

**TRAVEL AND EXPENSE REIMBURSEMENT POLICY
WASHINGTON STATE SOCIETY FOR HEALTHCARE ENGINEERING**

1. Purpose

The Board of Directors of WSSHE recognizes that board members and committee chairs of WSSHE may be required to travel or incur other expenses from time to time to conduct chapter business (including participation at WSSHE meetings and functions as required by virtue of chapter office) and to further the mission of our organization. The purpose of this policy is to ensure that (a) adequate cost controls are in place, (b) travel and other expenditures are appropriate, and (c) a uniform and consistent approach exists for the timely reimbursement of authorized expenses. It is the policy of WSSHE to reimburse only reasonable and necessary expenses, which are actually incurred, in conjunction with conduct of official chapter business.

When incurring business expenses, WSSHE expects board members and officers to:

- Seek reimbursement from employer first.
- Exercise discretion and good business judgment with respect to those expenses.
- Be cost conscious and make expenditures as carefully and judiciously as if the individual were spending his or her own funds.
- Report expenses promptly and accurately, backed up by supporting documentation as described in this policy.

2. Reimbursable Travel

The following events qualify for travel expense reimbursement (but only if individual's employer will not cover expense):

- State Board meetings, Annual & Semi-Annual Conferences (Board members, Committee Chairs and invited guests only)
- ASHE annual conference and chapter leadership forum (President and President Elect)
- Other official travel, if specifically approved by the WSSHE Board in advance.

3. Expense Reimbursement Form

All requests for reimbursement shall be made using the WSSHE expense reimbursement form (attached). The completed form shall be submitted promptly upon completion of travel (if travel reimbursement is requested) and must include required receipts. Expense form shall be submitted to the WSSHE secretary/treasurer for approval and processing.

4. Receipts

Receipts are required for all expenditures in excess of \$25, with the exception of mileage.

5. Personal and Spousal Travel Expenses

Personal and spouse travel may be combined with WSSHE related travel; however, reimbursement may not exceed that which would result from non-accompanied travel by the most cost effective means reasonable. Any additional expenses incurred as a result of personal travel, including but not limited to extra hotel nights, additional stopovers, meals or transportation, are the sole responsibility of the individual and will not be reimbursed by WSSHE. Expenses associated with travel of an individual's spouse, family or friends will not be reimbursed by WSSHE.

6. Reimbursable Expenses

Subject to limitations noted here and elsewhere in this policy, the following expenses may be considered reimbursable:

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A. Lodging:

In general, conduct of WSSHE official business does not require overnight lodging, or is held in conjunction with the Annual or Semi Annual WSSHE Conferences, attendance at which is generally reimbursed by employers. For this reason, reimbursement for lodging must be approved by the WSSHE President or Treasurer, in writing, in advance of the event. In the event that lodging reimbursement is approved, rate of reimbursement is limited to the GSA standard lodging rate (www.gsa.gov) or actual expenses, whichever is less. Refer to paragraph 4 for receipt requirements.

B. Transportation:

- Air Travel: In general, conduct of WSSHE official business does not require air transportation. For this reason reimbursement for air travel must be approved by WSSHE President or Treasurer, in writing, in advance of event. In the event that air travel reimbursement is approved, rate of reimbursement is limited to commonly available economy class airfare, with reservations made as well in advance as possible, or actual cost, whichever is less. Refer to paragraph 4 for receipt requirements.
- Airport parking, shuttles, and taxis: If air travel reimbursement is authorized, reasonable airport parking, airport shuttle service, and/or taxi expenses are also reimbursable.
- Personally owned vehicle: Reimbursement for vehicle mileage will be based upon the IRS mileage rates in effect as of the date of travel (refer to www.irs.gov), and upon the distance calculated by Google Maps (most direct route). Copy of Google Maps mileage calculation is required to be submitted with reimbursement claim. To the extent reasonable, car pooling is encouraged and expected.
- Parking and tolls: Reimbursement for reasonable parking and tolls in conjunction with vehicle travel is reimbursable. Refer to paragraph 4 for receipt requirements.
- Ferries and taxis: Reimbursement for cross sound ferries and taxi to and from meeting location is reimbursable. Refer to paragraph 4 for receipt requirements.

C. Meals and incidental expenses (MI&E):

If reimbursement of lodging expenses is approved, MI&E (which includes gratuities) on the days in a travel status are reimbursable. Reimbursement rate is limited to 75% of the federal MI&E rates (refer to www.gsa.gov) on the day of departure and return, and 100% on intervening days, or actual expenses, whichever is less. Refer to paragraph 4 for receipt requirements. Since lodging is rarely an approved expense, reimbursement of meals and incidental expenses will also be rarely approved. Additionally, most of the events related to official business of WSSHE include free meals, significantly reducing necessary expenditures.

7. Exceptions.

Exceptions to this policy must have the prior written approval of the WSSHE President or Treasurer.

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REIMBURSEMENT CLAIM FORM

Name: _____

Event Description: _____

Date and Location of Event: _____

Expenses Claimed:

1. _____ Amount: _____

2. _____ Amount: _____

3. _____ Amount: _____

4. _____ Amount: _____

5. _____ Amount: _____

6. _____ Amount: _____

7. _____ Amount: _____

8. _____ Amount: _____

9. _____ Amount: _____

10. _____ Amount: _____

11. _____ Amount: _____

12. _____ Amount: _____

Total: _____

I certify that the expenses claimed on this report are true and factual, and were expended in accordance with WSSHE Reimbursement Policy.

Signature: _____ Date: _____

Notes:

- *Refer to WSSHE Reimbursement Policy for limitations and requirements*
- *Receipts are required for any expense in excess of \$25, except mileage*
- *For mileage, print and attach trip mileage calculation from Google Maps*