House of the Good Shepherd Independent Living Apartments

2020 Schedule of Apartment Charges

MAIN BUILDING

	Rental Fee Plan				Community Fee Plan				Entrance Fee Plan			
	R	ental Fee	Mon	thly Charge	Cor	nmunity Fee	Мо	nthly Charge	Er	ntrance Fee	Мо	nthly Charge
Type # 1 – 658 SF	\$	4,500	\$	3,704	\$	22,500	\$	3,415	\$	75,375	\$	2,486
Type # 2 – 716 SF	\$	4,500	\$	4,099	\$	24,750	\$	3,454	\$	83,250	\$	2,633
Type # 3 – 763 SF	\$	4,500	\$	4,154	\$	24,750	\$	3,498	\$	94,500	\$	2,685
Type # 4 – 744 SF	\$	4,500	\$	4,154	\$	24,750	\$	3,498	\$	94,500	\$	2,685
Type # 5 - 1,144 SF	\$	5,625	\$	4,759	\$	28,125	\$	4,111	\$	114,750	\$	3,289
1 Bedroom (800- 900+ SF)	\$	4,500	\$	4,154	\$	24,750	\$	3,498	\$	94,500	\$	2,685
2 Bedroom (1,138 SF)	\$	5,625	\$	4,759	\$	28,125	\$	4,111	\$	114,750	\$	3,289
Second Person Fee											\$	406

Included in the Main Building:

VILLAGE

	Rental Fee Plan						
		Admission Fee	Mont	hly Charge			
Apartments	\$	3,375	\$	1,921			
Duplex	\$	4,500	\$	2,802			
House	\$	5,625	\$	3,000			
Cottages	\$	5,625	\$	3,458			

ITEMS OF INTEREST

All applicants are required to pay a \$ 100 application fee
The application fee, rental fee, and community fee are non-refundable
Please refer to your contract regarding the entrance fee All charges subject to change upon DCA certification
and with a 30-day advanced written notice

Included in the Village:

^{* *} Heat, A/C, and water * * One daily meal * * WiFi Connection * * Local transportation based on availability of driver * *

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2020 Schedule of Additional Charges

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		Vί	sít					
Medication Monitoring at t	he	\$	10	per visit u	p to \$30	per day	Resident must come	
nurse's station				to the Ass	ng Office			
Nursing Treatment			5	minimum	epends on treatment			
AL Nurse House call		\$	50	per hour, \$50 minimum				
Pendant Alert (if requested)		\$	150	Initial fee and \$25/month				
		Mon	ithly					
Cable Television		\$	33					
Main Building Second Pers	on	\$	406					
Telephone Service		\$	13					
Village Dinner Plan (per re	sident)	\$	200	includes special events				
				(not adjus	ted for	absences	under 14 days)	
	Per		urrei	nce				
Tray Service for meal in apa	artment	\$	3	per tray				
Transportation (out of Hackettstown)		\$	25	per hour	plus	\$ 0.58	per mile	
(based on availability of driv	rer)							
Housekeeping		\$	25	per hour				
Returned Check/ACH Fee		\$	30					
Guest Breakfast		\$	11					
Guest Lunch		\$	12					
Guest Dinner / Picnic		\$	13					
Guest Holiday / Special Event		\$	22					
Resident Breakfast		\$	9					
Resident Lunch		\$	10					
Resident Dinner / Picnic		\$	11					
Resident Holiday / Special Event		\$	22					
Lodge Dining Room Rental		\$	50	Additiona	I fees b	ased on	service requests	

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 v	vith 60 days notic	Ce **			
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