May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

ADVANCED HOME CARE 2424 INDIA HOOK RD

ROCK HILL, SC 29732 FACILITY #:803-285-2026

FROHNA MATT PH#: 803-285-2026

Facility Email: MATT.FROHNA@ADVHOMECARE.ORG Fac. Cont. Email: MATT.FROHNA@ADVHOMCARE.ORG

HHA-0326 / 06/30/2018

York / Corporation PO BOX 18049

GREENSBORO, NC 27419-8049

ADVANCED HOME CARE INC

Total Counties Served: 2

County/Counties Served: Lancaster, York

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

AMEDISYS HOME HEALTH CARE

127 E MILL ST

KINGSTREE, SC 29556 FACILITY #:843-355-5103

LANGSTON JENNIFER PH#:

Facility Email:

2241@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0188 / 01/31/2019

Williamsburg / Limited Liability

127 E MILL ST

KINGSTREE, SC 29556

GEORGETOWN HOSPITAL HOME HEALTH LLC

Total Counties Served: 4

County/Counties Served: Williamsburg, Florence, Georgetown, Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street Location City, State Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

AMEDISYS HOME HEALTH OF BEAUFORT

35 PROFESSIONAL VILLAGE CIR

Beaufort / Ltd. Liability

LADYS ISLAND, SC 29907 FACILITY #:843-379-2320

2121 BOUNDARY ST STE 200

HHA-0189 / 01/31/2019

CRAVEN KAREN L PH#:

BEAUFORT, SC 29902-6812

Facility Email: 2210@AMEDISYS.COM AMEDISYS SC LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

AMEDISYS HOME HEALTH OF BLUFFTON

59 SHERIDAN PARK CIR STE A

BLUFFTON, SC 29910-6029 FACILITY #:843-815-3090

BARRY HANK PH#: 843-815-8090

Facility Email: 2224@AMEDISYS.COM HHA-0203 / 02/28/2019 Beaufort / Ltd. Liability

59 SHERIDAN PARK CIR STE A

BLUFFTON, SC 29910-6029

AMEDISYS SC LLC

Fac. Cont. Em ail: 2224@AMEDISYS.COM

Total Counties Served: 4

County/Counties Served: Allendale, Hampton, Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address Licensee

AMEDISYS HOME HEALTH OF CAMDEN

1110 BROAD ST STE B

CAMDEN, SC 29020-3624 FACILITY #:803-713-9264

RAPP SUZANNE PH#: 803-713-9264

Facility Email: 2216@AMEDISYS.COM Fac. Cont. Em ail: 2216@AMEDISYS.COM

HHA-0194 / 02/28/2019 Kershaw / Ltd. Liability

1110 BROAD ST STE B CAMDEN, SC 29020-3624

AMEDISYS SC LLC

Phone:

Total Counties Served: 9

County/Counties Served: Calhoun, Darlington, Lexington, Orangeburg, Richland, Marlboro, Newberry, Kershaw, Fairfield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: WEST COLUMBIA OFFICE Address: 3227 SUNSET BLVD

STE F101

City: WEST COLUMBIA

State:SC

Zip Code: 29169

AMEDISYS HOME HEALTH OF CHARLESTON HHA-0172 / 09/30/2018

2675 LAKE PARK DR Charleston / Limited Liability

NORTH CHARLESTON, SC 29406-9100 FACILITY #:843-553-1263 2675 LAKE PARK DR

CRAVEN KAREN L PH#:

Facility Email:

KAREN.CRAVEN@AMEDISYS.COM

NORTH CHARLESTON, SC 29406-9100

AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served: Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address

Licensee

AMEDISYS HOME HEALTH OF CHARLESTON EAST

1027 PHYSICIANS DR STE 210

CHARLESTON, SC 29414-5352 FACILITY #:843-556-0200

RITTER-PEACOCK KRISTI PH#:

Facility Email:

2207@AMEDISYS.COM

HHA-0191 / 01/31/2019

Charleston / Ltd. Liability

1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 May 1, 2018

AMEDISYS SC LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 5

County/Counties Served: Charleston, Dorchester, Hampton, Berkeley, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: MOUNT PLEASANT OFFICE Phone: 843-972-0416

Address: 950 HOUSTON NORTHCUTT BLVD

STE 105

City: MOUNT PLEASANT State:SC Zip Code: 29464-564

Satellite Location: WALTERBORO OFFICE Phone: 843-542-9020

Address: 305 ROBERTSON BLVD

State:SC City: WALTERBORO Zip Code: 29488

AMEDISYS HOME HEALTH OF CLINTON HHA-0186 / 01/31/2019 210 PHYSICIANS PARK DR STE U Laurens / Limited Liability

CLINTON, SC 29325-7565 FACILITY #:864-833-3212 210 PHYSICIANS PARK DR STE U

SUMNER WENDY C PH#: 864-833-3212 CLINTON, SC 29325-7565

Facility Email: 2204@AMEDISYS.COM AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Fac. Cont. Em ail: 2204@AMEDISYS.COM

Total Counties Served: 10

County/Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Union, Spartanburg

License Restrictions:

Home Health Aid: Y Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: GREENVILLE OFFICE Phone: 864-288-9441

Address: 440 ROPER MOUNTAIN RD

STE G-1

City: GREENVILLE State:SC Zip Code: 29615-42;

May 1, 2018 HLHH.rdf Page 4 of 49

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

AMEDISYS HOME HEALTH OF CONWAY

176 WACCAMAW MEDICAL PARK CT

CONWAY, SC 29526-8965 FACILITY #:843-347-5899

JONES BRITTANY PH#: 843-347-5899

Facility Email: 2222@AMEDISYS.COM Fac. Cont. Em ail: 2222@AMEDISYS.COM

HHA-0195 / 03/31/2019 Horry / Limited Liability

176 WACCAMAW MEDICAL PARK CT

CONWAY, SC 29526-8965

AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 3

County/Counties Served: Dillon, Horry, Marion

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

AMEDISYS HOME HEALTH OF GEORGETOWN

2503 HIGHMARKET ST

GEORGETOWN, SC 29440-2900 FACILITY #:843-546-1730

DAWSON KATHLEEN H PH#: 843-546-1730

Facility Email:

2245@AMEDISYS.COM

HHA-0192 / 01/31/2019

Georgetown / Limited Liability

2503 HIGHMARKET ST

GEORGETOWN, SC 29440-2900

GEORGETOWN HOSPITAL HOME HEALTH LLC

Fac. Cont. Em ail: 2205@AMDISYS.COM

Total Counties Served: 2

County/Counties Served: Williamsburg, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility License#/Expiration **Location Street** County/Ownership Type Location City, State Mailing Address

Administrator Licensee

AMEDISYS HOME HEALTH OF LEXINGTON

HHA-0190 / 01/31/2019 714 S LAKE DR STE 250 Lexington / Ltd. Liability LEXINGTON, SC 29072-3462 FACILITY #:803-359-2253 714 S LAKE DR STE 250 CARSON ERIN PH#: LEXINGTON, SC 29072-3462

Facility Email: 2211@AMEDISYS.COM AMEDISYS SC LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 13

County/Counties Served: Aiken, Calhoun, Lee, Lexington, Orangeburg, Sumter, McCormick, Newberry, Bamberg, Barnwell,

Edgefield, Richland, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: SUMTER OFFICE Phone: 877-284-6630

Address: 3481 DECLARATION BLVD

City: SUMTER State:SC Zip Code: 29154

Satellite Location: NEWBERRY OFFICE Phone: 803-276-9359

Address: 184 COMMERCE DR

City: NEWBERRY State:SC Zip Code: 29108

Satellite Location: ORANGEBURG OFFICE Phone: 803-534-2022

Address: 1704 VILLAGE PARK DR

City: ORANGEBURG State:SC Zip Code: 29118

AMEDISYS HOME HEALTH OF MYRTLE BEACH HHA-0187 / 01/31/2019

MYRTLE BEACH, SC 29577-5701 FACILITY #:843-916-0931 1309 PROFESSIONAL DR STE 100

NEASBITT LEISA VICTORIA PH#: 843-916-0931 MYRTLE BEACH, SC 29577-5701

Facility Email: 2246@AMEDISYS.COM GEORGETOWN HOSPITAL HOME HEALTH LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Horry

