

**Cuyahoga County Division of Children and Family Services
(CCDCFS)
Policy Statement**

Policy Chapter: Fiscal
Policy Number: 11.02.04
Policy Name: Employee Travel Reimbursement

Original Effective Date: 09/01/2012
Revision Date(s): 05/01/2015
Current Revision Date(s): 06/01/2019
Approved By: Cynthia G. Weiskittel

PURPOSE: To establish guidelines for reimbursement to Division of Children and Family Services (DCFS) employees for business-related travel.

SCOPE: This policy applies to all DCFS employees required to travel in the course of their duties.

POLICY

- I. The Fiscal Office reimburses employees on non-County Executive approved and County Executive approved travel.
- II. Employees shall be reimbursed for the travel expenses that are reasonable. Travel expenses are all expenses incurred by the traveler to get to, return from their destination, and those necessary and appropriate during the travel period. This includes, but is not limited to, airfare, lodging, registration fees, ground transportation, mileage, communication, parking, tolls, meals, etc.
- III. "Employees covered by collective bargaining agreements or State/Federal regulations/Union employees" are required to follow the policies, procedures and guidelines as outlined in their union contracts/agreements. Any area NOT specifically identified in the union agreement/contract will default to this agency and/or County travel policy for requirements and procedures.
- IV. Travel authorization is required for all out-of-state travel and must be received at least 30 days prior to the date of the trip. Travelers must complete the request and submit it to the Procurement department for processing at least 3 weeks prior to departure. If an employee is unable to receive advance authorization due to an emergency, then the employee shall complete and obtain authorization immediately following the trip. The employee shall include the reason for the emergency in the travel authorization.
- V. All travel reimbursement forms must be submitted on/before 9:00 AM on the 4th business day in the month following the month of travel. Travel

reimbursements submitted after the deadline will be processed the following month. Expense reports shall be submitted within 30 days after completion of travel. All travel reimbursements submitted after 60 days of travel completion may be denied.

PROCEDURES

- I. DCFS employees shall calculate, record and submit the expense(s) incurred related to the performance of their job duties as indicated below.

A. Mileage

- 1.) All bargaining and non-bargaining employees are reimbursed at the [current federal IRS mileage reimbursement rate](#) per mile traveled. DCFS mileage is defined as the totals shown on the driving directions website map (Yahoo! Maps/Google Maps/MapQuest / etc.) rounded to 1 decimal. If the second decimal is 4 or less, round down and/or if the second decimal is 5 or more round up. **Employees must use the route that takes the least amount of time to get to their destination.**
- 2.) Employees are reimbursed for accrued mileage that is reasonable.
 - a.) Reasonable is defined as the number of miles using the **quickest route** of travel from one location to another. Employees must enter an explanation on their expense report on the description line next to the mileage for that trip if they are unable to use the quickest route.
 - b.) Various online (driving directions) maps provide the shortest distance routes from one location to another (Yahoo! Maps/Google Maps/MapQuest /etc.).
 - c.) Employees use the odometer reading at the start and finish of each trip to maintain a record/log and verify the reading.
- 3.) Employees traveling to an alternate worksite (not their main worksite) are reimbursed for mileage in **excess** of that which would have been incurred during their normal commute. (*see Attachment A*).
 - a) Employees enter the actual departure and destination locations in the report.
 - b) Only when an employee travels from their residence past the general area of their main worksite to another location will they list their main worksite as the departure or destination location.
 - c) Employees are required to deduct the miles from their normal commute (from home to work or work to home) when traveling to and from another location at the start or end of a workday.
- 4.) Employees are required to enter their **commute miles** from home to their main worksite in the remarks field on their mileage report.

B. Parking

- 1.) Employees who are not required to own/use their own vehicle as part of their job description paying “monthly” parking rates with in/out privileges:
 - a.) Shall not be reimbursed for the cost of the monthly parking pass.
 - b.) Shall be reimbursed for any travel expense actually incurred (mileage and/or parking) over the cost of the monthly parking pass when receipt(s) are produced.
- 2.) Employees who are not required to own/use their own vehicle as part of their job description who pay a daily parking rate and do not have in/out privileges
 - a.) Shall not be reimbursed for the initial cost of parking for the day.
 - b.) Shall be reimbursed for any additional parking expense actually incurred when receipt(s) are produced.
- 3.) All employees who park in unattended lots with drop boxes and/or at parking meters
 - a.) Are not reimbursed for any parking costs.
 - b.) Shall seek secured parking nearby where a receipt can be provided.
 - c.) Exception: When the **court** parking machine is not operable and does not print a receipt, employees must use one of the following two options:
 1. Take a picture of receipt, prior to putting it in the machine to exit.
 2. Email Meighan Hayden mhayden@cuyahogacounty.us or contact her at (216) 443-7007 and request a handwritten receipt for the date and time you were at court. *(see Attachment B).*

