

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>ADVANCED HOME CARE</b> 2424 INDIA HOOK RD ROCK HILL, SC 29732 FACILITY #:803-285-2026 FROHNA MATT PH#: 803-285-2026 <b>Facility Email:</b> MATT.FROHNA@ADVHOMECARE.ORG <b>Fac. Cont. Email:</b> 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:**

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:

<b>AMEDISYS HOME HEALTH CARE</b> 127 E MILL ST KINGSTREE, SC 29556 FACILITY #:843-355-5103 LANGSTON JENNIFER PH#: <b>Facility Email:</b> 2241@AMEDISYS.COM <b>Fac. Cont. Email:</b> 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
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**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

Other Services:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>AMEDISYS HOME HEALTH OF BEAUFORT</b> 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 FACILITY #:843-379-2320 CRAVEN KAREN L PH#: <b>Facility Email:</b> 2210@AMEDISYS.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0189 / 01/31/2019 Beaufort / Ltd. Liability 2121 BOUNDARY ST STE 200 BEAUFORT, SC 29902-6812 AMEDISYS SC LLC

**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:**

<b>AMEDISYS HOME HEALTH OF BLUFFTON</b> 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 FACILITY #:843-815-3090 BARRY HANK PH#: 843-815-8090 <b>Facility Email:</b> 2224@AMEDISYS.COM <b>Fac. Cont. Email:</b> 2224@AMEDISYS.COM	HHA-0203 / 02/28/2019 Beaufort / Ltd. Liability 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 AMEDISYS SC LLC
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**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    Home Health Aid: Y**
**Medical Supplies/Appliances/Durable Medical Equipment: N**
**Other Services:**

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**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. Email: 2216@AMEDISYS.COM

HHA-0194 / 02/28/2019  
Kershaw / Ltd. Liability  
1110 BROAD ST STE B  
CAMDEN, SC 29020-3624  
AMEDISYS SC LLC

**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**

Phone:

Address: **3227 SUNSET BLVD  
STE F101**

City: **WEST COLUMBIA** State: **SC** Zip Code: **29169**

**AMEDISYS HOME HEALTH OF CHARLESTON**

2675 LAKE PARK DR  
NORTH CHARLESTON, SC 29406-9100 FACILITY #:843-553-1263  
CRAVEN KAREN L PH#:  
Facility Email: KAREN.CRAVEN@AMEDISYS.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0172 / 09/30/2018  
Charleston / Limited Liability  
2675 LAKE PARK DR  
NORTH CHARLESTON, SC 29406-9100  
AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

**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:

## Home Health Agencies

DHEC Regulation 61-77

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

HHA-0191 / 01/31/2019  
Charleston / Ltd. Liability  
1027 PHYSICIANS DR STE 210  
CHARLESTON, SC 29414-5352  
AMEDISYS SC LLC

**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: **29464-56**Satellite Location: **WALTERBORO OFFICE**Phone: **843-542-9020**Address: **305 ROBERTSON BLVD**City: **WALTERBORO** State: **SC** Zip Code: **29488****AMEDISYS HOME HEALTH OF CLINTON**

210 PHYSICIANS PARK DR STE U  
CLINTON, SC 29325-7565 FACILITY #:864-833-3212  
SUMNER WENDY C PH#: 864-833-3212  
Facility Email: 2204@AMEDISYS.COM  
Fac. Cont. Email: 2204@AMEDISYS.COM

HHA-0186 / 01/31/2019  
Laurens / Limited Liability  
210 PHYSICIANS PARK DR STE U  
CLINTON, SC 29325-7565  
AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

**Total Counties Served: 10**County/Counties Served: **Abbeville, Anderson, Cherokee, Greenville, Greenwood, 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:

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

Address: **440 ROPER MOUNTAIN RD  
STE G-1**

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

## Home Health Agencies

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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. Email: 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:**

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:

**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  
Fac. Cont. Email: 2205@AMDISYS.COM

HHA-0192 / 01/31/2019  
Georgetown / Limited Liability  
2503 HIGHMARKET ST  
GEORGETOWN, SC 29440-2900  
GEORGETOWN HOSPITAL HOME HEALTH LLC

**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  
Other Services:

## Home Health Agencies

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Administrator

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County/Ownership Type  
Mailing Address  
Licensee

**AMEDISYS HOME HEALTH OF LEXINGTON**

714 S LAKE DR STE 250  
LEXINGTON, SC 29072-3462 FACILITY #:803-359-2253  
CARSON ERIN PH#: 2211@AMEDISYS.COM  
Facility Email: 2211@AMEDISYS.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0190 / 01/31/2019  
Lexington / Ltd. Liability  
714 S LAKE DR STE 250  
LEXINGTON, SC 29072-3462  
AMEDISYS SC LLC

**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**

1309 PROFESSIONAL DR STE 100  
MYRTLE BEACH, SC 29577-5701 FACILITY #:843-916-0931  
NEASBITT LEISA VICTORIA PH#: 843-916-0931  
Facility Email: 2246@AMEDISYS.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0187 / 01/31/2019  
Horry / Limited Liability  
1309 PROFESSIONAL DR STE 100  
MYRTLE BEACH, SC 29577-5701  
GEORGETOWN HOSPITAL HOME HEALTH LLC

