Medical Transportation Assistance Program (MTAP)

The Medical Transportation Assistance Program (MTAP) provides financial assistance to beneficiaries of the Medical Care Plan (MCP) who incur substantial out-of-pocket travel costs to access specialized insured medical services which are not available in their immediate area of residence and / or within the Province.

MCP beneficiaries required to travel for specialized insured medical services may be eligible to apply for financial assistance under MTAP for airfare (and related eligible taxi fares); private vehicle usage; purchased registered accommodations (and related meal allowance); busing and use of ferries based on program criteria (deductibles may apply).

Claims must be submitted to:
Medical Transportation Assistance Program
Department of Health and Community Services
Government of Newfoundland and Labrador
P.O. Box 8700 St. John’s, NL
A1B 4J6

For more information about the Medical Transportation Assistance Program, call 1-877-475-2412

Medical Transportation Assistance for Income Support Clients

Medical transportation assistance for Income Support clients had previously been provided under a separate program operated by the Department of Advanced Education, Skills and Labour. In 2018, administration of that program was transferred to the Department of Health and Community Services. Income Support recipients who are required to travel to receive health care services should contact HCS at 1-833-729-6106 for further information.

Direct Deposit is Now Mandatory

The Government of Newfoundland and Labrador is phasing out provincial government cheques. As a result, all Medical Transportation Assistance Program applicants are now required to complete and submit a Direct Deposit Form. Applicants who have not completed the direct deposit form will be requested to do so prior to receiving assistance from the program. Additional information on the government's Direct Deposit / Electronic Funds Transfer initiative can be found at http://www.fin.gov.nl.ca/fin/eftdd.html.

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What is MTAP?

What expenses can be claimed?

MCP beneficiaries required to travel for specialized insured medical services may be eligible to apply for financial assistance under MTAP for airfare (and related eligible taxi fares); private vehicle usage; purchased registered accommodations (and related meal allowance); busing and use of ferries based on program criteria (deductibles may apply).

How do I know if I am eligible?

Those who need to travel in order to access specialized insured medical services not available in their immediate area of residency may be eligible to make a claim. These specialized medical services include: visits to a specialist; treatments such as chemotherapy, dialysis and radiation; and investigations such as nuclear medicine tests, MRI and PET scans. In-province travel requires the referral of a physician. Out-of-province (within Canada) medical travel requires the referral of a Newfoundland and Labrador specialist physician. A copy of the medical referral must be attached to the application. If your in-province specialist physician obtains prior approval for out-of-country treatment from the Medical Care Plan (MCP) you may be eligible for travel assistance. MTAP does not assist with out-of-province travel expenses incurred to access specialized insured medical services or medical opinions when patient care is available in the province.

How MTAP Works

Patients are required to pay their medical travel costs upfront and make application for cost-sharing of allowable expenses to the department. Official documents for allowable expenses must be submitted along with the appropriate completed application form. If a patient requires follow-up treatment and additional medical travel is required, the department may request an applicant to seek prior approval for the follow-up travel assistance. Allowable expenses are assessed based on travel dates in relation to medical appointments / service date(s). Personal care items, utilities, and long distance telephone calls are not eligible expenses. Patients may be eligible for partial pre-payment of economy airfare.
Partial Pre-Payment of Economy Airfare Component

How to Apply

The patient and the referring physician must complete this application in full. Incomplete applications will be returned to the patient.

Applicants are encouraged to apply to MTAP at least two months prior to the confirmed scheduled appointment/consultation date(s).

Medical Referrals

In-province medical travel requires the referral of a physician.

Out-of-province (within Canada) medical travel requires the referral of a Newfoundland & Labrador specialist physician. A copy of the medical referral to the medical consultant within Canada is required and must accompany this application.

Out-of-country medical travel may be eligible for travel assistance if your in-province specialist physician has obtained prior approval for out-of-country treatment from the Medical Care Plan (MCP).

Approvals

Out-of-country medical travel may be eligible for travel assistance if your in-province specialist physician has obtained prior approval for out-of-country treatment from the Medical Care Plan (MCP).

The escort is required to travel from/to the same location (airport) as the patient.

Booking the Travel

The patient will be provided with appropriate contact information of the travel agency partnering with the Medical Transportation Assistance Program in order to book the required medical travel.

At the time of booking the patient will be required to make payment as instructed by MTAP staff, toward the cost of the economy airfare. The remaining amount will be paid by the MTAP.

Rescheduled/Cancelled Travel

If travel has to be rescheduled the patient must notify MTAP staff of the reason and the new travel date(s).

The patient will be responsible to pay any extra charges as a result of rescheduling. The charges can then be submitted for assessment with the post-medical travel claim.

The patient will be responsible for repayment of any monies paid by MTAP when the patient cancels the pre-approved medical travel.

