

Missouri Department of Elementary and Secondary Education

# First Steps Provider Mileage

Guidance and Instructions



Revised April 2014

## I: First Steps Mileage Guidance

A. **General Information:** First Steps provider mileage is paid when providing direct services to First Steps families in the natural environment (i.e., home, community setting or other family location). Mileage is paid **ONLY** for travel to/from the following First Steps activities:

- **Direct child/family services;**
- **Evaluation/assessment services;** and,
- **IFSP meetings.**

Each provider mileage claim must correspond to an active service authorization for the provider and match a service delivery date for that authorization. The mileage rate for reimbursement is \$0.47 per mile for authorized First Steps services.

If a provider arrives for a visit and discovers that the family is not there (no-show), the provider is allowed to bill one unit (15 minutes) and mileage related to this visit. See the No-Show Visits Guidance for more information at: <http://dese.mo.gov/special-education/first-steps/providers>.

Mileage invoices must be submitted to the CFO within 60 days from the dates of service. This deadline ensures funds are in place for payments to providers and compliance with Federal Cash Management Regulations. It is recommended providers submit invoices either monthly or every other month to ensure timely invoice submission. Late submissions of mileage invoices may not be processed.

Providers are not required to utilize mileage reimbursement for First Steps visits; however, if a provider chooses to utilize mileage reimbursement, only providers maintaining the Daily Mileage Log and submitting the required Monthly Mileage Invoice will receive mileage reimbursement.

B. **Daily Mileage Log:** The First Steps Provider Daily Mileage Log is the preferred form for all First Steps providers to use in keeping track of their daily mileage. Providers may use other mileage tracking forms; however, any form used **must** have all of the information contained in the Provider Daily Mileage Log in order to be considered acceptable documentation to support a claim for reimbursement.

The Provider Daily Mileage Log (or similar format with all required information) must be completed for all miles claimed for First Steps visits. The Provider Daily Mileage Log is not automatically submitted to the CFO; however, the daily log **must** be maintained by the individual provider or the provider's agency and available upon request from the Central Finance Office (CFO) or Department of Elementary and Secondary Education (DESE). Logs should be filed by month and year and maintained for a period of five years.

C. **Monthly Mileage Invoice:** The Monthly Mileage Invoice is the only form submitted to the CFO for reimbursement. The Monthly Mileage Invoice should be completed and sent to the

CFO at the end of each month. If the invoice is from an agency, all First Steps visits from that agency are compiled into one monthly invoice.

Providers/agencies may verify their Daily Mileage Logs using MapQuest ([www.mapquest.com](http://www.mapquest.com)) prior to submitting their Monthly Mileage Invoice to the CFO (see section E). If an alternate route was used due to a closed road, road construction, etc., note that information in the Trip Mileage column on the Daily Mileage Log.

It is recommended that the provider/agency maintain a copy of the Monthly Mileage Invoice forms for their records.

Only one invoice may be submitted per month, unless the invoice is a correction to a previously submitted invoice. The purpose of a correction is to amend a previously submitted invoice which contains errors. A correction must reference the original invoice information in order to indicate the difference between the original and correction. Corrections must be submitted to the CFO within 180 days of the dates of service.

- D. **Travel Incentive:** For providers willing to drive 60+ miles in one direction to provide services to a child/family in the natural environment, First Steps offers a travel incentive that is equal to one hour of service. The 60+ miles must be from the provider's official starting point to the child/family's home.

The travel incentive is an authorization on an individual child's IFSP and entered into WebSPOE by the Service Coordinator. Providers are able to view the authorization and submit a claim for the dates they traveled 60+ miles in one direction to provide services to the child/family.

Travel incentive is reimbursed in addition to mileage. Remember, travel incentive is an authorization in WebSPOE and a claim must be submitted in order to receive payment. On the other hand, mileage reimbursement is recorded on the Daily Mileage Log and submitted to the CFO in the Monthly Mileage Invoice.

