

POLICY & PROCEDURES
FOR THE SECURE ESCORT OF
MENTAL HEALTH CONSUMERS WHO ARE
INVOLUNTARILY COMMITTED TO API OR OTHER HOSPITALS

July 21, 2005 – Revised - July 10, 2008

The following procedures will be used by the Division of Behavioral Health (DBH) for the transportation of mental health consumers who have been involuntarily committed to the Alaska Psychiatric Institute (API), Designated Evaluation, Stabilization, and Treatment Hospitals (DES/DET), or other hospitals authorized by API staff. The procedures require a partnership between Community Behavioral Health Centers (CBHC) and API/DBH staff to ensure that therapeutic and cost-effective outcomes are realized.

Transportation of involuntarily committed consumers will occur in one of the following ways:

1. Transport with an escort who is a staff member of the local community mental health program or with a family member authorized by the local the CBHC.
2. Transportation with escort by an approved guard service arranged and authorized by the local CBHC.
3. Transportation with escort by the Alaska State Troopers or local police, authorized by the local CBHC.
4. Transportation by land or air ambulances. The decision to transport by ambulance will be approved for DBH reimbursement in very limited situations and reviewed on a case-by-case basis. Reimbursement will only be for medical emergencies directly related to the commitment incident. Reimbursement is also limited to just those inpatient admissions, approved under the DET program.

*****Note: Timely availability of scheduled transportation is not a consideration for chartering air transportation.**

1. There is no other means of transport available or no road alternative.
2. There is no secure facility in which to hold an individual; i.e., hospital or jail, while awaiting transportation. (When flights are restricted because of weather, the inconvenience to the hospital, jail or consumer does not justify the added expense of a charter.)

If an inappropriate charter is authorized by the local CBHC, the charge must be paid by that CBHC or it will be deducted from that grantee's grant

OR

3. The individual's behaviors are so acutely dangerous or violent, that the individual has been **denied access** to commercial scheduled, public transportation.

If dangerousness or violence is an issue, discuss with guard service first to clarify if the guard service is appropriate for that specific situation and if so, the number of guards needed. In extreme cases, a very dangerous or very violent person may require local police or Alaska State Troopers to provide the escort service. In such a case you are required to contact the local police

or Alaska State Troopers. For additional information see the Policy and Procedures for the Secure Escort of Mental Health Consumers who are Involuntarily Committed to API or Other Hospitals, Revised 2/2/07. (Available on the DBH Web Page)

See Attachment # 1, Summary Grid of Transport/Escort and DBH Reimbursement Options for Involuntary Commitment Consumers.

Approved Guard Service

When moderate risk is present or when there is no practical way for a CBHC staff member or a family member to escort the consumer, the local CBHC will authorize transport with an approved Guard Service.

The CBHC must arrange and authorize the use of a Guard Service. The mental health professional (MHP) from the CBHC will confirm that an involuntary commitment order to a hospital has been completed, review the status of the consumer to be transported, and call the Guard Service to arrange for the transportation to that hospital. Required documentation must include a legible copy of the POA and/or Ex-Parte or other involuntary commitment order. The MHP must provide written authorization for a second guard specifying the specific clinical, safety, and or control concerns.

When the consumer is presently at a hospital and is to be transferred to API or another hospital, federal law (EMTALA) requires that the transferring doctor approve the transfer in a direct conversation with the receiving doctor. After this conversation, the authorization to transport must be completed by a MHP from the CBHC. The MHP will contact the Guard Service to make necessary guard and transport arrangements and to fax authorizing documents to the transport provider.

The Guard Service will attempt to transport consumers without using restraints. When needed, the guard is allowed to use handcuffs and leg restraints. If additional restraint is needed, Alaska State Trooper or local police transport should be the preferred escort.

The MHP is allowed to rely on other professional sources to determine which type of escort needed and is not required to have personal contact with the consumer. Examples of such professional sources include physicians, hospital nursing service, or village health aides.

