

# EverPath Client Intake Packet



**E v e r P a t h . L i f e**

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**Welcome to EverPath. This packet contains all necessary forms and documents for a smooth and efficient client intake process. We are dedicated to providing clear, reliable support for individuals with intellectual and developmental disabilities (IDD) and their families**

### Instructions:

1. Please complete the initial consultation form, ensuring that all necessary information is provided.
2. Review and complete the forms that apply to your specific situation\* (existing estate plan or new setup).
3. Our team will guide you through the remaining steps, ensuring clarity and confidence in your support plan.

### Contact Information:

[Your Full Name] | EverPath | [Your Contact Information]

Email: [Your Email Address]

Phone: [Your Phone Number]

*This document contains separate intake forms for each key aspect of the EverPath service model. These forms can be customized for each client, ensuring clarity on our roles, responsibilities, and service limitations*

# EverPath Initial Consultation

This form is used to document the initial consultation with the client, family, or guardian. It ensures clarity on their needs and the scope of EverPath's support.

Client's Full Legal Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Guardian/Family Representative: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Date of Consultation: \_\_\_\_\_

## Legal and Financial Setup

This section is used for clients who do not have an established estate plan, guardianship orders, or financial management for the client

☐ Please Check This Box if you already have an established Estate Plan, guardianship orders and a financial management agency and skip to the next section

Planned Legal Firm Involved (If different from our Partnered Agency):

\_\_\_\_\_

Planned Accounting Firm Involved (If different from our Partnered Agency):

\_\_\_\_\_

Date Setup Began or Planned Setup Date: \_\_\_\_\_

Expected Completion Date (If known): \_\_\_\_\_

## Primary Concerns/Goals Discussed:

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## Document Review and Verification Form

This form is used to review and verify all existing legal and financial documents, ensuring accuracy and compliance.

### Documents Reviewed

- ☐ Estate Plan (Will, Trust, Powers of Attorney)
- ☐ Guardianship Orders
- ☐ Financial Records (Budget, Trust Statements/ABLE Account)
- ☐ Medicaid Waiver Services (ISP, RSNA, SIS, Psychological Evaluation)
- ☐ IFDS Related Documents (Consent to communicate with FSA)
- ☐ Other: \_\_\_\_\_

Verification Completed By: \_\_\_\_\_

Expected Finalization Date (if in development): \_\_\_\_\_

Date: \_\_\_\_\_

### Service Planning

This section outlines the specific services EverPath will provide

#### Menu of Services

Please select all areas and supports you are requesting or wish to learn more about

<input type="checkbox"/> Estate Plan – Setup Guidance/Compliance	<input type="checkbox"/> Transportation Resources Guidance
<input type="checkbox"/> Accountancy – Setup Financial Oversight	<input type="checkbox"/> ISP and IDD Waiver Meeting Advocacy
<input type="checkbox"/> Tax Preparation and Filing	<input type="checkbox"/> Home Maintenance Assistance as needed
<input type="checkbox"/> Representative Payee for SSI/SSDI	<input type="checkbox"/> In-Person Quality Visits and Health Check-ins
<input type="checkbox"/> Trustee Services	<input type="checkbox"/> IDD Waiver Compliance
<input type="checkbox"/> Co-Guardianship Services	<input type="checkbox"/> IFDS EOR Management and Compliance Assistance
<input type="checkbox"/> Emergency and/or Crisis Response	<input checked="" type="checkbox"/> Admin and Document Management Fee*

\*Required

#### Crisis Response

Indicate all applicable documents

<input type="checkbox"/> Emergency Contact Numbers (Professional, Medical, Personal and Family/Guardian)
<input type="checkbox"/> Formal Behavior Plan (Monitored by a Psychologist)
<input type="checkbox"/> Risk Support Needs Assessment (Alliance)
<input type="checkbox"/> Health Risk Assessment (Vaya)
<input type="checkbox"/> Individualized Intervention Strategies
<input type="checkbox"/> Medical and/or Seizure Protocols
<input type="checkbox"/> Assistive Technology/Medical or Therapeutic Devices

#### Scheduled Monitoring Frequency

☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Quarterly

Preferred Day(s)\_\_\_\_\_ Preferred Time(s)\_\_\_\_\_

## EverPath Consent Form for Release of Information

This consent form authorizes EverPath to share or receive Protected Health Information (PHI) and other confidential information related to the individual named below with the specified parties. This consent is provided in compliance with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable privacy laws.

