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Policies and Procedures

Title: National Agricultural Statistics Service Gainsharing
Travel Savings Program

Number: 341.4, Version 2 - NASS

Date: August 2, 2011

Originating Office: Travel and Relocation Services Branch
Financial Management Division
Administrative and Financial Management

This Replaces: 341.1- NASS dated August 3, 2000

Distribution: All NASS Employees

This Policy and Procedure provides guidance on the Gainsharing Travel Savings Program for NASS employees. NASS employees may receive a portion of the cost savings on certain travel allowances.

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1. Authority

5 U.S.C. 4501-4507

2. Policy

A. The Government Employees Incentive Awards Act, 5 U.S.C., Paragraph 4501-4507, authorizes an agency to pay a cash award for "efficiency" or "economy". The Gainsharing Travel Savings Program rewards employees who save the Agency money while on official travel. These savings will apply to the use of:

- less expensive lodging and/or
- frequent flyer benefits for the purchase of airline tickets for official travel.

B. The amount of the award for the employee will be 50 percent of the savings on lodging expenses and/or airfare. Taxes will be withheld (Federal, State, local, FICA) on the award amount. The cumulative savings to the Agency must be at least \$200 before the employee is eligible to receive an award. However, awards may be processed prior to reaching the minimum \$200 dollar limit when:

- the employee will transfer or be reassigned to another office; or
- the employee is an infrequent traveler; or
- at the end of a fiscal-year.

C. Employees should not incur additional expenses in transportation or other miscellaneous costs in effort to reduce lodging expenses. Employees who incur additional transportation expenses must have those expenses deducted from their lodging savings. A determination must be made by the approving official that any transportation expenses incurred were excessive. Examples of excess transportation costs include, but are not limited to:

- renting a vehicle (when one would not normally be rented) at a temporary duty (TDY) site to travel to a place of free or reduced lodging;
- driving more miles than would normally be traveled to/from the TDY site to obtain free or reduced lodging, when driving a privately owned vehicle (POV); or
- taxi fare is incurred which would not normally have been incurred to obtain free or reduced lodging.

D. All employees must use, when possible, lodging facilities that meet the requirements of the Hotel and Motel Fire Safety Act of 1990. Hotels in compliance can be found on the Internet at <http://www.usfa.fema.gov/hotel/>.

E. Lodging savings can also be accomplished by room sharing while on official travel. Employees may not be compelled to share a room. However, when this option is elected, the employees involved should arrange separate bills with the lodging facility.

If separate billing is not feasible, the daily rate for each employee is determined by dividing the total lodging costs by the number of employees, and then by the number of nights of lodging to arrive at a daily cost for each employee.

F. The amount of lodging savings must be reduced when excess transportation costs are incurred while staying at lodging more distant from the TDY site.

G. This program is open to any employee of the National Agricultural Statistics Service (NASS); employee participation in this program is optional. Senior Executive Service employees may not participate in this program.

H. Travel covered includes all TDY travel that includes either/or airfare and lodging expenses, foreign and domestic, and the first 30 days of extended TDY travel. Subsequent days of extended TDY that require reduced per diem and are not eligible for this program.

3. Lodging Savings

Employees who participate in the program will receive cash awards for 50 percent of the savings when:

- incurring lodging expenses at a daily rate which is less than the maximum lodging rate for the locality under the “lodging plus” method, or
- staying with relatives or friends while on official travel and avoiding lodging expenses. When lodging with family and friends, half the per diem rate for the locality will be used towards the travel savings award.

Example: Traveler A stays with family and friends in a location with a \$120 General Services Administration (GSA) lodging rate. For the award, the lodging rate will be counted at \$60 per night, making Traveler A eligible for a Travel Savings Award of \$30 per night (50 percent of the allowed lodging rate \$60 times 50 percent).

Exclusions include;

- where lodging was prepaid or prearranged through contractual arrangements with the hotel (however, any savings resulting from shared accommodations under such arrangements does qualify for the travel savings award).
- lodging costs incurred on personal time such as annual leave during official travel or any other type of personal preference travel used in conjunction with official travel.

