

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 STE 130 ROCK HILL, SC 29732-1278 FACILITY #:803-285-2026 KALBAUGH MIKE PH#: Facility Email: CREDENTIALING@ADVHOMECARE.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0326 / 06/30/2019 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:**

AMEDISYS HOME HEALTH CARE 127 E MILL ST KINGSTREE, SC 29556 FACILITY #:843-355-5103 LANGSTON JENNIFER PH#: Facility Email: 2241@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0188 / 01/31/2019 Williamsburg / Limited Liability 127 E MILL ST KINGSTREE, SC 29556 GEORGETOWN HOSPITAL HOME HEALTH LLC
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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
AMEDISYS HOME HEALTH OF BEAUFORT 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 FACILITY #:843-379-2320 CRAVEN KAREN L PH#: Facility Email: SHAUN.SNYDER@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0189 / 01/31/2019 Beaufort / Ltd. Liability 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 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:

AMEDISYS HOME HEALTH OF BLUFFTON 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 FACILITY #:843-815-3090 BARRY HANK PH#: 843-815-8090 Facility Email: 2224@AMEDISYS.COM Fac. Cont. Email: 2224@AMEDISYS.COM	HHA-0203 / 02/28/2019 Beaufort / Ltd. Liability 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 AMEDISYS SC LLC
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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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Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

AMEDISYS HOME HEALTH OF CAMDEN

1110 BROAD ST STE B
CAMDEN, SC 29020-3624 FACILITY #:803-713-9264
RAPP SUZANNE PH#: 803-713-9264
Facility Email: 2216@AMEDISYS.COM
Fac. Cont. 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

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF CHARLESTON EAST 1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 FACILITY #:843-556-0200 RITTER-PEACOCK KRISTI PH#: Facility Email: 2207@AMEDISYS.COM 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: 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 Address: 950 HOUSTON NORTHCUTT BLVD STE 105 City: MOUNT PLEASANT State:SC Zip Code: 29464-56	Phone: 843-972-0416
Satellite Location: WALTERBORO OFFICE Address: 305 ROBERTSON BLVD City: WALTERBORO State:SC Zip Code: 29488	Phone: 843-542-9020

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
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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 Address: 440 ROPER MOUNTAIN RD STE G-1 City: GREENVILLE State:SC Zip Code: 29615-42	Phone: 864-288-9441
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Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF CONWAY 176 WACCAMAW MEDICAL PARK CT CONWAY, SC 29526-8965 FACILITY #:843-347-5899 JONES BRITTANY PH#: 843-347-5899 Facility Email: 2222@AMEDISYS.COM Fac. Cont. 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
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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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Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
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

HHA-0187 / 01/31/2019

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: 1County/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
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: HCCREDENTIALING@ANMEDHEALTH.ORG Fac. Cont. Email: 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:

BAYADA HOME HEALTH CARE-ROCK HILL 454 S ANDERSON RD STE 320 ROCK HILL, SC 29730 FACILITY #:803-281-4550 NOEL DAN PH#: Facility Email: DNOEL@BAYADA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0331 / 01/31/2019 York / Corporation BAYADA HOME HEALTH CARE INC
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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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Name of Facility
Location Street
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License#/Expiration
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: 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:

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:

Home Health Agencies

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

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

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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 (Renewal Pending) 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

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 / 12/31/2018 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

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BRIGHTSTAR OF SPARTANBURG 110 W CHURCH ST STE A 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 / 06/30/2019 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**

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
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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**

Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CHESTERFIELD VISITING NURSES SERVICE 918 CHESTERFIELD HWY CHERAW, SC 29520-7008 FACILITY #:843-537-3020 RAYFIELD TABITHA PH#: 843-537-3020 Facility Email: TRAYFIELD@AHCE.NET Fac. Cont. Email: TRAYFIELD@AHCE.NET	HHA-0065 / 08/31/2018 Chesterfield / Corporation PO BOX 813 CHERAW, SC 29520-0813 CHESTERFIELD VISITING NURSES SERVICE INC