**Total Counties Served: 1**

County/Counties Served: **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:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>ANMED HEALTH HOME HEALTH AGENCY</b> 1926 MCCONNELL SPRINGS RD ANDERSON, SC 29621-2642 FACILITY #:864-512-6410 GETSINGER CHRISTI A PH#: 864-512-6410 <b>Facility Email:</b> HCCREDENTIALING@ANMEDHEALTH.ORG <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0068 / 02/28/2019 Anderson / Non-Profit Corporation PO BOX 195 ANDERSON, SC 29622-0195 ANMED HEALTH

**Total Counties Served: 2****County/Counties Served: Anderson, Pickens****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:**

<b>BAYADA HOME HEALTH CARE-ROCK HILL</b> 454 S ANDERSON RD STE 320 ROCK HILL, SC 29730 FACILITY #:803-281-4550 NOEL DAN PH#:	HHA-0331 / 01/31/2019 York / Corporation BAYADA HOME HEALTH CARE INC
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**Facility Email:** DNOEL@BAYADA.COM  
**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**

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County/Ownership Type  
Mailing Address  
Licensee

**BEAUFORT-JASPER HOME HEALTH AGENCY**

719 OKATIE HWY 170N  
RIDGELAND, SC 29936-8276 FACILITY #:843-987-7400  
KENNEDY CATHERINE B PH#: 843-987-7400  
Facility Email: CKENNEDY@BJHCHS.ORG  
Fac. Cont. Email: CKENNEDY@BJHCHS.ORG

HHA-0017 / 08/31/2018  
Beaufort / Non-Profit Corporation  
PO BOX 357  
RIDGELAND, SC 29936-2605  
BEAUFORT-JASPER-HAMPTON COMPREHENSIVE HEALTH SERVICES INC

**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**

157 HOME AVE  
DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867  
MCKITTRICK RN PATRICIA M PH#: 843-393-2867  
Facility Email: BSPURLING@SCBMA.COM  
Fac. Cont. Email: BSPURLING@SCBMA.COM

HHA-0143 / 07/31/2018  
Darlington / Non-Profit Corporation  
157 HOME AVE  
DARLINGTON, SC 29532-7625  
SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

**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  
Other Services:



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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>BIOSCRIP INFUSION SERVICES</b> 160 CONGRESS BLVD STE D DUNCAN, SC 29334-8890 FACILITY #:864-583-8190 NEAL TONI R PH#: 864-583-8190 <b>Facility Email:</b> LICENSURE@BIOSCRIP.COM <b>Fac. Cont. Email:</b> 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**

<b>BRIGHTSTAR CARE</b> 2012 HWY 160 W STE 4 FORT MILL, SC 29708-8401 FACILITY #:803-578-9900 SAPORITO DAVID PH#: 803-578-9900 <b>Facility Email:</b> DSAPORITO@BRIGHTSTARCARE.COM <b>Fac. Cont. Email:</b> 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
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**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**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>BRIGHTSTAR CARE OF CHARLESTON</b> 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 FACILITY #:843-300-3008 JAMES KRISTIN H PH#: <b>Facility Email:</b> C.APPLGATE@BRIGHTSTARCARE.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0229 / 06/30/2018 Charleston / Limited Liability 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 TOWNES HOLDINGS LLC

**Total Counties Served: 1****County/Counties Served: Charleston****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: IV-IG INFUSION**

<b>BRIGHTSTAR CARE-BLUFFTON</b> 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FACILITY #:843-837-3773 WHITTELSEY SUSAN PH#: 843-837-3773 <b>Facility Email:</b> SWHITTELSEY@BRIGHTSTARCARE.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0223 / 12/31/2018 Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC
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**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:**

## Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>BRIGHTSTAR OF SPARTANBURG</b> 110 W CHURCH ST STE A GREER, SC 29650-0000 FACILITY #:864-599-0452 SANDERS FRANK J PH#: 864-599-0452 <b>Facility Email:</b> FRANK.SANDERS@BRIGHTSTARCARE.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0328 / 06/30/2018 Greenville / Limited Liability SANDERS HEALTHCARE LLC

**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

<b>CAROLINAS HOME HEALTH</b> 121 E CEDAR ST FLORENCE, SC 29506-2576 FACILITY #:843-629-6811 POSTON JOE A PH#: 843-629-6811 <b>Facility Email:</b> JOEPOSTON@HOMECAREFLORENCE.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0109 / 12/31/2018 Florence / Limited Liability 121 E CEDAR ST FLORENCE, SC 29506-2576 FLORENCE HOME CARE SERVICES LLC
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**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

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>CHESTERFIELD VISITING NURSES SERVICE</b> 918 CHESTERFIELD HWY CHERAW, SC 29520-7008 FACILITY #:843-537-3020 RAYFIELD TABITHA PH#: 843-537-3020 <b>Facility Email:</b> TRAYFIELD@AHCE.NET <b>Fac. Cont. Email:</b> TRAYFIELD@AHCE.NET	HHA-0065 / 08/31/2018 Chesterfield / Corporation 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**

<b>COVENANT PLACE CCRC HOME HEALTH SERVICES</b> 2825 CARTER RD SUMTER, SC 29150-1712 FACILITY #:803-469-7007 WILSEY JENNIFER PH#: 803-469-7007 <b>Facility Email:</b> JWILSEY@COVENANTPLACE.ORG <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0209 / 05/31/2018 Sumter / Non-Profit Corporation 2825 CARTER RD SUMTER, SC 29150-1712 COVENANT PLACE OF SUMTER INC
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**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**

## Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>CYPRESS CLUB HOME HEALTH AGENCY</b> 20 LADYSLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 FACILITY #:843-689-7017 HARRISON ANN E PH#: 843-689-7017 Facility Email: AHARRISON@THECYPRESS.COM Fac. Cont. Email: AHARRISON@THECYPRESS.COM	HHA-0146 / 07/31/2018 Beaufort / Corporation 20 LADYSLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 CYPRESS CLUB INC

