



FINANCIAL INFORMATION & SERVICE AGREEMENT SPRING LAKE RANCH

A. FINANCIAL INFORMATION

Fees:

The Resident fee for Spring Lake Ranch is currently \$440 per day and is subject to change at any time but would be preceded by a written notice to the resident and/or financially responsible party at least 30 days prior to such change. This fee covers private room and board, program services, psychiatric services and local transportation. It does not include expenses for medication, medical or dental visits, private therapy, personal expenses, special transportation beyond fifty miles round trip, or temporary one-on-one staff coverage (\$30/hr).

If the Resident is absent or on leave from the program, the standard fee will continue to be charged in the Resident's absence to maintain the Resident's place for up to thirty days. If the Resident does not return or confirm in writing his/her desire to continue in the program, termination from same will occur.

In the event that a Resident is discharged from the Ranch for hospitalization or medical necessity and the family wishes to hold a place at the Ranch in anticipation of returning, a charge of one-half the normal daily rate will be charged for the first twenty-one days. After that time, if the family still wishes to hold the place, the full \$400 daily rate will be charged.

Billing:

Please come prepared to pay the first thirty days' fee (\$13,200) on the day of the resident's arrival. Because of the initial effort involved in admissions, thirty (30) days of the fee or \$13,200 is not refundable. Should a Resident come to the Ranch in the middle of a month, a portion of the initial fee will be credited to the Resident's second month.

After the nonrefundable period has expired (30 days) the per diem rate applies. Families will be reimbursed for any overage if a resident leaves mid billing cycle. It is expected that all fees be paid in full upon discharge.

Statements are sent out around the 25th of each month. A statement includes the fee for the coming month, as well as any expenses incurred by the Resident in the previous month. We ask that all balances be paid by the 10th of the month. There is no charge for a Resident's first day and overnight. However,

the last day of a Resident's stay is billed at the full rate regardless of the time of departure. A 1% per month service charge will be imposed on all balances unpaid thirty days after the invoice date.

Allowance:

Most Residents receive a weekly allowance of spending money paid for by the family. This amount is determined at the discretion of the Resident and his/her family. The allowance for the month is billed in the monthly statement for the coming month. Please note that some months have five (5) Fridays and will be billed accordingly. Allowance covers a Resident's personal needs such as toiletries, cost for ancillary activities and sundry items.

Health Insurance:

Spring Lake Ranch is a private pay facility and is not contracted with any insurance company. We do not participate in any third party billing, nor are we able to provide details other than our monthly invoice for self-submittal purposes. Insurance does typically pay for medications, normal medical expenses and some private therapy.

Please bring the health insurance card. This information is very important if a Resident needs to see a medical doctor, dentist, therapist, or needs to go to the hospital. It is the responsibility of the Resident or family member to provide this information at the time of admission.

Some Residents come with Medicaid or Medicare or are eligible for these programs. Spring Lake Ranch needs to be aware of this information as well. Medicaid/Medicare does not cover the cost of residential treatment, and out-of-state Medicaid typically will not cover any expenses which are incurred in Vermont.

Pharmacy:

The Ranch fee does not cover pharmacy bills. The Ranch works primarily with one pharmacy in Rutland and we assist families to arrange for payment directly to that pharmacy at the time of admission. Whenever possible, the pharmacy will bill the Resident's health insurance. Please be aware that sometimes the pharmacy is unable to bill out of state insurance companies.

Please note there is a monthly medication management fee of \$30 which covers the pharmacy cost of pouring medication according to the psychiatrist's orders. This will appear as a separate line item on your bill each month and is not covered by insurance.

Medical Doctor Visits:

Spring Lake Ranch has a full-time med room staff supervised by a Registered Nurse who are responsible for coordinating Residents' doctor visits. If the Resident has health insurance we will provide that information on to the

doctor's office. Otherwise, the Ranch will forward the bill to the address provided on the Billing Form. In the event there is a co-pay required for the appointment and it cannot be billed by the provider, we will add this to your next bill.

Therapy:

The Ranch can assist Residents in finding local therapists for additional and/or specialty therapy. Such visits are considered to be separate from the Ranch program and will be treated in the same way as medical doctor visits.

Miscellaneous:

We do not allow residents to have cellphones at the Ranch as it is a distraction to treatment but we do make available land line phones throughout the campus and in each resident house on each floor. By signing this agreement you understand and accept this condition.

Please also note that Residents will be held financially responsible for damage to rooms, furniture, and equipment beyond the normal wear and tear.