C. Meals

- 1.) Employees shall be reimbursed for meals purchased outside of Cuyahoga County for each full day of approved travel;

Non-Bargaining Employees receive a maximum of \$50 per day in regular-price locations and \$60 per day in premium-price locations *(see Attachment C).*

Bargaining staff receive a maximum reimbursement for a full day of out of county **(in state)** travel of \$30. The \$30 breakout is (Breakfast \$6/Lunch \$7/Dinner \$17). When a bargaining employee travels **out of state** they are entitled to the same meal rate as for non-bargaining staff (see above),

- a.) Employees must provide original detailed receipts. Summary credit card receipts are not accepted as they are not always

itemized. Gratuities are included in the maximum daily meal allowances and/or individual meal maximums. If an employee opts to use room service while traveling, the cost of room service will be included in the daily meal allowance.

- b.) When the duty related travel does not constitute a full day, the per-day maximum shall be reduced. The individual breakout rates are listed below by meal type, price locations and authorized times.

Meal Type	Regular Price Locations	Premium Price Locations	Authorized times when price rates apply
Breakfast	\$9.00	\$12.00	12:01 a.m. thru 8:00 a.m.
Lunch	\$13.00	\$16.00	8:01 a.m. thru 6:00 p.m.
Dinner	\$28.00	\$32.00	6:01 p.m. thru 12:00 a.m.
Total	\$50.00	\$60.00	

D. Lodging

1. Duty Related lodging for overnight stays shall be paid by DCFS when necessary and approved.
 - a. Bargaining employees shall contact the DCFS Procurement Department before submitting a travel authorization. DCFS Procurement staff process all hotel arrangements and payments prior to travel. Employee hotel selection is contingent upon Management and Procurement approval.
 - b. Non-Bargaining employees are reimbursed for approved lodging.
 - c. Employees shall seek hotel accommodations that are safe, offer a good value not exceeding the lowest available room rate, and meet business needs.
 - d. Employees requesting lodging for the night before a visit or duty-related activity must provide an explanation as to why the lodging is necessary and secure approval from a Senior Manager or higher prior to completing a travel authorization.
 - e. Employees are responsible for any additional hotel services expenses.

II. Employee Completes the Employee Travel Expense Report Monthly

- A. Upon completion of the report, the employee attaches all expense receipts that are eligible for reimbursement. All receipts must be taped securely on a sheet of paper and copied (clear and legible). The employee must clearly write or type their name on the top of each receipt sheet. Employees shall not staple original receipts to expense sheets. Employees shall submit both the original receipts and copied expense sheet with the expense report.

- B. Supervisors must review staff travel reports and focus on the following:
1. Ensure mileage calculations on report are accurate and net of commute when traveling to or from home to alternate worksites.
 2. Review and recalculate unusual, out of state travel, or large entries, and compare to the employee's schedule.
 3. Ensure meal reimbursements (based on employee locations and time) and other travel expense claims are in accordance with the County and DCFS travel policy.
 4. Authorize and approve all out of state travel timely
 5. Ensure all receipts and attachments are accounted for
 6. Indicate review by checkmark or initials
- C. The immediate supervisor or designee shall review and sign employee expense reports upon approval. The supervisor or designee prints their name in the designated area on the 1st page or top sheet only for each individual month reviewed.
- D. Employee submits Employee Expense Reports to Payment Processing in the bin located outside Jane Edna Hunter Building Room 344-E in the appropriate hanging folder for their assigned senior manager.
- III. Upon Director approval, all other duty-related travel expenses, such as airfare and registration fees require initial contact at least 30 days prior to the trip with the Procurement Department to secure and schedule all travel services with contracted vendors. Registration fee payment method is determined by the Procurement Department and Division Management. Travelers shall use this information to complete a travel authorization request. See Cuyahoga County Travel Policy for more details [Cuyahoga County Travel Policy \(eff. 4/2018\) / MyHr](#)
- IV. Payment Processing shall confirm supervisor approval of reports and reconcile receipts to entries. Payment Processing submits all processed Employee Travel Reports to the County Fiscal Office.
- A. The County Fiscal Office mails employee travel reimbursement checks to the employee's last known home address. Employees receive the checks no later than 21 business days from the submission deadline date.