* More than one guard –The MHP must provide written authorization for a second guard specifying the specific clinical, safety, and or control concerns.

** Preferred transport is by scheduled airlines or other commercial travel options. The MHP must provide written prior authorization if chartered airlines are requested. DBH encourages advance purchase of airline tickets as a cost saving procedure when possible.

See Attachment # 2; Guard Transport Authorization to API, DET Hospital, or other approved hospital.

Trooper/Police Escort

When a consumer poses a serious threat of harm or when no other timely method of transport is available, transportation will be provided by an Alaska State Trooper (AST) or a local police officer. These transportation costs must be authorized and purchased by the CBHC. The CBHC will be reimbursed by DBH for expenses directly related to the transport of the mental health consumer, including airfare for the trooper/police and the consumer, necessary per diem (State rate and receipts) for the officer, hotel, cab fares and mileage. DBH will not reimburse payment for rental cars. DBH will not reimburse salary or overtime

costs for the officer. If more than one officer is needed, the MHP's authorization must describe the reasons in terms of specific clinical, safety, and /or control concerns. Bills must be submitted to the Behavioral Health Project Assistant for processing within 60 days of the completion of transportation.

See Attachment # 3, Alaska State Trooper, or Police Transport Authorization to API, DET Hospitals, or other approved hospital.

Ambulance Transport

DBH is not trying to influence clinical judgment when an ambulance may be needed for a medical emergency but is limiting when DBH will pay for such services.

DBH will review bills for air and ground ambulance transport on a case-by-case basis for the provision of *emergency medical* care only, and only in relation to the incident in which (a) a person is involuntarily committed for inpatient care under Title 47.30, (b) the consumer's inpatient stay meets the other requirements for reimbursement under the DET program, and (c) the use of the ambulance was the least expensive and safest option. Ambulance transport will generally not be allowed for DBH reimbursement even when court ordered unless the medical necessity for ambulance transport and other conditions noted above are met. Ambulance transport to API will require prior authorization from API because medical care that requires an ambulance is generally beyond API's scope of practice.

Local approved DET hospitals with emergency rooms may be able to treat the emergency medical needs, which are directly related to the mental illness requiring involuntary commitment, such as an injury from a suicide attempt. Examples of a medical emergency, which would not qualify for DBH reimbursement, include treatment for diabetes, an appendectomy, backache, etc. Using an ambulance because the individual is in restraints will alone not be sufficient justification for an ambulance, but does suggest that transport by the Alaska State Troopers or local police be considered as the optimal means of transport. If approved, the cost for ambulance transport will be reimbursed at the Medicaid rate for an all-inclusive transport with patient loaded mileage only.

Transfer of patients between designated facilities. An already committed patient may not be transferred from a designated evaluation or treatment facility to another designated facility or to a state-operated hospital, unless

- (1) a mental health professional
 - (A) determines that the transfer is in the best treatment interests of the patient;
 - (B) obtains, before the transfer, certification from the patient's attending physician that the patient is medically stable; and
 - (C) contacts authorized admitting personnel at the receiving facility or hospital, and explains why the patient's mental condition or behavior necessitates transfer to another facility or hospital; and
- (2) the administrator of the facility proposing the transfer obtains, before the transfer, permission from the administrator at the receiving facility or hospital to transfer the patient. (Eff. 3/16/2001, Register 157)

Transport between Courts and API or DET Hospitals.

DBH will not reimburse transport costs between Courts and API, DET hospitals, or other DBH-approved hospitals.

Community Mental Health Center or Family Escort

When a consumer is not presenting a significant danger and when there is a practical opportunity, staff from the treating community mental health program may escort the consumer to API. The CBHC staff also may authorize a family member to escort the consumer.

DBH will reimburse the CBHC for staff or family members that provide ground and air transport charges, necessary per diem, cab fares and mileage. DBH will not reimburse payment for rental cars. DBH will not reimburse salary or overtime costs for the escort. Bills must be submitted to the DET Billing Coordinator for processing within 60 days of completion of the transport.

