

# Request for Travel Costs



Complete this form to claim for travel costs to treatment or rehabilitation, then send it to your Client Service Staff Member or PO Box 952, Hamilton.

**IMPORTANT INFORMATION:** Before you complete this form, please read the information sheet on the other side to find out what help you may be eligible for. We can only contribute to your expenses if you have provided all the details requested. Please also attach a **computer generated** bank deposit slip (pre-printed with your name), or a letter from your bank that gives your bank account number.

**CLIENT DETAILS**

This form was completed on:

Full name:	Claim number: Date of injury (DOI):
Residential address:	Date of birth:  Phone No:
Postal address (if different from above):	

**TRAVEL TO TREATMENT/REHABILITATION DETAILS**

	Date of travel	Travel from	Reason for travel	Destination - insert your treatment or rehabilitation provider's stamp ( <i>with name &amp; address</i> ) and ask for their signature	Total kms travelled	Fare	(Office Use) Service Code / PO #
1					km	\$	
2					km	\$	
3					km	\$	
4					km	\$	
5					km	\$	
6					km	\$	
Attach tickets or receipts for any travel by scheduled public transport, or other non-private transport <b>Total</b>					km	\$	

**DECLARATION** THIS DECLARATION MUST BE SIGNED FOR ACC TO CONSIDER YOUR REQUEST

Client's declaration (please read and sign)	Representative's declaration (please sign if client is under 16 or can't sign because of injury)	(Office use only)
<p>I declare that the information on this form is correct and that I have not withheld any information likely to affect this request for reimbursement of travel costs.</p> <p>I authorise any service provider to release information to ACC so that ACC can make a decision on whether to reimburse these costs.</p> <p>Signature:</p> <p>Date:</p>	<p>Representative's name:</p> <p>Relationship to client:</p> <p>Reason why client can't sign form:</p> <p>I declare that, to the best of my knowledge, the information on this form is correct, and I have the client's authority to sign this form.</p> <p>Signature:</p> <p>Date:</p>	<p>Entry by:</p> <p>Approved by:</p> <p>Date:</p>

The information collected on this form will only be used to fulfil the requirements of the Accident Compensation Act 2001. In the collection, use and storage of information, ACC will at all times comply with the obligations of the Privacy Act 1993 and the Health Information Privacy Code 1994.

# All about travel to treatment or rehabilitation



If you have to travel a long way for medical treatment or rehabilitation, or have high travel costs, we may be able to help you pay. The following information tells you whether you qualify and how to apply.

## When can we help?

We can help pay your travel costs when you travel by the shortest most practical route to:

- treatment, rehabilitation assessment or reassessment, counselling, your job
- obtain or have an aid or appliance fitted, eg artificial limb
- training for independence programmes
- ACC approved inpatient, residential, or outpatient rehabilitation programmes, or ACC agreed vocational rehabilitation services, courses or programmes.

We can help pay for you to get to your nearest place of treatment or rehabilitation, via the shortest most practical route, if your claim is accepted and you meet one of the conditions in the table below:

If...	you travel...
within 14 days of your injury	more than 20 kilometres (one way per trip), or
within any calendar month	more than 80 kilometres, or
If...	you spend...
within any calendar month	more than \$46 on bus, train or ferry, or
within any calendar month	more than \$46 on other transport, eg taxis, hire-cars or shuttles (prior approval is needed)

## How much can ACC pay towards my transport costs?

- If you meet the conditions above we'll pay your full bus, train, or ferry fare.
- If you return to where you started from we'll also pay your return fare.
- If you use a private vehicle we'll pay 29 cents per kilometre (GST incl).

## Will ACC pay if I need someone to travel with me?

We can help pay the travel costs for someone to travel with you, if you qualify for travel costs and:

- you're under 18 years, or
- your medical condition requires that you travel with an escort, or
- the transport provider requires you to have an escort.

If you share private transport we'll pay the private transport rate for one person only.

## We're happy to answer your questions.

If you'd like to know more about travel costs please call your Client Service Staff Member directly or 0800 101 996.

## Will ACC pay for my accommodation?

If transport isn't available to get you home after your treatment or rehabilitation session, we can contribute up to \$57.55 (GST incl) a night towards your accommodation costs.

## Will ACC pay for a support person to visit me during rehabilitation?

If you're under 18 and receiving ACC approved inpatient or residential rehabilitation:

- we can help pay your support person's travel costs if they travel more than 80 kilometres, or spend more than \$46 on bus, train or ferry fares or other transport costs, within any calendar month.

If you're 18 years or over and the presence of your support person will help you to achieve your rehabilitation outcomes:

- we can help pay your support person's travel costs if they travel more than 80 kilometres one way in a single trip to visit you. (We will only pay for one visit, and up to two nights' accommodation, per week.)

## Do I need prior approval before ACC can pay?

You need prior approval if you want us to help pay for some travel-related costs. Please talk to us first if you want us to help pay for any of the following:

- travel by taxi, shuttle, hire car, or water taxi
  - travel by air transport - if your injury prevents you from travelling by other means, or if it is the most cost-effective way of getting you to the nearest place of rehabilitation
  - accommodation or another person's travel
- To request prior approval call us on 0800 101 996.

## How do I claim for my costs?

- Fill in the *Request for Transport Costs form (ACC250)* on the back of this information sheet.
- Ask each rehabilitation provider you visit to sign it.
- Send the signed form to us with your tickets or receipts.

We'll try to give you our decision within 21 days. If we're able to contribute to your travel costs we'll pay the money into your bank account.

If we can't contribute the District Health Board may be able to. Please contact us on 0800 101 996 to discuss.