

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: 2County/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:

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 / 01/31/2018
Williamsburg / Limited Liability
127 E MILL ST
KINGSTREE, SC 29556
GEORGETOWN HOSPITAL HOME HEALTH LLC

Total Counties Served: 4County/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:

Home Health Agencies

DHEC Regulation 61-77

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AMEDISYS HOME HEALTH OF BEAUFORT

35 PROFESSIONAL VILLAGE CIR
LADYS ISLAND, SC 29907 FACILITY #:843-379-2320
SNYDER SHAUN PH#:
Facility Email: 2210@AMEDISYS.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0189 / 01/31/2018
Beaufort / Ltd. Liability
2121 BOUNDARY ST STE 200
BEAUFORT, SC 29902-6812
AMEDISYS SC LLC

Total Counties Served: 2County/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:

AMEDISYS HOME HEALTH OF BLUFFTON

59 SHERIDAN PARK CIR STE A
BLUFFTON, SC 29910-6029 FACILITY #:800-697-5235
BARRY HANK PH#: 843-815-8090
Facility Email: 2224@AMEDISYS.COM
Fac. Cont. Email: 2224@AMEDISYS.COM

HHA-0203 / 02/28/2018
Beaufort / Ltd. Liability
59 SHERIDAN PARK CIR STE A
BLUFFTON, SC 29910-6029
AMEDISYS SC LLC

Total Counties Served: 4County/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:

Home Health Agencies

DHEC Regulation 61-77

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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. Email: 2216@AMEDISYS.COM

HHA-0194 / 02/28/2018
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: 2203@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
Location Street
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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
BARBER MELISSA BLANTON PH#:
Facility Email: MELISSA.BARBER@AMEDISYS.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0191 / 01/31/2018
Charleston / Ltd. Liability
1027 PHYSICIANS DR STE 210
CHARLESTON, SC 29414-5352
AMEDISYS SC LLC

Total Counties Served: 5County/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:

Address: 950 HOUSTON NORTHCUTT BLVD
STE 105

City: **MOUNT PLEASANT** State: **SC** Zip Code: **29464-56**Satellite Location: **WALTERBORO OFFICE**

Phone:

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 / 01/31/2018
Laurens / Limited Liability
210 PHYSICIANS PARK DR STE U
CLINTON, SC 29325-7565
AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 10County/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:

Address: 440 ROPER MOUNTAIN RD
STE G-1

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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
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Licensee

AMEDISYS HOME HEALTH OF CONWAY

176 WACCAMAW MEDICAL PARK CT
CONWAY, SC 29526-8965 FACILITY #:866-205-4247
JONES BRITTANY PH#: 843-347-5899
Facility Email: 2222@AMEDISYS.COM
Fac. Cont. Email: 2222@AMEDISYS.COM

HHA-0195 / 03/31/2018
Horry / Limited Liability
176 WACCAMAW MEDICAL PARK CT
CONWAY, SC 29526-8965
AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 3County/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 / 01/31/2018
Georgetown / Limited Liability
2503 HIGHMARKET ST
GEORGETOWN, SC 29440-2900
GEORGETOWN HOSPITAL HOME HEALTH LLC

Total Counties Served: 2County/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

DHEC Regulation 61-77

Name of Facility
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Mailing Address
Licensee

AMEDISYS HOME HEALTH OF LEXINGTON

714 S LAKE DR STE 250
LEXINGTON, SC 29072-3462 FACILITY #:877-284-6630
YOUNG STEPHANIE PH#: 803-359-2253
Facility Email: 2211@AMEDISYS.COM
Fac. Cont. Email: 2211@AMEDISYS.COM

HHA-0190 / 01/31/2018
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: 803-905-5240****Address: 3481 DECLARATION BLVD****City: SUMTER State:SC Zip Code: 29154****Satellite Location: NEWBERRY OFFICE****Phone:****Address: 184 COMMERCE DR****City: NEWBERRY State:SC Zip Code: 29108****Satellite Location: ORANGEBURG OFFICE****Phone:****Address: 1704 VILLAGE PARK DR****City: ORANGEBURG State:SC Zip Code: 29118****AMEDISYS HOME HEALTH OF MYRTLE BEACH**

