

# The JO – Special Edition

(A service provided by Johnson County Transit)

Providing affordable, curb-to-curb transportation for eligible residents of Johnson County.



For information concerning The JO – Special Edition Program, please contact Johnson County Transit at 913-782-2210.





## The JO – Special Edition Service Highlights

- **Eligibility:** The JO – Special Edition provides affordable curb-to-curb service for Johnson County residents who are sixty (60) years of age or older, **or** have a documented disability **or** are within established low-income guidelines. Children ages 13 to 18 with a documented disability may ride for medical appointments only.
- **Trip Purpose:** Eligible riders may use The JO – Special Edition for any trip purpose within the Johnson County service area (with the exception of children ages 13 to 18 as mentioned above). The JO – Special Edition travels into specified areas of Kansas City, Kansas and Kansas City, Missouri for medical trips only.
- **Service Area:** The JO – Special Edition has a designated service area bounded by 159<sup>th</sup> Street on the south, K-7 and Hedge Lane on the west, State Line on the east and County Line on the north.

Special Edition is open to all Johnson County residents who are eligible for the service. However, if the eligible rider lives outside of the defined service area, the rider is responsible for transportation to and from the closest service boundary. If a rider is traveling from inside the service area to a destination outside of the service area, then the rider is responsible for transportation from the service boundary to their destination and back.

- **Operating Days and Hours:** The JO – Special Edition operates Monday through Friday from 6:00 a.m. to 6:00 p.m. except on the following county holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, and Christmas Day. The service is provided on a first come, first served basis. To reserve a ride, call 913-362-3500. Riders wishing to communicate through Kansas Relay can call 1-800-766-3777.

Please refer to the following pages for more information about The JO – Special Edition. If you have any questions, please call Johnson County Transit at 913-782-2210.

# **The JO – Special Edition General Information**

## **What is The JO – Special Edition?**

The JO – Special Edition, a shared ride program administered by Johnson County Transit (JCT), provides affordable curb-to-curb transportation for residents of Johnson County who are eligible for the service. Please refer to the Special Edition Service Highlights “Eligibility” section for eligibility criteria.

## **Service Area**

Refer to the Special Edition Service Highlights “Service Area” section on page 3 for detailed service area description.

The JO – Special Edition is available for curb-to-curb service to rural areas of Johnson County on designated service days when three or more riders have requested trips on that day. Spring Hill residents may ride on Mondays; DeSoto on Tuesdays, Edgerton and Gardner on Thursdays, and the Stanley/Stillwell area on Fridays. For these cities, trips within the city limits are also available on those days.

## **How do I apply?**

1. Determine if you are eligible for the service by reviewing the following:

- are you a resident of Johnson County, Kansas?
- are you sixty years of age or older, or have a documented disability or are within established low-income guidelines?
- do you live within the designated service area or have means of travel to reach the designated service area?

If you answered **yes** to all of the above questions, you are eligible for the service and can proceed to the next step. If you answered **no** to any of the above questions and would like to discuss your eligibility status, please call 913-782-2210.

2. Complete “The JO – Special Edition Application” located on the white sheet of paper at the end of this application packet and send it to:

Johnson County Transit  
 1701 West 56 Highway  
 Olathe, Kansas 66061  
 Attn: Pat Heitschmidt

Please make sure you fill out the entire application, listing any special needs and also the emergency contact information on the back of the application and submit to Johnson County Transit. Please allow at least two (2) weeks for the processing of applications.

If you wish to apply for a “**reduced fare**” status, please fill out the yellow “The JO - Special Edition Reduced Fare Application and Reduced Fare Request Form”, and submit to the following address:

Human Services and Aging  
 11811 S. Sunset Dr., Suite 1300  
 Olathe, Kansas 66061  
 Fax: 913-715-8825  
 Attn: Linda Holly

To determine if you qualify for the reduced fare program, please refer to the table below. The monthly income for appropriate household size is the maximum income allowable to be eligible for low-income status.