1309 PROFESSIONAL DR STE 100

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Horry / Limited Liability

Medical Supplies/Appliances/Durable Medical Equipment: N

SCDHEC May 1, 2018

Home Health Agencies DHEC Regulation 61-77

Name of Facility **Location Street Location City, State Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

ANMED HEALTH HOME HEALTH AGENCY

HHA-0068 / 02/28/2019

1926 MCCONNELL SPRINGS RD

Anderson / Non-Profit Corporation

ANDERSON, SC 29621-2642 FACILITY #:864-512-6410

PO BOX 195

GETSINGER CHRISTI A PH#: 864-512-6410

ANDERSON, SC 29622-0195

Facility Email: HCCREDENTIALING@ANMEDHEALTH.ORG ANMED HEALTH

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Anderson, Pickens

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

BAYADA HOME HEALTH CARE-ROCK HILL HHA-0331 / 01/31/2019 454 S ANDERSON RD STE 320 York / Corporation

ROCK HILL, SC 29730 FACILITY #:803-281-4550

NOEL DAN PH#:

DNOEL@BAYADA.COM Facility Email: BAYADA HOME HEALTH CARE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 0

County/Counties Served: Lancaster, York

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING SERVICES

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

BEAUFORT-JASPER HOME HEALTH AGENCY HHA-0017 / 08/31/2018

719 OKATIE HWY 170N Beaufort / Non-Profit Corporation

RIDGELAND, SC 29936-8276 FACILITY #:843-987-7400 PO BOX 357

KENNEDY CATHERINE B PH#: 843-987-7400 RIDGELAND, SC 29936-2605

Facility Em ail: CKENNEDY@BJHCHS.ORG BEAUFORT-JASPER-HAMPTON COMPREHENSIVE HEALTH SERVICES INC

Fac. Cont. Email: CKENNEDY@BJHCHS.ORG

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: Y Med. Social Services: Y Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

BETHEA HOME HEALTH HHA-0143 / 07/31/2018

157 HOME AVE Darlington / Non-Profit Corporation

DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867 157 HOME AVE

MCKITTRICK RN PATRICIA M PH#: 843-393-2867 DARLINGTON, SC 29532-7625

Facility Em ail: BSPURLING@SCBMA.COM SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Fac. Cont. Em ail: BSPURLING@SCBMA.COM

Total Counties Served: 1

County/Counties Served: Darlington

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

BIOSCRIP INFUSION SERVICES

160 CONGRESS BLVD STE D

DUNCAN, SC 29334-8890 FACILITY #:864-583-8190

NEAL TONI R PH#: 864-583-8190

Facility Email: LICENSURE@BIOSCRIP.COM

Fac. Cont. Em ail: TNEAL@BIOSCRIP.COM

HHA-0211 / 11/30/2018

Spartanburg / Corporation

1600 BROADWAY STE 700

DENVER, CO 80202

HOMECHOICE PARTNERS INC

Total Counties Served: 9

County/Counties Served: Greenville, Laurens, Oconee, Pickens, Union, York, Anderson, Spartanburg, Cherokee

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

BRIGHTSTAR CARE

2012 HWY 160 W STE 4

FORT MILL, SC 29708-8401 FACILITY #:803-578-9900 SAPORITO DAVID PH#: 803-578-9900 DSAPORITO@BRIGHTSTARCARE.COM

Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0221 / 12/31/2018 York / Limited Liability

2012 HWY 160 W STE 4 FORT MILL, SC 29708-8401

COMPASSIONATE CARE LLC

Total Counties Served: 2

County/Counties Served: Lancaster, York

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING SERVICES

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

BRIGHTSTAR CARE OF CHARLESTON

HHA-0229 / 06/30/2018 4130 FABER PL DR STE 108 Charleston / Limited Liability NORTH CHARLESTON, SC 29405-8502 FACILITY #:843-300-3008 4130 FABER PL DR STE 108

JAMES KRISTIN H PH#:

NORTH CHARLESTON, SC 29405-8502

Facility Email: C.APPLEGATE@BRIGHTSTARCARE.COM TOWNES HOLDINGS LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Charleston

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: IV-IG INFUSION

BRIGHTSTAR CARE-BLUFFTON

29 PLANTATION PARK DR STE 105 Beaufort / Limited Liability 177 MOORING BUOY

BLUFFTON, SC 29910-9010 FACILITY #:843-837-3773 WHITTELSEY SUSAN PH#: 843-837-3773

HILTON HEAD ISLAND, SC 29928-5287

Facility Email: SWHITTELSEY@BRIGHTSTARCARE.COM

SS&J ASSOCIATES LLC

HHA-0223 / 12/31/2018

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

BRIGHTSTAR OF SPARTANBURG

110 W CHURCH ST STE A

HHA-0328 / 06/30/2018 Greenville / Limited Liability

GREER, SC 29650-0000 FACILITY #:864-599-0452

SANDERS FRANK J PH#: 864-599-0452

Facility Email: FRANK.SANDERS@BRIGHTSTARCARE.COM SANDERS HEALTHCARE LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Greenville, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: INFUSION THERAPY

CAROLINAS HOME HEALTH

HHA-0109 / 12/31/2018 121 E CEDAR ST Florence / Limited Liability

121 E CEDAR ST FLORENCE, SC 29506-2576 FACILITY #:843-629-6811

POSTON JOE A PH#: 843-629-6811 FLORENCE, SC 29506-2576

FLORENCE HOME CARE SERVICES LLC Facility Email: JOEPOSTON@HOMECAREFLORENCE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 4

County/Counties Served: Darlington, Dillon, Marlboro, Florence

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

CHESTERFIELD VISITING NURSES SERVICE

918 CHESTERFIELD HWY

CHERAW, SC 29520-7008 FACILITY #:843-537-3020

RAYFIELD TABITHA PH#: 843-537-3020

Facility Email:

TRAYFIELD@AHCE.NET Fac. Cont. Email: TRAYFIELD@AHCE.NET HHA-0065 / 08/31/2018 Chesterfield / Corporation

HHA-0209 / 05/31/2018

SUMTER, SC 29150-1712

2825 CARTER RD

Sumter / Non-Profit Corporation

COVENANT PLACE OF SUMTER INC

PO BOX 813

CHERAW, SC 29520-0813

CHESTERFIELD VISITING NURSES SERVICE INC

Total Counties Served: 3

County/Counties Served: Darlington, Marlboro, Chesterfield

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

COVENANT PLACE CCRC HOME HEALTH SERVICES

2825 CARTER RD

SUMTER, SC 29150-1712 FACILITY #:803-469-7007

WILSEY JENNIFER PH#: 803-469-7007

Facility Email:

JWILSEY@COVENANTPLACE.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Sumter, Special Note - RESTRICTED TO RESIDENTS OF COVENANT PLACE OF SUMTER CAMPUS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: HOME HEALTH SERVICES

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

CYPRESS CLUB HOME HEALTH AGENCY

HHA-0146 / 07/31/2018 Beaufort / Corporation

20 LADYSLIPPER LN

HILTON HEAD ISLAND, SC 29926-1372 FACILITY #:843-689-7017

20 LADYSLIPPER LN

HARRISON ANN E PH#: 843-689-7017

HILTON HEAD ISLAND, SC 29926-1372

Facility Email:

AHARRISON@THECYPRESS.COM

CYPRESS CLUB INC

Fac. Cont. Email: AHARRISON@THECYPRESS.COM

Total Counties Served: 1

County/Counties Served: Beaufort, Special Note - Restricted to Residents of The Cypress Club Only on Hilton Head Island, South

Carolina

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: NURSING

ENCOMPASS HOME HEALTH OF SOUTH CAROLINA

37 VARDEN DR STE A

AIKEN, SC 29803 FACILITY #:803-335-0977

JONES SYLVIA PH#: 803-335-0977

Facility Email: LICENSING@EHHI.COM Fac. Cont. Email: LICENSING@EHHI.COM HHA-0218 / 10/31/2018 Aiken / Limited Liability

6688 N CENTRAL EXPRESSWAY STE 1300

DALLAS, TX 75206

CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC

Total Counties Served: 1

County/Counties Served: Aiken

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HHA-0330 / 10/31/2018

Beaufort / Limited Liability

May 1, 2018

ENCOMPASS HOME HEALTH OF SOUTH CAROLINA - BLUFFTON

110 TRADERS CROSS STE 206

BLUFFTON, SC 29909 FACILITY #:843-705-8044

OCONNOR SHARON PH#: 803-441-0174

Facility Email: LICENSING@EHHI.COM CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

