BENEFICIARY TRAVEL

1. REASON FOR ISSUE. This Veterans Health Administration (VHA) Handbook provides information on the Department of Veterans Affairs (VA) Beneficiary Travel Program that went into effect on July 30, 2008.

2. SUMMARY OF MAJOR CHANGES. Public Law 111-163, Section 305(f) requires VA to “revise the Veterans Health Administration Handbook 1601B.05 to clarify that an allowance for travel based on mileage paid under section 111(a) of title 38, United States Code, may exceed the cost of such travel by public transportation regardless of medical necessity.” By direction of the Under Secretary for Health, VHA Handbook 1601B.05, Beneficiary Travel, subparagraph 9a(1)(a), is revised to read: “Notwithstanding the regulations in title 38 Code of Federal Regulations (CFR) Part 70, an allowance for travel based on mileage may exceed the cost of such travel by public transportation regardless of medical necessity.”

3. RELATED ISSUES. None.

4. RESPONSIBLE OFFICE. The Chief Business Office (16) is responsible for the contents of this VHA Handbook. Questions may be addressed to 202-254-0384.

5. RESCISSIONS. VHA Handbook 1601B.05, "Beneficiary Travel” dated July 29, 2008 is rescinded.

6. RECERTIFICATION. This VHA Handbook is scheduled for recertification on or before the last working day of July 2015.

JRobert A. Petzel, M.D.
Under Secretary for Health

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1. PURPOSE

This Veterans Health Administration (VHA) Handbook provides information on Department of Veterans Affairs (VA) policy for beneficiary travel. **NOTE:** For more information on the Beneficiary Travel program see [http://vaww1.va.gov/cbo/apps/policyguides/index.asp](http://vaww1.va.gov/cbo/apps/policyguides/index.asp). This is an internal VA Web site not available to the public.

2. AUTHORITY

The authorities for VHA policies for beneficiary travel are provided by the following:


c. Title 38 CFR § 70.2, Definitions.

d. Title 38 CFR § 70.3, Determination of Secretary.

e. Title 38 CFR § 70.4, Criteria for Approval,

f. Title 38 CFR § 70.10, Eligible persons.

g. Title 38 CFR § 70.20, Application.

h. Title 38 CFR § 70.21, Where to apply.

i. Title 38 CFR § 70.30, Payment principles.

j. Title 38 CFR § 70.31, Deductibles.

k. Title 38 CFR § 70.32, Reimbursement or prior payment.

l. Title 38 CFR § 70.40, Administrative procedures.

m. Title 38 CFR § 70.41, Recovery of payments.

n. Title 38 CFR § 70.42, False statements.

o. Title 38 CFR § 70.50, Reduced fare requests.

3. DEFINITIONS

a. **Attendant.** An attendant is an individual traveling with a beneficiary who is eligible for beneficiary travel and requires the aid and/or physical assistance of another person.
b. **Beneficiary.** A beneficiary is a person determined eligible for VHA benefits.

c. **Claimant.** A claimant is a Veteran (or the Veteran’s guardian) who received services at the hospital, clinic, or community resource that provided the services, or the person other than the Veteran who paid for the services.

d. **Clinician.** A clinician is a Physician, Physician Assistant (PA), Nurse Practitioner (NP), Psychologist, or other independent licensed practitioner.

e. **Deductible.** A deductible is a specified amount required by law to be withheld from a VA beneficiary travel payment in some circumstances.

f. **Emergency Treatment.** Emergency treatment refers to treatment for a condition of such a nature that a prudent layperson would have reasonably expected that delay in seeking immediate medical attention would have been hazardous to life or health. This standard would be met if there were an emergency medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent layperson who possesses an average knowledge of health and medicine could reasonably expect the absence of immediate medical attention to result in placing the health of the individual in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

g. **Examination, Treatment, or Care.** Examination, Treatment, or Care refers to services provided under the Medical Benefit Package as defined in title 38 CFR §17.38. **NOTE:** For purposes of this Handbook, this term also includes extended care services.

h. **Irregular Discharge.** Irregular discharge refers to the release of a competent patient from a VA or VA-authorized hospital, nursing home, or domiciliary care due to: refusal, neglect or obstruction of examination or treatment; leaving without the approval of the treating health care clinician; or disorderly conduct and discharge is the appropriate disciplinary action.

