

County: Orangeburg

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>ORANGEBURG ADULT DAY CARE</b> 1110 WHITMAN ST ORANGEBURG, SC 29115-6151 FAC.#:803-531-6388 DYCHES VERNETTE D PH#: 803-531-6388 Facility Email: ORANGEBURGADULTDAYCARE@YAHOO.COM	Orangeburg / Corporation 1110 WHITMAN ST ORANGEBURG, SC 29115-6151 ORANGEBURG ADULT DAY CARE INC <b>ADC-0151 / 11/30/2018</b>	25
<b>Number of Participants: 25</b>		
<b>SANTEE ADULT DAYCARE</b> 1580 BASS DR SANTEE, SC 29142 FAC.#:803-854-2401 SEABROOKS MELVIN PH#: 803-854-2401 Facility Email: SANTEEADULTCARE@YAHOO.COM	Orangeburg / Ltd. Liability PO BOX 947 SANTEE, SC 29142-0947 SANTEE ADULT DAY CARE LLC <b>ADC-0269 / 03/31/2018</b>	21
<b>Number of Participants: 21</b>		
<b>THE OAKS PACE</b> 153 FOUNDERS CT ORANGEBURG, SC 29118-2087 FAC.#:803-268-5300 TILL ELAINE M PH#: 803-268-5300 Facility Email: ETILL@THEOAKSSC.COM	Orangeburg / Non-Profit Corporation 153 FOUNDERS CT ORANGEBURG, SC 29118-2087 METHODIST OAKS INC <b>ADC-0279 / 09/30/2018</b>	90
<b>Number of Participants: 90</b>		
<b>TOTAL COMFORT ADULT DAY CARE</b> 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 FAC.#:803-496-1076 SINGLETON ROBERSINE PH#: 803-496-1076 Facility Email: JAZZ1967@EMBARQMAIL.COM	Orangeburg / Limited Liability 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 TOTAL COMFORT ADULT DAY CARE LLC <b>ADC-0205 / 07/31/2018</b>	18
<b>Number of Participants: 18</b>		

<b>Totals For Facility/License Type: <u>Adult Day Care</u></b>	
<b>Number of Activities/Facilities licensed: _____ 4</b>	<b>Number Licensed Units: _____ 154</b>

**County: Orangeburg**

**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>ALDERSGATE AT THE OAKS</b> 921 METHODIST OAKS DR ORANGEBURG, SC 29115-1814 FAC.#:803-531-2332 JENKINS LAVEDA B PH#: 803-531-2332 Facility Email: 921AOAKS@GMAIL.COM	Orangeburg / Non-Profit Corporation 921 METHODIST OAKS DR ORANGEBURG, SC 29115-1814 ALDERSGATE SPECIAL NEEDS MINISTRY CRC-1488 / 02/28/2018	6
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>ALEXANDER'S GOLDEN STARR COMMUNITY CARE HOME</b> 218 GOLDEN STARR RD SANTEE, SC 29142-9363 FAC.#:803-854-2496 OUTLAW-THOMAS DONNA S PH#: 803-854-2496 Facility Email: DONNAOUTLAW62@YAHOO.COM	Orangeburg / Sole Proprietorship PO BOX 405 SANTEE, SC 29142-0405 DONNA S OUTLAW-THOMAS CRC-0171 / 08/31/2018	8
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BACKHOME CARE FACILITY</b> 140 CHECKERBERRY LN EUTAWVILLE, SC 29048 FAC.#:843-753-3899 LEE NEOMIA C PH#: 843-753-3899 Facility Email: NCCBUTLERLEE@AOL.COM	Orangeburg / Corporation 1547 ADDIDAS ST EUTAWVILLE, SC 29048-9256 BACKHOME CARE FACILITY INC CRC-0567 / 01/31/2019	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BRIAN'S RESIDENTIAL CARE</b> 1115 WHITMAN ST ORANGEBURG, SC 29115-6150 FAC.#:803-533-1588 STOKES ALBERT O PH#: 803-533-1588 Facility Email: DSTOKES30@SC.RR.COM	Orangeburg / Partnership 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES CRC-0418 / 02/28/2019	7
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BRIAN'S RESIDENTIAL CARE II</b> 4003 CALHOUN ST BRANCHVILLE, SC 29432-2243 FAC.#:803-274-8051 STOKES DELAURA PH#: 803-274-8051 Facility Email: DSTOKES30@SC.RR.COM	Orangeburg / Partnership 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES CRC-0947 / 09/30/2018	20
Alzheimer Care:Yes      Max # Resident:1	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		