**1. One travel incentive claimed per trip per day:**

A trip is defined as providers leaving their official starting point, traveling more than 60 miles to see one or more First Steps families in the same area, then return to their official starting point. Providers who see two or more children in one day (in the same area where all are 60+ miles away) should receive a travel incentive authorization for each child. However, providers will not claim on multiple travel incentive authorizations, they are entered only in case one family cancels and the provider visits the other family who is also 60+miles away.

For example, a provider sees three children (Johnny, Joe and Sally) and their families in one day. The three families live near each other and are 65 miles away from the provider's official domicile. All three children will have a travel incentive authorization;

however, when the provider visits all three children in one day, the provider only claims the travel incentive for *one* family (e.g., Sally). However, if Sally's family cancels a visit and the provider visits Joe's family and Johnny's family, then the provider would claim the travel incentive on either Joe's record or Johnny's record.

**2. More than one travel incentive claimed per trip per day:**

There are two instances when a trip may include multiple directions where each trip is 60+ miles. In these two instances described below, providers can claim more than one travel incentive in one day.

- **"Multiple Visits Trip"** – Providers leave their official starting point and travel 60+ miles to see one or more First Steps families and return to their official starting point. **Later in that same day**, providers leave their official starting point again and travel 60+ miles to see one or more different First Steps families. Then providers return to their official starting point.

For example, a provider visits the homes of Tommy and Sue in the same day. The provider leaves home in the morning and travels 65 miles to conduct an evaluation in Tommy's home. Provider returns home. Later that same day, the provider leaves home again and travels 72 miles to conduct a home visit with Sue and then returns home. This provider would be authorized for travel incentive for both Tommy and Sue and the provider can claim both in the same day.

- **"Stacked Visits Trip"** – Providers leave their official starting point and travel 60+ miles to see one or more First Steps families in a particular area. **When leaving this area, providers travel 60+ miles further away from their official starting point** (providers are now approximately 120 miles from official starting point) and see one or more First Steps families in this additional area. Then the providers return to their official starting point.

For example, a provider visits the homes of Maria and Juan in the same day. The provider leaves the office and travels 78 miles to conduct an assessment in Maria's home. Provider leaves Maria's home and travels an additional 61 miles further away from the office to conduct an assessment in Juan's home. Then the provider returns to the office, which is 139 miles from Juan's home. This provider would be authorized for travel incentive for both Maria and Juan and the provider can claim both in the same day.

E. **Monthly Mileage Audit:** All First Steps providers/agencies are subject to a monthly review of their Daily Mileage Logs. The audit process and review will consist of:

- The CFO will randomly select independent providers and/or agencies each month to review.

- If selected, the independent provider or agency will receive notification via mail that they are required to submit all Provider Daily Mileage Logs (or similar format with all required information) pertaining to a specific timeframe.
- Once selected, providers are given three weeks to submit all necessary paperwork to the CFO. This will be the only opportunity for providers to submit paperwork for a mileage audit; therefore, the paperwork must be complete and accurate.
- The CFO will use MapQuest ([www.mapquest.com](http://www.mapquest.com)) to verify the accuracy of a provider/agency's Daily Mileage Logs.
- The CFO will also verify that the mileage reported on the Provider Daily Mileage Logs corresponds to an appropriate authorization and date of claimed service.
- If any line of the mileage audit is failed, then the mileage reimbursement previously paid out to the provider for that individual trip will be immediately recovered from the provider's next scheduled Electronic Funds Transfer (EFT) payment for mileage. If the amount to be recovered exceeds \$100, then the provider is given the opportunity for a repayment plan for up to six months to return the funds to the CFO.

## II: Provider Mileage Forms Instructions

**A. Daily Mileage Log:** The following instructions correspond to the required fields on the First Steps Provider Daily Mileage Log:

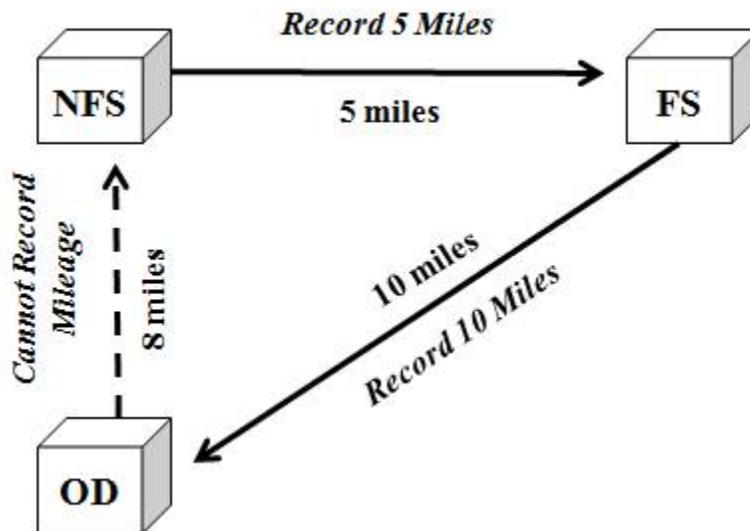
- **Provider Name:** Name of the provider providing the First Steps visits, not an agency name or representative.
- **Office Address:** The provider's daily starting point or official domicile.
- **Date of Service:** Date the service was provided to the child/family. This date must correspond to the date of service that has been billed in the WebSPOE system.
- **Service Authorization #:** Authorization number for the service being provided on that trip. For IFSP meetings, since authorizations are not generated, providers should use "not applicable" for this field.
- **Child Last Name:** Child's last name as it is listed in the child's record (i.e., WebSPOE).
- **Child First Name:** Child's first name as it is listed in the child's record (i.e., WebSPOE).
- **Discipline:** Provider's discipline
- **Service Provided:** Type of service being provided (i.e., direct child service, evaluation/assessment, or IFSP).
- **Start Address:** This column must be the location where the trip to provide First Steps services begins.
- **Destination Address:** This column refers to the location of the First Steps services.
- **Round Trip:** If the entry represents a round trip from the starting point to the destination and back to the starting point, place an (X) in this column.
- **Trip Mileage:** The actual miles traveled for this specific trip is entered into this column. This is NOT an estimated mileage number. Providers may calculate the mileage by using their vehicle's odometer or by using MapQuest Driving Directions at [www.mapquest.com](http://www.mapquest.com).
- **Total Miles:** The total mileage of all trips listed on the form is recorded here.

- **Provider Signature/Date:** The individual provider (NOT an agency representative) must sign and date the mileage log.

**End of Day Mileage:** Mileage to the provider’s home or to the official domicile from the last First Steps visit location is entered separately as “End of Day Mileage.” To report End of Day Mileage, the provider must complete the following columns: a) Date of Service; b) Child Last Name (which will be “End of Day Mileage”); c) Start Address; d) Destination Address; and e) Trip Mileage.

**Mileage to/from Non-First Steps visits:** If starting a trip from a Non-First Steps (NFS) location to a First Steps (FS) visit, a provider can record the mileage from the Non-First Steps location to the First Steps visit, as long as the distance does not exceed the number of miles from the last First Steps visit back to the provider’s official domicile (OD). See Diagram #1 for an example of this:

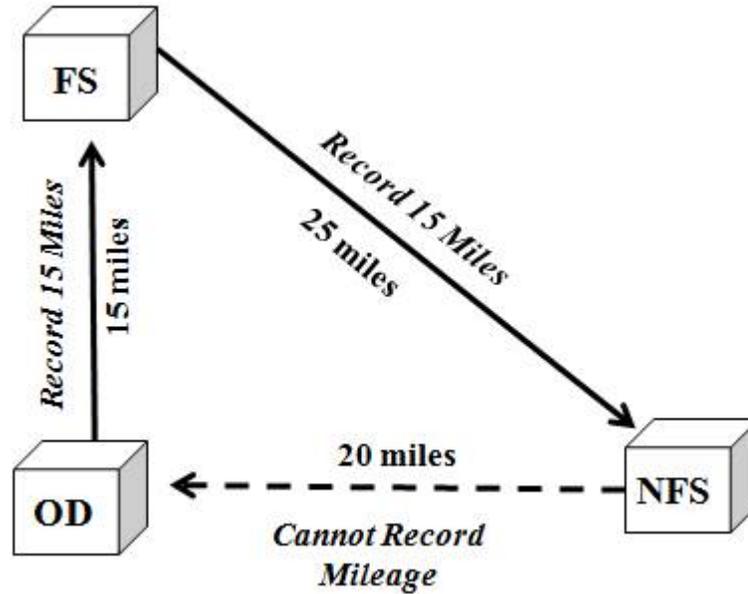
**DIAGRAM #1**



**Mileage to/from Non-First Steps visits (continued):**

This equation also applies when a provider leaves a First Steps (FS) visit and goes to a Non-First Steps (NFS) location. The provider can record the mileage from the First Steps visit to the Non-First Steps location, as long as the distance does not exceed the number of miles from the First Steps visit back to the provider's official domicile (OD) or the next First Steps visit. See Diagram #2 for an example of this:

**DIAGRAM #2**



A completed example of a First Steps Provider Daily Mileage Log is available on page 9.

# First Steps Provider Daily Mileage Log (COMPLETED EXAMPLE)

All fields are required for mileage reimbursement.

**Provider Name:** Suzie Smith, Special Instructor/ABA Provider

**Office Address:** 1234 Main Street, Anytown, Missouri 63999

Date of Service	Service Authorization #	Child Last Name	Child First Name	Discipline	Service Provided	Start Address	Destination Address	Round Trip	Trip Mileage
1/7/14	A330012345-1	Auburn	Apricot	SI	Eval/Assess	1234 Main Street, Anytown, MO 63999	123 Maple Drive, Anytown, MO 63999	X	32
1/16/14	A330023456-2	Brown	Berry	SI	Direct Child	1234 Main Street, Anytown, MO 63999	111 Oak Blvd, Anytown, MO 63999		10
1/16/14	A330034567-45	Copper	Carrot	SI	Direct Child	111 Oak Blvd, Anytown, MO 63999	222 Willow Ave., Anytown, MO 63999		15
1/16/14	Not Applicable	Emerald	Eggplant	SI	IFSP Meeting	222 Willow Ave., Anytown, MO 63999	444 Dogwood Lane, Anytown, MO 63999		17
1/16/14	A330067890-38	Fuchsia	Fruit	ABA	Direct Child	444 Dogwood Lane, Anytown, MO 63999	555 Pine Street, Anytown, MO 63999		21
1/16/14		End of Day Mileage				555 Pine Street, Anytown, MO 63999	1234 Main Street, Anytown, MO 63999		14
1/28/14	A330054321-10	Gold	Grape	ABA	Eval/Assess	1234 Main Street, Anytown, MO 63999	333 Elm Street, Anytown, MO 63999	X	20
								<b>TOTAL MILES:</b>	129

I certify that the information entered as required to request First Steps mileage reimbursement is accurate and correct to the best of my knowledge. I agree to the conditions as outlined in the First Steps Provider Mileage Guidance and Instructions as required for mileage reimbursement and understand that First Steps will adjust any and all mileage reimbursement payments if errors are found in the information I have entered.

*Suzie Smith*

\_\_\_\_\_  
Provider Signature

*1/31/2014*

\_\_\_\_\_  
Date

**B. Monthly Mileage Invoice:** The following instructions correspond to the required fields on the First Steps Monthly Mileage Invoice:

**1. Section 1: New Invoice:** A new invoice is the initial submission for miles traveled for First Steps services in a designated month. For agencies, one monthly invoice represents all miles traveled in one distinct month for all providers in the agency. New invoices must be submitted to the CFO within 60 days of the dates of service.

- **Payee Name:** This is the payee name on record with the CFO.
- **Tax ID:** This is the agency or independent provider's tax ID number.
- **Invoice Number:** This is an invoice number the payee designates. It is a combination of the tax ID number, a dash and the month and year (in MMYYYY format). For example, 123456789-042011.
- **Month/Year Mileage Traveled:** This is the month and year that the miles were actually traveled to deliver First Steps services in the natural environment.
- **Total Number of Providers:** This represents the unique number of providers that incurred mileage during the invoicing month. For example, for an independent provider this number would be "1." For an agency with 10 providers, it would be the total number of providers who submitted First Steps mileage logs for this specific invoicing month. In this example, if all 10 providers are submitting mileage, this number would be "10."
- **Total Number of Miles Traveled in Month/Year:** This is a count of all miles from all providers that incurred mileage for First Steps during the invoicing month.
- **Total Invoice Amount:** This is the total number of miles multiplied by \$0.47 per mile to calculate the amount of the invoice. Once the invoice is mailed to the CFO and process for payment, this is the amount the payee can expect on the mileage transaction.