**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**

<b>ENCOMPASS HOME HEALTH OF SOUTH CAROLINA</b> 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
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**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  
 Other Services:

## Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>ENCOMPASS HOME HEALTH OF SOUTH CAROLINA - BLUFFTON</b> 110 TRADERS CROSS STE 206 BLUFFTON, SC 29909 FACILITY #:843-705-8044 OCONNOR SHARON PH#: 803-441-0174 <b>Facility Email:</b> LICENSING@EHHI.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0330 / 10/31/2018 Beaufort / Limited Liability  CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC

**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:**

<b>FLORENCE VISITING NURSES SERVICE</b> 1605-C W PALMETTO ST FLORENCE, SC 29501-4198 FACILITY #:843-667-1515 JACKSON-MEEKINS JONATHAN PH#: 843-667-1515 <b>Facility Email:</b> JJOHNSON@AHCE.NET <b>Fac. Cont. Email:</b> JJOHNSON@AHCE.NET	HHA-0064 / 01/31/2019 Florence / Corporation PO BOX 1485 WAYCROSS, GA 31502 FLORENCE VISITING NURSES SERVICE INC
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**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

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Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**GHS HOME HEALTH AGENCY**

440 ROPER MOUNTAIN RD  
GREENVILLE, SC 29615 FACILITY #:864-455-8140  
WOODS LANDACE PH#: 864-455-8140  
Facility Email: NSALLY@GHS.ORG  
Fac. Cont. Email: LWOODS@GHS.ORG

HHA-0323 / 10/31/2018  
Greenville / Corporation  
440 ROPER MOUNTAIN RD  
GREENVILLE, SC 29615  
UPSTATE AFFILIATE ORGANIZATION

**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. Email: 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  
STE K

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

City: LAURENS State:SC Zip Code: 29360

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>HEALTHY @ HOME-YORK</b> 226 NORTHPARK DR STE 120 ROCK HILL, SC 29730 FACILITY #:803-327-8874 MCCARTER-FROHNA MARIE PH#: 803-327-8874 <b>Facility Email:</b> MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE <b>Fac. Cont. Email:</b> MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE	HHA-0327 / 06/30/2018 York / Limited Liability CAROLINAS MEDICAL CENTER AT HOME LLC

**Total Counties Served: 2**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: RESPIRATORY THERAPY

<b>HOME CARE OF HOSPICECARE OF THE PIEDMONT</b> 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 FACILITY #:864-227-9393 CORLEY RN NANCY B PH#: 864-227-9393 <b>Facility Email:</b> NCORLEY@HOSPICEPIEDMONT.ORG <b>Fac. Cont. Email:</b> NCORLEY@HOSPICEPIEDMONT.ORG	HHA-0134 / 09/30/2018 Greenwood / Corporation 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 HOME CARE OF HOSPICECARE OF THE PIEDMONT INC
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**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



## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>HOME CARE OF LANCASTER</b> 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 FACILITY #:803-286-1472 HELMS RAYMOND E PH#: <b>Facility Email:</b> RAYMONDHELMS@HOMECAREOFLANCASTER.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0050 / 12/31/2018 Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC

**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**

<b>HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE</b> 105 VINECREST CT STE 400 GREENWOOD, SC 29646-8031 FACILITY #:864-725-7600 WRIGHT JEFFERY PH#: 864-725-7600 <b>Facility Email:</b> JEFFERY.WRIGHT@SELFREGIONAL.ORG <b>Fac. Cont. Email:</b> 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
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**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**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>HOMECARE OF THE REGIONAL MEDICAL CENTER</b> 1895 SAINT MATTHEWS RD ORANGEBURG, SC 29118-2403 FACILITY #:803-395-2600 WILLIAMS CHARLES PH#: 803-395-2454 <b>Facility Email:</b> RLBJARNESEN@REGMED.COM <b>Fac. Cont. Email:</b> 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**

<b>INTERIM HEALTHCARE</b> 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29406 FACILITY #:843-569-5510 BAKER DAWN MPH#: 843-569-5510 <b>Facility Email:</b> DABAKER@INTERIMHEALTHCARE.COM <b>Fac. Cont. Email:</b> CYONCE@INTERIMHEALTHCARE.COM	HHA-0208 / 03/31/2018 Charleston / Limited Liability 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29418 LOWCOUNTRY NURSING GROUP LLC
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**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**

## 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**

154 AMENDMENT AVE STE 106  
ROCK HILL, SC 29732-3156 FACILITY #:803-324-4166  
WEBB MARGARET D PH#: 803-324-4166  
Facility Email: TPILKINGTON@INTERIMHEALTHCARE.COM  
Fac. Cont. Email: TERRIPILKINGTON@INTERIM-MGI.COM

HHA-0169 / 11/30/2018  
York / Corporation  
2526 WARD BLVD  
WILSON, NC 27893-1600  
INTERIM HEALTHCARE OF THE TRIAD INC

**Total Counties Served: 1**County/Counties Served: **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:

**INTERIM HEALTHCARE OF THE UPSTATE**

16 HYLAND RD  
GREENVILLE, SC 29615-5756 FACILITY #:864-627-1200  
SCHROEDER CHARYL MPH#: 864-627-1200  
Facility Email: CHARYL.SCHROEDER@INTERIMCARES.COM  
Fac. Cont. Email: CHARYL.SCHROEDER@INTERIMCARES.COM