County: Orangeburg

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>CATHERINE'S MANOR II</b> 261 SUMMERS AVE ORANGEBURG, SC 29115-5421 FAC.#:803-539-0899 CARR JR GUSS PH#: 803-539-0899 Facility Email: EVERNECARR12@GMAIL.COM	Orangeburg / Sole Proprietorship 261 SUMMERS AVE ORANGEBURG, SC 29115-5421 GUSS CARR AS PERSONAL REPRESENTATIVE OF THE ESTATE OF CATHERINE CARR CRC-1033 / 08/31/2018	5
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>DALTONS CMC RESIDENTIAL CARE FACILITY</b> 1231 EUTAW ST ORANGEBURG, SC 29115-3529 FAC.#:803-997-2560 SANDS GERRICK S PH#: 803-531-6534 Facility Email: JOYVROBERTS13@GMAIL.COM	Orangeburg / Sole Proprietorship 1231 EUTAW ST ORANGEBURG, SC 29115-3529 CHERYL GIBSON-DALTON CRC-1447 / 07/31/2017 (Renewal Pending)	5
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>DREAMLAND RESIDENTIAL CARE</b> 6941 NORTH RD NORTH, SC 29112-8832 FAC.#:803-533-7492 WRIGHT DELORES M PH#: 803-533-7492 Facility Email: DELORESWRIGHT4@AOL.COM	Orangeburg / Sole Proprietorship 940 NORWAY RD ORANGEBURG, SC 29115-8754 DELORES M WRIGHT CRC-0795 / 12/31/2018	5
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>ELLIOTT'S RESIDENTIAL CARE HOME</b> 2432 LANDSDOWNE RD BOWMAN, SC 29018-9583 FAC.#:803-829-3348 LEVINS DEBORAH Y PH#: 803-829-3348 Facility Email: ELLIOTTSCAREHOME@GMAIL.COM	Orangeburg / Corporation PO BOX 265 BOWMAN, SC 29018-0265 ELLIOTT'S RESIDENTIAL CARE HOME INC CRC-0272 / 10/31/2018	7
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>GOLDEN YEARS</b> 139 SEMINOLE DR ORANGEBURG, SC 29115-7619 FAC.#:803-536-0060 SMITH-KELL JIMI LYN PH#: 803-536-0060 Facility Email: JL333SMITH@AOL.COM	Orangeburg / Sole Proprietorship PO BOX 1465 ORANGEBURG, SC 29116-1465 KELL JIMI LYN SMITH CRC-0333 / 02/28/2018	15
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		

County: Orangeburg

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>J J RESIDENTIAL CARE</b> 748 GREEN ST ORANGEBURG, SC 29115-4805 FAC.#:803-539-2604 IRICK BARBARA W PH#: 803-539-2604 Facility Email: Not on File	Orangeburg / Sole Proprietorship PO BOX 204 ORANGEBURG, SC 29116-0204 BARBARA W IRICK CRC-0831 / 09/30/2018	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>JOLLY REST MORE</b> 1488 GLOVER ST ORANGEBURG, SC 29115-6095 FAC.#:803-531-4386 SMITH-KELL JIMI L PH#: 803-531-4386 Facility Email: JL333SMITH@AOL.COM	Orangeburg / Sole Proprietorship PO BOX 1465 ORANGEBURG, SC 29116-1465 LYNN P SMITH CRC-0332 / 11/30/2018	10
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>LONGWOOD PLANTATION</b> 1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 FAC.#:803-535-0250 CALVERT RAYMOND D PH#: 803-535-0250 Facility Email: CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO	Orangeburg / Limited Liability 1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 LONGWOOD PLANTATION-FHE LLC CRC-0797 / 10/31/2018	42
Alzheimer Care:Yes      Max # Resident:16	Alzheimer Unit: Yes      Max # Beds: 16	
Certifications:None		
<b>METHODIST OAKS RESIDENTIAL CARE FACILITY</b> 1000 METHODIST OAKS DR ORANGEBURG, SC 29115-1813 FAC.#:803-534-1212 FANNING RACHEL B PH#: 803-534-1212 Facility Email: RACHEL.FANNING@THEOAKSSC.COM	Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC CRC-0910 / 05/31/2018	40
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>MORNINGSIDE OF ORANGEBURG</b> 2306 RIVERBANK DR ORANGEBURG, SC 29118-4046 FAC.#:803-539-2911 LILLY TAMMY PH#: 803-539-2911 Facility Email: LICENSING@5SQC.COM	Orangeburg / Ltd. Liability 400 CENTRE ST NEWTON, MA 02458-2094 MORNINGSIDE OF ORANGEBURG LLC CRC-1261 / 02/28/2018	49
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		

