

County: Greenville

Facility Type: Abortion Clinic

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREENVILLE WOMEN'S CLINIC 1142 GROVE RD GREENVILLE, SC 29605-4692 FAC.#:864-232-1584 CAMPBELL JR THOMAS W PH#: 864-232-1584 Facility Email: KATHY.ADAMS99@YAHOO.COM	Greenville / Corporation 1142 GROVE RD GREENVILLE, SC 29605-4692 GREENVILLE WOMEN'S CLINIC PA AB-0001 / 07/31/2018	1

Totals For Facility/License Type: Abortion Clinic

Number of Activities/Facilities licensed: 1      Number Licensed Units: 1

County: Greenville

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ALL ABOUT OUR SENIORS ADULT DAY CARE</b> 1306 W POINSETT ST GREER, SC 29651 FAC.#:864-325-4126 PH#: Facility Email: ALLABOUTOURSENIORSLLC@GMAIL.COM	Greenville / Limited Liability  ALL ABOUT OUR SENIORS ADULT DAY CARE LLC <b>ADC-0432 / 03/31/2019</b>	50
<b>Number of Participants: 50</b>		
<b>CAPITAL HEALTH SERVICE ADULT DAYCARE</b> 526 S MAIN ST SIMPSONVILLE, SC 29681-3220 FAC.#:864-228-3604 HEWINS MONICA PH#: 864-228-3604 Facility Email: CAPITALHS@YMAIL.COM	Greenville / Limited Liability 526 S MAIN ST SIMPSONVILLE, SC 29681-3220 CAPITAL HEALTH SERVICE LLC <b>ADC-0400 / 11/30/2018</b>	40
<b>Number of Participants: 40</b>		
<b>GHS SENIOR CARE</b> 32 CENTENNIAL WAY GREENVILLE, SC 29605-4628 FAC.#:864-522-1950 ORSKY ANGELA PH#: 704-473-3082 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION <b>ADC-0431 / 08/31/2018</b>	140
<b>Number of Participants: 140</b>		
<b>GREER ACTIVE DAY CENTER</b> 736 S LINE ST EXT GREER, SC 29651-4027 FAC.#:864-848-3003 MOORE WENDY PH#: 864-848-3003 Facility Email: WMOORE@ACTIVEDAY.COM	Greenville / Corporation 6 NESHAMINY INTERPLEX STE 401 FEASTERVILLE TREVOSE, PA 19053-6964 ACTIVE SC TWO INC <b>ADC-0125 / 10/31/2018</b>	40
<b>Number of Participants: 40</b>		
<b>WEST GREENVILLE ACTIVE DAY CENTER</b> 21 MCBETH ST GREENVILLE, SC 29611-3548 FAC.#:864-271-4211 WILES TRACY PH#: 864-271-4211 Facility Email: TWILES@ACTIVEDAY.COM	Greenville / Corporation 6 NESHAMINY INTERPLEX STE 401 FEASTERVILLE TREVOSE, PA 19053 ACSR INC <b>ADC-0236 / 03/31/2019</b>	75
<b>Number of Participants: 75</b>		

<b>Totals For Facility/License Type: <u>Adult Day Care</u></b>	
<b>Number of Activities/Facilities licensed: _____ 5</b>	<b>Number Licensed Units: _____ 345</b>

County: Greenville

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ENDOSCOPY CENTER OF THE UPSTATE</b> 14 HAWTHORNE PARK CT GREENVILLE, SC 29615-3194 FAC.#:864-331-0364 ANDREWS STEPHANIE PH#: Facility Email: Not on File	Greenville / Ltd. Liability 1A BURTON HILLS BLVD NASHVILLE, TN 37215-6187 GREENVILLE ASC LLC ASF-0086 / 07/31/2018	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
<b>GHS CROSS CREEK SURGERY CENTER</b> 9 DOCTORS DR, CROSS CREEK MEDICAL PLAZA GREENVILLE, SC 29605-4266 FAC.#:864-455-8400 JOHNSON PAUL PH#: 864-455-8400 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION ASF-0132 / 10/31/2018	4
Operating Rooms: 4 Procedure Rooms: 0 Endoscopy Rooms: 0		
<b>GHS PATEWOOD OUTPATIENT SURGERY CENTER</b> 200 PATEWOOD DR GREENVILLE, SC 29615-3593 FAC.#:864-797-1089 BROOKSHIRE TIM PH#: 864-454-2400 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 200 PATEWOOD DR GREENVILLE, SC 29615-3593 UPSTATE AFFILIATE ORGANIZATION ASF-0133 / 10/31/2018	8
Operating Rooms: 6 Procedure Rooms: 0 Endoscopy Rooms: 2		
<b>GREENVILLE ENDOSCOPY CENTER</b> 317 SAINT FRANCIS DR STE 150 GREENVILLE, SC 29601-3914 FAC.#:864-239-6636 SWOYER REBECCA K PH#: 864-232-7338 Facility Email: PAULINE@GASTROASSOCIATES.COM	Greenville / Corporation PO BOX 8555 GREENVILLE, SC 29604-8555 GREENVILLE ENDOSCOPY CENTER INC ASF-0027 / 02/28/2019	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
<b>GREENVILLE ENDOSCOPY CENTER AT PATEWOOD</b> 200 PATEWOOD DR STE B 100 GREENVILLE, SC 29615 FAC.#:864-232-7338 SWOYER REBECCA K PH#: 864-232-7338 Facility Email: RSWOYER@GASTROASSOCIATES.COM	Greenville / Corporation PO BOX 8555 GREENVILLE, SC 29604-8555 GREENVILLE ENDOSCOPY CENTER INC ASF-0108 / 08/31/2018	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
<b>JERVEY EYE CENTER</b> 1 DOCTORS DR GREENVILLE, SC 29605-4266 FAC.#:864-271-3354 FARMER LISA L PH#: 864-250-6487 Facility Email: LFARMER@JERVEY.COM	Greenville / Limited Liability 1 DOCTORS DR GREENVILLE, SC 29605-4266 JERVEY EYE CENTER LLC ASF-0038 / 02/28/2019	6
Operating Rooms: 3 Procedure Rooms: 3 Endoscopy Rooms: 0		

County: Greenville

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>PIEDMONT SURGERY CENTER</b> 5 MEMORIAL MEDICAL CT GREENVILLE, SC 29605-4449 FAC.#:864-272-3409 STILLS DENISE PH#: 864-272-3409 Facility Email: DSTILLS@ASCOA.COM	Greenville / Limited Liability Limited Partnership 5 MEMORIAL MEDICAL CT GREENVILLE, SC 29605-4449 GREENVILLE SURGERY CENTER LP DBA PIEDMONT SURGERY CENTER ASF-0017 / 06/30/2018	4
<b>Operating Rooms: 4 Procedure Rooms: 0 Endoscopy Rooms: 0</b>		
<b>UPSTATE SURGERY CENTER</b> 10 ENTERPRISE BLVD STE 109 GREENVILLE, SC 29615-3534 FAC.#:864-458-7141 SOSNOWSKI VALERIE PH#: 864-458-7141 Facility Email: GEOFFREY_HIBBERT@BSHSI.ORG	Greenville / Ltd. Liability 10 ENTERPRISE BLVD STE 109 GREENVILLE, SC 29615-3534 UPSTATE SURGERY CENTER LLC ASF-0050 / 09/30/2018	2
<b>Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0</b>		

<b>Totals For Facility/License Type: <u>Ambulatory Surgery</u></b>	
<b>Number of Activities/Facilities licensed: <u>8</u></b>	<b>Number Licensed Units: <u>33</u></b>

County: Greenville

Facility Type: Birth Center

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BLESSED BIRTHS FAMILY WELLNESS AND BIRTH CENTER</b> 23 MILLS AVE GREENVILLE, SC 29605-4015 FAC.#:864-233-5513 PH#: <b>Facility Email:</b> BABYCATCHER@BLESSEDBIRTHS.COM	Greenville / Corporation 23 MILLS AVE GREENVILLE, SC 29605-4015 BLESSED BIRTHS INC <b>BC-0003 / 08/31/2018</b>	2
<b>CAROLINA WATERBIRTH</b> 915 SOUTH ST STE J SIMPSONVILLE, SC 29681-3210 FAC.#:864-329-0010 GLENN SANDY PH#: 864-329-0010 <b>Facility Email:</b> SANDY@CAROLINAWATERBIRTH.COM	Greenville / Limited Liability Company (single member) 915 SOUTH ST STE J SIMPSONVILLE, SC 29681-3210 CAROLINA BIRTH CENTER LLC <b>BC-0005 / 10/31/2018</b>	3
<b>GHS GREENVILLE BIRTH CENTER</b> 31 MEDICAL RIDGE DR GREENVILLE, SC 29605-4268 FAC.#:864-797-7350 PH#: <b>Facility Email:</b> NSALLY@GHS.ORG	Greenville /  UPSTATE AFFILIATE SYSTEM <b>BC-0012 / 09/30/2018</b>	3

<b>Totals For Facility/License Type: <u>Birth Center</u></b>	
<b>Number of Activities/Facilities licensed:</b> _____ <b>3</b>	<b>Number Licensed Units:</b> _____ <b>8</b>

County: Greenville

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>INKWORKS PIERCING</b> 2283 S MAIN ST FOUNTAIN INN, SC 29644 FAC.#:864-862-5552 PH#: Facility Email: INKWORKSTATTOO@BELLSOUTH.NET	Greenville / Sole Proprietorship 2283 S MAIN ST FOUNTAIN INN, SC 29644 SIERPUTOWSKI PHILLIP J <b>BP-0281 / 08/31/2018</b>	1
<b>PURPLE HAZE</b> 493 S PLEASANTBURG DR GREENVILLE, SC 29607-2525 FAC.#:864-232-5569 PILGRIM WENDY L PH#: 864-232-5569 Facility Email: PURPLEHAZEGREENVILLE@OUTLOOK.COM	Greenville / Limited Liability Company (multiple member)  PURPLE HAZE LLC <b>BP-0197 / 10/31/2018</b>	1
<b>SOME PRIX PIERCING</b> 300 RANDALL ST STE C GREER, SC 29051 FAC.#:864-350-9057 PH#: Facility Email: BIGGREDD0802@YAHOO.COM	Greenville / Sole Proprietorship 9 PREAKNESS CT GREER, SC 29651 WRIGHT JACOB <b>BP-0279 / 02/28/2019</b>	1
<b>TODD'S MODS</b> 1005 N PLEASANTBURG DR GREENVILLE, SC 29607-1628 FAC.#:864-233-1568 HORTON TODD PH#: 864-233-1568 Facility Email: PIERCER232@GMAIL.COM	Greenville / Sole Proprietorship 1005 N PLEASANTBURG DR GREENVILLE, SC 29607-1628 HORTON TODD <b>BP-0176 / 01/31/2019</b>	1
<b>WHATEVER III</b> 1178 WOODRUFF RD STE 10 GREENVILLE, SC 29607-4126 FAC.#:864-329-1008 GILLIAM KENNETH Y PH#: 864-329-1008 Facility Email: KENNYGILLIAM@GMAIL.COM	Greenville / Sole Proprietorship 1178 WOODRUFF RD STE 10 GREENVILLE, SC 29607-4126 GILLIAM SON C <b>BP-0161 / 01/30/2019</b>	1

<b>Totals For Facility/License Type: <u>Body Piercing</u></b>	
<b>Number of Activities/Facilities licensed: _____ 5</b>	<b>Number Licensed Units: _____ 5</b>

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ARBORETUM AT THE WOODLANDS AT FURMAN</b> 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FAC.#:864-371-3100 BABBITT CAROL S PH#: 864-371-3100 Facility Email: CBABBITT@TWAFFSC.ORG	Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC CRC-1492 / 05/31/2019	64
Alzheimer Care:Yes      Max # Resident:16	Alzheimer Unit: Yes      Max # Beds: 16	
Certifications:None		
<b>AUTUMN LEAVES OF GREENVILLE</b> 352 PELHAM RD GREENVILLE, SC 29615-3110 FAC.#:864-558-0383 HESS HEATHER PH#: 864-558-0383 Facility Email: HHES@AUTUMNLEAVES.COM	Greenville / Limited Liability 352 PELHAM RD GREENVILLE, SC 29615 GREENVILLE MEMORY CARE LLC CRC-1947 / 04/30/2019	54
Alzheimer Care:Yes      Max # Resident:35	Alzheimer Unit: Yes      Max # Beds: 54	
Certifications:None		
<b>BAYBERRY OF GREER</b> 309 NORTHVIEW DR GREER, SC 29651-1340 FAC.#:864-848-1935 PRITCHETT NATASHA J PH#: 864-848-1935 Facility Email: GREER@THEBAYBERRYINN.COM	Greenville / Limited Liability <del>Limited Partnership</del> 309 NORTHVIEW DR GREER, SC 29651-1340 EVERGREEN VILLAGES LIMITED PARTNERSHIP CRC-0595 / 07/31/2018	23
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BROOKDALE BRUSHY CREEK</b> 2010 BRUSHY CREEK RD GREER, SC 29650-2614 FAC.#:864-244-9994 GROTE EMILY K PH#: 864-244-9994 Facility Email: EGROTE@BROOKDALE.COM	Greenville / Corporation 2010 BRUSHY CREEK RD GREER, SC 29650-2614 BROOKDALE SENIOR LIVING COMMUNITIES INC CRC-1306 / 12/31/2018	52
Alzheimer Care:Yes      Max # Resident:52	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BROOKDALE CLEVELAND PARK</b> 12 BOYCE AVE GREENVILLE, SC 29601-3110 FAC.#:864-250-1188 KRUGER JESSICA L PH#: 864-223-2281 Facility Email: JCHILDERS@BROOKDALE.COM	Greenville / Ltd. Liability 12 BOYCE AVE GREENVILLE, SC 29601-3110 ARC CLEVELAND PARK LLC CRC-1398 / 07/31/2018	115
Alzheimer Care:Yes      Max # Resident:17	Alzheimer Unit: Yes      Max # Beds: 17	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BROOKDALE GREENVILLE</b> 1306 PELHAM RD OFC GREENVILLE, SC 29615-3661 FAC.#:864-286-6600 HUNTER ANDREA M PH#: 864-286-6600 Facility Email: ANDREA.HUNTER@BROOKDALE.COM	Greenville / Corporation 6737 W WASHINGTON ST STE 2300 MILWAUKEE, WI 53214-5650 EMERITUS CORPORATION CRC-1140 / 10/31/2018	119
Alzheimer Care:Yes Max # Resident:27	Alzheimer Unit: Yes Max # Beds: 26	
Certifications:None		
<b>BROOKDALE HAWTHORNE PARK</b> 20 HAWTHORNE PARK CT GREENVILLE, SC 29615-3194 FAC.#:864-288-6775 THOMAS AMY S PH#: 864-591-1116 Facility Email: SARAH.SILER@BROOKDALE.COM	Greenville / Corporation 20 HAWTHORNE PARK CT GREENVILLE, SC 29615-3194 EMERITUS CORPORATION CRC-1396 / 08/31/2018	68
Alzheimer Care:Yes Max # Resident:0	Alzheimer Unit: Yes Max # Beds: 17	
Certifications:None		
<b>BROOKDALE SOUTHPOINTE DRIVE</b> 23 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FAC.#:864-675-0220 RAST LARRY PH#: 864-675-0220 Facility Email: LARRY.RAST@BROOKDALE.COM	Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERITUS CORPORATION CRC-1335 / 09/30/2018	162
Alzheimer Care:Yes Max # Resident:11	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>CARRIAGE HOUSE SENIOR LIVING OF TAYLORS</b> 402 W MAIN ST TAYLORS, SC 29687-2951 FAC.#:864-292-2416 ADEIMY STEPHEN PH#: 864-292-2416 Facility Email: CHOT.STEPHENADEIMY@GMAIL.COM	Greenville / Corporation 402 W MAIN ST TAYLORS, SC 29687-2951 CARRIAGE HOUSE SENIOR LIVING OF TAYLORS INC CRC-0978 / 01/31/2019	44
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>CASCADES VERDAE ASSISTED LIVING</b> 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FAC.#:864-528-5501 CLEMENTS JAMES A PH#: 864-528-5501 Facility Email: ACLEMENTS@CASCADES-VERDAE.COM	Greenville / Limited Liability 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 CASCADES NURSING LLC CRC-1490 / 04/30/2019	92
Alzheimer Care:Yes Max # Resident:19	Alzheimer Unit: Yes Max # Beds: 24	
Certifications:None		