*DBH will verify admission to API and involuntary status of consumer before the DET Billing Coordinator will process bills for payment.

See Attachment # 4, CBHC or Family Escort Authorization to API, DET Hospital or Other Hospital Approved by the API/DBH

Return Home Transportation from DET/DES Facility

Return transportation for consumers under a POA, Ex-Parte or other involuntary commitment order for evaluation and/or treatment from a DES/DET facility is eligible for reimbursement by DBH. The CBHC shall purchase a one-way ticket for transportation by ground or air to return a consumer to their home community, only the consumer's return travel is eligible for reimbursement.

This program will not reimburse transportation returning home from API or to an out of state location.

Reimbursement for Other Charges

DBH will reimburse only for the approved transport costs described above. No other charges will be allowed.

For questions about costs, qualities of service, or other issues, contact:

DET Billing Coordinator
P.O. Box 110620
Juneau, AK 99811-0620
(907) 465-3370 or (800) 465-4828

Hospital Selection

DET -- Designated Evaluation and Treatment (DET) Hospitals are accessible statewide. The DET hospitals in Fairbanks and Juneau provide a wide range of treatment options and can accept people initially for up to 40 days on specialized psychiatric units. All DET hospitals have the therapeutic advantage of being closer to home and therefore closer to family and community supports. DET hospitals approve their own admissions.

DES -- Designated Evaluation and Stabilization hospitals provide a more limited function of stabilization initially for up to three days. These smaller hospitals have a reduced capacity for the kinds of patients they can accept and manage; psychiatric beds are usually in private rooms among medical patients. Local hospitalization where the purpose of the admission can be anonymous can be less stigmatizing.

Other Hospitals Authorized by API -- The State has contracted with other hospitals to accept admissions for children aged 12 and under and when needed to carry the overflow when API is over capacity. API Medical Officer must approve admission to the Other Hospitals and must be called before transporting a consumer and all hospitals must approve their own admissions.

API -- API can manage the most severe psychiatric admissions.

Attachment # 1

Summary Grid of Transport & DBH Reimbursement Options for Consumer Transport & Escort to API, DET and Other Hospitals

| | Scheduled / Commercial Transport | Chartered Airfare | Hourly wage at Scheduled Rate | 2nd Guard Escort | Mileage at State approved rate | Cab | Food / Hotel |
|--------------------------|---|--------------------------|--------------------------------------|------------------------------|---------------------------------------|------------|--|
| AST / Local Police | Prior Authorized by CBHC | Prior Authorized by CBHC | NO | If required by Police or AST | YES | YES | YES - only if transport is more than 12 hours (State Per Diem Rate) |
| Guard Escort | Prior Authorized by CBHC | Prior Authorized by CBHC | YES | Prior Authorized by CBHC | YES | YES | Food – NO (inclusive in hourly rate) Hotel -YES (State Per Diem Rate) |
| CBHC Staff | Prior Authorized by CBHC | Prior Authorized by CBHC | NO | NO | YES | YES | YES - only if transport is more than 12 hours (State Per Diem Rate) |
| Family Escort* | Prior Authorized by CBHC | NO | NO | NO | NO | YES | YES - only if transport is more than 12 hours (State Per Diem Rate) |
| Ambulance | Reviewed by DBH on a case-by-case basis for medical emergency directly related to a covered DET admission | | | | | | |
| Court Ordered Transports | Payment for transport costs requires all the above be met. Without the appropriate prior authorization from the CBHC, API or DBH staff and other documentation requirements, the DBH will not be responsible for transport costs. | | | | | | |

Family Escort* CBHC can consider individual emergency funds if additional costs are required for family escort.

Attachment # 2

GUARD ESCORT AUTHORIZATION to API, DET HOSPITAL

Or OTHER HOSPITAL APPROVED BY API/DBH

(To be completed by Authorized Requesting Agency.)