**2. Section 2: Correction:** A correction invoice is an updated submission intended to correct an invoice previously submitted. Correction invoices must be submitted to the CFO within 180 days of the dates of service.

- **Original Invoice Number:** This is the invoice number that corresponds to the previously submitted invoice being corrected.

- **Reason for Correction:** This is a brief explanation for the reason a correction is necessary.
  - **Original Total Number of Providers:** This is the number of providers that corresponds with the original invoice previously submitted.
  - **Corrected Total Number of Providers:** This is the number of providers intended to be corrected on this invoice.
  - **Original Total Number of Miles:** This is the number of miles corresponding to the original invoice previously submitted.
  - **Corrected Number of Miles:** This is the new number of miles intended to be corrected on this invoice.
  - **Difference in Miles Submitted in this Correction:** This number represents the number of miles which are being added or deducted from the original invoice. If the correction is to add miles previously omitted, this will be a **positive** number. If the correction is to deduct miles previously paid but not traveled, this will be a **negative** number.
  - **Corrected Invoice Amount in Dollars:** This is the amount in which the previously submitted invoice is being corrected. If the correction is to claim additional reimbursement, this will be a **positive** number. If the correction is to return reimbursement previously received, this will be a **negative** number.
- 3. Signature/Date:** The signature of the payee or representative and the date is required for mileage reimbursement.

Once completed the form is submitted via mail to:

Central Finance Office  
P.O. Box 2507  
Greenwood, IN 46142

**A completed example of a First Steps Monthly Mileage Invoice is available on page 12.**



First Steps providers are allowed to submit **one new invoice per month** per payee account.

Mileage is reimbursed at \$0.47 per mile traveled.

For complete instructions, go to the First Steps Provider Mileage Guidance and Instructions at:

<http://dese.mo.gov/special-education/first-steps/providers>

**Section 1: New Invoice** (must be submitted within 60 days of the dates of service)

**Note:** All boxes in Section 1 must be completed for new invoices.

- **Payee Name** and **Tax ID** are the official name and number on record with the CFO.
- **Invoice Number** is a number you designate. It is a combination of the Independent/Agency tax ID, a dash and the month and year (in MM-YYYY format).
- **Mileage Service Month/Year** is the month and year that provider miles were actually traveled.
- **Total Invoice Amount** is the total dollar amount calculated for this mileage invoice.

<b>Payee Name</b>	<b>Tax ID</b>
ABC Early Intervention Agency	123456789
<b>Invoice Number</b>	<b>Month/Year Mileage Traveled</b>
123456789-012014	01-2014
<b>Total Number of Providers</b>	<b>Total Number of Miles Traveled in Month/Year</b>
5	625
<b>Total Invoice Amount</b>	\$ 293.75

**Section 2: Correction** (must be submitted within 180 days of the dates of service)

**Note:** All boxes in Section 2 must be completed for correction invoices.

- **Original items** are information from the invoice previously submitted.
- **Corrected items** are information intended to be corrected in this submission.

<b>Original Invoice Number</b>	<b>Reason for Correction</b>
<b>Original Total Number of Providers</b>	<b>Corrected Total Number of Providers</b>
<b>Original Total Number of Miles</b>	<b>Corrected Total Number of Miles</b>
<b>Difference in Miles Submitted in this Correction</b>	<b>Corrected Invoice Amount in Dollars</b>

I certify the above mileage was incurred by me and/or my staff during the Month/Year indicated. I certify only miles traveled by First Steps providers for the purpose of authorized First Steps services in the natural environment are included in this invoice. I understand I may be required, upon request, to provide documentation to substantiate this invoice.

Sally Administrator

*Sally Administrator*

2/2/14

Printed Payee Name (required)

Payee Signature (required)

Date of Signature (required)