SEE ALSO:

[Attachments A, B, C](#)
[Exhibit I - Sample of completed Travel Expense Report](#)
[Cuyahoga County Travel Policy \(eff. 4/2018\) / MyHr](#)

TRAVEL POLICY CLARIFICATION

Costs associated with coming to work

Example 1

1. The employee lives at 123 Easy St. The distance between 123 Easy St. and their work site (JEH, in our example), using the most direct route, is **10** miles.
2. The employee leaves their home and goes immediately to a client's home. The client lives at 5816 Park Avenue. The distance between 123 Easy St. and the client's home (5816 Park Avenue, in our example), using the most direct route, is **6** miles.
3. The employee is not entitled to a reimbursement for this trip.
- **06** miles (actual trip) is shorter than the **10** miles (mileage associated with coming to/from work) so no reimbursement would be given.

Example 2

1. The employee lives at 123 Easy St. The distance between 123 Easy St. and their work site (JEH, in our example), using the most direct route, is **10** miles.
2. The employee leaves their home and goes immediately to a client's home. The client lives at 4976 High Life Road. The distance between 123 Easy St. and the client's home (4976 High Life Road, in our example), using the most direct route, is **17** miles.
3. The employee is entitled to a reimbursement of **7 miles** for this trip.
- 17 miles (actual trip) minus 10 miles (mileage associated with coming to/from work)

Cost associated with going home from work

Example 1

1. The employee lives at 123 Easy St. The distance between 123 Easy St. and their work site (JEH, in our example), using the most direct route, is **10** miles.
2. The employee leaves their last client's house of the day at 516 High St. and goes home to 123 Easy St. The distance from 516 High St. to 123 Easy St., using the most direct route, is **15** miles.
3. The employee is entitled to a reimbursement of **5** miles
- 15 miles (actual trip) minus 10 miles (mileage associated with coming to/from work)

Example 2

1. The employee lives at 123 Easy St. The distance between 123 Easy St. and their work site (JEH, in our example), using the most direct route, is **10** miles.
2. The employees leaves their last client's house of the day at 516 High St. and goes home to 123 Easy St. The distance from 516 High St. to 123 Easy St., using the most direct route, is **8** miles.
3. The employee is not entitled to a reimbursement for this trip.
- **08** miles (actual trip) is shorter than the **10** miles (mileage associated with coming to/from work) so no reimbursement would be given.



Cuyahoga County
Together We Thrive

Department of Public Works

217367

JUVENILE JUSTICE CENTER
PAID PARKING

Amount \$ 2.00
Date April 2, 2019
Name Audrey Deasley
Cashier M. Hayden

Thank you
Please Come Again.

List of Premium Price Locations

State of California

Washington, DC

Chicago, IL

State of Florida

Boston, MA

Las Vegas, NV

State of New York

Philadelphia, PA

State of Texas

State of Arizona

New Orleans, LA

Baltimore, MD

Atlanta, GA



Travel Expense Report

Expense #	150405	SubObject Code	0305	Index Code	CF135467	User Code	H00130
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Soc Sec # [REDACTED]

A

Employee Name: AUDREY BEASLEY
 Title: CHIEF
 Remarks: WORK COMMUTE MILES ONE WAY 14.3

Department: FISCAL SERVICES-ADMINISTRATION
 Headquarters: JANE EDNA HUNTER
 Chief Name: AUDREY BEASLEY

B

Date	Type Desc	Point Of Departure	Point Of Destination	Miles	Amount	Itemization
03/19/2019	MEALS				\$13.00	LUNCH
03/19/2019	MILEAGE	177 MAIN STREET, PAINSEVILLE, 44077	JANE EDNA HUNTER	32.00		MILES FROM REGIONAL MTG TO JEH
03/19/2019	MILEAGE	JANE EDNA HUNER	24480 UPPINGHAM RD, BEDFORD HTS, 44146	22.00		MILES TO CLIENT HOME / NMDR - DUE TO ACCIDENT DETOUR

C

- A = Social Security #'s are no longer shown on printed copy but is still needed to complete your report.
- B = Must include your commute miles in this section of the report
- C = NMDR represents (Not Most Direct Route) and reason must be shown when needed
- D = Ensure printed name is completed before submitting report

Report Totals :	Miles	Mileage \$	Other \$	Total \$
	54.00	\$31.32	\$13.00	\$44.32

Traveler's Certificate

I certify that the statements made hereon are true, that the mileage listed was actually driven on County business, and that the expenses incurred were in accordance with state and county regulations. I also certify that I have liability insurance as required in ORC 4509.51

AUDREY BEASLEY
 Employee's Printed Name

[REDACTED]
 Employee's Signature

[REDACTED]
 Supervisor's Printed Name (first page only)

[REDACTED]
 Supervisor's Signature

D