County: Orangeburg

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
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<b>PHAIRE'S CARE AT KATURA SPRINGS</b> 12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048-9167 FAC.#:803-492-7122 PHAIRE CARLTON PH#: 803-492-7122 Facility Email: PHAIREONE@AOL.COM	Orangeburg / Sole Proprietorship 12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048 PHAIRE CARLTON CRC-1301 / 06/30/2018	48
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Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

<b>SERENITY MANOR OF HOLLY HILL</b> 656 GARDNER BLVD HOLLY HILL, SC 29059-8450 FAC.#:803-496-3022 RILEY III LUTHER PH#: 803-496-3022 Facility Email: LUTHER.RILEY@YAHOO.COM	Orangeburg / Limited Liability 704 SHELLEY RD CHARLESTON, SC 29407-7023 SERENITY MANOR OF HOLLY HILL LLC CRC-1516 / 07/31/2018	5
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Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

<b>STOKES RESIDENTIAL CARE</b> 2525 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1319 FAC.#:803-533-0070 STOKES ALBERT O PH#: 803-533-0070 Facility Email: DSTOKES30@SC.RR.COM	Orangeburg / 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES CRC-0570 / 02/28/2019	17
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Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

<b>TYLER RESTMORE HOME</b> 1681 BROUGHTON ST ORANGEBURG, SC 29115-4873 FAC.#:803-536-0740 ANTLEY MICHELLE L PH#: 803-536-0740 Facility Email: MICHELLEANTLEY@ATT.NET	Orangeburg / Ltd. Liability 1681 BROUGHTON ST ORANGEBURG, SC 29115-4873 TYLER RESTMORE HOME LLC CRC-0841 / 07/31/2018	10
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Alzheimer Care:No      Max # Resident:0      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

<b>TYLER RESTMORE HOME #2</b> 195 SELLERS AVE ORANGEBURG, SC 29115-6724 FAC.#:803-531-2074 ANTLEY MICHELLE L PH#: 803-531-2074 Facility Email: MICHELLEANTLEY@ATT.NET	Orangeburg / 233 PERRYCLEAR ST ORANGEBURG, SC 29115-4513 TYLER RESTMORE HOME LLC CRC-0889 / 07/31/2018	9
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Alzheimer Care:Yes      Max # Resident:1      Alzheimer Unit: No      Max # Beds: 0

Certifications:None

Totals For Facility/License Type: <u>Community Residential Care Facility</u>	
Number of Activities/Facilities licensed: <u>20</u>	Number Licensed Units: <u>328</u>

County: Orangeburg

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>KINGS COMMUNITY RESIDENCE</b> 611 KINGS RD ORANGEBURG, SC 29116 FAC.#:803-536-1170 STEWARD VONDA PH#: 803-536-1170 <b>Facility Email:</b> DGOLDMINTZ@OCDSNB.ORG	Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0152 / 02/28/2018</b>	8
<b>NANCE COMMUNITY RESIDENCE</b> 980 NANCE ST ORANGEBURG, SC 29116 FAC.#:803-536-1170 STEWARD VONDA PH#: 803-536-1170 <b>Facility Email:</b> DGOLDMINTZ@OCDSNB.ORG	Orangeburg / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0153 / 02/28/2018</b>	8
<b>SIFLY COMMUNITY RESIDENCE</b> 171 WANNAMAKER ST ORANGEBURG, SC 29115-5073 FAC.#:803-536-1170 STEWARD VONDA PH#: 803-536-1170 <b>Facility Email:</b> DGOLDMINTZ@OCDSNB.ORG	Orangeburg / State PO BOX 4706, DDSN CO/ DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0219 / 06/30/2018</b>	8
<b>WANNAMAKER STREET COMMUNITY RESIDENCE</b> 250 WANNAMAKER ST ORANGEBURG, SC 29115-5067 FAC.#:803-536-1170 STEWARD VONDA PH#: 803-536-1170 <b>Facility Email:</b> DGOLDMINTZ@OCDSNB.ORG	Orangeburg / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0223 / 06/30/2018</b>	8