HHA-0332 / 01/31/2019  
Greenville / Limited Liability  
INVESTSOUTH IHC LLC

**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  
Other Services:

## 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**

2694 LAKE PARK DR 1ST FLOOR

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

MYERS ELIZABETH A PH#: 843-569-3516

Facility Email: RAMONA.GOODMAN@INTREPIDUSA.COM

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

HHA-0180 / 06/30/2018

Charleston / Corporation

4055 VALLEY VIEW LN STE 500

DALLAS, TX 75244-5048

FC OF SOUTH CAROLINA INC

**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**

300 NEW RIVER PKWY, STE 7

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

BOLCH ELLEN B PH#: 843-208-3660

Facility Email: MHITT@THAGROUP.ORG

Fac. Cont. Email: EBOLCH@THAGROUP.ORG

HHA-0111 / 02/28/2018 (Renewal Pending)

Jasper / Corporation

PO BOX 8011

SAVANNAH, GA 31412-8011

ISLAND HEALTH CARE INC

**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**

## 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**

1165 HWY 1 S STE 400  
LUGOFF, SC 29078-0340 FACILITY #:803-425-1182  
FRY TERESA PH#: 803-425-1182  
Facility Email: TFRY@KERSHAWHEALTH.ORG  
Fac. Cont. Email: TFRY@KERSHAWHEALTH.ORG

HHA-0321 / 07/31/2018  
Kershaw / County  
1165 HWY 1 SOUTH STE 400  
LUGOFF, SC 29078-0000  
KERSHAW HOSPITAL LLC

**Total Counties Served: 1**County/Counties Served: **Kershaw****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**

2000 CENTER POINT RD STE 2300  
COLUMBIA, SC 29210-7318 FACILITY #:803-731-2365  
BROWN NATASHA L PH#:  
Facility Email: JANET.COMBS@GENTIVA.COM  
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  
Other Services:

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>KINDRED AT HOME-ANDERSON</b> 1704 E GREENVILLE ST STE 2D ANDERSON, SC 29621-7914 FACILITY #:864-332-8200 MERCK FREDAL PH#: Facility Email: JANET.COMBS@GENTIVA.COM 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 HUMAN SERVICE RD

City: CLINTON State:SC Zip Code: 29325

<b>KINDRED AT HOME-CHARLESTON</b> 4975 LACROSS RD STE 354 CHARLESTON, SC 29406-6525 FACILITY #:843-744-1191 HENNING ALISON PH#: 843-744-1191 Facility Email: ALISON.HENNING@GENTIVA.COM Fac. Cont. Email: JANET.COMBS@GENTIVA.COM	HHA-0051 / 08/31/2018 Charleston / Corporation LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40 OVERLAND PARK, KS 66213-2696 GENTIVA CERTIFIED HEALTHCARE CORPORATION
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**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:

## 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**

1240 21ST AVE N STE 200  
MYRTLE BEACH, SC 29577-7401 FACILITY #:843-448-7060  
MILLER AMANDA J PH#:  
Facility Email: JANET.COMBS@GENTIVA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0179 / 11/30/2018  
Horry / Limited Liability  
12900 FOSTER ST STE 400  
OVERLAND PARK, KS 66213-2696  
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**

15 BRENDAN WAY STE 250  
GREENVILLE, SC 29615-3562 FACILITY #:864-297-5711  
RIGGLEMAN BARBARA D PH#: 864-297-5711  
Facility Email: JANET.COMBS@GENTIVA.COM  
Fac. Cont. Email: JANET.COMBS@GENTIVA.COM

HHA-0158 / 01/31/2019  
Greenville / Limited Liability  
12900 FOSTER ST STE 400  
OVERLAND PARK, KS 66213-2696  
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

**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: SPARTANBURG OFFICE  
Address: 905 E MAIN ST

Phone:

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

Satellite Location: ANDERSON OFFICE  
Address: 1704 E GREENVILLE ST

Phone:

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

Satellite Location: SENECA OFFICE  
Address: 10 ACCOUNTANTS CIR  
THE COMMONS

Phone:

City: SENECA State:SC Zip Code: 29678

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>KINDRED AT HOME-LOW COUNTRY</b> 415 ROBERTSON BLVD STE E WALTERBORO, SC 29488-5713 FACILITY #:843-542-9540 COOK DEANN PH#: 843-542-9540 Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: JANET.COMBS@GENTIVA.COM	HHA-0011 / 12/31/2018 Colleton / 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: **Allendale, Calhoun, Charleston, Dorchester, Hampton, Orangeburg, Bamberg, Beaufort, Berkeley, Jasper, 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**  
 Address: 4050 BRIDGEVIEW DRIVE

Phone: 843-953-2450

City: CHARLESTON State:SC Zip Code: 29405

Satellite Location: **VARNILLE-OFFICE**  
 Address: 531 CAROLINA AVE

Phone: 803-943-4649

City: VARNVILLE State:SC Zip Code: 29944

Satellite Location: **ORANGEBURG-OFFICE**  
 Address: 1550 CAROLINA AVENUE

Phone: 803-268-5734

City: ORANGEBURG State:SC Zip Code: 29115

<b>KINDRED AT HOME-MIDLANDS</b> 2521 EVANS ST NEWBERRY, SC 29108 FACILITY #:803-276-0273 GUY HARRIETT PH#: 803-276-0273 Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0040 / 12/31/2018 Newberry / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC
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**Total Counties Served: 12**

