



## Senior Care Outreach

10397 N Hualapai Dr.

Casa Grande, Arizona 85122

Phone: 602.707.7300

Website: [www.seniorcareoutreach.org](http://www.seniorcareoutreach.org)

### **MASTER SERVICE AGREEMENT: CARE PARTNER PROGRAM**

This Agreement is made this \_\_\_\_ day of \_\_\_\_\_, 2026, by and between Senior Care Outreach ("Charity"), an Arizona non-profit corporation, and Silver Services, LLC ("Service Provider"), an Arizona Limited Liability Company and licensed/authorized in-home care agency.

#### **1. Purpose of Agreement**

The Charity provides financial assistance to eligible seniors ("Beneficiaries") for non-medical in-home care. The Service Provider agrees to deliver these services to approved Beneficiaries, and the Charity agrees to pay for such services under the terms below.

#### **2. Scope of Services**

Services provided shall be non-medical in nature and may include:

- Companionship and wellness checks.
- Meal preparation and nutrition support.
- Light housekeeping and laundry.
- Transportation to medical appointments or grocery shopping.
- Medication reminders (non-administration).
- Other services as agreed to by both parties.

#### **3. Payment & Billing**

- Charity Rate: The Service Provider agrees to provide services at a "Community Impact Rate" of \$\_\_\_\_\_ per hour.
- Authorization: The Charity will issue a written Care Authorization Form for each Beneficiary, specifying the maximum number of hours per week approved for funding.
- Invoicing: Service Provider shall submit monthly invoices to the Charity. Invoices must include:

1. The Beneficiary's name.

2. Dates and hours of service.

3. A signed Service Verification Log (or digital equivalent).

- Direct Pay: The Charity shall pay the Service Provider directly within [15/30] days of receipt of a valid invoice. The Beneficiary shall never be billed for authorized hours.

#### **4. Quality of Care & Compliance**

- Personnel: Service Provider warrants that all caregivers assigned to Beneficiaries have passed a background check and, where applicable, hold a valid Arizona Fingerprint Clearance Card.
- Supervision: Service Provider remains the sole employer of the caregivers and is responsible for all training, supervision, and payroll taxes.
- Insurance: Service Provider shall maintain General Liability and Workers' Compensation insurance and shall name Senior Care Outreach as an "Additional Insured" upon request.

#### **5. Term & Termination**

This agreement remains in effect for one (1) year and will auto-renew unless either party provides 30 days' written notice of termination. If the Charity's funding for a specific Beneficiary is exhausted, the Charity may terminate service for that individual with [48-72] hours' notice.

#### **6. Limitation of Liability**

The Charity is a funding entity only. The Service Provider assumes all liability for the professional conduct of its staff and the safety of the Beneficiary during the delivery of services.

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#### **SIGNATURES**

For Senior Care Outreach: \_\_\_\_\_ Date: \_\_\_\_\_

For Service Provider: \_\_\_\_\_ Date: \_\_\_\_\_