

## PARTICIPATION AGREEMENT FOR RESIDENTIAL TREATMENT CENTER (RTC)

| ARTICLE | TITLE  |    |
|---------|--|----|
| 1       | RECITALS   |    |
|         | 1.1 Identification Of Parties .....                          | 1  |
|         | 1.2 Authority For Residential Treatment Center Care .....    | 1  |
|         | 1.3 Purpose Of Participation Agreement .....                 | 1  |
| 2       | DEFINITIONS  |    |
|         | 2.1 Authorized TMA Representatives .....                     | 1  |
|         | 2.2 Billing Number .....                                     | 1  |
|         | 2.3 Admission And Discharge .....                            | 1  |
|         | 2.4 Mental Disorder .....                                    | 2  |
|         | 2.5 Residential Treatment Center .....                       | 2  |
|         | 2.6 Therapeutic Absence .....                                | 3  |
| 3       | PERFORMANCE PROVISIONS                                       |    |
|         | 3.1 General Agreement .....                                  | 3  |
|         | 3.2 Limit On Rate Billed .....                               | 3  |
|         | 3.3 Accreditation And Standards .....                        | 3  |
|         | 3.4 Quality Of Care .....                                    | 5  |
|         | 3.5 Billing Form .....                                       | 5  |
|         | 3.6 Compliance With TMA Utilization Review Activities .....  | 5  |
|         | 3.7 Professional Staff Organization .....                    | 6  |
|         | 3.8 Professional Staff Qualifications .....                  | 6  |
| 4       | PAYMENT PROVISIONS   |    |
|         | 4.1 Rate Structure: Determination Of Rate .....              | 6  |
|         | 4.2 RTC Services Included In Per Diem Payment .....          | 7  |
|         | 4.3 Other Payment Requirements .....                         | 8  |
|         | 4.4 Prerequisites For Payment .....                          | 8  |
|         | 4.5 TRICARE/CHAMPUS-Determined Rate As Payment In Full ..... | 9  |
|         | 4.6 TRICARE/CHAMPUS As Secondary Payor .....                 | 9  |
|         | 4.7 Collection Of Cost Share .....                           | 9  |
|         | 4.8 Beneficiary's Rights .....                               | 10 |
| 5       | EDUCATIONAL COSTS  |    |
|         | 5.1 Reimbursement Of Educational Services .....              | 10 |
|         | 5.2 Exclusion From Per Diem Rate .....                       | 10 |
|         | 5.3 Accounting Requirements .....                            | 10 |

| ARTICLE | TITLE   |    |
|---------|---|----|
| 6       | RECORDS AND AUDIT PROVISIONS                            |    |
| 6.1     | On-site And Off-Site Reviews/Audits .....               | 10 |
| 6.2     | Right To Unannounced Inspection Of Records .....        | 11 |
| 6.3     | Certified Cost Reports .....                            | 11 |
| 6.4     | Records Requested By TMA .....                          | 11 |
| 6.5     | Failure To Comply .....                                 | 11 |
| 7       | NONDISCRIMINATION                                       |    |
| 7.1     | Nondiscrimination .....                                 | 12 |
| 8       | AMENDMENT   |    |
| 8.1     | Amendment By TMA .....                                  | 12 |
| 9       | CHANGE OF OWNERSHIP                                     |    |
| 9.1     | Assignment Barred .....                                 | 12 |
| 9.2     | Agreement Ends .....                                    | 13 |
| 9.3     | New Agreement Required .....                            | 13 |
| 10      | REPORTS   |    |
| 10.1    | Incident Reports .....                                  | 14 |
| 10.2    | Disaster Or Emergency Reports .....                     | 14 |
| 10.3    | Reports Of RTC Changes .....                            | 14 |
| 11      | GENERAL ACCOUNTING OFFICE                               |    |
| 11.1    | Right To Conduct Audit .....                            | 15 |
| 12      | APPEALS   |    |
| 12.1    | Appeal Actions .....                                    | 15 |
| 13      | TERMINATION   |    |
| 13.1    | Procedure For Termination Of The Agreement By TMA ..... | 15 |
| 13.2    | Basis For Termination Of The Agreement By TMA .....     | 15 |
| 13.3    | Termination Of Agreement By The RTC .....               | 16 |
| 14      | RECOUPMENT  |    |
| 14.1    | Recoupment .....  | 16 |
| 15      | ORDER OF PRECEDENCE                                     |    |
| 15.1    | Order Of Precedence .....                               | 17 |
| 16      | DURATION  |    |
| 16.1    | Duration .....  | 17 |
| 16.2    | Reapplication .....                                     | 17 |
| 17      | EFFECTIVE DATE  |    |
| 17.1    | Effective Date .....                                    | 17 |

| ARTICLE | TITLE                                   |
|---------|---|
| 18      | AUTHORIZED PROVIDER                     |
| 18.1    | TRICARE/CHAMPUS-Provider Status..... 17 |