i. **Medically Indicated.** Medically indicated refers to the determination by a VA health care clinician that a particular treatment, service, and/or specialized mode of transportation is medically required.

j. **Nearest Appropriate VA Facility.** Nearest appropriate VA facility refers to the closest VA facility properly equipped and staffed to provide the care and treatment medically indicated by the patient’s condition.

k. **Special Mode of Transportation.** Special mode of transportation is defined as an ambulance, ambulette, air ambulance, wheelchair van, or other mode of transportation specially designed to transport disabled persons (this does not include a mode of transportation not specifically designed to transport disabled persons, such as a bus, subway, taxi, train, or airplane). A modified, privately-owned vehicle, with special adaptive equipment and/or capable of transporting disabled persons is not a special mode of transportation.

l. **Unable to Defray.** Unable to defray refers to the situation of any Veteran who:
(1) Is an enrolled or otherwise eligible Veteran who has income for the year (as defined under 38 U.S.C. § 1503) immediately preceding the application for beneficiary travel that does not exceed the maximum annual rate of pension that the beneficiary would receive under 38 U.S.C. § 1521 (as adjusted under 38 U.S.C. § 5312) if the beneficiary were eligible for pension during that year.

(2) Is able to demonstrate that due to circumstances such as loss of employment, or incurrence of a disability, their income in the year of travel will not exceed the maximum annual rate of pension that the beneficiary would receive under 38 U.S.C. § 1521 (as adjusted under 38 U.S.C. § 5312) if the beneficiary were eligible for pension.

(3) Has a service-connected (SC) disability rating of at least 30 percent.

(4) Is traveling in connection with treatment of a SC disability.

m. United States. The United States covers the states, territories, and possessions of the United States, the District of Columbia, and the Commonwealth of Puerto Rico.

n. VA-authorized Health Care Facility. A VA-authorized health care facility is a non-VA health care facility where VA has approved care for an eligible beneficiary at VA expense.

o. VA Facility. VA facility means a VA Medical Center, VA Outpatient Clinic (OPC), or VA Community-based Outpatient Clinic (CBOC).

4. SCOPE

This Handbook provides details on the following topics:

a. Veterans eligible for beneficiary travel;

b. Non-veterans eligible for beneficiary travel;

c. Beneficiary travel expenses that are paid;

d. Beneficiary travel expenses that are not paid;

e. Deductible payment requirement and exceptions;

f. Payment of beneficiary travel;

g. False statements by beneficiaries to obtain payment for travel expenses;

h. Appealing the denial of a beneficiary travel claim;

i. Transportation for care;

j. Special mode of transportation;
k. Travel authorization forms; and

l. Non-VA transportation resources.

5. APPLYING FOR BENEFICIARY TRAVEL

a. A claimant may apply for beneficiary travel orally or in writing but must provide VA the receipt for each expense other than for mileage.

b. A claimant must apply for payment of beneficiary travel within 30 calendar days after completing beneficiary travel that does not include special mode transportation.

c. For beneficiary travel that includes a special mode of transportation, a claimant must apply for payment of beneficiary travel and obtain approval from VA prior to travel. However, if the travel included a special mode of transportation and the claimant without prior approval applies for payment of the beneficiary travel within 30 calendar days after the travel is completed, the application will be considered timely submitted if the travel was for emergency treatment.

d. For travel that includes meals and/or lodging, a claimant must apply for and receive approval prior to obtaining the meals and/or lodging in order to receive payment.

e. If a determination is made that additional information is needed to make a determination, the claimant will be notified in writing of the deficiency and will be requested to provide additional information. If the claimant has not responded to the request within 30 days, the Chief of the Business Office, or other designee, may decide the claim prior to the expiration of the 1 year submission period required by 38 U.S.C. § 5103(b)(1) based on all the information contained in the file, including any information obtained on behalf of the claimant. If the Chief of the Business Office, or other designee, does so, and the claimant subsequently provides the information within 1 year of the date of the request, the Chief of the Business Office, or other designee, must re-adjudicate the claim.

f. If a person becomes eligible for payment of beneficiary travel after the travel takes place, payment may be made if the person applies for travel benefits within 30 days of the date when the person became eligible for travel benefits.

g. The date of an application for beneficiary travel is the postmark date, if mailed; or the date of submission if hand delivered or provided electronically or orally.

