluded from reimbursement.
- Routing number and checking/savings account number (voided check) for electronic funds transfer
- Parking receipts (when applicable), Valet Parking is not reimbursable
- A copy of the TRICARE Referral

- A return to work/school slip, verifying appointment attendance with date and time
- Additional Guidelines can be found here : [Insert link to ITA Information Sheet here.](#)**

*****The patient is responsible for obtaining prior approval for lodging, rental car, or airfare.***

Non-Medical Attendants

A non-medical attendant (NMA) is a person who travels with a patient to a medical appointment for the purpose of attending to the needs of the patient due to age, physical or mental incapacity of the patient.

- A statement of medical necessity from the patient's PCM is required before a patient is authorized the use of an NMA.
- One NMA is authorized per policy guidelines; no exceptions. Patients who are under 18 years of age do not require a statement of medical necessity from the PCM.
- The NMA must be a parent, guardian, or another adult family member of the traveling Prime patient.
- If the NMA is the parent or designated guardian, he/she is not required to be 21 years of age or older.
- If the NMA is an adult family member, the NMA must be 21 years of age or older.
- The NMA is **NOT** required to be enrolled in TRICARE Prime, or to be TRICARE eligible.
- Fox Army Health Center is responsible for issuing travel orders for the traveling Prime patient's NMA.
- If the NMA is Active Duty or a DoD civilian employee, he/she is repaid for travel expenses based on temporary duty (TDY) rates (per diem and mileage), **not** actual expenses.
- The Active Duty NMA is responsible for obtaining travel orders from his/her unit Defense Travel System (DTS) point of contact. The Active Duty Soldier's unit is responsible for initiating travel orders and reimbursement for an NMA who is active duty.

Medical Travel for Patients Who Are Active Duty Service Members

Active duty service members (ADSM) are responsible for obtaining travel orders **before** their medical TDY travel. The ADSM will take their appointment slip to their **unit** DTS point of contact. The ADSM's unit is responsible for initiating travel authorization in DTS. Fox Army Health Center will not reimburse ADSMs .

Patients with questions regarding travel should contact: Ms. Jacqueline Roach, Invitational Travel Authorization (ITA) Coordinator at Fox Army Health Center, at (256) 955-8888, Extension 1616, or visit www.humana-military.com, or call 1-800-444-5445.