County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>CROSSINGS AT FIVE FORKS</b> 345 FIVE FORKS RD SIMPSONVILLE, SC 29681 FAC.#:864-412-4700 CAIN ANNA S PH#: 864-412-4700 Facility Email: SVRBAS@HARMONYSENIORSERVICES.COM	Greenville / 4423 PHEASANT RIDGE RD STE 301 ROANOKE, VA 24014-5300 GREENVILLE OPERATIONS LLC CRC-1960 / 08/31/2018	92
Alzheimer Care:Yes      Max # Resident:28	Alzheimer Unit: Yes      Max # Beds: 24	
Certifications:None		
<b>FAIRVIEW PARK SENIOR LIVING</b> 544 HARRISON BRIDGE RD SIMPSONVILLE, SC 29680-7003 FAC.#:864-757-8812 CONNELLY REATHA PH#: 864-757-8812 Facility Email: ADMIN@FAIRVIEWPARKSC.COM	Greenville / Limited Liability 544 HARRISON BRIDGE RD as a Corporation) SIMPSONVILLE, SC 29680-7003 FAIRVIEW PARK ALF LP CRC-1887 / 11/30/2018	90
Alzheimer Care:Yes      Max # Resident:18	Alzheimer Unit: Yes      Max # Beds: 22	
Certifications:None		
<b>GARDENS AT EASTSIDE</b> 275 COMMONWEALTH DR GREENVILLE, SC 29615-4814 FAC.#:864-329-1200 FORD JANE A PH#: 864-329-1200 Facility Email: JFORD@ARBORCOMPANY.COM	Greenville / Ltd. Liability PO BOX 8217 ROANOKE, VA 24014-0217 EASTSIDE ASSISTED LIVING LLC CRC-1222 / 08/31/2018	83
Alzheimer Care:Yes      Max # Resident:14	Alzheimer Unit: Yes      Max # Beds: 14	
Certifications:None		
<b>GREENVILLE COMMUNITY RESIDENCE</b> 158 CAVALIER DR GREENVILLE, SC 29607-4262 FAC.#:864-277-9656 WOJACK DAVID C PH#: 864-277-9656 Facility Email: DAVE.WOJACK@THRIVEUPSTATE.ORG	Greenville / State PO BOX 17467, THRIVE UPSTATE GREENVILLE, SC 29606-8467 GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD CRC-0073 / 03/31/2019	12
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>GREENVILLE GLEN</b> 1101 GARLINGTON RD GREENVILLE, SC 29615-5446 FAC.#:864-627-8700 JONES DAVID G PH#: 864-627-8700 Facility Email: ED@GREENVILLEGLEN.COM	Greenville / Limited Liability 1101 GARLINGTON RD GREENVILLE, SC 29615-5446 GREENVILLE GLEN ASSISTED LIVING LLC CRC-0887 / 04/30/2018 (Renewal Pending)	51
Alzheimer Care:Yes      Max # Resident:0	Alzheimer Unit: Yes      Max # Beds: 16	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>GREENVILLE PLACE</b> 2006 PELHAM RD GREENVILLE, SC 29615-4005 FAC.#:864-288-3331 DURRAH SERINA PH#: 864-288-3331 Facility Email: SDURRAH@CAPITALSENIORLIVING.NET	Greenville / Corporation 2006 PELHAM RD GREENVILLE, SC 29615-4005 CSL LEASECO INC CRC-1402 / 11/30/2018	153
Alzheimer Care:Yes      Max # Resident:53	Alzheimer Unit: Yes      Max # Beds: 53	
Certifications:None		
<b>GREER COMMUNITY RESIDENCE</b> 112 S BEVERLY LN GREER, SC 29651-1738 FAC.#:864-879-8570 MORTON TAMARA L PH#: 864-879-8570 Facility Email: JOHN.COCCIOLONE@THRIVEUPSTATE.ORG	Greenville / State PO BOX 17467 GREENVILLE, SC 29606-8467 GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD CRC-0237 / 09/30/2018	12
Alzheimer Care:Yes      Max # Resident:2	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>GREGORY'S COMMUNITY CARE #5 - MALONE HOUSE</b> 2413 FORK SHOALS RD PIEDMONT, SC 29673-8663 FAC.#:864-277-2269 WILLIAMS PATRICIA PH#: 864-277-2269 Facility Email: PATRICIA.WILLIAMS@SCDMH.ORG	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0558 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>GREGORY'S COMMUNITY CARE #6 - HOWELL HOUSE</b> 2409 FORK SHOALS RD PIEDMONT, SC 29673-8663 FAC.#:864-299-0716 WILLIAMS PATRICIA PH#: 864-299-0716 Facility Email: PATRICIA.WILLIAMS@SCDMH.ORG	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0556 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>GREGORY'S COMMUNITY CARE #7 - CRAVEN HOUSE</b> 10 FERGUSON RD PIEDMONT, SC 29673-8603 FAC.#:864-277-0996 WILLIAMS PATRICIA PH#: 864-277-0996 Facility Email: PATRICIA.WILLIAMS@SCDMH.ORG	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0555 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>GREGORY'S COMMUNITY CARE #8 - METZ HOUSE</b> 18 FERGUSON RD PIEDMONT, SC 29673-8603 FAC.#:864-277-8506 WILLIAMS PATRICIA PH#: 864-277-8506 Facility Email: PATRICIA.WILLIAMS@SCDMH.ORG	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0557 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>HAVEN IN THE VILLAGE AT CHANTICLEER</b> 355 BERKMANS LN GREENVILLE, SC 29605-5606 FAC.#:864-467-0031 HASZLER MEASHA PH#: 864-467-0031 Facility Email: LICENSING@5SSL.COM	Greenville / Limited Liability <del>400 CENTRE STREET, FIVE STAR QUALITY CARE</del> NEWTON, MA 02458-2094 MORNINGSIDE OF ANDERSON LP CRC-1244 / 11/30/2018	60
Alzheimer Care:Yes      Max # Resident:60	Alzheimer Unit: Yes      Max # Beds: 60	
Certifications:None		
<b>MANNING PLACE</b> 10 COMPANION CT GREER, SC 29651-1288 FAC.#:864-989-0707 BOWERS BRYAN PH#: 864-989-0707 Facility Email: ALLICENSE@ENLIVANT.COM	Greenville / 330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 MANNING AID OPCO LLC CRC-1407 / 11/30/2018	44
Alzheimer Care:Yes      Max # Resident:1	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>MCKINNEY HOUSE</b> 307 MILLER RD MAULDIN, SC 29662-2034 FAC.#:864-297-5044 WILLIAMS PATRICIA PH#: 864-297-5044 Facility Email: PATRICIA.WILLIAMS@SCDMH.ORG	Greenville / State 307 MILLER RD MAULDIN, SC 29662-2034 PIEDMONT CENTER FOR MENTAL HEALTH SERVICES CRC-0778 / 07/31/2018	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>OAKLEAF VILLAGE AT THORNBLADE</b> 1560 THORNBLADE BLVD GREER, SC 29650-4520 FAC.#:864-968-1277 PH#: Facility Email: KBROCK@OAKLEAFSENIORLIVING.COM	Greenville / Limited Liability 1560 THORNBLADE BLVD GREER, SC 29650-4520 GREENVILLE SENIOR HOUSING I OPCO LLC CRC-2021 / 09/30/2018	100
Alzheimer Care:Yes      Max # Resident:20	Alzheimer Unit: Yes      Max # Beds: 24	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>PALMETTOS OF MAULDIN</b> 810 E BUTLER RD GREENVILLE, SC 29607-5842 FAC.#:864-627-0803 DAVIS KATHRYN H PH#: 864-627-0803 Facility Email: KDAVIS@THEPALMETTOSMAULDIN.COM	Greenville / Ltd. Liability PO BOX 749 MAULDIN, SC 29662-0749 NHC HEALTHCARE/MAULDIN LLC CRC-1503 / 03/31/2019	60
Alzheimer Care:Yes      Max # Resident:15	Alzheimer Unit: Yes      Max # Beds: 18	
Certifications:None		
<b>PEARL AT FIVE FORKS</b> 15 FIVE FORKS RD SIMPSONVILLE, SC 29681 FAC.#:864-568-3833 PH#: Facility Email: WADE.WILLIAMS@PHOENIXSRLIVING.COM	Greenville / Limited Liability PSL SIMPSONVILLE SUBTENANT LLC CRC-2003 / 01/31/2019	50
Alzheimer Care:Yes      Max # Resident:49	Alzheimer Unit: Yes      Max # Beds: 50	
Certifications:None		
<b>PENDLETON MANOR</b> 414 SUMMIT DR GREENVILLE, SC 29609-4821 FAC.#:864-271-7562 BLAIR SUSAN S PH#: 864-271-7562 Facility Email: SUSAN@PENDLETONMANOR.COM	Greenville / Ltd. Liability 414 SUMMIT DR GREENVILLE, SC 29609-4821 GREENVILLE RETIREMENT PROPERTIES LLC CRC-1455 / 08/31/2018	65
Alzheimer Care:Yes      Max # Resident:24	Alzheimer Unit: Yes      Max # Beds: 30	
Certifications:None		
<b>QUILLEN MANOR</b> 709 QUILLEN AVE FOUNTAIN INN, SC 29644-9444 FAC.#:864-862-3252 FREEMAN LEIGHA M PH#: 864-862-3252 Facility Email: LEIGHA.FREEMAN@QUILLENMANORLIVING.COM	Greenville / Limited Liability PO BOX 805 FOUNTAIN INN, SC 29644-0805 QUILLEN MANOR LLC CRC-1321 / 06/30/2018	78
Alzheimer Care:Yes      Max # Resident:12	Alzheimer Unit: Yes      Max # Beds: 12	
Certifications:None		
<b>RIDGEVIEW COMMUNITY CARE HOMES UNIT A</b> 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0559 / 01/31/2019	11
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>RIDGEVIEW COMMUNITY CARE HOMES UNIT B</b> 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0560 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>RIDGEVIEW COMMUNITY CARE HOMES UNIT C</b> 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0561 / 01/31/2019	11
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>RIDGEVIEW COMMUNITY CARE HOMES UNIT D</b> 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0562 / 01/31/2019	11
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>ROLLING GREEN VILLAGE ASSISTED LIVING FACILITY</b> 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 FAC.#:864-987-9800 TOERNER RYAN J PH#: 864-987-9800 Facility Email: RYANT@ROLLINGGREENVILLAGE.COM	Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 ROLLING GREEN VILLAGE CRC-0573 / 03/31/2019	52
Alzheimer Care:Yes      Max # Resident:22	Alzheimer Unit: Yes      Max # Beds: 22	
Certifications:None		
<b>SHEPHERD'S CARE CENTER</b> 2100 N PLEASANTBURG DR GREENVILLE, SC 29609-3156 FAC.#:864-322-6212 THOMPSON ERIC M PH#: 864-322-6212 Facility Email: ETHOMPSON@SHEPHERDSCARECENTER.COM	Greenville / Ltd. Liability 2100 N PLEASANTBURG DR GREENVILLE, SC 29609-3156 SHEPHERD'S CARE CENTER LLC CRC-1326 / 10/31/2018	90
Alzheimer Care:Yes      Max # Resident:9	Alzheimer Unit: Yes      Max # Beds: 19	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>SHERMAN RESIDENTIAL CARE</b> 20 MAYFIELD ST GREENVILLE, SC 29601-1815 FAC.#:864-242-0401 PH#: Facility Email: SHERMANSRESIDENTIAL2018@GMAIL.COM	Greenville / Limited Liability 20 MAYFIELD ST GREENVILLE, SC 29601-1815 SHERMAN RESIDENTIAL CARE 2 LLC CRC-2009 / 02/28/2019	16
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>SOUTHERN OAKS PERSONAL CARE HOME</b> 120 ROPER MOUNTAIN RD EXT GREENVILLE, SC 29615-4823 FAC.#:864-288-3271 AUSTIN TIMOTHY D PH#: 864-288-3271 Facility Email: TIM@LAKEFIELDPROP.COM	Greenville / 120 ROPER MOUNTAIN RD EXT GREENVILLE, SC 29615-4823 PATRIOT LIVING LLC CRC-1931 / 06/30/2018	64
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>SPRING PARK</b> 925 N MAIN ST TRAVELERS REST, SC 29690-1553 FAC.#:864-610-2435 LEE-POTTER KEARA PH#: 864-610-2435 Facility Email: ADMIN@SPRINGPARKSC.COM	Greenville / 925 N MAIN ST TRAVELERS REST, SC 29690-1553 SPRING PARK ALF LLC CRC-1539 / 12/31/2018	80
Alzheimer Care:Yes      Max # Resident:24	Alzheimer Unit: Yes      Max # Beds: 16	
Certifications:None		
<b>SPRINGS AT SIMPSONVILLE</b> 214 E CURTIS ST SIMPSONVILLE, SC 29681-2622 FAC.#:864-962-8570 DEWITT JAMES A PH#: 864-962-8570 Facility Email: JIMD@CARAVITA.COM	Greenville / Ltd. Liability 214 E CURTIS ST SIMPSONVILLE, SC 29681-2622 CURTIS GROUP LLC CRC-1198 / 05/31/2019	89
Alzheimer Care:Yes      Max # Resident:16	Alzheimer Unit: Yes      Max # Beds: 16	
Certifications:None		
<b>THRIVE ASSISTED LIVING &amp; MEMORY CARE</b> 715 S BUNCOMBE RD GREER, SC 29650-2208 FAC.#:864-469-0409 COOK JR TIMOTHY E PH#: 864-469-0409 Facility Email: TOM.COOK@THRIVEATGREER.COM	Greenville / 215 S BUNCOMBE RD GREER, SC 29650 PULLIAM/THRIVE GREER LLC CRC-1894 / 01/31/2019	110
Alzheimer Care:Yes      Max # Resident:17	Alzheimer Unit: Yes      Max # Beds: 46	
Certifications:None		

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>WATERSTONE ON AUGUSTA SENIOR LIVING</b> 1004 AUGUSTA ST GREENVILLE, SC 29605-3906 FAC.#:864-605-7236 BURTON EDWARD G PH#: 864-605-7236 <b>Facility Email:</b> EDWARD.BURTON@WATERSTONEONAUGUSTA.COM	Greenville / 1004 AUGUSTA ST GREENVILLE, SC 29605-3906 CHP GREENVILLE SC TENANT CORP <b>CRC-1945 / 03/31/2019</b>	126
<b>Alzheimer Care:Yes      Max # Resident:17      Alzheimer Unit: Yes      Max # Beds: 36</b>		