Consumer Name

Date

Time

Date of Birth

Social Security Number

Instruction for use: When a person under an involuntary commitment order is being escorted by an approved guard service to API, DET Hospital, or Other Hospital approved by the API/DBH, the following criteria must be met.

Check appropriate boxes.

Order Completed

Signed Ex Parte, Order for Evaluation or POA order attached.

Judge who approved order:

Date

Time

And

API approvals obtained to transport and admit to API

Name of API medical staff that approved admission

Date

Time

Or

DET medical staff approval to transport to DET hospital and admission to DET hospital

Name of DET medical staff that approved admission

Date

Time

Or

Other Hospital authorized by API physician

Name of Physician from Hospital who approved admission

Date

Time

Name and Address of Other Hospital Approved

Address

JUSTIFICATION: (Completed by CBHC staff as reported by API staff if an Other Hospital is required.)

ADDITIONAL INFORMATION REQUIRED AS APPLICABLE

Is consumer medically cleared through ER? Yes No
Does consumer have history of violence? Yes No
Is consumer violent at this time? Yes No

METHOD OF TRANSPORT

Ground
 Airfare (Scheduled)
 Airfare (Charter)

AUTHORIZATION/JUSTIFICATION (Completed by CBHC Staff if chartered aircraft is required)

ADDITIONAL GUARD

Additional Guard requested

AUTHORIZATION/JUSTIFICATION: (Completed by CBHC staff if an additional guard is required)

GENDER REQUIREMENT

Same gender escort **required** Escort gender requirement waived

AUTHORIZATION/JUSTIFICATION: (Completed by CBHC staff if Escort gender is waived)

Contact Person and Guard Service Used

| | |
|------|------|
| Date | Time |
|------|------|

Distribution of Authorization:

- 1. Guard Service when consumer is picked up
- 2. Local CBHC Files

CBHC staff completing form: (Print)

Agency Name: (Print)

Signature: _____ Date: _____

INSTRUCTIONS FOR COMPLETING THE GUARD ESCORT AUTHORIZATION TO API, DET HOSPITAL or OTHER HOSPITAL

- Consumer Name, Date, Time, Date of Birth and Social Security Number. Complete information for consumer whom you are requesting transport.
- Call Guard Transport Service
Call Guard Transport Services to let them know a transport is needed, the pick up site, and degree of urgency. Leave your contact number as they will have to call you back about airline schedules and personnel requirements.
- Airfare (commercial): Airfare (charter):
Type of airfare transport to be used. Guard Service will use commercial airfare whenever possible unless you indicate the consumer's behavior will require a charter, or when the airline schedule and seat availability does not meet the CBHCs' need to get the consumer to API.
Authorization – describe the reason the consumer needed to be transported by chartered aircraft.
- Additional Guard
If the consumer to be transported needs an extra guard due to his/her behavior and/or condition, you must explain the situation to the Guard Service and mutually decide on the use of an additional guard. A second guard should be an exception. If an additional guard is indicated due to behavior, you should consider the security of the setting where that consumer is being held and whether transport by the Troopers may be required. If both these options are reviewed and transport with the Guard Service is still the indicated option, then authorize extra support.
Authorization – describe the reason the additional guard was required.
- Other Approved Hospitals
DBH will approve transport to *Other Approved* hospitals only when an API admission screening officer or medical staff determines that admission to API would be inappropriate. Contact a Guard Service for escort similar to transportation to API after an alternate hospital is authorized by API/DBH staff and after receiving approval from the receiving hospital. Documentation of involuntary commitment is still required. Any other arrangements require prior authorization from DBH/API.
- Distribution of Authorization
Send copies of the authorizations for transport to
 1. Guard Service
 2. Local CBHC Files

Attachment # 3

**AST or POLICE ESCORT AUTHORIZATION to API, DET HOSPITAL
Or OTHER HOSPITAL APPROVED BY DBH/API**

Consumer Name

Date

Time

Date of Birth

Social Security Number

Instruction for use: When using an AST or Police to escort an individual to API, DET Hospital, or Other Hospital approved by the API/DBH under an involuntary commitment, the following criteria must be met.

