



FIXED ROUTE REDUCED FARE INFORMATION & APPLICATION

For persons with medical disabilities and individuals 65 of age and older

Read the application process carefully, make sure the application is complete before submitting: incomplete applications WILL NOT be accepted.

Replacement of Reduced Fare Card

If you need to replace a lost or stolen Reduced Fare photo ID card, skip this form and visit GET's administrative office or our Downtown Transit Center for replacement. A replacement fee set by GET, will be charged to replace lost or stolen reduced fare cards, and is subject to change without notice.

Section 1: Applicant Information

- ☐ 65 years and older
☐ Individual with qualified disabilities

Name: _____ Date of Birth: _____

Address: _____ Phone #: _____

City: _____ State: _____ Zipcode: _____

For all persons 65 years and older, or individuals who qualify for Medicare benefits: Applicants must provide proof of age and photo identification (state issued, student photo ID, ID issued by a human services or health agency, or any identification) that verifies the identity of the individual seeking reduced fare privileges.

Return completed application for processing in person to the address listed below between the hours of 8 AM and 5:00 PM, Monday through Thursday ONLY. Upon review and approval of completed application, reduced fare card will be issued.

DO NOT MAIL OR FAX. WE ACCEPT IN PERSON APPLICATIONS.

Return completed application and photo identification (state issued, student photo ID, ID issued by a human services or health agency, or any identification) that verifies the identity of the individual seeking reduced fare privileges in person to:

Golden Empire Transit District
1830 Golden State Ave.
Bakersfield CA, 93301

Notice: Reduced Fare applicant or parent/guardian must complete the authorization to Release and/or Provide information section (Top section of page 2). Once the Physician's Statement of Medical Disability Eligibility has been completed, signed, and dated by your medical provider or qualified professional - this application will only be valid 60 days from the date signed.

FOR GET INTERNAL USE ONLY

☐ NEW APPLICANT

☐ RECERTIFICATION

Verified by

Date

Section 2: Authorization for Physician to Release and/or Provide

I authorize _____, my medical provider (or qualified professional) to complete this application and verify my disability to Golden Empire Transit District. GET reserves the right to verify information provided in the processing of this application.

Name: _____ Birthdate: _____

Signature: _____ Date: _____

Golden Empire Transit has the authority to request information or documentation that will verify an applicant's eligibility for Reduced Fare privileges, it is also the right of the applicant not to provide the information requested, but failing to do so will result in disqualification for Reduced Fare eligibility. Please review Explanation of Reduced Fare Benefits for Individuals with Disabilities (page 3) for additional information.

Physician's Statement of Medical Disability Eligibility

Complete the section (s) addressing patients qualifying medical condition and Medical Provider & qualified Professional Certification. Incomplete applications will not be accepted.

To qualify for GET's Reduced Fare ID Card, your client/patient listed on the front of this application must have physical or mental condition(s) that fall within the medical eligibility criteria listed below that substantially limits a major life activity, such as caring for one's self, walking, seeing, hearing, speaking, breathing, learning, and/or working, and that further meets the legal standard for reduced fare eligibility.

Is the disability permanent? ☐ YES ☐ NO, the disability is expected to last: _____

Note: If a disability is temporary, it must last for at least 90 days to be eligible for a reduced fare.

PLEASE CHECK ALL CONDITIONS THAT APPLY:

See list of qualifying disabilities on page 4 for definitions.

- | | |
|---|--|
| <input type="checkbox"/> Non-Ambulatory | <input type="checkbox"/> Intellectually or Developmentally Disabled |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Autism |
| <input type="checkbox"/> Cardiopulmonary disease | <input type="checkbox"/> Mental Disorder (Specific Diagnosis: _____) |
| <input type="checkbox"/> Cerebrovascular accident | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Loss of extremities | <input type="checkbox"/> Learning & Other Disabilities |
| <input type="checkbox"/> Restricted Mobility | <input type="checkbox"/> Neurological Disabilities (Specific Diagnosis: _____) |
| <input type="checkbox"/> Sight disabilities | |

Can the rider use mass transportation without special accommodation ☐ YES ☐ NO, *attach accommodation request.*

Medical Provider & Qualified Professional Certification

Please do not submit applications for individuals who do not qualify for a medical disability reduced fare. Reduced fare ID cards are not issued for socioeconomic purposes. The medical disability must be identified in Title 49 Section 37.3 of the Code of Federal Regulations and must further meet the state and federal requirements for reduced fare eligibility. Not all disabilities under Section 37.3 qualify an individual to receive a reduced transit fare. For example, pregnancy, obesity, drug addiction, and alcohol addiction, taken alone, do not qualify an individual for a reduced transit fare. Please see the GET handout "Explanation of Reduced Fare Benefits for Individuals with Disabilities" for an explanation of the disabilities that qualify an individual for reduced fare on GET's Transit System.