Certifications:None

<b>WINDSOR HOUSE GREENVILLE</b> 1931 PELHAM RD GREENVILLE, SC 29615-4002 FAC.#:864-288-9450 WILSON RENEE PH#: 864-288-9450 <b>Facility Email:</b> CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL .CO	Greenville / 1931 PELHAM RD GREENVILLE, SC 29615-4002 WINDOR HOUSE GREENVILLE-FHE LLC <b>CRC-1388 / 01/31/2019</b>	50
<b>Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0</b>		

Certifications:None

<b>Totals For Facility/License Type: <u>Community Residential Care Facility</u></b>	
<b>Number of Activities/Facilities licensed:      <u>42</u></b>	<b>Number Licensed Units:      <u>2,513</u></b>

County: Greenville

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>CIVITAN COMMUNITY RESIDENCE</b> 1820 RIDGE RD GREENVILLE, SC 29607-4704 FAC.#:864-679-0220 EDMOND NORIKA D PH#: 864-679-0220 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0113 / 12/31/2018</b>	8
<b>FOUNTAIN INN COMMUNITY RESIDENCE</b> 105 OLD FAIRVIEW RD FOUNTAIN INN, SC 29644-1822 FAC.#:864-288-1907 BYRD-CHIRINOUS NIELA PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0197 / 06/30/2018</b>	12
<b>HUGHES STREET COMMUNITY RESIDENCE</b> 104 HUGHES ST FOUNTAIN INN, SC 29644-2110 FAC.#:864-288-1907 BYRD-CHIRINOUS NIELA PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0201 / 06/30/2018</b>	8
<b>MARIAN PARKINS COMMUNITY RESIDENCE I</b> 103 KERNS AVE GREENVILLE, SC 29609 FAC.#:864-288-1907 EDMOND NORIKA D PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0150 / 05/31/2019</b>	8
<b>MARIAN PARKINS COMMUNITY RESIDENCE II</b> 518 PICKETT ST GREENVILLE, SC 29609 FAC.#:864-288-1907 STONE AMANDA PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0149 / 05/31/2019</b>	8
<b>RIDGE ROAD RESIDENCE</b> 1810 RIDGE RD GREENVILLE, SC 29607-4704 FAC.#:864-288-1907 OGUNSILE MATTHEW PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0176 / 09/30/2018</b>	12
<b>TRAVELERS REST COMMUNITY RESIDENCE</b> 252 LITTLE TEXAS RD TRAVELERS REST, SC 29690 FAC.#:864-288-1907 STONE AMANDA PH#: 864-288-1907 Facility Email: TYLER.REX@THRIVEUPSTATE.ORG	Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0222 / 06/30/2018</b>	8

Totals For Facility/License Type: Habilitation R15

Number of Activities/Facilities licensed: 7 Number Licensed Units: 64



County: Greenville

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BRIGHTSTAR OF SPARTANBURG</b> 110 W CHURCH ST STE A GREER, SC 29650-0000 FAC.#:864-599-0452 SANDERS FRANK J PH#: 864-599-0452 <b>Facility Email:</b> FRANK.SANDERS@BRIGHTSTARCARE.COM 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: INFUSION THERAPY	Greenville / Limited Liability  SANDERS HEALTHCARE LLC <b>HHA-0328 / 06/30/2018</b>	2
<b>GHS HOME HEALTH AGENCY</b> 440 ROPER MOUNTAIN RD GREENVILLE, SC 29615 FAC.#:864-455-8140 WOODS LANDACE PH#: 864-455-8140 <b>Facility Email:</b> NSALLY@GHS.ORG Counties Served: Anderson, Greenville, Oconee, 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: INTRAVENOUS THERAPY	Greenville / Corporation 440 ROPER MOUNTAIN RD GREENVILLE, SC 29615 UPSTATE AFFILIATE ORGANIZATION <b>HHA-0323 / 10/31/2018</b>	4
<b>INTERIM HEALTHCARE OF THE UPSTATE</b> 16 HYLAND RD GREENVILLE, SC 29615-5756 FAC.#:864-627-1200 SCHROEDER CHARYL M PH#: 864-627-1200 <b>Facility Email:</b> CHARYL.SCHROEDER@INTERIMCARES.COM Counties Served: Anderson, Cherokee, Greenville, Oconee, Pickens, Spartanburg 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:	Greenville / Limited Liability  INVESTSOUTH IHC LLC <b>HHA-0332 / 01/31/2019</b>	0
<b>KINDRED AT HOME-GREENVILLE</b> 15 BRENDAN WAY STE 250 GREENVILLE, SC 29615-3562 FAC.#:864-297-5711 RIGGLEMAN BARBARA D PH#: 864-297-5711 <b>Facility Email:</b> JANET.COMBS@GENTIVA.COM Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union 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: REGISTERED NURSE	Greenville / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC <b>HHA-0158 / 01/31/2019</b>	8

County: Greenville

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

OPTUM WOMEN'S AND CHILDREN'S HEALTH-PIEDMONT 2 INDEPENDENCE POINTE GREENVILLE, SC 29615 FAC.#:866-359-9640 BURGESS KIM PH#: 866-359-9640 Facility Email: FERN.MATTHEWS@OPTUM.COM	Greenville / Limited Liability  MY WELLNESS SOLUTIONS LLC HHA-0128 / 03/31/2019	33
--	--	----

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

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: IV THERAPY

ROLLING GREEN VILLAGE HOME HEALTH AGENCY 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FAC.#:864-987-9800 BENSON ROBERT J PH#: 864-580-5660 Facility Email: RYANT@ROLLINGGREENVILLAGE.COM	Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 ROLLING GREEN VILLAGE HHA-0213 / 12/31/2018	1
---	---	---

Counties Served: Greenville

License Restrictions:SERVING CONTINUING CARE RETIREMENT COMMUNITY AT ROLLING GREEN VILLAGE RESIDE

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: HOME HEALTH AGENCY FOR RGC RESIDENTS ONLY

ST FRANCIS HOSPITAL HOME CARE 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 FAC.#:864-233-5300 GARDNER WILLIAM J PH#: 864-233-5300 Facility Email: WILLIAM_GARDNER@BSHSI.ORG	Greenville / Corporation 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 ST FRANCIS HOSPITAL INC HHA-0167 / 12/31/2018	4
--	--	---

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:

Totals For Facility/License Type: Home Health

Number of Activities/Facilities licensed: 7 Number Licensed Units: 52

County: Greenville

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MCCALL HOSPICE HOUSE OF GREENVILLE 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 FAC.#:864-688-1700 GARDNER WILLIAM PH#: 864-688-1700 Facility Email: WILLIAM_GARDNER@BSHSI.ORG	Greenville / Corporation 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 ST FRANCIS HOSPITAL INC HPF-0010 / 07/31/2018	30

**Totals For Facility/License Type: Hospice Facility**

Number of Activities/Facilities licensed: 1      Number Licensed Units: 30

**County: Greenville**

**Facility Type: Hospice Program**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BROOKDALE HOSPICE-GREENVILLE</b> 25 WOODS LAKE RD STE 405 GREENVILLE, SC 29607 FAC.#:864-370-7218 GIVENS BARBARA PH#: 864-370-7218 <b>Facility Email:</b> RCOHEN1@BROOKDALE.COM	Greenville / Limited Liability 111 WESTWOOD PL STE 400 BRENTWOOD, TN 37027-5057 BROOKDALE HOSPICE LLC <b>HPC-0181 / 09/30/2018</b>	9
<b>Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Pickens, Spartanburg, Union</b>		
<b>CARIS HEALTHCARE-GREENVILLE</b> 111 SMITH HINES RD STE D GREENVILLE, SC 29607-5745 FAC.#:864-297-7931 RIOS LORENA PH#: 864-297-7931 <b>Facility Email:</b> LRIOUS@CARISHEALTHCARE.COM	Greenville / Limited Liability 111 SMITH HINES RD STE D GREENVILLE, SC 29607 CARIS HEALTHCARE LLC <b>HPC-0131 / 12/31/2018</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>HEARTLAND HOSPICE SERVICES-GREENVILLE</b> 421 SE MAIN ST STE 100 SIMPSONVILLE, SC 29681-2697 FAC.#:864-963-0045 WIETIES LYNN PH#: 864-963-0045 <b>Facility Email:</b> 4613ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 333 N SUMMIT ST FL 16 TOLEDO, OH 43604-1531 HEARTLAND HOSPICE SERVICES LLC <b>HPC-0137 / 12/31/2018</b>	11
<b>Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Newberry, Oconee, Pickens, Spartanburg, Union</b>		
<b>HOMESTEAD HOSPICE OF GREENVILLE</b> 109 LAURENS RD BLDG 1A GREENVILLE, SC 29607-1860 FAC.#:864-288-5136 FISHER GARLAND PH#: 864-288-5136 <b>Facility Email:</b> MWAFFORD@HOMESTEADHOSPICE.NET	Greenville / Limited Liability 10888 CRABAPPLE RD ROSWELL, GA 30075-5850 HOMESTEAD HOSPICE OF GREENVILLE LLC <b>HPC-0170 / 01/31/2019</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>INTERIM HEALTHCARE OF THE UPSTATE HOSPICE</b> 16 HYLAND RD GREENVILLE, SC 29615-5756 FAC.#:864-627-1200 SCHROEDER CHARYL M PH#: 864-627-1200 <b>Facility Email:</b> CHARYL.SCHROEDER@INTERIMCARES.COM	Greenville / Limited Liability INVESTSOUTH IHC LLC <b>HPC-0222 / 01/31/2019</b>	0
<b>Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Spartanburg, Union</b>		

County: Greenville

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>KINDRED HOSPICE-GREENVILLE</b> 15 BRENDAN WAY STE 100 GREENVILLE, SC 29615-3562 FAC.#:864-297-3164 MITTMANN LARISSA PH#: <b>Facility Email:</b> JANET.COMBS@GENTIVA.COM	Greenville / Limited Liability 12900 FOSTER ST STE 400, CORPORATE LICENSURE DEPT OVERLAND PARK, KS 66213-2696 VISTACARE USA LLC <b>HPC-0058 / 08/31/2018</b>	20
<b>Counties Served: Abbeville, Anderson, Cherokee, Chesterfield, Clarendon, Darlington, Dillon, Florence, Greenville, Greenwood, Laurens, Lee, Marion, Marlboro, Oconee, Pickens, Spartanburg, Sumter, Union, Williamsburg</b>		
<b>MEDICAL SERVICES OF AMERICA HOSPICE OF THE UPSTATE</b> 528 HOWELL RD STE 20 GREENVILLE, SC 29615-2050 FAC.#:864-627-4270 GUNTER RONALD PH#: 864-627-4270 <b>Facility Email:</b> LICENSING@MSA-CORP.COM	Greenville / Corporation PO BOX 609 LEXINGTON, SC 29071-0609 TRI COUNTY HOSPICE INC <b>HPC-0088 / 06/30/2018</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>OPEN ARMS HOSPICE</b> 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 FAC.#:864-688-1700 GARDNER WILLIAM PH#: 864-688-1700 <b>Facility Email:</b> WILLIAM_GARDNER@BSHSI.ORG	Greenville / Corporation 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 ST FRANCIS HOSPITAL INC <b>HPC-0063 / 12/31/2018</b>	5
<b>Counties Served: Anderson, Greenville, Laurens, Pickens, Spartanburg</b>		
<b>PALLADIUM HOSPICE AND PALLIATIVE CARE</b> 10 ENTERPRISE BLVD STE 202 GREENVILLE, SC 29615 FAC.#:864-269-3725 LEE NANCY M PH#: <b>Facility Email:</b> DMAIORANA@PALLADIUMCARE.COM	Greenville / Limited Liability 1901 ASSEMBLY ST STE 275 COLUMBIA, SC 29201-2462 PALLADIUM HOSPICE AND PALLIATIVE CARE <b>HPC-0128 / 12/31/2018</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		

**County: Greenville**

**Facility Type: Hospice Program**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>PATHWAY HOSPICE</b> 355 WOODRUFF RD STE 201 GREENVILLE, SC 29607-3494 FAC.#:864-312-6825 WIGGINS NADINE PH#: 864-312-6825 <b>Facility Email:</b> NWIGGINS@PATHWAYHOSPICECARES.COM	Greenville / Limited Liability 355 WOODRUFF RD STE 201, MAILBOX 24 GREENVILLE, SC 29607-3494 PATHWAY HOSPICE LLC <b>HPC-0147 / 05/31/2018 (Renewal Pending)</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>PH HEALTHCARE SERVICES</b> 54 BEAR DR GREENVILLE, SC 29605 FAC.#:864-991-8414 BIRMINGHAM JILL PH#: 864-991-8414 <b>Facility Email:</b> JB@PATRIOTCARES.COM	Greenville / Corporation 54 BEAR DR GREENVILLE, SC 29605 PH HEALTHCARE SERVICES INC <b>HPC-0165 / 03/31/2019</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>PIEDMONT HOSPICE</b> 209 RIVERSIDE CT STE A GREER, SC 29650 FAC.#:864-721-2900 RATLEY DELORES A PH#: 864-721-2900 <b>Facility Email:</b> DRATLEY@HOSPICESC.COM	Greenville / Limited Liability 501 DEANNA LN STE A WANDO, SC 29492 PIEDMONT HOSPICE LLC <b>HPC-0133 / 02/28/2018 (Renewal Pending)</b>	46
<b>Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York</b>		
<b>WREN HOSPICE</b> 955 W WADE HAMPTON BLVD STE 3A GREER, SC 29650 FAC.#:864-326-3242 BURTON HEATHER B PH#: 864-326-3242 <b>Facility Email:</b> HEATHER@WRENHOSPICE.COM	Greenville / Limited Liability 955 W WAIDE HAMPTON BLVD STE 3A GREER, SC 29650 WREN HOSPICE LLC <b>HPC-0177 / 11/30/2018</b>	13
<b>Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, McCormick, Newberry, Oconee, Pickens, Saluda, Spartanburg, Union</b>		

County: Greenville

Facility Type: Hospice Program

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: Hospice Program

Number of Activities/Facilities licensed: 13      Number Licensed Units: 380

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>CAROLINA CENTER FOR BEHAVIORAL HEALTH</b> 2700 E PHILLIPS RD GREER, SC 29650-4815 FAC.#:864-235-2335 WILLINGHAM JOHN C PH#: 864-235-2335 Facility Email: JERRY.CHAPMAN@UHSINC.COM	Greenville / Corporation 2700 E PHILLIPS RD GREER, SC 29650-4815 UHS OF GREENVILLE LLC HTL-0806 / 08/31/2018	138
<b>Licensed Beds: General: 0 Psychiatric: 117 Rehab: 0 Substance Abuse: 21</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

Certifications:JCAHO Accredited

<b>GHS GREENVILLE MEMORIAL HOSPITAL</b> 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-7114 JOHNSON PAUL PH#: 864-455-7114 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 (PLANNING DEPT) GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION HTL-0936 / 10/31/2018	864
<b>Licensed Beds: General: 746 Psychiatric: 65 Rehab: 53 Substance Abuse: 0</b> <b>Other Beds : NICU: 12 Neonatal Special Care: 68</b>		

Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited

<b>GHS GREER MEMORIAL HOSPITAL</b> 830 S BUNCOMBE RD GREER, SC 29650-2400 FAC.#:864-797-8000 MANSURE JOHN PH#: 864-797-8000 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 (PLANNING DEPT) GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION HTL-0934 / 10/31/2018	82
<b>Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

