Guidelines for applying to the Reduced Medical Rate Program



ELIGIBILITY REQUIREMENTS

- Only island residents actively enrolled in the Excursion Program are eligible.
- The name of the person applying must be on the account.
 - **Exception:** Underage children may use a parent or guardian's account.
- Preferred Program members do not qualify.

HOW TO QUALIFY

Applicants must provide **medical documentation** confirming at least **five (5) off-island appointments** for the **same medical condition** within the next **12 months**.

Choose **one** of the following documentation types:

- Appointment Printout: A printed schedule from your off-island doctor or medical facility listing at least five (5) upcoming appointments for the same condition.
- Provider Letter: A signed, dated letter on official letterhead from your off-island doctor or medical facility stating that` you will be seen at least five (5) times over the next 12 months for the same condition.

If the patient sees multiple doctors or facilities for the same medical condition, the **primary care doctor** must provide a letter listing each facility or doctor involved in the patient's treatment.

Documentation must include:

- Patient's name
- Name and location of the off-island medical provider
- Handwritten notes or homemade documents will not be accepted. All documentation must be legitimate, professional, and unaltered.

PROGRAM TERMS

- Once approved, the reduced rate is valid until your last listed appointment, up to a maximum of **one year** from the date of approval.
- Renewals require a new application and updated documentation each year-no exceptions.
- Medical rate reservations must be made in advance through the Mashpee Reservation Office. They
 cannot be booked online or at terminals.

TO APPLY

- Submit a completed Reduced Medical Rate Application along with all required documentation.
- Incomplete applications will be delayed or denied.

Questions? Email supervisors@steamshipauthority.com Call (508) 477-8600, 7:30 a.m.-4 p.m. daily