Name (ONLY qualified professionals as listed on page 4)

Professional License Number (Required) or Title

Office Street Address

City, State, ZIP Code

Phone Number w/ Area Code Extension

Fax Number w/Area Code

I certify that I am a legally licensed physician by the State of California or qualified professional providing services to the client enrolled in the program. _____ (Patient or Client Name REQUIRED), is being treated or receiving services from me or my organization for a qualifying disability, the applicant is disabled as defined by the above criteria, & the information I have provided is true & correct under penalty of perjury according to the laws of the State of California.

Authorized Signature (Must be an original - copies/faxed signatures not accepted)

Date

Explanation of Reduced Fare Benefits for Individuals with Disabilities

As a recipient of federal funding, Golden Empire Transit (GET) is required to provide a discount fare to elderly and "handicapped persons" at a rate of not more than 50% of the regular fare. Under this discount fare program, a handicapped person" is defined as:

" ... those individuals who, by reason of illness, injury, age, congenital malfunction, or other permanent or temporary incapacity or . disability, including those who are non-ambulatory wheelchair-bound and those with semi-ambulatory capabilities, are unable without special facilities or special planning or design to utilize mass transportation facilities and services as effectively as persons who are not so affected."

(See 49 U.S.C. § 5307(d) (reduced-fare requirement); 49 C.F.R § 609.23 (reduced-fare requirement); 49 C.F.R. § 609.3 (definition of "elderly and handicapped persons"). **Reduced fares are only provided to individuals with a qualifying medical disability. Reduced fares are not provided for socioeconomic purposes. Please note that pregnancy, obesity, drug or alcohol addiction, and certain other conditions, taken alone, do not qualify as disabilities eligible for GET's reduced-fare program.** (See 49 C.F.R. § 609, Appendix A). Federal transit laws provide for a reduced fare only to individuals with a disability that both meets the definition of a disability under the Americans with Disabilities Act (see 49 C.F.R. § 37.3 definition of "Disability") and meets the requirement that because of the disability, the individual is unable, without special facilities, planning, or design, to utilize GET's transit facilities or services as effectively as individuals without a disability. This means that an individual with a recognized disability may fall under the civil rights protections for access to transportation services but will not qualify for a reduced fare. To establish an applicant's eligibility for reduced fare transit districts may request specific information and/or documentation that would verify the qualifying disability. (Compare 49 C.F.R. § 609.3 with 49 C.F.R. § 37.3.)

Therefore, to qualify for a reduced fare, the qualifying disability must result in a reduced capacity to perform actions necessary for the use of GET regular fixed-route services without receiving special training or assistance. If the diagnosis listed on the Application does not clearly meet this standard, the certifying health care professional will be asked to provide a narrative description identifying the specific features of GET fixed-route services that the applicant cannot use without special training or assistance. The "special training or assistance" must be different than the orientation required for all first-time users (disabled and non-disabled) of public transit. State law further extends the benefits of the federal reduced-fare program to the following individuals:

- (1) An individual who by reason of illness, injury, age, congenital malfunction, or other permanent or temporary incapacity or disability, including, but not limited to, any individual confined to a wheelchair, is unable, without special facilities or special planning or design, to utilize public transportation facilities and services as effectively as a person who is not so affected (see Cal. Pub. Util. Code§ 99206.5);
 - (2) An individual who has lost, or has lost the use of, one or more lower extremities or both hands, or who has significant limitation in the use of lower extremities, or who has a diagnosed disease or disorder which substantially impairs or interferes with mobility, or who is so severely disabled as to be unable to move without the aid of an assistant device (see Cal. Veh. Code§ 295.S(a));
 - (3) An individual who is blind to the extent that the person's central visual acuity does not exceed 20/200 in the better eye, with corrective lenses, as measured by the Snellen test, or visual acuity that is greater than 20/200 but with a limitation in the field of vision such that the widest diameter of the visual field subtends an angle not greater than 20 degrees (see Cal. Veh. Code§ 295.5(b));
 - (4) An individual who suffers from lung disease to the extent of any of the following:
 - a. The individual's forced (respiratory) expiratory volume for one second when measured by spirometry is less than one liter.
 - b. The individual's arterial oxygen tension (pO₂) is less than 60 mm/Hg on room air while the person is at rest (see Cal. Veh. Code§ 295.5 (c));
 - (5) An individual who is impaired by cardiovascular disease to the extent that the person's functional limitations are classified in severity as class III or class IV based on upon standards accepted by the American Heart Association (see Cal. Veh. Code§ 295.5(d));
- A temporary disability is defined as a qualifying disability (meeting the standards set forth above), which lasts more than 90 days. (See 49 C.F.R. §609, Appendix A, Question 2 and Cal. Pub. Util. Code § 99206.5.)