Certifications:Perinatal Level I, JCAHO Accredited

<b>GHS HILLCREST MEMORIAL HOSPITAL</b> 729 SE MAIN ST SIMPSONVILLE, SC 29681-3280 FAC.#:864-454-6151 JONES SCOTT PH#: 864-454-6151 Facility Email: SJONES23@GHS.ORG	Greenville / Corporation 729 SE MAIN ST SIMPSONVILLE, SC 29681-3280 UPSTATE AFFILIATE ORGANIZATION HTL-0931 / 10/31/2018	43
<b>Licensed Beds: General: 43 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

Certifications:JCAHO Accredited

<b>GHS NORTH GREENVILLE LONG TERM ACUTE CARE HOSPITAL</b> 807 N MAIN ST TRAVELERS REST, SC 29690-1598 FAC.#:864-455-9224 TALBERT ADRIENNE PH#: 864-455-9224 Facility Email: ATALBERT@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 (PLANNING DEPT) GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION HTL-0935 / 10/31/2018	45
<b>Licensed Beds: General: 45 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

Certifications:JCAHO Accredited



County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>GHS PATEWOOD MEMORIAL HOSPITAL</b>		
175 PATEWOOD DR GREENVILLE, SC 29615-3570 FAC.#:864-797-1089 BROOKSHIRE TIM PH#: 864-797-1089 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 175 PATEDRIVE GREENVILLE, SC 29615 UPSTATE AFFILIATE ORGANIZATION HTL-0933 / 10/31/2018	72
Licensed Beds: General: 72    Psychiatric: 0    Rehab: 0    Substance Abuse: 0 Other Beds :        NICU: 0    Neonatal Special Care: 0		
Certifications: Perinatal Level I, JCAHO Accredited		
<b>REGENCY HOSPITAL OF GREENVILLE</b>		
1 SAINT FRANCIS DR 4TH FLOOR GREENVILLE, SC 29601-3999 FAC.#:864-255-1401 BEAUREGARD PAIGE PH#: 864-255-1401 Facility Email: MNOTARIO@SELECTMEDICAL.COM	Greenville / Ltd. Liability 4717 GETTYBURG RD MECHANICSBURG, PA 17055 REGENCY HOSPITAL OF GREENVILLE LLC HTL-0882 / 12/31/2018	32
Licensed Beds: General: 32    Psychiatric: 0    Rehab: 0    Substance Abuse: 0 Other Beds :        NICU: 0    Neonatal Special Care: 0		
Certifications: JCAHO Accredited		
<b>SHRINERS' HOSPITAL FOR CHILDREN</b>		
950 W FARIS RD GREENVILLE, SC 29605-4277 FAC.#:864-255-7942 MUNLEY WILLIAM E PH#: 864-271-3444 Facility Email: JCONTI@SHRINENET.ORG	Greenville / Non-Profit Corporation 950 W FARIS RD GREENVILLE, SC 29605-4277 SHRINERS' HOSPITAL FOR CHILDREN INC HTL-0069 / 02/28/2019	50
Licensed Beds: General: 50    Psychiatric: 0    Rehab: 0    Substance Abuse: 0 Other Beds :        NICU: 0    Neonatal Special Care: 0		
Certifications: JCAHO Accredited		
<b>SPRINGBROOK BEHAVIORAL HEALTH SYSTEM</b>		
1 HAVENWOOD LN STE A TRAVELERS REST, SC 29690-9447 FAC.#:864-834-8013 ROWLEY MIKE PH#: 864-834-8013 Facility Email: LISA.MCJUNKIN@SPRINGBROOKBHS.COM	Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690-1005 CHESTNUT HILL MENTAL HEALTH CENTER INC HTL-0442 / 08/31/2018	44
Licensed Beds: General: 0    Psychiatric: 38    Rehab: 0    Substance Abuse: 6 Other Beds :        NICU: 0    Neonatal Special Care: 0		
Certifications: JCAHO Accredited		
<b>ST FRANCIS-DOWNTOWN</b>		
1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 FAC.#:864-255-1000 MCCOY R CRAIG PH#: Facility Email: WANDA_JONES3@BSHSI.ORG	Greenville / Corporation 1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 ST FRANCIS HOSPITAL INC HTL-0794 / 12/31/2018	245
Licensed Beds: General: 226    Psychiatric: 0    Rehab: 19    Substance Abuse: 0 Other Beds :        NICU: 0    Neonatal Special Care: 0		
Certifications: JCAHO Accredited		

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

<b>ST FRANCIS-EASTSIDE</b>	Greenville / Corporation	93
125 COMMONWEALTH DR	125 COMMONWEALTH DR	
GREENVILLE, SC 29615-4812 FAC.#:864-675-4000	GREENVILLE, SC 29615-4812	
MCCOY R CRAIG PH#:	ST FRANCIS HOSPITAL INC	
<b>Facility Email:</b> ASHLEY_ALBERT@BSHSI.ORG	<b>HTL-0793 / 12/31/2018</b>	
<b>Licensed Beds: General: 93    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b>		
<b>Other Beds :        NICU: 0        Neonatal Special Care: 14</b>		

Certifications: Perinatal Level II, JCAHO Accredited

<b>Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u></b>	
<b>Number of Activities/Facilities licensed: <u>11</u></b>	<b>Number Licensed Units: <u>1,708</u></b>

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>AAA CARE LLC</b> 3505 PELHAM RD STE B GREENVILLE, SC 29615 FAC.#:864-295-1949 PH#: <b>Facility Email:</b> ARICHARD@AAACARES4U.COM	Greenville / Limited Liability 143 COMMONS WAY GREENVILLE, SC 29611-3850 AAA CARE LLC <b>IHCP-0185 / 06/30/2018</b>	- 1
<b>ABONDANT COMFORT HOMECARE LLC</b> 3104 GRANDVIEW DR STE C SIMPSONVILLE, SC 29680-2821 FAC.#:864-757-1970 PH#: <b>Facility Email:</b> ABONDANTCOMFORT@GMAIL.COM	Greenville / Limited Liability PO BOX 81075 SIMPSONVILLE, SC 29680-0018 ABONDANT COMFORT HOMECARE LLC <b>IHCP-0177 / 05/31/2019</b>	- 1
<b>ABOVE &amp; BEYOND CARE SERVICES LLC</b> 103 COMMONS WAY STE C GREENVILLE, SC 29611 FAC.#:864-434-0880 PH#: <b>Facility Email:</b> ABOVE.BEYONDCARESERVICES@GMAIL.COM	Greenville / Sole Proprietorship MONIQUE TAMI <b>IHCP-0865 / 04/30/2019</b>	- 1
<b>ACCESS HEALTH CARE SERVICES INC OF GREENVILLE</b> 1901 LAURENS RD STE G GREENVILLE, SC 29607-5186 FAC.#:864-242-1947 PH#: <b>Facility Email:</b> BBOYD@CAREGIVERSONDEMAND.COM	Greenville / Corporation PO BOX 16645 GREENVILLE, SC 29606 ACCESS HEALTH CARE SERVICES INC <b>IHCP-0206 / 06/30/2018</b>	- 1
<b>ADDUS HOME CARE - GREENVILLE</b> 415 N PLEASANTBURG DR STE B GREENVILLE, SC 29607-2127 FAC.#:864-250-0016 PH#: <b>Facility Email:</b> MWOODWORTH@ADDUS.COM	Greenville / Corporation 2300 WARRENVILLE RD STE 100 DOWNERS GROVE, IL 60515-1700 ADDUS HEALTHCARE (SOUTH CAROLINA) INC DBA ADDUS HOME CARE <b>IHCP-0201 / 06/30/2018</b>	- 1
<b>ADORING ANGELS HOMECARE LLC</b> 1 CHICK SPRINGS RD STE 313A GREENVILLE, SC 29609-4965 FAC.#:864-558-0055 PH#: <b>Facility Email:</b> ANGELS82@YAHOO.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 313A GREENVILLE, SC 29609-4965 ADORING ANGELS HOMECARE LLC <b>IHCP-0485 / 01/31/2019</b>	- 1
<b>ALL HEARTS HOMECARE LLC</b> 1200 WOODRUFF RD STE A3 GREENVILLE, SC 29607-5732 FAC.#:864-213-2146 PH#: <b>Facility Email:</b> NEZZIE@ALLHEARTSHOMECARE.COM	Greenville / Limited Liability PO BOX 623 MAULDIN, SC 29662 ALL HEARTS HOMECARE LLC <b>IHCP-0085 / 03/31/2019</b>	- 1
<b>ALPHA ONE STAFFING LLC</b> 213 E BUTLER RD STE D-2 MAULDIN, SC 29662 FAC.#:864-990-8704 PH#: <b>Facility Email:</b> RG@ALPHAONESTAFFING.COM	Greenville / Limited Liability 213 E BUTLER RD STE D-2 MAULDIN, SC 29662 ALPHA ONE STAFFING LLC <b>IHCP-0356 / 04/30/2018 (Renewal Pending)</b>	- 1