4. Transportation Savings

Employees who participate in the program will receive cash awards for 50 percent of the savings when obtaining a free coach class ticket with frequent flyer benefits earned on official Government travel or personal travel. Savings will be measured against the Government contract rate in effect at the time of the flight. If there is no contract rate, then the lowest available non-restricted coach fare will be used as the basis for measurement of the savings. It is the employee's responsibility to document the cost of such flights.

5. Summary of Responsibilities

A. Employee

- Complete the REE-27, Travel Savings Form (See Example in Exhibit 1).
- Submit the completed REE-27, Travel Savings Form with a printed copy of the AD-616, Travel Voucher, along with supporting receipts and/or documentation of flight costs to the travel approving official.

B. Travel Approving Official

- Review and sign the REE-27, Travel Savings Form.
- If the cumulative savings is \$200 or more, sign and date the REE-27, Travel Savings Form.
- Prepare and sign the AD-287-2, Recommendation and Approval of Awards (See Example in Exhibit 2).

C. Award Approving Official

- Review and sign the AD-287-2, Recommendation and Approval of Awards.
- Forward the original AD-287-2, Recommendation and Approval of Awards, and the original REE-27, Travel Savings Form, to the Human Resources Division, Performance and Awards Staff, for payroll processing.
- Forward a copy of the REE-27, Travel Savings Form, and AD-287-2, Recommendation and Approval of Awards, to the agency budget office.

6. Glossary of Terms

Frequent Flyer Benefits. Mileage points accumulated using the airlines frequent flyer mileage programs which results in free airline tickets.

Travel Approving Official. A NASS employee delegated to approve travel, who serves as an award recommending individual.

Awards Approving Official. A NASS management official who is one level higher than that of the recommending individual.

MICHELLE D. GARNER
Acting Director
Financial Management Division

TRAVEL SAVINGS FORM

Travel Authorization No.: 0VWXYZ		Division or Location: Budget Office		Agency Code: 22		Approving Official Initials:		Accounting Code: 123456789							
FEMA #: DC1234		1st NIGHT		2nd NIGHT		3rd NIGHT		4th NIGHT		5th NIGHT		6th NIGHT		7th NIGHT	
SAVINGS COMPUTATION:		06/05/2011 Sunday		06/07/2011 Monday		06/08/2011 Tuesday		06/08/2011 Wednesday		06/09/2011 Thursday					
Date and Day		84.00		84.00		84.00		84.00		84.00					
1. Maximum Lodging Rate		64.50		64.50		64.50		64.50		64.50					
2. Minus Actual Cost		6.00		6.00		6.00		6.00		6.00					
3. Minus Excessive Transp.		13.50		13.50		13.50		13.50		13.50					
4. Lodging Savings for Agency		200.00		200.00		200.00		200.00		200.00					
5. Contract Carrier Cost		200.00		200.00		200.00		200.00		200.00					
6. Frequent Flyer Benefits		200.00		200.00		200.00		200.00		200.00					
7. Airfare Savings		213.50		13.50		13.50		13.50		13.50					
8. Total Savings for Agency		213.50		13.50		13.50		13.50		13.50					

Travel Authorization No.: 0ABCDE		Division or Location: Budget Office		Agency Code: 22		Approving Official Initials:		Accounting Code: 123456789							
FEMA #: NY4567		1st NIGHT		2nd NIGHT		3rd NIGHT		4th NIGHT		5th NIGHT		6th NIGHT		7th NIGHT	
SAVINGS COMPUTATION:		06/27/2011 Monday		06/28/2011 Tuesday		06/29/2011 Wednesday									
Date and Day		77.00		77.00		77.00									
1. Maximum Lodging Rate		0.00		0.00		0.00									
2. Minus Actual Cost		30.00		30.00		30.00									
3. Minus Excessive Transp.		47.00		47.00		47.00									
4. Lodging Savings for Agency		200.00		200.00		200.00									
5. Contract Carrier Cost		100.00		100.00		100.00									
6. Frequent Flyer Benefits		100.00		100.00		100.00									
7. Airfare Savings		147.00		47.00		47.00									
8. Total Savings for Agency		147.00		47.00		47.00									