List of Qualifying Disabilities	Professional Authorized to Complete the Certification
1. NON-AMBULATORY. Impairments (such as an anatomical loss or paralysis) that require use of a wheelchair.	Licensed physician (MD or DO) or podiatrist
2. ARTHRITIS. American Rheumatism Assoc. may be used as a guideline for determination of arthritic disability Therapeutic Grade III, Functional Class 111, Anatomical State III, or worse as evidence of arthritic disability.	Licensed physician (MD or DO) or podiatrist
3. CARDIOPULMONARY DISEASE. Cardiopulmonary disease. Serious loss of heart or lung reserves as shown by X-ray, EKG, or other tests and, in spite of medical treatment, there is breathlessness, pain, or fatigue. Requires impairment at Class III or IV level.	Licensed physician (MD or DO)
4. CEREBROVASCULAR ACCIDENT. Ongoing debilitating effects following occurrence of cerebrovascular accident (stroke) or cerebral palsy.	Licensed physician (MD or DO) Licensed physician (MD or DO)
5. DIALYSIS. Individual who must use a kidney dialysis machine in order to live.	Licensed physician (MD or DO) or podiatrist
6. LOSS OF EXTREMITIES. Anatomical deformity of or amputation of hand(s) and/or feet or loss of major function.	Licensed physician (MD or DO) or podiatrist
7. RESTRICTED MOBILITY. Disabilities requiring the permanent use of a cane, crutches, long leg brace, or other orthopedic appliances to assist an individual in moving about.	Licensed physician (MD or DO) or podiatrist
8. SIGHT DISABILITIES. Result in the better eye, after best correction, which is 20/200 or less; or those individuals whose visual field is contracted (commonly known as tunnel vision): a) to 10 degrees or less from a point of fixation; or b) so the widest diameter subtends an angle no greater than 20 degrees; and c) who are unable to read information signs or podiatrist symbols for other-than-language reasons.	Licensed physician (MD or DO) or podiatrist
9. HEARING DISABILITIES. Impairment due to deafness or hearing incapacity that makes it impossible to communicate or hear warning signals where the hearing loss is 70 dB(A) or greater in the 500, 1000, and 2000 Hz ranges.	Licensed physician (MD or DO) or licensed audiologist
10. INTELLECTUAL DISABILITY OR DEVELOPMENTALLY DISABLED. Result in sub-average general intellectual functioning originating during the developmental period or from illness or accident later in life associated with impaired adaptive behavior. Individuals whose mental impairment substantially limits one or more of their major life activities AND are unable to use mass transit without special planning, design, or facilities.	Licensed physician (MD or DO), licensed psychologist, licensed psychiatrist, certified school psychologist, or case manager (supportive services provider)
12. NEUROLOGICAL DISABILITIES. (1) Substantial functional motor deficits in any of two extremities, loss of balance and/or cognitive impairments 3 months post stroke; or (2) Difficulty with coordination, communication, social interaction and/or perception, functional motor deficits, or significantly reduced mobility that result from a brain, spinal, or peripheral nerve injury or illness. A specific diagnosis is required.	Licensed physician (MD or DO), licensed psychologist, or licensed psychiatrist
13. EPILEPSY. Grand mal or psychomotor. Persons seizure-free for continuous period of six months disqualified.	Licensed physician (MD or DO), Licensed psychologist, or licensed psychiatrist
14. MENTAL DISORDERS. Individuals whose mental impairment substantially limits one or more of their major life activities AND are unable to use mass transit without request of reasonable modification of planning, design, or facilities from transit district. A principal diagnosis from the DSM IV classification in one of the following areas is required for eligibility: Organic Mental Disorders, Schizophrenic Disorders, Paranoid Disorders, Psychotic Disorders not elsewhere classified, Dissociative Disorders, Psychological Factors affecting physical condition, and Post-Traumatic Stress Syndrome. APPLICANTS SHOULD BE PREPARED TO SUBMIT REASONABLE MODIFICATION REQUESTS TO MEET ELIGIBILITY IN THIS CATEGORY SUPPLY DOCUMENTATION TO VERIFY QUALIFYING DISABILITY AND/OR CONDITIONS OF DISABILITY.	Licensed physician (MD or DO), licensed psychologist, or licensed psychiatrist
14. LEARNING DISABILITIES. An individual has significant learning, perception, and/or cognitive disability which results in a reduced capacity to perform actions necessary for use of GET's regular fixed-route services without receiving special training. Some conditions are excluded from eligibility, such as attention deficit disorder (ADD or ADHD), dyslexia, and lack of English proficiency. A special diagnosis is required.	Licensed physician (MD or DO), licensed psychologist, licensed psychiatrist, certified school psychologist, or case manager (supportive services provider)