Post-Travel Assessment

Once all approved medical travel has concluded the patient must complete a Claim for Airfare and Purchased Registered Accommodations form and submit it, along with the travel itinerary and a confirmation of the medical appointment(s), to the Medical Transportation Assistance Program.

Any additional eligible expenses and/or payment(s) received from another source such as a private insurance company will be factored into the post-medical travel assessment.
Deductibles will be applied where applicable.

If the post-medical assessment identifies that an overpayment was made by MTAP due to the pre-payment and/or payments by another source (such as private insurance), the patient will be responsible for reimbursement of that amount.

Private Vehicle Usage Component

Who Qualifies

Beneficiaries of MCP who travel via private vehicle to access medically required specialized insured services, treatments and diagnostic procedures which are not available in their area of residency or which are not available in the province may be eligible for assistance at the prescribed rate.

Confirmation of Specialized Services

All claims for assistance for medical travel via private vehicle require written confirmation from the service provider indicating the date(s) the service(s) was provided and the specialized service(s) received. Specialized services include: consultation with a specialist or sub-specialist, chemotherapy, dialysis, radiation treatment, nuclear medicine, MRI, and PET Scans.

Submission of Claim(s)

Eligible private vehicle medical claims are not to be submitted until the number of claimable kilometres exceeds the minimum number of kilometers required in a 12-month period.

In-province medical travel assistance claims require confirmation from the provider that the specialized insured service was received. A copy of the medical referral from a Newfoundland and Labrador physician may also be required in some cases.

Out-of-province within Canada medical travel requires a copy of the letter of medical referral from the in-province specialist to the medical consultant in the other province.

Out-of-country medical travel may be eligible for assistance if your in-province specialist physician has obtained prior approval for out-of-country treatment from MCP.

Residents who travel by private vehicle to receive medically required specialized insured services that are unavailable within 50 kilometres of their home community may be eligible for financial assistance, at the prescribed rate of 20 cents per kilometre, when their accumulated private vehicle travel exceeds 1,500 kilometres within a 12-month period. Assistance will only be provided for eligible kilometres traveled after the first 1,500.

Kilometres are calculated based on the distance between the community of residency and the community where the specialized insured service is received using the NL Statistics Agency Kilometre Matrix which is available at www.stats.gov.nl.ca/DataTools/RoadDB/Distance.

Kilometres for out-of-province medical travel are calculated using the shortest distance between communities using Google Maps.

Calculations for assistance are based on a 12-month period beginning on the date of the first eligible specialized appointment.

Eligible kilometres for immediate family members who live in the same household may be combined by a single claimant in order to reach the kilometre requirement. Where patients travel together for appointments, only one individual may claim the kilometres travelled.
All kilometres claimed must be recorded on the Claim for Private Vehicle Usage Form. (Attach additional pages if needed).

Patient attendance at the medical appointment must be confirmed by the attending physician, specialist or health care provider.

Signature of all patients 16 years and older is required.

Once a claim is approved, a payment is issued to the claimant.

**Non-Eligible Kilometres**

Local travel or travel within the area where the service is received is not claimable.

Residents who travel via private vehicle to access non-specialized insured services are not eligible for medical travel assistance under the Medical Transportation Assistance Program.

Claims for other expenses such as airfare or purchased registered accommodations must be submitted on the Medical Transportation Assistance Claim for Airfare and Purchased Registered Accommodations Application.

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**Airfare and Purchased Registered Accommodations Component**

**Application Form: Airfare and Purchased Registered Accommodations**

**Deductible/First Dollars**

**Island Residents**

There is a $400 family deductible in a 12 month period (from the date of initial travel. The next $100 of eligible expenses after the $400 deductible are fully reimbursed. Eligible expenses from $500 to $3000 of are cost shared with MTAP at the rate of 50%. Eligible expenses exceeding $3,000 during a 12-month period are cost shared with MTAP providing assistance at the rate of 75%.

**Labrador Residents**

Receive full reimbursement of the first $1,000 of eligible airfare and purchased accommodation expenses in a 12-month period (from the date of the initial travel). Eligible expenses from $1000 to $3000 are cost shared with MTAP at the rate of 50%. Eligible expenses exceeding $3,000 during a 12-month period are cost shared with MTAP providing assistance at the rate of 75%.

**Eligible Expenditures**

**Airfare**

Economy ticket (official ticket receipt, itinerary and boarding passes required).

**Accommodations**

Up to a maximum of $125 per diem (official receipt required) when accommodations are purchased from a registered accommodations provider. Patients medically required to take up temporary residence in another region of the province or another province/territory while receiving specialized medical treatment or awaiting transplantation, can claim up to a maximum of $3,000 (official receipt required) for each period of 31 consecutive days.