<b>Totals For Facility/License Type: <u>Habilitation R15</u></b>	
<b>Number of Activities/Facilities licensed: _____ 4</b>	<b>Number Licensed Units: _____ 32</b>

County: Orangeburg

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>HEMOCARE OF THE REGIONAL MEDICAL CENTER</b> 1895 SAINT MATTHEWS RD ORANGEBURG, SC 29118-2403 FAC.#:803-395-2600 WILLIAMS CHARLES PH#: 803-395-2454 Facility Email: RLBJARNESSEN@REGMED.COM	Orangeburg / County PO BOX 2352 ORANGEBURG, SC 29116-2352 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD) HHA-0122 / 01/31/2019	3

Counties Served: Bamberg, Calhoun, Orangeburg

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: SKILLED NURSING

<b>OAKS HOME HEALTH</b> 1000 METHODIST OAKS DR ORANGEBURG, SC 29116 FAC.#:803-534-1212 TILL ELAINE M PH#: 803-534-1212 Facility Email: ETILL@THEOAKSSC.COM	Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC HHA-0200 / 01/31/2019	1
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Counties Served: Orangeburg, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

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

Other:

Totals For Facility/License Type: <u>Home Health</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>4</u>

County: Orangeburg

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>EDISTO HOME CARE &amp; HOSPICE</b> 1180 BLVD ST STE C ORANGEBURG, SC 29115-4312 FAC.#:803-997-2882 JACKSON MELINDA PH#: 803-997-2882 <b>Facility Email:</b> KEVIN@EDISTOHOSPICE.COM	Orangeburg / Limited Liability  EDISTO HOME CARE & HOSPICE LLC <b>HPC-0218 / 06/30/2018</b>	10
<b>Counties Served: Aiken, Bamberg, Barnwell, Berkeley, Calhoun, Clarendon, Colleton, Dorchester, Lexington, Orangeburg</b>		

<b>GROVE PARK PHARMACY HOSPICE CARE</b> 1324 GROVE PARK NE ORANGEBURG, SC 29115-2455 FAC.#:803-536-6644 HARE DEBBIE B PH#: 803-536-6644 <b>Facility Email:</b> DEBBIE@GROVEPARKPHARMACY.COM	Orangeburg / Limited Liability PO BOX 701 ORANGEBURG, SC 29116-0701 GROVE PARK PHARMACY HOSPICE CARE LLC <b>HPC-0155 / 09/30/2018</b>	5
<b>Counties Served: Bamberg, Calhoun, Dorchester, Lexington, Orangeburg</b>		

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

**Number of Activities/Facilities licensed: 2      Number Licensed Units: 15**



County: Orangeburg

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>REGIONAL MEDICAL CENTER OF ORANGEBURG &amp; CALHOUN COUNTIES</b> 3000 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1496 FAC.#:803-395-2454 WILLIAMS CHARLES PH#: 803-395-2454 Facility Email: BLWILLIAMS@REGMED.COM	Orangeburg / County 3000 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1496 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD) HTL-0046 / 05/31/2018	286
Licensed Beds: General: 247    Psychiatric: 15    Rehab: 24    Substance Abuse: 0 Other Beds :    NICU: 0    Neonatal Special Care: 10		

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

<b>WILLIAM J MCCORD ADOLESCENT TREATMENT FACILITY</b> 910 COOK RD ORANGEBURG, SC 29118-2124 FAC.#:803-534-2328 DENNIS MIKE PH#: Facility Email: MDENNIS@TCCADA.STATE.SC.US	Orangeburg / County PO BOX 1166 ORANGEBURG, SC 29116-1166 TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE HTL-0619 / 10/31/2018	15
Licensed Beds: General: 0    Psychiatric: 15    Rehab: 0    Substance Abuse: 0 Other Beds :    NICU: 0    Neonatal Special Care: 0		