HHA-0187 / 01/31/2018

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

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:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
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License#/Expiration
County/Ownership Type
Mailing Address
Licensee

ANMED HEALTH HOME HEALTH AGENCY

1926 MCCONNELL SPRINGS RD
ANDERSON, SC 29621-2642 FACILITY #:864-512-6410
GETSINGER CHRISTI A PH#: 864-512-6410
Facility Email: CHRISTI.GETSINGER@ANMEDHEALTH.ORG
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0068 / 02/28/2018
Anderson / Non-Profit Corporation
PO BOX 195
ANDERSON, SC 29622-0195
ANMED HEALTH

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

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: 2County/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:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
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: 1County/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:

BRIGHTSTAR CARE 2012 HWY 160 W STE 4 FORT MILL, SC 29708-8401 FACILITY #:803-578-9900 SAPORITO DAVID PH#: 803-578-9900 Facility Email: DSAPORITO@BRIGHTSTARCARE.COM 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
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Total Counties Served: 2County/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
BRIGHTSTAR CARE OF CHARLESTON 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 FACILITY #:843-300-3008 JAMES KRISTIN H PH#: Facility Email: C.APPLGATE@BRIGHTSTARCARE.COM Fac. Cont. Email: 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: 1County/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

BRIGHTSTAR CARE-BLUFFTON 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FACILITY #:843-837-3773 WHITTELSEY SUSAN PH#: 843-837-3773 Facility Email: SWHITTELSEY@BRIGHTSTARCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0223 / 12/31/2014 (Renewal Pending) Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC
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Total Counties Served: 2County/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

DHEC Regulation 61-77

Name of Facility
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Mailing Address
Licensee

BRIGHTSTAR OF SPARTANBURG

110 W CHURCH ST STE A

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

SANDERS FRANK J PH#: 864-599-0452

Facility Email: FRANK.SANDERS@BRIGHTSTARCARE.COM

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

HHA-0328 / 06/30/2018

Greenville / Limited Liability

SANDERS HEALTHCARE LLC

Total Counties Served: 2County/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

CARING NEIGHBORS HOME HEALTH

102 US HWY 321 BYP N

WINNSBORO, SC 29180-9251 FACILITY #:803-635-4210

SMITH ANGELA PH#: 803-635-4210

Facility Email: KRISTI.GODWIN@FAIRFIELDMEMORIAL.COM

Fac. Cont. Email: ANGELA.SMITH@FAIRFIELDMEMORIAL.COM

HHA-0132 / 06/30/2018

Fairfield / County

PO BOX 620

WINNSBORO, SC 29180-0620

FAIRFIELD MEMORIAL HOSPITAL

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

Home Health Agencies

DHEC Regulation 61-77

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Mailing Address
Licensee

CAROLINAS HOME HEALTH

121 E CEDAR ST
FLORENCE, SC 29506-2576 FACILITY #:843-629-6811
POSTON JOE A PH#: 843-629-6811
Facility Email: JOEPOSTON@HOMECAREFLORENCE.COM
Fac. Cont. Email: 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

Total Counties Served: 4County/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**

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
PO BOX 813
CHERAW, SC 29520-0813
CHESTERFIELD VISITING NURSES SERVICE INC

Total Counties Served: 3County/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**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
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	HHA-0209 / 05/31/2018 Sumter / Non-Profit Corporation 2825 CARTER RD SUMTER, SC 29150-1712 COVENANT PLACE OF SUMTER INC

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**

CYPRESS CLUB HOME HEALTH AGENCY 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
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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**

Home Health Agencies

DHEC Regulation 61-77

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

Other Services:

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 Fac. Cont. Email: No Facility Contact Email on Record	HHA-0330 / 10/31/2018 Beaufort / Limited Liability CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA 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

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
FLORENCE VISITING NURSES SERVICE 1605-C W PALMETTO ST FLORENCE, SC 29501-4198 FACILITY #:843-667-1515 JACKSON-MEEKINS JONATHAN PH#: 843-667-1515 Facility Email: JJOHNSON@AHCE.NET Fac. Cont. Email: JJOHNSON@AHCE.NET	HHA-0064 / 01/31/2018 Florence / Corporation PO BOX 1485 WAYCROSS, GA 31502 FLORENCE VISITING NURSES SERVICE INC