The program does not have a provision for claiming for accommodations provided by family/friends.

**Meal Allowance**
When accommodations are purchased from a registered accommodations provider, the following meal allowance provisions apply:

- **In-province** to a maximum of $29 per diem per person
- **Out-of-province** to a maximum of $43 per diem per person

The maximum meal allowance for any 31 day period is $700.

The program does not have a provision for claiming meals when accommodations are provided by family/friends.

Patients cannot claim a meal allowance for in-patient hospital stays.

**Taxis** (when used with air travel)
- Airport to hotel/accommodations and return (official receipts required).
- Hotel/accommodations to hospital and return (official receipts required).

**Scheduled Transportation Services**

Including registered busing/minivan services (official receipts required).

**Submission of Claim(s)**

- Claims must be submitted on a monthly basis for residents who require travel in excess of 31 consecutive days.
- Claims for duration less than 31 days must be submitted within 12 months from the travel date.

Allowable expenses will be assessed based on travel dates in relation to medical appointment/service date(s). Personal care items, utilities, and long distance telephone calls are not eligible expenses.

**Redemption of Reward Points/Miles/Vouchers**

The Medical Transportation Assistance Program assists with out of pocket expenses. MTAP does not compensate for the redemption or purchase of reward points/miles/vouchers for air tickets, claimable expenses and/or purchased registered accommodations. However, any receipts for applicable taxes/fees or charges for the issuance of such services may be submitted to the Program for consideration under the Program’s cost sharing provisions.

**MTAP Program Rules**

**Eligible Travel**

Eligible medical travel must originate from the patient’s Newfoundland and Labrador place of residence.

**Medical Referrals**

Assistance for **in-province** medical travel requires the referral of a Newfoundland and Labrador physician. The referring physician must complete the required information on the applicable application form.

Assistance for **out-of-province (within Canada)** medical travel requires the referral of a Newfoundland & Labrador specialist physician. A copy of the supporting medical referral must be attached to the application. Applications for medical transportation assistance may be subject to approval of departmental medical staff.

Assistance for **out-of-country** medical travel requires a Newfoundland & Labrador specialist physician to obtain prior approval from the Medical Care Plan (MCP) for specialized insured patient care which is not available within the country.

**MTAP is the payer of last resort**

You are required to disclose all sources of travel assistance you receive (including from government sources). Failure to disclose money received from private insurance/other sources for claims submitted to MTAP may result in the recovery of
assistance provided by MTAP.

**Private Insurance/Other Sources of Assistance**

MCP beneficiaries, who have private health insurance benefits, must have their medical travel expenses assessed by the private insurance provider prior to submitting an MTAP application to the department for assessment.

Any monies paid by private insurance must be disclosed in the form of a copy of the private insurance assessment attached to the application form.

**Medical Escorts**

Travel expenses incurred by an escort may be eligible for assistance when an escort is required as recommended by the referring physician. If an escort is required, the escort is expected to share the same accommodations as the medically referred person unless that person is hospitalized. Expenses for medical escort travel must originate from the patient’s home community.

**Registered Purchased Accommodations**

A registered accommodations provider would be a hostel, hotel, motel and/ or a licensed apartment provider such as an apartment building. A maximum of one (1) travel escort may be eligible for assistance.

**Who Qualifies**

MCP beneficiaries who are required to travel to access specialized insured medical services which are not available within their area of residence or within the province may be eligible for assistance with the cost of travel.

- **In-province** when an insured service is not available in the beneficiary’s area of residency;
- **Out-of-province** when specialized insured patient care is not available within the province.
- **Out-of-country** when a Newfoundland and Labrador specialist physician obtains prior approval for out-of-country treatment from the Medical Care Plan (MCP) for specialized insured patient care which is not available within the country.

**Excluded Persons**

- Residents who receive funding for medical travel from Federal or Provincial Departments, Agencies, Boards or Commissions such as the Workplace Health, Safety & Compensation Commission or Regional Health Authorities are not eligible under this program.
- Bone marrow/stem cell and organ donors who receive financial assistance for medical travel through the Eastern Regional Health Authority are not eligible for assistance under this program.

**Non-Eligible Services and Treatments**

Include but are not limited to:

- General practitioner appointments (scheduled or unscheduled);
- Emergency room visits;
- Laboratory services, such as blood and urine collection;
- Routine diagnostic services such as chest x-rays, EKG, etc.;
- Experimental research or clinical trials;
- Private clinics such as physiotherapy; and,
- Services not insured under the Medical Care Plan (MCP).

**Submission of Claim(s)**

Claims must be submitted on a monthly basis for residents who require travel in excess of 31 consecutive days.

Claims for a duration of less than 31 days must be submitted within 12 months from the date of travel.