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El Paso TX, 79930
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 Membertravel@mtm-inc.net

Iowa Total Care Meals and Lodging Reimbursement Policy

MTM Health serves eligible Iowa Total Care Medicaid members by offering non-emergency transportation services. If out-of-county travel coordinated by MTM Health is required, an Iowa Total Care member may be reimbursed for meals and lodging during scheduled transportation. MTM Health processes reimbursements for meals and lodging during the time of the out-of-county travel. The purpose of the Iowa Total Care Meals and Lodging Reimbursement Policy is to provide guidance for reimbursement to Iowa Total Care members for meals and lodging based on per diem rates. **Detailed receipts to include dates, times and address are required for all meals and lodging reimbursements.** EBT, alcohol, parking fees, bag fees, and gift card payments are not eligible for reimbursements. Receipts must show proof of payment.

Reimbursement Rates:

Meals – Meal expenses are reimbursed for Iowa Total Care members when their medical appointment(s) and related travel require them to **travel out of county and more than 50 miles one-way** and be absent from their current place of residence or pick up location for an extended period of time. Mileage is calculated as the shortest distance as calculated by MapQuest. Meals are not reimbursed for time periods when an Iowa Total Care member is staying in a location for reasons unrelated to scheduled travel for medical appointments. Meals are reimbursed in accordance with Iowa Administrative Code 44178.13(3) d. The member must submit receipts to be reimbursed for each meal up to the maximum amount which includes tax and tip, up to 15%.

Per Diem Meal Rates

Meal	Requirement	Meal Maximum
Breakfast	A member who departs before 6 am and returns prior to lunch may be reimbursed actual expenses up to the allowable maximum for breakfast.	\$8
Lunch	A member who departs after 6 am and returns before 7 pm may be reimbursed actual expenses up to the allowable maximum for lunch.	\$10
Breakfast and Lunch	A member who departs before 6 am and returns after lunch, but prior to 7 pm may be reimbursed actual expenses up to the maximum for breakfast and lunch.	\$8 + \$10 = \$18
Dinner	A member who departs after lunch and returns after 7 pm may be reimbursed actual expenses up to the allowable maximum for dinner.	\$19
Lunch and Dinner	A member who departs after 6 am and returns after 7 pm may be reimbursed actual expenses up to the allowable maximum for lunch and dinner.	\$10 + \$19 = \$29
All Meals	A member who departs prior to 6 am and returns after 7 pm may be reimbursed actual expenses up to the allowable maximum for all three meals.	\$8 + \$10 + \$19 = \$37

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Out-of-State - Per Diem Meal Rates

Medicaid members who travel out of the state of Iowa for approved medical appointments may have meals expenses reimbursed.

The member must submit receipts to be reimbursed for each meal up to the maximum amount which includes tax and tips up to 15%. The maximum amounts are determined by the following Out-of-State City Levels.

	Level 1	Level 2	Level 3	Level 4
Breakfast	\$8	\$8	\$10	\$12
Lunch	\$10	\$11	\$12	\$15
Dinner	\$19	\$25	\$29	\$38
TOTAL	\$37	\$44	\$51	\$65

To determine which level applies to the members' out-of-state travel, view the [out-of-state city level and rate information](https://das.iowa.gov/state-accounting/travel-relocation/out-state-travel/out-state-city-levels) (https://das.iowa.gov/state-accounting/travel-relocation/out-state-travel/out-state-city-levels).

On the map click on the state for the out-of-state appointment and review the list of cities to find the right level for the maximum amounts.

Some cities will show as 50 miles instead of one of the four levels. Individuals who travel within a 50-mile distance beyond the Iowa border are subject to instate meal and lodging expense limitations.

Lodging - Lodging expenses are reimbursed for Iowa Total Care members when their medical appointment(s) and related travel require them to **travel out of county and more than 50 miles one-way** when the round trip and the needed medical service cannot be completed in the same day and overnight travel is required. Mileage is calculated as the shortest distance as calculated by MapQuest. Lodging expenses must be approved at the time the trip is scheduled with MTM Health.

Reimbursement rates are based on the primary destination city (the city where the medical services are received). The reimbursement amount is the maximum amount that will be reimbursed based on a receipt for lodging expenses. If the destination city is not specified in the tables below, the standard rate of \$77 will be used for all other destinations in surrounding states. Lodging reimbursement will not be paid when the stay is in the home of a relative or acquaintance or if a stay is for reasons unrelated to scheduled travel for medical appointments. Lodging is reimbursed in accordance with Iowa Administrative Code 441-78.13(3) e.

3/11/25

Version 1.4

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Per Diem Lodging Rates for Out-of-State Appointments

Examples:

Primary Destination	County	Lodging Maximum
Omaha, NE	Douglas	\$93
Rochester, MN	Olmsted	\$95
All other trips	All Counties	\$77

Attendants/Medically necessary escorts: Reimbursements may also be made to an attendant or medically necessary escort accompanying the Iowa Total Care member during the trip. Lodging is not reimbursed for attendant while the member is admitted. The Iowa Total Care member's physician/medical provider must sign on the Iowa Total Care Meals and Lodging Reimbursement Form to indicate that the attendant/escort is necessary for additional meals and/or overnight lodging expenses due to medical or safety reasons. Both the Iowa Total Care member and the escort must submit their request on the same reimbursement form.