Check appropriate boxes.

Order Completed

Signed Ex-Parte or POA order attached.

Judge who approved order:

Date

Time

And

API approvals obtained to transport and admit to API

Name of API medical staff that approved admission

Date

Time

Or

DET medical staff approval to transport to DET hospital and admission to DET hospital

Name of DET medical staff that approved admission

Date

Time

Or

Other Hospital authorized by API physician

Name of Physician from Hospital who approved admission

Date

Time

Name and Address of Other Hospital Approved

Address

JUSTIFICATION: (Completed by CBHC staff as reported by API staff if an Other Hospital is required.)

INSTRUCTIONS FOR COMPLETING THE AST or POLICE ESCORT AUTHORIZATION TO API, DET HOSPITAL or OTHER HOSPITAL

- Consumer Name, Date, Time, Date of Birth and Social Security Number
Complete information for consumer whom you are requesting transport.
- Call AST or POLICE Transport Service
Call nearest detachment of Alaska State Troopers to let them know an escort is needed, the pick up site, and degree of urgency. Leave your contact number as they will have to call you back to clarify personnel requirements and airline schedules. Alternatively, a similar call can be made to the local police. Leave your contact number as they will have to call you back about airline schedules and personnel requirements.
- Airfare (commercial): Airfare (charter):
Type of airfare transport to be used. Alaska State Troopers or Local Police will try to use commercial airfare whenever possible unless you indicate the consumer's behavior will need a charter, or the airline schedule and seat availability does not comply with your need to get the consumer to API.
Authorization – describe the reason the consumer needed to be transported by chartered aircraft.
- Additional Guard
If the consumer to be transported needs an extra guard due to their behavior and/or condition you must explain the situation to the Alaska State Troopers or Local Police and mutually decide on the use of an additional guard. A second guard should be an exception.
Authorization – describe the reason the additional guard was required.
- API or DET Hospitals
API, DET, and Other Hospitals must each approve their own admissions before arranging to transport to those hospitals. Once approval is obtained from those hospitals to transport to API or a DET Hospital, contact a Guard Service to arrange for the transport and escort of the consumer to the receiving hospital.
- DET Hospital or Other Approved Hospital
An Other Approved Hospital will only be considered by the DBH if it is determined by API admission screening officer or medical staff that an admission to API would be inappropriate. Only after API/DBH staff authorizes an Other Hospital and approval from the receiving hospital is confirmed would it be appropriate to contact a Guard Service to arrange for transport and escort of the consumer. Documentation of involuntary commitment is still required. Any other arrangements require prior authorization from the API/DBH.
- Per Diem
The trooper or police officer providing escort will be provided per diem expenses directly related to transport. The per diem would include meals, ground transportation, and lodging at State rates if the, transport cannot be completed the same day. If applicable, the Troopers or police must fax the receipts to the DBH DET Billing Officer.

Distribution of Authorization

Copies of the authorizations for transport must be provided to

1. AST or Local Police
2. Local CBHC Files

Attachment # 4

**CBHC or FAMILY ESCORT AUTHORIZATION to API, DET HOSPITAL
Or OTHER HOSPITAL APPROVED BY the DBH/API**

Consumer Name

Date

Time

Date of Birth

Social Security Number

Instruction for use: When a CBHC staff person or a family member is approved by the CBHC to escort a person under an involuntary commitment order to API, DET Hospital, or Other Hospital approved by DBH/API, the following criteria must be met.

Check appropriate boxes.

Evaluation Order Completed

Signed Ex-Parte or POA order attached.

Judge who approved order:

Date

Time

And

CBHC Professional judgment that transport by family member or CBHC staff is therapeutically justified and safe for all involved in the transport/escort.

