

**Recovering Hands  
Financial Agreement  
and 2018 Program Description**

While many aspects of the residency plan are individualized, ALL residents are required to:

- Abstain from drug and alcohol use
- Develop and follow individualized recovery plans
- Develop and follow a weekly activity schedule
- Actively participate in formal and informal recovery-specific activities (including attending *at least* 7 meetings, 1 or more face-to-face sponsor sessions weekly, and reaching out for support from sponsor and recovery coach during times of distress). This includes all in-house 12-step meetings.
- Actively participate in weekly relapse prevention group, process group and life skills groups.
- Actively participate in weekly community meetings and morning meditation sessions.
- Actively participate in productive activities.
- Actively participate in fitness and fun in recovery opportunities.
- Follow medication recommendations as prescribed and work with counselors or other staff & doctors to address medication concerns.
- Join with fellow residents to plan, prepare, enjoy and clean-up of all shared meals weekly
- Join with fellow residents to maintain a clean living quarters
- Practice common courtesy, respect & recovery support for fellow residents and staff
- Practice relationship and sexual abstinence
- Arrange for timely payment of monthly residency fees
- Refrain from smoking or vaping inside all Recovering Hands Buildings. Smoking and vaping in designated smoking areas only. Responsibly dispose of all cigarette butts and trash each day.
- Every Recovering Hands Day begins promptly by 7:30 with breakfast and a morning meditation meeting at 8:00
- Mobile phones will be taken for at least the first 30 days of your residency and given back at the discretion of the Recovering Hands staff.
- The use of mobile phones is not allowed during NA and AA meetings, group meetings, faith based meetings or house meetings. Violation of this prohibition will result in confiscation of your phone for an undetermined period of time. They are also not allowed for the 15 minutes before and after NA and AA meetings.
- Refrain from being in your bed, unless you have an excuse, between the hours of 8:00am and 7:30pm.
- Music that seems contrary to maintaining a recovery conducive atmosphere will be discouraged.
- Expect random drug testing. Refusal to submit to testing is an admission of guilt and grounds for immediate eviction with no refund of any kind.
- All food must be stored in the kitchen. Eating outside the kitchen or the eating area is not permitted.
- You have 30 minutes after you have finished a meal to clean up all your dishes.
- Your personal area, such as the area in and around your bed, must be kept clean.

Each resident is required to have a guarantor who commits to Recovering Hands to meet the financial terms and who guarantees payment of fees for 90 days. The resident may act as their own guarantor, but is required to have a secondary guarantor in the event the resident is unable to fulfill the financial commitment. Each resident is expected to participate in 1 weekly individual session, 1 weekly house meeting, 7 morning meditation sessions, daily 12 step program meetings and all activities pertaining to working on and around the property.

## **Terms of Recovery Residence Participation**

- Each resident agrees to a personalized recovery plan and standards of recovery living that apply to all residents.
- Each resident must allow the other resident(s) to be aware of, and hold him or her accountable for, the terms of their personalized residency plan.
- Each resident agrees to identify a guarantor who will underwrite up to 100% of the recovery residence fees *but also agrees to pay as much of the fees as possible with their own financial resources.*
- 2018 Participation fees include housing in our Recovering Hands housing accommodations, utilities, food, recovery coaching, and rides to daily 12 step meetings. The only known daily expenses not included are costs for transportation beyond what Recovering Hands is providing to all residents, medications and other medical expenses, counseling services that are *beyond those included in the Recovering Hands Program fee*, personal toiletries, and cigarettes. Although we allow monthly payment of fees, the 2018 90-day program fee for Crossroads Clients is outlined below. Those who voluntarily or involuntarily withdraw from services before completing 90-days are still responsible for the full fee for those 90-days (\$9000.00).
- **ADDITIONAL FEES:** Breathalyzer testing and urine drug testing fees are included as part of the residency. In some cases, sweat patch drug testing may be chosen in lieu of urine drug testing and will also be included in residency. Some form of abstinence verification will be used for all residents. In some cases, it may be clinically appropriate for the resident to have a private room, and recommendations for private room must come from the referring counselor. An additional fee of \$1000/mo will be charged to the Resident and will require a secondary guarantor.
- Although food is included in the monthly rate, those residents who wish to maintain a special diet will be required to be responsible for the added expense of their own individualized special needs.
- Each resident must provide his own personal toiletries, and clothing. Laptops are allowed and cell phones will be allowed on a limited basis after the first month. Internet-live computers and printers are available. There is extremely limited Wi-Fi available. There are no telephone landlines or televisions in the living quarters. Residents with a Verizon plan may be able to send and receive texts, but phone service with alternative plans can be extremely limited. Recovering Hands has a Verizon cell phone available for residents use on a limited basis.
- It is understood that there will be no property insurance coverage for the residents or their belongings, and by signing this document, the Recovering Hands resident and guarantor hold harmless and release Recovering Hands from any and all liability.
- This agreement shall apply only to the period of 90 days but may be extended upon mutual agreement.