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**

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
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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**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

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 / 12/31/2017
Abbeville / County
104 W PICKENS ST
ABBEVILLE, SC 29620-2427
ABBEVILLE COUNTY MEMORIAL HOSPITAL

Total Counties Served: 3County/Counties Served: **Anderson, Greenville, Newberry****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

HEALTHY @ HOME-YORK

HHA-0327 / 06/30/2018

226 NORTH PARK DR STE 120
ROCK HILL, SC 29730 FACILITY #:803-327-8874
MCCARTER-FROHNA MARIE PH#: 803-327-8874

York / Limited Liability

Facility Email: MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE CAROLINAS MEDICAL CENTER AT HOME LLC
Fac. Cont. Email: MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE

Total Counties Served: 2County/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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HOME CARE OF HOSPICECARE OF THE PIEDMONT 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 FACILITY #:864-227-9393 CORLEY RN NANCY B PH#: 864-227-9393 Facility Email: NCORLEY@HOSPICEPIEDMONT.ORG Fac. Cont. Email: 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

Total Counties Served: 5County/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 CARE OF LANCASTER 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 FACILITY #:803-286-1472 HELMS RAYMOND E PH#: Facility Email: RAYMONDHELMS@HOMECAREOFLANCASTER.COM Fac. Cont. Email: 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
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Total Counties Served: 1County/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 Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

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 / 01/31/2018
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

HOMECARE OF THE REGIONAL MEDICAL CENTER
1895 SAINT MATTHEWS RD
ORANGEBURG, SC 29118-2403 FACILITY #:803-395-2600
BJARNESEN RICHARD PH#: 803-395-2600
Facility Email: DGMICALHANY@REGMED.COM
Fac. Cont. Email: RLBJARNESEN@REGMED.COM

HHA-0122 / 01/31/2018
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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HOMECHOICE PARTNERS 160 CONGRESS BLVD STE D DUNCAN, SC 29334-8890 FACILITY #:888-865-1110 NEAL TONI R PH#: 864-583-8190 Facility Email: TNEAL@BIOSCRIP.COM Fac. Cont. Email: TNEAL@BIOSCRIP.COM	HHA-0211 / 11/30/2018 Spartanburg / Corporation 1600 BROADWAY STE 700 DENVER, CO 80202 HOMECHOICE PARTNERS INC

Total Counties Served: 9County/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**

INTERIM HEALTHCARE 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29406 FACILITY #:843-569-5510 BAKER DAWN MPH#: 843-569-5510 Facility Email: DABAKER@INTERIMHEALTHCARE.COM Fac. Cont. Email: 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: 4County/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 GREENVILLE INC PERSONAL CARE
16 HYLAND RD
GREENVILLE, SC 29615-5756 FACILITY #:864-627-7074
GRAY JACQUELINE PH#: 864-627-1200
Facility Email: SARAH.DEAL@INTERIMCARES.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0057 / 06/30/2018
Greenville / Corporation
PO BOX 12243
GREENVILLE, SC 29612-2243
INTERIM HEALTHCARE OF GREENVILLE INC

Total Counties Served: 6**County/Counties Served: Anderson, Cherokee, Greenville, 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: SKILLED NURSING

Satellite Location: EASLEY OFFICE**Phone: 864-855-4421**

Address: 810 POWDERSVILLE RD
STEB

City: EASLEY**State:SC****Zip Code: 29642****INTERIM HEALTHCARE OF ROCK HILL**

HHA-0169 / 11/30/2018

154 AMENDMENT AVE STE 106
ROCK HILL, SC 29732-3156 FACILITY #:803-324-4166
WEBB MARGARET D PH#: 803-324-4166

York / Corporation
2526 WARD BLVD
WILSON, NC 27893-1600

Facility Email: TPILKINGTON@INTERIMHEALTHCARE.COM

INTERIM HEALTHCARE OF THE TRIAD INC

Fac. Cont. Email: TERRIPILKINGTON@INTERIM-MGI.COM**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:

