



BEHAVIORAL FINANCIAL RESPONSIBILITY AGREEMENT

Resident: _____

Community: _____

Terms of Financial Responsibility:

- The above-named resident does not have insurance coverage for the mental health services offered by 360care Counseling and/or 360care Psychiatry
- The above-named Community has identified the Resident as having a need for 360care's behavioral services.
- The Community agrees to pay for such services at Medicare's prevailing "allowed amount."
- The current schedule of "allowed amounts" appears below, but it is subject to change by the Centers for Medicare & Medicaid Services (CMS).
- If CMS changes it's "allowed amounts," such change shall be immediately reflected in the amount charged by 360care to the Community.
- 360care shall submit written invoices to the Community Administrator on a regular basis.
- The Community agrees to pay all invoices within 30-days of postmark or electronic delivery.
- Failure to remit full payment within 30-days may result in suspension of services to the resident until the unpaid balance is remitted in full.
- Counseling sessions shall generally be rendered weekly or biweekly, depending upon the Resident's needs and availability.
- Psychiatry sessions shall generally be rendered monthly, depending upon the Resident's needs and availability.
- Services may be terminated at any time by 360care, the Resident, or the Community.
- The Community may only terminate 360care behavioral services by sending written notice to: behavioralreferrals@360care.com

360care COUNSELING Services

All Places-of-Service

CPT Code	Description	Charge
90791	Evaluation	\$142.81
90832	Brief Session	\$69.94
90834	Regular Session	\$93.04
90837	Long Session	\$139.18
90847	Family Session	\$106.18
90839	Crisis Session	\$145.19
90785	Complexity*	\$15.26

* Additional Charge Applied when Communication Barriers or Complicating Factors are Present

Initial 360care PSYCHIATRY Visit

Nursing Facilities

CPT Code	Complexity	Charge
99304	Low	\$89.77
99305	Moderate	\$128.37
99306	High	\$165.84

Assisted Living Communities

CPT Code	Complexity	Charge
99324	Very Low	\$54.19
99325	Low	\$79.02
99326	Moderate	\$137.48
99327	High	\$184.57
99328	Very High	\$218.49

Under my authority as the Administrator / Executive Director of the above-name Community, I commit the Community to financial responsibility for the above-named resident as described herein. I authorize the payment of the services indicated below:

Counseling: _____ Yes _____ No

Psychiatry: _____ Yes _____ No

Any Unmarked Service Shall Be Deemed "Unauthorized"

Subsequent 360care PSYCHIATRY Visits

Nursing Facilities

CPT Code	Complexity	Charge
99307	Very Low	\$43.53
99308	Low	\$68.34
99309	Moderate	\$90.06
99310	High	\$132.99

Assisted Living Communities

CPT Code	Complexity	Charge
99334	Very Low	\$59.71
99335	Low	\$94.54
99336	Moderate	\$133.66
99337	High	\$193.01

PRINTED Name & Title

Signature

Date