



## BOONE COUNTY FAMILY RESOURCES

### REIMBURSEMENT REQUEST

#### FOR REIMBURSED MILEAGE AND PARATRANSIT

<b>RESPONSIBLE PARTY NAME:</b>	<b>CLIENT NAME:</b>	<b>SUPPORT COORDINATOR:</b>

#### CONDITIONS FOR PARTICIPATION IN THE REIMBURSEMENT PROGRAM

*Read Carefully*

1. Boone County Family Resource's (BCFR) reimbursement is limited to services/supports prior authorized in the Agency's authorization system. If you have questions regarding the authorized amount, please contact your Support Coordinator prior to submitting a Reimbursement Request.
2. You may submit reimbursement requests at any time during the authorized month, or within 95 days after the month of service. All required documentation must be fully completed and submitted together at the same time. Submit all dates of service together for a given month. Additional dates for the month will not be reimbursed after BCFR payment has been processed that month.

Month of Service	Last Day Paperwork will be Accepted for Reimbursement (95 days after month of service)
January 2025	Monday, May 5, 2025
February 2025	Thursday, June 5, 2025
March 2025	Monday, July 7, 2025
April 2025	Tuesday, August 5, 2025
May 2025	Friday, September 5, 2025
June 2025	Monday, October 6, 2025
July 2025	Wednesday, November 5, 2025
August 2025	Friday, December 5, 2025
September 2025	Monday, January 5, 2026
October 2025	Thursday, February 5, 2026
November 2025	Thursday, March 5, 2026
December 2025	Monday, April 6, 2026

Find and print the 2025 – 2028 Reimbursement Request Deadlines at [www.bcfr.org/services/support-coordination/reimbursed-services](http://www.bcfr.org/services/support-coordination/reimbursed-services)

3. Please submit complete and accurate reimbursement requests via mail or email to the attention of the Service Procurement Specialist, at the address noted below, by 5:00 pm on the 5<sup>th</sup> of the month to allow for reimbursement by the 20<sup>th</sup> of the month. Any request received after the 5<sup>th</sup> of the month or that were not fully completed by the 5<sup>th</sup> of the month, payment will be sent by the 20<sup>th</sup> of the following month, once fully completed. If the 5<sup>th</sup> falls on a weekend or holiday of which the Agency is closed, submission of requests are due by 5:00 pm on the following business day.
  - Where to submit documentation:
    - Email to: [serviceprocurement@bcfr.org](mailto:serviceprocurement@bcfr.org)
      - If you do not have a scanner, a clear photo of front and back of the form with all corners showing is sufficient.
    - In Person or Mail: 2700 W Ash Street Columbia Missouri 65203
      - Drop off at the front desk between hours of 8:00 AM and 5:00 PM Monday to Friday
      - After hours drop off: Drop in secure drop box outside of the front doors.
4. Reimbursement from this agency will not exceed the authorized amount of the established agency service limits and unit costs.
5. Complete this and other forms electronically or in ink. Please do not use white out. Strike through any errors.

This reimbursement is used for travel to and/or from services called for in my Individual Plan. I/Our family understand(s) and agree(s) to follow the above conditions for transportation reimbursement. I certify the transportation has been rendered and I have not received, nor will I seek reimbursement for this transportation from any other source.

Responsible Party/Family Member Signature

Date

## TRANSPORTATION REIMBURSEMENT REQUEST

Transportation reimbursement is available for verifiable vocation and day programs, sheltered and supported employment, support groups, therapeutic recreation and independent living skills training. Reimbursement is also available for counseling, therapies and medical appointments not covered by Medicaid. The type, month and amount of the authorization for is stated on the opposite side of this form.

**PARATRANSIT REIMBURSEMENT:** is to be used for travel as noted in my Individual Plan and is reimbursable at \$2.00 per trip.

**MILEAGE REIMBURSEMENT:** can only be requested for the miles while the individual is in the vehicle being transported to or from an approved activity and is reimbursable at \$0.25 per eligible mile. Only transportation within the state of Missouri can be reimbursed.

[illegible]