Travel Authorization No.:		Division or Location:		Agency Code:		Approving Official Initials:		Accounting Code:							
FEMA #:		1st NIGHT		2nd NIGHT		3rd NIGHT		4th NIGHT		5th NIGHT		6th NIGHT		7th NIGHT	
SAVINGS COMPUTATION:															
Date and Day															
1. Maximum Lodging Rate															
2. Minus Actual Cost															
3. Minus Excessive Transp.															
4. Lodging Savings for Agency															
5. Contract Carrier Cost															
6. Frequent Flyer Benefits															
7. Airfare Savings															
8. Total Savings for Agency															

SUMMARY DATA		1st TRIP		2nd TRIP		3rd TRIP	
9. Total Lodging Savings		67.50		141.00			
10. Total Airline Savings		200.00		100.00			
11. Total Savings for Agency		267.50		241.00			
12. Award Amount to Employee		133.75		120.50			
SUMMARY TOTAL						254.25	

Employee Name:	Social Security No.:
Jane Doe	***-**-6789
Employee Signature:	Date:
Approval Signature:	Date:

INSTRUCTIONS FOR COMPLETING TRAVEL SAVINGS FORM

Up to three trips may be recorded on each Travel Savings Form. Complete a form when lodging savings or redemption of frequent flyer benefits are realized and submit it with the voucher to the approving official when appropriate. The employee and the approving official will sign and date each REE-27, Travel Savings Form. An AD-287-2 (Exhibit 2) must also be prepared and sent to HRD with a copy to the agency budget office. Office.

All travel savings entered on a form must be for the same fiscal year. If a trip crosses fiscal years, enter the days for each fiscal year on separate forms.

Each form has space for three trips of up to seven days each. If the travel exceeds seven days, use the next "trip section" to enter data. If travel exceeds 21 days, use additional forms and summarize the cost savings on a separate sheet and attach it to the forms. For each trip section:

- Enter the authorization number for each trip reported on the form.
- Enter the FEMA Identification Number for the hotel/motel identified on the Hotel and Motel Fire Safety Act of 1990 National Master List. The list may be accessed through the Internet at www.usfa.fema.gov/hotel/index.htm. Search the list for the property name and the property details will display with the FEMA Identification Number.
- Provide the name of the employee's office, agency code and accounting code in the appropriate boxes.
- Enter the day of the week and date for each night of lodging a savings was realized.

For each numbered line:

- Line 1: Enter the maximum lodging rate for the TDY locality for each night's lodging. In the first example, \$84 was recorded for the maximum lodging amount. The maximum lodging amount may be found at the GSA per diem page (www.gsa.gov/perdiem).
- Line 2: Enter the actual lodging cost for each night's lodging. The first night in the example is \$64.50. The second trip in the example, the employee avoided lodging costs by staying with a friend or relative.
- Line 3: Enter any excessive transportation costs incurred when the lodging is more distant from the TDY site. A determination must be made by the approving official that any transportation expenses incurred were excessive. In the example, \$6.00 was determined to be excessive for each day and was deducted from the savings.
- Line 4: Actual lodging expenses and any excessive transportation expenses are deducted from the maximum lodging rate for each night to arrive at the net lodging savings.
- Line 5: If frequent flyer benefits are being realized, enter the cost of the contract carrier or lowest coach fare available for the airline cost.
- Line 6: Enter frequent flyer benefits redeemed. In the first example, the traveler received a free ticket. In the second example, the traveler received a half-price ticket.
- Line 7: The airfare savings are calculated.
- Line 8: The total savings for is calculated.
- Line 9: Total lodging savings for each trip is recorded.
- Line 10: The dollar amount of frequent flyer benefits saved is recorded.
- Line 11: Total savings cost for is recorded. When this line equals \$200 or more, travelers may apply for an award, unless the exceptions in Section 2B apply.
- Line 12: The amount awarded to the employee is recorded.

Note: The AD-287-2 must be signed by a recommending official and an approving official. The recommending official is that person with delegated authority to approve travel vouchers.

It is the policy of the Department to ensure that consideration for awards is made without regard to race, color, national origin, religion, sex, age, marital status, disability or other nonmerit factors.

