



Washington Headquarters Services

**Mass Transportation Benefit Program (MTBP)  
Web Application**

**Applicant User Guide**

October 2014

**Software Release 1.11**

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# 1. Introduction

## 1.1 Overview

The WHS Mass Transportation Benefit Program (MTBP) system is a web based system and is based on the Department of Defense (DoD) form - DD2845. The MTBP system was developed to allow DoD federal employees and military members in the National Capital Region (NCR) the ability to apply for federally subsidized mass transportation benefits using the Web. This user guide is intended for DoD employees who want to enroll, recertify, change or withdraw from the Mass Transportation Benefit Program using the web based system.

## 1.2 Contact

- If the applicant has any questions, please feel free to contact the MTBP Program Office by email at [WHSNCRTransitbenefit@mail.mil](mailto:WHSNCRTransitbenefit@mail.mil) or by phone at 571-256-0962.

## 1.3 System and Program Requirements

- The MTBP web application is PKI-enabled; therefore, it requires a DOD-issued Common Access Card (CAC) for access.
- The MTBP web application requires Internet Explorer 6+; Firefox is not supported at this time.

## 1.4 Other Notables When Using this Guide and the MTBP System

- **Steps** included through-out this guide, will move the reader through the guide and show them how to create and submit their MTBP benefits application when they are using the system for the first time.
- **“Help”** is available throughout the MTBP system by clicking on the **“Help”** button which is located in the upper right hand corner of the MTBP screen.
- When using the MTBP system, please **do not** use the browser **“Back”** or **“Forward”** buttons to move through the system. Use the soft keys on the screen to navigate through the system.
- There is usually a **“Next>”** and **“<Previous”** soft key button on most screens. The **“<Previous”** button will move the applicant to the previous screen and the **“Next>”** button will move the applicant to the next screen. In some cases, depressing the **“Next>”** button will also; validate the applicant’s acceptance of the information on the screen that is displayed. However, when this is the case, it is noted on the screen.
- Sample data provided in this user guide has been randomized to be compliant with Security Operations (SecOps) guidance.

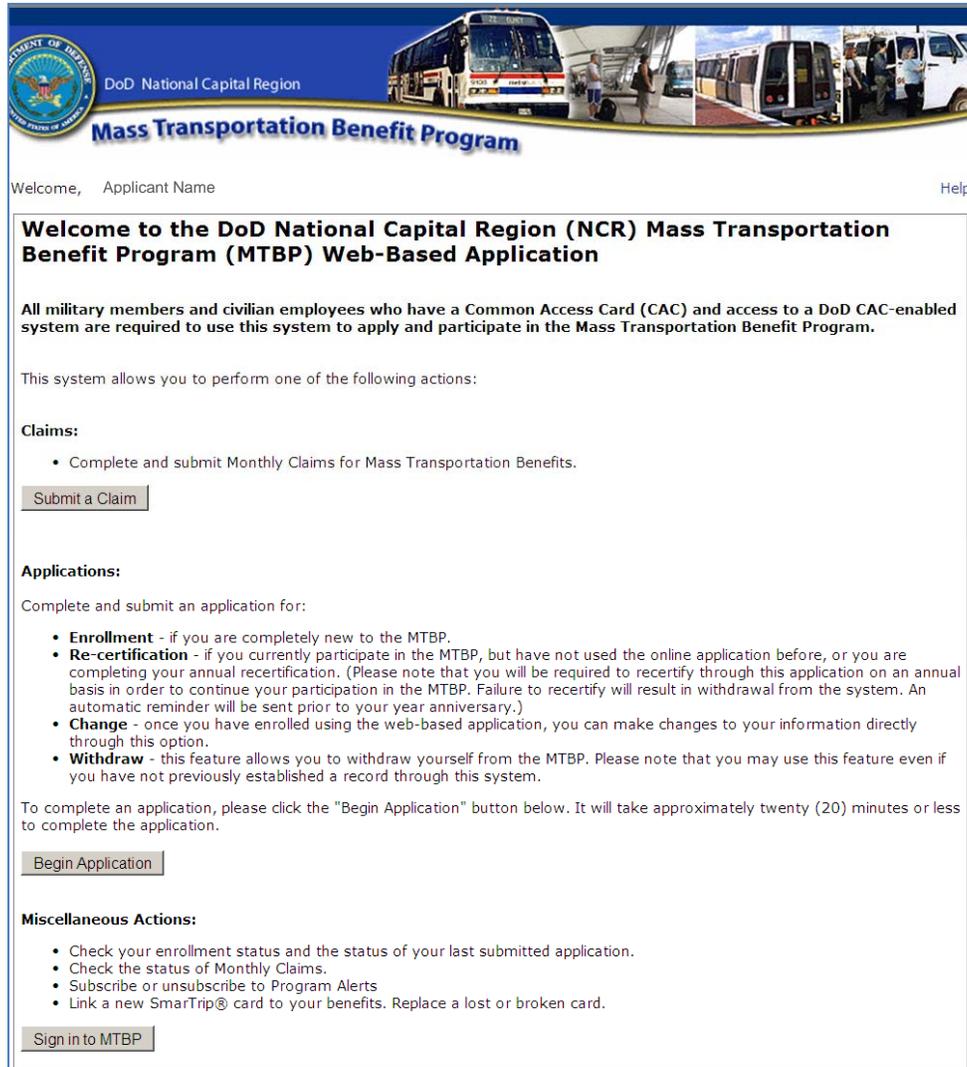
# 2. System Access and Log In

- Any DoD federal employee or military member in the NCR with a Common Access Card (CAC) can access the MTBP system. Open **Internet Explorer** and enter: <https://mtbp.whs.mil/> in the address line. The following MTBP Welcome Page will appear. See first diagram below.

## 2.1 Begin Application

**Step 1:** Access the MTBP Welcome page at <https://mtbp.whs.mil/>. Click on “Begin Application” button.

Header Display.  
 Includes user name, Help and Navigational Buttons.



Click on the “Begin Application” button.

Figure 1 - MTBP Welcome Page

### Application and Benefit Delivery Timeframes

The “Application and Benefit Delivery Timeframes” screen appears after the “MTBP Welcome Page” and before the MTBP application begins. This page displays the list of “Claim Periods” for the current fiscal year and the “Benefit Period” that relates to each “Claim Period.”

**Step 2:**

Read the “Application and Benefit Delivery Timeframes” page.

The screenshot shows the 'Mass Transportation Benefit Program' interface for the DoD National Capital Region. At the top, there is a banner with the program name and a progress bar with 12 steps: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training, Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, and Completion. The 'Eligibility' step is currently active.

Below the progress bar, the user is greeted with 'Welcome, Applicant Name' and navigation links for 'Home' and 'Help'.

The main content area is titled 'Submit Application' and contains the following text:

**Application and Benefit Delivery Timeframes**

Welcome to the MTBP application. In general, timeframes for enrollment application processing and approval can take up to 30 days. Please be aware that the date that application approval occurs will affect when a claim can be submitted and benefits are delivered.

**Monthly Claims**

A monthly electronic claim submission is required in order to receive benefits. The claim period is the 1-15th for the following month's benefit delivery.

<u>Claim Period</u>	<u>Benefit Period</u>
October 1-15	November
November 1-15	December
December 1-15	January
January 1-15	February
February 1-15	March
March 1-15	April
April 1-15	May
May 1-15	June
June 1-15	July
July 1-15	August
August 1-15	September
September 1-15	October

**Participants must submit monthly claims in order to receive benefits for the following month. Failure to submit a monthly claim will result in skipping a month of benefits.**

More information regarding the claims requirement and process can be found at:  
<http://www.whs.mil/DFD/PSD%20Services/ClaimInstructions.cfm>

Examples of application processing/claim submission and benefit delivery:

**Application approved between 1-15th** -- If your application is approved by your organizational Reviewing Official between the 1-15 of May, you will be able to submit your claim for June before or on May 15th. Claims are not accepted after the 15th. Your first benefit delivery will be on the first of June.

**Application approved between 16th - last day** -- If your application is approved by your organizational Reviewing Official between the 16th - last day of May, you will be able to submit your claim for July before or on the 1-15 of June. Claims are not accepted after the 15th. Your first benefit delivery will be on the first of July.

At the bottom of the content area, there is a 'Next >' button.

**Figure 2 – Claim and Benefit Period for Current Fiscal Year**

Click the “Next>” button to move to the next page.

---

### Banner/Header

At the top of the MTBP screens, below the MTBP title banner, the graphic shows the steps in the application process. Please see display below. The orange dot denotes the current step in the process. As each step is completed, the line will turn solid blue and the circle will become clear. The “current” step circle will always be orange in color.



Figure 3 - MTBP Page Header Steps

### Eligibility Page

The “Eligibility” screen appears after the MTBP application begins.

#### Step 3:

Read the “**Eligibility**” page (see below), then

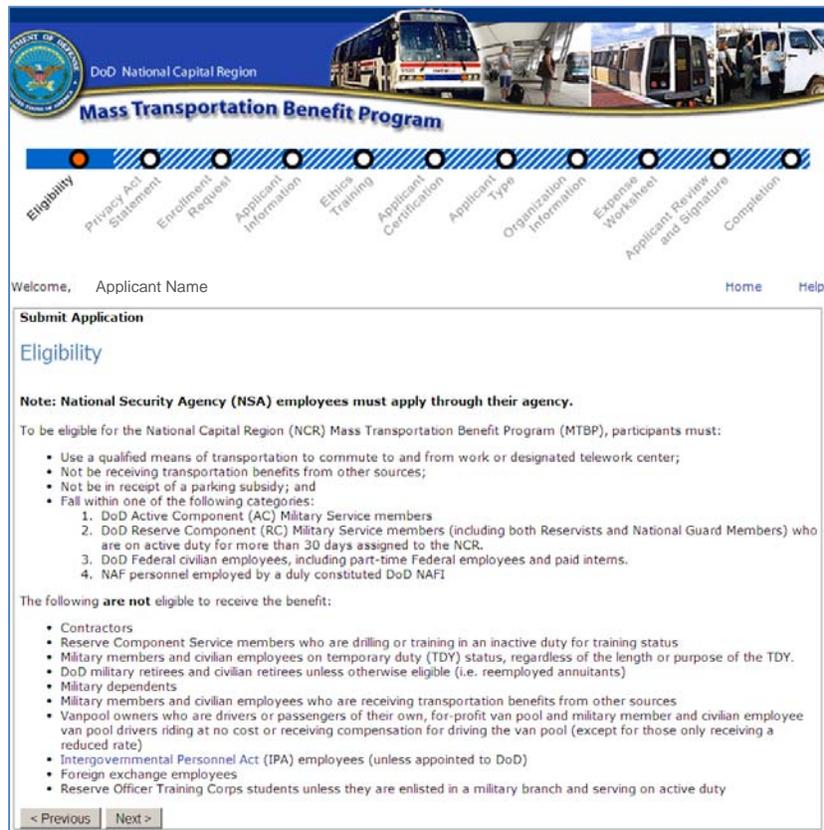


Figure 4 - Eligibility Page

## Privacy Act Statement

### Step 4:

The “Privacy Act Statement” screen displays, read it and then click on the “Next>” button.

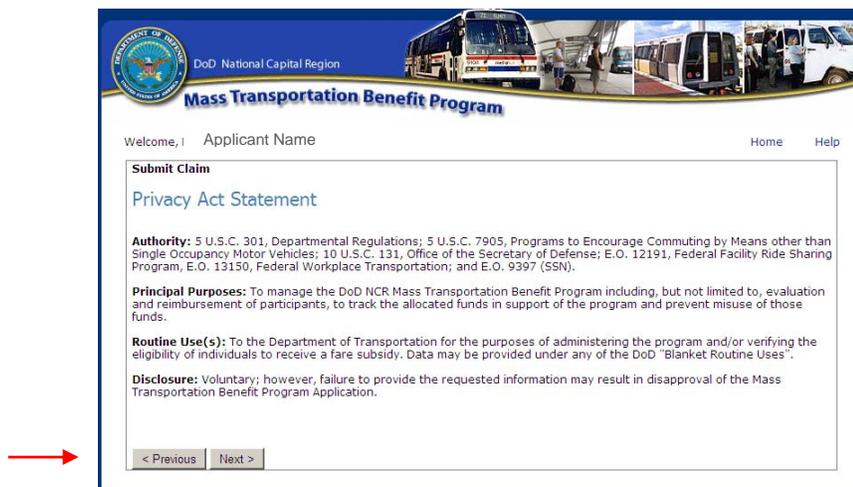
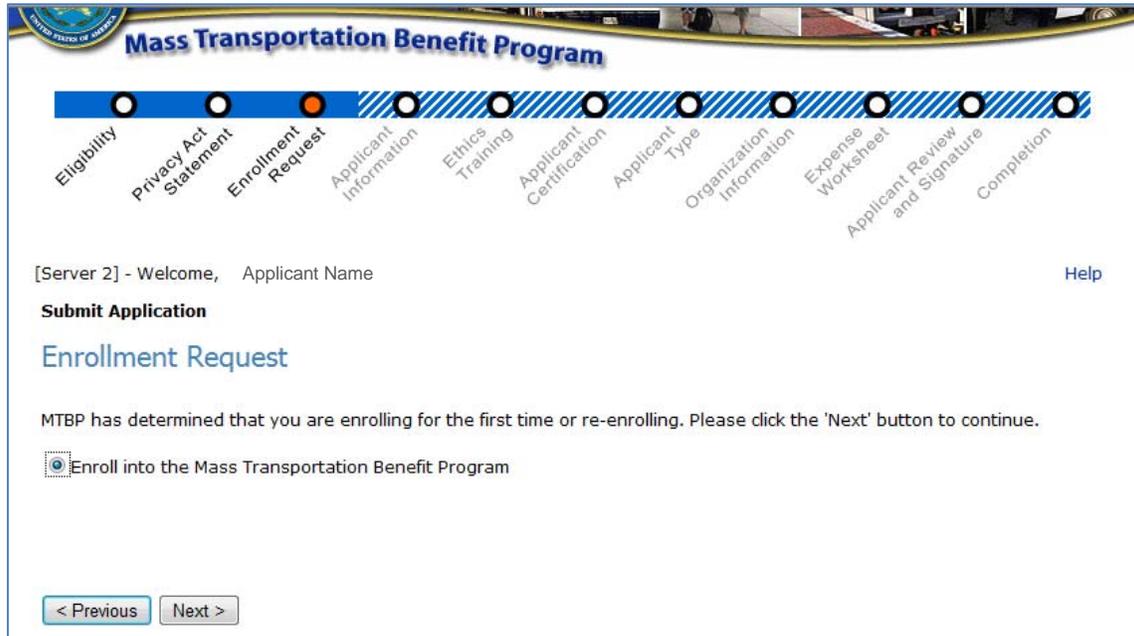


Figure 5 - Privacy Act Statement

**Action Request/Application Type**

**Step 5:**

As part of the application process, the “Enrollment Request” screen will display. If this is the first time the applicant is submitting an application, the “Enroll into the Mass Transportation Benefit Program” option displays and by default the option is selected. See example below.



**Figure 6 - Enrollment Request**

Then click on “**Next >**” to continue.

If the applicant is currently enrolled in the system and the applicant wants to make a change to their application, when they start another application, they will be presented with the “Change” or “Withdraw” options.

If the user selects, “Making a change”, they need to enter a reason for “Making a change.” See the following screen display.

- **Withdrawing?** - Choose “**Withdraw**” to withdraw yourself from the MTB Program. See the section on **Withdrawing Application**.
- **Recertify** - Please note that the applicant will be required to recertify on an annual basis in order to continue participation in the Mass Transportation Benefit Program. Recertifying on an annual basis requires the applicant to review and accept the certification statements and resubmit their application in addition to making any updates regarding their current commuting status. Failure to annually recertify will result in automatic withdrawal from the system. An email reminder will be sent prior to the applicants one (1) year anniversary date alerting them to recertify within the system.

When the program participant is within the sixty (60) day window of their recertify deadline and they go into the MTBP system to submit an application; the application options available to them will be “**Recertify**” and “**Withdraw**”. The “**Change**” option will not display because the program participant can submit changes and recertify at the same time within the same application.

**Step 5 continues :**

**Application/Applicant Information**

After the applicant selects “**Next**” on the “**Enrollment Request**” screen, the “**Applicant Information**” screen displays. The MTBP system uses the first and last name from the applicant’s CAC (Common Access Card) to pre-populate the applicant’s name on the screen. The system uses the last four (4) digits of your social security number to check the Pentagon Force Protection Agency (PFPA) Pentagon Parking database to ensure the applicant does not have a parking permit and is eligible to receive mass transit benefits. If the applicant receives federally subsidized parking benefits at other locations, they will not be eligible for this program. Please check with your local command first.

**Step 6:** Enter the “**Last four (4) Digits of your Social Security Number SSN**” and click on the “**Next >**” button on the bottom left of the screen.

DoD National Capital Region  
**Mass Transportation Benefit Program**

Eligibility Privacy Act Statement Enrollment Request **Applicant Information** Ethics Training Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

Help

**Applicant Information**

The last name, first name, and middle initial shown below are obtained from your Common Access Card (CAC). Information provided will be used to verify that you are not named on a federally subsidized parking permit on the Pentagon Reservation. Participants are not permitted to have both parking privileges and the Mass Transportation benefit. Parking at local installations will be checked by Agency/Component Reviewing Officials.

**Last Name:** Last Name  
**First Name:** First Name  
**Middle Initial:** Middle Initial  
**Last 4 Digits of your SSN:** \_\_\_\_\_

< Previous Next >

DD2845

click on **Next>**

**Figure 4 - Applicant Information**

After typing in the “**Last four (4) Social Security Number (SSN),**” click on the “**Next>**” button. The following blank application screen will display. Complete the fields on the screen. All fields are mandatory with the exception of the “**Work Telephone Extension**” field.

DoD National Capital Region  
**Mass Transportation Benefit Program**

Eligibility Privacy Act Statement Enrollment Request **Applicant Information** Ethics Training Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

Welcome, Applicant Name Home Help

**Submit Application**

**Applicant Information (cont.)**

(All fields are required)

**Home:**

**Residence City:**

**State:**

**9-Digit Zip Code:**  [\(click here to look up your ZIP+4 at the USPS website\)](#)

**Work:**

**Duty Station:**  [\(street address/building where you report to work\)](#)

**City:**

**9-Digit Zip Code:**  [\(click here to look up your ZIP+4 at the USPS website\)](#)

**Work Telephone Number:**  [\(enter as ten digits, xxx-xxx-xxxx, include area code\)](#)

**Work Telephone Extension:**  [\(optional\)](#)

**Work Email Address: (Unclass only)**  [\(email address must be a .gov, .mil, .edu, or .org address. If you do not have an e-mail address with a .gov, .mil, .edu, or .org, please use that of your supervisor. Once you are assigned an e-mail address with a .gov, .mil, .edu, or .org, please e-mail transitpass@whs.mil with the new address\)](#)

**Confirm Email Address:**

**Applicant's Supervisor Information:**

Once you complete the application, your information will be forwarded to your supervisor, to the e-mail address you provide below, for his/her review and confirmation. If confirmed, your application will automatically be forwarded to your Agency/Component Reviewing Official for approval. If denied, your application will not be sent forward. You will receive automatic notification of the status of your application as it progresses through the review/approval process.

Please note that if you are on detail outside of the DoD, please list your DoD point-of-contact or your military supervisor.

**Last Name:**

**First Name:**

**Work Telephone Number:**  [\(enter as ten digits, xxx-xxx-xxxx, include area code\)](#)

**Work Telephone Extension:**  [\(optional\)](#)

**Work Email Address: (Unclass only)**  [\(email address must be .gov, .mil, .edu, or .org address\)](#)

**Confirm Email Address:**

Figure 5 - Blank Application Page

**Step 7** – Complete the “Applicant Information” page.

**Department of Defense**  
DoD National Capital Region

**Mass Transportation Benefit Program**

Progress bar: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information (highlighted), Ethics Training, Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, Completion.

