



VIRGINIA RAILWAY EXPRESS

## APPLICATION FOR DISABILITY REDUCED FARE

### PART A: APPLICANT INFORMATION (ALL INFORMATION MUST BE COMPLETED)

REDUCED FARES  
VIRGINIA RAILWAY EXPRESS  
1500 KING STREET  
SUITE 202  
ALEXANDRIA, VA 22314  
Ph: 703-684-1001/TTY: 703-684-0551

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ (E-Mail must be included in order to process)

#### EMERGENCY CONTACT INFORMATION

\_\_\_\_\_  
(Name) (Phone)

Do you require use of the lift to access VRE trains? \_\_\_\_\_

By signing below, you are acknowledging that the above information is true and accurate and that you qualify for VRE's Reduced Fare ID under the stated guidelines on Page 2 of the application:

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## PART B: GUIDELINES FOR HEALTH CARE PROFESSIONALS

The following guidelines are to be used to evaluate applicants for the VRE Reduced Fare ID provided to **People with Disabilities (Persons with physical or mental impairments that substantially limit one or more major life activities as defined by the Americans with Disabilities Act AND that prevents them from using mass transit effectively without special planning, design or accommodations).**

Health care professionals with questions may call for assistance at 703-684-1001.

### COVERED DISABILITIES

1. **NON-AMBULATORY:** An individual is unable to walk and requires the use of a wheelchair or other mobility device.
2. **SEMI-AMBULATORY:** An individual has a chronic condition, which substantially limits the ability to walk, or is unable to walk without the use of a caliper leg brace, walker or crutches.
3. **AMPUTATION:** An individual has an amputation of a hand, arm, foot, leg.
4. **STROKE:** An individual has substantial functional motor deficits in any of two extremities, loss of balance and/or cognitive impairments three months past stroke.
5. **PULMONARY OR CARDIAC CONDITIONS:** An individual has a pulmonary or cardiac condition resulting in marked limitation of physical functioning and dyspnea during activities such as climbing stairs and/or walking short distances. \*If diagnosis is moderate to severe asthma, please state whether: a) Individual has been on systemic medication for the immediate past six months, **OR** b) Individual has been required to use fast-acting inhaler for three or more episodes per week for the immediate past six months.
6. **BLIND OR LOW VISION:** An individual whose visual acuity in the better eye, with correction, is 20/200 or less, or who has tunnel vision to 10 degrees or less from a point of fixation or the widest diameter subtends an angle no greater than 20 degrees.
7. **DEAF OR HARD OF HEARING** (This guideline **MUST** be certified by either a licensed audiologist or a licensed otolaryngologist who is relying upon an audiogram for diagnosis): An individual whose hearing loss (HL) is 70 dB or greater in the 500, 1000, 2000 Hz ranges in both ears, regardless of the use of hearing aids.
8. **NEUROLOGICAL CONDITIONS:** An individual has difficulty with coordination, communication, social interaction and/or perception from a brain, spinal or peripheral nerve injury or illness, has functional motor deficits, or suffers manifestations that significantly reduce mobility.
9. **INTRACTABLE EPILEPSY:** An individual has had at least one tonic-clonic seizure in the past six months, despite taking prescribed medication.
10. **DEVELOPMENTAL OR LEARNING DISABILITIES:** An individual has a significant learning, perceptual and/or cognitive disability (that has been specifically diagnosed) and that is likely to affect their ability to commute. Excluded conditions include attention deficit disorder (ADD) and Dyslexia.
11. **MENTAL ILLNESS:** An individual whose mental illness is chronic, long-term and includes a substantial disorder of thought, perception, orientation, or memory that impairs judgement and behavior. A specific diagnosis with brief explanation is required. Exclusions include Major Depressive Disorder, Bipolar Disorder, Anxiety, and PTSD unless proven with direct doctor certification that the condition affects the individual's ability to drive or use mass transportation.
12. **CHRONIC PROGRESSIVE DEBILITATING CONDITIONS:** An individual who experiences debilitating diseases, autoimmune deficiencies, or progressive and uncontrollable malignancies, any of which are characterized by fatigue, pain and/or changes in mental status that affect the applicant's mobility and/or ability to commute.

