ATTACHMENT D



"REFLECTIONS" PROGRAM AT SHOREWOOD HEALTH SERVICES & RATE SCHEDULE

507-536-3207

(These Assisted Living Services will be provided by Comfort Home Health Care Group, Inc., D.B.A. Comfort Health and billed by Wedum Shorewood Assisted Living)

EFFECTIVE AUGUST 1, 2021

Monthly Basic Fee

Required fee billed to all residents residing in memory care and includes:

- Registered Nurse (RN) Health assessment every 90 days, after hospitalization or skilled nursing stay, and with change in health condition.
- Nurse visit every quarter for health and service review for appropriateness of services.
- Availability of Health Aides 24-hours per day in the building.
- Nurse available to Health Aides by phone 24 hours per day.
- Supervision of Health Aides in accordance with regulatory requirements.
- Maintenance of health record.
- Monthly vital signs and weight

The Monthly Basic Fee is billed based on your move-in and move-out dates, and is not prorated if absent from the facility.

The Monthly Basic Fee and all scheduled and package services will be pre-billed. Ala carte, incidental services, and supplies will be post-billed.

LEVEL OF CARE DETERMINATION

A Comfort Health licensed nurse determines your level of care. The nurse assigns point values to the individual's activity of daily living needs and behavior. Level of Care assessment/evaluation is done initially, when determining your plan of care. Re-evaluation of the Plan and level of care is performed every 90 days, after falls, hospitalizations, ER visit, SNF, and/or when a significant change in resident condition occurs.

INCLUDED IN ALL LEVELS OF CARE

- Weekly medication management by licensed Nursing staff excludes injectable medications
- Medication administration (as delegated by the RN to the health aide) excludes injectable medications
- Vital signs (temperature, pulse, respiration, blood pressure), if needed
- Weights, if needed
- Personal Care Assistance with Activities of Daily Living (ADLs)
 - dressing and grooming
 - bathing
 - > toileting / incontinence care
 - mobility, ambulation walking
 - > transfers
 - > meal assistance / feeding
- Personal Care Assistance with Independent Activities of Daily Living
- Safety/Reassurance Checks (approximately every 2-3 hours)
- Escorts for group activity programs
- Activity/Behavior programming

- Personal laundry and linens
- Incidental Housekeeping
- Hydration program

LEVELS OF CARE

Level 1 (0-9 points)	Level 2 (10-12 points)	Level 3 (13-18 points)	Level 4 (19-23 points)	Level 5 (24+ points)

REQUIRED: ADDITIONAL SERVICE RATES (not included in the level of care)

Non-Preferred Pharmacy Packaging Fee

A service charge will be applied to any resident not using the preferred pharmacy packaging system.

• Diabetes Management Package

Glucose Monitoring

A Health Aide will perform blood glucose checks as prescribed by your health care provider. This includes assisting with health care provider communication, communication with family or pharmacy of needed supplies, and clinical documentation.

Insulin Administration

This service includes general diabetes oversight including managing healthcare provider orders, insulin administration, pharmacy coordination, glucose checks and management, clinical documentation.

1-2 times per day insulin ministration

3-4 times per day insulin administration

• Fall Event Follow-up

A service charge will be required for any fall. Health Aide response and follow-up. Nurse evaluation and communication with physician/other health professionals and/or family.

• Post Facility Re-Assessment

A service charge will be applied for any return to facility. Nurse evaluation for return to facility from an absence (such as hospital/ nursing home stay, etc.) and communication with physician/other health professionals and/or family.

• Licensed Nursing Services

Examples: Nurse visits (not included in level of care) for evaluation due to illness, wound care, etc. Additional Nursing service charge will be added for any changes to the weekly medication set up.

OPTIONAL: CONCIERGE SERVICES

- **Health Aide Service -** For example 1:1 personalized escorts in our company vehicle for medical appointments or other personal needs.
- Companion Service For example 1:1 companionship, safety monitoring, and conversation.

The Care Levels do not include any private duty extended care services.

Pleae Note: Skilled Nursing, Physical Therapy, Occupational Therapy, and/or Speech Therapy may be covered by other payor sources (i.e. Medicare, Medicaid, Verteran's Administration, and other health insurance) if eligibility criteria are met. These services are not provided as part of Assisted Living health services.