



PER DIEM, TRAVEL AND TRANSPORTATION ALLOWANCE COMMITTEE

4800 Mark Center Drive, Suite 04J2501

Alexandria, VA 22350-9000

www.defensetravel.dod.mil

PDTATAC/hm

9 December 2015

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: UTD for MAP 124-15(E) – OCONUS Newborn Infant Patient Allowances

1. **SYNOPSIS:** Clarifies newborn infant status as a patient for OCONUS medical travel and transportation allowances. Newborn dependent reimbursement is limited to actual expense NTE the one-half of the applicable daily locality M&IE rate.
2. These changes are scheduled to appear in the JTR, dated 1 February 2016.
3. **This determination is effective when printed in the JTR.**

//approved//

TONIA BOCK

Chief, Strategic Planning and Policy Division

Attachment:

Rev 1

Uniformed E-Mail Distribution:

MAP Members P&R Branch PMO-DTS GSA-3FT GSA-OGP(MTT) DTMO PPC

JTR REVISIONS:

Par. 7105-G

A-F. *****

*G. Lodging and Meals. Eligible dependents may be authorized the following lodging and meals expense per the AO determination IAW Service/DoD agency policy. A dependent is not authorized meal expenses for roundtrip travel that is performed within 12 hours (see par. 4100-B). This includes travel time to/from the medical/dental facility and time at the medical/dental facility for outpatients.

*1. The actual cost of dependent's lodging (including tax (**NOTE**), tips, and service charges) and actual cost of meals (including tax and tips, but excluding alcoholic beverages) may be reimbursed NTE the locality per diem rate for the medical/dental facility location.

*2. A newborn infant is authorized actual expense NTE one-half of the applicable daily locality M&IE rate. The allowances eligibility applies to each infant if multiple dependents are involved. See pars. 3005-I and 7105-E for infant(s) return transportation upon termination of hospitalization/medical/dental termination care.

For example, if the infant's formula and fluids cost for a 10-day TDY post-delivery period is \$50 and the applicable locality per diem M&IE rate is \$46; infant(s) daily limitation is \$23. The average daily M&IE incurred was \$5; therefore, pay the lesser amount of \$50 vice \$218.50 (\$23 @ 8 days (\$184) +\$34.50 (17.25 @ 2) (23 @ .75) first/last days)). The mother who is the member or eligible dependent spouse of a member claims the associated lodging, services charges, tips, transportation, and similar adult determined costs if applicable.

3. The amount paid for lodging and meals may not exceed the maximum amount allowed for lodging and M&IE, respectively, authorized in the medical/ dental facility locality per diem rate.

NOTE: The locality per diem lodging ceiling in CONUS and in a non-foreign OCONUS area (App A1) does not include lodging tax. Lodging tax in CONUS and in a non-foreign OCONUS area is a reimbursable expense (App G). The locality per diem lodging ceiling in a foreign area (App A1) includes lodging tax. Lodging tax in a foreign OCONUS area is not a reimbursable expense.

H-M. *****

The following pages are the same policy preceding this page but showing tracked changes.



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