Certifications: JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>301</u>

## County: Orangeburg

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>ALL YOUR NEEDS HOME CARE SERVICES</b> 133 BLVD ST ORANGEBURG, SC 29115 FAC.#:803-997-2656 BENJAMIN YORONICA PH#: 803-997-2656 <b>Facility Email:</b> ALLYOURNEEDS@AYN-ONLINE.COM	Orangeburg / Limited Liability 133 BLVD ST ORANGEBURG, SC 29115 ALL YOUR NEEDS HOME CARE SERVICES LLC <b>IHCP-0744 / 07/31/2018</b>	- 1
<b>BELMONT LUXURY HOME CARE LLC</b> 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 FAC.#:803-496-1076 BRADSHAW RONALD PH#: 803-383-1277 <b>Facility Email:</b> BELMONTLUXURYHOMECARE@YAHOO.COM	Orangeburg / Limited Liability 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 BELMONT LUXURY HOME CARE LLC <b>IHCP-0302 / 09/30/2018</b>	- 1
<b>COLONY OF LOVE IN-HOME CARE PROVIDER</b> 1231-B AMELIA ST ORANGEBURG, SC 29118 FAC.#:803-260-0757 GIBSON SHARON PH#: 803-260-0757 <b>Facility Email:</b> COLONYOFLOVESENIORCARE@GMAIL.COM	Orangeburg / Corporation PO BOX 211821 COLUMBIA, SC 29221-6821 COLONY OF LOVE INC <b>IHCP-0691 / 03/31/2018</b>	- 1
<b>COMFORT HOME CARE OF SC</b> 1117 DOYLE ST ORANGEBURG, SC 29115-4797 FAC.#:803-261-1405 GREEN STAPHINE PH#: 803-261-1405 <b>Facility Email:</b> SAM.CHHC@GMAIL.COM	Orangeburg / Corporation 100 OLD CHEROKEE RD STE F LEXINGTON, SC 29072-7959 COMFORT HOME HEALTH CARE INC <b>IHCP-0369 / 10/31/2018</b>	- 1
<b>DEAN S PERSONAL CARE AND COMPANION SERVICES LLC</b> 2717 MAGNOLIA ST ORANGEBURG, SC 29115-2502 FAC.#:803-533-7410 PH#: <b>Facility Email:</b> MYERS_WD@YAHOO.COM	Orangeburg / Limited Liability 2717 MAGNOLIA ST ORANGEBURG, SC 29115-2502 DEAN S PERSONAL CARE AND COMPANION SERVICES LLC <b>IHCP-0172 / 06/30/2018</b>	- 1
<b>FIVE STAR HOME CARE SERVICES LLC</b> 161 CENTRE ST #1 ORANGEBURG, SC 29115-6043 FAC.#:803-534-2888 PH#: <b>Facility Email:</b> URVERYSINCERE@YAHOO.COM	Orangeburg / Limited Liability FIVE STAR HOME CARE SERVICES LLC <b>IHCP-0352 / 09/30/2018</b>	- 1
<b>LONGWOOD PLANTATION HOMECARE-FHE LLC</b> 1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 FAC.#:803-268-9990 CALVERT DOUG PH#: 803-268-9990 <b>Facility Email:</b> CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO	Orangeburg / Limited Liability 1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 LONGWOOD PLANTATION HOMECARE-FHE LLC <b>IHCP-0071 / 02/28/2019</b>	- 1
<b>NEW BEGINNINGS DIABETIC &amp; HOME CARE SERVICES INC</b> 1300 GLEN GLORIA ST ORANGEBURG, SC 29118-2538 FAC.#:803-531-3339 JARVIS FLORENDA GAIL PH#: 803-531-3339 <b>Facility Email:</b> NEWBEGINNINGS11@GMAIL.COM	Orangeburg / 1300 GLEN GLORIA ST ORANGEBURG, SC 29118-2538 NEW BEGINNINGS DIABETIC & HOME CARE SERVICES INC <b>IHCP-0241 / 07/31/2018</b>	- 1