County/Counties Served: **Aiken, Edgefield, Lexington, Richland, York, Newberry, Barnwell, Kershaw, 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**  
 Address: 11015 ELLENTON STREET

Phone: 803-541-1190

City: BARNWELL State:SC Zip Code: 29812



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: LANCASTER OFFICE  
Address: 1822 PAGELAND HIGHWAY

Phone:

City: LANCASTER State:SC Zip Code: 29720

Satellite Location: FORT MILL OFFICE  
Address: 1061 RED VENTURES DR STE 165

Phone: 803-547-7612

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  
Facility Email: JANET.COMBS@GENTIVA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0009 / 12/31/2018  
Florence / Limited Liability  
12900 FOSTER ST STE 400  
OVERLAND PARK, KS 66213-2696  
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

**Total Counties Served: 12**

County/Counties Served: **Darlington, Dillon, Horry, Lee, Williamsburg, Marion, Marlboro, Florence, Georgetown, Sumter, 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  
Other Services: REGISTERED NURSE

## 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-UPSTATE**

206 CHESNEE HWY STE G & H  
GAFFNEY, SC 29341-2709 FACILITY #:864-488-0898  
RANDOLPH TERESA PH#: 864-488-0898  
Facility Email: JANET.COMBS@GENTIVA.COM  
Fac. Cont. Email: N/A

HHA-0178 / 11/30/2018  
Cherokee / Limited Liability  
LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40  
OVERLAND PARK, KS 66213-2696  
TOTAL CARE HOME HEALTH OF NORTH CAROLINA LLC

**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**

Phone:

Address: **1261 S DUNCAN BYPASS**City: **UNION**State: **SC**Zip Code: **29379**Satellite Location: **ROCK HILL OFFICE**

Phone:

Address: **250 PIEDMONT BLVD**City: **ROCK HILL**State: **SC**Zip Code: **29732-18****LAUREL CREST HOME HEALTH**

100 JOSEPH WALKER DR  
WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370  
DEEL JAMES F PH#: 803-796-0370  
Facility Email: J.DEEL@LAUREL-CREST.COM  
Fac. Cont. Email: J.DEEL@LAUREL.CREST.COM

HHA-0333 / 01/31/2019  
Lexington / Corporation

LAUREL CREST RETIREMENT COMMUNITY

**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:

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>LIBERTY HOME CARE-BENNETTSVILLE</b> 405 E MAIN ST BENNETTSVILLE, SC 29512-3111 FACILITY #:843-479-8711 DOOLEY CHERYL J PH#: 843-347-5661 <b>Facility Email:</b> CDOOLEY@LIBERTYHOMECARE.COM <b>Fac. Cont. Email:</b> TBROOKS@HEALTHKEEPERZ.COM	HHA-0159 / 12/31/2018 Marlboro / Ltd. Liability 405 E MAIN ST BENNETTSVILLE, SC 29512-3111 LIBERTY HOME CARE LLC

**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:**

<b>LIBERTY HOME CARE-MYRTLE BEACH</b> 1293 PROFESSIONAL DR STE C MYRTLE BEACH, SC 29577-5754 FACILITY #:843-839-2273 SCHOONMAKER CHRISTY PH#: <b>Facility Email:</b> CSCHOONMAKER@LIBERTYHOMECARE.COM <b>Fac. Cont. Email:</b> 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
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**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**
**Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>MCLEOD HOME HEALTH</b> 300 S DARGAN ST FLORENCE, SC 29506-2537 FACILITY #:843-777-3050 THIGPEN TRACIE PH#: 803-777-3050 Facility Email: TTHIGPEN@MCLEODHEALTH.ORG Fac. Cont. Email: TTHIGPEN@MCLEODHEALTH.ORG	HHA-0085 / 05/31/2018 Florence / Non-Profit Corporation 300 S DARGAN ST FLORENCE, SC 29506-2537 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC

**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:

<b>MEDICAL SERVICES OF AMERICA - COASTAL</b> 4685 HWY 17 BYP S MYRTLE BEACH, SC 29577-6681 FACILITY #:843-293-4614 MOORE TONYA PH#: Facility Email: LICENSING@MSA-CORP.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0039 / 02/28/2019 Horry / Corporation 4685 HWY 17 BYP S MYRTLE BEACH, SC 29577-6681 INCARE HOME HEALTH INC
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**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: <b>GEORGETOWN OFFICE</b> Address: 107 QUEEN ST UNIT A City: GEORGETOWN State:SC Zip Code: 29440-361	Phone:
Satellite Location: <b>NORTH MYRTLE BEACH OFFICE</b> Address: 106 HWY 17 S SUNDIAL CENTER City: N MYRTLE BEACH State:SC Zip Code: 29582	Phone:
Satellite Location: <b>FLORENCE OFFICE</b> Address: 1402 D MEADORS FARM ROAD City: FLORENCE State:SC Zip Code: 29505-271	Phone: 843-665-8135

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

Phone:

Address: 1261 HWY 501 E

STEC

City: CONWAY

State:SC

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. Email: 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

**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

STEB

City: UNION

State:SC

Zip Code: 29379

Satellite Location: AIKEN OFFICE

Phone:

Address: 186 FABIAN DIVE

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: SUMTER OFFICE

Phone:

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

Other Services:

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
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 Email:** BBLASZCYZK@BAYADA.COM  
**Fac. Cont. Email:** No Facility Contact Email on Record

