

AGREEMENT

2015-2016 School Year

Service Provider: Day Treatment Youth Services, LLC

Contracting School/Agency: Jerome School District #261

We operate a behavior modification/education program for **Emotionally Impaired** and/or **behavior disordered** students. Through this agreement, we are offering to sell “placements” in this program to surrounding school districts and agencies because of limited enrollment, all placement requests may not be accommodated. Consequently, placements will be sold on a “previously-served” and then a “first come-first served” basis.

Both parties to this agreement understand that students and families participating in the **Day Treatment Youth Services** program will be subject to the policies and rules of that program. If the student and/or family fail to comply or demonstrate non-cooperation, then the student will exit the program and be referred back to the district/agency of origin.

The above contracting school/agency understands that, while the student is enrolled in Day Treatment, the **Jerome School District #261** will collect the ADA and Special Education funding for that student. **DTYS** will bill the Jerome School District for all school-based Medicaid PSR services provided for the school year 2015-2016.

***Note: Every referral will be evaluated by Day Treatment Youth Services/Jerome School District personnel to determine appropriateness of placement in the program. Certain students may not be accepted or appropriate for the program.**

Day Treatment Youth Services will:

1. Accept school district students through the use of a “placement” mentioned below or through Medicaid eligibility and will provide behavior management services to these students during the 2015-2016 scheduled school year.
2. Sell each “placement to the above identified contracting school district/agency for the amount of \$5250.00. This total amount is due and payable on or before August 24, 2015. **(Note: Cost per “placement is \$5000.00 if received by June 05, 2015.)**
3. Bill the school district monthly for each placement to cover administrative cost at the rate of \$100.00 per month, with partial months pro-rated. **This administrative fee is not included in the “placement” cost.**
4. **Reimburse the Jerome School District for any and all Medicaid recoupment including civil penalties incurred, for any student that came from outside the Jerome School District boundaries regardless of the reason.**
5. **Share with Jerome School District any Medicaid recoupment including civil penalties for students that reside within the Jerome School District boundaries.**

School District/Agency will:

1. Pay for the cost of:
 - a. Non-Medicaid placements (at the cost of \$5250.00 or \$5000.00 if paid by June 05, 2015).
 - b. Administrative cost of \$100.00 per month or a pro-rated cost for partial months. {This applies to outside school districts only}
 - c. Transportation of students to and from Day Treatment Youth Services.
 - d. Any necessary support services/special education services i.e. Speech Therapy, OT, etc.
2. Maintain frequent contact with student(s) by attending regularly scheduled Student Progress conferences and/or other meetings where the student(s) progress and continuation are discussed.

Request: The above mentioned school district/agency is requesting to purchase 3 placement(s) in the Day Treatment Youth Services Program. Each placement costs \$5250.00 by August 24, 2015 or \$5000.00 if paid by June 05, 2015.

Jerome School District *Kimberly* 5/20/15
Name of the School District/Agency **Signature of Official** **Date**

Day Treatment Youth Services, LLC
Signature of Official *T. Webb* **Date** 5/21/15

Memorandum of Understanding
Between Jerome School District #261
And Day Treatment Youth Services, LLC

Effective dates: June 1, 2015 through May 31, 2016

District Contact Person Kindel Mason

Phone Number 324-3361 ext 1120

DTYS Contact Person Rick Webb

Phone Number 324-7762

Day Treatment Youth Services Will:

1. Maintain an agency Liability Insurance Policy
2. Insure that all staff have Criminal Back round checks and PSRs are qualified to provide services as defined by Idaho Health and Welfare guidelines.
3. Will only provide and bill for PSR services as identified on clients IEP.
4. Adhere to Districts schedules policies and administrative requests.
5. Submit to the District a request for payment of services with necessary information to bill Medicaid within five working days following the end of the month.
6. DTYS will pay Jerome School District \$100 per month for each out-of-district student that is Medicaid billable {partial months will be pro rated}
7. DTYS understands and agrees that it will be reimbursed at Medicaid reimbursement rate minus the Idaho State Billing service fee. Also understands that at any time the Medicaid reimbursement fee could change and contract would be amended accordingly.

Jerome School District Will:

1. Identify and provide Medicaid eligible students to receive services.
2. Hold necessary Child Study Team meetings to write IEP containing all necessary documents including but not limited to goals objectives BIP, FBA, ED portfolio social history, and service page. This documentation will be given to DTYS prior to PSR services being provided.
3. Meet regularly with DTYS staff and administrator to assess progress validity and continuation of PSR services.
4. Issue a check to reimburse DTYS for all PSR services rendered by the forth Tuesday of each month. Reimbursement rates as follows

September 2013

Individual – 29.00 per hour

Group – 7.00 per hour per child

Reimbursement rates are subject to change based on rates provided to district by Medicaid.

School Official Kindl Mura Date 5/20/15

DTYS Administrator Rick Webb Date 5/21/15