FLORENCE VISITING NURSES SERVICEHHA-0064 / 01/31/2019
1605-C W PALMETTO ST
Florence / Corporation

FLORENCE, SC 29501-4198 FACILITY #:843-667-1515 PO BOX 1485

JACKSON-MEEKINS JONATHAN PH#: 843-667-1515 WAYCROSS, GA 31502

Facility Email: JJOHNSON@AHCE.NET FLORENCE VISITING NURSES SERVICE INC

Fac. Cont. Email: JJOHNSON@AHCE.NET

Total Counties Served: 4

County/Counties Served: Dillon, Lee, Marion, Florence

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

HHA-0323 / 10/31/2018

Greenville / Corporation

440 ROPER MOUNTAIN RD

UPSTATE AFFILIATE ORGANIZATION

GREENVILLE, SC 29615

GHS HOME HEALTH AGENCY

440 ROPER MOUNTAIN RD GREENVILLE, SC 29615 FACILITY #:864-455-8140

WOODS LANDACE PH#: 864-455-8140

Facility Email: Fac. Cont. Em ail: LWOODS@GHS.ORG

NSALLY@GHS.ORG

Total Counties Served: 4

County/Counties Served: Greenville, Oconee, Pickens, Anderson

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: INTRAVENOUS THERAPY

HEALTH RELATED HOME CARE

104 W PICKENS ST ABBEVILLE, SC 29620-2427 FACILITY #:864-366-9151

NORRYCE SHARON D PH#: 864-366-9151

Facility Email: SNORRYCE@HRHC.NET

Fac. Cont. Em ail: N/A

HHA-0116 / 12/31/2018

Abbeville / County 104 W PICKENS ST

ABBEVILLE, SC 29620-2427

ABBEVILLE COUNTY MEMORIAL HOSPITAL

Total Counties Served: 9

County/Counties Served: Abbeville, Anderson, Edgefield, Greenville, Greenwood, Laurens, McCormick, Newberry, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services:

Satellite Location: CLINTON OFFICE Phone: 864-833-1999

Address: 500 PLAZA CIR

STEK

City: CLINTON State:SC Zip Code: 29325

Satellite Location: GREENWOOD OFFICE Phone:

Address: 520 EPTING AVENUE

City: GREENWOOD State:SC Zip Code: 29646

Satellite Location: LAURENS OFFICE Phone:

Address: 500 PLAZA CIRCLE

State:SC City: LAURENS Zip Code: 29360

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

HEALTHY @ HOME-YORK

HHA-0327 / 06/30/2018 York / Limited Liability

HHA-0134 / 09/30/2018

226 NORTHPARK DR STE 120

ROCK HILL, SC 29730 FACILITY #:803-327-8874 MCCARTER-FROHNA MARIE PH#: 803-327-8874

Facility Email: MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE

Fac. Cont. Email: MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE

CAROLINAS MEDICAL CENTER AT HOME LLC

Total Counties Served: 2

County/Counties Served: Lancaster, York

License Restrictions:

Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y Speech Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: RESPIRATORY THERAPY

HOME CARE OF HOSPICECARE OF THE PIEDMONT

408 W ALEXANDER AVE Greenwood / Corporation GREENWOOD, SC 29646-4031 FACILITY #:864-227-9393 408 W ALEXANDER AVE

CORLEY RN NANCY B PH#: 864-227-9393 GREENWOOD, SC 29646-4031

HOME CARE OF HOSPICECARE OF THE PIEDMONT INC Facility Email: NCORLEY@HOSPICEPIEDMONT.ORG

Fac. Cont. Email: NCORLEY@HOSPICEPIEDMONT.ORG

Total Counties Served: 5

County/Counties Served: Abbeville, Greenwood, Laurens, McCormick, Saluda

License Restrictions: FOR THE TERMINALLY ILL ONLY

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y Other Services: SKILLED NURSING, SPIRITUAL COUNSELING

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

HHA-0050 / 12/31/2018

HOME CARE OF LANCASTER

901 W MEETING ST STE 201

LANCASTER, SC 29720-6209 FACILITY #:803-286-1472

HELMS RAYMOND E PH#:

Lancaster / Limited Liability
901 W MEETING ST STE 201
LANCASTER, SC 29720-6209

Facility Em ail: RAYMOND

RAYMONDHELMS@HOMECAREOFLANCASTER.COM

LANCASTER HOME CARE SERVICES LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Lancaster

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED DIETITION

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE

105 VINECREST CT STE 400

GREENWOOD, SC 29646-8031 FACILITY #:864-725-7600

WRIGHT JEFFERY PH#: 864-725-7600

Facility Email: JEFFERY.WRIGHT@SELFREGIONAL.ORG

Fac. Cont. Email: JEFFERY.WRIGHT@SELFREGIONAL.ORG

HHA-0049 / 01/31/2019

Greenwood / Non-Profit Corporation

105 VINCREST CT STE 400 GREENWOOD, SC 29646

GREENWOOD COUNTY HOSPITAL BOARD DBA SELF REGIONAL

HEALTHCARE

Total Counties Served: 7

County/Counties Served: Abbeville, Edgefield, Greenwood, Laurens, McCormick, Newberry, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

HOMECARE OF THE REGIONAL MEDICAL CENTER

1895 SAINT MATTHEWS RD

ORANGEBURG, SC 29118-2403 FACILITY #:803-395-2600

WILLIAMS CHARLES PH#: 803-395-2454

Facility Email: RLBJARNESEN@REGMED.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0122 / 01/31/2019

Orangeburg / County

PO BOX 2352 ORANGEBURG, SC 29116-2352

REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD)

Total Counties Served: 3

County/Counties Served: Calhoun, Orangeburg, Bamberg

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

INTERIM HEALTHCARE

4995 LACROSS RD STE 1300

N CHARLESTON, SC 29406 FACILITY #:843-518-5437

BAKER DAWN MPH#: 843-569-5510

Facility Email: DABAKER@INTERIMHEALTHCARE.COM Fac. Cont. Em ail: CYONCE@INTERIMHEALTHCARE.COM

HHA-0208 / 03/31/2019

Charleston / Limited Liability 4995 LACROSS RD STE 1300

N CHARLESTON, SC 29418

LOWCOUNTRY NURSING GROUP LLC

Total Counties Served: 4

County/Counties Served: Berkeley, Charleston, Dorchester, Beaufort

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: BEAUFORT IS RESTRICTED TO PEDIATRIC HOME HEALTH 0-18 YOA ONLY

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

INTERIM HEALTHCARE OF ROCK HILL

HHA-0169 / 11/30/2018 154 AMENDMENT AVE STE 106 York / Corporation ROCK HILL, SC 29732-3156 FACILITY #:803-324-4166 2526 WARD BLVD

WEBB MARGARET D PH#: 803-324-4166

WILSON, NC 27893-1600

Facility Email: TPILKINGTON@INTERIMHEALTHCARE.COM

INTERIM HEALTHCARE OF THE TRIAD INC

Fac. Cont. Em ail: TERRIPILKINGTON@INTERIM-MGI.COM

Total Counties Served: 1

County/Counties Served: York

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

INTERIM HEALTHCARE OF THE UPSTATE

16 HYLAND RD

HHA-0332 / 01/31/2019 Greenville / Limited Liability

GREENVILLE, SC 29615-5756 FACILITY #:864-627-1200

SCHROEDER CHARYL MPH#: 864-627-1200

Facility Email: CHARYL.SCHROEDER@INTERIMCARES.COM INVESTSOUTH IHC LLC

Fac. Cont. Email: CHARYL.SCHROEDER@INTERIMCARES.COM

Total Counties Served: 0

County/Counties Served: Greenville, Oconee, Pickens, Anderson, Spartanburg, Cherokee

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

INTREPID USA HEALTHCARE SERVICES

HHA-0180 / 06/30/2018

2694 LAKE PARK DR 1ST FLOOR

Charleston / Corporation

NORTH CHARLESTON, SC 29406-9826 FACILITY #:843-569-3516

4055 VALLEY VIEW LN STE 500

MYERS ELIZABETH A PH#: 843-569-3516

DALLAS, TX 75244-5048

Facility Email: RAMONA.GOODMAN@INTREPIDUSA.COM FC OF SOUTH CAROLINA INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 6

