



Children's Special Health Care Services (CSHCS) **

Travel Reimbursement

Effective July 1, 2009

| Service | Maximum Allowable Amount* | Receipts Required | Other |
|----------------------------------|---------------------------|-------------------|-------|
| Mileage | \$.24 per mile | No | |
| Lodging | \$32.15 per night | Yes | |
| Tolls, fares, parking fees, etc. | Face value | Yes | |

* Maximum allowable amount is the lesser of the stated amount or the amount submitted on receipts (if required).

** For dates of service on or after December 1, 2009, travel is only reimbursed for CSHCS Clients who also have Medicaid. Travel is **not** covered for CSHCS only clients.