County: Orangeburg

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>ROPHEKA CARES LLC</b> 1408 RUSSELL ST STE 11 ORANGEBURG, SC 29115-6071 FAC.#:803-515-4617 PH#:	Orangeburg / Limited Liability PO BOX 1704 ORANGEBURG, SC 29116 ROPHEKA CARES LLC <b>IHCP-0230 / 07/31/2018</b>	- 1
<b>SAFE HAVEN IN-HOME CARE LLC</b> 754 BASS DR SANTEE, SC 29142 FAC.#:803-854-0800 MYERS WILLIE D PH#: 803-854-0800 Facility Email: DPCARE2@YAHOO.COM	Orangeburg / Limited Liability PO BOX 353 SANTEE, SC 29142 SAFE HAVEN IN-HOME CARE LLC <b>IHCP-0144 / 05/31/2018</b>	- 1
<b>SAMARITAN BED AND BATH SERVICES INC - ORANGEBURG</b> 4404 ST MATTHEWS RD ST. MATTHEWS, SC 29135 FAC.#:864-351-9274 PH#:	Orangeburg / Corporation 403 N MAIN ST TRAVELERS REST, SC 29690 SAMARITAN BED AND BATH SERVICES INC <b>IHCP-0785 / 12/31/2018</b>	- 1
<b>SANTEE IN HOME CARE</b> 1580 BASS DR SANTEE, SC 29142 FAC.#:803-854-2401 PH#:	Orangeburg / Limited Liability PO BOX 947 SANTEE, SC 29142-0381 SANTEE ADULT DAYCARE LLC <b>IHCP-0440 / 11/30/2018</b>	- 1
<b>SENIOR SOLUTIONS</b> 1000 METHODIST OAKS DR ORANGEBURG, SC 29116 FAC.#:803-535-1560 FANNING RACHEL B PH#: 803-534-1212 Facility Email: RACHEL.FANNING@THEOAKSSC.COM	Orangeburg / 1000 METHODIST OAKS DR ORANGEBURG, SC 29115-1813 THE METHODIST OAKS <b>IHCP-0325 / 11/30/2018</b>	- 1
<b>TOTAL COMFORT HOME CARE</b> 1840 MCMICHAEL ST ORANGEBURG, SC 29115 FAC.#:803-513-8582 MOOD SHANITA PH#: 803-513-8582 Facility Email: SMITCHELL16@SC.RR.COM	Orangeburg / Limited Liability 1840 MCMICHAEL ST ORANGEBURG, SC 29115 TOTAL COMFORT HOME CARE LLC <b>IHCP-0670 / 03/31/2018</b>	- 1
<b>WRIGHT WAY COMMUNITY HEALTHCARE CONSULTANTS</b> 129 JADE CIR ORANGEBURG, SC 29115 FAC.#:803-378-6638 PH#:	Orangeburg / Limited Liability 129 JADE CIR ORANGEBURG, SC 29115 WRIGHT WAY COMMUNITY HEALTHCARE CONSULTANTS LLC <b>IHCP-0723 / 06/30/2018</b>	- 1

<b>Totals For Facility/License Type: <u>Inhome Care Provider</u></b>	
Number of Activities/Facilities licensed: <u>15</u>	Number Licensed Units: <u>- 15</u>

County: Orangeburg

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
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<b>JOLLEY ACRES HEALTHCARE CENTER</b> 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 FAC.#:803-534-1001 BLANKENSHIP LINDA PH#: Facility Email: ADMIN@JOLLEYACRESLTC.COM	Orangeburg / Ltd. Liability 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 PALMETTO JOLLEY ACRES OPERATING LLC NCF-0929 / 09/30/2018	60
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Licensed Beds: Nursing Home: 60 Institutional Nursing Home: 0

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

Certifications:None

<b>OAKS THE</b> 1000 METHODIST OAKS DR ORANGEBURG, SC 29115-1813 FAC.#:803-535-1561 TILL ELAINE M PH#: 803-534-1212 Facility Email: ETILL@THEOAKSSC.COM	Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC NCF-0735 / 11/30/2018	122
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Licensed Beds: Nursing Home: 122 Institutional Nursing Home: 0

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

Certifications:None

<b>FRUITTHEALTH-ORANGEBURG</b> 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 FAC.#:803-534-7036 ROBINSON GWENDOLYN PH#: 803-534-7036 Facility Email: GLROBINSON@FRUITTHEALTH.COM	Orangeburg / Limited Liability 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 FRUITTHEALTH-ORANGEBURG LLC NCF-0617 / 09/30/2018	88
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Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

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

Certifications:None

<b>RIVERSIDE REHABILITATION AND HEALTHCARE CENTER</b> 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 FAC.#:803-534-7771 GREEN DWIGHT A PH#: 803-534-7771 Facility Email: DGREEN1@ORIANNA.COM	Orangeburg / Ltd. Liability 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 RIVERSIDE REHABILITATION AND HEALTHCARE CENTER LLC NCF-0858 / 06/30/2018	113
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Licensed Beds: Nursing Home: 113 Institutional Nursing Home: 0

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

Certifications:None

<b>Totals For Facility/License Type: <u>Nursing Home</u></b>	
Number of Activities/Facilities licensed: <u>4</u>	Number Licensed Units: <u>383</u>