## County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ALWAYS BEST CARE OF GREENVILLE/SPARTANBURG</b> 33 MARKET POINT DR GREENVILLE, SC 29607 FAC.#:864-527-0464 PH#: Facility Email: BMEYER@ABC-SENIORS.COM	Greenville / Limited Liability 33 MARKET POINT DR GREENVILLE, SC 29607 CHARIS UNLIMITED LLC <b>IHCP-0136 / 05/31/2019</b>	- 1
<b>ANGELIC HEARTS HOMECARE AGENCY LLC</b> 1 CHICK SPRINGS RD STE 113A GREENVILLE, SC 29609 FAC.#:864-248-4770 PH#: Facility Email: ANGELICHEARTS1@GMAIL.COM	Greenville / 1 CHICK SPRINGS RD STE 113A GREENVILLE, SC 29609 ANGELIC HEARTS HOMECARE AGENCY LLC <b>IHCP-0566 / 07/31/2018</b>	- 1
<b>ANNIES ANGELS HOME CARE LLC</b> 408 E BUTLER RD STE C MAULDIN, SC 29662 FAC.#:864-551-5165 PH#: Facility Email: MSLMCDONALD@YAHOO.COM	Greenville / Limited Liability 408 E BUTLER RD STE C MAULDIN, SC 29662 ANNIES ANGELS HOME CARE LLC <b>IHCP-0284 / 07/31/2018</b>	- 1
<b>ASSISTING ANGELS</b> 113 E BUTLER RD STE C MAULDIN, SC 29662 FAC.#:864-288-7100 PH#: Facility Email: CARMEN@ASSISTINGANGELS.COM	Greenville / Corporation 113 E BUTLER RD STE C MAULDIN, SC 29662 ASSISTING ANGELS INC <b>IHCP-0064 / 02/28/2019</b>	- 1
<b>ASSURED &amp; ASSOCIATES PERSONAL CARE OF GEORGIA INC</b> 220 N MAIN ST STE 500 GREENVILLE, SC 29601-2129 FAC.#:864-516-7513 PH#: Facility Email: RBROWN@ASSUREDANDASSOCIATES.COM	Greenville / Corporation 8687 HOSPITAL DR DOUGLASVILLE, GA 30134-5615 ASSURED & ASSOCIATES PERSONAL CARE OF GEORGIA INC <b>IHCP-0229 / 07/31/2018</b>	- 1
<b>AT HOME CARE OF THE CAROLINAS</b> 3209 WADE HAMPTON BLVD #5 TAYLORS, SC 29687 FAC.#:864-252-7111 PH#: Facility Email: ANGELA@ATHOMECARECAROLINAS.COM	Greenville / Limited Liability  AT HOME CARE OF THE CAROLINAS LLC <b>IHCP-0816 / 05/31/2019</b>	- 1
<b>ATTENTIVE CARE SERVICES</b> 103 COMMONS WAY GREENVILLE, SC 29611 FAC.#:864-236-4333 FERGUSON TAMI PH#: 864-236-4333 Facility Email: ATTENTIVECARESERVICESLLC@GMAIL.COM	Greenville / Limited Liability 113 COMMONS WAY STE B GREENVILLE, SC 29611 ATTENTIVE CARE SERVICES LLC <b>IHCP-0148 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>BAYADA HOME CARE - GREENVILLE</b> 25 WOODS LAKE RD BUILDING 5 STE 505 GREENVILLE, SC 29607 FAC.#:864-242-1750 ALLMAN MELISSA PH#: 864-242-1211 Facility Email: MALLMAN@BAYADA.COM	Greenville / Corporation 25 WOODS LAKE RD BUILDING 5 STE 505 GREENVILLE, SC 29607 BAYADA HOME HEALTH CARE INC <b>IHCP-0208 / 06/30/2018</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BLESSED WITH GOODNESS LLC</b> 716 E FAIRFIELD RD UNIT 120 GREENVILLE, SC 29605 FAC.#:864-520-8213 DIXON AFRICA PH#: 864-520-8213 Facility Email: BWGLLC@HOTMAIL.COM	Greenville / Limited Liability 716 E FAIRFIELD RD UNIT 120, MAILBOX #14 GREENVILLE, SC 29605 BLESSED WITH GOODNESS LLC <b>IHCP-0591 / 10/31/2018</b>	- 1
<b>CAPITAL HEALTH SERVICE</b> 526 S MAIN ST SIMPSONVILLE, SC 29681-3220 FAC.#:864-228-3604 PH#: Facility Email: CAPITALHS@YMAIL.COM	Greenville / Ltd. Liability 526 S MAIN ST SIMPSONVILLE, SC 29681-3220 CAPITAL HEALTH SERVICE LLC <b>IHCP-0028 / 12/31/2018</b>	- 1
<b>CARE COMPANIONS OF SOUTH CAROLINA LLC</b> 1 CHICK SPRINGS RD STE 201-E GREENVILLE, SC 29609 FAC.#:864-626-3166 PH#: Facility Email: CARECOMPANIONSOFSC@GMAIL.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 201-E GREENVILLE, SC 29609 CARE COMPANIONS OF SOUTH CAROLINA LLC <b>IHCP-0525 / 02/28/2019</b>	- 1
<b>CARE FOR ALL</b> 3204 WHITE HORSE RD STE B GREENVILLE, SC 29611 FAC.#:864-295-2895 MCNIGHT-HILL NACCOYA PH#: 864-295-2895 Facility Email: CAREFORALLHHA@HOTMAIL.COM	Greenville / Sole Proprietorship 3204 WHITE HORSE RD STE B GREENVILLE, SC 29611 BRADLEY MOHOTA <b>IHCP-0760 / 07/31/2018</b>	- 1
<b>CARING HEARTS HOMECARE AGENCY LLC</b> 103 E BUTLER RD STE E MAULDIN, SC 29662 FAC.#:864-283-6691 PH#: Facility Email: CHEARTS94@YAHOO.COM	Greenville / Limited Liability PO BOX 1032 MAULDIN, SC 29662 CARING HEARTS HOMECARE AGENCY LLC <b>IHCP-0131 / 04/30/2019</b>	- 1
<b>CARING HELPERS LLC</b> 25 WOODS LAKE RD STE 316 GREENVILLE, SC 29607-2450 FAC.#:864-233-1799 PH#: Facility Email: CARINGHELPERS@YAHOO.COM	Greenville / Limited Liability 880 S PLEASANTBURG DR STE 2D GREENVILLE, SC 29607-2450 CARING HELPERS LLC <b>IHCP-0115 / 03/31/2019</b>	- 1
<b>CAROLINA NURSING ASSOCIATES LLC</b> 880 S PLEASANTBURG DR STE 2E GREENVILLE, SC 29607-2451 FAC.#:864-370-7200 PH#: Facility Email: CAROLINANURSING@BELLSOUTH.NET	Greenville / Limited Liability 880 S PLEASANTBURG DR STE 2E GREENVILLE, SC 29607-2451 CAROLINA NURSING ASSOCIATES LLC <b>IHCP-0086 / 03/31/2019</b>	- 1
<b>COMFORCARE HOME CARE</b> 3401 HWY 153 STE A3 PIEDMONT, SC 29673 FAC.#:864-269-5005 PH#: Facility Email: GREENVILLE@COMFORCARE.COM	Greenville / Ltd. Liability 3504-359 HWY 153 GREENVILLE, SC 29611-7553 THE REUBERT COMPANY <b>IHCP-0094 / 04/30/2019</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>COMFORT CARE PROVIDERS LLC</b> 1200 WOODRUFF RD STE A-3 GREENVILLE, SC 29607 FAC.#:864-421-6894 PH#: Facility Email: COMFORTCAREPROVIDERS@GMAIL.COM	Greenville / Limited Liability 1200 WOODRUFF RD STE A-3 GREENVILLE, SC 29607 COMFORT CARE PROVIDERS LLC <b>IHCP-0111 / 04/30/2019</b>	- 1
<b>COMFORT KEEPERS OF GREENVILLE</b> 1200 HAYWOOD RD GREENVILLE, SC 29615-1255 FAC.#:864-268-8993 PH#: Facility Email: ERIN@CKUPSTATE.COM	Greenville / Limited Liability 26 RUSHMORE DR GREENVILLE, SC 29615-1255 KIKI'S KARE LLC <b>IHCP-0081 / 03/31/2019</b>	- 1
<b>COMFORTMAX HOME CARE</b> 202 ADLEY WAY GREENVILLE, SC 29607-6511 FAC.#:864-675-3490 WILSON DONNA PH#: 864-675-3490 Facility Email: DWILSON@COMFORTMAXHHC.COM	Greenville / Limited Liability 202 ADLEY WAY GREENVILLE, SC 29607-6511 COMFORTMAX HOME HEALTHCARE LLC <b>IHCP-0326 / 09/30/2017 (Renewal Pending)</b>	- 1
<b>COMMUNITY HOME CARE SERVICES LLC</b> 40 SHERMAN LN GREENVILLE, SC 29605 FAC.#:864-303-4052 CANNON-ANDERSON CHARLES PH#: 864-303-4052 Facility Email: COMMUNITY_HOME@YAHOO.COM	Greenville / Limited Liability 40 SHERMAN LN GREENVILLE, SC 29605 COMMUNITY HOME CARE SERVICES LLC <b>IHCP-0536 / 04/30/2018 (Renewal Pending)</b>	- 1
<b>COMPASSIONATE HANDS HOMECARE SERVICES LLC</b> 1 CHICK SPRINGS RD STE 113 GREENVILLE, SC 29609-4976 FAC.#:864-248-6475 PH#: Facility Email: COMPASSIONATEHANDS1@GMAIL.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 207A GREENVILLE, SC 29609-4976 COMPASSIONATE HANDS HOMECARE SERVICES LLC <b>IHCP-0371 / 08/31/2018</b>	- 1
<b>COMPLETE HOMECARE OF AMERICA INC</b> 128 MILLPORT CIR STE 200 GREENVILLE, SC 29607-5573 FAC.#:864-351-9350 PH#: Facility Email: THOMASHAAS@COMPLETEHOMECAREOFAMERICA.COM	Greenville / Corporation 128 MILLPORT CIR STE 200 GREENVILLE, SC 29607-5573 COMPLETE HOMECARE OF AMERICA INC <b>IHCP-0272 / 08/31/2018</b>	- 1
<b>CORPORATE CARE LLC GREENVILLE</b> 811 PENDLETON ST STE 2 GREENVILLE, SC 29606 FAC.#:864-250-0403 PH#: Facility Email: RR500@CORPORATE-SERVICESSC.COM	Greenville / Limited Liability PO BOX 16148 GREENVILLE, SC 29606-7148 CORPORATE CARE LLC <b>IHCP-0316 / 08/31/2018</b>	- 1
<b>DAISYS ALLCARE INHOME SERVICES LLC</b> 44 PINE KNOLL DR STE C GREENVILLE, SC 29609-3251 FAC.#:864-243-8540 JACKSON TOSHIUS PH#: Facility Email: DAISYSALLCARE@YAHOO.COM	Greenville / Limited Liability 44 PINE KNOLL DR STE C GREENVILLE, SC 29609-3251 DAISYS ALLCARE INHOME SERVICES LLC <b>IHCP-0132 / 04/30/2019</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>DIVINE HEALING HOME CARE SERVICES LLC</b> 310 LAUREL TREE LN SIMPSONVILLE, SC 29681-5142 FAC.#:864-987-0620 PH#: Facility Email: TERESA@DIVINEHEALINGNURSING.COM	Greenville / Limited Liability 310 LAUREL TREE LN SIMPSONVILLE, SC 29681-5142 DIVINE HEALING HOME HEALTH CARE SERVICES <b>IHCP-0192 / 06/30/2018</b>	- 1
<b>DIVINE HEARTS HOMECARE LLC</b> 730 SOUTH PLEASANTBURG DR STE H GREENVILLE, SC 29607 FAC.#:864-234-0045 PH#: Facility Email: INFO@DIVINEHEARTSHC.COM	Greenville / Limited Liability 730 S PLEASANTBURG DR STE H GREENVILLE, SC 29607 DIVINE HEARTS HOMECARE LLC <b>IHCP-0162 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>DIVINE SERENITY HOME CARE LLC</b> 1 CHICK SPRINGS RD STE 203B GREENVILLE, SC 29609-4975 FAC.#:864-558-9933 PH#: Facility Email: DIVINESERENITYHOMECARE@GMAIL.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 203B GREENVILLE, SC 29609-4975 DIVINE SERENITY HOME CARE LLC <b>IHCP-0374 / 04/30/2017 (Renewal Pending)</b>	- 1
<b>DUPREE MOBILE HEALTH CARE SERVICE</b> 1306 W POINSETT ST GREER, SC 29651 FAC.#:864-237-8615 PH#: Facility Email: DUPREEMOBILEHEALTHCARE@GMAIL.COM	Greenville / Sole Proprietorship 1518 JOHN B WHITE SR BLVD #5 SPARTANBURG, SC 29301 DUPREE THOMAS PIERRE <b>IHCP-0743 / 02/28/2019</b>	- 1
<b>DYNASTY HOME CARE</b> 210 WEST STONE AVE STE LR5 GREENVILLE, SC 29609 FAC.#:864-248-6334 WHITE LAKISHA B PH#: 864-559-0626 Facility Email: DYNASTYHOMEHEALTH@GMAIL.COM	Greenville / Limited Liability DYNASTY HOME HEALTH CARE LLC <b>IHCP-0666 / 01/31/2019</b>	- 1
<b>ESSENTIAL CARE SERVICES LLC</b> 504 N MAIN ST GREER, SC 29650 FAC.#:864-655-7600 DIRTON LOLA PH#: 864-655-7600 Facility Email: ESSENTIALCARESERVICES8@YAHOO.COM	Greenville / Limited Liability 600 N MAIN ST STE A GREER, SC 29650-1653 ESSENTIAL CARE SERVICES LLC <b>IHCP-0379 / 01/31/2019</b>	- 1
<b>EXCELLENCE HOME CARE</b> 117 FAIRVIEW POINTE DR SIMPSONVILLE, SC 29681 FAC.#:864-757-1269 PH#: Facility Email: BYERSWOODS@GMAIL.COM	Greenville / Limited Liability 117 FAIRVIEW POINTE DR SIMPSONVILLE, SC 29681 EXCELLENCE HOME CARE LLC <b>IHCP-0711 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>FIRSTLIGHT HOMECARE OF GREENVILLE</b> 25 WOODS LAKE RD STE 300 GREENVILLE, SC 29607-2762 FAC.#:864-438-2995 PH#: Facility Email: JVAUGHN@FIRSTLIGHTHOMECARE.COM	Greenville / Limited Liability 25 WOODS LAKE RD STE 300 GREENVILLE, SC 29607-2762 UPSTATE HOME CARE LLC <b>IHCP-0089 / 03/31/2019</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>FROM THE HEART HOMECARE</b> 501 W BUTLER RD STE G GREENVILLE, SC 29607 FAC.#:864-520-1131 PH#:	Greenville / Limited Liability FROM THE HEART HOMECARE LLC <b>IHCP-0821 / 05/31/2019</b>	- 1
<b>Facility Email:</b> FROMTHEHEARTHOMEHEALTHCARELLC@GMAIL.COM		
<b>GENESIS HOME CARE SERVICES</b> 880 S PLEASANTBURG DR STE 2E OFFICE A GREENVILLE, SC 29607-2451 FAC.#:864-551-4244 MITCHELL TIEQUENCCIA PH#: 864-551-4244	Greenville / Limited Liability 880 S PLEASANTBURG DR STE 2E OFFICE A GREENVILLE, SC 29607-2451 GENESIS HOME CARE SERVICES <b>IHCP-0345 / 09/30/2018</b>	- 1
<b>Facility Email:</b> GENESIS_HOMECARE_SERVICES@YAHOO.COM		
<b>GOLDEN HOMECARE SOLUTIONS LLC</b> 419 SE MAIN ST STE 300B SIMPSONVILLE, SC 29681-2651 FAC.#:864-228-7146 PH#:	Greenville / Limited Liability 419 SE MAIN ST STE 300B SIMPSONVILLE, SC 29681-2651 GOLDEN HOMECARE SOLUTIONS <b>IHCP-0220 / 07/31/2018</b>	- 1
<b>Facility Email:</b> GOLDENHOMECARESOLUTIONS@GMAIL.COM		
<b>GUARDIAN ANGELS OF THE UPSTATE</b> 8 SYCAMORE DR STE A GREENVILLE, SC 29607 FAC.#:864-412-8800 PH#:	Greenville / Limited Liability GUARDIAN ANGELS OF THE UPSTATE <b>IHCP-0813 / 11/30/2018</b>	- 1
<b>Facility Email:</b> GUARDIANANGELSUPSTATE@GMAIL.COM		
<b>HANDS OF HOPE HEALTH CARE SERVICES</b> 217 E STONE AVE STE 16 GREENVILLE, SC 29609-5655 FAC.#:864-603-2610 PH#:	Greenville / Limited Liability 217 E STONE AVE GREENVILLE, SC 29609-5655 DENISE HILL <b>IHCP-0217 / 07/31/2018</b>	- 1
<b>Facility Email:</b> HANDSOFHOPEHCS@YAHOO.COM		
<b>HANDS THRU US HOMECARE</b> 1429 AUGUSTA ST GREENVILLE, SC 29605 FAC.#:864-609-4336 DILLARD DEANA PH#: 864-609-4336	Greenville / Corporation 1429 AUGUSTA RD GREENVILLE, SC 29605 HANDS THRU US HOMECARE INC <b>IHCP-0495 / 01/31/2019</b>	- 1
<b>Facility Email:</b> DDILLARD@HANDSTHRUUSHOMECARE.COM		
<b>HEAVENLY CARE SERVICES LLC</b> 1990 AUGUSTA ST STE 200 GREENVILLE, SC 29605 FAC.#:864-233-4272 PH#:	Greenville / Limited Liability 1990 AUGUSTA ST STE 200 GREENVILLE, SC 29605 HEAVENLY CARE SERVICES <b>IHCP-0056 / 01/31/2019</b>	- 1
<b>Facility Email:</b> E_JTAYLOR@HOTMAIL.COM		
<b>HELPERS OF THE VINE</b> 1200 WOODRUFF RD STE A-3 GREENVILLE, SC 29607 FAC.#:864-627-3134 DEWAR DONNA PH#: 864-363-1507	Greenville / Corporation 3620 PELHAM RD STE 5 #337 GREENVILLE, SC 29615 HELPERS OF THE VINE INC <b>IHCP-0625 / 05/31/2019</b>	- 1
<b>Facility Email:</b> DEWAR.DRD@GMAIL.COM		