Total Counties Served: 3**County/Counties Served: Darlington, Marlboro, Chesterfield****License Restrictions:**

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services: SKILLED NURSING

COVENANT PLACE CCRC HOME HEALTH SERVICES 2825 CARTER RD SUMTER, SC 29150-1712 FACILITY #:803-469-7007 WILSEY JENNIFER PH#: 803-469-7007 Facility Email: JWILSEY@COVENANTPLACE.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0209 / 05/31/2019 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
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

Total Counties Served: 1

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

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services: NURSING

ENCOMPASS HOME HEALTH OF SOUTH CAROLINA 37 VARDEN DR STE A AIKEN, SC 29803 FACILITY #:803-335-0977 JONES SYLVIA PH#: 803-335-0977 Facility Email: LICENSING@EHHI.COM Fac. Cont. Email: LICENSING@EHHI.COM	HHA-0218 / 10/31/2018 Aiken / Limited Liability 6688 N CENTRAL EXPRESSWAY STE 1300 DALLAS, TX 75206 CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC
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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
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

Total Counties Served: 2**County/Counties Served: Beaufort, Jasper****License Restrictions:**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

FLORENCE VISITING NURSES 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 / 01/31/2019 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

DHEC Regulation 61-77

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: 4County/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: 9County/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

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HEALTHY @ HOME-YORK 226 NORTHPARK DR STE 120 ROCK HILL, SC 29730 FACILITY #:803-327-8874 MCCARTER-FROHNA MARIE PH#: 803-327-8874 Facility Email: GLENDABLACKBURN@ATRIUMHEALTH.ORG Fac. Cont. Email: MARIE.MCCARTERFROHNA@CAROLINASHEALTHCARE	HHA-0327 / 06/30/2019 York / Limited Liability CAROLINAS MEDICAL CENTER AT HOME LLC

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 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
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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 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 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

Total Counties Served: 1**County/Counties Served: Lancaster****License Restrictions:****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: REGISTERED DIETITION**

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE 105 VINECREST CT STE 400 GREENWOOD, SC 29646-8031 FACILITY #:864-725-7600 WRIGHT JEFFERY PH#: 864-725-7600 Facility Email: JEFFERY.WRIGHT@SELFREGIONAL.ORG Fac. Cont. Email: JEFFERY.WRIGHT@SELFREGIONAL.ORG	HHA-0049 / 01/31/2019 Greenwood / Non-Profit Corporation 105 VINCREST CT STE 400 GREENWOOD, SC 29646 GREENWOOD COUNTY HOSPITAL BOARD DBA SELF REGIONAL HEALTHCARE
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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
HOMECARE OF THE REGIONAL MEDICAL CENTER 1895 SAINT MATTHEWS RD ORANGEBURG, SC 29118-2403 FACILITY #:803-395-2600 MOREHOUSE MELODY PH#: Facility Email: RLBJARNESEN@REGMED.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0122 / 01/31/2019 Orangeburg / County PO BOX 2352 ORANGEBURG, SC 29116-2352 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD)

Total Counties Served: 3**County/Counties Served: Calhoun, Orangeburg, Bamberg****License Restrictions:**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services: SKILLED NURSING

INTERIM HEALTHCARE 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29406 FACILITY #:843-518-5437 BAKER DAWN MPH#: 843-569-5510 Facility Email: DABAKER@INTERIMHEALTHCARE.COM Fac. Cont. Email: CYONCE@INTERIMHEALTHCARE.COM	HHA-0208 / 03/31/2019 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: 1County/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: 0County/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: KYLE.CHANDLER@INTREPIDUSA.COM

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

HHA-0180 / 06/30/2019

Charleston / Corporation

4055 VALLEY VIEW LN STE 500

DALLAS, TX 75244-5048

FC OF SOUTH CAROLINA INC

Total Counties Served: 6County/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: EBOLCH@THAGROUP.ORG

Fac. Cont. Email: EBOLCH@THAGROUP.ORG

HHA-0111 / 02/28/2019

Jasper / Corporation

PO BOX 8011

SAVANNAH, GA 31412-8011

ISLAND HEALTH CARE INC

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:

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: 1County/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: 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:

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: 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: 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 / 01/31/2019
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
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
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
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Total Counties Served: 11

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

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
 Medical Supplies/Appliances/Durable Medical Equipment: N
 Other Services: REGISTERED NURSE

Satellite Location: **BARNWELL OFFICE**
 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: 13

County/Counties Served: **Darlington, Dillon, Horry, Lee, Williamsburg, Marion, Marlboro, Kershaw, 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**

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: 0County/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 / 12/31/2018 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:

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 / 12/31/2018 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

MCLEOD HOME HEALTH

300 S DARGAN ST
FLORENCE, SC 29506-2537 FACILITY #:843-777-3050
MELTON DENISE J PH#: 803-435-4494
Facility Email: TTHIGPEN@MCLEODHEALTH.ORG
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0085 / 05/31/2019
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
MOORE TONYA PH#: 803-435-4494
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

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 / 12/31/2018

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 / 02/28/2019

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
BLASZCZYK BRYAN PH#: 843-492-6602
Facility Email: BBLASZCZYK@BAYADA.COM
Fac. Cont. Email: No Facility Contact Email on Record

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

SCHHA LLC

Total Counties Served: 2County/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: 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:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY 1645 J A COCHRAN BYP STE I CHESTER, SC 29706-3101 FACILITY #:866-327-3205 GATLIFF LISA PH#: 803-581-6775 Facility 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: 4**County/Counties Served: Cherokee, York, Lancaster, Chester****License Restrictions:**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

NHC HOMECARE-AIKEN 690 MEDICAL PARK DR STE 200 AIKEN, SC 29801-6348 FACILITY #:803-643-1701 GRIFFIS SARAH PH#: 803-643-1701 Facility Email: NHC@NHCHOMECAREAIKEN.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0181 / 06/30/2019 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
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: 4**County/Counties Served: Colleton, Hampton, Beaufort, Jasper****License Restrictions:****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: DIETARY CONSULTATION**

NHC HOMECARE-GREENWOOD 315 W ALEXANDER AVE GREENWOOD, SC 29646-4009 FACILITY #:864-229-9888 JOHNSON MATTHEW PH#: Facility Email: NHC@NHCHOMECAREGREENWOOD.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0182 / 06/30/2019 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
HOPKINS GREG PH#: 803-481-3131
Facility Email: NHC@NHCHOMECARELAURENS.COM
Fac. Cont. Email: NHC@NHCHOMECARELAURENS.COM

HHA-0183 / 06/30/2019
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
FRY CYNTHIA PH#:
Facility Email: NHC@NHCHOMECARELOWCOUNTRY.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0138 / 04/30/2019
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 / 04/30/2019 Lexington / Limited Liability PO BOX 3876 WEST COLUMBIA, SC 29171-3876 NHC HOMECARE-SOUTH CAROLINA LLC

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

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
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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

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-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 / 04/30/2019 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

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 / 01/31/2019 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

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC
107 WESTPARK BLVD STE 110
COLUMBIA, SC 29210 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 / 03/31/2019
Richland / Limited Liability

MY WELLNESS SOLUTIONS LLC

Total Counties Served: 13

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

License Restrictions: **OBSTETRIC PATIENTS 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: **IV THERAPY & SERVICE TO OBSTETRICAL PATIENTS**

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

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

MY WELLNESS SOLUTIONS 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: **OBSTETRIC PATIENTS 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: **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

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

Total Counties Served: 2

County/Counties Served: **Beaufort, Jasper, Special Note - RESTRICTED TO RESIDENTS WHO ARE TRERMINALLY ILL AS DEFINED IN REGULATION 61-78**

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

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

PALMETTO HEALTH HOMECARE

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 / 02/28/2019
Richland / Non-Profit Corporation
PO BOX 7275
COLUMBIA, SC 29202-7275
PALMETTO HEALTH

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
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: 3**County/Counties Served: Lee, Sumter, Clarendon****License Restrictions:**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