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

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 / 11/30/2017 (Renewal Pending)
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

KINDRED AT HOME-ANDERSON

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

KINDRED AT HOME-CHARLESTON

4975 LACROSS RD STE 354
CHARLESTON, SC 29406-6525 FACILITY #:843-744-1191
HENNING ALISON PH#: 843-744-1191
Facility Email: JANET.COMBS@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

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: 3County/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 / 01/31/2018
Greenville / Limited Liability
12900 FOSTER ST STE 400
OVERLAND PARK, KS 66213-2696
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 8County/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**

Phone:

Address: **905 E MAIN 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 COMMONS**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

KINDRED AT HOME-LOW COUNTRY

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

KINDRED AT HOME-MIDLANDS

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

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: 4County/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 AGENCY**

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

HHA-0210 / 06/30/2018
Lexington / Non-Profit Corporation
100 JOSEPH WALKER DR
WEST COLUMBIA, SC 29169-6939
FPCRC INC

Total Counties Served: 1County/Counties Served: **Lexington****License Restrictions: RESTRICTED TO RESIDENTS OF LAUREL CREST CAMPUS 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

LIBERTY HOME CARE-BENNETTSVILLE

405 E MAIN ST
BENNETTSVILLE, SC 29512-3111 FACILITY #:843-479-8711
DOOLEY CHERYL J PH#: 843-347-5661
Facility Email: CDOOLEY@LIBERTYHOMECARE.COM
Fac. Cont. Email: TBROOKS@HEALTHKEEPERZ.COM

HHA-0159 / 12/31/2017
Marlboro / Ltd. Liability
405 E MAIN ST
BENNETTSVILLE, SC 29512-3111
LIBERTY HOME CARE LLC

Total Counties Served: 1**County/Counties Served: Marlboro****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 Email: CSCHOONMAKER@LIBERTYHOMECARE.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0163 / 12/31/2017
Horry / Ltd. Liability
1293 PROFESSIONAL DR STE C
MYRTLE BEACH, SC 29577-5754
LIBERTY HOME CARE 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:

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

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:

MEDICAL SERVICES OF AMERICA - COASTAL

4685 HWY 17 BYP S
MYRTLE BEACH, SC 29577-6681 FACILITY #:843-293-4614
LIPPERT ROBERT T PH#: 843-293-4614
Facility Email: LICENSING@MSA-CORP.COM
Fac. Cont. Email: BLIPPERT@MSA-CORP.COM

HHA-0039 / 02/28/2018
Horry / Corporation
4685 HWY 17 BYP S
MYRTLE BEACH, SC 29577-6681
INCARE HOME HEALTH INC

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: 29440-361

Satellite Location: **NORTH MYRTLE BEACH OFFICE**

Phone:

Address: 106 HWY 17 S

SUNDIAL CENTER

City: N MYRTLE 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

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 / 12/31/2017
 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

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-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: 3County/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:

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 Email: 2226@AMEDISYS.COM
Fac. Cont. Email: 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: 4County/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:

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-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: 4County/Counties Served: **Aiken, 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

NHC HOMECARE-BEAUFORT

22 PLANTATION PARK DR STE 105B
BLUFFTON, SC 29910 FACILITY #:843-705-8230
JOHNSON KATHY A PH#: 843-522-0476
Facility Email: NHC@NHCHOMECAREBEAUFORT.COM
Fac. Cont. Email: 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: 4County/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

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-GREENWOOD

315 W ALEXANDER AVE
GREENWOOD, SC 29646-4009 FACILITY #:864-229-9888
HAMMERSMITH MARY PH#: 864-229-9888
Facility Email: NHC@NHCHOMECAREGREENWOOD.COM
Fac. Cont. Email: NHC@NHCHOMECAREGREENWOOD.COM

HHA-0182 / 06/30/2018
Greenwood / Limited Liability Limited Partnership
PO BOX 1708
GREENWOOD, SC 29648-1708
NHC/OP LP

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**

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 / 06/30/2018
Laurens / Limited Liability Limited Partnership
PO BOX 309
LAURENS, SC 29360-0309
NHC/OP LP