SPRING LAKE RANCH SERVICE AGREEMENT

B. SERVICE AGREEMENT

_____ has agreed to participate in the programs and services offered by Spring Lake Ranch, a Therapeutic Community Residence program of Spring Lake Ranch, Inc. The starting date for services is _____. The terms and conditions shall survive and remain in effect in the event of a discharge with a subsequent readmission to the program within 90 days of said discharge. The terms and conditions governing participation in this program are as follows:

1. **Consent and Authorization:** The participant above named (the “Resident”) and the Resident’s family, agree that they have been informed of the nature and scope of the professional services that are available at Spring Lake Ranch, and, by virtue of their execution of this Agreement, acknowledge that they have each been provided a copy of the current Resident and Family Handbook governing participation in the programs and conduct expected while participating in the programs. Resident and Resident’s family have read, understood, and agree with the terms and conditions set forth in this Agreement. The Resident and Resident’s family also acknowledge that some of the services provided are voluntary in nature, and that they are also aware that many services are provided in an open, rural, agricultural and/or wilderness setting. It is further understood and agreed that there are inherent and other risks associated with participation in these types of programs in these various settings, including but not limited to the possibility that the Resident could leave the immediate care area or setting of a given Spring Lake Ranch program. The Resident and Resident’s family consent to the rendering of care and treatment by Spring Lake Ranch, Inc. and its authorized representatives and/or employees, and further authorize Spring Lake Ranch to provide or arrange for such mental health care or treatment as deemed appropriate.

2. Expected Behavior: The Resident agrees that he or she will refrain from any and all disruptive or inappropriate acts or behaviors, including but not limited to: physical violence and/or threats toward themselves or others, any inappropriate sexual acts, or sexual advances, use of alcohol or illegal drugs or other harmful or mood-altering substances, except as appropriately prescribed by a physician, while enrolled and participating in the Spring Lake Ranch programs. Residents are not allowed to either bring alcohol to or consume alcohol on the premises of Spring Lake Ranch, Inc., or during any Spring Lake Ranch-sponsored activity, regardless of its location. Residents are to maintain abstinence from alcohol and other drugs (except as appropriately prescribed by a physician) during the entire time of their stay, including visits away from the Ranch. There are many reasons for this abstinence, which include but are not limited to: interference with appropriately prescribed medications, sensitivity to other Residents who struggle with addiction issues, and the possibility of any resulting disruptive or offensive behavior. Violation of these or any other rules or regulations of Spring Lake Ranch can result in immediate or other termination from the Ranch and/or any of its programs. The Resident agrees that he or she will follow any and all posted notices, warnings, advice, and/or cautionary or other instructions, and to obey all rules and regulations as may be amended from time to time.

3. Notice of Intent to Terminate Program Participation by Resident: Resident and Resident's family recognize that in order to provide the services covered by this Agreement, Spring Lake Ranch, Inc. will incur liabilities, including but not limited to committing staff time for the type and time of the services in question. Therefore, Resident and Resident's family agree to provide Spring Lake Ranch, Inc. with advance notice of two (2) weeks of their intention to terminate such services.

Spring Lake Ranch, as indicated, has the right to terminate this Agreement at any time if it believes it is reasonably necessary to do so for appropriate purposes, including attempting to ensure the physical and emotional security and safety of the Resident, other Residents, staff, employees, and non-staff located within the community. The Resident and Resident's family agree that at such time as they are notified of the termination of this Agreement by Spring Lake Ranch, Inc., that they will immediately arrange for the safe departure of the Resident from the Spring Lake Ranch property and its programs, regardless

of whether the termination is noticed because of medical, psychiatric, legal, or behavioral reasons. If the Resident and/or Resident's family cannot or will not arrange for such immediate departure when requested, it is agreed that Spring Lake Ranch, Inc. is therefore authorized to make such arrangements as are necessary in connection with such termination. It is further agreed that the Resident and the Resident's family will be responsible for any costs or other expenses incurred in connection with that action. The Resident and Resident's family acknowledge that if Spring Lake Ranch, Inc. terminates this Agreement and/or any services to be provided under it, that in that case there is no guarantee that any state or local community resources will be able to step in and provide any continuation of services. In such a situation, it may be appropriate for the Resident and/or Resident's family, or lacking appropriate action on their part, Spring Lake Ranch, Inc. to arrange for the Resident's return to his or her home or that of the Resident's parents.

4. Acknowledgment Regarding Services and/or Care. The Resident and Resident's family agree that mental health care is not an exact science, and that no guarantees are made as to results of the provision of any such care and/or services or programs associated therewith, nor that such guarantees should be expected. Furthermore, and having this statement in mind, the Resident and Resident's family understands that a treatment and/or action plan will be developed in concert with the Resident, and that the plan will be the focus of the Resident's program at the Ranch. A discharge and/or transition plan will be developed as appropriate, following successful completion of the treatment and/or action plan, or at the time of discharge.