PHC HOME HEALTH 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 / 04/30/2019 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
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: 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:

Satellite Location: CLINTON BRANCH	Phone:
Address: 801 MUSGROVE ST	
City: CLINTON State:SC Zip Code: 29325	
Satellite Location: COLUMBIA BRANCH	Phone:
Address: 700 DAVEGA DR	
City: LEXINGTON State:SC Zip Code: 29073-961	
Satellite Location: FLORENCE BRANCH	Phone:
Address: 2350 W LUCAS ST	
City: FLORENCE State:SC Zip Code: 29501	
Satellite Location: Foothills Branch	Phone:
Address: 205 BUD NALLEY DR	
City: EASLEY State:SC Zip Code: 29642	
Satellite Location: SUMMERVILLE BRANCH	Phone:
Address: 201 W 9TH NORTH ST	
City: SUMMERVILLE State:SC Zip Code: 29483-671	

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRUITTHEALTH HOME HEALTH-COLUMBIA 240 STONERIDGE DR STE 100 COLUMBIA, SC 29210-8013 FACILITY #:803-626-0089 YOUNG STEPHANIE PH#: 803-359-2253 Facility Email: STEYOUNG@PRUITTHEALTH.COM Fac. Cont. Email: 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:

PRUITTHEALTH HOME HEALTH-FLORENCE 2051 ELIJAH LUDD RD STE 1 FLORENCE, SC 29501-5222 FACILITY #:843-665-1759 MOORE SHARON PH#: 843-662-8633 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0233 / 02/28/2019 Florence / Corporation 609 S COIT ST FLORENCE, SC 29501-5222 PRUITTHEALTH HOME HEALTH INC
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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
PRUITTHEALTH HOME HEALTH-LOW COUNTRY 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 FACILITY #:843-872-0946 KINARD ROBIN PH#: 843-322-0280 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Cont. Email: RKINARD@PRUITTHEALTH.COM	HHA-0214 / 04/30/2019 Beaufort / Corporation 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 PRUITTHEALTH HOME HEALTH INC

Total Counties Served: 12

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

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
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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 #:843-559-4137 RUCKER TUMIKO PH#: 843-559-4137 Facility Email: TRR@SICHCC.ORG Fac. Cont. Email: TRR@SICHCC.ORG	HHA-0025 / 04/30/2019 Charleston / Non-Profit Corporation PO BOX 689 JOHNS ISLAND, SC 29455 SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION
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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
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:

SOUTH CAROLINA HOMECARE 140 STONERIDGE DR STE 620 COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100 CAMERON MADELINE PH#: Facility Email: ANGEL.STANSBURY@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
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Total Counties Served: 2County/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
SPARTANBURG MEDICAL CENTER HOME HEALTH 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 FACILITY #:864-560-3900 OSBORNE RN PHYLLIS F PH#: 864-560-3900 Facility Email: POSBORNE@SRHS.COM Fac. Cont. Email: POSBORNE@SRHS.COM	HHA-0038 / 09/30/2018 Spartanburg / District 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC

Total Counties Served: 4**County/Counties Served: Cherokee, Greenville, Union, Spartanburg****License Restrictions:**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services: SKILLED NURSING

ST FRANCIS HOSPITAL HOME CARE 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 FACILITY #:864-233-5300 GARDNER WILLIAM J PH#: 864-233-5300 Facility 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
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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
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 / 12/31/2018 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:**

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 / 03/31/2019 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: No Facility Contact Email on Record

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

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: 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**

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**

WELL CARE HOME HEALTH OF THE LOWCOUNTRY

2411 N OAK ST STE 403-K
MYRTLE BEACH, SC 29577 FACILITY #:843-712-7095
COLEY WANDA PH#:
Facility Email: WCOLEY@WELLCAREHEALTH.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0339 / 05/31/2019
Horry / Corporation

WELL CARE HOME HEALTH OF THE LOWCOUNTRY INC

Total Counties Served: 4

County/Counties Served: **Georgetown, Williamsburg, 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: Y
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
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:

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
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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: 94

Total Counties Served : 464