Reduced Fare Income Guidelines:

HOUSEHOLD SIZE	MONTHLY INCOME
1	<b>\$1,225</b>
2	<b>\$1,650</b>
3	<b>\$2,075</b>
4	<b>\$2,500</b>
5	<b>\$2,925</b>
6	<b>\$3,350</b>
7	<b>\$4,719</b>
8	<b>\$5,250</b>

3. When the registration is returned from the certifying agency, staff will process the registration and mail an ID card and Special Edition policies to the eligible rider.

### **How do I use the service after receiving my ID card?**

Once a rider receives an ID card, he/she can call the Special Edition scheduler at 913-362-3500 to schedule a ride. Riders wishing to communicate through Kansas Relay may call 1-800-766-3777. Scheduling is done Monday through Friday from 8:00 a.m. to 5:00 p.m. Special Edition rides are based on a first come, first served basis, with the exception of the premium reservation service riders. Riders should request rides at least 48 hours in advance or up to a maximum of 14 days in advance.

Riders should review the Special Edition Guidelines and Policies before using the service. By using The JO – Special Edition, a rider is verifying that he/she understands the policies and procedures of the service and will abide by them.

### **What are the fares?**

Fares are based on one-way trips. The regular Special Edition fare is based on “as the crow flies” mileage and ranges from \$5.00 per one-way for trips that are 10 miles or less, \$6.00 per one-way for trips that are 10.01 to 20 miles, and \$7.00 per one-way for trips that are 20.01 or more miles per way.

Residents who qualify for the reduced fare program pay \$3.10 per one-way for trips within Johnson County and \$3.10 per one-way plus \$.75 per zone for trips outside of Johnson County. See the Service Area/Zone Map on page 2 for zone listings.

For your convenience, Johnson County Transit offers a Ten Ride Ticket that can be purchased from the driver or by mailing your check to: Johnson County Transit, 1701 West 56 Highway, Olathe, Kansas 66061. A separate 10 ride ticket is available for \$7.50 to reduced fare riders to cover the zone fare for trips outside of Johnson County. All tickets are non-transferable and non-refundable.

Passengers are required to pay each time they board a vehicle. Aides travel free of charge if there is a physician’s statement on file at the Johnson County Transit office that states the rider requires assistance when traveling. (Note: Aides are not provided by Johnson County Transit, they must be provided by the rider.) Special Edition will not bill riders nor will the drivers accept checks for a round trip. Please have the exact fare or a check for each one-way trip. Drivers do not carry change.

## The JO – Special Edition Guidelines

- Schedule both your pick-up and return trips at the same time. If you are scheduling a ride to a medical appointment and do not know what time you will need a return trip, you may schedule a “will call” trip. A “will call” trip allows you to call the Special Edition dispatcher when you are ready for the return trip. You will be picked up within one (1) hour in Johnson County or within ninety (90) minutes if you are outside of Johnson County.
- Drivers are not allowed to take trip reservations for passengers.
- On your travel day, you must be ready fifteen (15) minutes before your scheduled pick-up time. Special Edition trips are scheduled with a fifteen (15) minute window. **This means that you can be picked up fifteen (15) minutes before or fifteen (15) minutes after your scheduled time.**
- **Drivers wait no longer than five minutes for a scheduled pick-up.** For example, if your appointment is scheduled for 8:00 a.m. and the driver arrives at 7:45 a.m., you must board the vehicle by 7:50 a.m. or the driver will be dispatched to the next stop. Passengers should board the vehicle as soon as it arrives. **Riders will be charged for the trip if they fail to board the vehicle.** If the rider requests it and the schedule permits, a vehicle may return at a later time. **Riders will be charged for the additional trip.** Please be aware that the drivers are on a tight schedule.
- Passengers are required to board the vehicle that has been dispatched. The Special Edition fleet consists of minivans and wheelchair accessible vans.
- The vehicle will not stop at any location other than what has been scheduled.
- All passengers are required to wear seat-belts while being transported by Special Edition.
- Special Edition is a shared ride system. Riders may be onboard up to sixty (60) minutes. Please let the scheduler know your appointment time when you call in to request your trip.

