

ALASKA RAILROAD CORPORATION SENIORS AND DISABLED HALF FARE POLICY

I. Policy. Pursuant to 49 U.S.C. § 5307(d)(1)(D), it is the policy of the Alaska Railroad Corporation (ARRC) that eligible seniors (age 65 and over), holders of Medicare cards, and certain individuals with disabilities shall be entitled to transportation fares during non-peak times that are not more than 50 percent of the amount charged for regular applicable fares during peak times. For purposes of this policy, "non-peak" shall mean the non-summer months of ARRC operation.

II. Eligibility.

- A. <u>Individuals Eligible</u>: Those eligible for ARRC non-peak half fare rates are:
 - 1. Any person who is at least 65 years of age.
 - 2. Any person who has a valid Medicare card issued by the U.S. Social Security Administration.
 - 3. Individuals who have been certified as "disabled" according to the definition established by the Federal Transit Administration, which is persons "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 public transportation facilities and services as effectively as persons who are not so affected."

B. Proof of Eligibility

- 1. Age: Those claiming eligibility by reason of age must present a picture ID issued by a government entity, such as a driver's license, a state-issued identification card, etc.
- Medicare: Those claiming eligibility by way of possession of a Medicare card must present a valid Medicare card, plus a picture ID issued by a government entity, such as a driver's license, a state-issued identification card, etc.
- 3. Disabled Individuals: Those claiming eligibility by way of a disability:
 - (a) Must complete the application in Appendix A to this Policy;
 - (b) Obtain the certification of a licensed medical provider in the state in which they reside that they meet one or more of the eligibility criteria set forth in Appendix A; and
 - (c) Return the completed application packet by mail, fax or email to:

Lead Passenger Service Agent
Alaska Railroad Corporation
P.O. Box 107500
Anchorage, Alaska 99510-750
(fax)(907) 265-2323
email: LeadPassengerServiceAgent@akrr.com

C. Duration of Eligibility:

- (a) Age: Those 65 years of age or older remain eligible for participation indefinitely.
- (b) Medicare: Individuals eligible on the basis of possession of a Medicare card remain eligible as long as they hold a valid Medicare card.
- (c) Disabled: Half Fare permits issued to individuals with disabilities will be valid for the period of time noted on the permit. Permits may be renewed if the disability continues beyond that date, provided the individual completes a renewal process similar to the initial certification process. Individuals certified by their medical provider as permanently disabled may receive permanent permits.
- III. Availability of Half Fare Rates. Half fare rates under this policy are available during the ARRC's non-summer months of operation, or from approximately mid-September of one year through mid-May of the following year. Exact dates will be available from ARRC Reservations Agents by July 31 of each year.

IV. Notice of Half-Fare Policy.

- A. ARRC Half-Fare rates shall be published on the ARRC's website (<u>www.alaskarailroad.com</u>), in all ARRC schedules and brochures, and in all other places that regular ARRC fares are published.
- B. This policy and the Q&A's entitled "Alaska Railroad Corporation Seniors and Disabled Half Fare Program" shall be published on the ARRC's website and on the ARRC employee internal website.
- C. The ARRC Passenger Marketing and Guest Services Department will issue an annual reminder to employees regarding the availability of half fare rates under this Policy.



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APPENDIX A CERTIFICATION OF ELIGIBILITY

Applicant's Release

Please print

I hereby authorize the medical care provider to release any information necessary to complete this application for eligibility for participation in the ARRC Half Fare Program. I acknowledge that this information is confidential and will not be released by the ARRC without my permission or a court order. I understand that the information will be used by the ARRC to determine my eligibility for half fare travel on the ARRC during non-peak times. I further understand that if any of the statements made on this application are false or inaccurate, I will lose the privilege of participating in the ARRC Half Fare Program, and may be subject to criminal prosecution.

Name			
First	Middle	Last	
Addus			
AddressStreet	City	Ctata	7:0
Jueet	City	State	Zip
D. C. C.			
Date of Birth	Phone		
Applicant's Signature	Date		

This Section to be Completed by Licensed Health Care Provider:

Licensed in the State of Applicant's Residence:

Physician (M.D.)

Physician's Asst.

Psychiatrist

Advanced Registered Nurse

Psychologist (Ph.D.)

Practitioner

Audiologist certified by the American Speech, Language and

Hearing Assoc.

Signatures of health care providers other than those above not acceptable.