County/Counties Served: Allendale, Charleston, Dorchester, Berkeley, Georgetown, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: WALTERBORO OFFICE Phone:

Address: 302 MEDICAL PARK DRIVE SUITE 215

City: WALTERBORO State:SC Zip Code: 29488

ISLAND HEALTH CARE HHA-0111 / 02/28/2018 (Renewal Pending)

300 NEW RIVER PKWY, STE 7 Jasper / Corporation

PO BOX 8011 HARDEEVILLE, SC 29927-4450 FACILITY #:843-208-3660

BOLCH ELLEN B PH#: 843-208-3660 SAVANNAH, GA 31412-8011 ISLAND HEALTH CARE INC Facility Email: EBOLCH@THAGROUP.ORG

Fac. Cont. Email: EBOLCH@THAGROUP.ORG

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: BEAUFORT OFFICE Phone:

Address: 1211 NEW CASTLE ST

STEC

City: BEAUFORT State:SC Zip Code: 29902

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

KERSHAWHEALTH HOME HEALTH

HHA-0321 / 07/31/2018 1165 HWY 1 S STE 400 Kershaw / County

LUGOFF, SC 29078-0340 FACILITY #:803-425-1182 FRY TERESA PH#: 803-425-1182 Facility Email: TFRY@KERSHAWHEALTH.ORG

1165 HWY 1 SOUTH STE 400 LUGOFF, SC 29078-0000 KERSHAW HOSPITAL LLC

Fac. Cont. Email: TFRY@KERSHAWHEALTH.ORG

Total Counties Served: 1

County/Counties Served: Kershaw

License Restrictions:

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Physical Therapy: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

KINDRED AT HOME

2000 CENTER POINT RD STE 2300 COLUMBIA, SC 29210-7318 FACILITY #:803-731-2365

BROWN NATASHA L PH#:

JANET.COMBS@GENTIVA.COM Facility Email: Fac. Cont. Email: No Facility Contact Email on Record HHA-0154 / 11/30/2018 Richland / Limited Liability 12900 FOSTER ST STE 400

OVERLAND PARK, KS 66213-2696

CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 2

County/Counties Served: Lexington, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

SCDHEC May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

KINDRED AT HOME-ANDERSON

1704 E GREENVILLE ST STE 2D

ANDERSON, SC 29621-7914 FACILITY #:864-332-8200

MERCK FREDAL PH#:

JANET.COMBS@GENTIVA.COM

Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

HHA-0001 / 12/31/2018 Anderson / Limited Liability

12900 FOSTER ST STE 400

OVERLAND PARK, KS 66213-2696

CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 11

County/Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Union, McCormick,

Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: PICKENS OFFICE

Phone: 864-898-5839

Address: 200 MCDANIEL AVENUE

City: PICKENS

State:SC

Zip Code: 29671

Satellite Location: SPARTANBURG OFFICE

Phone: 864-596-3320

Address: 151 EAST WOOD STREET

City: SPARTANBURG

State:SC

Zip Code: 29303

Satellite Location: CLINTON OFFICE

Phone:

Address: 93 HUM AN SERVICE RD

City: CLINTON

State:SC

Zip Code: 29325

KINDRED AT HOME-CHARLESTON

4975 LACROSS RD STE 354

HHA-0051 / 08/31/2018

Charleston / Corporation

CHARLESTON, SC 29406-6525 FACILITY #:843-744-1191

LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40

HENNING ALISON PH#: 843-744-1191

OVERLAND PARK, KS 66213-2696

Facility Email: ALISON.HENNING@GENTIVA.COM GENTIVA CERTIFIED HEALTHCARE CORPORATION

Fac. Cont. Em ail: JANET.COMBS@GENTIVA.COM

Total Counties Served: 3

County/Counties Served: Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

KINDRED AT HOME-COASTAL

HHA-0179 / 11/30/2018 1240 21ST AVE N STE 200 Horry / Limited Liability MYRTLE BEACH, SC 29577-7401 FACILITY #:843-448-7060

MILLER AMANDA J PH#:

12900 FOSTER ST STE 400

OVERLAND PARK, KS 66213-2696

Facility Email:

JANET.COMBS@GENTIVA.COM

Fac. Cont. Email: No Facility Contact Email on Record

TOTAL CARE HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 3

County/Counties Served: Horry, Williamsburg, Georgetown

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

KINDRED AT HOME-GREENVILLE

HHA-0158 / 01/31/2019 15 BRENDAN WAY STE 250 Greenville / Limited Liability GREENVILLE, SC 29615-3562 FACILITY #:864-297-5711 12900 FOSTER ST STE 400

RIGGLEMAN BARBARA D PH#: 864-297-5711

OVERLAND PARK, KS 66213-2696

Facility Email: JANET.COMBS@GENTIVA.COM CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Fac. Cont. Em ail: JANET.COMBS@GENTIVA.COM

Total Counties Served: 8

County/Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Union, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: SPARTANGBURG OFFICE Phone:

Address: 905 EMAIN ST

City: SPARTANBURG State:SC Zip Code: 29302-211

Satellite Location: ANDERSON OFFICE Phone:

Address: 1704 E GREENVILLE ST

City: ANDERSON State:SC Zip Code: 29621-79'

Satellite Location: SENECA OFFICE Phone:

Address: 10 ACCOUNTANTS CIR

THE COM MONS

City: SENECA State:SC Zip Code: 29678

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Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

KINDRED AT HOME-LOW COUNTRY

HHA-0011 / 12/31/2018 415 ROBERTSON BLVD STE E Colleton / Limited Liability WALTERBORO, SC 29488-5713 FACILITY #:843-542-9540 12900 FOSTER ST STE 400

COOK DEANN PH#: 843-542-9540

OVERLAND PARK, KS 66213-2696

Facility Email: JANET.COMBS@GENTIVA.COM CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

May 1, 2018

Fac. Cont. Em ail: JANET.COMBS@GENTIVA.COM

Total Counties Served: 11

County/Counties Served: Allendale, Calhoun, Charleston, Dorchester, Hampton, Orangeburg, Bamberg, Beaufort, Berkeley, Jaspe

Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: NORTH CHARLESTON-OFFICE Phone: 843-953-2450

Address: 4050 BRIDGEVIEW DRIVE

City: CHARLESTON State:SC Zip Code: 29405

Satellite Location: VARNILLE-OFFICE Phone: 803-943-4649

Address: 531 CAROLINA AVE

City: VARNVILLE State:SC Zip Code: 29944

Satellite Location: ORANGEBURG-OFFICE Phone: 803-268-5734

Address: 1550 CAROLINA AVENUE

City: ORANGEBURG State:SC Zip Code: 29115

KINDRED AT HOME-MIDLANDS HHA-0040 / 12/31/2018 2521 EVANS ST Newberry / Limited Liability

NEWBERRY, SC 29108 FACILITY #:803-276-0273 12900 FOSTER ST STE 400

GUY HARRIETT PH#: 803-276-0273 **OVERLAND PARK, KS 66213-2696**

Facility Email: JANET.COMBS@GENTIVA.COM CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 11

County/Counties Served: Aiken, Edgefield, Lexington, Richland, York, Newberry, Barnwell, Lancaster, Fairfield, Saluda, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: BARNWELL OFFICE Phone: 803-541-1190

Address: 11015 ELLENTON STREET

State:SC City: BARNWELL Zip Code: 29812

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May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

HHA-0009 / 12/31/2018

Florence / Limited Liability 12900 FOSTER ST STE 400

Satellite Location: LANCASTER OFFICE Phone:

Address: 1822 PAGELAND HIGHWAY

City: LANCASTER State:SC Zip Code: 29720

Satellite Location: FORT MILL OFFICE Phone: 803-547-7612

Address: 1061 RED VENTURES DR STE 165

City: FORT MILL State:SC Zip Code: 29707-25

KINDRED AT HOME-PEE DEE 702 PAMPLICO HWY STE B

FLORENCE, SC 29505-6199 FACILITY #:843-317-9686

BLALOCK JANET PH#: 800-677-2244 OVERLAND PARK, KS 66213-2696

Facility Em ail: JANET.COMBS@GENTIVA.COM CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 12

County/Counties Served: Darlington, Dillon, Horry, Lee, Williamsburg, Marion, Marlboro, Florence, Georgetown, Sumter, Chesterf

Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

SCDHEC May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

Phone:

KINDRED AT HOME-UPSTATE

HHA-0178 / 11/30/2018 206 CHESNEE HWY STE G & H Cherokee / Limited Liability

GAFFNEY, SC 29341-2709 FACILITY #:864-488-0898 LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40

RANDOLPH TERESA PH#: 864-488-0898 OVERLAND PARK, KS 66213-2696

Facility Email: JANET.COMBS@GENTIVA.COM TOTAL CARE HOME HEALTH OF NORTH CAROLINA LLC

Fac. Cont. Em ail: N/A

Total Counties Served: 4

County/Counties Served: Cherokee, Union, York, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: UNION OFFICE

Address: 1261 S DUNCAN BYPASS

State:SC City: UNION Zip Code: 29379

Satellite Location: ROCK HILL OFFICE Phone:

Address: 250 PIEDMONT BLVD

City: ROCK HILL State:SC Zip Code: 29732-183

LAUREL CREST HOME HEALTH HHA-0333 / 01/31/2019 100 JOSEPH WALKER DR Lexington / Corporation

WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370

DEEL JAMES F PH#: 803-796-0370

Facility Email: J.DEEL@LAUREL-CREST.COM LAUREL CREST RETIREMENT COMMUNITY

Fac. Cont. Email: J.DEEL@LAUREL.CREST.COM

Total Counties Served: 0

County/Counties Served: Lexington

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

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May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator

405 E MAIN ST

License#/Expiration County/Ownership Type Mailing Address

Licensee

LIBERTY HOME CARE-BENNETTSVILLE

HHA-0159 / 12/31/2018 Marlboro / Ltd. Liability

BENNETTSVILLE, SC 29512-3111 FACILITY #:843-479-8711

711 405 E MAIN ST

DOOLEY CHERYL J PH#: 843-347-5661

BENNETTSVILLE, SC 29512-3111

Facility Em ail: CDOOLEY@LIBERTYHOMECARE.COM

LIBERTY HOME CARE LLC

Fac. Cont. Email: TBROOKS@HEALTHKEEPERZ.COM

Total Counties Served: 2

County/Counties Served: Marlboro, Chesterfield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

LIBERTY HOME CARE-MYRTLE BEACH

1293 PROFESSIONAL DR STE C

MYRTLE BEACH, SC 29577-5754 FACILITY #:843-839-2273

SCHOONMAKER CHRISTY PH#:

Facility Em ail: CSCHOONMAKER@LIBERTYHOMECARE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0163 / 12/31/2018

Horry / Ltd. Liability

1293 PROFESSIONAL DR STE C MYRTLE BEACH, SC 29577-5754

LIBERTY HOME CARE LLC

Total Counties Served: 2

County/Counties Served: Horry, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

MCLEOD HOME HEALTH

HHA-0085 / 05/31/2018

300 S DARGAN ST

Florence / Non-Profit Corporation

300 S DARGAN ST

FLORENCE, SC 29506-2537 FACILITY #:843-777-3050

FLORENCE, SC 29506-2537

Facility Email:

THIGPEN TRACIE PH#: 803-777-3050

TTHIGPEN@MCLEODHEALTH.ORG

MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC

Fac. Cont. Email: TTHIGPEN@MCLEODHEALTH.ORG

Total Counties Served: 10

County/Counties Served: Darlington, Dillon, Horry, Lee, Marion, Marlboro, Florence, Sumter, Chesterfield, Clarendon

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

MEDICAL SERIVICES OF AMERICA - COASTAL

HHA-0039 / 02/28/2019

4685 HWY 17 BYP S

Horry / Corporation

MYRTLE BEACH, SC 29577-6681 FACILITY #:843-293-4614

4685 HWY 17 BYP S MYRTLE BEACH, SC 29577-6681

MOORE TONYA PH#: LICENSING@MSA-CORP.COM

INCARE HOME HEALTH INC

Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 11

County/Counties Served: Charleston, Darlington, Dillon, Horry, Williamsburg, Marion, Marlboro, Berkeley, Florence, Georgetown,

Chesterfield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services: DIETARY

Satellite Location: GEORGETOWN OFFICE

Phone:

Address: 107 QUEEN ST

UNIT A

City: GEORGETOWN State:SC Zip Code: 29440-363

Satellite Location: NORTH MYRTLE BEACH OFFICE

Phone:

Address: 106 HWY 17 S

SUNDIAL CENTER

City: NMYRTLE BEACH State:SC Zip Code: 29582

Satellite Location: FLORENCE OFFICE

Phone: 843-665-8135

Address: 1402 D MEADORS FARM ROAD

City: FLORENCE

State:SC

Zip Code: 29505-271

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May 1, 2018

May 1, 2018 **Home Health Agencies**

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address Licensee

Satellite Location: CONWAY OFFICE

Address: 1261 HWY 501 E

STEC

City: CONWAY

Phone:

Zip Code: 29526

MEDICAL SERVICES OF AMERICA HOME HEALTH

2 PALMETTO WOOD PKWY STE 201

IRMO, SC 29063-2881 FACILITY #:803-561-7680

MILLING JO PH#: 803-561-7680

Facility Email:

JMILLING@MSA-CORP.COM Fac. Cont. Em ail: JMILLING@MSA-CORP.COM HHA-0026 / 12/31/2018 Lexington / Corporation PO BOX 609

LEXINGTON, SC 29071

TRI-COUNTY HOME HEALTH CARE & SERVICES INC

Total Counties Served: 35

County/Counties Served: Abbeville, Aiken, Allendale, Anderson, Calhoun, Cherokee, Dorchester, Edgefield, Greenville, Greenwood

Hampton, Laurens, Lee, Lexington, Oconee, Orangeburg, Pickens, Richland, Union, York, McCormick, Newberry, Bamberg, Barnwell, Beaufort, Jasper, Kershaw, Lancaster, Fairfield, Saluda, Spartanburg,

Sumter, Chester, Clarendon, Colleton

State:SC

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: AIKEN OFFICE Phone: 803-641-1127

Address: 2130 WOODSIDE EXECUTIVE COURT

City: AIKEN State:SC Zip Code: 29803

Satellite Location: UNION OFFICE Phone: 864-427-8322

Address: 101 SOUTH BOYCE ST

STE B

City: UNION State:SC Zip Code: 29379

Satellite Location: AIKEN OFFICE Phone:

Address: 186 FABIAN DIVE

May 1, 2018 Zip Colleg 29809f 49 HLHH.rdf City: AIKEN State:SC

May 1, 2018 Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

Phone:

Satellite Location: SUMTER OFFICE

Address: 2560 TAHOE DRIVE

City: SUMTER State:SC Zip Code: 29150

Satellite Location: BATESBURG OFFICE Phone:

Address: 120 W CHURCH ST

STE D

City: BATESBURG State:SC Zip Code: 29006

METHODIST MANOR HOME HEALTH

2100 TWIN CHURCH RD

FLORENCE, SC 29501-8200 FACILITY #:843-664-0700 TABOR TERESSA L PH#: 843-664-0700

Facility Email: TTABOR@METHODIST-MANOR.COM

Fac. Cont. Email: TTABOR@METHODIST-MANOR.COM

HHA-0207 / 02/28/2018 (Renewal Pending)

Florence / Non-Profit Corporation

2100 TWIN CHURCH RD FLORENCE, SC 29501-8200

UNITED METHODIST MANOR OF THE PEE DEE

Total Counties Served: 1

County/Counties Served: Florence

License Restrictions: RESTRICTED TO CCRC RESIDENTS OF THE METHODIST MANOR RETIREMENT COMMUNITY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address

HHA-0329 / 01/31/2019

Horry / Limited Liability

May 1, 2018

Licensee

MUSC HEALTH AT HOME BY BAYADA - CONWAY

1300 S CAROLINA HWY 544 STE F-107

CONWAY, SC 29526 FACILITY #:843-492-6602

BLASZCYZK BRYAN PH#: 843-492-6602

Facility Em ail: BBLASZCYZK@BAYADA.COM SCHHA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Georgetown, Horry