Total Counties Served: 5

County/Counties Served: **Anderson, Greenville, Laurens, 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**

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-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: 6County/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**

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
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Total Counties Served: 6County/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**

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-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: 4County/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

NHC HOMECARE-PIEDMONT

1674 CRANIUM DR STE 101
ROCK HILL, SC 29732-3506 FACILITY #:803-325-1455
ANSTEY LENORA PH#: 803-325-1455
Facility Email: NHC@NHCHOMECAREPIEDMONT.COM
Fac. Cont. Email: 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: 4County/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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

OAKS HOME HEALTH

1000 METHODIST OAKS DR
ORANGEBURG, SC 29116 FACILITY #:803-534-1212
TILL ELAINE M PH#: 803-534-1212
Facility Email: ETILL@THEOAKSSC.COM
Fac. Cont. Email: ETILL@THEOAKSSC.COM

HHA-0200 / 01/31/2018
Orangeburg / Non-Profit Corporation
PO BOX 327
ORANGEBURG, SC 29116-0327
METHODIST OAKS INC

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:

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC

945 E MAIN ST STE D
LEXINGTON, SC 29072 FACILITY #:803-750-0022
BURGESS KIM PH#: 866-359-9640
Facility Email: KIM.BURGESS@OPTUM.COM
Fac. Cont. Email: KIM.BURGESS@OPTUM.COM

HHA-0130 / 03/31/2018
Lexington / 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**

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-PIEDMONT 2 INDEPENDENCE POINTE GREENVILLE, SC 29615 FACILITY #:866-359-9640 BURGESS KIM PH#: 866-359-9640 Facility Email: KIM.BURGESS@OPTUM.COM Fac. Cont. Email: 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

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

PALLIATIVE CARE OF THE LOWCOUNTRY 7 PLANTATION PARK DR UNIT 4 STE C2 BLUFFTON, SC 29910 FACILITY #:843-706-4094 BRASINGTON RN JENNY PH#: 843-706-2296 Facility Email: INFO@HOSPICECARELC.ORG Fac. Cont. Email: 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
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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:

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 HOMECARE

1400 PICKENS ST
COLUMBIA, SC 29201-3465 FACILITY #:803-296-3100
HEFLIN FRANK G PH#: 803-296-3100
Facility Email: FRANK.HEFLIN@PALMETTOHEALTH.ORG
Fac. Cont. Email: FRANK.HEFLIN@PALMETTOHEALTH.ORG

HHA-0148 / 02/28/2018
Richland / Non-Profit Corporation
PO BOX 7275
COLUMBIA, SC 29202-7275
PALMETTO HEALTH

Total Counties Served: 2County/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

PALMETTO HEALTH TUOMEY HOME HEALTH

500 PINWOOD RD STE 2
SUMTER, SC 29154-6197 FACILITY #:803-773-4663
PH#:
Facility Email: FRANK.HEFLIN@PALMETTOHEALTH.ORG
Fac. Cont. Email: 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: 3County/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:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PHC HOME HEALTH
408 FOLLY RD
CHARLESTON, SC 29412-2625 FACILITY #:843-762-3601
DURRENCE HUGH D PH#: 843-762-3601
Facility Email: SARAHWILBANKS@PHCHEALTH.COM
Fac. Cont. Email: LORIWOOD@PHCHEALTH.COM

HHA-0084 / 04/30/2018
Charleston / Corporation
1923-D MAYBANK HWY
CHARLESTON, SC 29412-2115
HEDGEMARK BRENTWOOD MEDICAL SERVICES INC

Total Counties Served: 3County/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:

PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY
2817 ASHLAND RD
COLUMBIA, SC 29210-5009 FACILITY #:803-772-5885
STAMPER AMANDA L PH#: 803-772-5885
Facility Email: MANDY.STAMPER@PRESHOMESC.ORG
Fac. Cont. Email: 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: 7County/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:

Satellite Location: **CLINTON BRANCH**
Address: 801 MUSGROVE ST

Phone:

City: **CLINTON** State:SC Zip Code: 29325

Satellite Location: **COLUMBIA BRANCH**
Address: 700 DAVEGA DR

Phone:

City: **LEXINGTON** State:SC Zip Code: 29073-961

Satellite Location: **FLORENCE BRANCH**
Address: 2350 W LUCAS ST

Phone:

City: **FLORENCE** State:SC Zip Code: 29501

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: Foothills Branch
Address: 205 Bud Nalley Dr

Phone:

City: Easley State: SC Zip Code: 29642

Satellite Location: Summerville Branch
Address: 201 W 9th North St

Phone:

City: Summerville State: SC Zip Code: 29483-671

PRUITTHEALTH HOME HEALTH-COLUMBIA
240 Stoneridge Dr Ste 100
Columbia, SC 29210-8013 FACILITY #: 803-385-2002
Young Stephanie PH#: 803-359-2253
Facility Email: 2211@AMEDISYS.COM
Fac. Cont. Email: 2211@AMEDISYS.COM

HHA-0232 / 01/31/2018
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:

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-FLORENCE

609 S COIT ST
FLORENCE, SC 29501-5222 FACILITY #:843-662-8633
MOORE SHARON PH#: 843-662-8633
Facility Email: CDEFEE@PRUITTHEALTH.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0233 / 02/28/2018
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
Other Services:

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 / 04/30/2018
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:

Home Health Agencies

DHEC Regulation 61-77

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

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
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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: REGISTERED DIETITIAN/CDE; CERTIFIED WOUND AND OSTOMY NURSES; TELEMONTORING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

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: 2County/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

SEABROOK WELLNESS AND HOME HEALTH CARE

300 WOODHAVEN DR
HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747
LEE ROBERT M PH#: 843-842-3747
Facility Email: RLEE@THESEABROOK.COM
Fac. Cont. Email: 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: 1County/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:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SOUTH CAROLINA HOMECARE

140 STONERIDGE DR STE 620
COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100
BAGGETT CAROLE D PH#: 803-343-5100
Facility Email: LRA@LHCGROUP.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0152 / 07/31/2018
Richland / Limited Liability
PO BOX 51266
LAFAYETTE, LA 70505-1266
LHCG XLI LLC

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:

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**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
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 Email: 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****Other Services:**

STILL HOPES HOME HEALTH 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 FACILITY #:803-223-6173 ROBERTSON NIKKI W PH#: 803-796-6490 Facility Email: JCISNEROS@STILLHOPES.ORG Fac. Cont. Email: NROBERTSON@STILLHOPES.ORG	HHA-0199 / 12/31/2017 Lexington / Corporation PO BOX 2959 WEST COLUMBIA, SC 29171-2959 SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC
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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:**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

TIDEWATER HOME HEALTH PA

2858 SUNSET BLVD
WEST COLUMBIA, SC 29169 FACILITY #:803-757-7017
SHUTTLEWORTH ERIKA PH#: 803-757-7017
Facility Email: SGUEST@SHAMD.COM
Fac. Cont. Email: 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

Total Counties Served: 2County/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:

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: 3County/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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

UNIVERSITY HOME HEALTH NORTH AUGUSTA	HHA-0137 / 10/31/2018
106 E MARTINTOWN RD UNIT B	Aiken / Corporation
NORTH AUGUSTA, SC 29841-3425 FACILITY #:803-278-0770	106 E MARTINTOWN RD UNIT B
HARDEN RN MARY J PH#: 803-278-0770	NORTH AUGUSTA, SC 29841-3425
Facility Email: MHARDEN@UH.ORG	UNIVERSITY HEALTH SERVICES INC
Fac. Cont. Email: MHARDEN@UH.ORG	

Total Counties Served: 2County/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	

VNA OF GREATER BAMBERG	HHA-0045 / 12/31/2018
923 MIDWAY ST	Bamberg / Corporation
BAMBERG, SC 29003-1957 FACILITY #:803-245-5611	PO BOX 1048
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: 7County/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	

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

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 / 02/28/2018
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:

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: JLEE@WESTMINSTERTOWERS.ORG
Fac. Cont. Email: MCOOKHORNE@WESTMINSTERTOWERS.ORG

HHA-0201 / 01/31/2018
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: 92

Total Counties Served : 455