## PART C: HEALTH CARE PROFESSIONAL CERTIFICATION (MUST BE COMPLETED)

Applicant's Authorization: By signing below, I hereby authorize the health care professional completing this application to release to the Virginia Railway Express information about my disability in order to verify my eligibility for a VRE Reduced Fare ID card.

Applicant's Printed Name

Signature of Applicant

Date

(For applicants Under the Age of 18, a Signature of Parent or Legal Guardian is Required)

**This section must be completed by a licensed physician or certified health care professional as described on Page 4 and accompanied with their business card and must be signed within 60 days of filing the application with VRE. This information will remain on confidentially on file with VRE and is not subject to public view.**

NAME OF DOCTOR OR HEALTH CARE PROFESSIONAL: (PLEASE PRINT CLEARLY)

OFFICE PHONE NUMBER

LICENSE NUMBER/STATE ISSUED

PHYSICIAN SPECIALTY (i.e., Osteopath)

STREET ADDRESS

CITY

STATE

ZIP

Review Part B: Guidelines for Health Care Professionals on Page 2. Select all appropriate guideline number(s) and provide detailed information below regarding the applicant's disability. Specific DSM or ICD code(s) are required. (MUST BE COMPLETED TO DETERMINE ELIGIBILITY)

Guideline Number(s): \_\_\_\_\_

Complete DSM or ICD Code(s): \_\_\_\_\_

Specific Diagnosis: \_\_\_\_\_

1. Check one or more of the below that the applicant requires for using public transportation:

☐ Elevators ☐ Wheelchair Lift ☐ Immediate Accessibility to Restroom on Train ☐ None Required

2. Does applicant require a personal care attendant to utilize public transportation? **Y N** (If YES, a referring physician's letter is required explaining the nature of the disability and reason for special assistance using VRE trains).

3. Expected duration of disability: (HCP, please initial where appropriate-do not place checkmark)

☐ **Temporary:** Short-term conditions that last 90 days but likely to improve within one year

☐ **3 Months** ☐ **6 Months** ☐ **9 Months** ☐ **1 Year**

☐ **Long Term:** Conditions with potential for improvement or long periods of remission

(1-3 Year card: Determination of length made by VRE based upon certified conditions)

☐ **Permanent:** Life Altering and/or Debilitating Conditions with absolutely no expectation of improvement with time, through use of medicine and/or rehabilitation.

**SIGNATURE of DOCTOR or HEALTH CARE PROFESSIONAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

False certification may be reported to the licensing agency under District of Columbia Code Annotated 14-404. VRE reserves the right to: (1) verify the validity of the health care professional providing the certification (2) make the final determination on an applicant's eligibility for the Reduced Fare ID card and Attendant Eligibility, and (3) retain a copy of the application.

## REDUCED FARE ID CARD FOR PERSONS WITH DISABILITIES GUIDELINES and INFORMATION

VRE offers a 50% discount off the cost of our tickets to patrons with disabilities. Discounted tickets can be purchased and validated on the VRE Mobile app. Passengers must have a valid VRE Reduced Fare ID linked to the VRE Mobile app to purchase tickets at the discounted rate.

VRE does not accept VA service-connected “disability” cards as a qualifying form of identification as many medical conditions rated as disabilities by the VA are not considered as such under the FTA’s guidelines for mass transit organizations (i.e., sleep apnea is often highly rated by the VA but is not considered a disability in the majority of cases).

An individual with a Medicare card may obtain a VRE Reduced Fare ID card by completing only Section A of the application along with providing a copy of the Medicare card and a current headshot photo for the new ID. See Page 5 for submitting options.

All other individuals requesting a VRE Reduced Fare ID will need to submit a fully completed application which includes Section A filled out and signed by the applicant and Section C completed and signed by the physician. A current photo headshot is required in order to produce the ID card.