Welcome, Applicant Name Home Help

**Submit Application**

**Applicant Information (cont.)**

(All fields are required)

**Home:**

**Residence City:**

**State:**

**9-Digit Zip Code:**  [\(click here to look up your ZIP+4 at the USPS website\)](#)

**Work:**

**Duty Station:**  (street address/building where you report to work)

**City:**

**9-Digit Zip Code:**  [\(click here to look up your ZIP+4 at the USPS website\)](#)

**Work Telephone Number:**  (enter as ten digits, xxx-xxx-xxxx, include area code)

**Work Telephone Extension:**  (optional)

**Work Email Address: (Unclass only)**  (email address must be a .gov, .mil, .edu, or .org address. If you do not have an e-mail address with a .gov, .mil, .edu, or .org, please use that of your supervisor. Once you are assigned an e-mail address with a .gov, .mil, .edu, or .org, please e-mail transitpass@whs.mil with the new address)

**Confirm Email Address:**

**Applicant's Supervisor Information:**

Once you complete the application, your information will be forwarded to your supervisor, to the e-mail address you provide below, for his/her review and confirmation. If confirmed, your application will automatically be forwarded to your Agency/Component Reviewing Official for approval. If denied, your application will not be sent forward. You will receive automatic notification of the status of your application as it progresses through the review/approval process.

Please note that if you are on detail outside of the DoD, please list your DoD point-of-contact or your military supervisor.

**Last Name:**

**First Name:**

**Work Telephone Number:**  (enter as ten digits, xxx-xxx-xxxx, include area code)

**Work Telephone Extension:**  (optional)

**Work Email Address: (Unclass only)**  (email address must be .gov, .mil, .edu, or .org address)

**Confirm Email Address:**

< Previous    Next >

**Figure 6 - Completed Application Information**

## Ethics Training

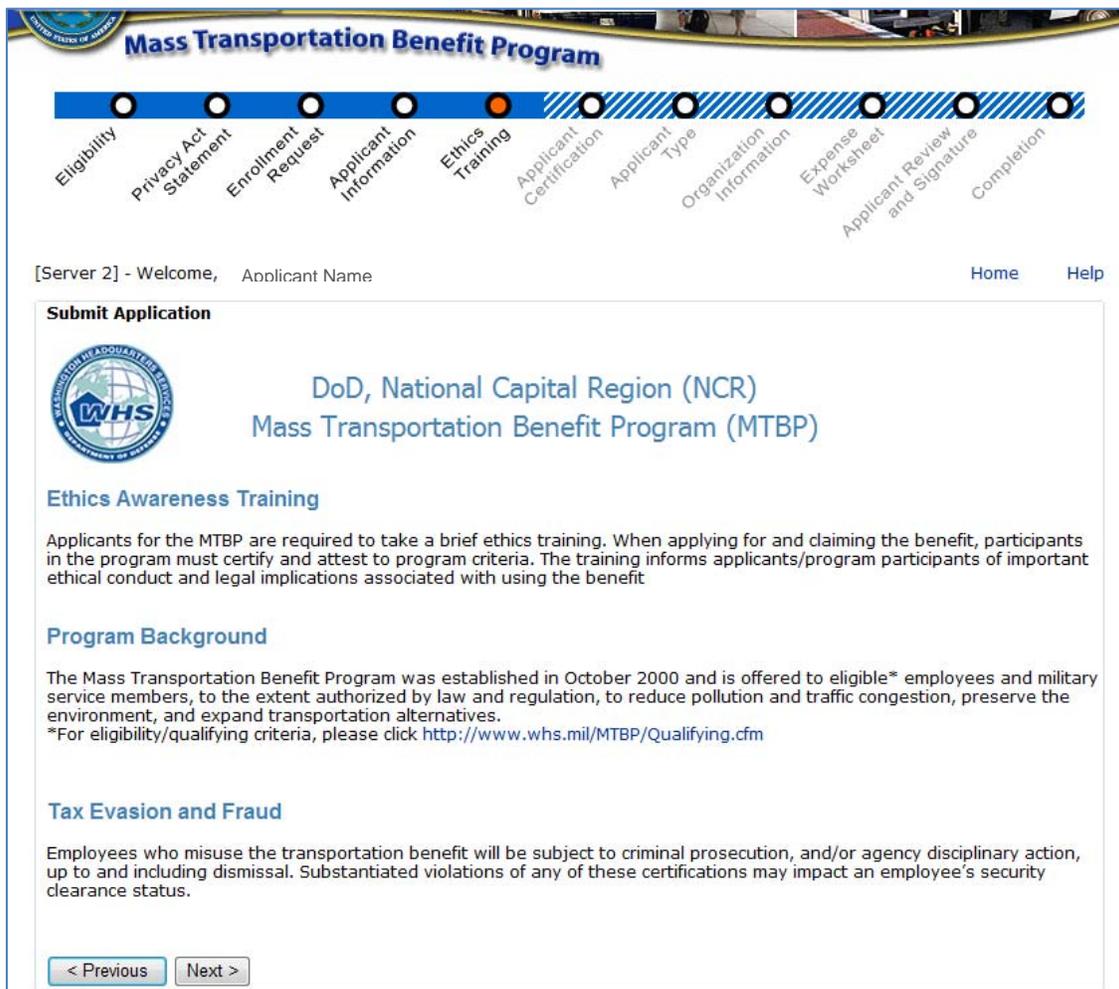
As part of the initial application process, you must read through the Ethics screens and be aware of and accept the information contained therein. All program participants must complete this “**MTBP Ethics Awareness Training**”. The training consists of multiple screens.

Upon enrollment in the MTBP system, you will be required to annually complete this training as part of the recertification process. The system checks if you have not completed the training in the last ten and a half (10.5) months. If you have not, you will be required to complete this training. If you have completed ethics training in the last 10.5 months, the system will skip to the next part of the MTBP application.

The screen shown below is the first screen of the ethics training.

### Step 8:

Read the Ethics Training slides and then click on “**Next**”.



Click on  
“Next>”



**Figure 7 - Ethics Training**

Explanation of “Ethics Training/Certification Statements” and “Descriptions” continue. Read the slide and then click “Next>”.

The screenshot shows the 'Ethics Training' step of the MTBP application process. At the top, there is a banner for the 'Mass Transportation Benefit Program' with the DoD National Capital Region logo and images of public transit vehicles. Below the banner is a progress bar with 12 steps: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training (highlighted), Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, and Completion. The main content area is titled 'Ethics Awareness Training Program Certifications' and includes a section 'What do the certification statements mean?' with a bulleted list of points and four numbered statements with detailed explanations. At the bottom, there are '< Previous' and 'Next >' buttons. The footer contains 'Washington Headquarters Services' and 'Accessibility/Section 508'.

Figure 8 - Ethics Training - Screen 2

Explanation of Ethics Training/Certification Statements continues. Read the slide and then click on “Next>.”

DEPARTMENT OF DEFENSE  
DoD National Capital Region

## Mass Transportation Benefit Program

Eligibility Privacy Act Statement Enrollment Request Applicant Information **Ethics Training** Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

[Server 1] - Welcome, Applicant Name [Home](#) [Help](#)

**Submit Application**

**Ethics Awareness Training Program Certifications (continued)**

**What do the certification statements mean?**

- I will adjust the amount received based upon long term TDY or leave.**  
This means that if you are away for an extended period, in which you are not commuting and incurring costs, that you will not claim benefits. Benefit funds cannot be used to "hold" or "reserve" seats (e.g. on a vanpool) while you are on extended absence.
- Upon separation from DoD, I will return unused fare media to the MTB Office. If I have converted the fare media to another form of media, I will reimburse the DoD by check or money order payable to the U.S. Treasury.**  
This means that you are responsible for returning unused benefits or for providing repayment to the DoD for periods during which you are not eligible to participate.
- I will notify the MTB office of any changes in my status, i.e. home or work address, change in commuting pattern or change in organization even if within the DoD.**  
This means that you are responsible for notifying the MTBP of any changes that affect your home/work address, commuting costs or change in employing organization.
- I will NOT calculate parking costs.**  
This means that you will not include costs incurred for parking when determining your monthly commuting costs. The benefit is intended to solely cover your use of mass transportation.

Washington Headquarters Services Accessibility/Section 508

Figure 9 - Ethics Training - Screen 3

Explanation of “Ethics Training/Certification Statements” and “Descriptions” continues. Read the slide and then click on “Next>.”

DEPARTMENT OF DEFENSE  
UNITED STATES OF AMERICA

DoD National Capital Region

## Mass Transportation Benefit Program

Eligibility Privacy Act Statement Enrollment Request Applicant Information **Ethics Training** Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

[Server 1] - Welcome, Applicant Name [Home](#) [Help](#)

**Submit Application**

**Ethics Awareness Training Program Certifications (continued)**

**What do the certification statements mean?**

**9. I am not a vanpool owner/driver of my own for profit vanpool. If I am a driver and receive a reduced fee, I will adjust my claim for benefits accordingly. If I am a driver and receive compensation, I may not participate in the program.**  
 Vanpool owners who commute in their own (or their own company's) vanpool may not receive the benefit. Furthermore, if you are a driver of a vanpool owned by another person or company and receive full compensation for driving, you may not participate in the program. Finally, if you are a driver of a vanpool owned by another person or company and pay a reduced fee to the vanpool owner, you may not receive more benefit than your actual cost.

**10. The mode of transportation for which I am claiming the mass transportation benefit is a qualified means of transportation.**  
 Qualified means of transportation (QMOT) are commercial or public transportation operated for use by the general public and/or modes of transportation that meet the requirements of section 1.132-9 of title 26 of the Code of Federal Regulations (C.F.R.). For a listing of NCR transit providers, which includes a representative list of QMOTS, please visit <http://www.whs.mil/MTBP/Instructionsforreceivingelectronicfaremedia.cfm>

**11. I certify that I will participate in any reduced fare program based on disability or age and any other special reduced fare programs offered by mass transportation providers, if eligible.**  
 Many transit authorities and/or providers offer reduced fare programs to senior citizens and people with disabilities. Often fares are discounted 50% off the regular fare. Participants who qualify must enroll in the reduced fare program and use the reduced fare pricing when certifying their commuting expenses on the DoD NCR mass transit benefit application. This initiative is intended to save taxpayers money and was the winner of The President's SAVE Award 2012. <http://www.whitehouse.gov/save-award/save-award-2012>

< Previous    Next >

Washington Headquarters Services Accessibility/Section 508

Figure 10 - Ethics Training - Screen 4

Ethics Training “Frequently Asked Questions” and “Answers”. Read the slide and then click on “Next>.” If you have any questions regarding the Ethics slides, you may contact the MTB Program Office with questions.

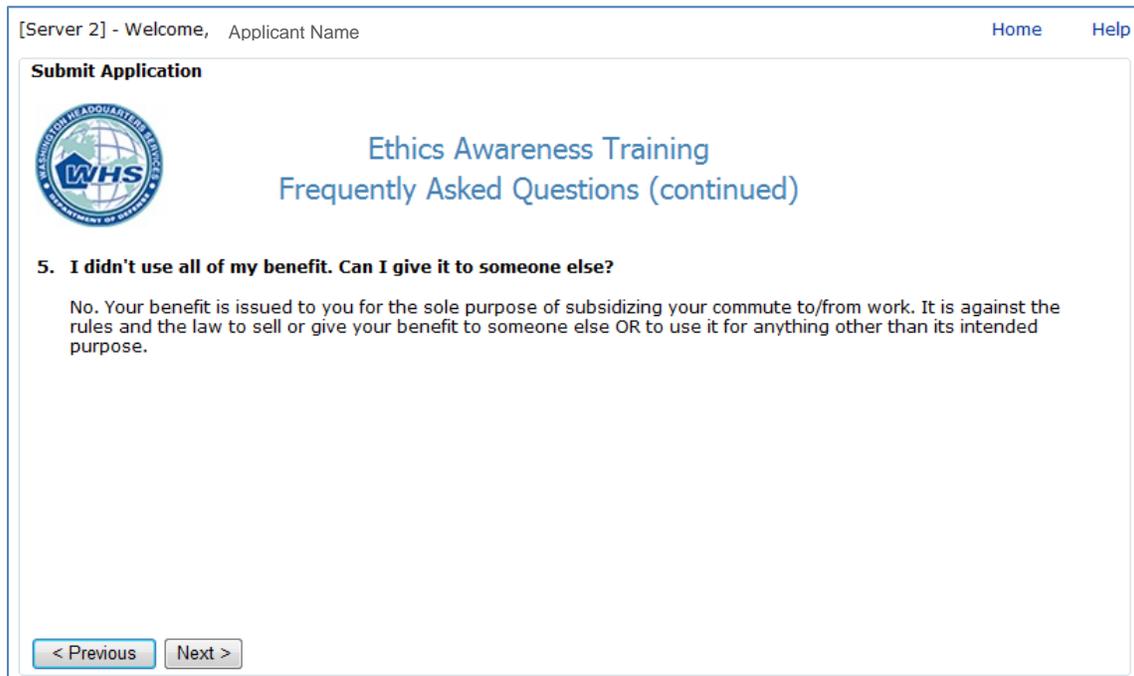
The screenshot displays the 'Mass Transportation Benefit Program' interface for the DoD National Capital Region. At the top, there is a navigation bar with a progress indicator showing steps: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training (highlighted), Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, and Completion. Below the navigation bar, the text reads '[Server 1] - Welcome, Applicant Name' with 'Home' and 'Help' links. A 'Submit Application' button is visible. The main content area features the 'Washington Headquarters Services' logo and the heading 'Ethics Awareness Training Frequently Asked Questions'. Four questions are listed:

- 1. What if my costs are more that the maximum benefit amount?**  
If your costs exceed the maximum allowable benefit, you must supplement additional costs with your own funds. The IRS sets the maximum allowable benefit amount. DoD cannot provide more than is allowable by the IRS code.
- 2. What if my work schedule changes, i.e. I plan to telecommute or participate in an alternate work schedule?**  
If your work schedule changes your commuting costs, you must notify the MTBP of this change. You may use the online application to make this change. Remember that your estimated costs are based on the actual days commuted to and from work.
- 3. I am leaving DoD to take another job and have leftover benefits. What can I do?**  
You must withdraw from the DoD NCR MTBP. Unused benefits will be suspended or will expire. Procedures for withdrawing are listed on the DoD NCR MTBP website.
- 4. I plan to go on extended leave. Can I still receive my benefit?**  
If you are out on extended leave, you are ineligible to receive benefits for the period you will not be commuting to/from work. If you do not submit a claim for 6 consecutive months , you will be withdrawn from the program and required to re-enroll upon your return.

Navigation buttons '< Previous' and 'Next >' are located at the bottom of the content area. The footer contains 'Washington Headquarters Services' on the left and 'Accessibility/Section 508' on the right.

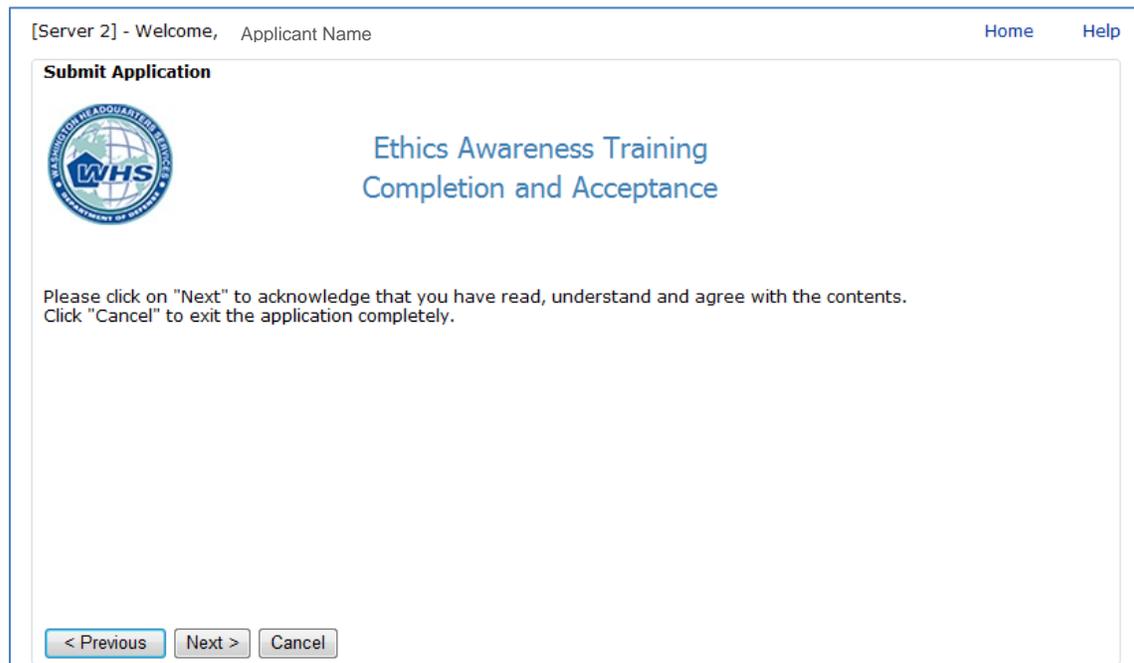
Figure 11 - Ethics Training - Frequently Asked Questions

The “Frequently Asked Questions” continues on the following page.



**Figure 12 - Frequently Asked Questions (continued)**

Read the slide and click on “**Next>**” to see the “Ethics Training Completion and Acceptance” Acknowledgement page.



**Figure 13 - Ethics Training Completion & Acceptance Page**

## Applicant Certification

After completion of the Ethics Training, the “**Applicant Certification**” page displays next with the first certification statement visible.

**Step 9** - Read the certification statement and click on the radio button to confirm that you have read and understand the certification statement. Click on each certification statement radio button, then the next certification statement displays until all of the certifications display. If you have any questions regarding the Certification Statements (CS) and the CS Descriptions and/or the Frequently Asked Questions (FAQ).

**Note:** You are required to recertify for the MTBP annually. Certification includes you reviewing and confirming the MTBP certification statements. If you have not done this in the past 10.5 months, you will be required to re-certify. If you are not a first time user to the system and have completed certification in the last 10.5 months and there are no changes or updates to the actual certification statements, the system will skip to the next step of the MTBP application and bypass the Ethics slides.

**Please Read** the “**Warning**” and “**Mandatory**” statements for Applicant Certification and if you have any questions, contact the MTB Program Office at 571-256-0962. See the screen display below.

[Server 1] - Welcome, [Home](#) [Help](#)

**Submit Application**

### Applicant Certification

**WARNING:** This Certification concerns a matter within the jurisdiction of an agency of the United States and making a false, fictitious, or fraudulent certification may render the maker subject to a criminal prosecution under Title 18, United States Code, Section 1001, Civil Penalty Action, providing for administrative recoveries of up to \$10,000 per violation, agency disciplinary actions up to and including dismissal, and/or administrative or punitive disciplinary action under the Uniform Code of Military Justice (where applicable). Substantiated violations of any of these certifications may impact an employee's security clearance status. Information provided on this form may be audited.

If you are viewing this screen either one of the certification statements has changed or it has been a year since you certified.

**MANDATORY:** Read each statement and check the accompanying box to certify.

I certify that I understand that:

- I am employed by the US Department of Defense and am not named on a Federally subsidized workplace parking permit with DoD or any other Federal Agency. If applicable, I have relinquished my workplace parking permit to the issuing authority.
- My claim for benefits is as a Federal employee or military service member.
- I am eligible for a public transportation fare benefit, will use it only for my daily commute to and from work, will not transfer it to anyone else, and will not allow anyone else to use it.
- The monthly transportation benefit I am claiming does not exceed my estimated monthly commuting costs.
- I will adjust the amount received based upon long term TDY or leave.
- Upon separation from DoD, I will return unused fare media to the MTB Office. If I have converted the fare media to another form of media, I will reimburse the DoD by check or money order payable to the U.S. Treasury.
- I will notify the MTB office of any changes in my status, i.e. home or work address, change in commuting pattern or change in organization even if within the DoD.
- I will NOT calculate parking costs.
- I am not a vanpool owner/driver of my own for profit vanpool. If I am a driver and receive a reduced fee, I will adjust my claim for benefits accordingly. If I am a driver and receive compensation, I may not participate in the program.
- The mode of transportation for which I am claiming the mass transportation benefit is a qualified means of transportation.
- I certify that I will participate in any reduced fare program based on disability or age and any other special reduced fare programs offered by mass transportation providers, if eligible.