6. WHERE TO APPLY

Claimants for beneficiary travel must submit information to the Chief of the Business Office, or other designee, at the VA facility responsible for the medical care or services being provided and for which travel is required.

7. VETERANS ELIGIBLE FOR BENEFICIARY TRAVEL PAYMENTS

The following Veterans are eligible for payment of beneficiary travel payments:
a. A Veteran who travels to or from a VA facility or VA-authorized health care facility in connection with treatment or care for a SC disability (regardless of percent of disability).

b. A Veteran with a SC disability rated at 30 percent or more who travels to or from a VA facility or VA-authorized health care facility for examination, treatment, or care for any condition.

c. A Veteran who travels to a VA facility or VA-authorized health care facility for a scheduled compensation and pension (C&P) examination.

d. A Veteran receiving pension under 38 U.S.C.§ 1521, who travels to or from a VA facility or VA-authorized health care facility for examination, treatment, or care.

e. A Veteran whose annual income (as determined under 38 U.S.C. § 1503) does not exceed the maximum annual rate of pension that the Veteran would receive under 38 U.S.C.§ 1521 (as adjusted under 38 U.S.C. § 5312) if the Veteran was eligible for pension and travels to or from a VA facility or VA authorized health care facility for examination, treatment, or care.

8. NON-VETERANS ELIGIBLE FOR BENEFICIARY TRAVEL

a. Allied Beneficiaries. For Allied Beneficiaries, as defined by 38 U.S.C. § 109, travel is subject to a reimbursement agreement by the government concerned. For information on the beneficiary travel eligibility of Allied Beneficiaries, see VHA Handbook 1601D.02.

b. Attendants. Someone other than a VA employee, who is accompanying and assisting a Veteran or beneficiary eligible for beneficiary travel payments, when such beneficiary is medically determined to require the presence of the attendant because of a physical or mental condition.

c. Beneficiaries of Other Federal Agencies. Travel for beneficiaries of other Federal agencies may be authorized travel incident to medical services rendered upon requests of those agencies, subject to a reimbursement agreement by those agencies.

d. Other Persons. A member of a Veteran’s immediate family, a Veteran’s legal guardian, or a person in whose household the Veteran certifies an intention to live, if such person is traveling for consultation, professional counseling, training, or mental health services concerning a Veteran who is receiving care for a SC disability; or a member of a Veteran’s immediate family, if the person is traveling for bereavement counseling relating to the death of the Veteran in the active military, naval, or air service in the line of duty and under circumstances not due to the Veteran’s own misconduct.

9. BENEFICIARY TRAVEL EXPENSES THAT ARE PAID

a. Beneficiary Reimbursable Expenses and Amounts. Eligible Veterans and beneficiaries may obtain beneficiary travel reimbursement for the following expenses:

(1) The per mile rate established by the Secretary of Veterans Affairs for the period of travel for use of privately owned vehicle or the actual cost for use of the most economical common
carrier (bus, train, taxi, airplane, etc.), for travel to and from VA or VA authorized health care subject to the following:

(a) Notwithstanding the regulations in 38 CFR Part 70, an allowance for travel based on mileage may exceed the cost of such travel by public transportation regardless of medical necessity.

(b) Payment for a common carrier may not exceed the amount allowed for a privately owned vehicle unless travel by a privately owned vehicle is not reasonably accessible or travel by a common carrier is determined to be medically necessary.

(2) The actual cost of ferry fares, bridge tolls, road tolls, tunnel tolls.

(3) The actual cost of a special mode of transportation.

(4) The actual cost for meals, lodging, or both, not to exceed 50 percent of the amount allowed for government employees under 5 U.S.C. § 5702, when VA determines that an overnight stay is required. Factors VA may consider in making that determination include, but are not limited to the following:

(a) The distance the Veteran must travel.

(b) The time of day when VA scheduled the Veteran’s appointment.

(c) The weather conditions or congestion conditions affecting the travel.

(d) The Veteran’s medical condition and its impact on the ability to travel.