JUSTIFICATION: (Completed by CBHC)

And

API approval obtained to transport and admit to API

Name of API medical staff that approved admission

Date

Time

Or

DET medical staff approval to transport to DET hospital and admission to DET hospital

Name of DET medical staff that approved admission

Date

Time

Or

Other Hospital authorized by API physician

Name of Physician from Hospital who approved admission

Date Time

Name and Address of Other Hospital Approved

Address

JUSTIFICATION: (Completed by CBHC staff as reported by API staff if an Other Hospital is required.)

ADDITIONAL INFORMATION REQUIRED AS APPLICABLE

Is consumer medically cleared through ER? Yes No
Does consumer have history of violence? Yes No
Is consumer violent at this time? Yes No

METHOD OF TRANSPORT

Ground
 Airfare (Scheduled)
 Airfare (Charter)

AUTHORIZATION/JUSTIFICATION (Completed by CBHC Staff if chartered aircraft is required.)

Per Diem
Beginning date and hour of transport _____
Ending date and hour of transport _____
Attach Hotel and cab receipts if applicable _____

Distribution of Authorization:

1. DBH DET Billing Coordinator with all necessary items to complete billing.
2. Local CBHC Files

CBHC staff completing form: (Print)

Agency Name: (Print)

Signature: _____

Date: _____

INSTRUCTIONS FOR COMPLETING THE CBHC or FAMILY ESCORT AUTHORIZATION TO API, DET HOSPITAL or OTHER HOSPITAL

- Consumer Name, Date, Time, Date of Birth, and Social Security Number. Complete information for consumer whom you are requesting transport.
- Justification—CBHC Staff or Family Member Transport/Escort
Family escorts will be used when a professional judges that the situation will be safe and therapeutic. Mixing guard escorts with family escorts may increase management problems.

The types of transport to be used are Ground, Commercial Transport, or Charter Transport. CBHC will make every effort to use ground or commercial transportation whenever possible unless CBHC indicates the consumer's behavior will need a charter, or when the schedule and seat availability does not meet the CBHC's need to get the consumer to API, DET Hospital or other hospital.

Authorization – describe the reason the consumer needed to be transported by chartered aircraft.

- Per Diem
CBHC staff and family members will be reimbursed for per diem expenses directly related to escort. Reimbursement will be for only those items listed on attachment #1.
- Other Approved Hospitals
Other Approved hospitals will only be considered for reimbursement by DBH when the API admission screening officer or medical staff determines that an admission to API would be inappropriate. Escort similar to transportation to API after an alternate hospital is authorized by API/DBH staff and after receiving approval from the receiving hospital. Documentation of involuntary commitment is still required. Any other arrangements require prior authorization from API/DBH.
- Distribution of Authorization
Copies of the authorizations for transport must be provided to:
 1. DBH DET Billing Coordinator with all necessary items to complete billing.
 2. Local CBHC Files

Attachment # 5

State Per Diem Rates for Mileage, Meals and Lodging

AAM 60.140

Privately Owned Conveyances (04-05)

A traveler may use a privately owned vehicle, such as auto, snowmobile, motorcycle, or boat when it is in the best interest of the state. The approving official shall be responsible for substantiating that use of a privately owned vehicle is in the state's best interest. The traveler shall receive a mileage reimbursement equal to the established rates published on the Division of Finance web site at:

http://fin.admin.state.ak.us/dof/sto/resource/POV_Rate_Table.pdf

When a traveler uses a privately owned vehicle, the amount of reimbursement shall be limited to what the lowest available commercial alternative would have cost. Per diem, actual hotel expenses and meal allowances, or other travel reimbursements shall not exceed the amounts that would have been incurred had the traveler used common carrier transportation. Only mileage incurred while engaged in official state business is reimbursable.

Mileage incurred for commuting between an employee's residence and duty station is not reimbursable. Similarly, mileage incurred for commuting to/from a temporary worksite that is within the confines of the employee's duty station and/or residence is also not reimbursable.