Instructions to Health Care Provider:

- 1. Applicant must meet at least one of the criteria and conditions listed in the attached Medical Eligibility Criteria.
- 2. The specific Medical Eligibility Criteria number must be noted in the space provided.
- 3. You must certify that, despite the Applicant's certified disability, the Applicant is nonetheless physically or mentally capable of using the ARRC's transportation services, which may include a trip by rail of up to twelve (12) hours in length traveling through non-urban areas offering extremely limited accommodations.

I certify that _		meets the Medical Eligibility				
		Applicant	ζ ,			
Criter	ia	Carling and Carling and				
		Section and Subsection)				
Please	check t	he appropriate box(es):				
Yes	No					
□ □ disabi	lity must	The disability is temporary. Specify lengtles be expected to last at least three months be		temporary		
		The disability is permanent.				
	□ e a trip k nmodatio	Applicant is physically and/or mentally ca by rail of up to twelve (12) hours in length to ons.				
Verific	cation of	Health Care Provider:				
Please	Print:					
Name		Р	hone			
Addre	ss					
State	License I	No				
Signat	ure:		Pate			

I understand that if any of the representations made on this application form are false, I will be subject to criminal prosecution.



ALASKA RAILROAD CORPORATION SENIORS AND DISABLED HALF FARE POLICY MEDICAL ELIGIBILITY REQUIREMENTS

Section 1. Non-Ambulatory Disabilities

Wheelchair-User. Impairments which, regardless of cause, confine individuals to wheelchairs.

Section2. Semi-Ambulatory Physical Disabilities

- 1. <u>Restricted Mobility</u>. Impairments that cause individuals to walk with difficulty including, but not limited to, individuals using a long leg brace, a walker or crutches to achieve mobility, or birth defects and other muscular/skeletal disabilities, including dwarfism, causing mobility restriction.
- 2. <u>Arthritis</u>. Persons who suffer from arthritis causing a functional motor defect in any two major limbs. (American Rheumatism Association criteria may be used as a guideline for the determination of arthritic handicap; Therapeutic Grade III, Functional Class III, or Anatomical State III or worse is evidence of arthritic handicap.)
- 3. <u>Loss of Extremities</u>. Persons who suffer anatomical deformity of or amputation of both hands, one hand and one foot, or lower extremity at or above the tarsal region. Loss of major function may be due to degenerative changes associated with vascular or neurological deficiencies, traumatic loss of muscle mass or tendons, bony or fibrous ankylosis at unfavorable angle, or joint subluxation or instability.
- 4. <u>Cerebrovascular Accident</u>. Persons displaying one of the following, four months post-CVA:
 - A. Pseudobulbar palsy; or
 - B. Functional motor defect in any of two extremities; or
 - C. Ataxia affecting two extremities substantiated by appropriate cerebellar signs of proprioceptive loss
- 5. Respiratory. Persons suffering respiratory impairment (dyspnea) of Class 3 or greater as defined by "Guides to the Evaluation of Permanent Impairment: The Respiratory System," Journal of the American Medical Association, 194:919 (1965).
- 6. <u>Cardiac</u>. Persons suffering functional classification III or IV and therapeutic classifications C, D, or E cardiac disease as defined by Diseases of the Heart and Blood Vessels Nomenclature and Criteria for Diagnosis, New York Heart Assoc. (6th Edition).
- 7. <u>Dialysis</u>. Persons who must use a kidney dialysis machine in order to live.
- 8. <u>Disorders of Spine</u>. Persons disabled by one or more of the following:
 - A. Fracture of vertebra, residuals, or with cord involvement with appropriate motor and sensory loss; or
 - B. Generalized osteoporosis with pain, limitation of back motion, paravertebral muscle spasms, and compression fracture of vertebra; or

- C. Ankylosis or fixation of cervical or dorsolumbar spine at 30 degrees or more of flexion measured from the neutral position and one of the following:
 - i. Calcification of the anterior and lateral ligaments as shown by x-ray; or
 - ii. Dilateral ankylosis of sacroiliac joints and abnormal apophyseal articulation as shown by x-ray.
- 9. Nerve Root Compression Syndrome. A person disabled due to any cause by:
 - A. Pain and motion limitation in back of neck; and
 - B. Cervical or lumbar nerve root compression as evidenced by appropriate radicular distribution of sensory, motor, and reflex abnormalities.
- 10. Motor. Persons disabled by one or more of the following:
 - A. Faulty coordination or palsy from brain, spinal, or peripheral nerve injury; or
 - B. functional motor deficit in any two limbs; or
 - C. Manifestations significantly reducing mobility, coordination, and perceptiveness not accounted for in prior categories.
- 11. HIV Disease. A person disabled by HIV disease who meets Social Security eligibility criteria.