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING SERVICES

MUSC HEALTH AT HOME BY BAYADA-CHARLESTON

176 CROGHAN SPUR RD STE 102

CHARLESTON, SC 29407 FACILITY #:843-576-5378

MICHAEL RYAN PH#: 843-576-5378

Facility Em ail: RMICHAEL@BAYADA.COM

Fac. Cont. Em ail: RMICHAEL@BAYADA.COM

HHA-0324 / 12/31/2018 Charleston / Limited Liability

176 CROGHAN SPUR RD STE 102

CHARLESTON, SC 29407

SCHHA LLC

Total Counties Served: 3

County/Counties Served: Berkeley, Charleston, Dorchester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY

1645 J A COCHRAN BYP STE I

CHESTER, SC 29706-3101 FACILITY #:866-327-3205

GATLIFF LISA PH#: 803-581-6775

Facility Em ail: 2226@AMEDISYS.COM

Fac. Cont. Em ail: 2226@AMEDISYS.COM

HHA-0198 / 08/31/2018

Chester / Ltd. Liability

1645 J A COCHRAN BYP STE I

CHESTER, SC 29706-3101

AMEDISYS SC LLC

Total Counties Served: 4

County/Counties Served: Cherokee, York, Lancaster, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

NHC HOMECARE-AIKEN

690 MEDICAL PARK DR STE 200

AIKEN, SC 29801-6348 FACILITY #:803-643-1701

GRIFFIS SARAH PH#: 803-643-1701

Facility Email: NHC@NHCHOMECAREAIKEN.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0181 / 06/30/2018

Aiken / Limited Liability Limited Partnership

PO BOX 3636

AIKEN, SC 29802-3636

NHC/OP LP

Total Counties Served: 5

County/Counties Served: Aiken, Allendale, Edgefield, Orangeburg, Barnwell

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

BLUFFTON, SC 29910

PO BOX 1199

NHC HOMECARE-BEAUFORT

HHA-0216 / 09/30/2018 22 PLANTATION PARK DR STE 105B Beaufort / Limited Liability

BLUFFTON, SC 29910 FACILITY #:843-705-8230

JOHNSON KATHY A PH#: 843-522-0476

Facility Email: NHC@NHCHOMECAREBEAUFORT.COM NHC HOMECARE-SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 4

County/Counties Served: Colleton, Hampton, Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

NHC HOMECARE-GREENWOOD

HHA-0182 / 06/30/2018

315 W ALEXANDER AVE Greenwood / Limited Liability Limited Partnership

GREENWOOD, SC 29646-4009 FACILITY #:864-229-9888 PO BOX 1708

HAMMERSMITH MARY PH#: 864-229-9888 GREENWOOD, SC 29648-1708

Facility Email: NHC@NHCHOMECAREGREENWOOD.COM NHC/OP LP

Fac. Cont. Email: NHC@NHCHOMECAREGREENWOOD.COM

Total Counties Served: 5

County/Counties Served: Abbeville, Greenwood, McCormick, Newberry, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address

Licensee

NHC HOMECARE-LAURENS

HHA-0183 / 11/30/2018

700 PLAZA CIR STE O

Laurens / Limited Liability Limited Partnership

CLINTON, SC 29325-7556 FACILITY #:864-833-2368

PO BOX 309

GRIFFIS SARAH PH#: 803-643-1701

LAURENS, SC 29360-0309

Facility Email:

NHC@NHCHOMECARELAURENS.COM

NHC/OP LP

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 6

County/Counties Served: Anderson, Greenville, Laurens, Oconee, Pickens, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

Satellite Location: GREENVILLE OFFICE

Phone: 864-289-9982

Address: 111 SMITH HINES ROAD, SUITE L

City: GREENVILLE

State:SC

Zip Code: 29607

NHC HOMECARE-LOW COUNTRY

Fac. Cont. Email: No Facility Contact Email on Record

2070 NORTHBROOK BLVD STE B1

Charleston / Limited Liability

HHA-0138 / 04/30/2019

NORTH CHARLESTON, SC 29406 FACILITY #:843-851-0999

2070 NORTHBROOK BLVD SUITE B1 NORTH CHARLESTON, SC 29406

FRY CYNTHIA PH#:

NHC HOMECARE-SOUTH CAROLINA LLC

Facility Email:

NHC@NHCHOMECARELOWCOUNTRY.COM

Total Counties Served: 6

County/Counties Served: Charleston, Dorchester, Williamsburg, Bamberg, Berkeley, Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N Other Services: DIETARY CONSULTATION

May 1, 2018 Page 34 of 49 HLHH.rdf

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

NHC HOMECARE-MIDLANDS

3229 SUNSET BLVD STE N

WEST COLUMBIA, SC 29169-3202 FACILITY #:803-939-0266

MARCOS TOM PH#: 803-939-0266

Facility Email: NHC@NHCHOMECAREMIDLANDS.COM

Fac. Cont. Email: NHC@NHCHOMECAREMIDLANDS.COM

HHA-0151 / 04/30/2019

Lexington / Limited Liability PO BOX 3876

WEST COLUMBIA, SC 29171-3876

NHC HOMECARE-SOUTH CAROLINA LLC

Total Counties Served: 6

County/Counties Served: Calhoun, Lexington, Richland, Kershaw, Fairfield, Sumter

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

NHC HOMECARE-MURRELLS INLET

780 HWY 17 S STE D

SURFSIDE BEACH, SC 29575 FACILITY #:843-945-9850

COOPER GEORGE PH#: 843-945-9850 Facility Email:

NHC@NHCHOMECAREMURRELLSINLET.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0215 / 09/30/2018

Horry / Limited Liability

9405 HWY 17 BYP

MURRELLS INLET, SC 29576-9301 NHC HOMECARE-SOUTH CAROLINA LLC

County/Counties Served: Dillon, Georgetown, Marion, Horry

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Total Counties Served: 4

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

ROCK HILL, SC 29732-4525

NHC HOMECARE-PIEDMONT

HHA-0099 / 04/30/2019 1674 CRANIUM DR STE 101 York / Limited Liability PO BOX 2525

ROCK HILL, SC 29732-3506 FACILITY #:803-325-1455

ANSTEY LENORA PH#: 803-325-1455

Facility Email: NHC@NHCHOMECAREPIEDMONT.COM NHC HOMECARE-SOUTH CAROLINA LLC

Fac. Cont. Email: NHC@NHCHOMECAREPIEDMONT.COM

Total Counties Served: 4

County/Counties Served: Union, York, Lancaster, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: DIETARY CONSULTATION

OAKS HOME HEALTH

HHA-0200 / 01/31/2019

1000 METHODIST OAKS DR Orangeburg / Non-Profit Corporation

ORANGEBURG, SC 29116 FACILITY #:803-534-1212 PO BOX 327

TILL ELAINE M PH#: 803-534-1212 ORANGEBURG, SC 29116-0327

METHODIST OAKS INC Facility Email: ETILL@THEOAKSSC.COM

Fac. Cont. Email: ETILL@THEOAKSSC.COM

Total Counties Served: 1

County/Counties Served: Orangeburg, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address Licensee

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC

107 WESTPARK BLVD STE 110

HHA-0130 / 03/31/2019 Richland / Limited Liability

COLUMBIA, SC 29210 FACILITY #:803-750-0022

3200 WINDY HILL RD SE STE 100B

BURGESS KIM PH#: 866-359-9640

ATLANTA, GA 30339-8504

KIM.BURGESS@OPTUM.COM Facility Email:

ALERE HEALTH LLC

Fac. Cont. Email: KIM.BURGESS@OPTUM.COM

Total Counties Served: 13

County/Counties Served: Aiken, Charleston, Dorchester, Lexington, Richland, Newberry, Beaufort, Berkeley, Kershaw, Lancaster

Fairfield, Georgetown, Colleton

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: IV THERAPY & SERVICE TO OBSTETRICAL PATIENTS

OPTUM WOMEN'S AND CHILDREN'S HEALTH-PIEDMONT

2 INDEPENDENCE POINTE

HHA-0128 / 03/31/2019 Greenville / Limited Liability

GREENVILLE, SC 29615 FACILITY #:866-359-9640

3200 WINDY HILL RD SE STE 100B

BURGESS KIM PH#: 866-359-9640

ATLANTA, GA 30339-8504

Facility Email: FERN.MATTHEWS@OPTUM.COM ALERE HEALTH LLC

Fac. Cont. Email: KIM.BURGESS@OPTUM.COM

Total Counties Served: 33

County/Counties Served: Abbeville, Allendale, Anderson, Calhoun, Cherokee, Darlington, Dillon, Edgefield, Greenville, Greenwood Hampton, Horry, Laurens, Lee, Oconee, Orangeburg, Pickens, Union, Williamsburg, York, Marion, Marlbo McCormick, Bamberg, Barnwell, Jasper, Florence, Saluda, Spartanburg, Sumter, Chester, Chesterfield,