HHA-0329 / 01/31/2019  
Horry / Limited Liability  
  
SCHHA LLC

**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 Email:** RMICHAEL@BAYADA.COM  
**Fac. Cont. Email:** 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**  
**Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY</b> 1645 J A COCHRAN BYP STE I CHESTER, SC 29706-3101 FACILITY #:866-327-3205 GATLIFF LISA PH#: 803-581-6775 <b>Facility Email:</b> 2226@AMEDISYS.COM <b>Fac. Cont. Email:</b> 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:**

<b>NHC HOMECARE-AIKEN</b> 690 MEDICAL PARK DR STE 200 AIKEN, SC 29801-6348 FACILITY #:803-643-1701 GRIFFIS SARAH PH#: 803-643-1701 <b>Facility Email:</b> NHC@NHCHOMECAREAIKEN.COM <b>Fac. Cont. Email:</b> 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
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**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**



## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>NHC HOMECARE-BEAUFORT</b> 22 PLANTATION PARK DR STE 105B BLUFFTON, SC 29910 FACILITY #:843-705-8230 JOHNSON KATHY A PH#: 843-522-0476 <b>Facility Email:</b> NHC@NHCHOMECAREBEAUFORT.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0216 / 09/30/2018 Beaufort / Limited Liability PO BOX 1199 BLUFFTON, SC 29910 NHC HOMECARE-SOUTH CAROLINA LLC

**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**

<b>NHC HOMECARE-GREENWOOD</b> 315 W ALEXANDER AVE GREENWOOD, SC 29646-4009 FACILITY #:864-229-9888 HAMMERSMITH MARY PH#: 864-229-9888 <b>Facility Email:</b> NHC@NHCHOMECAREGREENWOOD.COM <b>Fac. Cont. Email:</b> NHC@NHCHOMECAREGREENWOOD.COM	HHA-0182 / 06/30/2018 Greenwood / Limited Liability Limited Partnership PO BOX 1708 GREENWOOD, SC 29648-1708 NHC/OP LP
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**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**

## 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**

700 PLAZA CIR STE O  
CLINTON, SC 29325-7556 FACILITY #:864-833-2368  
GRIFFIS SARAH PH#: 803-643-1701  
Facility Email: NHC@NHCHOMECARELAURENS.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0183 / 11/30/2018  
Laurens / Limited Liability Limited Partnership  
PO BOX 309  
LAURENS, SC 29360-0309  
NHC/OP LP

**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**

2070 NORTHBROOK BLVD STE B1  
NORTH CHARLESTON, SC 29406 FACILITY #:843-851-0999  
FLYNN WILLIAM R PH#: 843-851-0999  
Facility Email: NHC@NHCHOMECARELOWCOUNTRY.COM  
Fac. Cont. Email: NHC@NHCHOMECARELOWCOUNTRY.COM

HHA-0138 / 04/30/2018  
Charleston / Limited Liability  
2070 NORTHBROOK BLVD SUITE B1  
NORTH CHARLESTON, SC 29406  
NHC HOMECARE-SOUTH CAROLINA LLC

**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

## 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 / 04/30/2018  
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

**Total Counties Served: 4**

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

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>NHC HOMECARE-PIEDMONT</b> 1674 CRANIUM DR STE 101 ROCK HILL, SC 29732-3506 FACILITY #:803-325-1455 ANSTEY LENORA PH#: 803-325-1455 <b>Facility Email:</b> NHC@NHCHOMECAREPIEDMONT.COM <b>Fac. Cont. Email:</b> NHC@NHCHOMECAREPIEDMONT.COM	HHA-0099 / 04/30/2018 York / Limited Liability PO BOX 2525 ROCK HILL, SC 29732-4525 NHC HOMECARE-SOUTH CAROLINA LLC

**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**

<b>OAKS HOME HEALTH</b> 1000 METHODIST OAKS DR ORANGEBURG, SC 29116 FACILITY #:803-534-1212 TILL ELAINE M PH#: 803-534-1212 <b>Facility Email:</b> ETILL@THEOAKSSC.COM <b>Fac. Cont. Email:</b> ETILL@THEOAKSSC.COM	HHA-0200 / 01/31/2019 Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC
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**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****Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC</b> 107 WESTPARK BLVD STE 110 COLUMBIA, SC 29210 FACILITY #:803-750-0022 BURGESS KIM PH#: 866-359-9640 <b>Facility Email:</b> KIM.BURGESS@OPTUM.COM <b>Fac. Cont. Email:</b> KIM.BURGESS@OPTUM.COM	HHA-0130 / 03/31/2018 Richland / Limited Liability 3200 WINDY HILL RD SE STE 100B ATLANTA, GA 30339-8504 ALERE HEALTH LLC

**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

<b>OPTUM WOMEN'S AND CHILDREN'S HEALTH-PIEDMONT</b> 2 INDEPENDENCE POINTE GREENVILLE, SC 29615 FACILITY #:866-359-9640 BURGESS KIM PH#: 866-359-9640 <b>Facility Email:</b> KIM.BURGESS@OPTUM.COM <b>Fac. Cont. Email:</b> KIM.BURGESS@OPTUM.COM	HHA-0128 / 03/31/2018 Greenville / Limited Liability 3200 WINDY HILL RD SE STE 100B ATLANTA, GA 30339-8504 ALERE HEALTH LLC
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**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, Marlboro, 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