### Individual Information

Client's Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### Information to be Shared

The following categories of information may be shared with the specified parties (select all that apply):

- ☐ Medical Records (Diagnosis, Treatment Plans, Medications)
- ☐ Psychological or Behavioral Health Information
- ☐ Waiver-Related Documentation (ISP, Service Plans, EOR Management)
- ☐ Financial Records (Trust Information, Estate Plan Budgets)
- ☐ Legal Documents (Guardianship Orders, Trust Agreements)
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

### Specified Parties

This consent authorizes EverPath to share information with the following parties:

- ☐ Partnered Accounting Firm (e.g., Nelson & Company, P.A.)

Accounting Firm Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_

- ☐ Partnered Legal Firm (e.g., Anthony D. Nicholson, Esq.)

Legal Firm Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_

- ☐ Waiver-Related Agencies or Individuals (MCOs, Care Managers)

Agency or Individual Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_

- ☐ Other Parties (Doctors, Community Connections, Friends, Family)

Name/Organization: \_\_\_\_\_

Relationship: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Relationship: \_\_\_\_\_  
Contact Information: \_\_\_\_\_  
Name/Organization: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Contact Information: \_\_\_\_\_  
Name/Organization: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Contact Information: \_\_\_\_\_  
Name/Organization: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Contact Information: \_\_\_\_\_

### **Authorization Period**

This consent is valid for one year from the date of signature unless revoked in writing by the individual or their representative.

### **Signature and Acknowledgment**

I, the undersigned, authorize EverPath to share and receive the specified information as indicated above.

Individual or Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

Witness Signature (Optional): \_\_\_\_\_

Date: \_\_\_\_\_

## EverPath Roles and Responsibilities Informational Guide and Consent Form

Welcome to EverPath. We are committed to providing comprehensive, reliable support for individuals with intellectual and developmental disabilities (IDD) and their families. This guide explains the roles and responsibilities of both EverPath and the family or guardian, ensuring clear expectations and a strong partnership.

### EverPath's Responsibilities

EverPath is responsible for providing consistent support and monitoring to ensure the health, safety, and well-being of the individual receiving services. Our services are designed to maintain quality care, ensure compliance, and provide peace of mind to families. Below is a detailed breakdown of our responsibilities.

#### 1. Monthly Responsibilities

- Routine in-person monitoring: EverPath staff will visit the individual's home to assess their health, safety, and living conditions, ensuring a clean, secure, and supportive environment.
- Quality checks of direct care services: We will monitor the quality of care provided by staff, ensuring they adhere to service plans and respect the individual's rights.
- Crisis response planning: We maintain an up-to-date emergency response plan, ensuring quick support in case of a crisis.

#### 2. Weekly Responsibilities

- Regular communication: EverPath will maintain open communication with the family/guardian, providing updates and addressing concerns.
- Documentation management: We will maintain accurate records of care, monitoring, and any incidents that occur.

#### 3. Quarterly Responsibilities

- ISP and Tailored Plan participation: We will attend Individual Support Plan (ISP) or Tailored Plan meetings, advocating for the client's needs.
- Financial review: In collaboration with our partnered accounting firm, we will review and adjust the estate plan budget as needed, and conduct periodic audits on petty cash usage and personal spending throughout the year.

#### 4. Yearly and Subject to Need Responsibilities

- Comprehensive annual review: We will review all aspects of the individual's care, including legal documents, financial status, and care services.

- Assistance, guidance and advocacy related to estate plan stability and/or changing support needs, as well as advocacy in relation to unexpected crises and/or emergencies and complex non-life threatening situations that present the need for guidance and assistance.
- Legal and financial coordination: We will work with our partnered law firm and accounting firm to ensure that the estate plan remains up-to-date and compliant and assist with the completion of the client's annual taxes.

### **Family or Guardian Responsibilities**

While EverPath provides ongoing support, the family or guardian also plays a crucial role in ensuring the individual's well-being. Below are your responsibilities as part of our partnership.

- Provide accurate information: Inform EverPath of any changes in the individual's health, living situation, or support needs.
- Maintain communication: Stay in contact with EverPath staff, responding to any requests for information or updates.
- Cooperate with EverPath's monitoring process: Allow EverPath staff to conduct in-person monitoring and assessments as needed.
- Work with partnered professionals: Engage with the partnered law firm for legal matters and the accounting firm for financial management.