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**Figure 14 - Application/Applicant Certification Page**

When you complete reading all certification statements and understand and agree with them, click on the “Next>” button.

### **Applicant Type**

Use the radio button to select the appropriate type that applies to you. Then click on the “Next >” button at the bottom left of the screen to continue.

The **Applicant Types** include:

- Civilian
- Military
- Non-Appropriated Funds (NAF)
- Active Reservist

- Paid Temporary Hire / Intern

If you select the **“Paid Temporary Hire / Intern”** option, complete the **“Start Date”** and **“End Date”** fields. See the following screen.

**Step 10:** Click on the appropriate **“Applicant Type”** and then click on **“Next>”**



**Figure 15 - Applicant Type Screen 1**

Note: Through-out the system, the **“<Previous”** button will return to the previous page.

If anything other than **“Military”** is selected for **“Applicant Type,”** the following screen will display. Use the radio buttons to select the option that applies to you. Then click on the **“Next >”** button at the bottom left of the screen to continue.

**Step 11:** Click on the appropriate applicant type and then click on “Next>” →

**Figure 16 - Applicant Type Screen 2**

**If “Military” is selected on the “Applicant Type” screen, the following screen will display:**

Click on the appropriate applicant type and then click on “Next>” →

**Figure 17 - Applicant Type When Military Selected – Screen 3**

## Organization Information

Click on the down arrow button to display the organization list. Select the organization that employs you. This list is based on your selection(s) on the previous “**Applicant Type**” screens. For example, if you selected Army, you will only be shown Army sub organization codes, etc. The organizational selection also includes the organization’s code. Click on the “**Next >**” button at the bottom left of the screen to continue.

The screenshot shows the 'Organization Information' screen in the MTBP Applicant User Guide. At the top, there is a banner for the 'DoD National Capital Region Mass Transportation Benefit Program'. Below the banner is a progress bar with 11 steps: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training, Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, and Completion. The 'Organization Information' step is highlighted with a blue bar. Below the progress bar, there is a welcome message 'Welcome, Applicant Name' and links for 'Home' and 'Help'. The main content area is titled 'Submit Application' and 'Organization Information'. It includes a section for 'Organization Code' with the instruction 'Indicate the organization that pays your salary.' and a dropdown menu showing 'OSD (Army) - Office of the SecDef (Army)'. At the bottom, there are two buttons: '< Previous' and 'Next >'. A red arrow points to the 'Next >' button.

Figure 18 - Organization Information

**Step 12:** Click on the down arrow and select the sub organization code and then click on the “Next>” button.

When the “Next>” button is clicked, the “Senior Citizens / People with Disabilities Discount – Reduced Fare Eligibility” page will display. This page supports the Presidential Save Award Program whereby if the applicant is eligible, they can participate in a reduced fare program. They will click on the radio button that says, “I am ELIGIBLE to participate in a reduced fare program”. If they are not eligible to participate in a reduced fare program, then they will select, “I am NOT ELIGIBLE to participate in a reduced fare program” button and then click on the Next button.

If the applicant requires more information before making their selection, they can point and click on the “For additional information click here” link. If the applicant still has questions after reading the information displayed at the “For additional information click here” link, they can contact the MTB Program Office at 571-256-0962. See the following example.

The screenshot displays the 'Mass Transportation Benefit Program' application interface. At the top, there is a banner with the Department of Defense logo and the text 'DoD National Capital Region'. Below the banner is a progress bar with 12 steps: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training, Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, and Completion. The 'Expense Worksheet' step is currently active, indicated by a blue hatched background. The main content area is titled 'Submit Application' and 'Reduced Fare Program Eligibility'. It contains a paragraph of instructions, a link for additional information, and two radio button options for eligibility status. At the bottom, there are 'Previous' and 'Next' navigation buttons.

Figure 19 - Reduced Fare Program Eligibility

### Expense Worksheet

The expense worksheet is used to calculate your monthly mass transportation commuting costs. Please read it carefully and enter each mode of transportation you use, detailing: the name of the company, frequency of purchase, cost of purchase, from (starting point/station), and to (ending point/station). First, use the down arrows to pull down lists and entry boxes to enter this information. Then, click on the “Add” button to the right of the expense record. If any information is entered with an incorrect format, or if required fields are blank, a text message is displayed for that field detailing the error. **Note:** Only enter the number of days you commute; **do not** include the days you telecommute in the number of days commuted per month.

**Step 13:**

Read the “Instructions:” for completing the Worksheet. →

Refer to the following pages for examples of links and fields noted on this page. →

**Note: Don’t** include telecommuting days in the Number of Days Commuted Per Month. →  
 Number of Days must be between 1 and 22. →

After all fields are completed, click on “Next>” at bottom. →

### Expense Worksheet

To apply for the MTBP, you are required to calculate your usual monthly mass transportation commuting cost.

Instructions:

- Please list each mode of mass transportation used for your commute. For each listed, provide the information required. [Click here](http://www.dtic.mil/whs/directives/corres/pdf/100027p.pdf) for some examples. Also, please note that you are required to take the most cost-effective means within your mode of transportation per DoDI 1000.27: <http://www.dtic.mil/whs/directives/corres/pdf/100027p.pdf>
- For the number of days commuted, you must factor in alternate work schedules and telework arrangements that affect the number of days you commute per month (i.e. 17, 19, 21, 22). The maximum allowed number of days is 22. [Click here](#) for examples.
- Please note that **parking fees are not allowed** when computing monthly mass transportation costs.
- If you use other modes of transportation, that don't incur reimbursable costs, such as slugging, carpooling, etc, please list those modes with a dollar value of \$0.
- If you are a person with a disability or a senior citizen receiving reduced fare rates, you must calculate the reduced fare rates that you pay.

To assist you in finding your mass transportation service provider, fares, and schedule, please visit the following link: <http://www.whs.mil/MTBP/Links.cfm#TransitLinks>

For help on this screen, [click here](#).

Indicate cost of each leg of commute or weekly/monthly pass.

**Expense Worksheet:**

Do not include days that you telecommute in the **Number of Days Commuted Per Month** field.

**Number of Days Commuted Per Month:**

**Time Reporting to Work:**

**Time Leaving from Work:**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode	Action
Metro Rail		MONTHLY	245.00	Huntington	Pentagon	245.00	<input type="button" value="Edit"/> <input type="button" value="Delete"/>
<input type="text" value="[SELECT]"/>		<input type="text" value="[SELECT]"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="button" value="Add"/>

**Your Monthly Grand Total Mass Transportation Commuting Costs:** 245.00

If necessary, please provide additional information here (i.e. commuting pattern, work schedule, etc):

Vanpool Applicants: Please provide additional information above to validate pricing.  
 1.) Name and contact phone number for the vanpool coordinator  
 2.) Any other identifying information; such as Van #, route name, etc.

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**Figure 20 - Expense Worksheet**

Complete all fields on the Expense Worksheet including “Time Reporting to Work” and “Time Leaving from Work”. If you are a vanpool rider, please add the additional information requested on the screen in the “Comment” box, e.g. “1) Name and contact phone number for the vanpool coordinator” and “2) Any other identifying information; such as Van # (number), route name, etc.” If you have questions regarding what vanpool information is being requested, please contact the MTB Program Office at 571-256-0962.

**Note:** When a program participant has an application in the system and then submits a new application, the system now displays a [SELECT]\* in the Transportation Provider column of the worksheet and prompts the participant to make a selection. To make a selection, the participant clicks on the “Edit” button and then clicks on the down arrow in Transportation Provider column. A list of vendors’ displays and the user can select the appropriate name. For example, in the example below, the user would select “PRTC – OmniRide”. When “Other” is selected in the Transportation Provider column, then “PRTC” will display in the Name of Transportation Company column. After all selections are made for a row, point and click on the “Save” button to save the updates made.

When the “What’s this?” link is clicked, the following message displays on the screen: “The MTBP office will be able to target communications to participants based on their transportation provider. It will also allow for more precise reporting.”

**Expense Worksheet:**

Do not include days that you telecommute in the **Number of Days Commuted Per Month** field.

**Number of Days Commuted Per Month:**

**Time Reporting to Work:**

**Time Leaving from Work:**

**NEW:** Please provide your Transportation Provider information below as indicated by \* . Click the Edit button, select a Transportation Provider, and then click the Save button. [What's this?](#)

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode	Action
[SELECT] *	PRTC	DAILY	5.75	Dale City Commuter Lot	Pentagon	126.50	Edit Delete
[SELECT] *	PRTC	DAILY	5.75	Pentagon	Dale City Commuter Lot	126.50	Edit Delete
[SELECT] v		[SELECT] v	<input type="text"/>	<input type="text"/>	<input type="text"/>		Add

**Your Monthly Grand Total Mass Transportation Commuting Costs:** 253.00

**Figure 21 - Transportation Provider Information**

[Click here](#) for some examples (link) - This link provides other examples for modes of transportation.

*Example 1: If you ride a vanpool both ways*

- Transportation Provider: **Vanpool**
- Name of Transportation Company: **VPSI**
- Frequency of purchase: **Monthly**
- Cost of one-way trip or weekly/monthly pass: **\$225.00** (this is the monthly fare you pay)
- From (Station/Start point): **Woodbridge** (area from which you commute)
- To: (Station/End point): **Pentagon** (this is the duty station at which you work)

**Expense Worksheet:**  
Do not include days that you telecommute in the **Number of Days Commuted Per Month** field.

**Number of Days Commuted Per Month:**

**Time Reporting to Work:**

**Time Leaving from Work:**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode	Action
Vanpool	VPSI	MONTHLY	225.00	Woodbridge	Pentagon	225.00	Edit Delete
[SELECT]		[SELECT]					Add

**Your Monthly Grand Total Mass Transportation Commuting Costs:** 225.00

*Example 2: Combination of Commuter Rail/Rail*

- Transportation Provider: **VRE**
- Frequency of purchase: **Monthly**
- Cost of one-way trip or weekly/monthly pass: **\$234.20** (this is your monthly fare cost)
- From (Station/Start point): **Broad Run** (station from which you commute)
- To: (Station/End point): **L'Enfant Plaza** (station to which you commute)

Click the add button to add another mode of transportation

- Transportation Provider: **Metrorail**
- Frequency of purchase: **Daily**
- Cost of one-way trip or weekly/monthly pass: **\$1.80** (this is your one-way fare cost)
- From (Station/Start point): **L'Enfant Plaza** (station from which you commute in the morning)
- To: (Station/End point): **Pentagon** (duty station/morning commute end point)

Click the add button to add another mode of transportation

- Transportation Provider: **Metrorail**
- Frequency of purchase: **Daily**
- Cost of one-way trip or weekly/monthly pass: **\$1.80** (this is your one-way fare cost)
- From (Station/Start point): **Pentagon** (duty station/evening commute end point)
- To: (Station/End point): **L'Enfant Plaza** (station at which you arrive in the evening)

**Expense Worksheet:**  
Do not include days that you telecommute in the **Number of Days Commuted Per Month** field.

**Number of Days Commuted Per Month:**

**Time Reporting to Work:**

**Time Leaving from Work:**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode	Action
VRE		MONTHLY	234.20	Broad Run	L'Enfant Plaza	234.20	Edit Delete
Metrorail		DAILY	1.80	L'Enfant Plaza	Pentagon	37.80	Edit Delete
Metrorail		DAILY	1.80	Pentagon	L'Enfant Plaza	37.80	Edit Delete
[SELECT]		[SELECT]					Add

**Your Monthly Grand Total Mass Transportation Commuting Costs:** 309.80

Figure 22 - Worksheet Examples – Top Half

*Example 3: Metrorail Riders*

- Transportation Provider: **Metrorail**
- Frequency of purchase: **Daily**
- Cost of one-way trip or weekly/monthly pass: **\$1.80** (this is your one way fare cost)
- From (Station/Start point): **Pentagon City** (station from which you depart in the morning)
- To: (Station/End point): **Gallery Place** (duty station/morning commute end point)

Click the add button to add another mode of transportation

- Transportation Provider: **Metrorail**
- Frequency of purchase: **Daily**
- Cost of one-way trip or weekly/monthly pass: **\$1.80** (this is your one way fare cost)
- From (Station/Start point): **Gallery Place** (duty station/evening commute end point)
- To: (Station/End point): **Pentagon City** (station at which you arrive in the evening)

**Expense Worksheet:**

Do not include days that you telecommute in the **Number of Days Commuted Per Month** field.

**Number of Days Commuted Per Month:**

**Time Reporting to Work:**

**Time Leaving from Work:**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode	Action
Metrorail		DAILY	1.80	Pentagon City	Gallery Place	37.80	Edit Delete
Metrorail		DAILY	1.80	Gallery Place	Pentagon City	37.80	Edit Delete
[SELECT] v		[SELECT] v	<input type="text"/>	<input type="text"/>	<input type="text"/>		Add

**Your Monthly Grand Total Mass Transportation Commuting Costs:** 75.60

Figure 23A - Worksheet Examples - Bottom Half

**DoDI 1000.27:** <http://www.dtic.mil/whs/directives/corres/pdf/100027p.pdf>

This link provides you with the DoD Instruction



Department of Defense  
**INSTRUCTION**

NUMBER 1000.27  
October 28, 2008  
USD(P&R)

---

SUBJECT: Mass Transportation Benefit Program (MTBP)

References: See Enclosure 1

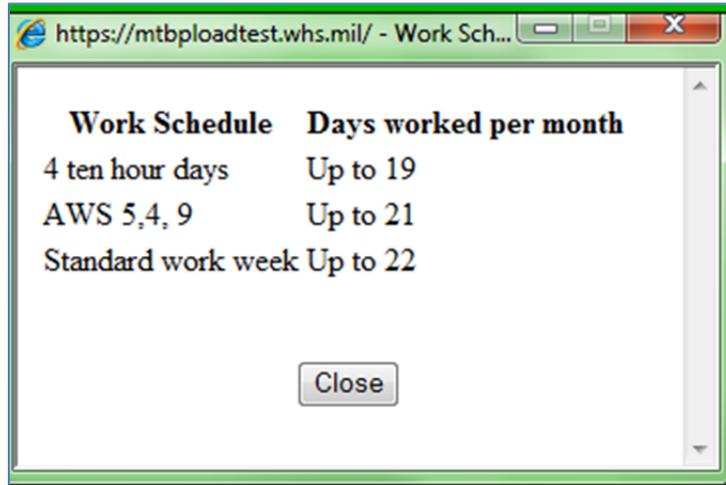
1. PURPOSE. This Instruction:

- a. Establishes policy, assigns responsibilities, and sets procedural guidance consistent with the authority provided in DoD Directive 5124.02 (Reference (a)) for the administration and management of the MTBP as directed by section 7905 of title 5, United States Code (U.S.C.), and Executive Order 13150 (References (b) and (c)).
- b. Incorporates and supersedes previous Deputy Secretary of Defense guidance (Reference (d)).

Figure 24 - DoDI 1000.27

**Alternate Work Schedule Examples**

**Click here** for examples provides a pop-up window with sample work weeks commuted to work based on the schedule that you work and commute. For a “Standard work week”, the system will allow up to twenty-two (22) workdays. See the following example.



**Figure 25 - Work Schedule Examples**

**Transit Links -** This link connects to a Washington Headquarters Services, Mass Transit Benefit Program List of Transit Links page that you can use to obtain your mass transportation benefit costs, for entry on the MTBP Expense Worksheet. See the sample “Transit Links” page displayed below.

The screenshot displays the Washington Headquarters Services (WHS) website. At the top, the logo for the Department of Defense and WHS is visible, along with the text 'DEPARTMENT OF DEFENSE WASHINGTON HEADQUARTERS SERVICES SERVICES THAT MAKE A DIFFERENCE'. A search bar and weather information for Washington, D.C. (67°F) are also present. The main navigation menu includes 'Our Services', 'Our Customers', 'Our People', 'Our Leaders', 'Our Organization', 'CUSTOMERS', and 'EMPLOYEES'. The left sidebar contains a 'MASS TRANSPORTATION BENEFIT PROGRAM' section with links for applying, claiming, allocating, spending, withdrawing, past notices, and contact. Below this is a 'POPULAR RESOURCES' section with icons for Visitor Information, Transportation Options, Careers with WHS, Dining and Retail, and Doing Business with WHS. The main content area is titled 'Qualified Means of Transportation' and lists various transit options, each with a dropdown arrow: Metro Bus / Metro Rail, Amtrak, Arlington Transit (ART), CUE Bus, DASH Bus, DC Circulator, Dillon's Bus, Eyre Bus, Fairfax Connector, Keller Bus, Loudoun Commuter Bus, MARC Train, Martz / National Coach Works, MetroAccess, Metro Bus / Metro Rail, Montgomery County Ride On, OmniRide, Richmond Highway Connector (REX), TheBus, Vanpools, and Virginia Railway Express (VRE). The footer contains contact information for Washington Headquarters Services and various accessibility and privacy links.

Figure 26 - WHS MTBP Transit Links Page

For help on this screen [click here](#) (on Expense Worksheet page)

This link provides you with help text for each of the Expense Worksheet headers. It also tells you the function of each button on the Expense Worksheet.

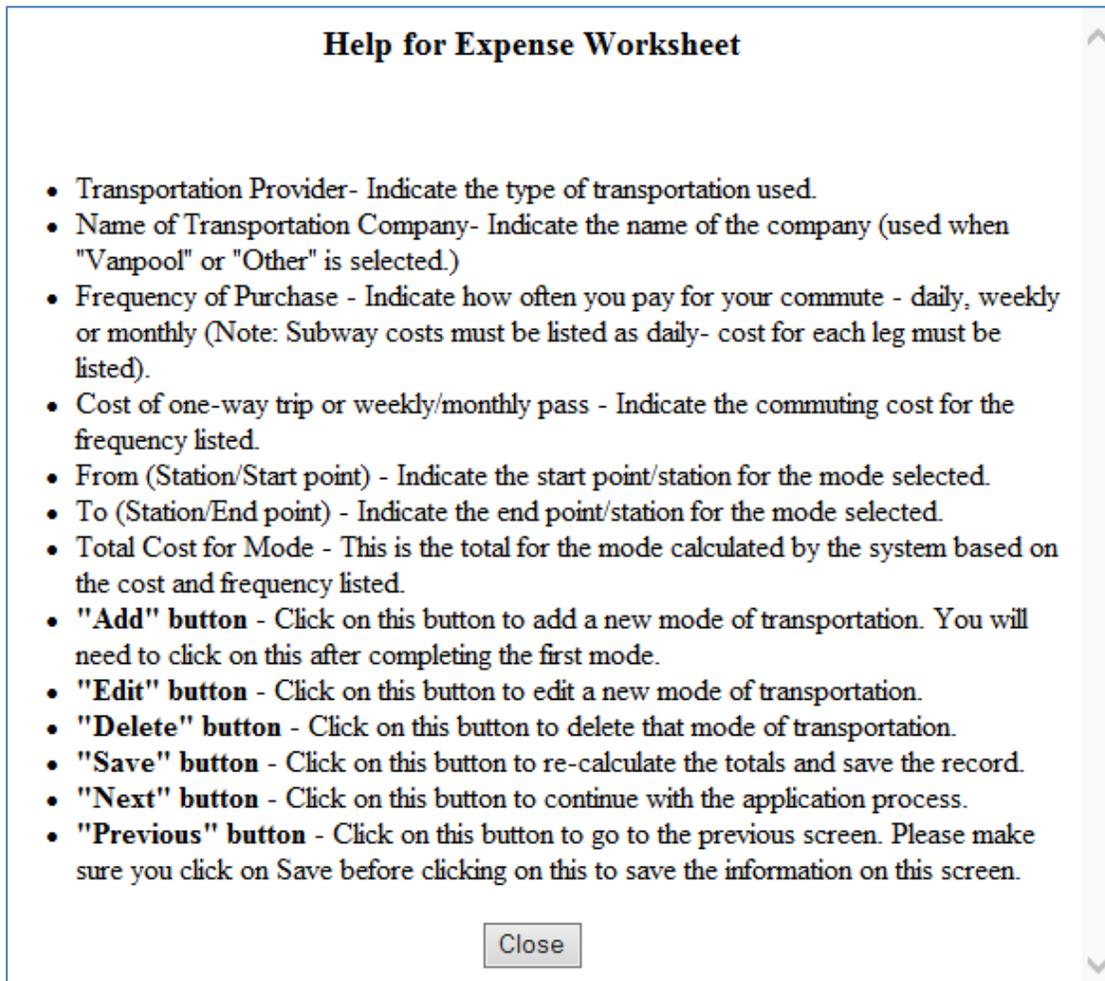


Figure 27 -Help for Expense Worksheet

### Help Button

This “Help” link is located in the upper right hand corner of the screen and provides you access to this MTBP Application User Guide, which is viewable as a PDF file, when you click on this link. It can then be viewed, printed or saved.



