

|   |  |                             |                      |                                    |
|---|--|-----------------------------|----------------------|------------------------------------|
| <b>SUBJECT</b><br>Employee Travel and Expense Reimbursement |  | <b>CHAPTER</b><br>02        | <b>SECTION</b><br>01 | <b>SUBJECT</b><br>03               |
| <b>CHAPTER</b><br>Human Resources                           |  | <b>SECTION</b><br>Personnel |                      |                                    |
| <b>WRITTEN BY</b><br>Kelly VanWormer / Robin Kalbfleisch    |  | <b>REVIEWED BY</b>          |                      | <b>AUTHORIZED BY</b><br>PIHP Board |

I. APPLICATION:

- PIHP Board                       CMH Providers                       SUD Providers  
 PIHP Staff                       CMH Subcontractors

II. POLICY STATEMENT:

It shall be the policy of Region 10 that all employees will be reimbursed for reasonable pre-approved business expenses while traveling to meetings or conferences or conducting authorized company business.

III. DEFINITIONS:

Commuting: Traveling from one destination to another.

Commuting Expense: The employee’s cost of commuting (e.g., mileage, cab, or bus fare).

Reimbursable Mileage: Mileage incurred (in accordance with this policy) while performing assigned job functions, which does not include personal mileage.

Personal Mileage: Miles for your normal commute to and from work and any other personal travel.

Total Mileage: Combined personal mileage and business mileage.

Business Mileage: Total reimbursable mileage.

Normal Commute: Mileage from home address to normal work address.

Employee: Any full-time or part-time individual who works directly for Region 10 PIHP.

Leased Employee: An individual who is employed through a CMH organization but works under the direction of the Region 10 CEO.

HRIS: Human Resource Information System

|   |                             |                      |                      |
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IV. STANDARDS:

- A. Region 10 will reimburse employees for reasonable out of pocket expenses incurred while traveling to meetings or conferences or conducting authorized company business. Reimbursable expenses include mileage, parking, meals, tips, telephone and fax charges, and purchases on behalf of the agency. Employees who travel on company business are expected to have a valid driver's license and insurance on their vehicle.
- B. Meal reimbursement caps are as follows: Breakfast: \$10.00; Lunch: \$15.00; Dinner: \$25.00. Tips should be no more than 15% - 20% of your total meal cost.
- C. Mileage will be paid at the standard I.R.S. business mileage rate. Carpooling should be used whenever two or more employees are attending the same event. When calculating business miles, personal mileage must be deducted from total mileage.
- D. Employee will submit request for expense and mileage reimbursement using the HRIS system. Leased employee will submit request for expense and mileage reimbursement using the Region 10 Expense Reimbursement Form.

V. PROCEDURES:

Expense Reimbursement Procedure for Region 10 Direct Staff

1. Using the HRIS system, staff will add expense reimbursement requests directly to timesheet under the "Reimbursement" tab for the pay period in which the event occurs.
2. Staff will enter date, fund, department, pay category (expense, meal, or mileage), notes, and amount under the "Reimbursement" tab. \*Staff must attach receipts to receive reimbursement.
3. To upload receipts for a reimbursement request, scan receipts and save to the HRIS system under "Docs" tab.
4. Staff will submit request to supervisor for approval with the bi-weekly timesheet.
5. Supervisor reviews and approves reimbursement requests bi-weekly.

Mileage Reimbursement Procedure for Region 10 Direct Staff

1. Staff will determine total mileage and enter information into Region 10 Mileage Log (Exhibit A), including: employee name, position, date submitted, travel date, starting location, destination, description, business mileage, and personal mileage.

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2. Using the HRIS system, staff will enter total reimbursement amount from this form into the timesheet under the "Reimbursement" tab for the pay period in which the event occurs and upload form under the "Docs" tab.
3. Staff will submit request to supervisor for approval with the bi-weekly timesheet.
4. Supervisor reviews and approves reimbursement requests bi-weekly.

Region 10 Leased Staff: Mileage and Expense Reimbursement Procedure

1. Complete Region 10 Expense Reimbursement Form (Exhibit B) minimally monthly or as needed.
2. Staff submits to supervisor for approval.
3. Supervisor reviews and approves form.
4. Once approved, Expense Reimbursement Form is submitted to Region 10 clerical staff to process reimbursement.

VI. EXHIBITS:

- A. Region 10 Mileage Log
- B. Expense Reimbursement Form



# REGION 10

## Employee Expense Reimbursement Form

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Department: \_\_\_\_\_

\_\_\_\_\_

GL Code: \_\_\_\_\_

### MILEAGE

| Date          | From | To | Explanation for mileage. | Miles | Mileage | Total  |
|---------------|------|----|--------------------------|-------|---------|--------|
|               |      |    |                          |       | 0.58    | \$0.00 |
|               |      |    |                          |       | 0.58    | \$0.00 |
|               |      |    |                          |       | 0.58    | \$0.00 |
|               |      |    |                          |       | 0.58    | \$0.00 |
|               |      |    |                          |       | 0.58    | \$0.00 |
|               |      |    |                          |       | 0.58    | \$0.00 |
| Total Mileage |      |    |                          |       |         | \$0.00 |

### OTHER EXPENSES

| Date                 | Description of other expenses, attach copies of receipts. | Total         |
|----------------------|---|---------------|
|                      |   | \$0.00        |
|                      |   | \$0.00        |
|                      |   | \$0.00        |
|                      |   | \$0.00        |
|                      |   | \$0.00        |
|                      |   | \$0.00        |
| Total Other Expenses |   | \$0.00        |
| <b>GRAND TOTAL</b>   |   | <b>\$0.00</b> |

### Review and Approval

|                              |             |
|------------------------------|-------------|
| Requesting Employee: _____   | Date: _____ |
| Supervisor/Dept. Head: _____ | Date: _____ |
| CFO/Designee: _____          | Date: _____ |

\*\*\*The mileage rate for 2019 is 58.0 cents per mile\*\*\*