Section 3. Visual Disabilities

- 1. Persons disabled because of:
 - A. Visual acuity of 20/200 or less in the better eye with correcting lenses; or
 - B. Contraction of visual field:
 - i. So the widest diameter of visual field subtending an angular distance is no greater than 20 degrees; or
 - ii. To 10 degrees or less from the point of fixation; or
 - iii. To 20 percent or less visual field efficiency.
- 2. Persons who, by reason of a visual impairment, do not qualify for a Driver's License under regulations of the Alaska State Department of Motor Vehicles.

Section 4. Hearing Disabilities

- 1. Persons disabled because of hearing impairments manifested by one or more of the following:
 - A. Better ear pure tone average of 90 dB HL (unaided) for tones at 500, 1000, 2000 Hz; or
 - B. Best speech discrimination score at or below 40% (unaided) as measured with standardized testing materials.
- 2. Eligibility may be certified by a physician licensed by the State of Alaska or by an audiologist certified by the American Speech, Language, Hearing Association.

Section 5. Neurological Disabilities

- **1.** Epilepsy.
 - A. Persons disabled by reason of:
 - i. A clinical disorder involving impairment of consciousness, characterized by uncontrolled seizures (grand mal or psychomotor) substantiated by EEG occurring more frequently than once per week in spite of prescribed treatment with:
 - a. Diurnal episodes (loss of consciousness and convulsive seizure); or
 - b. Nocturnal episodes which show residuals interfering with activity during the day; or

- c. A disorder involving petit mal or mild psychomotor seizures substantiated by EEG occurring more frequently than once per week in spite of prescribed treatment with:
 - 1. Alteration of awareness or loss of consciousness: and
 - 2. Transient postictal manifestations of conventional or antisocial behavior.
- B. Persons exhibiting seizure-free control for a continuous period of more than six (6) months duration are not included in the statement of epilepsy defined in this section.
- 2. <u>Neurological Handicap</u>. A person disabled by cerebral palsy, multiple sclerosis, muscular dystrophy, or other neurological and physical impairments not controlled by medication.

Section 6. Mental Disabilities

- 1. <u>Developmental Disabilities</u>: Permanent Permit. Persons disabled due to mental retardation, autism, or other conditions found to be closely associated with mental retardation or to require treatment similar to that required by mentally retarded individuals and:
 - A. The disability originates before such individual attains age 18.
 - B. The condition has continued, or can be expected to continue, indefinitely,
 - C. The condition substantially limits one or more major life activities on an ongoing basis.
- 2. <u>Adult Cognition Impairments</u>: Permanent Permit. Persons who by reasons of traumatic brain injury, illness, or other accident occurring after age 18, experience ongoing impairment(s) in cognition that substantially limit(s) one or more major life activities, including individuals who meet SSA, SSI, or SSDI eligibility criteria.
- 3. <u>Serious Persistent (Chronic) Mental Illness</u>: Permanent Permit. Individuals with a mental illness with symptoms chronic in nature who experience a significant limitation in their ability to take part in major life activities AND who meet one of the following:
 - A. Having a mental disorder diagnosis based on criteria in the Diagnostic and Statistical Manual of Mental Disorders (DSM);
 - B. Living in a group/boarding home setting, receiving state or federal financial assistance and participating in a state or federally funded work activity center or workshop;
 - C. Permanently placed in a supervised or supported living arrangement;
 - D. Addressing mental health needs by participating in any training/rehabilitation program or therapy established under federal, state, or municipal government agencies.
- 4. <u>Serious Mental Illness (Acute at-risk)</u>: Temporary Permit. Individuals with a mental illness who are currently experiencing a significant limitation in their ability to take part in major life activities AND who meet one of the following:
 - A. Having a mental disorder diagnosis based on criteria in the Diagnostic and Statistical Manual of Mental Disorders (DSM);
 - B. Living in a group/boarding home setting, receiving state or federal financial assistance and participating in a state or federally funded work activity center or workshop;
 - C. Living at home under supervision and participating in a state or federally funded work activity center or workshop;
 - D. Addressing mental health needs by participating in any training/rehabilitation program or therapy established under federal, state, or municipal government agencies.