



Resident Name: _____

Apt.#: _____ Date: _____

Assisted Living Fee Schedule

The rates below are based on a 30 day month. Actual charges will be billed at a daily rate. To figure out the daily rate, divide the monthly charge by 30.

Dominican Oaks Standard Amenities

- ❖ Apartment Home Maintenance
- ❖ Utilities (except telephone/internet)
- ❖ Cable Television at Senior Rate
- ❖ Emergency Call System
- ❖ 24-hour Staffing
- ❖ Wellness Program
- ❖ Three Meals per Day
- ❖ Activities and Social Events
- ❖ Scheduled Transportation
- ❖ Weekly Limited Laundry Service
- ❖ Weekly Housekeeping

Enhanced Services

Basic Program **\$1410/mo. \$47/day**

- ❖ Care Management by licensed nurse. Includes quarterly care conferences.
- ❖ Basic Medication Management - Storing, dispensing, assisting, and supervising of prescriptions and over the counter (OTC) medications or supplements. (Consists of 1-10 prescribed or OTC medications and/or supplements)
- ❖ Two scheduled showers per week with assistance dressing and grooming following the shower.
- ❖ Bed making, trash emptying, and putting away clean laundry.
- ❖ Reminders for meals & activities.
- ❖ Arrangement of medical appointments, when necessary.
- ❖ Additional activities designed expressly for Assisted Living residents.

Additional Services

Medical Services

- ❖ Extended medication management **\$225/mo. \$7.50/day**
(Consists of 11-14 prescribed or OTC medications and/or supplements)
- ❖ Complicated medication management **\$325/mo. \$10.84/day**
(Consists of 15 or more prescribed or OTC medications and/or supplements)
- ❖ Allowable health conditions (oxygen, nebulizer, etc.) **\$325/mo. \$10.84/day**
- ❖ Other health conditions (wound care, catheter, etc.) **\$700/mo. \$23.33/day**

Personal Care & Assistance Services

- ❖ Daily dressing and grooming **\$150/mo. \$5/day**
(Includes clothing selection, set-up, laying out of clothing and grooming supplies: deodorant, lotion, and toothpaste)
- ❖ Hands on dressing and grooming **\$360/mo. \$12/day**
(Includes clothing selection with application of undergarments, bra closer, shirt, pants, shoes, socks, sweater/jacket and incontinence products)

- ❖ Daily dependent dressing assistance (one care provider) **\$750/mo. \$25/day**
(Resident cannot stand independently and requires balance assistance. Dressing is performed by staff for application of all clothing)
- ❖ Additional showers **\$55/shower Flat Fee**
- ❖ Assistance with transferring **\$325/mo. \$10.84/day**
(Assistance with moving from bed to wheelchair/walker, toilet or chair/sofa)
- ❖ Routine Bathroom Assistance **\$575/mo. \$19.17/day**
(Assistance lowering/raising clothing, changing protective garments, getting on/off toilet)
- ❖ Management of Chronic Incontinence **\$775/mo. \$25.84/day**
(Routine schedule for toileting, personal hygiene care, changing of incontinence products, additional laundry and bathing as needed)
- ❖ Extensive Staff Assistance **\$425/mo. \$14.16/day**
(Related to frequent calling, cueing, redirection, noncompliance and/or refusal of care)
- ❖ Nightly apartment checks (greater than twice per night) **\$225/mo. \$7.50/day**
- ❖ Management of Bedside Commode/Bedpan/Urinal **\$150/mo. \$5.00/day**

Escort Service and Stand-by Assistance

- ❖ Beauty Shop & Assisted Living Activities **\$150/mo. \$5.00/day**
- ❖ Breakfast only **\$150/mo. \$5.00/day**
- ❖ Lunch only **\$150/mo. \$5.00/day**
- ❖ Dinner only **\$150/mo. \$5.00/day**

Additional Services

- ❖ Daily Dishes **\$300/mo. \$10.00/day**
- ❖ Additional Bag of Laundry **\$35/bag Flat Fee**
- ❖ Extra housekeeping (1 hour minimum) **\$45/hour Flat Fee**
- ❖ Medical Visit Escort (per availability) **\$75/visit Flat Fee**

Other Fees

- ❖ Meal Tray Delivery to Apartment **\$6.00 per tray/per meal**
(All meals must be ordered by calling the Front Desk to arrange delivery from the Dining Room staff.)
- ❖ Sick Meal Tray Delivery to Apartment **No Charge**
(Includes clear broth, crackers, Jell-O, juice, and hot tea. No substitutes)
- ❖ Use of Preferred Pharmacy other than PM Services **\$275/mo. \$9.16/day**
- ❖ Processing for Long-Term Care Insurance **\$25/mo. Flat Fee**
- ❖ Independent Residents Require an Annual Assessment **\$175/year Flat Fee**
(Includes evaluation to continue the ability to self-administer medication, a monthly apartment inspection to ensure safety and Title 22 compliance)

Total: \$ _____ \$ _____
Monthly Daily

Service Start Date: _____ Service End Date: _____

Signature of Resident or Responsible Family member: _____

Signature of Assisted Living Manager: _____

Signature of Finance Director: _____

Signature of Administrator: _____

Date of Next Scheduled Care Conference: _____