U.S. DEPARTMENT OF AGRICULTURE
RECOMMENDATION & APPROVAL OF AWARDS

CASE NO. (Personnel Use Only)

NOTE: For group awards, attach list of group members. Show data in Items 2 - 9, and award amount for each payee.

1. AGENCY NASS (20)	2. NAME OF EMPLOYEE (Last, first, middle initial) Traveler Fred
3. SOCIAL SECURITY NO. 123-45-6789	4. POSITION TITLE *Required*
6. ORGANIZATION AND LOCATION *Required*	5. PAY PLAN-SERIES/GRADE/STEP *Required*
7. PERIOD COVERED FOR AWARD (mm, dd, yy) From: *Required* To: *Required*	8. ACCOUNTING CODE *Required*
9. IF AWARD APPROVED, MAIL CHECK TO: <input type="checkbox"/> SALARY CHECK ADDRESS <input type="checkbox"/> OTHER (Specify address): →	

10. LIST AWARDS OR QSI'S IN THE PAST 52 WEEKS (Specify type of award, amount received, and effective date.)

11. CITATION: SUMMARIZE EMPLOYEE'S CONTRIBUTION IN 25 WORDS OR LESS. (This language will appear on the employee's certificate.)
EMPLOYEE IS BEING RECOGNIZED FOR:

See Attached (A copy of the Travel Savings Form must be attached)

COMPLETE THE APPROPRIATE AWARD SECTION

EXTRA EFFORT AWARD	12. TYPE OF RECOGNITION RECOMMENDED (check one)				
	<input type="checkbox"/> EMPLOYEE SUGGESTION OR INVENTION *	<input type="checkbox"/> EXTRA EFFORT AWARD *	<input type="checkbox"/> SPOT AWARD	<input type="checkbox"/> TIME OFF AWARD **	<input type="checkbox"/> OTHER *
	<input type="checkbox"/> KEEPSAKE AWARD	<input checked="" type="checkbox"/> GAINSHARING AWARD			
* Attach a description of the contribution or patent notification being recognized and the resulting benefits to the Government. ** Attach a description if the contribution exceeds the moderate benefits.					
	13. NO. OF PERSONS	14. TOTAL AWARD (Give dollar amount / hours, or value of item) *Required*	15. TOTAL DOLLAR AMOUNT/HOURS BASED ON: (Check approp. box) →	<input type="checkbox"/> MEASURABLE BENEFITS SCALE	ESTIMATED FIRST YEAR SAVINGS \$
				<input type="checkbox"/> NONMEASURABLE BENEFITS SCALE	VALUE OF BENEFITS APPLICATION
PERFORMANCE BONUS AWARD	16. TYPE OF RECOGNITION RECOMMENDED (check one)				
	<input type="checkbox"/> PERFORMANCE BONUS AWARD *		<input type="checkbox"/> QUALITY STEP INCREASE *		
	Certification: I certify, by my signature in the Recommendation & Approval section below, that the employee's position description and the performance standards for the positions were thoroughly reviewed prior to submission of this recommendation; that the employee's performance is outstanding; and that the performance is characteristic and is expected to continue in the future.				
* Attach a copy of employee's latest performance rating of record. Also, attach a justification statement, if required.					
	17. DATE OF LAST PROMOTION	18. DATE OF LAST WITHIN GRADE INCREASE	19. AMOUNT RECOMMENDED FOR PERFORMANCE BONUS AWARD \$		

RECOMMENDATION AND APPROVAL

20. RECOMMENDING INDIVIDUAL (Signature) *Required*	DATE *Required*	21. REVIEWING OFFICIAL (Signature)	DATE
TITLE:		TITLE:	
22. APPROVING OFFICIAL (Signature & Title) *Required*			DATE *Required*

PERSONNEL USE ONLY

23. AGENCY CODE/POI	24. DATE EFFECTIVE	QUALITY STEP INCREASE: →	25. TO: (Grade & Step)	26. NEW SALARY	27. RATE	28. PAY RATE DETERMINANT CODE
I certify that the proposed action is in compliance with statutory and regulatory requirements			29. PERSONNEL OFFICIAL (Signature & Title)			DATE PROCESSED

*U.S. GPO: 1977-516-741/85276

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Form AD-287-2 (7/94)