CONSUMER SUMMARY

Facility Posting

Facility Operating Certificate Name	*Longview, an Ithacare Community (730-E-002)*
Full Address	*1 Bella Vista Drive, Ithaca, NY 14850*
Website link Facility	Longview Website www.longviewithaca.org
Website link DOH	
Starting rent for each license and certification	**FOURTH FLOOR ALR** **4TH FL RESIDENT RATES 2026** 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 ASL Middle Income $2,600 / $3,100 / $3,600 Single 56 Large/Double 4 60 Total Rooms SSI/RPAA $262 **GARDEN ALR/EALR** **GARDEN RESIDENT RATES 2026** ALR Tier 1 $7,876 EALR Tier 2 $7,876 EALR Tier 3 $8,377 Single 32 32 Total Rooms

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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)
ADLs: -Minimal assistance/ supervision with personal hygiene; bathing, 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 needs for redirection & orientation daily to person, place, time	**ADLs:** -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)	**ADLs:** -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)
Medication: -Assistance with meds or monitor ability of "self-administration." -Medication acquisition, storage, and disposal.	**Medication:** - 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.	**Medication:** - 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.
Clincial Services -Laboratory coordination (glucose, PT/INR, etc.) -Minimal assistance in managing oxygen equipment; ordering mobility devices, coordinating services from outside providers.	-Oxygen saturation -Vital Signs-Observation by licensed nursing (less than 24 hours per day)	-Oxygen saturation -Vital signs (HHA/LPN) -Non-Complex dressing changes. Clinical evaluation accessible by licensed nursing (less than 24 hours per day)
Ancillary Services: * -Housekeeping -Laundry -Three meals daily, minimum one snack, modified diets -Personal allowance account -Arranging transportation / scheduling appointments -Minimum of 35hrs/wk of programming/activities	**Ancillary Services: *** -Housekeeping -Laundry -Three meals daily, minimum one snack, modified diets -Personal allowance account - Arranging transportation / scheduling appointments -Minimum of 35 hrs/wk for programming/activities	**Ancillary Services: *** -Housekeeping -Laundry -Three meals daily, minimum one snack, modified diets -Personal allowance account - Arranging transportation / scheduling appointments -Minimum of 35 hrs/wk for programming/activities

Disclaimer: This list is a summary and not exhaustive. Additional Details can be found in the Approved Residency Agreement.

NEW YORK STATE | Department of Health

CONSUMER SUMMARY

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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 $2.00 per delivery free 1st 7 days after illness or injury