Figure 28 - Location of "Help" button on Expense Worksheet

### **Comment Box**

This text/comment box can be used to provide additional expense information, which may be helpful to the application reviewers. You can use this multiline text box to provide additional details or notes on

your commuting expenses, particularly if there is an unusual circumstance which requires additional explanation and or additional vanpool information as requested on the screen below the box.

If necessary, please provide additional information here (i.e. commuting pattern, work schedule, etc):

Vanpool Applicants: Please provide additional information above to validate pricing.  
 1.) Name and contact phone number for the vanpool coordinator  
 2.) Any other identifying information; such as Van #, route name, etc.

**Figure 29 - Worksheet Page Comment Box**

**Transportation Provider**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/ Start point)	To (Station/ End point)	Total Cost for Mode	Action
Metro Rail		MONTHLY	245.00	Huntington	Pentagon	245.00	<input style="margin-right: 5px;" type="button" value=" Edit "/> <input style="margin-right: 5px;" type="button" value=" Delete "/>
[SELECT] ▼		[SELECT] ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input style="width: 30px;" type="button" value=" Add "/>
<b>Your Monthly Grand Total Mass Transportation Commuting Costs:</b>							245.00

**Figure 30 - Mode of Transportation Example**

**Note:** If you select the link for each column header of the expense worksheet, a pop-up window will appear explaining the purpose of the field and applicable entries, as detailed below:

- **Transportation Provider** – Indicates the type of transportation used.
- **Name of Transportation Company** – If Vanpool is selected for Transportation Provider; then the name of the vanpool company would be entered in the Name of Transportation Company field.
- **Frequency of Purchase** – Indicate how often you pay for your commute – daily, weekly or monthly (Note: Metro costs must be listed as daily).
- **Cost of one-way trip or weekly / monthly pass.** – Indicate the commuting cost for the frequency listed.
- **From (Station / Start point)** – Indicate the start point/station for the mode selected.
- **To (Station / End point)** – Indicate the end point/station for the mode selected.
- **Total Cost for Mode** – The total amount for the mode selected.

**After:**

- 1) select the mode of transportation,
- 2) enter the name of the transportation company,
- 3) select the frequency of purchase,
- 4) enter the cost of purchase,
- 5) enter the starting location [From] and
- 6) a different ending location [To],

- 7) click on the “**Add**“ button to the right. This will add a new mode of transportation or add updates. You will need to click on this after completing the first mode. If there are any errors in your entries, a red asterisk (\*) will appear next to the field where there is an entry error and a pop-up window will detail the field errors.

Once you have added a new mode of transportation, the following buttons will appear to the right of the mode of transportation.

- **Delete:** If you want to delete the mode of transportation entered, click on the “**Delete**” button.
- **Edit:** If you want to edit the mode of transportation entered, click on the “**Edit**” button.

**Note:** If you need to change the number of days commuted, you will not need to re-enter the modes of transportation that were added. After changing the number in the field next to “**Number of Days Commuted Per Month,**” click on the “**Save**” button, at the bottom left of the screen. The Total Cost for the Mode will automatically recalculate, as will “**Your Monthly Grand Total Mass Transportation Commuting Costs,**” based on the valued entered.

After completion of the application worksheet, click on “**Save / Next>**” The “**Link SmarTrip Card**” Page will display.

**Mass Transportation Benefit Program**

Progress Bar: Eligibility, Privacy Act Statement, Enrollment Request, Applicant Information, Ethics Training, Applicant Certification, Applicant Type, Organization Information, Expense Worksheet, Applicant Review and Signature, Completion

Welcome, Applicant Name Home Help

**Submit Application**

**Link SmarTrip® Card**

Please link your SmarTrip® card with MTBP by providing the card's serial number below. This step is needed in order to distribute the transit benefits to you. Please ensure that your SmarTrip® card's serial number is accurate. If the serial number is incorrect, then there will be a delay in delivering benefits to you.

**Important Information**

In order to be used for benefits, your SmarTrip card must be registered with WMATA/Metro in your name as displayed below

**NOTE:** If the last name displayed below is longer than 15 characters then use only the first 15 characters (spaces and hyphens included) when registering your card with WMATA.

Last Name: Applicant Last Name  
First Name: Applicant First Name

[Go to the WMATA SmarTrip® site to register your card](#)

After registering your card with WMATA, come back to this page to link your registered card for benefits and complete your application for the Mass Transportation Benefit Program.

**Select the Type of Card**

Please indicate the type of card by matching the serial number on the back of the card with the matching pattern circled in the images below.

Card Type #1:  see return to: WMATA, 600 Fifth Street, N.W. DC, 20001  
SmarTrip® and SmarTripBenefits® logos are trademarks/service marks of WMATA. 012345678 C3DW803  
serial number

Card Type #2:  see return to: WMATA, 600 Fifth Street, N.W. DC, 20001  
SmarTrip® and SmarTripBenefits® logos are trademarks/service marks of WMATA. 012345678 3 C3DW803  
serial number check sum

Card Type #3:  see return to: WMATA, 600 Fifth Street, N.W. DC, 20001  
SmarTrip® and SmarTripBenefits® logos are trademarks/service marks of WMATA. C3DW011 0020 0001 5644 364 0  
serial number

Card Type #4:  see return to: WMATA, 600 Fifth Street, N.W. DC, 20001  
SmarTrip® and SmarTripBenefits® logos are trademarks/service marks of WMATA. GD1137 0167 0693 4564 7992 9601  
serial number

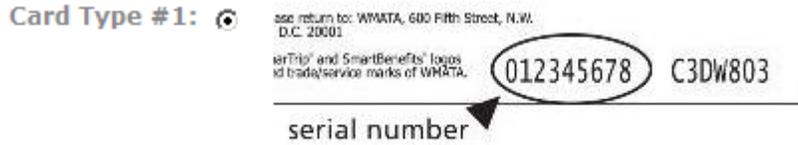
< Previous Next >

Figure 31 - Link SmarTrip Card Page

**Step 14:** The participant selects the “Card Type” by clicking on the appropriate radio button. The bottom of the screen will change to accommodate entry of the “Card Type” selected. See the following examples.

When the participant selects the “Card Type #1”,

**Example 1 – Card Type #1:**



The following fields display at the bottom of the screen:

**Enter the Serial Number**

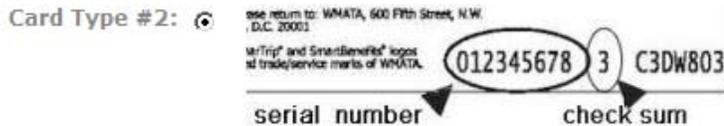
If the SmarTrip® card serial number is less than 9 digits, please add zeros to the front to make it 9 digits. For example, if the card number is "123456", then enter the serial number as "000123456". Likewise, if the card serial number is "12345678" then enter the serial number as "012345678".

Card Serial Number:

Re-enter Card Serial Number:

**Example 2 = Card Type #2:**

When the participant selects the “Card Type #2”



The following fields display at the bottom of the screen:

**Enter the Serial Number**

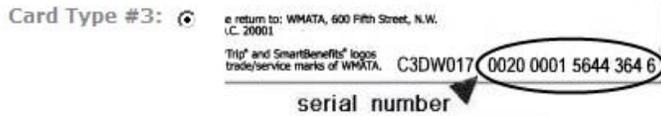
If the SmarTrip® card serial number is less than 9 digits, please add zeros to the front to make it 9 digits. For example, if the card number is "123456", then enter the serial number as "000123456". Likewise, if the card serial number is "12345678" then enter the serial number as "012345678".

Card Serial Number:

Re-enter Card Serial Number:

**Example 3 = Card Type #3:**

When the participant selects the “Card Type #3”



The following fields display at the bottom of the screen:

**Enter the Serial Number**

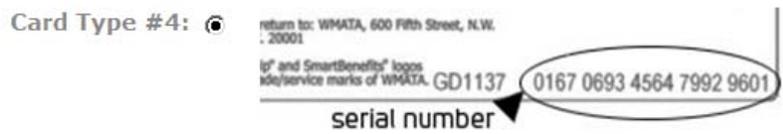
Enter each part of the card serial number in the boxes below.

Card Serial Number:

Re-enter Card Serial Number:

**Example 4 = Card Type #4:**

When the participant selects the “Card Type #4”



The following fields display at the bottom of the screen:

**Enter the Serial Number**

Enter each part of the card serial number in the boxes below.

Card Serial Number:

Re-enter Card Serial Number:

After the participant has made their selection and entered their card number as noted in the examples above, the participant will click on the “Next>” button at the bottom of the screen and the “Applicant Review and Signature” page will display.

**Note:** The system parses out the numbers it needs on all SmarTrip card type numbers with the exception of Card Type #4. Therefore, on the Applicant Review and Signature page, the user may see nine (9) characters of the number they previously entered for their SmarTrip Card number into the SmarTrip Serial Number field.

### Applicant Review and Signature

The purpose of the “**Applicant Review and Signature**” page is to review all MTBP applicant information that you have entered and validate that it is true and correct before submitting the application.

See the following, “**Applicant Review and Signature**” page.

**Submit Application**

## Applicant Review and Signature

---

**Please note, your application has not been submitted.**

Please review your information, and click the **Submit Application** button at the bottom of the page to submit your application for processing. You will be able to print a copy for your records after submission.

---

<b>Applicant:</b>		<b>Supervisor:</b>	
<b>Tracking Number:</b>	73572437	<b>Last Name:</b>	SUPERVISOR LAST NAME
<b>Application Type:</b>	ENROLLMENT	<b>First Name:</b>	SUPERVISOR FIRST NAME
<b>Entry Type:</b>	ENTERED BY APPLICANT	<b>Work Telephone Number:</b>	703-222-3434
<b>Last Name:</b>	SMITH	<b>Work E-Mail Address:</b>	1083228128@tosd.mil
<b>First Name:</b>	MARY		
<b>Middle Initial:</b>	M		
<b>Last 4 Digits of SSN:</b>	1234		
<b>DoD ID:</b>	1290092104		
<b>SmartBenefits® Status:</b>			
<b>SmarTrip® Serial Number:</b> 12345678901234567890			

<b>Home:</b>		<b>Work:</b>	
<b>Residence (City):</b>	CLIFTON	<b>Duty Station:</b>	PENTAGON
<b>State:</b>	VA	<b>City:</b>	ARLINGTON
<b>9-Digit Zip Code:</b>	20124-1234	<b>9-Digit Zip Code:</b>	20111-4321
<b>Days Commuted Monthly:</b>	22	<b>Work Telephone Number:</b>	703-699-1111
<b>Total Monthly Commuting Cost:</b>	245.00	<b>Work E-Mail Address:</b>	1290092104@tosd.mil
<b>Time Reporting to Work:</b>	07:00 AM	<b>Organization:</b>	WHS - WASHINGTON HEADQUARTERS SERVICES
<b>Time Leaving from Work:</b>	05:00 PM	<b>Applicant Type:</b>	CIVILIAN
		<b>Military Member Type:</b>	N/A

**Reduced Fare Program Eligibility**

The applicant indicates that they are eligible to participate in a reduced fare program.

**Expense Worksheet:**

Transportation Provider	Name of Transportation Company	Frequency of Purchase	Cost of one-way trip or weekly/monthly pass	From (Station/Start point)	To (Station/End point)	Total Cost for Mode
Metro Rail		MONTHLY	245.00	Huntington	Pentagon	245.00
<b>Monthly Grand Total Mass Transportation Commuting Costs:</b>						245.00

Figure 32 - Application Review and Signature - Top Half

**Applicant provided the following additional information:**  
N/A

The applicant certifies that:

- I am employed by the US Department of Defense and am not named on a Federally subsidized workplace parking permit with DoD or any other Federal Agency. If applicable, I have relinquished my workplace parking permit to the issuing authority.
- My claim for benefits is as a Federal employee or military service member.
- I am eligible for a public transportation fare benefit, will use it only for my daily commute to and from work, will not transfer it to anyone else, and will not allow anyone else to use it.
- The monthly transportation benefit I am claiming does not exceed my estimated monthly commuting costs.
- I will adjust the amount received based upon long term TDY or leave.
- Upon separation from DoD, I will return unused fare media to the MTB Office. If I have converted the fare media to another form of media, I will reimburse the DoD by check or money order payable to the U.S. Treasury.
- I will notify the MTB office of any changes in my status, i.e. home or work address, change in commuting pattern or change in organization even if within the DoD.
- I will NOT calculate parking costs.
- I am not a vanpool owner/driver of my own for profit vanpool. If I am a driver and receive a reduced fee, I will adjust my claim for benefits accordingly. If I am a driver and receive compensation, I may not participate in the program.
- The mode of transportation for which I am claiming the mass transportation benefit is a qualified means of transportation.
- I certify that I will participate in any reduced fare program based on disability or age and any other special reduced fare programs offered by mass transportation providers, if eligible.

**Application Certification:**  
I certify that the information contained in this application is true and correct. I further acknowledge that any false statements or misrepresentations made by me for the purposes of my certification for this benefit may subject me to criminal, civil, or administrative penalties.

I agree.

**Date Signed: 10/14/2014**

< Previous      Submit Application      Not Accept

Washington Headquarters Services      Accessibility/Section 508

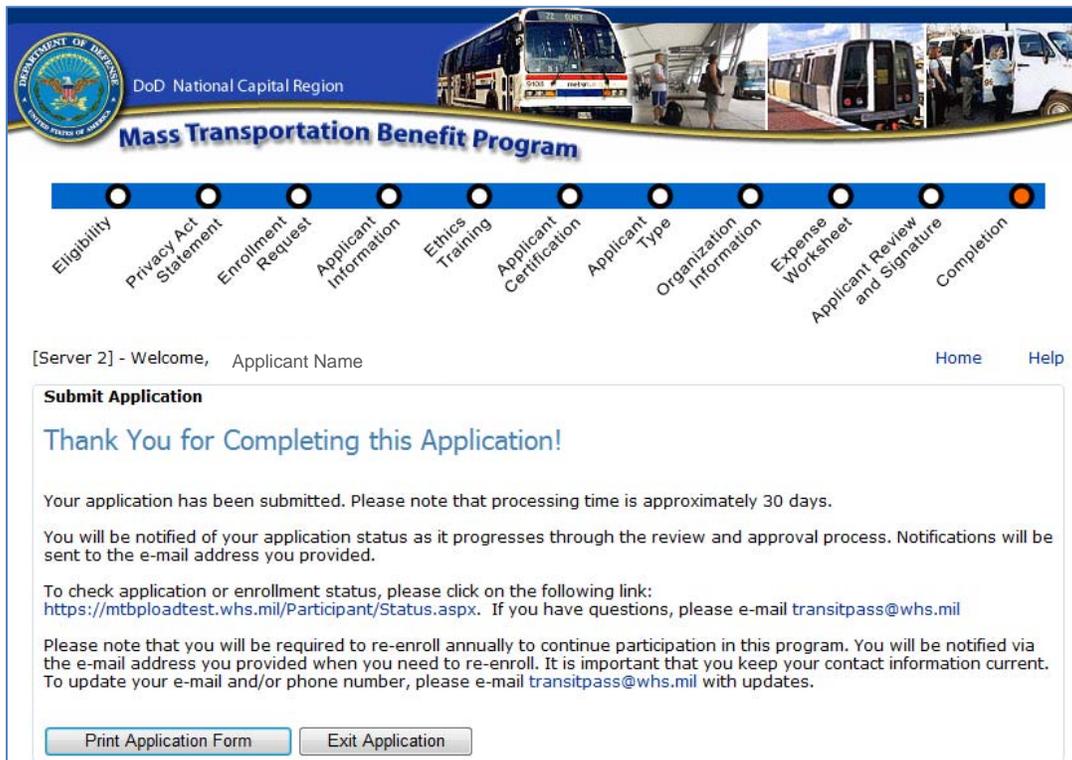
**Figure 33 - Application Review and Signature - Bottom Half**

The applicant will need to read the Application Certification statement and point and click on the I agree checkbox before submitting the application.

The applicant may also choose to decline submitting their application by clicking on the Not Accept button. This action will save all of the application entries, but not submit the application to the MTBP system.

**Submit Application**

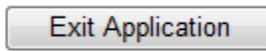
Point and click on the Submit Application button to submit your application. After submitting your application, you will receive the following screen, which provides links to helpful mass transportation benefit sites.



**Figure 34 - Thank You for Completing this Application!**

The applicant can click on the “**Print Application Form**” button at the bottom left of the page, to generate a PDF of the application just created so, they can retain a hard copy for their records.

Click on the “**Exit Application**” button to exit the application and the MTBP system.



As the application goes through the processing and approval cycle, the applicant will receive emails to keep them informed of the processing and approval of their application. If at any time, the applicant has questions regarding their application, they may contact the MTB Program Office at 571-256-0962.

**Print Application Form**

**Step 16** - After clicking on **“Print Application Form,”** the application will display on the screen in pdf format. Then, select **“File”** and **“Print”** and select the name of the desired printer and select **“Ok.”** See application below.

**Application**

**Applicant:**  
 Tracking Number: 51096977  
 Application Type: ENROLLMENT  
 Last Name: Applicant Last Name  
 First Name: Applicant First Name  
 Middle Initial: Applicant Middle Initial  
 Last 4 Digits of your SSN: 1234  
 SmarTrip® Card: 22222223

**Home:**  
 Residence (City): QUANTICO  
 State: VA  
 9-Digit Zip Code: 22209-1234  
 Days Commuted Monthly: 21  
 Total Monthly Commuting Cost: \$260.00  
 Time Reporting to Work: 7:00 AM  
 Time Leaving from Work: 5:00 PM

**Work:**  
 Duty Station: PENTAGON  
 City: ARLINGTON  
 9-Digit Zip Code: 22209-1234  
 Work Telephone Number: 703-555-1212  
 Work Email Address: 1290092104@tosd.mil  
 Organization: Washington Headquarters Services

**Supervisor:**  
 Last Name: DOE12343  
 First Name: ROBERTA  
 Work Telephone Number: 703-555-2222  
 Work Email Address: 1290092104@tosd.mil

**Temp Dates:**

**Reduced Fare Program Eligibility:**  
 The applicant indicates that they are eligible to participate in a reduced fare program.

Mode Of Transportation	Name of Transportation Company	Frequency of Purchase	Cost of one way leg or weekly/monthly pass	From (Station/Start point)	To (Station/End point)
VANPOOL	JJ's Vanpool	MONTHLY	\$260.00	Quantico	Pentagon

**Total Monthly Commuting Cost: \$260.00**

**Applicant provided the following Additional Information:**  
 Van driver: John Jones; Tel # 540-866-2323  
 Van #: 233; Route Name: Quantico/Pentagon/Quantico

The applicant certifies that:

- My claim for benefits is as a Federal employee or military service member.
- I am eligible for a public transportation fare benefit, will use it only for my daily commute to and from work, will not transfer it to anyone else, and will not allow anyone else to use it.
- The monthly transportation benefit I am claiming does not exceed my monthly estimated commuting costs.