**NOTE:** As required by law, each time the Federal government makes a change in mileage rates payable under title 5 U.S.C. §§ 5702 and 5704 for Federal employee travel by privately-owned vehicle, but not less frequently than annually, the Secretary shall conduct an investigation of the actual costs of travel, including lodging and subsistence. In conducting the investigation, the Secretary shall consult with the Administrator of the General Services Administration, the Secretary of Transportation, and Veterans’ Service Organizations. As part of the investigation, the Secretary shall review and consider various factors including vehicle depreciation, state and Federal vehicle taxes and the costs of gasoline, oil, maintenance, accessories, parts, tires, and insurance. However, to the extent that the Administrator of General Services has, within a reasonable period of time, conducted an investigation of travel costs that included the factors described in this paragraph, the Secretary may consider that investigation in lieu of conducting a separate investigation with respect to the findings of those individual factors.

b. **Attendant Reimbursable Expenses and Amounts**

(1) For shared travel in a privately owned vehicle, payments are limited to the amount for one beneficiary. For example, if a beneficiary and an attendant travel in the same automobile or if two beneficiaries travel in the same automobile, the amount for mileage will be limited to the amount for one beneficiary.
(2) The actual cost for meals, lodging, or both, may be paid when VA determines that an
overnight stay is required. Factors VA may consider in making that determination are the same
as those for the Veteran noted in subparagraph 9a(4).

c. Payment Considerations

(1) Except as otherwise allowed under this Handbook, payment is limited to travel from a
beneficiary’s residence to the nearest VA facility where the care or services could be provided
and from such VA facility to the beneficiary’s residence.

(2) Payment may be made for travel from a beneficiary’s residence to the nearest non-VA
facility where the care or services could be provided and from such facility to the beneficiary’s
residence if VA determines that it is necessary to obtain the care or services at a non-VA facility.

(3) If a beneficiary’s residence changed while receiving care or services, payment for the
return trip will be for travel to the new residence, except that payment may not exceed the
amount that would be allowed from the facility where the care or services could have been
provided that is nearest to the new residence. NOTE: For example, if during a period of care or
services in Baltimore, a beneficiary changes his or her address from Baltimore to Detroit,
payment for the return trip would be limited to that allowed for traveling to the new residence
from the nearest facility to the new residence in Detroit where the care or services could have
been provided.

(4) Payment may be made for travel from or to a place where the beneficiary is staying (if
the beneficiary is not staying at the beneficiary’s residence) but the payment may not exceed the
amount that would be payable for travel under preceding subparagraph 9c(1) or subparagraph
9c(2), as applicable.

(5) If the beneficiary is in a terminal condition at a VA facility or other facility under VA
auspices and travels to a non-VA medical facility for the purpose of being nearer to his or her
residence, payment may be made for travel to the medical facility receiving the beneficiary for
such purposes.

(6) On a case-by-case basis, payment for travel may be paid for any distance if it is
financially favorable to the government (for example, payment for travel could be allowed to a
more distant nursing home when admission to that nursing home is a prerequisite to qualify for
community assistance that would more than offset the additional travel payment).

(7) Beneficiary travel will not be paid under the following circumstances:

(a) The payment of travel would be counterproductive to the therapy being provided and
such determination is recorded in the patient’s medical records, and the Chief of the Service or a
designee reviewed and approved the determination by signature in the patient’s medical record.

(b) Return travel for a beneficiary receiving an irregular discharge.
(c) For emergency transportation of Veterans for non-SC conditions in non-VA facilities when the payment for transportation is covered by 38 CFR §§ 17.1000 through 17.1008 as authorized by 38 U.S.C. 1725.

10. DEDUCTIBLE PAYMENT REQUIREMENTS AND EXCEPTIONS

a. **Beneficiary Travel Deductible Amounts.** The deductible for beneficiary travel is $3.00 per one-way trip ($6.00 for a round-trip).

   (1) The deductible requirement is subject to a monthly maximum amount of $18.00 or six one-way (three round) trips whichever occurs first.