Any additional regularly scheduled work time away from the duty station required as a result of using a privately owned vehicle for personal convenience will be charged to annual leave, personal leave, or leave without pay.

When two or more state travelers are traveling in the same direction, and it is possible to share a privately owned vehicle or airplane, the state will reimburse the total mileage only once ([AS 39.20.130](#)).

AAM 60.190

Lodging Types and Rates (01-07)

Travelers are permitted actual costs or an allowance for lodging and an allowance for meal and incidental expenses (M&IE). Refer to [AAM 60.250](#) for policies on M&IE. The combined costs for lodging and M&IE are referred to as the per diem allowance. Where applicable, travel provisions of collective bargaining agreements supersede AAM per diem allowance policies and rates.

A traveler is not entitled to a lodging allowance when provided lodging by the state or a third party with whom the state is conducting business.

Travelers are not entitled to a lodging allowance when staying in their own residence(s).

The term of a stay (short- or long-term), type of lodging facility, and location of overnight lodging determine applicable lodging types and rates.

Agencies should take into consideration the length of stay in one location in determining the type of lodging accommodations.

For current lodging rates, refer to the State of Alaska Per Diem Rates published on the Division of Finance web site at:

<http://fin.admin.state.ak.us/dof/sto/index.jsp>

In- and Out-of-State, Short-Term Lodging (Actuals or Allowance)

Travelers on short-term travel status in or outside of Alaska are eligible for

reimbursement of actual lodging expenses. Actual costs for short-term lodging are authorized for moderately priced commercial lodging. Each agency must ensure that lodging costs are reasonable and necessary and that government or other discount rates are used. Travelers must submit original itemized commercial lodging receipts with their travel authorizations.

Actual lodging expenses that exceed \$300 room rate per night must be approved in advance by the director of the Division of Finance, or, the commissioner of the Department of Administration may delegate this approval to department commissioners. All requests shall include justification that clearly demonstrates the lodging is a government rate and cannot be acquired for less than \$300 per night. Quotes from at least three moderately priced hotels in the same vicinity should be included with the justification.

Travelers on short-term travel status in Alaska are eligible for a daily noncommercial allowance when the travelers are required to stay in a community or location where commercial lodging facilities and state- or vendor-provided facilities are not available.

AAM 60.250**Meals and Incidental Expense Allowances (1-07)**

Meal and incidental expense (M&IE) allowances and prorated M&IE allowances are provided to the state traveler to cover the cost of meals and necessary incidental expenses such as tips, laundry expenses, etc. Where applicable, M&IE provisions of collective bargaining agreements supercede AAM M&IE allowance policies and rates.

There are two types of M&IE allowances, short-term and longterm/noncommercial. The appropriate M&IE allowance rate for a day is the rate established for the community in which the traveler is required to obtain overnight lodging. On the day of return, a traveler is entitled to the M&IE allowance rate applicable for the preceding day. When travel involves crossing the International Date Line, the M&IE allowance shall be calculated based on the total number of hours in flight.

For current M&IE allowances, refer to the State of Alaska Per Diem Rates published on the Division of Finance web site at:

<http://fin.admin.state.ak.us/dof/sto/index.jsp>

In-state M&IE rates are reviewed annually and adjusted as appropriate.

A link to the federal per diem rates is located on the Division of Finance web site at: <http://fin.admin.state.ak.us/dof/sto/index.jsp>

Short-Term M&IE (Allowance)

Travelers on short-term travel status in Alaska are eligible for a daily M&IE allowance.

Travelers on short-term travel status outside of Alaska, including travel to Hawaii and foreign destinations, are eligible for the federal M&IE rate for the location.

A traveler is eligible for the short-term M&IE allowance rate in two circumstances: when a traveler in short-term travel status is expected to incur expenses from dining at commercial establishments; and when a traveler in long-term travel status will incur expenses from dining at commercial establishments because the traveler is required to stay in a lodging facility that does not provide cooking facilities to its guests.