DD2845 JUN 2009

**Figure 35 - Print Application – Top Half**

- I will adjust the amount received based upon long term TDY or leave.
- Upon separation from DoD, I will return unused fare media to the MTB Office. If I have converted the fare media to another form of media, I will reimburse the DoD by check or money order payable to the U.S. Treasury.
- I will notify the MTB office of any changes in my status, i.e. home or work address, change in commuting pattern or change in organization even if within the DoD.
- I will NOT include parking costs in my commuting expense calculation.
- I am not a vanpool owner/driver of my own for profit vanpool. If I am a driver and receive a reduced fee, I will adjust my claim for benefits accordingly. If I am a driver and receive compensation, I may not participate in the program.
- The mode of transportation for which I am claiming the mass transportation benefit is a qualified means of transportation.
- I am employed by the US Department of Defense and am not named on a Federally subsidized workplace parking permit with DoD or any other Federal Agency. If applicable, I have relinquished my workplace parking permit to the issuing authority.
- I certify that I will participate in any reduced fare program based on disability or age and any other special reduced fare programs offered by mass transportation providers, if eligible.

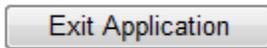
**Applicant Certification:**  
I certify that the information contained in this application is true and correct. I further acknowledge that any false statements or misrepresentations made by me for the purposes of my certification for this benefit may subject me to criminal, civil, or administrative penalties.

I agree.

Date Signed: 08/29/2013

Figure 36 - Print Application – Bottom Half

After the applicant is finished with the PDF form, close the PDF viewer. This will bring the applicant back to the “**Application Completion**” page, where the applicant can click on the “**Exit Application**” button to exit the MTBP system.



### Confirmation of Browser Close

After clicking on “**Exit Application**” from either submitting an application or submitting a withdrawal, the applicant will receive the following prompt. Click on the “**Yes**” button to close the window.



Figure 37 - Close Window Confirmation Pop-up Message

## **2.2 Application Review and Approval Process:**

### **Application Processing**

During the application process a check will be performed with the parking office to ensure the applicant does not have a parking permit. (See the “Parking Eligibility Check” section for more information.) Once the applicant has submitted their application, the application will go through the “Review and Approval” process. These steps include routing the application to the below queues:

- Program Office Review and Release
- Supervisor Review and Approval
- Agency Mass Transit Reviewing Official Review and Approval and
- Successfully Updating the application information at WMATA

When an application is submitted to one of the PO, Supervisor, or AMTBRO review queues, the system tracks when the application entered the queue and how long the application has been sitting in the queue before action is taken.

### **Applicant Email Notification**

When an application has been in a queue for a certain number of days (see below), the system will generate an email to the applicant to let them know how many days are left to process the application in a queue before the application will be closed by the system.

The email notifications are sent to the applicant on the following number of days: 7, 14, 21, 28, 35, 42 and 45. A sample of the email that is sent to the applicant when their application is in the “Supervisor Queue” is displayed below.

“Subject: MTBP Application still awaiting your supervisor's review  
Attention MTBP Applicant,

The [insert type] application you submitted for mass transportation benefits has been awaiting supervisory review for [number of days] days. This application will be closed if it sits for more than 45 days in an application review queue.

Please contact your supervisor to review the application. An email was sent with instructions to [supervisor email] on [original notification date]. If your supervisor is unable to view your application, have them contact the Mass Transportation Benefit Program office at 571-256-0962.

This application is scheduled to be deleted on [insert 45th day date] if no action is taken.

MTBP Program Office  
571-256-0962  
WHSNCRTransitbenefit@mail.mil

Emails that are sent to the applicant when their application is in the other queues is similar to the email provided above.

### **Closed Applications**

An application becomes a “Closed” application when it sits in a queue for more than forty-five (45) days or if a new application is submitted and completed, it will supersede any previous applications in the system and the previous applications will be “closed”. When an application is closed, the date that it is closed is captured and stored in the system. Closed applications cannot be edited or updated or resubmitted by the Program Office nor can closed applications be re-routed to the Agency Mass Transit Reviewing Official (AMTBRO).

Closed applications will be maintained in the system for three (3) years and then destroyed.

### **Denied Applications**

For applications that have been reviewed and denied, the application can be resubmitted prior to the forty-five (45) deadline. Otherwise, after the forty-five (45) day deadline, a denied application will be closed. Closed applications cannot be resubmitted.

### **Started; but, not Submitted Applications**

If the applicant starts an application; but, never submits it within a forty-five (45) day timeframe, the system will delete the application and the applicant will have to resubmit the application.

If the applicant has previously completed application(s) in the system, the most recently completed application will become the current application for the applicant.

### **Recertification Applications**

It is required that the program participant resubmit an updated application annually to maintain their participation in the MTBP program. The program participant can only submit a recertify or withdrawal application within the sixty (60) day window prior to their annual recertification date deadline. For questions regarding the re-certification process, contact the Program Office [WHSNCRTransitbenefit@mail.mil](mailto:WHSNCRTransitbenefit@mail.mil) or by phone at 571-256-0962.

## **2.3 Other Application Related Items of Note:**

### **Application Already in Process**

The following screen displays **only if** the applicant has already submitted an application and it is in the review process. The status of the applicant’s application is provided, along with a history of the activity of their application.

If you choose to continue, click on the **“I acknowledge”** checkbox. When you do so, the **“Next >”** button will appear. Click on **“Next >”**

**Note:** When an applicant resubmits an application before their application’s approval process is completed, the review approval process will begin again.

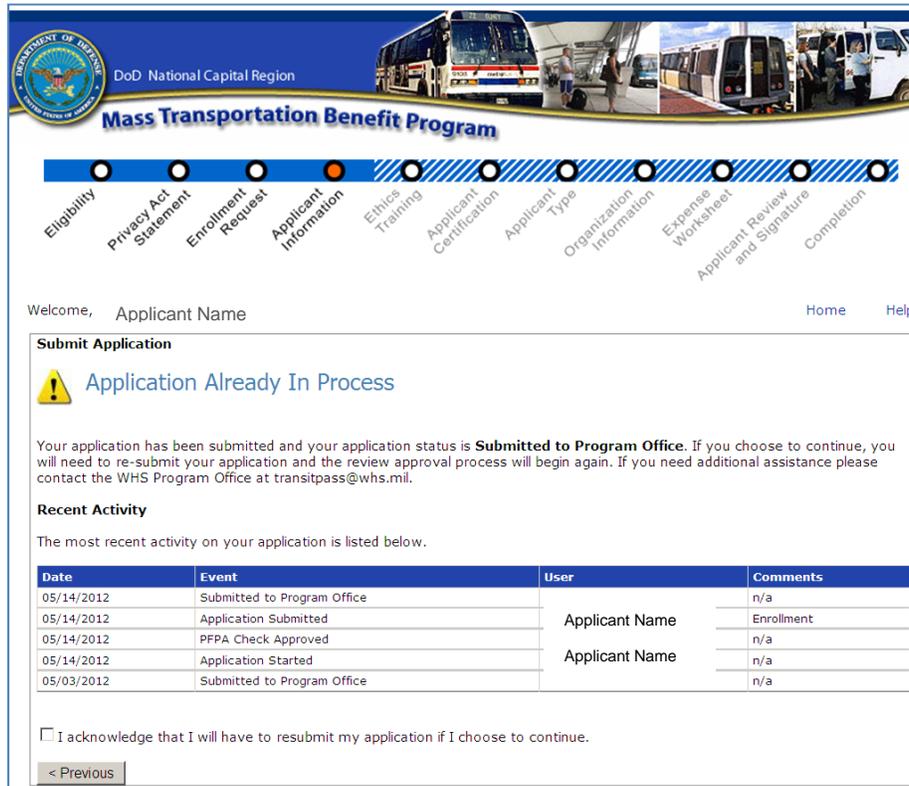
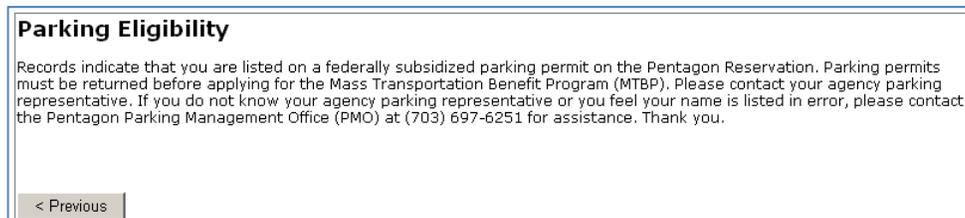


Figure 38 - Application Already in Process

### Parking Eligibility Check

After you enter the last four (4) of your Social Security Number on the “**Applicant Information**” screen, the system will perform a parking eligibility check. The following are the possible outcomes of the Parking Eligibility Check:

- 1) **Eligible:** If you are eligible for mass transportation benefits, you will not receive a Parking Eligibility statement; you will be directed to the Applicant Information (con’t) screen, to enter your MTBP application information.
- 2) **Ineligible:** If you are ineligible, you will receive the following message.

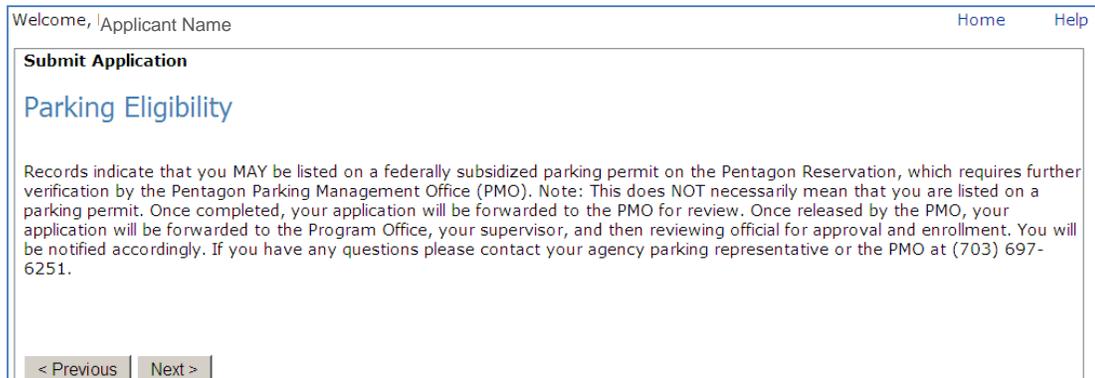


After reading this message,

close the browser window; the applicant will not be able to apply for the MTBP. Follow the

instructions detailed in this message and contact your agency parking representative or the Pentagon Parking Management Office (PMO), if necessary.

- 3) Exception: If the applicant receives the following message, it means that they may be listed on a parking permit, which may not allow them to receive mass transportation benefits. The PFPA Parking Office will review the application and determine if the applicant is eligible for the MTBP.



**Figure 39 - Parking Eligibility Message**

Click on the “**Next >**” button on the bottom left of the page. The applicant will proceed with their MTBP application. After the application is submitted, a PFPA Parking Office check is performed and a Program Office review of the application will be performed to determine eligibility for mass transportation benefits. If the applicant is approved, the application will be submitted to the applicant’s supervisor for review and then to the applicant’s **Agency Mass Transportation Benefit Reviewing Official (AMTBRO)**.

On the **Applicant Information (cont.)** screen, complete your **Home, Work and Supervisor** information. **Please note** that the applicant must provide their supervisor’s correct email information, as the completed application will be sent to him/her automatically for review and confirmation and it will be sent to the email address that is provided for the supervisor. Be sure to provide accurate information for all fields so the application can be processed in an expedient manner.

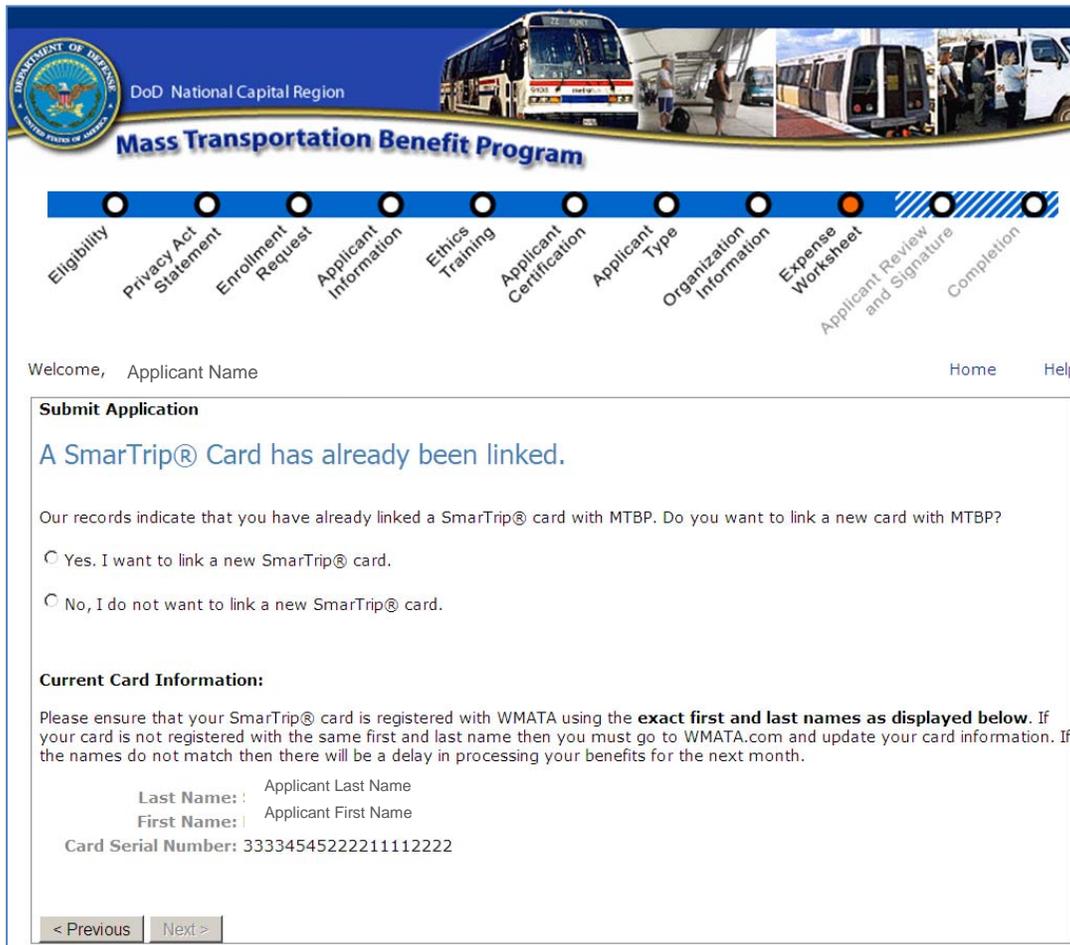
After the “**Next >**” button located at the bottom left of the screen is clicked, if any required fields are blank or they do not follow the field formatting, the field will be marked with a red asterisk (\*) and the applicant will see a pop-up window saying which fields must be completed to move to the next step. Please enter values in all fields. If applicable, the correct format will be displayed to the right of the asterisk.

When all fields are completed, then click on the “**Next >**” button. A “**Previous**” button is noted if the applicant wishes to return to the previous page.

### **SmarTrip Card Already Been Linked**

After clicking “**Next>**” at the bottom of the worksheet page, the SmarTrip card number entry page will display.

**Note:** If the applicant already has an application in the system with a linked card and a new application is entered into the system, the following page will display and ask if the applicant wants to link a new card. If the applicant needs to link a new ST Card, click on the “Yes” radio button. Otherwise, click on the “No” radio button and then click on “Next>” button.



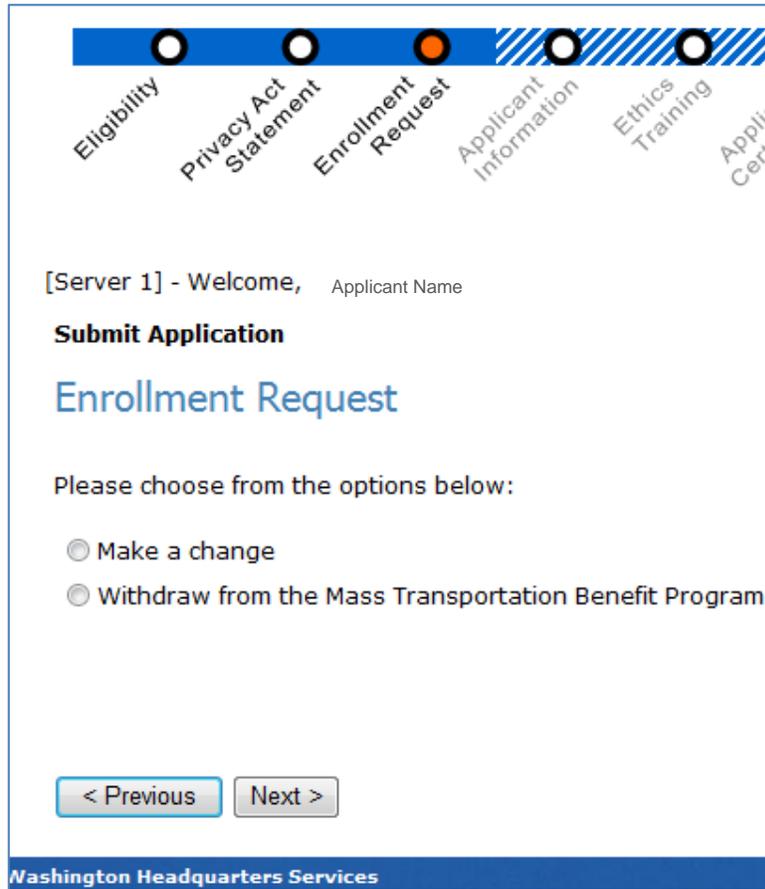
**Figure 40 - SmarTrip Card Has Already Been Linked Message**

If “Yes” is selected to link a new ST card, click on the appropriate card type based on your card: 1, 2, 3, or 4.

### Withdrawing Application

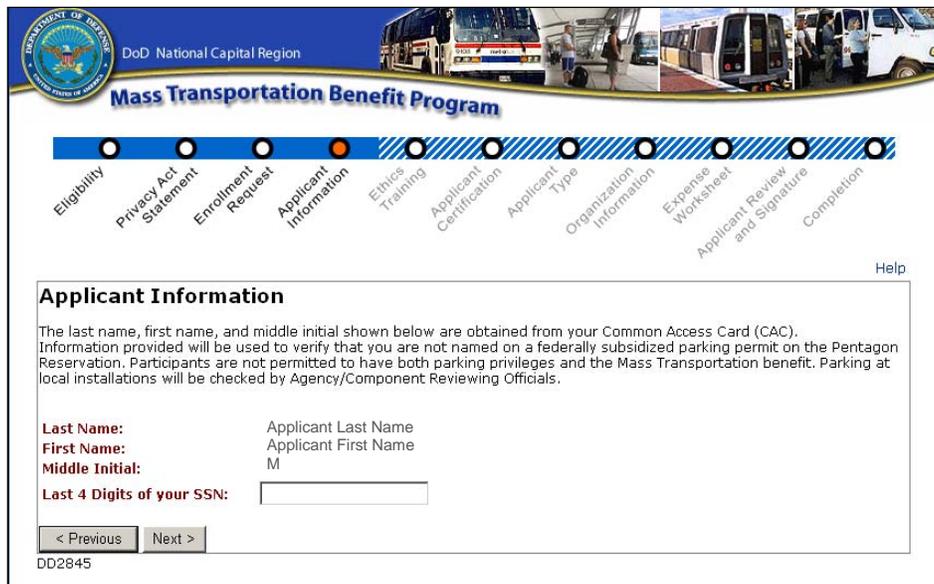
At the MTBP Welcome screen, click on the “Submit Application” button and click the “Next>” button through the Application and Benefit Delivery Timeframes, Eligibility, Privacy Act and Applicant Identity screens until you get to the “Enrollment Request” screens.

Select “**Withdraw**” on the “**Enrollment Request**” screen and click the “**Next**” button.



**Figure 41 - Enrollment Request Options**

Click on the “**Next>**” button and the following screen will display.



**Figure 42 – Withdraw Applicant Information Screen**

The participant will type in the last four digits of their social security number (SSN) and click “Next>.”

The “**Applicant Information (cont.)**” page will display and the participant needs to type their email address into the “**Confirm Email Address**” field, type the last commuting date of the withdrawal in to the “**Last Commuting Date**” field, enter any additional information into the “**Additional Information**” (comment) field, and click “Next>.”