   (2) Upon reaching $18.00 in deductibles or six one-way (three round) trips whichever occurs first, travel payments made for the balance of that particular month will be free of deductible charges.

b. **Exceptions to the Beneficiary Travel Deductible.** The deductible does not apply when:

   (1) Travel is by way of special mode of transportation;

   (2) Travel is for a scheduled C&P examination;

   (3) Travel is by a non-Veteran;

   (4) Travel is by an attendant;

   (5) Travel is by a donor; or

   (6) The deductible would cause a severe financial hardship as described in subparagraph 10c.

c. **Waiver of the Beneficiary Travel Deductible.** The deductible requirement shall be waived when it would cause the Veteran severe financial hardship. Severe financial hardship is considered if the Veteran:

   (1) Is in receipt of a VA pension; or

   (2) Has an income for the year immediately preceding the application for beneficiary travel that does not exceed the VA national means test household income threshold; or

   (3) Is able to demonstrate that due to circumstances such as loss of employment, or incurrence of a disability, their income in the year of travel will not exceed the VA national means test household income threshold for that year.

**NOTE:** A Veteran whose income (as determined under 38 U.S.C. § 1503) does not exceed the maximum annual rate of pension that the Veteran would receive under 38 U.S.C. § 1521 (as adjusted under 38 U.S.C.§ 5312) if the Veteran were eligible for pension during that year is eligible for a waiver because the maximum annual rate of pension is below the VA national means test household threshold.
NOTE: The current household income thresholds can be found at the Internet Web site address http://www.va.gov/healtheligibility/Library/pubs/VAIncomeThresholds/VAIncomeThresholds.pdf

d. Waiver Period. A Veteran granted a waiver must promptly inform VA of any household income status change during the waiver period that results in the Veteran no longer meeting the requirements outlined under subparagraph 10c. Waivers are valid:

(1) Through the end of the calendar year in which the application was made; or

(2) Until there is a change in the beneficiary’s household income during the calendar year in which the application was made that results in the beneficiary no longer meeting the requirement outlined under paragraph 10c.

11. PAYMENT OF BENEFICIARY TRAVEL

a. When Payments Are Made. Payments are made on a reimbursement basis after the travel has occurred, with the following exceptions:

(1) Upon completion of examination, treatment, or care, payment may be made before the return travel has occurred; and

(2) In the case of travel by special mode of transportation, VA may provide payment for beneficiary travel to the provider of transportation before determining eligibility of such person for such payment if VA determines the travel is for emergency treatment and the beneficiary or other person made a claim that the beneficiary is eligible for the travel.

b. Recipients of Payments. Payment is usually made to the beneficiary. However, the beneficiary travel payment may be made directly to the person or organization that paid for or provided the travel when satisfactory evidence is presented.

12. CRITERIA FOR APPROVAL

a. Payment for Beneficiary Travel will be approved if:

(1) The travel was made to obtain care or services for a person who is eligible for beneficiary travel under paragraphs 7 and 8;

(2) The travel was in connection with care for which such person was eligible under the laws administered by VA;

(3) Application was made in accordance with paragraph 5; and

(4) All of the requirements of this part for payment are met; or

(5) Any failure to obtain the care or services was due to actions by officials of VA or persons acting on behalf of VA.
b. When a claimant requests payment for beneficiary travel after the provision of care or services and the travel did not include a special mode of transportation, VA will approve round-trip payment only if the travel was:

(1) In connection with care or services that were scheduled with VHA prior to arrival at the VHA-designated facility, or

(2) For emergency treatment.

c. When a claimant requests payment for beneficiary travel for care or services that were not scheduled with VHA prior to arrival at the facility and not emergency treatment and the travel did not include a special mode of transportation, VA will not approve round-trip payment but will approve payment for the return trip if VHA actually provided care or services.

d. Except as provided under paragraph 19, when payment for beneficiary travel is requested for travel that includes a special mode of transportation, VA will approve payment if:

(1) The travel is medically required;

(2) The beneficiary is unable to defray the cost of such transportation; and

(3) A VA clinician approved the travel prior to travel in the special mode of transportation or the travel was undertaken in connection with a medical emergency.

13. FALSE STATEMENTS BY BENEFICIARIES TO OBTAIN PAYMENT FOR TRAVEL EXPENSES

a. Persons who make false statements for the purpose of obtaining payment for travel expenses when making claims for travel are subject to prosecution under applicable laws.

b. VA must take appropriate action to recapture any fraudulent payments under applicable law and VA regulations.

