

## Fees

You are required to pay for fees as you receive them. Being responsible for your treatment costs is part of your recovery process. Prices are subject to change with a thirty-day notice.

### *Fees are as follows:*

|  |          |
|--|----------|
| Intake Fee (1 <sup>st</sup> week of treatment) | \$260.00 |
| Transfer fee (document fee)                    | \$25.00  |
| Pregnancy Test (additional)                    | \$15.00  |
| Random Weekly/Monthly UDS                      | \$0      |

### Dose Reassessment Fees for Absences

|               |         |
|---------------|---------|
| 2 days absent | \$40.00 |
| 3 days absent | \$60.00 |
| 5 days absent | \$75.00 |

### Fee – Suboxone after 1<sup>st</sup> week

(Counseling, Physician, Drug screen)

|          |          |
|----------|----------|
| Weekly   | \$80.00  |
| Biweekly | \$140.00 |
| Monthly  | \$200.00 |

|                            |         |
|----------------------------|---------|
| Yearly Physical Exam       | \$75.00 |
| GC/MS Confirmation         | \$30.00 |
| Lockbox                    | \$15.00 |
| Peak and Trough Serum Test | \$45.00 |
| Court Appearances          | \$75.00 |

### Hours of Operation

Monday-Friday 6:00 am-11:00 am

*Medication and Counseling*

Saturday 7:30 am-9:30 am

*Medication only*

### Program Services

Suboxone

Methadone Maintenance

Drug Abuse Recovery Education

Individual Counseling

Case Management/Counseling

Urine Drug Screens

Physical Examinations

## PRESCRIPTION CRITERIA

**Patients must meet the following criteria to receive prescription medication:**

- no illicit opiate use
  - no alcohol or illicit drug abuse
  - regular clinic attendance
  - attending counseling sessions
  - no recent criminal activity
  - no serious behavioral problems (either in or outside of the clinic)
  - stable home environment and social relationships
  - ability to safely store medications at home
  - length of time in treatment, level of maintenance (to include 2 consecutive clean UDS)
  - your current daily life schedule to include work, school, family responsibilities and travel distance to the clinic will be evaluated
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LEVEL 1:      Week 1            (Daily Dosing at site clinic – No prescription)

LEVEL 2:      Week 2 - 4        (2 Weekly prescriptions 3 day & 4 day)

LEVEL 3:      Week 5 – 9        (1 Week prescription)

LEVEL 4:      Week 10 – 16    (Biweekly prescription)

LEVEL 5:      Week 17            (Monthly prescription)

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