DoD National Capital Region  
**Mass Transportation Benefit Program**

Eligibility Privacy Act Statement Enrollment Request **Applicant Information** Ethics Training Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

[Server 2] Applicant Name [Home](#) [Help](#)

**Submit Application**

**Applicant Information (cont.)**

Please enter a valid telephone number and email address where you can be reached if there are any questions or issues with your Withdrawal application. Also, please specify the date when this withdrawal should be effective.

All fields are required

**Contact Information:**

**Work Telephone Number:**  (enter as ten digits, xxx-xxx-xxxx, include area code)

**Work Telephone Extension:**  (optional)

**Work Email Address: (Unclass only)**  (email address must be a .gov, .mil, .edu, or .org address. If you do not have an e-mail address with a .gov, .mil, .edu, or .org, please use that of your supervisor. Once you are assigned an e-mail address with a .gov, .mil, .edu, or .org, please e-mail transitpass@whs.mil with the new address)

**Confirm Email Address:**

**Last Date of Commuting:**  
 Please enter the last commuting date for this withdrawal. Please type the date using the format 'mm/dd/yyyy'.

**Last Commuting Date:**

**Additional Information:**  
 Please provide any additional information in the box below.

Washington Headquarters Services Accessibility/Section 508

**Figure 43 – Withdraw Applicant Information (cont.) Screen**

Ensure the correct “**Applicant Type**” is selected (either “**Civilian, Military, Non-Appropriated Funds (NAF), Active Reservist (30 Consecutive days or more, or Paid Temporary Hire/Intern**” and click “Next>.” See following screen.

DEPARTMENT OF DEFENSE  
DoD National Capital Region

**Mass Transportation Benefit Program**

Eligibility Privacy Act Statement Enrollment Request Applicant Information Ethics Training Applicant Certification **Applicant Type** Organization Information Expense Worksheet Applicant Review and Signature Completion

Welcome, Applicant Name [Home](#) [Help](#)

**Submit Application**

Applicant Type

**Are you:** (check one)

- Civilian
- Military
- Non-Appropriated Funds (NAF)
- Active Reservist (30 Consecutive days or more)
- Paid Temporary Hire / Intern

< Previous Next >

**Figure 44 - Applicant Type Screen 1**

The following “**Applicant Type**” screen will display after the “**Next>**” button is clicked in the above screen. Click on the desired applicant service type. For example, select either “**Air Force, Army, Navy, Marine Corps, or Department of Defense.**” Then click on “**Next>**.”

DEPARTMENT OF DEFENSE  
DoD National Capital Region

**Mass Transportation Benefit Program**

Eligibility Privacy Act Statement Enrollment Request Applicant Information Ethics Training Applicant Certification **Applicant Type** Organization Information Expense Worksheet Applicant Review and Signature Completion

Welcome, Applicant Name [Home](#) [Help](#)

**Submit Application**

Applicant Type

**Are you (check one):**

- Air Force
- Army
- Navy
- Marine Corps
- Department of Defense

< Previous Next >

**Figure 45 - Withdraw Applicant Type Screen 2**

The “**Organization Information**” page will display. Ensure the correct “**Organization Code**” is selected and click on “**Next>**.”

The screenshot displays the 'Mass Transportation Benefit Program' interface for the DoD National Capital Region. At the top, there is a navigation bar with the program title and a progress indicator showing 12 steps. The current step, 'Organization Information', is highlighted with a blue bar and a white circle. Below the progress bar, the 'Organization Information' section is visible, containing a dropdown menu for 'Organization Code' with 'HQ 27 - Headquarters, Marine Corps' selected. Below the dropdown are two buttons: '< Previous' and 'Next >'. A 'Help' link is located in the top right corner of the form area.

**Figure 46 - Withdraw Organization Information**

The “**Applicant Review and Signature**” page will display. See the following screenshot.

DEPARTMENT OF DEFENSE  
UNITED STATES OF AMERICA

DoD National Capital Region

## Mass Transportation Benefit Program

Eligibility Privacy Act Statement Enrollment Request Applicant Information Ethics Training Applicant Certification Applicant Type Organization Information Expense Worksheet Applicant Review and Signature Completion

[Server 2] - Welcome, Applicant Name [Home](#) [Help](#)

**Submit Application**

### Applicant Review and Signature

**!** Please note, your application has not been submitted.

Please review your information, and click the **Submit Application** button at the bottom of the page to submit your application for processing. You will be able to print a copy for your records after submission.

**Applicant:**  
**Tracking Number:** 85250593  
**Application Type:** WITHDRAWAL  
**Entry Type:** MANUALLY ENTERED BY PO ADMIN  
**Last Name:** Applicant Last Name  
**First Name:** Applicant First Name  
**Middle Initial:** Applicant Middle Initial  
**Last 4 Digits of SSN:** 1234  
**DoD ID:** 1290092104 [i](#)  
**SmarTrip Serial Number:** 143214321  
**User-Defined Key:** 95624-4FC3CE40A49A

**Work and Contact:**  
**Work Telephone Number:** 703-699-1111  
**Work E-Mail Address:** 1290092104@tosd.mil  
**Organization:** WHS - WHS - WASHINGTON HEADQUARTERS SERVICES  
**Applicant Type:** CIVILIAN  
**Military Member Type:** N/A

**Additional Information:**  
**Last Date of Commuting:** 10/15/2014

**Comments:**  
 Withdrawal example.

**Application Certification:**  
 I certify that the information contained in this application is true and correct. I further acknowledge that any false statements or misrepresentations made by me for the purposes of my certification for this benefit may subject me to criminal, civil, or administrative penalties.

I agree.

**Date Signed:** 10/14/2014

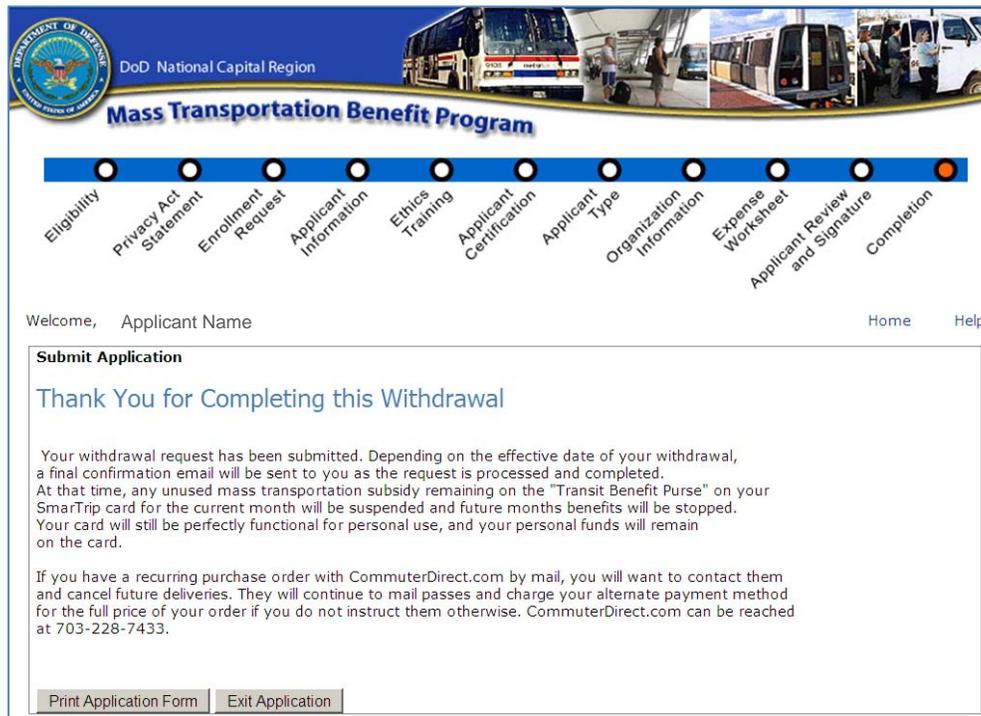
[< Previous](#) [Submit Application](#) [Not Accept](#)

Washington Headquarters Services Accessibility / Section 508

Figure 47 - Withdraw Applicant Review and Signature

Check the withdrawal information for accuracy and ensure the “**Last Date of Commuting**” is correct, and click on the “**I Agree**” box and click on “**Submit Application**” at the bottom of the screen.

If the applicant submits their application for withdrawal, they will receive the following page, which provides information on returning unused fare media.



**Figure 48 - Thank You for Completing this Withdrawal**

To exit, click on “Exit Application” and the following prompt will display.



**Figure 49 - Close Window Confirmation Pop-up Message**

Click on the “Yes” button to confirm and close the window.

**Note:** When a withdrawal is submitted by the applicant, the withdrawal is routed to the Program Office Review Queue for review and approval. If the withdrawal is approved by the Program Office, then the withdrawal application is processed and “closed” and the date/time of closure is captured in the system. If the PO disapproves a withdrawal, the applicant will have to resubmit the withdrawal application.

Also, when the Program Office creates and submits manual withdrawals for a participant, the withdrawal application is submitted to the PO Review Queue for review and processing.

## 2.4 How to Change a Work Telephone Number or Email Address

The MTBP program participant can change their work telephone number and their email address without submitting a new application by using the following instructions:

1. Go to the MTBP Welcome page at: <https://mtbp.whs.mil/Participant/Welcome.aspx>
2. Click on the “Sign in to MTBP” button at the bottom of the page.
3. Click on the “Update Profile” button in the upper right hand corner of the screen.
4. Type in your new work telephone number in the “Work Telephone Number” field and/or
5. Type in your new email address in the “Email (unclass only)” field.
6. Point and click on the “Save Changes” button at the bottom. When this is performed, the user is returned to the MTBP Sign-in page and updated changes display on the page.

## 3. Check Enrollment Status

### 3.1 Welcome Screen

The MTBP Welcome screen has an option for checking your enrollment status as it moves through the MTBP system and is processed. To check on your enrollment, click on the “**Sign-in to MTBP**” button at the bottom of the Welcome screen.

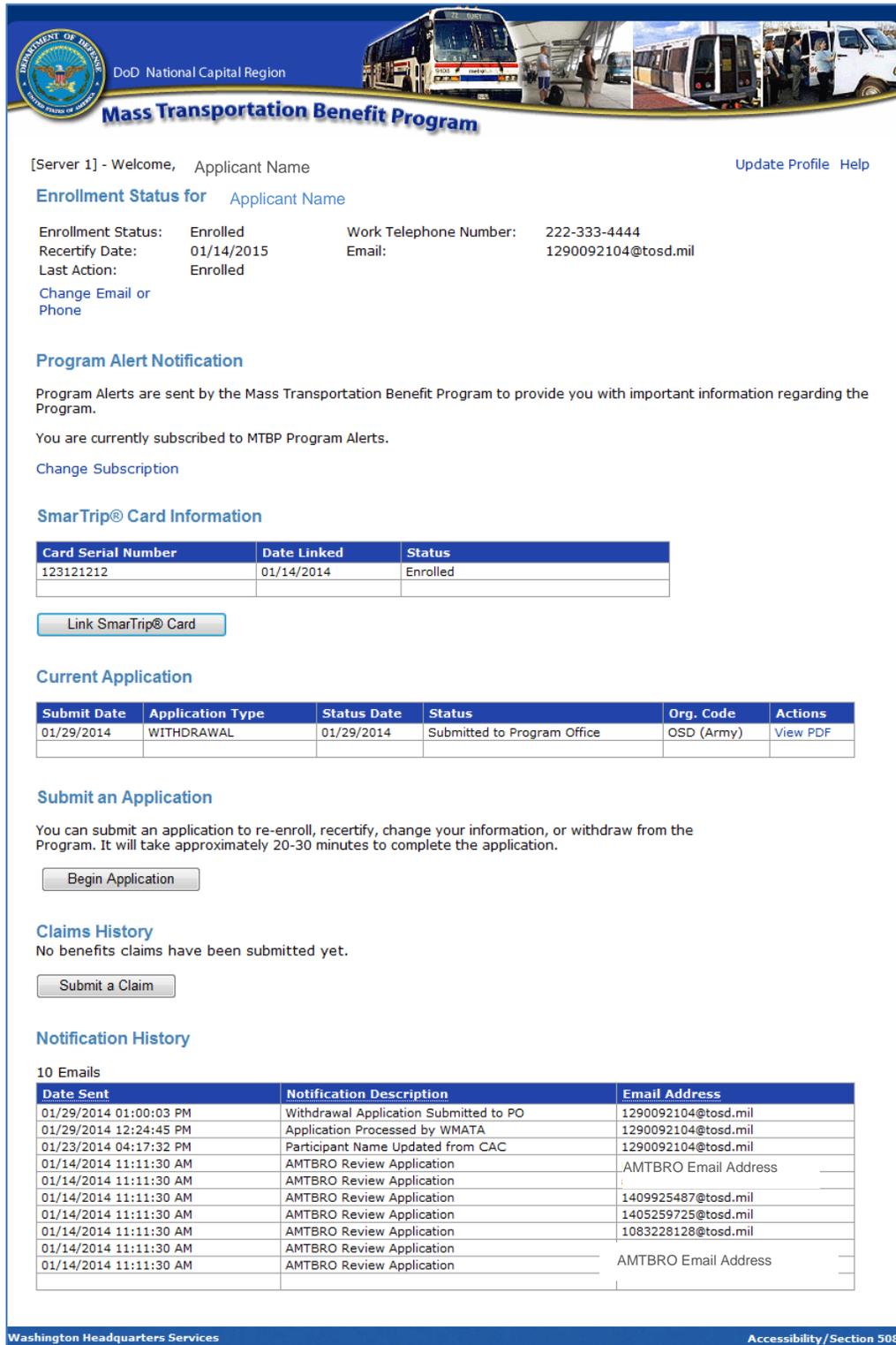


“Sign-in to MTBP” Button →

Figure 50 – Sign-in to MTBP Button

After you click on the “**Sign-in to MTBP**” button, if the system finds your record via your CAC information, then the “**Enrollment Status**” page displays.

Please note that the **Recertify Date** displays on the screen.  You will need to recertify your benefit application in the MTBP system prior to this date in the following year. If you have questions regarding this, please contact the MTBP Program Office.



[Server 1] - Welcome, Applicant Name [Update Profile](#) [Help](#)

**Enrollment Status for** Applicant Name

Enrollment Status: Enrolled      Work Telephone Number: 222-333-4444  
 Recertify Date: 01/14/2015      Email: 1290092104@tosd.mil  
 Last Action: Enrolled

[Change Email or Phone](#)

**Program Alert Notification**

Program Alerts are sent by the Mass Transportation Benefit Program to provide you with important information regarding the Program.

You are currently subscribed to MTBP Program Alerts.

[Change Subscription](#)

**SmarTrip® Card Information**

Card Serial Number	Date Linked	Status
123121212	01/14/2014	Enrolled

[Link SmarTrip® Card](#)

**Current Application**

Submit Date	Application Type	Status Date	Status	Org. Code	Actions
01/29/2014	WITHDRAWAL	01/29/2014	Submitted to Program Office	OSD (Army)	<a href="#">View PDF</a>

**Submit an Application**

You can submit an application to re-enroll, recertify, change your information, or withdraw from the Program. It will take approximately 20-30 minutes to complete the application.

[Begin Application](#)

**Claims History**

No benefits claims have been submitted yet.

[Submit a Claim](#)

**Notification History**

10 Emails

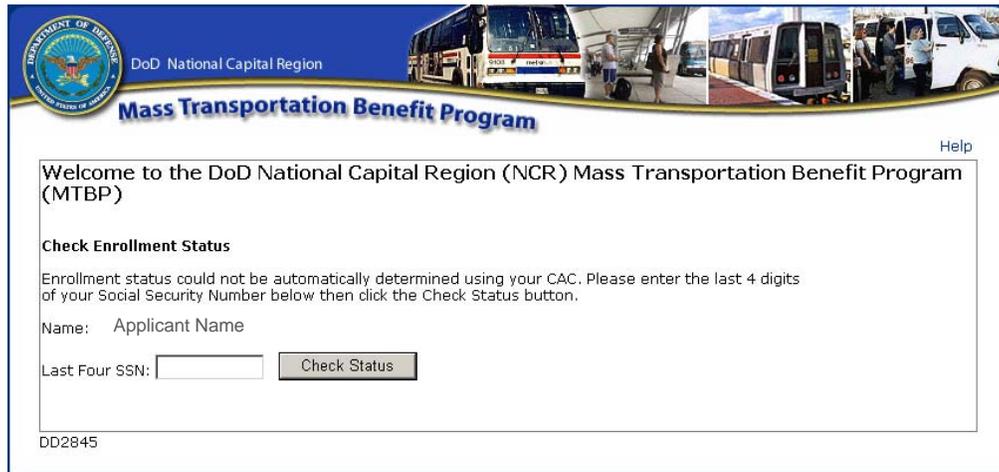
Date Sent	Notification Description	Email Address
01/29/2014 01:00:03 PM	Withdrawal Application Submitted to PO	1290092104@tosd.mil
01/29/2014 12:24:45 PM	Application Processed by WMATA	1290092104@tosd.mil
01/23/2014 04:17:32 PM	Participant Name Updated from CAC	1290092104@tosd.mil
01/14/2014 11:11:30 AM	AMTBRO Review Application	AMTBRO Email Address
01/14/2014 11:11:30 AM	AMTBRO Review Application	.
01/14/2014 11:11:30 AM	AMTBRO Review Application	1409925487@tosd.mil
01/14/2014 11:11:30 AM	AMTBRO Review Application	1405259725@tosd.mil
01/14/2014 11:11:30 AM	AMTBRO Review Application	1083228128@tosd.mil
01/14/2014 11:11:30 AM	AMTBRO Review Application	AMTBRO Email Address
01/14/2014 11:11:30 AM	AMTBRO Review Application	AMTBRO Email Address

Washington Headquarters Services Accessibility/Section 508

Figure 51 - Enrollment Status Page

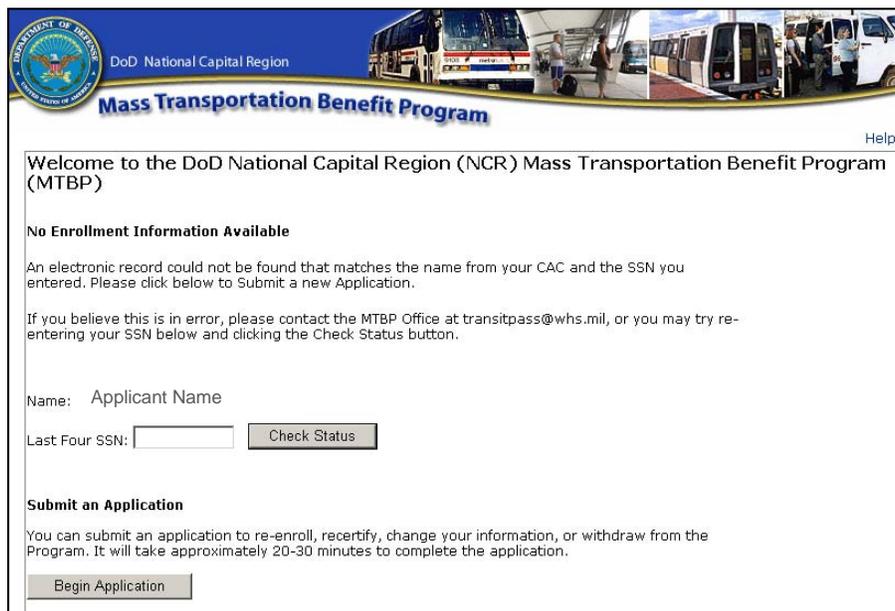
### 3.2 Enrollment Not Found

If the applicant’s enrollment status cannot be determined using your CAC, you will be prompted to enter the last four (4) of the applicant’s social security number (SSN) for the system to locate your application. See the following screenshot for the prompt that will be displayed. After entering your last four (4) SSN#, click on the “**Check Status**” button.



**Figure 52 - Enrollment Status SSN# Prompt**

Please make sure that the correct last four (4) of the applicant’s SSN# has been typed into the “**Last Four SSN**” field. If the system still can’t find an applicable record after entering the last four (4) of the applicant’s SSN#, the applicant will see the below screen.



