# **PLEASE COMPLETE THIS FORM IF YOUR AGENCY PROVIDES**

## **PERSONAL EMERGENCY RESPONSE SYSTEMS**

**CHOICE rate ($30 maximum for CHOICE monthly service)**

|  |  |
| --- | --- |
| Basic monthly monitoring services |  |
| Enhanced monthly service |  |
| Extra Button, same household monthly service |  |
| Installation fee |  |
| Other |  |

**PRIVATE PAY rates (Optional)**

|  |  |
| --- | --- |
| Basic monthly monitoring service |  |
| Enanced monthly service |  |
| Extra button, same household service |  |
| Installation fee |  |
| Other |  |

This information will assist Options Counselors when providing information to callers not receiving services funded through Generations programs.

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| --- | --- | --- |
|  |  |  |

Signature Title Date

Revised June 2021