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>PALLIATIVE CARE OF THE LOWCOUNTRY</b> 7 PLANTATION PARK DR UNIT 4 STE C2 BLUFFTON, SC 29910 FACILITY #:843-706-4094 BRASINGTON RN JENNY PH#: 843-706-2296 <b>Facility Email:</b> INFO@HOSPICECARELC.ORG <b>Fac. Cont. Email:</b> INFO@HOSPICECARELC.ORG	HHA-0117 / 09/30/2018 Beaufort / Non-Profit Corporation PO BOX 3827 BLUFFTON, SC 29910-3827 HOSPICE CARE OF THE LOWCOUNTRY INC

**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:**

<b>PALMETTO HEALTH HOMECARE</b> 1400 PICKENS ST COLUMBIA, SC 29201-3465 FACILITY #:803-296-3100 HEFLIN FRANK G PH#: 803-296-3100 <b>Facility Email:</b> FRANK.HEFLIN@PALMETTOHEALTH.ORG <b>Fac. Cont. Email:</b> FRANK.HEFLIN@PALMETTOHEALTH.ORG	HHA-0148 / 02/28/2019 Richland / Non-Profit Corporation PO BOX 7275 COLUMBIA, SC 29202-7275 PALMETTO HEALTH
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**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**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>PALMETTO HEALTH TUOMEY HOME HEALTH</b> 500 PINWOOD RD STE 2 SUMTER, SC 29154-6197 FACILITY #:803-773-4663 PH#: <b>Facility Email:</b> FRANK.HEFLIN@PALMETTOHEALTH.ORG <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0315 / 12/31/2018 Sumter / 129 N WASHINGTON ST SUMTER, SC 29150-4983 PALMETTO HEALTH TUOMEY

**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:**

<b>PHC HOME HEALTH</b> 408 FOLLY RD CHARLESTON, SC 29412-2625 FACILITY #:843-762-3601 DURRENCE HUGH D PH#: 843-762-3601 <b>Facility Email:</b> SARAHWILBANKS@PHCHEALTH.COM <b>Fac. Cont. Email:</b> LORIWOOD@PHCHEALTH.COM	HHA-0084 / 04/30/2018 Charleston / Corporation 1923-D MAYBANK HWY CHARLESTON, SC 29412-2115 HEDGEMARK BRENTWOOD MEDICAL SERVICES INC
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**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:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY</b> 2817 ASHLAND RD COLUMBIA, SC 29210-5009 FACILITY #:803-772-5885 STAMPER AMANDA L PH#: 803-772-5885 <b>Facility Email:</b> MANDY.STAMPER@PRESHOMESC.ORG <b>Fac. Cont. Email:</b> MANDY.STAMPER@PRESHOMESC.ORG	HHA-0212 / 12/31/2018 Richland / Non-Profit Corporation 2817 ASHLAND RD COLUMBIA, SC 29210-5009 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA

**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**

**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:**

<b>Satellite Location: CLINTON BRANCH</b>	<b>Phone:</b>
<b>Address: 801 MUSGROVE ST</b>	
<b>City: CLINTON State:SC Zip Code: 29325</b>	
<b>Satellite Location: COLUMBIA BRANCH</b>	<b>Phone:</b>
<b>Address: 700 DAVEGA DR</b>	
<b>City: LEXINGTON State:SC Zip Code: 29073-964</b>	
<b>Satellite Location: FLORENCE BRANCH</b>	<b>Phone:</b>
<b>Address: 2350 W LUCAS ST</b>	
<b>City: FLORENCE State:SC Zip Code: 29501</b>	
<b>Satellite Location: FOOTHILLS BRANCH</b>	<b>Phone:</b>
<b>Address: 205 BUD NALLEY DR</b>	
<b>City: EASLEY State:SC Zip Code: 29642</b>	
<b>Satellite Location: SUMMERVILLE BRANCH</b>	<b>Phone:</b>
<b>Address: 201 W 9TH NORTH ST</b>	
<b>City: SUMMERVILLE State:SC Zip Code: 29483-674</b>	



## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>PRUITTHEALTH HOME HEALTH-COLUMBIA</b> 240 STONERIDGE DR STE 100 COLUMBIA, SC 29210-8013 FACILITY #:803-626-0089 YOUNG STEPHANIE PH#: 803-359-2253 <b>Facility Email:</b> STEYOUNG@PRUITTHEALTH.COM <b>Fac. Cont. Email:</b> 2211@AMEDISYS.COM	HHA-0232 / 01/31/2019 Richland / Corporation 118 YORK ST CHESTER, SC 29706-1484 PRUITTHEALTH HOME HEALTH INC

**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:**

<b>PRUITTHEALTH HOME HEALTH-FLORENCE</b> 609 S COIT ST FLORENCE, SC 29501-5222 FACILITY #:843-665-1759 MOORE SHARON PH#: 843-662-8633 <b>Facility Email:</b> LEGALSERVICES@PRUITTHEALTH.COM <b>Fac. Cont. Email:</b> 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
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**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  
**Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>PRUITTHEALTH HOME HEALTH-LOW COUNTRY</b> 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 FACILITY #:843-872-0946 KINARD ROBIN PH#: 843-322-0280 <b>Facility Email:</b> LEGALSERVICES@PRUITTHEALTH.COM <b>Fac. Cont. Email:</b> RKINARD@PRUITTHEALTH.COM	HHA-0214 / 04/30/2018 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, Barnwell, 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:**

<b>ROLLING GREEN VILLAGE HOME HEALTH AGENCY</b> 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800 BENSON ROBERT J PH#: 864-580-5660 <b>Facility Email:</b> RYANT@ROLLINGGREENVILLAGE.COM <b>Fac. Cont. Email:</b> 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
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**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**