**Figure 53 - No SSN# CAC Found Screen**

If the last four (4) of the applicant’s SSN# is correct, please contact the MTBP Program Office for assistance.

### 3.3 Enrollment Found

If the applicant has enrolled in the Mass Transportation Benefit Program, their status will show that they are enrolled.

If the applicant has started an application but, has not completed enrollment, they will see the below screen which will include a “Begin Application” button so, they can go through the application process and complete an enrollment.

DoD National Capital Region  
**Mass Transportation Benefit Program**

Welcome to the DoD National Capital Region (NCR) Mass Transportation Benefit Program (MTBP) [Help](#)

**Enrollment Status**      Applicant Name

Name: \_\_\_\_\_  
 Enrollment Status:      Enrolled  
 Last Action:              Changed  
 Recertify Date:          12/13/2011

**Program Alert Notification**

You are **not subscribed** to MTBP Program Alerts.     

**Last Submitted Application**

Click on the Help link located on the top right hand section of this screen, for explanation of your application status.

Application Type	Submit Date	Status Date	Status	Org. Code	Actions
CHANGE	12/15/2010	12/15/2010	Submitted to Program Office	HQ 27	View PDF

**Submit an Application**

You can submit an application to re-enroll, recertify, change your information, or withdraw from the Program. It will take approximately 20-30 minutes to complete the application.

**Figure 54 - Enrollment Status Screen**

If the applicant believes the status shown is in error, please contact the Mass Transportation Benefit Program Office at **WHSNCRTransitbenefit@mail.mil** or at 571-256-0962 to request assistance.

## **4. Claim Module**

The Mass Transportation Benefit Program recipient has the requirement to submit a monthly claim for benefits for the next benefit distribution period. This is performed on a monthly basis. The program participant claim period is between the 1<sup>st</sup> and the 15<sup>th</sup> of the month prior to the benefit distribution month.

The participant will receive a claim reminder email from the 1<sup>st</sup> day of the month through the 15<sup>th</sup> day of the month. The claim reminder emails are generated during the early morning hours and sent to the participant daily. From the 12<sup>th</sup> to the 15<sup>th</sup> of the month, a second claim reminder email is also sent out at 11:00 a.m. during the day. Once the program participant completes and submits a claim, the participant will no longer receive a claim email reminder.

### **4.1 How to submit a claim**

To submit a claim, the participant will go to the “**MTBP Welcome**” page and point and click on the “**Submit a Claim**” button. See the following screenshot.

The screenshot shows the homepage of the DoD National Capital Region (NCR) Mass Transportation Benefit Program (MTBP) Web-Based Application. At the top left is the Department of Defense seal. The header includes the text 'DoD National Capital Region' and 'Mass Transportation Benefit Program'. Below the header, a navigation bar contains the text '[Server 1] - Welcome, Applicant Name' and a 'Help' link. The main content area features a large heading: 'Welcome to the DoD National Capital Region (NCR) Mass Transportation Benefit Program (MTBP) Web-Based Application'. A paragraph states: 'All military members and civilian employees who have a Common Access Card (CAC) and access to a DoD CAC-enabled system are required to use this system to apply and participate in the Mass Transportation Benefit Program.' Below this, it says 'This system allows you to perform one of the following actions:'. Under the heading 'Claims:', there is a bullet point: 'Complete and submit Monthly Claims for Mass Transportation Benefits.' A red arrow points to a 'Submit a Claim' button. Under the heading 'Applications:', it says 'Complete and submit an application for:'. There are four bullet points: 'Enrollment' (for new users), 'Re-certification' (for annual updates), 'Change' (for updates to information), and 'Withdraw' (to leave the program). Below this is a 'Begin Application' button. Under the heading 'Miscellaneous Actions:', there are four bullet points: 'Check your enrollment status and the status of your last submitted application.', 'Check the status of Monthly Claims.', 'Subscribe or unsubscribe to Program Alerts', and 'Link a new SmarTrip® card to your benefits. Replace a lost or broken card.' A 'Sign in to MTBP' button is at the bottom. The footer contains 'Washington Headquarters Services' and 'Accessibility/Section 508'.

Figure 55 - MTBP Homepage - Submit a Claim

The following “Program Eligibility” page will display when the “Submit a Claim” button is depressed.

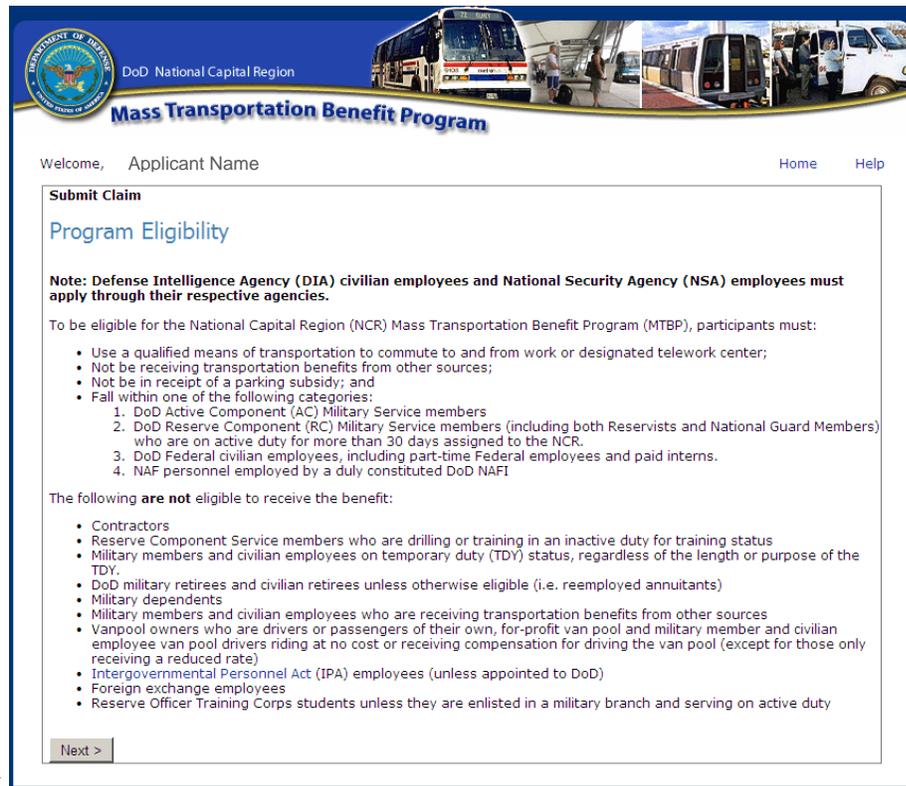


Figure 56 - Submit Claim Program Eligibility Page

The participant should review the “**Program Eligibility**” page and then click on the “**Next>**” button. The **Privacy Act Statement** page will display. The participant should review this page and then click the “**Next>**” button.

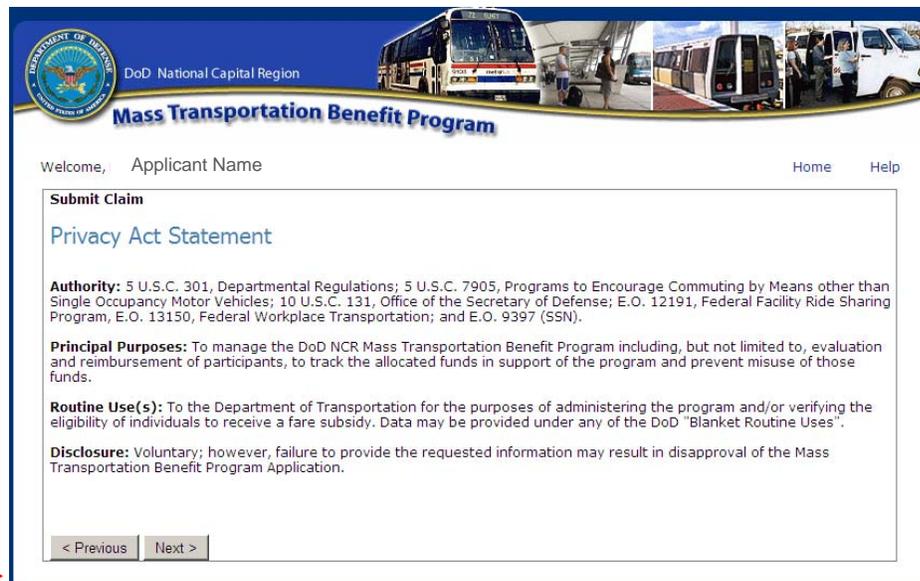
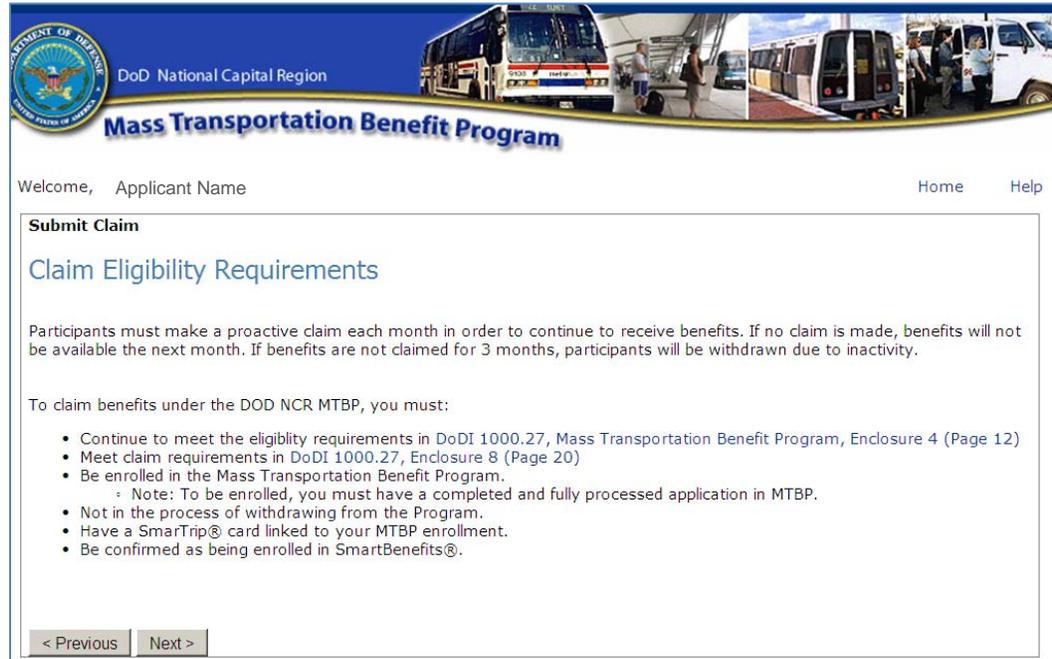


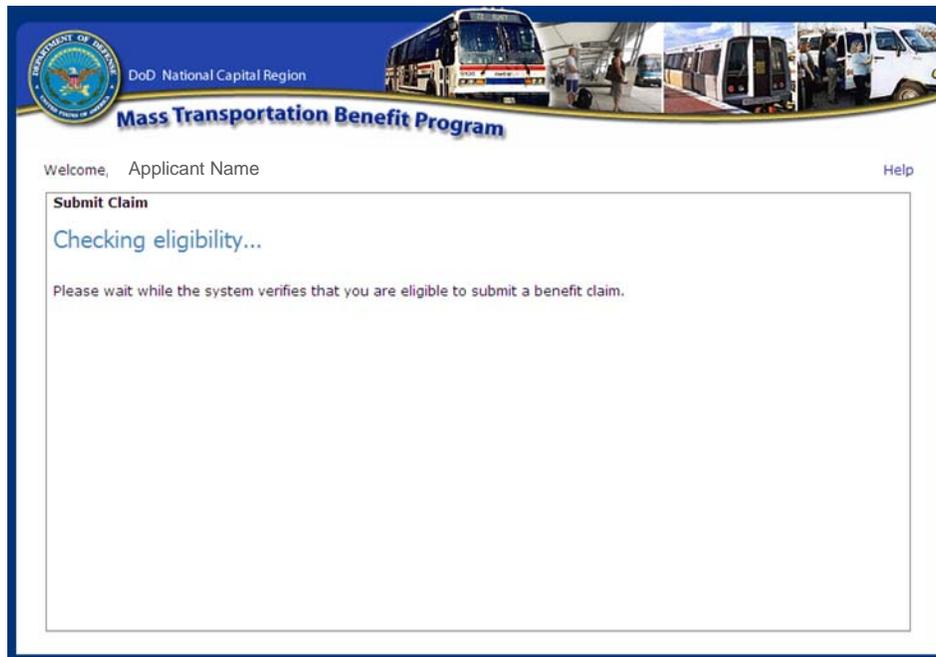
Figure 57 - Submit Claim Privacy Act Statement

The participant should read the **“Claim Eligibility Requirements”** page and then click on the **“Next>”** page button. The text highlighted in blue is a link to the document referenced. The participant can click on the link, view the reference document and then exit out of the pop-up page back to the **“Claim Eligibility Requirements”** page.



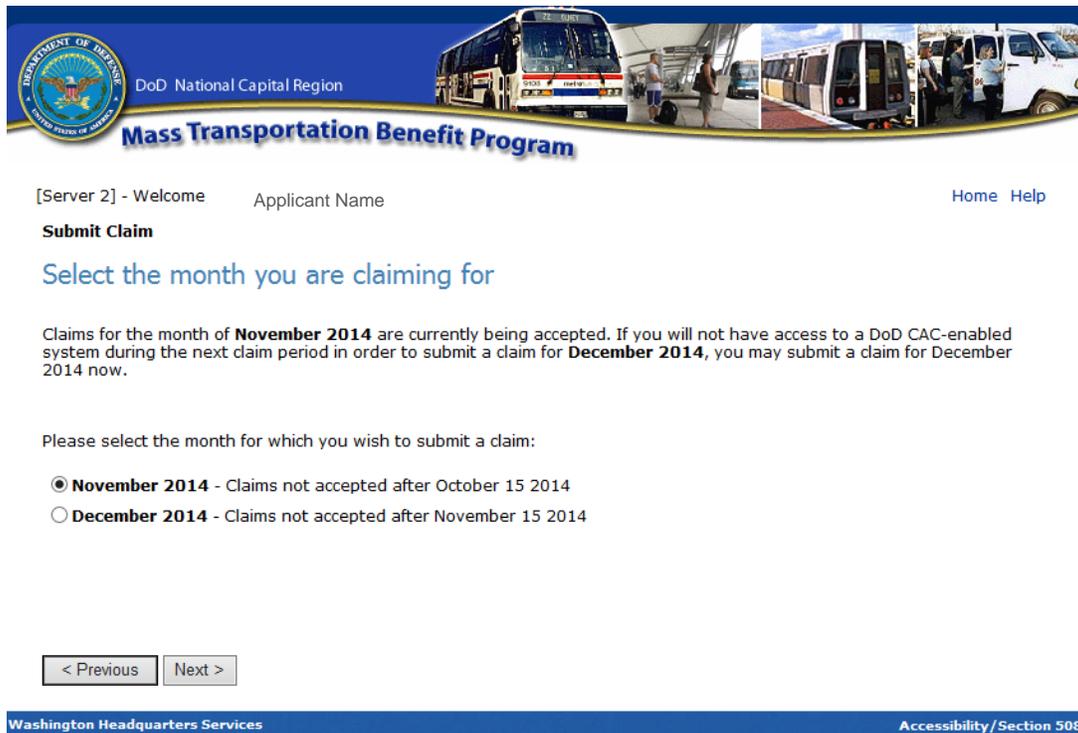
**Figure 58 - Submit Claim - Claim Eligibility Requirements**

After reading the **“Claim Eligibility Requirements”** page, the participant should click on the **“Next>”** button. The following **“Checking eligibility...”** page will display while the system performs a program participant eligibility check against the Pentagon parking system.



**Figure 59 - Submit Claim - Checking eligibility page**

If the system determines that the participant is eligible to receive benefits, then the “Select the month you are claiming for” page will display and the participant can select for which month they want to submit a claim. Claims have to be submitted between the 1<sup>st</sup> through the 15<sup>th</sup> of the month prior to the benefit period. For example, if the participant goes into the system between June 1 and June 15, and submits a claim; this claim applies to the benefit distributed the 1<sup>st</sup> day of the following month. Claim submissions may be made two months in advance if the program participant will not have access to a DoD network computer during the claim period when the claim should be submitted. In the example below, the claim would be submitted for October 2013 since the claim period has passed for the month of September 2013.



**Figure 60 - Submit Claim - Select the month you are claiming for page**

When the participant makes a month selection by clicking on the radio button for the eligible month, the “Next>” button will display at the bottom of the screen.

When the participant selects the “Next>” button, the following “Claim Certification” page with the first claim certification statement will display. The certifications will display one certification statement at a time so the participant can read the statement and then click on the radio button to the left so, the next certification statement displays. When all certifications have displayed and the radio button clicked, the “Next>” button will display at the bottom of the screen for the participant to click on it to display the next screen.

DoD National Capital Region

## Mass Transportation Benefit Program

[Server 2] - Welcome [Home](#) [Help](#) Applicant Name

**Submit Claim**

### Claim Certifications

**WARNING:** This Certification concerns a matter within the jurisdiction of an agency of the United States and making a false, fictitious, or fraudulent certification may render the maker subject to a criminal prosecution under Title 18, United States Code, Section 1001, Civil Penalty Action, providing for administrative recoveries of up to \$10,000 per violation, agency disciplinary actions up to and including dismissal, and/or administrative or punitive disciplinary action under the Uniform Code of Military Justice (where applicable). Substantiated violations of any of these certifications may impact an employee's security clearance status. Information provided on this form may be audited.

**MANDATORY:** Read each statement and check the accompanying box to certify.

I certify that I understand that:

- I am employed by the US Department of Defense and am not named on a Federally subsidized workplace parking permit with DoD or any other Federal Agency. If applicable, I have relinquished my workplace parking permit to the issuing authority.
- My claim for benefits is as a Federal employee or military service member.
- I am eligible for a public transportation fare benefit, will use it only for my daily commute to and from work, will not transfer it to anyone else, and will not allow anyone else to use it.
- The monthly transportation benefit I am claiming does not exceed my estimated monthly commuting costs.
- I will adjust the amount received based upon long term TDY or leave.
- Upon separation from DoD, I will return unused fare media to the MTB Office. If I have converted the fare media to another form of media, I will reimburse the DoD by check or money order payable to the U.S. Treasury.
- I will notify the MTB office of any changes in my status, i.e. home or work address, change in commuting pattern or change in organization even if within the DoD.
- I will NOT calculate parking costs.
- I am not a vanpool owner/driver of my own for profit vanpool. If I am a driver and receive a reduced fee, I will adjust my claim for benefits accordingly. If I am a driver and receive compensation, I may not participate in the program.
- The mode of transportation for which I am claiming the mass transportation benefit is a qualified means of transportation.
- I certify that I will participate in any reduced fare program based on disability or age and any other special reduced fare programs offered by mass transportation providers, if eligible.

[< Previous](#) [Next >](#)

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**Figure 61 - Submit Claim - Claim Certifications**

“Enter claim amount for “appropriate month’s name/year”” will display. The upper part of the screen will display the application information that the user has been approved for and is captured in their most recently approved application. The second section of the screen prompts the participant to enter the number of days and benefit amount that they are claiming for the next benefit distribution period. The participant should complete this part following the prompts on the screen. If the participant needs to reference their worksheet or their application, they can click on the [blue](#) links and access the noted reference information.

Once the participant has entered in their **planned number of days to commute** and the **benefit amount**, they will need to point and click on the **“I agree”** checkbox, after reading the **“Applicant Certification”** statement at the bottom of the screen. Then point and click on the **“Submit Claim”** button.

Sample data has been provided in the following screenshot.

[Server 2] - Welcome, Applicant Name Help

**Submit Claim**

## Enter claim amount for November 2014

Please enter the number of days you plan to commute and the benefit amount you are claiming for.