### **What Families Can Expect from EverPath**

At EverPath, we are committed to maintaining the highest standards of care, support, and advocacy for individuals with IDD. You can expect the following from our team:

- Professionalism: Our staff are trained, respectful, and dedicated to supporting your loved one.
- Transparency: We will keep you informed of all actions we take, providing clear reports and updates.
- Advocacy: We will advocate for your loved one's rights in all interactions with care providers, legal representatives, and financial managers.

### **Questions or Concerns?**

If you have any questions about EverPath's roles and responsibilities, please contact us at:

[Your Full Name] | EverPath | [Your Contact Information]



## Consent and Agreement

By signing this form, you acknowledge and consent to the roles and responsibilities outlined above. This consent remains in effect as long as EverPath provides services, unless revoked in writing.

Individual/Guardian/Family/Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

EverPath Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

## EverPath Client Intake Timeline

This document provides a clear timeline of the intake process for two different client scenarios. The first scenario is for clients who already have an existing estate plan, guardianship, and representatives. The second scenario is for clients who do not yet have these items in place.

### Clients with an Existing Estate Plan, Guardianship, and Representatives

Step	Task	Estimated Timeframe
1	Initial Consultation	1-2 Days
2	Document Review and Verification	3-5 Days
3	Service Planning and Onboarding	5-7 Days
4	Regular Service Implementation	Ongoing

### Clients Without an Existing Estate Plan, Guardianship, or Representatives

Step	Task	Estimated Timeframe
1	Initial Consultation	1-2 Days
2	Legal and Financial Setup	7-14 Days
3	Service Planning and Onboarding	5-7 Days
4	Finalize Legal and Financial Documents	7-14 Days
5	Regular Service Implementation	Ongoing

## EverPath Client Intake Fee

At EverPath, we are committed to providing clear, transparent pricing for our services. This document provides a complete breakdown of fees for two client scenarios: those with an existing estate plan, guardianship, and representatives, and those who are starting without these items in place.

### Scenario 1: Clients with an Existing Estate Plan, Guardianship, and Representatives

This option is for clients who already have an established estate plan, guardianship, and representatives.

#### Initial Setup Fees:

- Initial Consultation: \$150 (one-time, flat rate)
- Document Review and Verification: \$250 (one-time, flat rate)
- Service Planning and Onboarding: \$300 (one-time, flat rate)

Total Initial Setup Fees: \$700 (one-time)

#### Ongoing Monthly Fees:

- Regular in-person monitoring, quality checks, and crisis response: \$250 - \$500/visit

### Scenario 2: Clients Without an Existing Estate Plan, Guardianship, or Representatives

This option is for clients who do not yet have an established estate plan, guardianship, or financial management.

#### Initial Setup Fees:

- Initial Consultation: \$150 (one-time, flat rate)
- Legal Setup (Handled by our partnered legal firm): \$750 - \$1,500 (one-time, paid directly to the law firm)
- Financial Setup (Handled by our partnered accounting firm): \$300 - \$500 (one-time, paid directly to the accounting firm)
- Service Planning and Onboarding: \$300 (one-time, flat rate)

Total Initial Setup Fees (Estimated): \$450 (EverPath) + \$750 - \$1,500 (Legal) + \$300 - \$500 (Accounting)

#### Ongoing Monthly Fees:

- Regular in-person monitoring, quality checks, and crisis response: \$250 - \$500/visit

**Additional Notes:**

The ongoing monthly fees depend on the frequency of monitoring visits and support services needed. All legal and financial setup fees for Scenario 2 are paid directly to the partnered law and accounting firms, ensuring that you receive expert, specialized services.

For any questions about these fees or to begin the intake process, please contact us at:  
[Your Full Name] | EverPath | [Your Contact Information]

## Extended EverPath Fee Schedule for Estate Management Services

(Effective July 1, 2025)

**Location:** Central North Carolina

*EverPath does not provide legal advice or representation. We work in coordination with licensed attorneys and estate professionals to help facilitate estate management and planning decisions. Clients are encouraged to seek independent legal counsel for specific legal matters.*

### 1. Intake Fee

**Description:** One-time fee for initial assessment, client intake, and setup, including review of medical, financial, and legal documentation.

**Fee:** \$500

(Based on 3 hour expected direct services duration). This fee is subject to change in complex situations exceeding this 3 hour block of time.

### 2. Estate Plan Coordination Fee

**Description:** Fee for assisting clients in understanding and coordinating estate planning needs, including liaising with legal partners for will execution, trust administration, and other legal documentation. EverPath does not provide legal services but can help clients navigate and communicate with licensed professionals.

