



CONSUMER SUMMARY

Facility Posting

Facility Operating Certificate Name	<i>Longview, an Ithacare Community (730-E-002)</i>																								
Full Address	<i>1 Bella Vista Drive, Ithaca, NY 14850</i>																								
Website link Facility	Longview Website www.longviewithaca.org																								
Website link DOH																									
Starting rent for each license and certification	<p style="text-align: center;">FOURTH FLOOR ALR</p> <p>4TH FL RESIDENT RATES 2026</p> <table><thead><tr><th></th><th>Single</th><th>Large 1 per</th><th>Large 2 per</th></tr></thead><tbody><tr><td>SSI Tier 1</td><td>\$1,426</td><td>NA</td><td>\$2,852</td></tr><tr><td>SSI+1</td><td>\$1,427</td><td>NA</td><td></td></tr><tr><td>ALR Tier 1</td><td>\$4,782</td><td>\$5,321</td><td>\$8,608</td></tr></tbody></table> <p>ASL Middle Income \$2,600 / \$3,100 / \$3,600</p> <p>Single 56 Large/Double 4 60 Total Rooms SSI/RPAA \$262</p> <p style="text-align: center;">GARDEN ALR/EALR</p> <p>GARDEN RESIDENT RATES 2026</p> <table><tbody><tr><td>ALR Tier 1</td><td>\$7,876</td></tr><tr><td>EALR Tier 2</td><td>\$7,876</td></tr><tr><td>EALR Tier 3</td><td>\$8,377</td></tr></tbody></table> <p>Single 32 32 Total Rooms</p>				Single	Large 1 per	Large 2 per	SSI Tier 1	\$1,426	NA	\$2,852	SSI+1	\$1,427	NA		ALR Tier 1	\$4,782	\$5,321	\$8,608	ALR Tier 1	\$7,876	EALR Tier 2	\$7,876	EALR Tier 3	\$8,377
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Summary of Services (consistent language)	Assisted Living Tier 1 *(Included for all Levels)	Enhanced Assisted Living Tier 2 *(Included for all Levels)	Enhanced Assisted Living Tier 3 *(Included for all Levels)
	<p>ADLs:</p> <ul style="list-style-type: none"> -Minimal assistance/supervision with personal hygiene: <u>bathing</u>, grooming, dressing -Independent mobility including wheelchair, walker, scooter -Reminders for social activities -Independent or minimal intermittent assistance with management of durable medical equipment -Case Management -Individual Service Plan (ISP) -Daily routine verbal reminders needed for bowel and bladder -Exhibits <u>needs</u> for redirection & orientation <u>daily</u> to person, place, time <p>Medication:</p> <ul style="list-style-type: none"> -Assistance with meds or monitor ability of "self-administration." -Medication acquisition, storage, and disposal. <p>Clinical Services</p> <ul style="list-style-type: none"> -Laboratory coordination (glucose, PT/INR, etc.) -Minimal assistance in managing oxygen equipment; ordering mobility devices, coordinating services from outside providers. <p>Ancillary Services: *</p> <ul style="list-style-type: none"> -Housekeeping -Laundry -Three meals daily, minimum one snack, modified diets -Personal allowance account -Arranging transportation / scheduling appointments -Minimum of 35hrs/wk of programming/activities 	<p>ADLs:</p> <ul style="list-style-type: none"> -supervision for meals, monitor intake -1:1 assistance with, but not limited to: hygiene, bathing, dressing, toileting, incontinence devices, toileting schedule. -Exhibits needs for redirection, orientation, and closer observation -Case Management -Individual Service Plan (ISP) <p>Medication:</p> <ul style="list-style-type: none"> - Assistance with meds or monitor ability of "self-administration" at sight of staff. -Medication acquisition, storage, and disposal -Subcutaneous / Intramuscular injections (i.e., insulin) -Blood Glucose monitoring/or clinical assistance with. <p>Oxygen saturation</p> <p>Nursing: Observation by licensed nursing (less than 24 hours per day)</p>	<p>ADLs:</p> <ul style="list-style-type: none"> -supervision for meals, monitor intake -1:1 supervision and/or contact guard for transfer/ambulation -Chronic assist of 1-2 person(s) for transfers, mechanical lift, wheelchair, mobility, etc) -1:1 assist with colostomy, ileostomy, catheter care and maintenance. -Exhibits needs for redirection, orientation, and closer observation -Case Management -Individual Service Plan (ISP) <p>Medication:</p> <ul style="list-style-type: none"> - Assistance with meds or monitor ability of "self-administration." -Medication acquisition, storage, and disposal -Subcutaneous / Intramuscular injections (i.e., insulin) -Blood Glucose monitoring/or clinical assistance with. <p>Oxygen saturation</p> <p>Nursing: Observation by licensed nursing (less than 24 hours per day)</p>
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	<p><i>Disclaimer: This list is a summary and not exhaustive. Additional Details can be found in the Approved Residency Agreement.</i></p>		



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Cost for Additional Services – Tier billing or other	2026	guest meals
		\$8.50 breakfast
		\$12.25 lunch or dinner
		\$14.30 holiday meals
	2026	extra meals
		\$7.15 breakfast
		\$9.65 lunch or dinner
		guest/respite rooms
	ALR 1	\$225 meals included
	EALR 2	\$340 meals included
	EARL 3	\$375 meals included
	GUEST STUDIO	\$115 no meals
	GUEST ONE BED	\$145 no meals
	BE MY GUEST	\$115 meals included
		Other Services
		Photo Copies \$0.15 each
		Color Copies \$0.30 each
		Envelopes 0.10 to 1.00 each
	Fax Charge (incoming and outgoing)	\$2.35
	Replace Key	\$6.00
		Extra Maintenance \$29.00 /hour
		Extra Housekeeping \$29.00 /hour
		NSF Charge \$41.00 each
	Tray Delivery free if picked up free 1st 7 days after illness or injury	\$2.00 per delivery