Clarendon

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: IV THERAPY

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

PALLIATIVE CARE OF THE LOWCOUNTRY

HHA-0117 / 09/30/2018

7 PLANTATION PARK DR UNIT 4 STE C2

Beaufort / Non-Profit Corporation

BLUFFTON, SC 29910 FACILITY #:843-706-4094

PO BOX 3827

BRASINGTON RN JENNY PH#: 843-706-2296

BLUFFTON, SC 29910-3827

Facility Email:

INFO@HOSPICECARELC.ORG

HOSPICE CARE OF THE LOWCOUNTRY INC

Fac. Cont. Email: INFO@HOSPICECARELC.ORG

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper, Special Note - RESTRICTED TO RESIDENTS WHO ARE TRERMINALLY ILL AS DEFINED IN

REGULATION 61-78

License Restrictions: RESTRICTED TO RESIDENTS WHO ARE TERMINALLY ILL AS DEFINED IN REGULATION 61-78

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

PALMETTO HEALTH HOMECARE

HHA-0148 / 02/28/2019

1400 PICKENS ST

Richland / Non-Profit Corporation

COLUMBIA, SC 29201-3465 FACILITY #:803-296-3100

PO BOX 7275

HEFLIN FRANK G PH#: 803-296-3100

COLUMBIA, SC 29202-7275

Facility Email: FRANK.HEFLIN@PALMETTOHEALTH.ORG

PALMETTO HEALTH

Fac. Cont. Email: FRANK.HEFLIN@PALMETTOHEALTH.ORG

Total Counties Served: 2

County/Counties Served: Lexington, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: CHAPLAINEY, DIETARY AND ENTEROSTOMAL THERAPIST

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

PALMETTO HEALTH TUOMEY HOME HEALTH

HHA-0315 / 12/31/2018

500 PINEWOOD RD STE 2

Sumter /

SUMTER, SC 29154-6197 FACILITY #:803-773-4663

129 N WASHINGTON ST

PH#:

SUMTER, SC 29150-4983

Facility Email:

FRANK.HEFLIN@PALMETTOHEALTH.ORG

PALMETTO HEALTH TUOMEY

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served: Lee, Sumter, Clarendon

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

PHC HOME HEALTH

HHA-0084 / 04/30/2018 (Renewal Pending)

408 FOLLY RD

Charleston / Corporation 1923-D MAYBANK HWY

CHARLESTON, SC 29412-2625 FACILITY #:843-762-3601

CHARLESTON, SC 29412-2115

DURRENCE HUGH D PH#: 843-762-3601

HEDGEMARK BRENTWOOD MEDICAL SERVICES INC

Facility Email:

Fac. Cont. Em ail: LORIWOOD@PHCHEALTH.COM

SARAHWILBANKS@PHCHEALTH.COM

Total Counties Served: 3

County/Counties Served: Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY

HHA-0212 / 12/31/2018

2817 ASHLAND RD Richland / Non-Profit Corporation

COLUMBIA, SC 29210-5009 FACILITY #:803-772-5885 2817 ASHLAND RD

STAMPER AMANDA L PH#: 803-772-5885 COLUMBIA, SC 29210-5009

Facility Email: MANDY.STAMPER@PRESHOMESC.ORG PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA

Fac. Cont. Email: MANDY.STAMPER@PRESHOMESC.ORG

Total Counties Served: 7

County/Counties Served: Berkeley, Dorchester, Laurens, Lexington, Pickens, Florence, Richland, Special Note - Berkeley,

Dorchester, Florence, Laurens, Lexington Pickens & Richland CCRC campus residents only

Phone:

License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY CAMPUSES ONLY IN 7 COUNTIES AS LISTED

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: CLINTON BRANCH

Address: 801 MUSGROVEST

City: CLINTON State:SC Zip Code: 29325

Satellite Location: COLUMBIA BRANCH Phone:

Address: 700 DAVEGA DR

State:SC City: LEXINGTON Zip Code: 29073-96!

Satellite Location: FLORENCE BRANCH Phone:

Address: 2350 W LUCAS ST

City: FLORENCE State:SC Zip Code: 29501

Satellite Location: FOOTHILLS BRANCH Phone:

Address: 205 BUD NALLEY DR

State:SC Zip Code: 29642 City: EASLEY

Satellite Location: SUMMERVILLE BRANCH Phone:

Address: 201 W 9TH NORTH ST

City: SUMMERVILLE State:SC Zip Code: 29483-672

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address

Licensee

PRUITTHEALTH HOME HEALTH-COLUMBIA

240 STONERIDGE DR STE 100

HHA-0232 / 01/31/2019

COLUMBIA, SC 29210-8013 FACILITY #:803-626-0089

Richland / Corporation 118 YORK ST

YOUNG STEPHANIE PH#: 803-359-2253

CHESTER, SC 29706-1484

Facility Em ail: STEYOUNG@PRUITTHEALTH.COM

PRUITTHEALTH HOME HEALTH INC

Fac. Cont. Email: 2211@AMEDISYS.COM

Total Counties Served: 23

County/Counties Served: Abbeville, Calhoun, Greenville, Greenwood, Lancaster, Laurens, Lexington, Newberry, Oconee, Pickens

Sumter, Union, York, McCormick, Anderson, Kershaw, Edgefield, Fairfield, Richland, Saluda, Spartanburg

Cherokee, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

PRUITTHEALTH HOME HEALTH-FLORENCE

2051 ELIJAH LUDD RD STE 1

FLORENCE, SC 29501-5222 FACILITY #:843-665-1759

MOORE SHARON PH#: 843-662-8633

Facility Em ail: LEGALSERVICES@PRUITTHEALTH.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0233 / 02/28/2019 Florence / Corporation

609 S COIT ST

FLORENCE, SC 29501-5222

PRUITTHEALTH HOME HEALTH INC

Total Counties Served: 11

County/Counties Served: Darlington, Dillon, Georgetown, Lee, Williamsburg, Marion, Marlboro, Horry, Florence, Chesterfield,

Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address**

Licensee

PRUITTHEALTH HOME HEALTH-LOW COUNTRY

108 TRADERS CROSS STE 100

BLUFFTON, SC 29909 FACILITY #:843-872-0946

KINARD ROBIN PH#: 843-322-0280

Facility Email: LEGALSERVICES@PRUITTHEALTH.COM

Fac. Cont. Email: RKINARD@PRUITTHEALTH.COM

HHA-0214 / 04/30/2019

Beaufort / Corporation

108 TRADERS CROSS STE 100

BLUFFTON, SC 29909

PRUITTHEALTH HOME HEALTH INC

Total Counties Served: 12

County/Counties Served: Aiken, Allendale, Berkeley, Charleston, Colleton, Dorchester, Hampton, Orangeburg, Bamberg, Barnwel

Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

ROLLING GREEN VILLAGE HOME HEALTH AGENCY

1 HOKE SMITH BLVD

GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800

BENSON ROBERT J PH#: 864-580-5660

Facility Email: RYANT@ROLLINGGREENVILLAGE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0213 / 12/31/2018

Greenville / Non-Profit Corporation

1 HOKE SMITH BLVD OFC

GREENVILLE, SC 29615-5399

ROLLING GREEN VILLAGE

Total Counties Served: 1

County/Counties Served: Greenville

License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY AT ROLLING GREEN VILLAGE RESIDENTS ONLY.