## **Details of Recovering Hands Fees per month**

**Recovering Hands recommends a 90-day program. Additional fees may be charged as described in the ADDITIONAL FEE statement above. The 90-day program fee includes 3-months of shared alcohol and drug-free living, drug testing, life skills and recovery coaching, rides to and from meetings and medication support valued at \$3000/mo.**

**Total Monthly Fee (shared living quarters)  
\$3000 for each 30 days.**

**Recovering Hands Program is a 90-day program. Residents/guarantors are responsible for all fees for the total 90 days. These fees total \$9000. Any resident who withdraws from the program (either voluntarily or as a result of therapeutic discharge) before completing 90-days of the program forfeits the balance of paid fees. If a resident**

wishes to commit to only 30 or 60 days instead of the recommended 90 days, the costs will be adjusted accordingly.

*In the event a resident withdraws from the program and wishes to return within 45 days of their last day in residence, the balance of paid fees will be applied to future services. Those who elect to return after 45 days will be required to commit to a full 60-day program, and balance transfer requests will be considered on a case-by-case basis.*

**Payment Options for Recovering Hands –**

Resident's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_(initial)\_\_\_\_\_ I agree to cover the cost of \$9,000.00 for the full 90-day period. Payment is due prior to the beginning of the first 30-day period unless other arrangements have been agreed upon. Any other arrangements must be written out below and signed by both the primary and secondary guarantors and Recovering Hands.

*Recovering Hands accepts Checks, Credit Cards (REQUIRES CARD AUTHORIZATION FORM) and Cash.*

**Primary Guarantor (Resident)**

**My signature below certifies that I have read, understand and agree to these financial terms and agree to serve as the primary guarantor for Recovering Hands fee of \$9000.00. This fee is for my 90-day Recovering Hands Program beginning \_\_\_\_\_ (date) \_\_\_\_\_.**

**I agree to utilize my personal savings and/or earned income to pay as much of the stated fee as possible and will reimburse the secondary guarantor for any agreed upon pre-paid fees. I understand that, unless I pay the full \$9000.00 in advance, I must identify a secondary guarantor who has agreed to underwrite my fees if needed.**

Primary Guarantor (Resident) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Secondary Guarantor**

**My signature below certifies that I have read, understand and agree to these financial terms and agree to serve as the secondary guarantor for \_\_\_\_\_(Resident's name)\_\_\_\_\_ for the period of \_\_\_\_\_(dates)\_\_\_\_\_ through \_\_\_\_\_(dates)\_\_\_\_\_ and agree to pay \$9000.00 for her 90-day stay at Recovering Hands. I understand that, in the event that the RH resident I represent has personal saving and/or earned income, she will pay as much of the stated fees as possible.**

Secondary Guarantor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Other Arrangements must be written out below and agreed upon by the primary and secondary guarantors and by Recovering Hands intake staff.

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