



MEDICAL TRAVEL REIMBURSEMENT REQUEST

Claimant Name: _____

Claim No.: _____

Address: _____

Phone No.: _____

Employer: _____

Adjuster: _____

	Date and Time of Appointment with Health Care Provider	Name, Address and Phone Number of Health Care Provider	Number of Miles (round trip)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
Total Miles (1):			
Mileage Rate (2):			X .43
Mileage Reimbursement Requested 1 x 2 = (3):			\$
Meals and Lodging (4):			\$
Total Reimbursement Requested (3) + (4):			\$

Signature: _____

Date: ____/____/____

(Form must be signed before payment can be issued.)

Under New Mexico state law, mileage benefits are paid as follows:

A. Employer shall pay worker's mileage, transportation, meal and commercial lodging expenses for travel to health care providers (HCPs) pursuant to this rule. Payment shall be made only to the injured worker and within thirty (30) days of the employer's receipt of an original itemized receipt that complies with the requirements of this rule:

- (1) forty cents (.40) per mile for travel to HCPs for fifteen (15) miles or more, one (1) WAY, from the worker's residence or place of employment, depending upon the point of origin of travel;
- (2) actual reimbursement for the cost of a ticket on a common carrier, if applicable;
- (3) actual reimbursement up to fifteen dollars (\$15.00) for any one meal wherein reimbursement is allowed for an initial one hundred and fifty (150) miles of travel with three (3) meals total and thirty dollars (\$30.00) total reimbursed for a twenty-four (24) hour period; and,
- (4) actual reimbursement up to eighty-five dollars (\$85.00) for the cost of overnight commercial lodging in the event of required travel of at least one hundred and fifty (150) miles one (1) way from worker's residence or place of employment, depending upon the point of origin of travel.

Under New Mexico Law, any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Updated: 01/2014

New Mexico Self-Insurers' Fund
P.O. Box 846
Santa Fe, New Mexico 87504
(800) 432-2036 ♦ Fax: (505) 820-0670