

Mark Houston Recovery



Financial Responsibility

Mark Houston Recovery appreciates the confidence you have placed in us for the care of your loved one. We believe this commitment to be sacred, which means that we take the commitment very seriously and that we will attempt to provide the best care available. One aspect of the program is the cost and financial obligation that accompanies one's stay at MHR. Outlined below are the tuition cost and deposit requirements.

*The tuition for our 30-day program is \$10,000 and we require a \$1,000 ancillary deposit. The tuition for our 60-day program is \$19,000 and we require a \$2,000 ancillary deposit upon admission. The tuition for our 90-day plus program is \$28,000 (for 90 days) and we require a \$3,000 ancillary deposit upon admission.

***The above tuition rates only apply to accounts that are paid in full at the time of admission.**

Payment for tuition may be paid in full upon admission or is due on thirty-day intervals from the original admission date. An invoice will be mailed to the payer every month. If the tuition is to be paid on a 30-day basis for our programs, the tuition cost is \$10,000 per 30-days. If a resident chooses to stay longer than 90-days, the 30-day rate is reduced to \$8,000 for all additional 30-day periods.

All payments for tuition for the resident's current month are non-refundable, except in the case of a physical/medical issue that does not allow the resident to remain at MHR.

The ancillary deposit will be used for literature, transportation to any appointments beyond the initial doctor visit, urine drug screens, personal trainers, haircuts, CD player (if they don't admit with one), and psychiatrist fees. All other charges, including psychologist fees, will be approved by the payer.

The Mark Houston Recovery guarantee: For any of our 90-day plus graduates who follow our recommendations and whose family members follow our recommendations, the resident will be allowed to return to Mark Houston Recovery for a free 30-day period in the event of relapse during the first twelve months following discharge. The resident must comply and stay in compliance with all MHR rules and standards in order to qualify and to continue to qualify.

Tuition for the resident's current month is non-refundable. If the resident decides to leave the program ASA (Against Staff Advice) or invites early termination from the program (At Staff Request), there will be no refund for any days remaining in the resident's current 30-day period.

Overview:

- 30-day program: \$10,000 and \$1,000 ancillary deposit due upon admission
- 60-day program: \$19,000 and \$2,000 ancillary deposit due upon admission
 - Or can pay \$12,000 upon admission and then pay \$10,000 30 days after admission
- 90-day program: \$28,000 upon admission and \$3,000 ancillary deposit due upon admission
 - Or can pay \$13,000 upon admission and pay \$10,000 every 30 days after admission

_____ (INITIALS)

MARK HOUSTON RECOVERY

Financial Information

- The required ancillary deposit will go into an account used for resident needs and will be used to cover the cost of literature, transportation to any appointments beyond the initial doctor visit, urine drug screens, personal trainers, haircuts, CD player (if they do not admit with one), and psychiatrist fees. All other charges to the ancillary deposit, including psychologist fees, will be approved by the payer, with the exception of charges for damages caused by the resident to MHR property. _____ (INITIALS)
- We require all residents to see our medical doctor for a Wellman Exam. Our medical doctor does not file insurance coverage; therefore, you will be responsible for filing with your insurance company. The charges are as follows:
Wellman Exam = \$80.00(includes transport) _____ (INITIALS)
Subsequent doctor appointments = \$80.00 + \$50.00 Transportation Fee _____ (INITIALS)
- All admitting residents are required to have an initial evaluation with our staff psychiatrist. If residents are taking anti-depressants or other neurological/psychological medications, they will need ongoing medication management and possible psychotherapy: these visits may be weekly, bi-weekly, or monthly. Our staff psychiatrist does not file insurance coverage; therefore, you will be responsible for filing with your insurance company. The charges are as follows:
Initial Psychiatric Evaluation = \$300.00 _____ (INITIALS)
Med Management w/psychotherapy = \$150.00 _____ (INITIALS)
Med Management w/o psychotherapy = \$100.00 _____ (INITIALS)
- The pharmacy accepts many insurance plans. We will need the insurance card or an enlarged copy of the front and back of the card. Should our pharmacy not accept your plan, you will be responsible for filing any insurance claims for reimbursement. We also require you to provide a credit card number for medication co-pays at the pharmacy. _____ (INITIALS)
- Once a payment is received, if the resident decides not to enter this program, MHR will charge a \$750.00 administration fee for the costs incurred in attempting to admit the resident.
_____ (INITIALS)
- Any ambulance trips or emergency room visits will be billed directly to you. These charges will not be paid by or billed to us. _____ (INITIALS)
- The cost to repair any damage caused to MHR centers property by a resident will be charged to that resident's ancillary account; if the cost of the loss is greater than the available monies in the account, you will be responsible for the difference. _____ (INITIALS)
- This is only a basic list of charges that may be incurred by residents at Mark Houston Recovery Centers. It is possible that further services will be required. _____ (INITIALS)
- It is very important that the tuition is paid on time. Residents whose accounts are past due by 5 days will be discharged on the fifth late day unless prior arrangements have been made with our accounting department. _____ (INITIALS)
- All refunds will be processed 40 days after discharge. _____ (INITIALS)

I, _____, understand the payment and refund policy outlined in this disclosure. As the financially responsible party, I agree to pay for the tuition and ancillary deposit of _____ at a rate of:

Please initial your choice:

30 Day Program:

_____ **\$11,000 upon admission** (includes the \$1,000 ancillary deposit)

60 Day Program:

_____ **\$21,000 due upon admission** (includes the \$2,000 ancillary deposit)

Or:

_____ **\$12,000 upon admission** (includes the \$2,000 ancillary deposit) and **\$10,000 due 30 days from admission date.**

90 Day Plus Program:

_____ **\$31,000 upon admission** (includes the \$3,000 ancillary deposit)

Or:

_____ **13,000 upon admission** (includes the \$3,000 ancillary deposit) and **\$10,000 due every 30 days from admission date.**

Responsible Party Signature

Date

Address

City/State/Zip

Home phone

Work phone

Cell phone

Thank you again for the confidence you have shown in Mark Houston Recovery centers and our staff. If you have any questions, please feel free to contact us at 866-905-4550.

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