CHILD FOSTER CARE MILEAGE FORM

(OVER 150 MILES)

Month/Year: _____

Foster Home: _____

Child Name: _____

Social Worker: _____

DATE	TRIP DESCRIPTION AND DESTINATION	MILES	PURPOSE
	Total Miles	0	

***Under the "purpose" column please indicate "E" for education (trips to and from school) and "O" for other (visitations, sports, cultural events, etc.).**

DO NOT ENTER MEDICAL MILES- Medical mileage is handled separately.

Foster Parent Signature: _____ **Date:**_____/_____/_____

Social Worker Authorization: _____ **Date:**____/_____/_____

Please refer to the next page for mileage reimbursement instructions.

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Mileage Reimbursement:

- Do not enter medical miles (i.e. doctor appointments, therapist, occupational or physical therapy etc.) on this form. All medical mileage reimbursement is required to go through **MTM non-emergency medical transportation Services, phone # 1-844-399-9466.** Please contact your case manager or licensor if you have any questions regarding medical mileage.

- The foster care MAPCY rate includes 150 miles per child (visitation, education, cultural events, etc.). You will need to get approval from the case manager on what can be counted as mileage. Reminder medical mileage is not included and is reimbursed separately.

- If you go over 150 miles for the month per child, you can get reimbursed with permission from the case manager.

- You cannot claim mileage for multiple children on a trip. If the children both have an appointment divide the total miles and then assign to each child.
    - **Example-** 2 children have visits and it is 10 miles to the visit center. If foster parent drives 10 miles to the visit and then 10 miles back home, comes back to pick up the children 10 miles and then goes back home 10 miles. The total trip is 40 miles for that trip. Divide 40 miles by 2 children, assign each child 20 miles. Same scenario, but the visit was only for one of the children and the other child was in the car to tag along. The one child who has the visit would have 40 miles and the other child would have 0.

- Keep a log of your record and email/mail a copy to your social worker.

PLEASE TURN IN YOUR TRAVEL LOG WITHIN THE 1st WEEK OF THE FOLLOWING MONTH.

Additional mileage logs can be found under **forms** in the **foster care** section of the

St. Louis County Public Health and Human Service website:

https://www.stlouiscountymn.gov/departments-a-z/public-health-human-services/children-family-services