**Fee:** \$150 - \$250 per hour

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

*This fee may be subject to change based on complexity or partner law firm rates.*

### 3. Accountancy Services (Periodic and As Needed)

**Description:** Fee for financial review and management services, including oversight of a special needs trust, ABLE accounts, and periodic audits of the Client's financial situation to ensure compliance and safeguard against fraud.

**Fee:** \$100 - \$175 per hour

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

*For regular financial oversight, the fee may be assessed quarterly or annually depending on needs.*

### 4. Tax Preparation and Filing

**Description:** Fee for preparing and filing the Client's annual tax return, including special considerations for individuals with special needs and applicable exemptions.

**Fee:** \$200 - \$400 per return Dependent on the complexity of the return and the need for specific documentation.

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

### 5. Representative Payee for Supplemental Security Income

**Description:** Monthly fee for acting as the representative payee for the Client's Supplemental Security Income (SSI), managing and ensuring the proper distribution of funds in accordance with SSI regulations.

**Fee:** \$50 - \$100 per month

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

## 6. Trustee Services

**Description:** Annual fee for overseeing trust administration logistics, coordinating with legal and financial professionals, and ensuring the proper execution of trust-related tasks. EverPath does not act as a license fiduciary or provide legal trust services directly but facilitates communication and operational oversight.

**Fee:** \$1,500 - \$3,000 per year

*Fee is typically assessed annually, depending on the complexity and size of the trust.*

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

## 7. Co-Guardian Services

**Description:** Annual fee for acting as co-guardian, which includes overseeing the Client's well-being, decision-making in line with their Medicaid waiver, and other regulatory matters, in partnership with the family or primary guardian.

**Fee:** \$2,000 - \$4,000 per year

*This can vary depending on the level of involvement and complexity of the guardianship arrangement.*

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

## 8. Assistance with Home and/or Support Services Needs

**Description:** Hourly fee for providing ad-hoc support services as needs arise, which may include coordination or direct assistance with home care, personal assistance, or coordinating with the support network.

**Fee:** \$75 - \$150 per hour

*This fee is assessed when assistance is required on an unscheduled or emergency basis.*

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

## 9. Monthly In-Person Visits & Check-Ins to Support Network

**Description:** Monthly fee for in-person visits to the Client's residence or service location, which includes coordination with their primary physician, allied health professionals, and participation in the annual individual service plan (ISP) or Tailored Plan review for Medicaid waiver supports.

**Fee:** \$250 - \$500 per visit

*This includes the cost of the visit, professional coordination, and preparation of necessary documentation for the ISP meeting.*

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

## 10. General Administrative and Document Management Fee

**Description:** Monthly administrative fee for documentation organization, record-keeping, communication with service providers, and other necessary administrative tasks associated with managing the Client's care and estate plan.

**Fee:** \$100 - \$200 per month

Use fixed rates when possible; if flexibility is needed, provide structured conditions (e.g. "for estates exceeding \$500,000, additional hourly rates apply").

### Discounts and Payment Plans

1. **A. Multi-Service Package Discount:** A 10% discount is available when a Client signs up for multiple services at once (e.g., combining trustee services, guardianship, and monthly check-ins).
2. **B. Payment Plans:** EverPath offers flexible payment plans for clients who require them, with options to pay quarterly, semi-annually, or annually.
3. **C. Sliding Scale:** For clients with financial hardship, a sliding scale fee structure may be considered on a case-by-case basis.

Clarify sliding scale criteria, if financial hardship adjustments are available. Consider defining how eligibility is determined.

### Important Notes

- **Mileage & Travel Fees:** If services require travel beyond a 25-mile radius from the Client's home location, additional mileage charges may apply at \$0.50 per mile.
- **Emergency Services:** For any services rendered outside of standard office hours or in emergency situations, an additional surcharge of 20% will be added to the base hourly rate.
- **Additional Charges:** Fees may be adjusted based on the complexity of individual cases, including but not limited to additional legal or financial consultations, court appearances, or urgent service needs.

### Payment Terms

**Invoices** will be issued monthly for services rendered, with payments due within 30 days of receipt.

**Late Payments:** A 5% late fee will be charged on all outstanding balances over 30 days.

### Conclusion

This fee schedule outlines the range of services and corresponding fees for EverPath's estate planning and support services. Fees may vary depending on the specific needs and circumstances of each Client. If you have any questions or would like a more detailed breakdown of costs, please contact us directly.

This fee schedule is a starting point. You may want to review regional standards, consult with local professionals, or adjust the figures based on competitive factors or the specifics of your target market.