County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>HOME CARE ASSISTANCE OF THE UPSTATE &amp; MIDLANDS</b> 7 BRENDAN WAY STE B GREENVILLE, SC 29615-3514 FAC.#:864-289-9897 PH#: Facility Email: SRUDD@HOMECAREASSISTANCE.COM	Greenville / Limited Liability 1255 OAKMED PKWY SUNNYVALE, CA 94085 HOME CARE ASSISTANCE OF SOUTH CAROLINA LLC <b>IHCP-0738 / 05/31/2019</b>	- 1
<b>HOME INSTEAD SENIOR CARE-GREENVILLE</b> 3505 PELHAM RD STE D GREENVILLE, SC 29615 FAC.#:864-242-2228 PH#: Facility Email: BETH.BRICE@HOMEINSTEAD.COM	Greenville / Limited Liability 3505 PELHAM RD STE D GREENVILLE, SC 29615 BRICE HOLDINGS LLC <b>IHCP-0557 / 06/30/2018</b>	- 1
<b>HOMEWELL SENIOR CARE</b> 1200 WOODRUFF RD STE A12 GREENVILLE, SC 29607-5753 FAC.#:864-509-0080 PH#: Facility Email: MHOLLOWAY@HOMEWELLSENIORCARE.COM	Greenville / Limited Liability 1200 WOODRUFF RD STE A12 GREENVILLE, SC 29607-5753 SC SENIOR HOME CARE LLC <b>IHCP-0161 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>HOPE &amp; GRACE LLC</b> 509 W POINSETT ST GREER, SC 29650-1554 FAC.#:864-848-1729 PH#: Facility Email: HOMEHELPERSGREER@HOTMAIL.COM	Greenville / Limited Liability 509 W POINSETT ST GREER, SC 29650-1554 HOPE & GRACE LLC <b>IHCP-0096 / 04/30/2019</b>	- 1
<b>HSSC HOMECARE</b> 301 HALTON RD STE D2 GREENVILLE, SC 29607 FAC.#:864-520-8388 BLUE TRACIE PH#: 864-979-0846 Facility Email: HSSCHOMECARE@GMAIL.COM	Greenville / Sole Proprietorship BLUE TRACIE <b>IHCP-0652 / 12/31/2018</b>	- 1
<b>IN HELPING HANDS LLC</b> 2 SHEARBROOK DR MAULDIN, SC 29662 FAC.#:864-346-5853 PH#: Facility Email: INHELPINGHANDSLLC@GMAIL.COM	Greenville / Sole Proprietorship 2 SHEARBROOK DR MAULDIN, SC 29662 IN HELPING HANDS LLC <b>IHCP-0530 / 06/30/2018</b>	- 1
<b>IN LOVING HANDS HOME CARE AGENCY</b> 611 N ACADEMY ST STE C GREENVILLE, SC 29601 FAC.#:864-400-9004 PH#: Facility Email: INLOVINGHANDSHOMECARE@GMAIL.COM	Greenville / Limited Liability 2320 E NORTH ST STE AA RM 111 GREENVILLE, SC 29607 IN LOVING HANDS HOME CARE AGENCY LLC <b>IHCP-0538 / 03/31/2019</b>	- 1
<b>INFINITY HOMECARE SERVICES LLC</b> 1 CHICK SPRINGS RD STE 101-F GREENVILLE, SC 29609-4953 FAC.#:864-962-4090 GIST SONYA M PH#: 864-558-0195 Facility Email: INFINITYHOMECARE.SC@GMAIL.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 101-F GREENVILLE, SC 29609-4953 INFINITY HOMECARE SERVICES LLC <b>IHCP-0475 / 11/30/2018</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>INTERIM HEALTHCARE OF THE UPSTATE PERSONAL CARE</b> 16 HYLAND RD GREENVILLE, SC 29615-5756 FAC.#:864-627-1200 SCHROEDER CHARYL M PH#: 864-627-1200 <b>Facility Email:</b> CHARYL.SCHROEDER@INTERIMCARES.COM	Greenville / Limited Liability 16 HYLAND RD GREENVILLE, SC 29615-5756 INVESTSOUTH IHC LLC <b>IHCP-0834 / 01/31/2019</b>	- 1
<b>LIVE LONG WELL CARE OF CASCADES RETIREMENT</b> 10 FOUNTAINVIEW TER GREENVILLE, SC 29607-4033 FAC.#:864-528-5111 PH#: <b>Facility Email:</b> ACLEMENTS@CASCADES-VERDAE.COM	Greenville / Limited Liability 10 FOUNTAINVIEW TER GREENVILLE, SC 29607-4033 LIVE LONG WELL CARE LLC <b>IHCP-0063 / 02/28/2019</b>	- 1
<b>LOVIN AND FAITHFUL TOUCH HOME CARE</b> 220 ARLINGTON AVE GREENVILLE, SC 29601 FAC.#:864-605-7474 PH#: <b>Facility Email:</b> NICAEARLE4@GMAIL.COM	Greenville / Limited Liability 220 ARLINGTON AVE GREENVILLE, SC 29601 LOVIN AND FAITHFUL TOUCH HOME CARE LLC <b>IHCP-0331 / 09/30/2017 (Renewal Pending)</b>	- 1
<b>LOVING AND GENTLE CARE</b> 2221 AUGUSTA ST GREENVILLE, SC 29605-1766 FAC.#:864-288-2617 PH#: <b>Facility Email:</b> SBRUTON@LGHOMECARE.COM	Greenville / Limited Liability Company (single member)  LOVING AND GENTLE CARE HOME HEALTH SERVICE LLC <b>IHCP-0006 / 12/31/2018</b>	- 1
<b>LOVING HANDS OF SC</b> 3113 N PLEASANTBURG DR STE D GREENVILLE, SC 29609 FAC.#:864-501-2032 PH#: <b>Facility Email:</b> ADMIN@LOVINGHANDSOFSOFC.COM	Greenville / 3113 N PLEASANTBURG DR STE D GREENVILLE, SC 29609 LOVING HANDS OF SC LLC <b>IHCP-0616 / 12/31/2018</b>	- 1
<b>LOVING HEART HEALTH CARE</b> 44 PINE KNOLL DR STE H-5 GREENVILLE, SC 29609 FAC.#:864-558-0120 PH#: <b>Facility Email:</b> LHHCL6@GMAIL.COM	Greenville / Limited Liability 1105 S MAIN ST FOUNTAIN INN, SC 29644 LOVING HEART HEALTH CARE LLC <b>IHCP-0547 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>LOVING THY NEIGHBOR HOMECARE SERVICES</b> 58A PKWY COMMONS WAY GREER, SC 29650 FAC.#:864-991-3252 PH#: <b>Facility Email:</b> LTNHOMECARE@GMAIL.COM	Greenville / Limited Liability 58A PKWY COMMONS WAY GREER, SC 29650 LOVING THY NEIGHBOR HOMECARE SERVICES LLC <b>IHCP-0797 / 09/30/2018</b>	- 1
<b>MAXIM HEALTHCARE SERVICES INC - GREENVILLE</b> 555 N PLEASANTBURG DR STE 100 GREENVILLE, SC 29607-2180 FAC.#:864-242-1994 MCDOWELL JOE PH#: 864-242-1994 <b>Facility Email:</b> LICENSING@MAXHEALTH.COM	Greenville / Corporation 7227 LEE DEFOREST DR COLUMBIA, MD 21046-3236 MAXIM HEALTHCARE SERVICES INC <b>IHCP-0408 / 09/30/2018</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>MTS MORE THAN SITTERS LLC</b> 145 COMMONS WAY GREENVILLE, SC 29611-3850 FAC.#:864-236-8264 PH#: Facility Email: MORETHANSITTERSLLC@GMAIL.COM	Greenville / Limited Liability 145 COMMONS WAY GREENVILLE, SC 29611-3850 MTS MORE THAN SITTERS LLC <b>IHCP-0305 / 08/31/2018</b>	- 1
<b>OATHS LLC</b> 716 E FAIRFIELD RD STE 126 GREENVILLE, SC 29605 FAC.#:864-568-8383 LITTLE SHANNON PH#: Facility Email: SHANNON.OATHS@GMAIL.COM	Greenville / Limited Liability 716 E FAIRFIELD STE 126 GREENVILLE, SC 29605 OATHS LLC <b>IHCP-0492 / 03/31/2019</b>	- 1
<b>OPTIMUM HEALTHCARE LLC</b> 622-A OLD EASLEY HWY GREENVILLE, SC 29611-6521 FAC.#:864-552-1114 PH#: Facility Email: TONYA_B25@YAHOO.COM	Greenville / Limited Liability 622A OLD EASLEY HWY GREENVILLE, SC 29611-6521 OPTIMUM HEALTHCARE LLC <b>IHCP-0048 / 01/31/2019</b>	- 1
<b>PALMETTO HOME CARE UPSTATE LLC</b> 25 WOODS LAKE RD STE 301 GREENVILLE, SC 29607-2762 FAC.#:864-272-1973 PH#: Facility Email: PHCUPSTATE@GMAIL.COM	Greenville / Corporation 25 WOODS LAKE RD STE 301 GREENVILLE, SC 29607-2762 PALMETTO HOME CARE UPSTATE LLC <b>IHCP-0421 / 10/30/2018</b>	- 1
<b>PEACE AT HOME HOME CARE SERVICES</b> 1314 N MAIN ST STE C FOUNTAIN INN, SC 29644 FAC.#:864-757-1009 PH#: Facility Email: PEACEATHOMECARE@GMAIL.COM	Greenville / Limited Liability PEACE AT HOME HOME CARE SERVICES LLC <b>IHCP-0859 / 04/30/2019</b>	- 1
<b>PERSONAL CAREGIVERS LLC</b> 9 SHOPPERS DR GREENVILLE, SC 29607 FAC.#:864-520-2136 PH#: Facility Email: PERSONALCAREGIVER29@YAHOO.COM	Greenville / Limited Liability PO BOX 6996 GREENVILLE, SC 29607 PERSONAL CAREGIVERS LLC <b>IHCP-0426 / 04/30/2019</b>	- 1
<b>PLAN HOME CARE</b> 1011 GROVE RD STE A-2 GREENVILLE, SC 29605-4660 FAC.#:864-242-2555 PH#: Facility Email: PHHCGREENVILLE@BELLSOUTH.NET	Greenville / Corporation PO BOX 9238 GREENVILLE, SC 29605 PLAN HOME CARE <b>IHCP-0223 / 07/31/2018</b>	- 1
<b>PRIME HOME CARE SERVICES</b> 105 ARBORDALE LN SIMPSONVILLE, SC 29680 FAC.#:864-967-3251 PH#: Facility Email: PHCS17@YAHOO.COM	Greenville / Limited Liability 105 ARBORDALE LN SIMPSONVILLE, SC 29680 PRIME HOME CARE SERVICES LLC <b>IHCP-0811 / 01/31/2019</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>PROFESSIONAL TOUCH HOMECARE SERVICES</b> 1 CHICK SPRING RD STE 201-B GREENVILLE, SC 29609 FAC. #:864-509-0110 PH#: Facility Email: WPEPPER620@GMAIL.COM	Greenville / Limited Liability 1 CHICK SPRINGS RD STE 201-B GREENVILLE, SC 29609 PROFESSIONAL TOUCH HOMECARE SERVICES <b>IHCP-0664 / 01/31/2019</b>	- 1
<b>PROVIDED CARE IN HOME SERVICES LLC</b> 25 WOODS LAKE RD STE 410 GREENVILLE, SC 29607-2763 FAC. #:864-200-2796 PH#: Facility Email: PROVIDEDCAREINHOMESERVICES@GMAIL.COM	Greenville / Limited Liability 25 WOODS LAKE RD STE 410 GREENVILLE, SC 29607-2763 PROVIDED CARE IN HOME SERVICES LLC <b>IHCP-0499 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>PROVIDENCE HOME CARE SOLUTIONS</b> 151 COMMONS WAY GREENVILLE, SC 29611 FAC. #:864-626-3154 GADSON-HUGHES SHERRY PH#: 864-626-3154 Facility Email: GSMHOMECARE@GMAIL.COM	Greenville / Limited Liability 151 COMMONS WAY GREENVILLE, SC 29611 GMS HOME CARE INC <b>IHCP-0306 / 09/30/2018</b>	- 1
<b>QUALITY CARE IN HOME CARE SERVICES LLC</b> 904 PENDLETON ST GREENVILLE, SC 29601-2314 FAC. #:864-271-4485 PH#: Facility Email: RW@QUALITYCAREPROVIDER.COM	Greenville / Limited Liability PO BOX 9042 GREENVILLE, SC 29604-9042 QUALITY CARE IN HOME CARE SERVICES LLC <b>IHCP-0429 / 01/31/2019</b>	- 1
<b>RESCARE HOMECARE GREENVILLE</b> 1350 CLEVELAND ST STE B GREENVILLE, SC 29607-2457 FAC. #:864-235-5141 YOUNG SHIRLEY PH#: 803-641-6953 Facility Email: SHIRLEY.YOUNG@RESCARE.COM	Greenville / Corporation 1350 CLEVELAND ST STE B GREENVILLE, SC 29607-2457 SOUTHERN HOME CARE SERVICES INC DBA RESCARE HOMECARE <b>IHCP-0014 / 05/31/2019</b>	- 1
<b>RIGHT AT HOME - GREENVILLE SC</b> 3401 HWY 153 STE D PIEDMONT, SC 29673 FAC. #:864-609-1656 PH#: Facility Email: RENEE@RAHUPSTATE.COM	Greenville / Limited Liability PO BOX 747 CLEMSON, SC 29633 UPSTATE INTEGRITY LLC <b>IHCP-0159 / 05/31/2019</b>	- 1
<b>ROLLING GREEN VILLAGE HOME CARE</b> 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FAC. #:864-987-9800 PH#: Facility Email: ABBIEB@ROLLINGGREENVILLAGE.COM	Greenville / Corporation 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 ROLLING GREEN VILLAGE RETIREMENT COMMUNITY <b>IHCP-0323 / 08/31/2018</b>	- 1
<b>SAMARITAN BED AND BATH SERVICES INC</b> 403 N MAIN ST TRAVELERS REST, SC 29690-1528 FAC. #:864-834-4848 PH#: Facility Email: SAMARITAN12@AOL.COM	Greenville / Corporation 403 N MAIN ST TRAVELERS REST, SC 29690-1528 SAMARITAN BED AND BATH SERVICES INC <b>IHCP-0439 / 09/30/2018</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>SELECT ONE HEALTHCARE SOLUTIONS LLC</b> 107 COMMONS WAY GREENVILLE, SC 29611 FAC.#:864-729-9841 FOLLIS CHALAINE PH#: 864-729-9841 <b>Facility Email:</b> SELECTONEHEALTHCARECF@GMAIL.COM	Greenville / Limited Liability 107 COMMONS WAY GREENVILLE, SC 29611 SELECT ONE HEALTHCARE SOLUTIONS LLC <b>IHCP-0330 / 09/30/2018</b>	- 1
<b>SENIOR HELPERS-GREENVILLE</b> 114 WILLIAMS ST STE B GREENVILLE, SC 29601 FAC.#:864-757-9862 PH#: <b>Facility Email:</b> CBOHMAN@SENIORHELPERS.COM	Greenville / Limited Liability 114 WILLIAMS ST STE B GREENVILLE, SC 29601 COURT CONCEPTS LLC <b>IHCP-0197 / 04/30/2019</b>	- 1
<b>SOUTHERN ARMS HOMECARE LLC</b> 12 PELHAM RD STE A GREENVILLE, SC 29615 FAC.#:864-509-9031 PH#: <b>Facility Email:</b> SOUTHERNARMSHOMECARE@GMAIL.COM	Greenville / Limited Liability 12 PELHAM RD STE A GREENVILLE, SC 29615 SOUTHERN ARMS HOMECARE LLC <b>IHCP-0328 / 09/30/2018</b>	- 1
<b>SUPERIOR CARE IN HOME SERVICES</b> 25 WOODS LAKE RD STE 307 GREENVILLE, SC 29607 FAC.#:864-200-2796 DOGAN TRAVIS PH#: 864-200-2796 <b>Facility Email:</b> SUPERIORCAREINHOME@GMAIL.COM	Greenville / Limited Liability  SUPERIOR CARE IN HOME SERVICES LLC <b>IHCP-0850 / 05/31/2019</b>	- 1
<b>SWEET &amp; GENTLE CARE HOMECARE AGENCY LLC</b> 716 E FAIRFIELD RD STE 122 GREENVILLE, SC 29605 FAC.#:864-474-5950 PH#: <b>Facility Email:</b> SWEETANDGENTLECAREHOMECARE@GMAIL.COM	Greenville / Sole Proprietorship  EICHELBERGER PATRICIA <b>IHCP-0849 / 03/31/2019</b>	- 1
<b>SYNERGY HOMECARE OF GREENVILLE</b> 439 CONGAREE ROAD #8 GREENVILLE, SC 29607 FAC.#:864-751-1913 PH#: <b>Facility Email:</b> SLAYEGH2323@YAHOO.COM	Greenville / Limited Liability 439 CONGAREE RD GREENVILLE, SC 29607 NOGIZAKA ASSOCIATES LLC <b>IHCP-0608 / 07/31/2018</b>	- 1
<b>THAD'S DAUGHTERS HEALTH CARE</b> 44 PINE KNOLL DR STE H-4 GREENVILLE, SC 29609 FAC.#:864-568-5353 PH#: <b>Facility Email:</b> NICIMICHELE03@YAHOO.COM	Greenville / Limited Liability 44 PINE KNOLL DR STE H-4 GREENVILLE, SC 29609 THAD'S DAUGHTERS HEALTH CARE LLC <b>IHCP-0766 / 01/31/2019</b>	- 1
<b>THE WOODLANDS AT FURMAN</b> 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 FAC.#:864-371-3100 BABBITT CAROL S PH#: 864-371-3100 <b>Facility Email:</b> CBABBITT@TWFASC.ORG	Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC <b>IHCP-0098 / 04/30/2019</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>TOTAL HOME CARE OF SOUTH CAROLINA</b> 1 CHICK SPRINGS RD STE 102 GREENVILLE, SC 29609-4913 FAC.#:864-631-1733 PH#: Facility Email: THHCSC@GMAIL.COM	Greenville / Sole Proprietorship 1 CHICK SPRINGS RD STE 102 GREENVILLE, SC 29609-4913 GWENDOLYN JACKSON E <b>IHCP-0138 / 05/31/2018 (Renewal Pending)</b>	- 1
<b>UPSTATE BE WELL HOME SERVICES</b> 429-C N MAIN ST GREENVILLE, SC 29601-2076 FAC.#:864-334-4663 VRANA CAROL LYNN PH#: 864-334-4663 Facility Email: CVRANA@BEWELLSHOMESERVICES.ORG	Greenville / Non-Profit Corporation 429-C N MAIN ST GREENVILLE, SC 29601-2076 LUTHERAN HOMES OF SOUTH CAROLINA INC <b>IHCP-0041 / 12/31/2018</b>	- 1
<b>UPSTATE HOME CARE SOLUTIONS</b> 113 W ANTRIM DR GREENVILLE, SC 29607 FAC.#:864-527-0455 PH#: Facility Email: JAMES@UPSTATEHOMECARESC.COM	Greenville / Limited Liability 113 W ANTRIM DR GREENVILLE, SC 29607 UPSTATE HOME HEALTH CARE SOLUTIONS LLC <b>IHCP-0109 / 04/30/2019</b>	- 1
<b>UPSTATE LIVING WATER</b> 340 BLAKELY AVE PIEDMONT, SC 29673 FAC.#:864-569-5977 PH#: Facility Email: KEITH@UPSTATELIVINGWATER.COM	Greenville / Limited Liability 340 BLAKELY AVE PIEDMONT, SC 29673 UPSTATE LIVING WATER LLC <b>IHCP-0754 / 10/31/2018</b>	- 1
<b>VISITING ANGELS - UPSTATE SC</b> 238 ADLEY WAY GREENVILLE, SC 29607-6511 FAC.#:864-284-6370 PH#: Facility Email: DANIEL@SCVISITINGANGELS.COM	Greenville / Limited Liability PO BOX 25304 GREENVILLE, SC 29616-0304 ANGEL HANDS LLC <b>IHCP-0289 / 07/31/2018</b>	- 1
<b>WINDSOR HOUSE HOMECARE</b> 1931 PELHAM RD GREENVILLE, SC 29615-4002 FAC.#:864-288-9450 WILSON RENEE PH#: 864-288-9450 Facility Email: CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO	Greenville / Limited Liability 1931 PELHAM RD GREENVILLE, SC 29615-4002 WINDSOR HOUSE HOMECARE LLC <b>IHCP-0806 / 11/30/2018</b>	- 1
<b>WORSHIPING HEARTS</b> 1200 WOODRUFF RD STE A 3 GREENVILLE, SC 29607 FAC.#:864-627-3113 PH#: Facility Email: WORSHIPINGHEARTS1315@YAHOO.COM	Greenville / Limited Liability 1200 WOODRUFF RD STE A 3 GREENVILLE, SC 29607 WORSHIPING HEARTS LLC <b>IHCP-0570 / 09/30/2018</b>	- 1
<b>XTRA HOMECARE SERVICES INC</b> 33 MARKET POINT DR GREENVILLE, SC 29607-5768 FAC.#:864-527-0466 PH#: Facility Email: PBLACK.XTRAHC@GMAIL.COM	Greenville / Corporation PO BOX 25249 GREENVILLE, SC 29616-0249 XTRA HOMECARE SERVICES INC <b>IHCP-0224 / 07/31/2018</b>	- 1