- If you use a wheelchair or a scooter, you must be properly restrained during loading, unloading, and transport. This means that all securement devices must be used and in good working order. This includes, but is not limited to, lap belts, brakes, shoulder restraints, wheelchair restraints, etc. If your mobility device cannot be properly secured, you will either need to transfer to a seat or you will not be transported.
- If you use a wheelchair or a scooter, remember to state this when reserving your ride(s). Riders must have adequate sidewalks, ramps and driveways if they are to be transported by Special Edition. It is **not** the driver's responsibility to clear ramps, driveways or sidewalks of debris, snow, ice, etc.
- Wheelchairs and scooters must back onto the lift during loading. Riders are not allowed to face the interior of the bus while on the lift.
- Riders who require oxygen must have a physician's statement on file at the Johnson County Transit office stating that the rider's use of oxygen is life enhancing, not life sustaining.
- If an Aide will accompany you, you must state this when reserving a ride. Your aide requires a separate ID card/number and rides free of charge.
- **Drivers only go to the exterior door of the building.** Drivers will not enter private residences, apartment buildings, townhomes, condominiums, mobile homes, nursing homes, etc. Drivers will **not** enter businesses, doctors buildings, hospitals, retail shops (department or grocery stores, etc.) or office buildings.
- Drivers are not qualified to render medical aid. It is suggested that a rider with any potentially serious medical condition obtain the consent of a physician prior to using this transportation system.
- Un-needed or unwanted trips must be cancelled at least two (2) hours before your scheduled pick-up time. To cancel a trip, please call 913-362-3500. If it is necessary to cancel an early morning pick-up, call 913-362-3500 and leave your cancellation on the answering machine. If you fail to give adequate notice, you will be charged for the trip. You will be given a cancellation number when you cancel a trip. If you leave the cancellation on the answering machine, you must call back to get your cancellation number.

Updated November, 2008

# The JO – Special Edition Regular Fare Application

I have reviewed and fully understand the qualifications, guidelines and policies of The JO – Special Edition and would like to request an ID card. (Please use black ink)

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**Name** (please print or type)

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**Address**

**Apt. #**

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**City**

**State**

**Zip Code**

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**Telephone (Home)**

**Telephone (Work)**

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**Date of Birth**

**E-mail Address**

**Are you 60 years of age or older?** \_\_\_\_\_

**Disabled\*?** \_\_\_\_\_

\*If you are disabled, you must enclose a statement from a physician stating the nature of your disability. **If an aide is necessary for travel, a physician's letter must state this as well.**

Do you:

\_\_\_\_\_ use a standard wheelchair?

\_\_\_\_\_ use a electric wheelchair?

\_\_\_\_\_ require an Aide when traveling?

**(physician's letter required)**

\_\_\_\_\_ use a three wheeled scooter?

\_\_\_\_\_ have a visual impairment?

\_\_\_\_\_ use oxygen – life enhancing or life sustaining?

**(physician's letter required)**

\_\_\_\_\_ use a cane?

\_\_\_\_\_ use a walker?

\_\_\_\_\_ hearing impaired?

**I certify that I am not applying to The JO – Special Edition Program for fraudulent purposes and that I meet the eligibility requirements of the program.**

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**Signature**

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**Date**

**Return completed The JO - Special Edition application to:**

**Johnson County Transit  
1701 West 56 Highway  
Olathe, Kansas 66061**

**-OVER PLEASE-**



# The JO – Special Edition Reduced Fare Application

I have reviewed and fully understand the qualifications, guidelines and policies of The JO – Special Edition and would like to request an ID card. (Please type or print and use black ink)

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**Name** (please print or type)

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**Address**

**Apt. #**

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**City**

**State**

**Zip Code**

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**Telephone** (Home)

**Telephone** (Work)

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**Date of Birth**

**E-mail Address**

**Are you 60 years of age or older?** \_\_\_\_\_

**Disabled\*?** \_\_\_\_\_

**\*\*If you are disabled, you must enclose a statement from a physician stating the nature of your disability. If you use oxygen, a physician's statement must say if it is life sustaining or life enhancing. If an aide is necessary for travel, a physician's letter must state this as well.**

Do you:

\_\_\_\_\_ use a standard wheelchair?