## 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**

1483 TOBIAS GADSON BLVD STE 208  
CHARLESTON, SC 29407-4796 FACILITY #:843-402-7000  
MELLO BONNIE C PH#: 843-402-7000  
Facility Email: BONNIE.MELLO@RSFH.COM  
Fac. Cont. Email: ROPERSAINTFRANCIS.COM

HHA-0062 / 12/31/2018  
Charleston / Non-Profit Corporation  
1483 TOBIAS GADSON BLVD STE 208  
CHARLESTON, SC 29407-4796  
ROPER HOSPITAL INC

**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; TELEMONTORING

**SEA ISLAND HOME HEALTH**

3627 MAYBANK HWY  
JOHNS ISLAND, SC 29455-4836 FACILITY #:843-559-9925  
CLOUSE TAMMY PH#: 843-559-4137  
Facility Email: HFIELDS@SICHCC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0025 / 04/30/2018  
Charleston / Non-Profit Corporation  
PO BOX 689  
JOHNS ISLAND, SC 29455  
SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION

**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

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>SEABROOK WELLNESS AND HOME HEALTH CARE</b> 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747 LEE ROBERT M PH#: 843-842-3747 <b>Facility Email:</b> RLEE@THESEABROOK.COM <b>Fac. Cont. Email:</b> RLEE@THESEABROOK.COM	HHA-0173 / 11/30/2018 Beaufort / Non-Profit Corporation 300 WOODHAVEN DR OFC HILTON HEAD ISLAND, SC 29928-7512 SEABROOK OF HILTON HEAD INC

**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:**

<b>SOUTH CAROLINA HOMECARE</b> 140 STONERIDGE DR STE 620 COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100 CAMERON MADELINE PH#: <b>Facility Email:</b> ANGEL.STANSBURY@LHCGROUP.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0152 / 07/31/2018 Richland / Limited Liability PO BOX 51266 LAFAYETTE, LA 70505-1266 LHCG XLI LLC
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**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**  
**Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>SPARTANBURG MEDICAL CENTER HOME HEALTH</b> 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 FACILITY #:864-560-3900 OSBORNE RN PHYLLIS F PH#: 864-560-3900 <b>Facility Email:</b> POSBORNE@SRHS.COM <b>Fac. Cont. Email:</b> 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**

<b>ST FRANCIS HOSPITAL HOME CARE</b> 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 FACILITY #:864-233-5300 GARDNER WILLIAM J PH#: 864-233-5300 <b>Facility Email:</b> WILLIAM_GARDNER@BSHSI.ORG <b>Fac. Cont. Email:</b> 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
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**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**  
**Other Services:**

## Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>STILL HOPES HOME HEALTH</b> 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 FACILITY #:803-223-6173 ROBERTSON NIKKI W PH#: 803-796-6490 <b>Facility Email:</b> JCISNEROS@STILLHOPES.ORG <b>Fac. Cont. Email:</b> NROBERTSON@STILLHOPES.ORG	HHA-0199 / 12/31/2018 Lexington / Corporation PO BOX 2959 WEST COLUMBIA, SC 29171-2959 SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC

**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:**

<b>TIDEWATER HOME HEALTH PA</b> 2858 SUNSET BLVD WEST COLUMBIA, SC 29169 FACILITY #:803-757-7017 SHUTTLEWORTH ERIKA PH#: 803-757-7017 <b>Facility Email:</b> SGUEST@SHAMD.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	HHA-0241 / 03/31/2018 Lexington / Partnership 215 MEDICAL CIR WEST COLUMBIA, SC 29169-3653 TIDEWATER HOME HEALTH PA
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**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**  
**Other Services:**

## 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  
AIKEN, SC 29801 FACILITY #:803-641-8220  
KEATING RN JULIE PH#: 803-641-8220  
Facility Email: JULIEKEATING@HOMECARETRINITY.COM  
Fac. Cont. Email: JULIE\_KEATING@CHS.NET

HHA-0316 / 11/30/2018  
Aiken / Limited Liability  
690 MEDICAL PARK DR STE 400  
AIKEN, SC 29801-6348  
AUGUSTA HOME CARE SERVICES LLC

**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. Email: 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  
STE A

City: **EDGEFIELD** State: **SC** Zip Code: **29824**Satellite Location: **WAGENER OFFICE**

Phone:

Address: 109 RAILROAD AVE

City: **WAGENER** State: **SC** Zip Code: **29164**

## 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**

923 MIDWAY ST  
BAMBERG, SC 29003-1957 FACILITY #:803-245-5611  
WEATHERFORD JENNIFER PH#: 803-245-5611  
Facility Email: VNABAMBERG@YAHOO.COM  
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0045 / 12/31/2018  
Bamberg / Corporation  
PO BOX 1048  
BAMBERG, SC 29003-1048  
VNA OF GREATER BAMBERG INC

**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**  
Address: **1695 CHESTNUT ST NE**

Phone:

City: **ORANGEBURG** State: **SC** Zip Code: **29116**

**WESLEY COMMONS HOME HEALTH CARE**

1110 MARSHALL RD  
GREENWOOD, SC 29646-4299 FACILITY #:864-227-7209  
DAVIS DORIS E PH#: 864-227-7480  
Facility Email: DDAVIS@WESLEYCOMMONS.ORG  
Fac. Cont. Email: DDAVIS@WESLEYCOMMONS.ORG

HHA-0202 / 02/28/2019  
Greenwood / Non-Profit Corporation  
1110 MARSHALL RD  
GREENWOOD, SC 29646-4299  
WESLEY COMMONS

**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  
Other Services:



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 : 460**