County: Orangeburg

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>TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE</b> 910 COOK RD ORANGEBURG, SC 29118-2124 FAC.#:803-536-4900 DENNIS MIKE PH#: <b>Facility Email:</b> MDENNIS@TCCADA.STATE.SC.US	Orangeburg / County PO BOX 1166 ORANGEBURG, SC 29116-1166 TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE <b>OTP-0027 / 09/30/2018</b>	4

**Certifications:**None

<b>WAYPOINT RECOVERY CENTER</b> 499 WILD HEARTS RD CAMERON, SC 29030 FAC.#:854-444-5200 PH#: <b>Facility Email:</b> SBAKER@SUMMITBHC.COM	Orangeburg / Limited Liability  SUMMIT BEHAVIORAL HEALTHCARE LLC <b>OTP-0173 / 10/31/2018</b>	1
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**Certifications:**None

<b>Totals For Facility/License Type: <u>PSAD Outpatient</u></b>	
<b>Number of Activities/Facilities licensed:</b> _____ <u>2</u>	<b>Number Licensed Units:</b> _____ <u>5</u>

County: Orangeburg

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>HOLLY HILL DIALYSIS CLINIC</b> 8532 OLD STATE RD HOLLY HILL, SC 29059-8379 FAC.#:803-496-2800 MILAM ELIZABETH PH#: 803-496-2800 Facility Email: JAMES.P.MOLONEY@FMC-NA.COM	Orangeburg / Limited Liability 8532 OLD STATE RD HOLLY HILL, SC 29059-8379 NRA-HOLLY HILL SOUTH CAROLINA LLC <b>ERD-0137 / 09/30/2018</b>	16
<b>Licensed Stations: Hemodialysis: 16 Peritoneal: 0</b>		
<b>NORTH ORANGEBURG DIALYSIS</b> 124 FIRE TOWER RD ORANGEBURG, SC 29118-1401 FAC.#:803-531-6202 VARN BRANDI PH#: 803-531-6202 Facility Email: STEPHANIE.KING1@DAVITA.COM	Orangeburg / Corporation 5200 VIRGINIA WAY STE 400 BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC <b>ERD-0023 / 03/31/2018</b>	25
<b>Licensed Stations: Hemodialysis: 24 Peritoneal: 2</b>		
<b>ORANGEBURG DIALYSIS CLINIC</b> 1184 ORANGEBURG MALL CIR ORANGEBURG, SC 29115-3439 FAC.#:803-531-7501 LOOPER BRANDY RN PH#: 803-531-7501 Facility Email: JAMES.P.MOLONEY@FMC-NA.COM	Orangeburg / Limited Liability 1184 ORANGEBURG MALL CIR ORANGEBURG, SC 29115-3439 NRA-ORANGEBURG SOUTH CAROLINA LLC <b>ERD-0131 / 05/31/2018</b>	19
<b>Licensed Stations: Hemodialysis: 16 Peritoneal: 3</b>		
<b>SANTEE DIALYSIS</b> 228 BRADFORD BLVD SANTEE, SC 29142-8677 FAC.#:803-854-3133 PROVEAUX LAURA PH#: 803-854-3133 Facility Email: STEPHANIE.KING1@DAVITA.COM	Orangeburg / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC <b>ERD-0121 / 03/31/2018</b>	24
<b>Licensed Stations: Hemodialysis: 24 Peritoneal: 0</b>		
<b>SOUTH ORANGEBURG DIALYSIS</b> 1080 SUMMERS AVE ORANGEBURG, SC 29115-4920 FAC.#:803-539-0084 CROSBY ANGELA PH#: 803-539-0084 Facility Email: SCL_C@DAVITA.COM	Orangeburg / Corporation 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC <b>ERD-0083 / 12/31/2018</b>	16
<b>Licensed Stations: Hemodialysis: 16 Peritoneal: 0</b>		

<b>Totals For Facility/License Type: <u>Renal Dialysis</u></b>	
Number of Activities/Facilities licensed: <u>5</u>	Number Licensed Units: <u>100</u>

Number of Activities/Facilities licensed in county of : <u>Orangeburg</u>	# Lics: <u>60</u>
	Number Licensed Units : <u>1,307</u>

Report Totals

Total Number of Activities/Facilities licensed: 60      Total Number Licensed Units: 1,307