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INVOICING FOSTER PARENT TRAVEL Effective March 1, 2013

I. Travel Invoice Instructions

Prior to completing your travel invoice, please review the reimbursable travel definitions in Section II below to ensure that you only log travel that is approved. You must log all travel from the start of the month, including travel that is accounted for in the per diem.

1. Fill in the children's person ID #'s and days placed in your home during the invoice month at the top right corner of the travel invoice. All children that are being claimed during the invoice month must be included in this section; separated invoices for each child are not permitted (e.g. if four children are placed in the foster home in February and travel is being claimed for two, both children must be included on one invoice).
2. List each trip on the travel invoice separately for each destination.

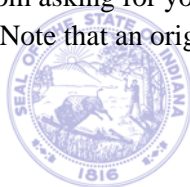
For instance:

- A round trip to the doctor's office is listed as two separate trips: 1) Home address to doctor's office address; and 2) Doctor's office address to home address.
 - A trip with two separate destinations before returning home would be listed as three separate trips: 1) Home address to doctor's office address; 2) Doctor's office address to DCS office address; and 3) DCS office address to home address.
3. For each trip, enter a date, starting address, ending/destination address, number of miles driven and a reason code.
 - You should use the Mapquest (www.mapquest.com) website and you use the shortest mileage distance for your trips. Click on options and select shortest distance before calculating miles (Mapquest defaults to shortest time, so you must change this to shortest distance). If you are unable to do so and use your car odometer, please note that reimbursement to you will be based on the shortest distance on the website, so you may not be reimbursed for the exact amount you put on your invoice.
 4. If you are using the form via computer:



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- The totals within the invoice will add/multiply for you. If the number in the “Reimbursable Miles” box is zero, you do not have mileage that you may claim for reimbursement. If the total in that box is above zero, it will result in a positive dollar amount in the “Total Claimable \$” box that you may claim.
 - SKIP to step 6 if you have mileage to claim.
5. If you are unable to use the invoice via computer and need to complete it by hand, you will need to add/multiply for your totals:
- Add up the total number of miles that you drove by adding all of the numbers in the “Miles Driven” column together. Place this number in the row at the bottom of the invoice that is titled “Total Miles Driven.”
 - Add together the number of days that each child was in your home during the invoice month (as you indicated in the top right corner) for a total number of days. Place this number in the second row at the bottom of the invoice that is titled “Total Days Children in Home.”
 - To get the total number of miles that are covered in your per diem, look at the “Foster Care Mileage Graph” in Section III below. For each child in your home during the month, find the number of days they were in your home in the left column, and the number of miles next to it in the right hand column is the number of miles your per diem for that child covered. Once you have done this for each child, add those miles together and place this number in the third row at the bottom of the invoice titled “Miles Paid in Per Diem.”
 - If the number in the “Miles Paid in Per Diem” box is larger than the number in the “Total Miles Driven” box, you may not claim mileage on your invoice.
 - If the “Miles Paid in Per Diem” is smaller than the “Total Miles Driven” box, you may claim mileage for the invoice month. Take the “Total Miles Driven” minus the “Miles Paid in Per Diem,” and place that number in the fourth row at the bottom titled “Reimbursable Miles.” This is the number of miles you may claim on your invoice.
 - Take that number of “Reimbursable Miles” and multiply it by .44 to get the total dollar amount you may claim. i.e. $62 \times .44 = \$27.28$
 - Place the resulting total dollar amount in the last row at the bottom of the invoice titled “Total Claimable \$.”
6. If you have mileage to claim on your travel invoice:
- Complete the boxes at the bottom asking for your foster family name, address, original signature, license #, and date. (Note that an original signature is necessary, and failure to



provide one may result in denial of the invoice claim).

- Submit the travel invoice with your standard monthly foster parent invoice.

II. Travel Definitions

The foster parent may receive an additional amount for properly claimed travel expenses incurred on behalf of a child placed in the foster home if the foster parent travels more than the monthly allowance for the below purposes:

1. Travel between the foster family home and the school in which the child was enrolled before placement and continues to be enrolled while residing with the foster family, to the extent that school transportation is not provided or required to be provided under applicable Indiana law by a public school corporation or other state or local agency¹;
2. Travel to and from the following types of health related appointments²:
 - a. Doctor (primary care physician and any specialists)
 - b. Dentist (including orthodontist)
 - c. Health clinic
 - d. Hospital/Emergency Room (including foster parent visits during child inpatient episodes)
 - e. Occupational and Physical Therapists
 - f. Behavioral Health Counselor and Therapist
3. Travel to and from the following types of case activities:
 - a. Administrative case reviews
 - b. Judicial reviews (court appearances)
 - c. Case conferences
 - d. Child and family team meetings
 - e. Foster parent training sessions
 - f. Parent and/or sibling visits (including visits to other relatives that are authorized by the department and are a part the child's case plan) and visits to facilitate the transition to another placement

¹ This does not include school extracurricular activities.

² This does not include trips to the pharmacy or the like to pick up medications, etc.



4. Travel to and from Headstart (if transportation not provided for by the school), summer school (if transportation not provided for by the school), pre-school (this does not include daycare), summer camps (if not for daycare) and school required extracurricular activities.
5. For youth 16 years and older, travel to and from employment for the youth or job searching for the youth.
6. Other travel that is extraordinary and has been approved by the local office director in writing prior to the travel taking place (e.g. out of state travel for an educational enrichment program for the child).

III. Foster Care Mileage Graph: Mileage Paid in Per Diem based on Days in Care

Day(s) in Care	Mileage Paid in Per Diem
1	5
2	11
3	16
4	21
5	27
6	32
7	37
8	43
9	48
10	53
11	59
12	64
13	69
14	75
15	80
16	85
17	91
18	96
19	101
20	107
21	112
22	117
23	122
24	128
25	133
26	138
27	144
28	149
29	154
30	160
31	165

