



Soar Pediatric Therapy
PO Box 31
Sidney, NE 69162
308-225-1870
Fax 888-908-5481

June 4, 2026

Mr. Loren Engel
PO Box 608
Chappell, NE 69129

Dear Mr. Engel,

Thank you for allowing me to provide Physical Therapy services for your district this past year. I had a great time with all the children, parents, and teachers and am looking forward to working with you this upcoming year. If you have any feedback or ideas on ways to improve services in your district, please let me know.

I have attached a new contract for the 2026/2027 school year for you to sign and return to our office as soon as possible. Our rate will follow the state approved rate of \$82.00 per hour for physical therapy services and \$0.725 per mile for travel. I will continue to provide the same monthly billing statements via email.

Thank you again for your support,

Michelle A. Weimer, MS PT
Michelle Weimer, MS PT
Soar Pediatric Therapy

Physical Therapy Service Agreement Between

SOAR Pediatric Therapy, LLC.

And

Creek Valley Public Schools

This **AGREEMENT**, made the 1st day of August, 2026 by and between SOAR Pediatric Therapy, LLC., ('Contractor') and Creek Valley Public Schools ('CVPS').

1. **SERVICES.** Contractor agrees to provide physical therapy services to students of CVPS in accordance with the terms of this Agreement.
2. **TERM.** The term of this Agreement shall be for one (1) year commencing on August 1, 2026 and expiring on July 31, 2027. Either party may terminate this Agreement at any time without cause and without penalty by giving thirty days written notice to the other party.
3. **Schedule of Charges for Physical Therapy Services.** Contractor will be reimbursed \$82.00 per hour for physical therapy services rendered to CVPS. Contractor will be reimbursed for any appointments that are no-shows without advanced notice. Contractor will be reimbursed for travel & documentation time at the rate of \$82.00 per hour. Contractor will also be reimbursed at the state approved mileage rate per mile for mileage required to provide services to CVPS, this amount is currently \$.725 per mile, but may change throughout the school year.
4. **Contractor's Responsibilities.** Throughout the term of this Agreement, Contractor will:
 - a. Provide physical therapy services to students designated by CVPS through licensed personnel prepared by education and experience to provide such services to qualified students in accordance with the individual student's Individualized Education Plan (IEP).
 - b. Confer with staff, physicians, teachers, and the student's family or caretaker to ensure coordination and continuity of care.
 - c. Submit a monthly itemized statement for services with a schedule for charges and record sheets for the students.
5. **CVPS Responsibilities.** Throughout the term of this Agreement CVPS will:
 - a. Arrange for a time and place for treatment, staffing and conferences as needed to inform personnel involved of such arrangements
 - b. Submit to the person designated by Contractor a report on the quality of services and any suggestions for improvement.
 - c. Pay Contractor for services rendered within 30 days of receiving record sheets and a bill from the Contractor.

6. **Limitation on Liability.** Each party agrees to accept and is responsible for its own acts and omissions in providing services under this Agreement as well as those acts or omissions of its employees and agents and nothing in this Agreement shall be construed as placing any responsibility for such acts or omissions onto the other party.

In Witness Whereof, the parties have executed this Agreement on the dates set forth below their respective names.

SOAR Pediatric Therapy, LLC.

Contractor

By Michelle A. Weimer, MS PT
Michelle Weimer, PT
SOAR Pediatric Therapy, LLC.

Creek Valley Public Schools

CVPS

By _____
Mr. Loren Engel
Superintendent