\_\_\_\_\_ use oxygen – life enhancing or life sustaining?

\_\_\_\_\_ use a electric wheelchair?

**(physician's letter required)**

\_\_\_\_\_ require an Aide when traveling?

\_\_\_\_\_ use a cane?

**(physicians letter required)**

\_\_\_\_\_ use a walker?

\_\_\_\_\_ use a three wheeled scooter?

\_\_\_\_\_ hearing impaired?

\_\_\_\_\_ have a visual impairment?

**I certify that I am not applying to The JO – Special Edition Program for fraudulent purposes and that I meet the eligibility requirements of the program.**

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**Signature**

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**Date**

Return the completed The JO – Special Edition Reduced Fare application and required documentation to:

**Human Services and Aging**

Attn: Linda Holly

11811 S. Sunset Drive, #1300

Olathe, Kansas 66061

Phone: 913-715-8800

Fax: 913-715-8825



# Reduced Fare Request Form

Please complete the following information if you are requesting that your status be considered low income.

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Name (please type or print)

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Telephone (home)

Telephone (work)

Your current Special Edition ID# (if applicable): \_\_\_\_\_

You must verify your total gross monthly income. You may send copies of current paycheck stubs, bank statements, SSI or Social Security statements, previous year's tax return or other financial statements.

\_\_\_\_\_ Number in Household

**Gross individual income (joint income if married) consists of the following sources and amounts:**

- a. \$ \_\_\_\_\_ per month from Social Security Benefits.
- b. \$ \_\_\_\_\_ per month from Supplemental Security Income or SSDI.
- c. \$ \_\_\_\_\_ per month from Earned Income.
- d. \$ \_\_\_\_\_ per month from Pension/Annuity.
- e. \$ \_\_\_\_\_ per month from Financial Assets.
- f. \$ \_\_\_\_\_ per month from Alimony/Child Support payment.
- g. \$ \_\_\_\_\_ per month from ADC.
- h. \$ \_\_\_\_\_ per month from Trust.
- i. \$ \_\_\_\_\_ per month from \_\_\_\_\_.

\$ \_\_\_\_\_ Total Gross Monthly Income

I certify that I am not applying to The JO – Special Edition Reduced Fare Program for fraudulent purposes and that I meet the eligibility requirements of the program. I understand that false information will result in termination of my participation in the Reduced Fare Program.

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Applicant's Signature or Signature of Parent/Legal Guardian

**\*\*IMPORTANT: Please mail or fax all four pages of your reduced fare application, along with verification of your total gross monthly income to the following address listed below:**

## **CERTIFYING AGENCY**

**Human Services and Aging  
Attn: Linda Holly  
11811 S. Sunset Drive, #1300  
Olathe, Kansas 66061  
Phone: 913-715-8800  
Fax: 913-715-8825  
TTY: 913-715-8910**

### **BE SURE TO INCLUDE THE FOLLOWING:**

1. The completed Reduced Fare Request Form.
2. The completed The JO - Special Edition Reduced Fare Application Form.
3. Verification of disability from your physician (if applicable).
4. Verification of gross income – copies of paycheck stubs, bank statements, SS or SSI statement, pension statements, previous year's tax returns or other financial statements.
5. Mail ALL requested information to the certifying agency listed above. **Do not mail reduced fare applications to 1701 West 56 Highway, Olathe, Kansas or your processing time will be delayed.**

**Incomplete applications will not be processed.**