Once you receive your VRE Reduced Fare ID card, you must always carry it with you while riding VRE trains. Our conductors have the right to see the qualifying ID used to purchase the discounted ticket and may issue a summons for fare evasion if no ID is available.

A Disabled Attendant pass is available for persons needing an attendant to help them navigate the VRE system. To be eligible, the authorizing physician must answer “yes” to Question 2 in Part C and provide a signed letter explaining the nature of the disability and why special assistance is needed for commuting on VRE trains. Upon receipt and verification, VRE will review the request and, if approved, create a special fare exempt pass for an attendant.

### GUIDELINES FOR COMPLETING THIS APPLICATION

1. Read the entire application and complete Part A
2. Forward Part C to your physician/health care professional
3. Your health care professional must review Part B: Guidelines for Health Care Professionals to determine the qualifying condition to be included in Part C.
4. Submit Part A and Part C along with a current headshot photo for review. If approved, a Reduced Fare ID card will be produced and mailed to the address provided in Section A. See Page 5 for submitting options.

### DEFINITION OF QUALIFYING HEALTH CARE PROFESSIONALS

One of the following health care professionals may certify qualification for VRE’s Reduced Fare ID card. VRE may contact the health care professional for verification. VRE makes the final eligibility determination.

- Licensed physician certifying in area of normal practice
- Licensed osteopath certifying in area of normal practice
- Licensed podiatrist may certify for Guideline 2: Semi-Ambulatory
- Licensed optometrist or ophthalmologist certifies for Guideline 6: Blind or Low Vision
- Licensed audiologist licensed otolaryngologist **must** certify for Guideline 7: Deaf or Hard of Hearing
- Licensed clinical psychologist may certify for those applicants who are under the age of 21 and for only Guideline 10: Developmental or Learning Disabilities affecting the individual’s ability to commute.

**Please note: We are unable to accept certifications signed by Physician Assistants, Nurse Practitioners or Registered Technicians. Eligibility determinations are governed by the Reduced Fare ID card policies in effect on the date the application is received by VRE.**

## **SUBMITTING YOUR APPLICATION**

Mail or drop off the completed application (including the filled in and signed Section A and completed and signed Section C) to:

**Reduced Fares  
Virginia Railway Express  
1500 King Street  
Suite 202  
Alexandria, VA 22314**

**Hours for drop off: Monday-Friday 7:00am-6:30pm**

**VRE does not accept emailed or faxed applications.**

Once the application is received, it will be submitted for review. We will notify you via the email address included on Section A if there is a problem processing the application. If it is accepted, we will contact you requesting a current headshot photo to be emailed to us at [GoTrains@vre.org](mailto:GoTrains@vre.org) which will be applied to the ID card. The ID card will be printed and mailed to you at the address included in Section A. The entire process takes approximately 10 business days. IDs are not produced on-the-spot for applications dropped off at the office.

During the application process, passengers with disabilities who need to ride the VRE will pay full fare. No refunds will be provided.

## **OWNERSHIP OF A VRE REDUCED FARE ID CARD**

The ID number on the card can be linked to the VRE Mobile Ticketing app to enable the purchase and activation of reduced fare tickets on your phone.

The VRE Reduced Fare card must always be in the possession of the cardholder while riding a VRE train. Train conductors may ask to see the qualifying ID for anyone riding on discounted tickets. Refusal to comply will result in cancellation of the card and vendor notification. ID cards used in any unlawful manner will be confiscated.

## **REPLACING LOST VRE REDUCED FARE ID CARDS**

If you lose your VRE Reduced Fare ID Card, you may obtain a replacement by contacting our office at 800-743-3873.

## **RENEWING VRE REDUCED FARE ID CARDS**

No ID cards have longer than a 5-year expiration date to ensure current information and a current photo is on file. Approximately sixty (60) days before your long-term or permanent card expires, please contact customer service at 703-684-1001 to determine what will be needed to update your ID. If your ID card has expired, you must fill out Section A of a new application with your current information and your physician must complete Section C including contact information and certification credentials.