5. Treatment Coordination: The consulting psychiatrist is the Resident's primary treating psychiatrist during the time of the Resident's participation in the Spring Lake Ranch program and is an integral part of the care/services team. As such, the psychiatrist will participate in the decision making and sharing of information necessary for the program/services provided. All resident information will be maintained in confidence among those delegated by Spring Lake Ranch to receive such information in connection with any program or service being provided to the Resident. It is further agreed that such medical

and/or mental health information will only be shared with those outside the Spring Lake Ranch, Inc. programs as Spring Lake Ranch, Inc. shall deem appropriate and/or necessary, or otherwise as directed by the Resident and/or mutually by the Resident and Resident's authorized family member(s). It is, however, agreed that consent to disclosure initially authorized by the Resident and a consented-to family member, may not be modified or revoked without the express written consent of both provided to Spring Lake Ranch.

While it is recognized that additional/outside consultations may be beneficial and/or helpful to the Resident, the Resident and the Resident's family specifically agree not to engage in such outside consultations and/or alternative treatments or care during the time that the Resident is participating in any Spring Lake Ranch program without the approval of the Resident's treatment/care team at Spring Lake Ranch.

6. Hold Harmless and Indemnification Agreement: The Resident and the Resident's family agree to hold harmless and indemnify Spring Lake Ranch, Inc., and its authorized representatives and employees from any loss or harm or damage of any kind, without restriction, which results in any way from the Resident's failure to abide by the terms of this Agreement, and/or the appropriately posted rules and regulations of Spring Lake Ranch, Inc., and/or those rules and regulations that are a part of any of the Spring Lake Ranch programs. In the event that enforcement of these rights by Spring Lake Ranch, Inc. is required by resort to legal process, the Resident and Resident's family agree to hold harmless Spring Lake Ranch, Inc. and its authorized representatives and employees from any and all costs and expenses associated therewith.

7. Payment of Services and Fees: In consideration of the services to be provided and/or programs in which there shall be participation, it is agreed by Resident and Resident's family that any such service and/or program fees and expenses will be paid in a timely fashion and in accord with the current fee structure described in the "Financial Information Document" provided with this Agreement. Fees are subject to change with or without notice.

8. Forum Selection: This Service Agreement shall be construed and interpreted in accordance with the laws of the State of Vermont. The parties hereto agree that all action or proceedings arising in connection with this Agreement shall be tried and litigated exclusively in the State and Federal Courts located in Vermont. The above stated choice of venue is intended by the parties to be mandatory and not permissive in nature, thereby precluding the possibility of litigation between the parties with respect to or arising out of this Agreement in any jurisdiction other than that specified in this paragraph. Each party hereby waives any right it may have to assert the doctrine of *forum non conveniens* or similar doctrine or to object to venue with respect to any proceedings brought in accordance with this paragraph, and stipulates that the State and Federal Courts located in Vermont shall have *in personam* jurisdiction and venue over each of them for the purpose of litigating any dispute, controversy or proceeding arising out of or related to this agreement.

9. Grievance Procedure & Resident Rights: Grievance procedures are well outlined in the Welcome to Spring Lake Ranch Resident Handbook. In the event you feel you or your family member has received improper treatment or have had rights violated, you have the right and responsibility to report such incidents. There are four agencies you may find helpful:

Mental Health Law Project of Vermont (800.899.2047) provides specialized representation in mental health proceedings across Vermont.

Disability Rights Vermont (800.834.7890) is an independent non-profit organization responds to problems brought by people with a mental health diagnosis.

Division of Licensing & Protection Department of Disabilities, Aging & Independent Living (888.700.5330) This agency oversees Spring Lake Ranch's licensing and regulatory compliance as Therapeutic Community Residence.

Department of Disabilities, Aging & Independent Living, Adult Protective Services (800.564.1612). This agency is one of the principle governmental agencies mandated by Vermont Law to investigate reports of abuse, neglect and exploitation of vulnerable adults.

10. Acknowledgment: By signing this document, the Resident and Resident's family acknowledge that they have received and read the Agreement, and that any questions or concerns which they had related in any way thereto have been answered to their satisfaction. They further acknowledge that they have read the financial information document, the rules and regulations information/booklets they have been provided, and that they are freely and voluntarily entering into Spring Lake Ranch programs with the full knowledge of and agreement to comply with all of the terms and conditions that are either set forth herein or which can be necessarily inferred from the terms and conditions of this Agreement.

Signatures:

_____ Date: _____
(Resident)

_____ Financially Responsible? (Y or N) Date: _____
(Family Member)

_____ Financially Responsible? (Y or N) Date: _____
(Other)

_____ Date: _____
(Spring Lake Ranch, Inc., by its duly authorized representative)