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N Other Services: HOME HEALTH AGENCY FOR RGC RESIDENTS ONLY

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

ROPER-ST FRANCIS HOME HEALTH CARE

HHA-0062 / 12/31/2018

1483 TOBIAS GADSON BLVD STE 208

Charleston / Non-Profit Corporation 1483 TOBIAS GADSON BLVD STE 208

CHARLESTON, SC 29407-4796 FACILITY #:843-402-7000

CHARLESTON, SC 29407-4796

MELLO BONNIE C PH#: 843-402-7000

OTTAINEED TOIN, 50 29407

Facility Em ail: BONNIE.MELLO@RSFH.COM

ROPER HOSPITAL INC

Fac. Cont. Email: ROPERSAINTFRANCIS.COM

Total Counties Served: 3

County/Counties Served: Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED DIETITIAN/CDE; CERTIFIED WOUND AND OSTOMY NURSES; TELEMONITORING

SEA ISLAND HOME HEALTH

HHA-0025 / 04/30/2019

3627 MAYBANK HWY

Charleston / Non-Profit Corporation

JOHNS ISLAND, SC 29455-4836 FACILITY #:843-559-4137

PO BOX 689

RUCKER TUMIKO PH#: 843-559-4137

JOHNS ISLAND, SC 29455

Facility Em ail: TRR@SICHCC.ORG

SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION

Fac. Cont. Email: TRR@SICHCC.ORG

Total Counties Served: 2

County/Counties Served: Charleston, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

SEABROOK WELLNESS AND HOME HEALTH CARE

HHA-0173 / 11/30/2018

300 WOODHAVEN DR

Beaufort / Non-Profit Corporation

HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747

300 WOODHAVEN DR OFC

LEE ROBERT M PH#: 843-842-3747

HILTON HEAD ISLAND, SC 29928-7512

Facility Email:

RLEE@THESEABROOK.COM

SEABROOK OF HILTON HEAD INC

Fac. Cont. Em ail: RLEE@THESEABROOK.COM

Total Counties Served: 1

County/Counties Served: Beaufort, Special Note - SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

License Restrictions: SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services:

SOUTH CAROLINA HOMECARE

HHA-0152 / 07/31/2018 140 STONERIDGE DR STE 620 Richland / Limited Liability

COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100

CAMERON MADELINE PH#:

LAFAYETTE, LA 70505-1266

Facility Email: ANGEL.STANSBURY@LHCGROUP.COM LHCG XLI LLC

PO BOX 51266

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Richland, Sumter

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

SPARTANBURG MEDICAL CENTER HOME HEALTH

120 HEYWOOD AVE STE 300

SPARTANBURG, SC 29302-1211 FACILITY #:864-560-3900

OSBORNE RN PHYLLIS F PH#: 864-560-3900

Facility Email: POSBORNE@SRHS.COM

Fac. Cont. Email: POSBORNE@SRHS.COM

HHA-0038 / 09/30/2018

Spartanburg / District

120 HEYWOOD AVE STE 300

SPARTANBURG, SC 29302-1211

SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC

Total Counties Served: 4

County/Counties Served: Cherokee, Greenville, Union, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

ST FRANCIS HOSPITAL HOME CARE

10 PATEWOOD DR BLDG 6 STE 300

GREENVILLE, SC 29615-6341 FACILITY #:864-233-5300

GARDNER WILLIAM J PH#: 864-233-5300

Facility Em ail: WILLIAM_GARDNER@BSHSI.ORG

Fac. Cont. Email: WILLIAM_GARDNER@BSHSI.ORG

HHA-0167 / 12/31/2018

Greenville / Corporation

10 PATEWOOD DR BLDG 6 STE 300

GREENVILLE, SC 29615-6341

ST FRANCIS HOSPITAL INC

Total Counties Served: 4

County/Counties Served: Anderson, Greenville, Pickens, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type **Mailing Address** Licensee

STILL HOPES HOME HEALTH

HHA-0199 / 12/31/2018 Lexington / Corporation

1 STILL HOPES DR

WEST COLUMBIA, SC 29169-7164 FACILITY #:803-223-6173

PO BOX 2959

ROBERTSON NIKKI W PH#: 803-796-6490

WEST COLUMBIA, SC 29171-2959

Facility Email:

JCISNEROS@STILLHOPES.ORG

SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC

Fac. Cont. Email: NROBERTSON@STILLHOPES.ORG

Total Counties Served: 1

County/Counties Served: Lexington, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

TIDEWATER HOME HEALTH PA

HHA-0241 / 03/31/2019 2858 SUNSET BLVD Lexington / Partnership WEST COLUMBIA, SC 29169 FACILITY #:803-757-7017 215 MEDICAL CIR

SHUTTLEWORTH ERIKA PH#: 803-757-7017 Facility Email: SGUEST@SHAMD.COM

WEST COLUMBIA, SC 29169-3653

TIDEWATER HOME HEALTH PA

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Lexington, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

May 1, 2018 Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address Licensee

TRINITY HOME HEALTH OF AIKEN

690 MEDICAL PARK DR 400

HHA-0316 / 11/30/2018 Aiken / Limited Liability

AIKEN, SC 29801 FACILITY #:803-641-8220 690 MEDICAL PARK DR STE 400

KEATING RN JULIE PH#: 803-641-8220 AIKEN, SC 29801-6348

Facility Email: JULIEKEATING@HOMECARETRINITY.COM AUGUSTA HOME CARE SERVICES LLC

Fac. Cont. Email: JULIE_KEATING@CHS.NET

Total Counties Served: 3

County/Counties Served: Aiken, Barnwell, Edgefield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

UNIVERSITY HOME HEALTH NORTH AUGUSTA

106 E MARTINTOWN RD UNIT B

NORTH AUGUSTA, SC 29841-3425 FACILITY #:803-278-0770

HARDEN RN MARY J PH#: 803-278-0770 Facility Email: MHARDEN@UH.ORG

Fac. Cont. Em ail: MHARDEN@UH.ORG

HHA-0137 / 10/31/2018

Aiken / Corporation

106 E MARTINTOWN RD UNIT B NORTH AUGUSTA, SC 29841-3425 UNIVERSITY HEALTH SERVICES INC

Total Counties Served: 2

County/Counties Served: Aiken, Edgefield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: EDGEFIELD OFFICE Phone:

Address: 1168 BAUSKETT ST

STEA

City: EDGEFIELD State:SC Zip Code: 29824

Satellite Location: WAGENER OFFICE Phone:

Address: 109 RAILROAD AVE

City: WAGENER State:SC Zip Code: 29164

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May 1, 2018

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State **Administrator**

License#/Expiration County/Ownership Type Mailing Address

Licensee

VNA OF GREATER BAMBERG

HHA-0045 / 12/31/2018 923 MIDWAY ST Bamberg / Corporation PO BOX 1048

BAMBERG, SC 29003-1957 FACILITY #:803-245-5611

WEATHERFORD JENNIFER PH#: 803-245-5611 BAMBERG, SC 29003-1048 Facility Email: VNABAMBERG@YAHOO.COM VNA OF GREATER BAMBERG INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 7

County/Counties Served: Allendale, Calhoun, Hampton, Orangeburg, Bamberg, Barnwell, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services: SKILLED NURSING

Satellite Location: ORANGEBURG OFFICE Phone:

Address: 1695 CHESTNUT ST NE

City: ORANGEBURG State:SC Zip Code: 29116

WESLEY COMMONS HOME HEALTH CARE HHA-0202 / 02/28/2019

1110 MARSHALL RD Greenwood / Non-Profit Corporation

GREENWOOD, SC 29646-4299 FACILITY #:864-227-7209 1110 MARSHALL RD

DAVIS DORIS E PH#: 864-227-7480 GREENWOOD, SC 29646-4299

Facility Email: DDAVIS@WESLEYCOMMONS.ORG **WESLEY COMMONS**

Fac. Cont. Email: DDAVIS@WESLEYCOMMONS.ORG

Total Counties Served: 1

County/Counties Served: Greenwood, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

May 1, 2018

Home Health Agencies **DHEC Regulation 61-77**

Name of Facility **Location Street Location City, State** Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

WESTMINSTER TOWERS HOME HEALTH

1330 INDIA HOOK RD

ROCK HILL, SC 29732-2462 FACILITY #:803-328-5000

COOKHORNE MICHELLE THERESA PH#: 803-362-3100

Facility Email: MCOOKHORNE@WESTMINSTERTOWERS.ORG

Fac. Cont. Email: MCOOKHORNE@WESTMINSTERTOWERS.ORG

HHA-0201 / 01/31/2019

York / Non-Profit Corporation

1330 INDIA HOOK RD

ROCK HILL, SC 29732-2462

WESTMINSTER PRESBYTERIAN CENTER INC

Total Counties Served: 1

County/Counties Served: York, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services:

Total Number of Facilities: 93 **Total Counties Served:** 459