14. APPEALING THE DENIAL OF A BENEFICIARY TRAVEL CLAIM

When a beneficiary travel claim is denied, the claimant must be:

a. Provided written notice of the decision and advised of reconsideration rights under title 38 CFR § 17.133, and

b. Provided with VA Form 4107VHA, Your Rights to Appeal Our Decision (see http://www4.va.gov/vaforms/va/pdf/VA4107VHA.pdf).

15. OTHER CONSIDERATIONS

a. Travel for Research Purposes
(1) In accordance with title 38 CFR § 17.85(b)(3) and 17.102(g), when a research subject is injured while participating in a VA Research and Development Committee-approved research protocol and the VA health care facility where the injury occurred is not capable of providing the required hospital care or medical services for the research-related injuries, transportation may be authorized to transport the research subject to a non-VA health care facility. Such transportation expenses will be charged to the Research appropriation.

(2) The research site (VA health care facility) where the research subject was enrolled, and at which the injury occurred, is responsible for travel expenses related to the injury.

*NOTE:* If it is necessary to transfer a research subject to another VA facility because the research facility cannot provide the required care, travel expenses (in both directions) will be paid from research funds at the facility where the subject was enrolled.

(3) Research participants are not eligible for beneficiary travel transportation solely as it relates to the research project. Such travel may be reimbursed from the research project funds, if appropriate.

b. **Foreign Travel**

(1) Travel performed in foreign countries for the purpose of examination or treatment in a foreign country at VA expense can only be authorized by the Foreign Medical Programs (FMP) or Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA). Both programs are administered by staff at the Health Administration Center (HAC), Denver, CO. For more information on the HAC’s programs see [http://www.va.gov/hac/hacmain.asp](http://www.va.gov/hac/hacmain.asp). *NOTE:* This does not apply when the beneficiaries are in the Republic of the Philippines.

(2) No travel payment is authorized when a Veteran residing in a foreign country travels to the U.S. for authorized examination or treatment at VA expense. *NOTE:* Exceptions are made when a portion of the trip is performed within the borders of the U.S.

c. **Travel for Active Duty Beneficiaries.** Reimbursement for travel of Department of Defense (DOD) beneficiaries, both Active Duty and TRICARE, is the responsibility of DOD. VA only provides transportation to these individuals when there is an agreement that DOD will reimburse VA for such travel.

16. **SPECIAL MODE OF TRANSPORTATION.**

A special mode of transportation can be utilized for beneficiary transportation when:

a. A beneficiary is eligible for Beneficiary Travel as outlined in paragraph 7 and 8 of this Handbook; and

b. A VHA health care clinician determines that this mode of transport is clinically required.

17. **TRAVEL AUTHORIZATION**

Beneficiary travel is authorized in advance in one of the following ways:
a. The beneficiary is scheduled for an outpatient visit in the Veterans Information Systems and Technology Architecture (VistA) and presents for and is seen for the scheduled appointment.

b. The beneficiary is scheduled for admission and is admitted to the VA facility.

18. RECOVERY OF PAYMENT

Payment for Beneficiary Travel made to persons ineligible for such payment are subject to recapture under applicable law, including the provisions of title 38 CFR §§1.900 through 1.953.

19. REIMBURSEMENT OR PRIOR PAYMENT

a. Payment will be made on a reimbursement basis after the travel has occurred, except that:

(1) Upon completion of examination, treatment, or care, payment may be made before the return travel has occurred, and

(2) In the case of travel by a person to or from a VA facility by special mode of transportation, VA may provide payment for beneficiary travel to the provider of the transportation before determining eligibility of such person for such payment if VA determines that the travel is for emergency treatment and the beneficiary or other person made a claim that the beneficiary is eligible for payment for the travel.

b. Payment will be made to the beneficiary, except that VA may make a beneficiary travel payment to a person or organization other than the beneficiary upon satisfactory evidence that the person or organization actually provided or paid for the travel.

20. REDUCED FARES

a. Printed reduced-fare requests for use by eligible beneficiaries and their attendants when traveling at their own expense to or from any VA facility or VA-authorized facility for authorized VA health care are available from any VA medical facility.

b. This request form is used to ask transportation providers, such as bus companies, for a reduced fare. Whether to grant a reduced fare is determined by the transportation provider and not VA.