County: Greenville

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
YOUR PRIMARY CHOICE HOME CARE 501 W BUTLER RD STE E GREENVILLE, SC 29607 FAC.#:864-326-0004 PH#: Facility Email: PRIMARYCHOICEMED@GMAIL.COM	Greenville / Limited Liability 501 W BUTLER RD STE E GREENVILLE, SC 29607 YOUR PRIMARY CHOICE HOME CARE LLC IHCP-0770 / 11/30/2018	- 1

**Totals For Facility/License Type: Inhome Care Provider**

Number of Activities/Facilities licensed: 97      Number Licensed Units: - 97

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>ARBORETUM AT THE WOODLANDS</b> 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FAC.#:864-371-3100 BABBITT CAROL S PH#: 864-371-3100 Facility Email: CBABBITT@THEWOODLANDSATFURMAN.ORG	Greenville / Non-Profit Corporation 50 ARBORETUM LN GREENVILLE, SC 29617-6227 UPSTATE SENIOR LIVING INC <b>NCF-0957 / 06/30/2018</b>	30
--	--	----

Licensed Beds: Nursing Home: 30 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>BROOKDALE GREENVILLE</b> 1306 PELHAM RD GREENVILLE, SC 29615-3600 FAC.#:864-286-6600 HUNTER ANDREA M PH#: 864-286-6600 Facility Email: ANDREA.HUNTER@BROOKDALE.COM	Greenville / Corporation 1306 PELHAM RD GREENVILLE, SC 29615-3600 EMERICARE INC <b>NCF-0785 / 10/31/2018</b>	45
---	--	----

Licensed Beds: Nursing Home: 45 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>BRUSHY CREEK REHABILITATION AND HEALTHCARE CENTER</b> 101 COTTAGE CREEK CIR GREER, SC 29650-2438 FAC.#:864-797-8990 COTTINGHAM LINDSAY PH#: 864-797-8990 Facility Email: LCOTTINGHA@ORIANNA.COM	Greenville / Limited Liability 101 COTTAGE CREEK CIR GREER, SC 29650-2438 BRUSHY CREEK REHABILITATION AND HEALTHCARE CENTER LLC <b>NCF-0992 / 10/31/2018</b>	144
--	---	-----

Licensed Beds: Nursing Home: 144 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>CARLYLE SENIOR CARE OF FOUNTAIN INN</b> 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 FAC.#:864-862-2554 BAUGHMAN KATHY J PH#: 864-862-2554 Facility Email: RECRANFORD@CMCSENIORCARE.COM	Greenville / Limited Liability PO BOX 67 FOUNTAIN INN, SC 29644-0067 CARLYLE SENIOR CARE OF FOUNTAIN INN LLC <b>NCF-0985 / 07/31/2018</b>	60
---	---	----

Licensed Beds: Nursing Home: 60 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None



County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>GHS GREENVILLE MEMORIAL HOSPITAL SUBACUTE</b> 701 GROVE RD GREENVILLE, SC 29605 FAC.#:864-455-7112 TALBERT ADRIENNE PH#: 864-455-7112 Facility Email: NSALLY@GHS.ORG	Greenville / Corporation 300 E MCBEE AVE STE 402 GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION NCF-0989 / 10/31/2018	15
---	---	----

Licensed Beds: Nursing Home: 15 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>GREENVILLE REHABILITATION AND HEALTHCARE CENTER</b> 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 FAC.#:864-232-2442 BAYNARD BETHANY PH#: 864-232-2442 Facility Email: ZWOOD@ORIANNA.COM	Greenville / Ltd. Liability 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 GREENVILLE REHABILITATION AND HEALTHCARE CENTER LLC NCF-0805 / 07/31/2018	132
---	--	-----

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>GREER REHABILITATION AND HEALTHCARE CENTER</b> 401 CHANDLER RD GREER, SC 29651-1243 FAC.#:864-879-1370 WOOD ZACHARY PH#: 864-879-1370 Facility Email: ZWOOD@ORIANNA.COM	Greenville / Limited Liability 401 CHANDLER RD GREER, SC 29651-1243 GREER REHABILITATION AND HEALTHCARE CENTER LLC NCF-0908 / 12/31/2018	133
--	--	-----

Licensed Beds: Nursing Home: 133 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>HEARTLAND HEALTH CARE CENTER-GREENVILLE EAST</b> 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 FAC.#:864-246-2721 WILSON KATHLEEN S PH#: 864-246-2721 Facility Email: KATHLEEN.WILSON@HCR-MANORCARE.COM	Greenville / Limited Liability 333 N SUMMIT ST, LICENSURE SUPPORT TOLEDO, OH 43604-1531 OAKMONT EAST-GREENVILLE SC LLC NCF-0952 / 12/31/2018	132
---	--	-----

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Greenville

Facility Type: Nursing Home

Facility Name	County/Ownership Type	Licensed Units
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

<b>HEARTLAND HEALTH CARE CENTER-GREENVILLE WEST</b>	Greenville / Limited Liability	125
600 SULPHUR SPRINGS RD	333 N SUMMIT ST, LICENSURE SUPPORT	
GREENVILLE, SC 29617-1985 FAC.#:864-246-2721	TOLEDO, OH 43604-1531	
LOYD DEREK PH#: 000-000-0000	OAKMONT WEST-GREENVILLE SC LLC	
<b>Facility Email:</b> 4033ADMIN@HCR-MANORCARE.COM	<b>NCF-0953 / 12/31/2018</b>	

Licensed Beds: Nursing Home: 125 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>LINVILLE COURTS AT THE CASCADES VERDAE</b>	Greenville / Limited Liability	44
30 SPRINGCREST CT	30 SPRINGCREST CT	
GREENVILLE, SC 29607-4034 FAC.#:864-528-5529	GREENVILLE, SC 29607-4034	
HILL JR JAMES A PH#: 864-528-5529	CASCADES NURSING LLC	
<b>Facility Email:</b> JHILL@CASCADES-VERDAE.COM	<b>NCF-0956 / 04/30/2019</b>	

Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>MAGNOLIA MANOR-GREENVILLE</b>	Greenville / Ltd. Liability	99
411 ANSEL ST	411 ANSEL ST	
GREENVILLE, SC 29601-3499 FAC.#:864-232-5368	GREENVILLE, SC 29601-3499	
KNEELAND ROBERT E PH#: 864-232-5368	THI OF SOUTH CAROLINA AT GREENVILLE LLC	
<b>Facility Email:</b> ROBERT.KNEELAND@FUNDLTC.COM	<b>NCF-0860 / 08/31/2018</b>	

Licensed Beds: Nursing Home: 99 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>NHC HEALTHCARE GREENVILLE</b>	Greenville / Ltd. Liability	176
1305 BOILING SPRINGS RD	1305 BOILING SPRINGS RD	
GREER, SC 29650-4139 FAC.#:864-458-7566	GREER, SC 29650-4139	
MOORHOUSE BRYAN M PH#: 864-458-7566	NHC HEALTHCARE/GREENVILLE LLC	
<b>Facility Email:</b> BMOORHOUSE@NHCGREENVILLE.COM	<b>NCF-0807 / 06/30/2018</b>	

Licensed Beds: Nursing Home: 176 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<p><b>NHC HEALTHCARE MAULDIN</b> 850 E BUTLER RD GREENVILLE, SC 29607-5842 FAC.#:864-675-6421 DOBSON DEBORAH D PH#: 864-675-6421 <b>Facility Email:</b> DDOBSON@NHCMAULDIN.COM</p>	<p>Greenville / Ltd. Liability PO BOX 600 MAULDIN, SC 29662-0600 NHC HEALTHCARE/MAULDIN LLC <b>NCF-0796 / 06/30/2018</b></p>	<p>180</p>
--	--	------------

Licensed Beds: Nursing Home: 180 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

<p><b>PATEWOOD REHABILITATION AND HEALTHCARE CENTER</b> 2 GRIFFITH RD GREENVILLE, SC 29607-3504 FAC.#:864-990-1918 POLLARD TRACI PH#: 864-990-1918 <b>Facility Email:</b> TPOLLARD@ORIANNA.COM</p>	<p>Greenville / Limited Liability 2 GRIFFITH RD GREENVILLE, SC 29607-3504 PATEWOOD REHABILITATION AND HEALTHCARE CENTER LLC <b>NCF-0900 / 12/31/2018</b></p>	<p>120</p>
--	--	------------

Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<p><b>POINSETT REHABILITATION AND HEALTHCARE CENTER</b> 8 N TEXAS AVE GREENVILLE, SC 29611-5034 FAC.#:864-295-1331 ADDISON MICHELLE PH#: 864-295-1331 <b>Facility Email:</b> MADDISON@ORIANNA.COM</p>	<p>Greenville / Limited Liability 8 N TEXAS AVE GREENVILLE, SC 29611-5034 POINSETT REHABILITATION AND HEALTHCARE CENTER LLC <b>NCF-0903 / 11/30/2018</b></p>	<p>132</p>
---	--	------------

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<p><b>RIVER FALLS REHABILITATION AND HEALTHCARE CENTER</b> 2906 GEER HWY MARIETTA, SC 29661-9517 FAC.#:864-836-6381 HAMMETT WARREN PH#: 864-836-6381 <b>Facility Email:</b> WHAMMETT@ORIANNA.COM</p>	<p>Greenville / Limited Liability 2906 GEER HWY MARIETTA, SC 29661-9517 RIVER FALLS REHABILITATION AND HEALTHCARE CENTER LLC <b>NCF-0920 / 11/30/2018</b></p>	<p>44</p>
--	---	-----------

Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Greenville

Facility Type: Nursing Home

Facility Name	County/Ownership Type	Licensed Units
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

<b>ROLLING GREEN VILLAGE HEALTH CARE FACILITY</b>	Greenville / Non-Profit Corporation	74
1 HOKE SMITH BLVD	1 HOKE SMITH BLVD	
GREENVILLE, SC 29615-5308 FAC.#:864-987-9800	GREENVILLE, SC 29615-5308	
TOERNER RYAN PH#: 864-987-9800	ROLLING GREEN VILLAGE	
<b>Facility Email:</b> RYANT@ROLLINGGREENVILLAGE.COM	<b>NCF-0456 / 10/31/2018</b>	

Licensed Beds: Nursing Home: 74 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>SIMPSONVILLE REHABILITATION AND HEALTHCARE CENTER</b>	Greenville / Limited Liability	132
807 SE MAIN ST	807 SE MAIN ST	
SIMPSONVILLE, SC 29681-7150 FAC.#:864-963-6069	SIMPSONVILLE, SC 29681-7150	
MANGRUM KIMBERLY PH#: 864-963-6069	SIMPSONVILLE REHABILITATION AND HEALTHCARE CENTER LLC	
<b>Facility Email:</b> KMANGRUM@ORIANNA.COM	<b>NCF-0905 / 11/30/2018</b>	

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

<b>SOUTHPOINTE HEALTHCARE AND REHABILITATION</b>	Greenville / Ltd. Liability	120
35 SOUTHPOINTE DR	35 SOUTHPOINTE DR	
GREENVILLE, SC 29607-5956 FAC.#:864-288-1415	GREENVILLE, SC 29607-5956	
BROOME KIRK PH#: 864-288-1415	THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT GREENVILLE LLC	
<b>Facility Email:</b> Not on File	<b>NCF-0869 / 08/31/2018</b>	

Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

**Totals For Facility/License Type: Nursing Home**

Number of Activities/Facilities licensed: 19      Number Licensed Units: 1,937

County: Greenville

Facility Type: PSAD Inpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>PHOENIX CENTER DETOXIFICATION SERVICES</b> 130 INDUSTRIAL DR GREENVILLE, SC 29607-3241 FAC.#:864-467-3770 VINSON GWEN J PH#: 864-467-3770 Facility Email: JOWENS@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0024 / 05/31/2019	16
<b>Licensed Beds:Medical Detox: 16 Social Detox: 0 Res. Treatment Program: 0</b>		
<b>SERENITY PLACE</b> 6 DUNEAN ST GREENVILLE, SC 29611-6089 FAC.#:864-467-3751 SMITH KIMBLEY PH#: 864-360-6579 Facility Email: KIMSMITH@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0011 / 05/31/2018 (Renewal Pending)	16
<b>Licensed Beds:Medical Detox: 0 Social Detox: 0 Res. Treatment Program: 16</b>		
<b>WHITE HORSE ACADEMY</b> 975 FOOT HILLS RD GREENVILLE, SC 29617-6136 FAC.#:864-371-1280 SERRICCHIO ELIZABETH PH#: Facility Email: ESRRICCHIO@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0030 / 05/31/2019	16
<b>Licensed Beds:Medical Detox: 0 Social Detox: 0 Res. Treatment Program: 16</b>		

<b>Totals For Facility/License Type: <u>PSAD Inpatient</u></b>		
<b>Number of Activities/Facilities licensed:</b>	<b>3</b>	<b>Number Licensed Units: 48</b>

