

House of the Good Shepherd
Assisted Living & Comprehensive Personal Care

2020 Schedule of Apartment Charges

ASSISTED LIVING

	<i>Admission Fee</i>	<i>Daily Charge</i>
Type 1	\$ 3,375	\$ 210
Type 2	\$ 3,375	\$ 213
Type 3	\$ 3,375	\$ 218
Type 4	\$ 3,375	\$ 225

COMPREHENSIVE PERSONAL CARE

	<i>Admission Fee</i>	<i>Daily Charge</i>
Single Room 1/2 bath	\$ 2,250	\$ 174
Single Room full bath	\$ 2,250	\$ 196
Single Room full bath	\$ 2,250	\$ 210

Included in daily room rates:

* * Heat, A/C, and water * * Three daily meals & snacks * * WiFi Connection * *
 * * Local transportation based on availability of driver * *

ITEMS OF INTEREST

All applicants are required to pay a \$ 100 application fee

The application & admission fee is non-refundable

All charges subject to change upon DCA certification and
 with a 30-day advanced written notice

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2020 Schedule of Additional Charges

Daily

Additional Care Tier 1	\$	24		
Additional Care Tier 2	\$	48		
Additional Care Tier 3	\$	72		

Monthly

Cable Television	\$	33		
Second Person	\$	1,722	& up	
Telephone Service	\$	13		

Per Occurrence

Tray Service for meal in apartment	\$	3	per tray	
Transportation (out of Hackettstown) (based on availability of driver)	\$	25	per hour <i>plus</i>	\$ 0.58 per mile
Pendant Alert (if requested)	\$	150	initial fee and \$25/month	
Laundry	\$	10	per bag	
Returned Check/ACH Fee	\$	30		
Guest Breakfast	\$	9		
Guest Lunch	\$	11		
Guest Dinner / Picnic	\$	10		
Guest Holiday / Special Event	\$	22		
Lodge Dining Room Rental	\$	50	Additional fees based on service requests	

Medications are billed directly to the resident by the pharmacy

Physician services are billed directly to the resident by his/her physician

All charges subject to change upon DCA certification and with a 30-day advanced written notice

Meal prices may vary depending on the specific event

House of the Good Shepherd

2020

Private Pay Supply Charges

The following items are not included in the private pay per diem rate and are the responsibility of the patient/resident. Charges for these items will appear on the monthly statements sent to the responsible party:

	Accu-Check			\$ 2	each
	Oxygen			\$ 3	day
	(tank or concentrator)				
	Adult Incontinent Care			\$ 6	day
	Includes briefs, pull-ups and pads				
	Dressings				
	Wound Care			\$ 5.00	day
	Specialty Dressings				As received
	Specialized Beds				Rental Cost
	Other Medical Supplies				As needed

**** Prices subject to change with 60 days notice ****