M&IE Rules for Specific Situations

Whenever a traveler is in travel status and is entitled to reimbursement for lodging under both the short-term and long-term/noncommercial per diem rules, the traveler is entitled to only the M&IE allowance that applies to the location where the traveler is staying.

If a traveler maintains a dwelling at their destination and it is available to them, they will be entitled to only an M&IE allowance for normal workdays. An M&IE allowance for other than normal workdays is not allowed.

If a traveler is temporarily returned to the traveler’s duty station while on a long-term assignment and is continuing to receive a long-term lodging per diem, the traveler is not entitled to any M&IE allowance while at the duty station.

Prorated M&IE Allowances

The normal meal periods are published on the Division of Finance web site at: <http://fin.admin.state.ak.us/dof/travel/resource/rates.pdf> , and a table of the prorated short- and long-term M&IE rates for Alaska and out-of-state travel are published at:

http://fin.admin.state.ak.us/dof/sto/resource/M&IE_AK_&_CONUS_Rates.pdf

A traveler must be in travel status at least three consecutive hours during a meal period to be entitled to the M&IE for that meal.

On the days of departure and return, the traveler receives a prorated M&IE based upon scheduled flight (or other common carrier) departure and actual return times as follows:

| | | | |
|-----------------------|------------------------|-----------------------|------------------------|
| <u>Departure Time</u> | <u>Before 9:00 AM</u> | <u>Before 2:00 PM</u> | <u>Before 11:00 PM</u> |
| M&IE | Full day | Lunch & Dinner | Dinner |
| <u>Return Time</u> | <u>12:00 PM (Noon)</u> | <u>Before 5:00 PM</u> | <u>After 4:59 PM</u> |
| M&IE | Breakfast | Breakfast & Lunch | Full day |

This table factors in a two-hour check-in period for departures and one hour for luggage retrieval upon arrival. In circumstances where the traveler is required by the carrier to report to the terminal more than two hours prior to departure (such as for international flights), the traveler is to note in the travel authorization the additional time required by the airline and the traveler’s actual check in time. In the above table, this additional time (beyond two hours) is added to the departure time to determine the allowable prorated M&IE. For example, if required check in time is three hours before flight time, “Before 9:00 AM” departure time would be adjusted to “Before 10:00 AM.”

When travelers drive to a destination, on the days of departure and return, the travelers are entitled to prorate M&IE when they are in travel status at least three consecutive hours during a normal meal period.

Travel Status Less Than 24 Hours, More Than 12 Hours

Travelers who are in travel status less than 24 hours but more than 12 hours and who return to their residence and/or duty station rather than obtaining overnight lodging at their travel destination, may be entitled to a M&IE allowance. For air travel, the M&IE allowance is calculated using the departure and return times presented in the prorated M&IE table above. If the scheduled flight (or other common carrier) departure is before 9:00 a.m., the travelers are entitled to the breakfast M&IE. Travelers may be entitled to the M&IE for lunch and dinner if they

are in travel status for at least three consecutive hours during these meal periods. A traveler, who travels by means other than common carrier, must be in travel status at least three consecutive hours during a meal period to be entitled to the M&IE for that meal.

Travelers who are normally scheduled to work more than ten hours per day must be in travel status at least two hours more than their regular scheduled workday to be eligible for the M&IE allowance. See [AAM 320](#) for details on taxability of such an allowance.

Meals Provided to Travelers

Occasionally, a traveler is provided a meal while at a conference, training, seminar, etc., or as part of a lodging package such as at bed and breakfast inns (where the state is reimbursing for actual lodging costs). When a traveler is provided and consumes a meal in these or similar circumstances, the traveler is not eligible for the related M&IE allowance.

| | |
|--------------------|---------|
| SHORT-TERM M&IE | Alaska |
| Breakfast | \$12.00 |
| Lunch | \$16.00 |
| Dinner | \$32.00 |
| Daily Allowance | \$60.00 |