**Your Information:**

- You are currently enrolled for the following number of estimated commuting days per month: **21 days**  
Note: The above benefit amount is based on your current completely processed application. If you have submitted a change application, it will not reflect in the above benefit amount until that application is fully processed.
- You are currently approved for a **maximum** benefit amount of: **\$130**  
Reminder: Please do not include AWS/Telecommuting/Teleworking days in the actual commuting days per month calculation. Please also do not include days for which you are on leave/TDY/TAD.

**Submitting Your Claim:**

- Please enter the number of days that you plan to commute in November 2014:
- Please enter your benefit claim amount for the month of November 2014: \$
- Please click [here](#) to view your MTBP application and expense worksheet.

**Applicant Certification:**

I certify that the information contained in this claim is true and correct. I further acknowledge that any false statements or misrepresentations made by me for the purposes of my certification for this benefit may subject me to criminal, civil, or administrative penalties.

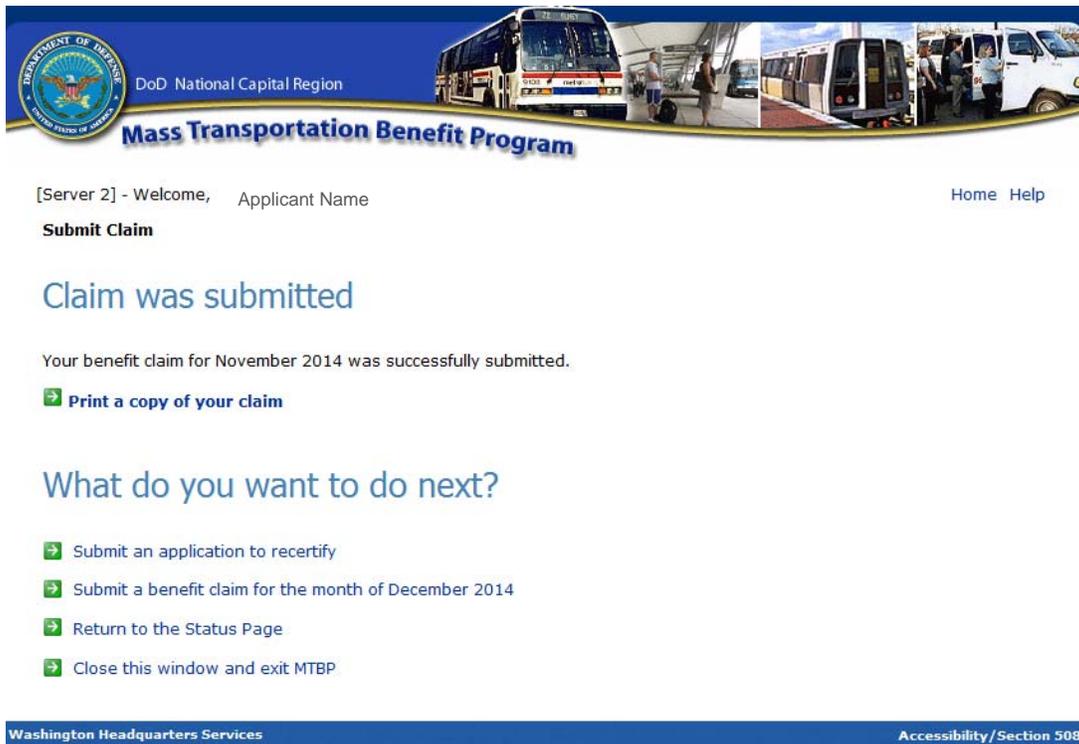
I agree.

**Date Signed:** 10/14/2014

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**Figure 62 - Submit Claim - Enter claim amount for Month/Year Page**

Once the participant has selected the **“Submit Claim”** button, the following page will display.



**Figure 63 - Claim Was Submitted Page**

The participant can print a copy of their claim or perform the other actions noted on the page. For example, submit a claim for the following month or return to the welcome page or close the window and exit MTBP.

Other actions the user can perform include printing a copy of their claim by using the “**Print a copy of your claim**”.

The system will return the participant to the below page and they can submit a claim for a second consecutive month moving through the claim’s process to submission. However, they have to certify that they will not have access to a DoD CAC-enabled system during the next claim period.

After a claim has been successfully submitted and processed, the program participant will receive an email to confirm their claim submission.

Sample content of email:

Your claim for {Month name for which claim was submitted} Mass Transportation Benefits has been processed. Benefits will become available on {1<sup>st</sup> day of the month for which the claim was submitted}.

For riders of Metro Rail or SmarTrip enabled buses: Benefits will autoloading onto your SmarTrip card on the first use at a Metro rail faregate or SmarTrip bus target in the month of {Benefit Month Name} \*.

Instructions for using available benefits can be found at:

<http://www.whs.mil/MTBP/Instructionsforreceivingelectronicfaremedia.cfm>

For riders of vanpools, MARC, VRE, Dillon, Keller, Eyre, MARTZ, Quicks, Metro Access or AMTRAK:

Submitting a claim will make benefits available to your SmarTrip card. It is your responsibility to create a passenger allocation with WMATA/Metro to move your benefits from the card to your 3rd party transit company. The allocation only needs to be set once. Any future claims you submit will continue be directed from your card to your assigned 3rd party vendor. Allocations must be set in the month prior to the benefit delivery. Benefits cannot be moved from the card to a 3rd party company within a current month. Allocations for MARC, VRE, Dillon, Keller, and Eyre must be set up by the 15th of the month prior to benefit delivery. Instructions for creating an allocation and receiving your tickets or passes can be found at: “<http://www.whs.mil/mass-transportation-benefit-program/allocate-your-mtbp-benefits>”.

(\*If May 2013 will be your first month loading benefits, your SmarTrip card must have a history of use and a positive personal balance in order to load benefits. You do not need to spend personal funds to establish a history of use. You can tap your card on a 'fare cards and passes' machine along the walls of a Metro station at any point in the 3 weeks prior to benefits loading. After tapping your card, you will see your personal balance. Hit 'press for cancel'. If a history is not established in the 3 weeks prior, benefits will still load, but may be delayed 3 to 5 days before they start working.

Did you know?

If your SmarTrip card is ever lost or broken, your benefits can be reassigned to a new card in just a few easy steps! You can view these directions online at:  
“<http://www.whs.mil/mass-transportation-benefit-program>”

Questions? Visit our FAQ: “<http://www.whs.mil/mass-transportation-benefit-program>”

DoD Mass Transportation Benefit Program (MTBP)  
National Capital Region  
<http://www.whs.mil/mass-transportation-benefit-program>  
(571) 256-0962  
[WHSNCRTransitbenefit@mail.mil](mailto:WHSNCRTransitbenefit@mail.mil)

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#### **Figure 64 - Claim Confirmation Email to Recipient**

### **4.2 Non-Claimant Email**

If the applicant does not submit a claim for the following month's benefits and they do not have a pending withdrawal application in the system, the system will send a notification email on the 26<sup>th</sup> day of each month to the program participant to notify them that benefits will not be distributed to them at the next distribution period. If they have questions, they can contact the Program Office at (571) 256-0962 or [WHSNCRTransitbenefit@mail.mil](mailto:WHSNCRTransitbenefit@mail.mil)

### **4.3 How to View Claim History**

The participant can view their “Claim History” by going to the program participant “Welcome” page at <https://mtbp.whs.mil/Participant/Welcome.aspx> and then point and click on the “Sign in to MTBP” button. This will display the “Status” page. The “Claim History” matrix is at the bottom of this page.

Claims History					
1 Claim					
Month	Enrolled Amount	Amount Claimed	Amount Spent	Claim Date	Actions
November 2014	245.00	130.00	Data Avail. Dec 2014	10/14/2014	<a href="#">View PDF</a>

**Figure 65 - Claim History Matrix**

The “Claim History” matrix includes:

- Month = associated benefit period
- Enrolled Amount = grand total commuting cost that was fully approved before the 16th of the month prior to the associated benefit period
- Amount Claimed = amount entered on the actual claim (up to the maximum)
- Amount Spent = dollar amount that was spent for that particular benefit period. The actual amount will not display until the first week of the following month. Otherwise, this field will display as “Data Available [MONTH YEAR]”.
- Claim date = date that the claim was submitted.
- Actions = link to view the claim as a PDF.e month of the claim “Month”, the most current application’s enrolled amount before the 16<sup>th</sup> of the previous month of the claim month “Enrolled Amount”; the amount claimed for the month “Amount Claimed”; the amount picked-up or spent for this month (this field will display “Data Avail Month Year” until this data is imported from WMATA which is usually the first week of the next month); the “Claim Date” is the actual date the claim was submitted; and the “View PDF” in the “Actions” column allows the participant to view their claim.

## 5. Unsubscribe from Program Alerts

Program Alerts are sent to inform program participants of changes that relate to the program. By default when a program applicant becomes enrolled, they are “**Subscribed**” to Program Alerts. To unsubscribe from program alerts, the user can use the “**Change Subscription**” button on the “**Enrollment Status**” page. This page is accessible by clicking on the “Sign-in to MTBP” button on the “MTBP Welcome Page”.

Applicants can go to the “**MTBP Welcome Page**,” click on the “**Sign in to MTBP**” button and the “**Change Subscription**” will display on the screen. If the applicant is currently subscribed, a “**Change Subscription**” link will display. The link toggles back and forth. See sample screen display below.

**Program Alert Notification**

Program Alerts are sent by the Mass Transportation Benefit Program to provide you with important information regarding the Program.

You are currently subscribed to MTBP Program Alerts.

[Change Subscription](#)

**Figure 66 - Check Enrollment Status Screen – Change Subscription Button**

## 5.1 Unsubscribe Via Program Alert Email Link

Program enrollees can unsubscribe from MTBP **Program Alerts** by clicking on the unsubscribe link located at the bottom of any program alert email they receive.

When the user clicks on the <https://mtbp.whs.mil/Unsubscribe> link, the following “Unsubscribe from Program Alerts” screen will display:



**Figure 67 - Unsubscribe from Program Alert Email Link**

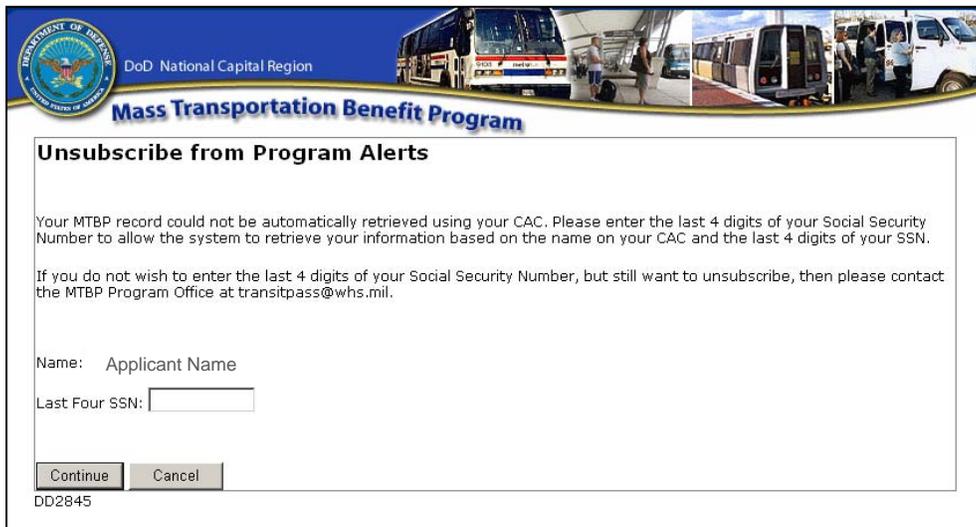
The participant clicks on the “Yes, I want to Unsubscribe” button and the following message displays.



**Figure 68 - Unsubscribe Successful Message**

Otherwise, the participant can click on, “No, Close this window” and end the unsubscribe action.

If the participant tries to “Unsubscribe” using the “Yes, I want to Unsubscribe” button and the system cannot find their record, the following screen will display.



**Figure 69 - Unsubscribe - System Can't Find Record**

The participant should type in their last four (4) of their SSN# and click on the “Continue” button. The following screen will appear if the system successfully completed the Unsubscribe action.



**Figure 70 - Unsubscribe Successful**

If the user is still having an issue when they try to unsubscribe, they should contact the MTBP Program Office via the contact information noted in the Introduction section of this document.

## 6. Miscellaneous Items

### 6.1 Website URLs

MTBP Application URL: <https://mtbp.whs.mil/>

MTBP Registration URL: <https://mtbp.whs.mil/Registration>

MTBP WHS Program URL: <https://www.whs.mil/mass-transportation-benefit-program>

## 6.2 Technical Issues

A list of technical issues with solutions is displayed below.

If the applicant is experiencing technical issues with the MTBP application, please contact your Information Technology (IT) Help Desk. The following are some common technical issues and their resolutions.

1. **Error:** You click on the link for the MTBP system within an email notification and get an error message or the system never seems to respond.

**Solution:** Copy and paste the link from the email into the Internet Explorer (IE) web browser URL field in a new Internet Explorer window.

2. **Error:** If you receive a page not found or a digital certificate error or other error message that prevents you from accessing the MTBP application.

**Solution:** Contact your IT Help Desk.

3. **Error:** I get a “Client Certificate Required” error message.

**Solution:** If you receive an error "Client certificate required". This is a client digital certificate problem that would occur if:

- (a) You cancelled the "Choose a digital certificate" window when you went to the site
- (b) You cancelled the "Choose a digital certificate" window when you went to the site and then tried to click on the link.

**Solution:** Close all Internet Explorer windows or, at minimum, close the last 1 or 2 Internet Explorer windows opened that were opened. Open a new Internet Explorer session window. By doing this, you force a brand new window to be used and, thus, prompt again for a certificate. If this does not resolve the issue, please contact your Information Technology (IT) Help Desk.

4. **Error: The MTBP Application does not work correctly on my Firefox browser.** If you are using Firefox and having problems with the application display or functionality.

**Solution:** Use Internet Explorer (IE) 6.0 or higher. Firefox is not supported by MTBP

5. **Error: I get “Couldn’t process request”**

**Solution:** Contact your IT Help Desk.

6. **Error: I get a “Session Time-Out Error”**

**Solution:** Close the browser window, open a new window and go to <https://mtbp.whs.mil>.

7. **Error:** You receive a page error, “Application Process Completed”, and want to make a change to the already submitted application.

**Solution:** Close the browser window, open a new window and go to <https://mtbp.whs.mil>.

8. **Error:** You do not receive an email notification.

**Solution:** Contact the Program Office first to ensure the email notification was sent. If the email notification was recorded in the MTBP system as sent, contact your IT Help Desk to ensure there are no issues with Outlook.

## 6.3 FAQ's

The most current Program Office list of Frequently Asked Questions (FAQs) is located at the following link: <http://www.whs.mil/mass-transportation-benefit-program.cfm>

However, some of the most commonly asked questions are listed below:

1. What is the DoD NCR Mass Transit Benefit Program (MTBP)?

**Answer:** The MTBP is an employer-provided mass transportation fare subsidy that is offered to eligible employees who use mass transportation for their commute to and from work. Employers assign the dollar value of their monthly commuting benefit directly to the employees' registered SmarTrip® cards.

2. How did the DoD Mass Transit Benefit originate?

**Answer:** Executive Order 13150 [external link], "Federal Workforce Transportation" requires Federal agencies to provide employee incentives to use mass transit to and from work.

3. Who is eligible to receive mass transit benefits?

**Answer:** To be eligible for the Mass Transportation Benefit Program (MTBP) you must be:

- A civilian, military, or NAF employee paid and employed by DoD
- Permanently stationed and working in the National Capital Region (NCR)
- The following types of employees are eligible to receive the subsidy:
  - Interns/Students employed and paid directly by DoD (i.e. interns/students hired through contractual agreements are not eligible)
  - Eligible paid interns/students hired for the summer months MUST reflect their dates of employment on the web-based application. If a paper application is completed, dates of employment must be listed on the second page and "summer hire" should be written at the top of the application. Unpaid interns are not eligible to receive transportation benefits
  - Members of Reserve Components who are performing active duty for more than 30 consecutive days are eligible to apply through this program. Reservists on Active Duty less than 30 days are eligible to receive transit benefits, but are not able to apply for those benefits through this program. Those individuals are required to apply through their local command. View DoD Instruction 1000.27 at URL: <http://www.dtic.mil/whs/directives/corres/pdf/100027p.pdf> Enclosure 4 for the specific policy.

The following types of employees are not eligible to receive the subsidy:

- Contractors
- Personnel that are TDY to the NCR from another area
- Personnel that are on detail to the NCR from an area outside the NCR

- Inactive Reserve personnel
  - Unpaid interns
  - Intergovernmental Personnel Act (IPA) employees (unless appointed to DoD). For more information see IPA Eligibility
  - Foreign Exchange employees
  - Personnel who possess a parking permit
4. Do I have to turn in my parking permit in order to receive transit benefits?  
**Answer:** Yes, if your agency provides you with free parking, parking at a reduced rate, or any other form of subsidized parking. Employees may not receive a parking pass and transit benefits at the same time. Your local parking office may grant exceptions on a daily basis. MTBP participants may receive up to 5 days of parking per month for personal or work related reasons, if needed.
5. Are vanpool riders authorized to receive transit benefits?  
**Answer:** Yes, if the vanpool is registered with WMATA (Washington Metropolitan Area Transit Authority – a.k.a. Metro), DoD employees riding in the vanpool may have their benefits electronically allocated to their vanpool operator's account. Please note that vanpool owner/operators are NOT eligible to receive benefits.
6. If I'm on TDY or in Long Term Training (LTT) am I eligible to receive mass transportation benefits at the TDY/LTT location?  
**Answer:** No. Personnel in a TDY or LTT status are not eligible to receive mass transportation benefits under the Mass Transit Fringe Benefit Program. Personnel in a TDY or LTT status may be reimbursed for travel to/from the temporary duty location, if authorized on their orders, by filing a travel voucher.
7. Why do I need to recertify?  
**Answer:** DODI 1000.27 “Mass Transportation Benefit Program” states that where enrollment is automated, 100% of participants must recertify annually. Please see <http://www.dtic.mil/whs/directives/corres/pdf/100027p.pdf>, enclosure 2, section 7.
8. How do I know if I need to recertify?  
**Answer:** A recertify reminder email will be provided to the user at the email address provided on their application.
9. How will I know if I've already used the web-based application?  
**Answer:** You can check whether or not you've used the web-based application at this link. <https://mtbp.whs.mil/Application/ApplicantEnrollmentStatus.aspx>
10. When do I need to recertify?  
**Answer:** The MTBP program participant is required to recertify by submitting an application on an annual basis in order to continue participation in the MTBP. The program participant will receive an automatic recertify reminder prior to the one year anniversary. Failure to recertify will result in withdrawal from the system.
11. **How do I recertify?**  
**Answer:** Those who complete and submit the web-based application will satisfy the recertification requirement. The link to apply is: <https://mtbp.whs.mil/Participant/Welcome.aspx>
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**12. Which 'enrollment request' should I choose when completing my application?**

**Answer:** Please choose the 'recertifying' option when completing the application. If the application is returned to you for correction at any point during the processing time period, please make sure to retain 'recertifying' as the intended action.

**13. After I've already submitted a web-based application, how will I know when to recertify in the future?**

**Answer:** The system will automatically remind participants to recertify based on the recertification date. Reminders are sent to the email specified in the application, so it is important that you maintain a current email address in the system.

**14. What if I don't have a CAC or access to a CAC enabled system?**

**Answer:** If you do not, nor will, have a CAC or access to CAC enabled system, you may submit a paper application.

**15. What happens if I don't recertify?**

**Answer:** Those who do not recertify within the timeframe prescribed will be withdrawn from the MTBP program.

**16. What if I no longer wish to be enrolled?**

**Answer:** If you no longer wish to participate in the MTBP, please withdraw using the web-based application. If you do not have a CAC/access to a CAC enabled-system, you may submit a paper application indicating your intention to withdraw. Further information on withdrawing from the program can be found on the MTBP website.

**17. For additional information, please visit the DoD NCR MTBP website:**

<http://www.whs.mil/mass-transportation-benefit-program.cfm>

**18. Questions? Please contact:** [WHSNCRTransitbenefit@mail.mil](mailto:WHSNCRTransitbenefit@mail.mil)