County: Greenville

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>ADDCARE COUNSELING</b>		
413 VARDRY ST STE 7 GREENVILLE, SC 29601-3331 FAC.#:864-467-1319 BRADY ANGELA T PH#: 864-467-1319 Facility Email: ANGELA@ADDCARECOUNSELING.COM	Greenville / Corporation 413 VARDRY ST STE 7 GREENVILLE, SC 29601-3331 ADDCARE COUNSELING INC OTP-0083 / 12/31/2018	1
<b>Certifications:None</b>		
<b>CROSSROADS TREATMENT CENTER OF GREENVILLE</b>		
157 BROZZINI CT GREENVILLE, SC 29615-5340 FAC.#:864-288-7636 CRUMPTON KATIE PH#: 864-288-7636 Facility Email: KCRUMPTON@CROSSROADSTREATMENTCENTERS.COM	Greenville / Professional Corporation 105 N SPRING ST STE 109 GREENVILLE, SC 29601-2859 CROSSROADS TREATMENT CENTER OF GREENVILLE PC OTPN-0077 / 09/30/2018	1
<b>Certifications:Narcotics Treatment Program, Methodone Treatment Program</b>		
<b>DON FOSTER AND ASSOCIATES</b>		
104 MILLS AVE GREENVILLE, SC 29605-4018 FAC.#:864-235-5666 FOSTER DON K PH#: 864-235-5666 Facility Email: DFAINC@BELLSOUTH.NET	Greenville / Corporation 104 MILLS AVE GREENVILLE, SC 29605-4018 DON FOSTER AND ASSOCIATES INC OTP-0051 / 03/31/2019	4
<b>Certifications:None</b>		
<b>DRUG COURT TREATMENT GROUP</b>		
305 E NORTH ST STE 320 GREENVILLE, SC 29601-2113 FAC.#:864-467-8277 EDWARDS PATRICIA PH#: 864-467-8277 Facility Email: PAEDWARDS@GREENVILLECOUNTY.ORG	Greenville / State 305 E NORTH ST STE 320 GREENVILLE, SC 29601-2113 13TH CIRCUIT SOLICITORS OFFICE OTP-0001 / 06/30/2018	2
<b>Certifications:None</b>		
<b>GREENVILLE COUNTY DETENTION CENTER (OTP)</b>		
20 MCGEE ST, DETENTION CENTER GREENVILLE, SC 29601-2299 FAC.#:864-467-2422 LIVINGSTON MARIE PH#: 864-467-2384 Facility Email: MLIVINGSTON@GREENVILLECOUNTY.ORG	Greenville / County 20 MCGEE ST, DETENTION CENTER GREENVILLE, SC 29601-2299 GREENVILLE COUNTY COUNCIL OTP-0089 / 08/31/2018	1
<b>Certifications:None</b>		
<b>GREENVILLE METRO TREATMENT CENTER</b>		
602 AIRPORT RD STE C GREENVILLE, SC 29607-2617 FAC.#:864-234-7952 WALLACE BONNIE PH#: 864-234-7952 Facility Email: DSWHITE@CMGLP.COM	Greenville / Limited Liability 559 SOUTH PARKWAY STE 270 ORLANDO, FL 32819-9017 METRO TREATMENT OF SOUTH CAROLINA OTPN-0091 / 02/28/2019	1
<b>Certifications:Narcotics Treatment Program, Methodone Treatment Program</b>		

County: Greenville

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

<b>HOPE FOR FAMILIES RECOVERY CENTER</b> 136 MILESTONE WAY GREENVILLE, SC 29615 FAC.#:864-906-2395 HOLLINGSWORTH AMBER M PH#: 864-906-2395 <b>Facility Email:</b> HOPEFORFAMILIES01@GMAIL.COM	Greenville / Limited Liability 136 MILESTONE WAY GREENVILLE, SC 29615 HOPE FOR FAMILIES RECOVERY CENTER LLC <b>OTP-0119 / 11/30/2018</b>	1
---	--	---

**Certifications:None**

<b>PAVILLON-GREENVILLE OUTPATIENT SERVICES</b> 101 PELHAM COMMONS BLVD GREENVILLE, SC 29615-4974 FAC.#:864-241-6688 SPEAR KENT N PH#: 864-241-6688 <b>Facility Email:</b> GREENVILLLEINFO@PAVILLON.ORG	Greenville / Non-Profit Corporation 101 PELHAM COMMONS BLVD GREENVILLE, SC 29615-4974 PAVILLON INTERNATIONAL <b>OTP-0102 / 11/30/2018</b>	1
--	---	---

**Certifications:None**

<b>PHOENIX CENTER OUTPATIENT SERVICES</b> 1400 CLEVELAND ST GREENVILLE, SC 29607-2410 FAC.#:864-467-3790 MCLAIN MICHAEL PH#: 864-467-3790 <b>Facility Email:</b> MMCLAIN@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE <b>OTP-0071 / 05/31/2019</b>	1
--	--	---

**Certifications:None**

<b>SOLUTIONS RECOVERY CENTER</b> 520 LOWNDES HILL RD GREENVILLE, SC 29607 FAC.#:864-567-7010 PH#:	Greenville / 207 WANTRIM DR GREENVILLE, SC 29607 SOLUTIONS RECOVERY CENTER INC <b>OTP-0180 / 01/31/2019</b>	0
--	---	---

**Certifications:None**

**Totals For Facility/License Type: PSAD Outpatient**

**Number of Activities/Facilities licensed: 10      Number Licensed Units: 13**

County: Greenville

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>DOWNTOWN GREENVILLE DIALYSIS</b> 297 PETE HOLLIS BLVD GREENVILLE, SC 29601-1143 FAC.#:864-232-9456 GAINES SAVANNAH PH#: 864-232-9456 Facility Email: SCL_C@DAVITA.COM	Greenville / Corporation 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC <b>ERD-0128 / 04/30/2018 (Renewal Pending)</b>	21
<b>Licensed Stations: Hemodialysis: 21 Peritoneal: 0</b>		
<b>GREENVILLE DIALYSIS CLINIC</b> 220 HOWE ST STE 220A GREENVILLE, SC 29601-3524 FAC.#:864-271-2002 GIBERT LISA PH#: 864-271-2002 Facility Email: LRGIBERT@AMERICANRENAL.COM	Greenville / Limited Liability 220 HOWE ST STE 220A GREENVILLE, SC 29601-3524 GREENVILLE DIALYSIS CLINIC LLC <b>ERD-0201 / 07/31/2018</b>	22
<b>Licensed Stations: Hemodialysis: 20 Peritoneal: 2</b>		
<b>GREER KIDNEY CENTER</b> 14152 E WADE HAMPTON BLVD GREER, SC 29651-1554 FAC.#:864-877-4432 WORLEY JENNIFER PH#: 864-877-8005 Facility Email: SCL_C@DAVITA.COM	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC <b>ERD-0027 / 12/31/2018</b>	21
<b>Licensed Stations: Hemodialysis: 21 Peritoneal: 0</b>		
<b>GREER SOUTH DIALYSIS</b> 3254 BRUSHY CREEK RD GREER, SC 29650-1000 FAC.#:864-801-2065 BENNETT CHRISTINA F PH#: 864-801-2065 Facility Email: SHARON.E.SCOTT@DAVITA.COM	Greenville / Corporation 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC <b>ERD-0162 / 04/30/2019</b>	21
<b>Licensed Stations: Hemodialysis: 21 Peritoneal: 0</b>		
<b>GREER SOUTH HOME TRAINING</b> 3254 BRUSHY CREEK RD STE A GREER, SC 29650-1000 FAC.#:864-877-9157 GOLDEN DOUGLAS PH#: 864-801-2065 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Greenville / Limited Liability 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 LONGWORTH DIALYSIS LLC <b>ERD-0202 / 08/31/2018</b>	3
<b>Licensed Stations: Hemodialysis: 0 Peritoneal: 3</b>		
<b>U S RENAL CARE GREENVILLE DIALYSIS</b> 1004 GROVE RD GREENVILLE, SC 29605 FAC.#:864-242-0802 JONES MIYAKO PH#: 864-242-0802 Facility Email: LEGAL@USRENALCARE.COM	Greenville / Corporation PO BOX 251549 PLANO, TX 75025-1500 DIALYSIS NEWCO INC <b>ERD-0169 / 09/30/2018</b>	37
<b>Licensed Stations: Hemodialysis: 37 Peritoneal: 0</b>		



County: Greenville

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>U S RENAL CARE PLEASANTBURG DIALYSIS</b> 110 CHALMERS RD STE C GREENVILLE, SC 29605-1351 FAC.#:864-558-2365 PEPPER SELMA PH#: 864-299-2365 Facility Email: LEGAL@USRENALCARE.COM	Greenville / Corporation PO BOX 251549 PLANO, TX 75025-1500 DIALYSIS NEWCO INC <b>ERD-0168 / 09/30/2018</b>	16
<b>Licensed Stations: Hemodialysis: 16 Peritoneal: 0</b>		
<b>U S RENAL CARE PLEASANTBURG HOME DIALYSIS</b> 110 CHALMERS RD STE D GREENVILLE, SC 29605-1351 FAC.#:864-558-2380 SFEIR RN MARSHA A PH#: 864-558-2375 Facility Email: LEGAL@USRENALCARE.COM	Greenville / Limited Liability PO BOX 251549 PLANO, TX 75025-1458 DSI GREENVILLE LLC <b>ERD-0194 / 09/30/2018</b>	3
<b>Licensed Stations: Hemodialysis: 0 Peritoneal: 3</b>		
<b>U S RENAL CARE POWDERHORN DIALYSIS</b> 16 POWDERHORN RD SIMPSONVILLE, SC 29681-3399 FAC.#:864-962-2222 CAGLE MELISSA PH#: 864-962-2222 Facility Email: LEGAL@USRENALCARE.COM	Greenville / Corporation PO BOX 251549 PLANO, TX 75025-1458 DIALYSIS NEWCO INC <b>ERD-0127 / 09/30/2018</b>	21
<b>Licensed Stations: Hemodialysis: 21 Peritoneal: 0</b>		
<b>UPSTATE DIALYSIS CENTER</b> 308 MILLS AVE GREENVILLE, SC 29605-4022 FAC.#:864-271-3700 GAINES SAVANNAH PH#: 864-271-3700 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC <b>ERD-0098 / 09/30/2018</b>	34
<b>Licensed Stations: Hemodialysis: 30 Peritoneal: 4</b>		
<b>US RENAL CARE TRAVELERS REST DIALYSIS</b> 36 S MAIN ST TRAVELERS REST, SC 29690 FAC.#:864-660-2050 STARKS FELICIA PH#: 864-660-2050 Facility Email: LEGAL@USRENALCARE.COM	Greenville / Limited Liability PO BOX 251549 PLANO, TX 75025-1500 DSI TRAVELERS REST LLC <b>ERD-0235 / 04/30/2019</b>	13
<b>Licensed Stations: Hemodialysis: 13 Peritoneal: 0</b>		

<b>Totals For Facility/License Type: <u>Renal Dialysis</u></b>	
Number of Activities/Facilities licensed: <u>11</u>	Number Licensed Units: <u>212</u>

County: Greenville

Facility Type: Residential Treatment for Children & Adolescents

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>EXCALIBUR YOUTH SERVICES</b> 3683 S INDUSTRIAL DR SIMPSONVILLE, SC 29681-3238 FAC.#:864-836-7220 SHORT JOHN M PH#: 864-836-7220 <b>Facility Email:</b> JSHORT@RECOVEROURYOUTH.ORG	Greenville / Limited Liability PO BOX 968 TRAVELERS REST, SC 29690-0968 EXCALIBUR YOUTH SERVICES LLC <b>RTF-0022 / 12/31/2018</b>	60
<b>GENERATIONS RESIDENTIAL PROGRAMS</b> 841 DUNKLIN BRIDGE RD FOUNTAIN INN, SC 29644 FAC.#:864-243-5557 MOORE CASEY PH#: 864-243-5557 <b>Facility Email:</b> BRIAN@GENERATIONSGROUP.COM	Greenville / Non-Profit Corporation PO BOX 80009 SIMPSONVILLE, SC 29680-0001 GENERATIONS RESIDENTIAL PROGRAMS INC <b>RTF-0027 / 08/31/2018</b>	30
<b>GHS MARSHALL I PICKENS HOSPITAL CHILDREN'S PROGRAM</b> 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-4807 CHISOLM TROY PH#: 864-455-4807 <b>Facility Email:</b> NSALLY@GHS.ORG	Greenville / Non-Profit Corporation 300 E MCBEE AVE STE 402 GREENVILLE, SC 29601-2890 UPSTATE AFFILIATE ORGANIZATION <b>RTF-0031 / 10/31/2018</b>	22
<b>SPRINGBROOK BEHAVIORAL HEALTH SYSTEM RTF</b> 1 HAVENWOOD LN STE B TRAVELERS REST, SC 29690-9447 FAC.#:864-834-8013 ROWLEY MICHAEL PH#: 864-834-8013 <b>Facility Email:</b> LISA.MCJUNKIN@SPRINGBROOKBHS.COM	Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690-1005 CHESTNUT HILL MENTAL HEALTH CENTER INC <b>RTF-0001 / 08/31/2018</b>	68

<b>Totals For Facility/License Type: <u>Residential Treatment for Children &amp; Adolescents</u></b>	
<b>Number of Activities/Facilities licensed:</b> _____	<b>Number Licensed Units:</b> _____
4	180

County: Greenville

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>MAGIC ROOSTER TATTOO</b> 255 W BUTLER RD MAULDIN, SC 29662-2536 FAC.#:864-400-8548 PENCE JEFFREY L PH#: Facility Email: JEFFPENCETATTOOS@GMAIL.COM	Greenville / Limited Liability Company (single member) SIMPSONVILLE, SC 29680-7382 MAGIC ROOSTER TATTOO LLC TF-0181 / 02/28/2019	4
<b>MAIN STREET STUDIO</b> 303 N MAIN ST STE B MAULDIN, SC 29662-2303 FAC.#:864-509-0099 BURRIS TIMOTHY & LINDSEY PH#: 864-380-1681 Facility Email: TATTOOJASON75@YAHOO.COM	Greenville / Sole Proprietorship 303 N MAIN ST STE B MAULDIN, SC 29662-2303 BURRIS TIMOTHY & LINDSEY TF-0156 / 05/31/2019	4
<b>MAIN STREET TATTOO ON WOODRUFF</b> 1178 WOODRUFF RD STE 7 GREENVILLE, SC 29607-4126 FAC.#:864-991-8395 BURRIS TIMOTHY JASON PH#: 864-991-8395 Facility Email: MAINSTREETONWOODRUFF@GMAIL.COM	Greenville / Limited Liability MAIN STREET TATTOO LLC TF-0145 / 08/31/2018	5
<b>PHYSICAL GRAFFITI SOUTH</b> 475 HAYWOOD RD UNIT 8 GREENVILLE, SC 29607-4364 FAC.#:864-991-8564 HALL ALLISON J PH#: 864-991-8564 Facility Email: AHTATTOOS75@GMAIL.COM	Greenville / 475 HAYWOOD RD UNIT 8 GREENVILLE, SC 29607-4364 RECKLESS HEART LLC TF-0292 / 03/31/2019	1

<b>Totals For Facility/License Type: <u>Tattoo Facility</u></b>	
Number of Activities/Facilities licensed: <u>4</u>	Number Licensed Units: <u>14</u>

Number of Activities/Facilities licensed in county of : <u>Greenville</u>	# Lics: <u>251</u>
	Number Licensed Units : <u>7,446</u>

Report Totals

Total Number of Activities/Facilities licensed: 251 Total Number Licensed Units: 7,446