Scheduling: If a member wants to seek reimbursement for Meals and Lodging, the Iowa Total Care member **must also have their trip scheduled through MTM Health**. The Iowa Total Care member must call **1-877-271-4819** to make trip reservations. The trip is to be scheduled **in advance of an appointment**.

When contacting MTM Health, the Iowa Total Care member will need to provide the following information:

- Iowa Total Care member's full name
- Home address
- Date of birth
- Telephone number
- Medicaid ID number

A MTM Health Operator may also request additional information to verify the trip such as physician name, physician address, etc. Each time a trip is scheduled, the MTM Health Operator provides a unique Trip Confirmation ID Number(s). **The Trip Confirmation ID number(s) is required to be written on the Meals and Lodging Reimbursement Form.**

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Reimbursement Processing: MTM Health will mail the Iowa Total Care Medicaid Meals and Lodging Reimbursement Policy and Iowa Total Care Medicaid Meals and Lodging Claim Form prior to Iowa Total Care member's first medical appointment. The Policy and Form can also be obtained on the [Iowa Total Care Non-Emergency Medical Transportation page](http://iowatotalcare.com/members/medicaid/benefits-services/transportation.html) (iowatotalcare.com/members/medicaid/benefits-services/transportation.html).

MTM Health processes claims for reimbursement of meals and/or lodging with the receipt of a completed and signed reimbursement form.

Instructions:

1. Fill in all of the blanks on the Iowa Total Care Medicaid Meals and Lodging Claim Form completely and legibly except for areas requiring a physician/medical provider signature. That will be completed by your physician or a representative from their office.
2. Ensure that the Dates of Transport and Trip Confirmation ID Number(s) indicated on the form are accurate. MTM Health will verify that your reimbursement request corresponds to a scheduled trip entered in the system.
3. Put data relating to one round trip on the reimbursement form. Each time you request reimbursement for meals or lodging, a fully completed form must be returned to MTM Health.
4. Attach all detailed receipts to include dates, times and address for meals and/or lodging to the reimbursement form.
5. Mail the **original signed form and receipts to:**

MTM Health

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Processed and paid reimbursement forms are not returned. Please retain a copy if you would like to keep the information for your records.

Additional Reimbursement Processing Requirements:

1. Iowa Total Care Medicaid Meal and Lodging Claim Forms received more than 120 days past the member's appointment will be denied. Reimbursement forms that have been returned for additional or incomplete information must be resubmitted within 30 days. Any requests for review regarding meals and lodging reimbursement or denied reimbursements must be submitted within 30 days of the date on the Notice of Decision letter.

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2. MTM Health will process payments within 10-20 business days of receipt of a fully completed, signed, and valid Iowa Total Care Medicaid Meals and Lodging Claim Form.
3. For Meals and Lodging claims, submitted payment will be issued by check in the Iowa Total Care member's name and sent via U.S. Mail to the Iowa Total Care member's address.
4. MTM Health may deny a claim for Iowa Total Care Meals or Lodging Reimbursement if the trip is not scheduled through MTM Health or if the destination is not a facility that delivers Iowa Total Care Medicaid compensable services. Reimbursement forms submitted with incomplete information will not be processed until all requested information is received.

Make copies of the reimbursement form if there is a need to submit more than one reimbursement claim. **The Iowa Total Care member's physician/medical provider must sign each reimbursement form in order to be paid for each reimbursement.** Unsigned forms will not be processed and will be returned via U.S. Mail. Please call MTM Health at **1-877-271-4819** if you have any questions.

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Iowa Total Care complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, which includes discrimination on the basis of sex characteristics, including intersex traits, pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes. | Iowa Total Care cumple con las leyes de derechos civiles Federales vigentes y no discrimina por motivos de raza, color de piel, nacionalidad de origen, edad, discapacidad, sexo (lo que incluye la discriminación por características relacionadas con el sexo, como rasgos intersexuales, embarazo o situaciones relacionadas), orientación sexual, identidad de género ni estereotipos relacionados con el sexo. Iowa Total Care no excluye a las personas ni las trata de manera diferente por su raza, color de piel, nacionalidad de origen, edad, discapacidad, sexo (lo que incluye la discriminación por características relacionadas con el sexo, como rasgos intersexuales, embarazo o situaciones relacionadas), orientación sexual, identidad de género ni estereotipos relacionados con el sexo.

Language assistance services, auxiliary aids and services, larger font, oral translation, and other alternative formats are available to you at no cost. To obtain this, please call 1-833-404-1061 (TTY: 711). | Usted tiene a su disposición, sin costo alguno, servicios de asistencia lingüística, ayudas y servicios auxiliares, material en letra grande, traducción oral y otros formatos alternativos. Para obtener estos servicios, llame al 1-833-404-1061 (TTY: 711). | 我们免费为您提供语言协助服务、辅助设施和服务、更大字体、口头翻译和其他替代格式。如需获得此服务，请致电 1-833-404-1061 (TTY: 711)。