



Department
of Health

CONSUMER SUMMARY

Facility Posting

Instructions: Please complete the information in the FACILITY RESPONSE table.

FACILITY RESPONSE

Facility Operating Certificate Name	Hillcrest Spring Residential Operating Certificate # 380-F-043
Full Address	5052 Rte 30 Upper Market Street, Amsterdam NY 12010
Website link Facility	Hillcrestspringresidential.com
Website link DOH	https://www.health.ny.gov/facilities/adult_care/
Starting rent for each license and certification	ALR \$4,800 per month private room, \$4,000 per month semiprivate room EALR \$6,300 per month private, \$5,500 per month semiprivate
Summary of Services (consistent language)	Hillcrest Spring offers 3 meals a day, refreshments and snacks 3 times a day, assistance with personal care like bathing, dressing, and grooming, medication assistance, 24hr supervision and monitoring, daily activities, case management, housekeeping and laundry services. • Facility also provides transportation to local medical appointments
Cost for Additional Services – Tier billing or other	Tiered billing for higher support needs available. Tier/Level 1, an additional \$1,500 per month Tier/Level 2, an additional \$2,500 per month