

County: Anderson

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CALLIE & JOHN RAINEY HOSPICE HOUSE 1835 ROGERS RD ANDERSON, SC 29621-2278 FAC.#:864-224-3358 MELBOURNE, PAMELA S PH#: 864-224-3358 Facility Email: No Facility Email on Record	Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621-2278 HOSPICE OF THE UPSTATE INC HPF-0001 / 08/31/2010	32

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="32"/>

Number of Activities/Facilities licensed in county of Anderson	# Lics	1
Number Licensed Units :	32	

County: Charleston

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE CENTER OF HOSPICE OF CHARLESTON 676 WANDO PARK BLVD MOUNT PLEASANT, SC 29464-7936 FAC.#:843-529-3100 FEAGIN, ROSINA PH#: 800-677-2244 Facility Email: PANDEPERSON@HOSPICEOFCHARLESTON.ORG	Charleston / Ltd. Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 WIREGRASS HOSPICE OF SOUTH CAROLINA LLC HPF-0005 / 08/31/2010	20

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units <input type="text" value="20"/>

Number of Activities/Facilities licensed in county of	Charleston	# Lics	1
	Number Licensed Units :	20	

County: Florence

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MCLEOD HOSPICE HOUSE 1203 E CHEVES ST FLORENCE, SC 29506-2711 FAC.#:843-777-2564 HARRISON-PAVY, JOAN PH#: 843-777-2564 Facility Email: JPAVY@MCLEODHEALTH.ORG	Florence / Non-Profit Corporation PO BOX 100551 FLORENCE, SC 29502-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HPF-0003 / 09/30/2010	12

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="12"/>

Number of Activities/Facilities licensed in county of	Florence	# Lics	1
	Number Licensed Units :	12	

County: Georgetown

Facility Type: Hospice Facility

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
TIDELANDS COMMUNITY HOSPICE HOUSE	Georgetown / Non-Profit Corporation	12
2591 N FRASER ST	2591 N FRASER ST	
GEORGETOWN, SC 29440-6411 FAC.#:843-546-3410	GEORGETOWN, SC 29440-6411	
HAYES, MARSHA A PH#: 843-546-3410	TIDELANDS COMMUNITY HOSPICE INC	
Facility Email: MARSHA.HAYES@TIDELANDSHOSPICE.ORG	HPF-0008 / 01/31/2010	

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed:	1
Number Licensed Units	12

Number of Activities/Facilities licensed in county of	Georgetown	# Lics	1
	Number Licensed Units :	12	

County: Greenville

Facility Type: Hospice Facility

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
MCCALL HOSPICE HOUSE OF GREENVILLE	Greenville / Non-Profit Corporation	30
1836 W GEORGIA RD	1836 W GEORGIA RD	
SIMPSONVILLE, SC 29680-7212 FAC.#:864-688-1700	SIMPSONVILLE, SC 29680-7212	
POPE, BENITA PH#: 864-233-5300	SAINT FRANCIS HOSPITAL INC	
Facility Email: BENITA_POPE@BSHSI.ORG	HPF-0010 / 07/31/2010	

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed:	1
Number Licensed Units	30

Number of Activities/Facilities licensed in county of	Greenville	# Lics	1
	Number Licensed Units :	30	

County: Greenwood

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE HOUSE OF HOSPICECARE OF THE PIEDMONT 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 FAC.#:864-227-9393 CORLEY, NANCY B PH#: 864-227-9393 Facility Email: NCORLEY@HOSPICEPIEDMONT.ORG	Greenwood / Non-Profit Corporation 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 HOSPICECARE OF THE PIEDMONT HPF-0002 / 05/31/2010	15

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units <input type="text" value="15"/>

Number of Activities/Facilities licensed in county of	Greenwood	# Lics	1
	Number Licensed Units :	15	

County: Horry

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AGAPE HOSPICE HOUSE OF HORRY COUNTY 2320 HWY 378 CONWAY, SC 29527-4911 FAC.#:843-397-2273 HOPE, CHARLENE E PH#: 843-397-2273 Facility Email: CHOPE@AGAPESENIOR.COM	Horry / Corporation 2320 HWY 378 CONWAY, SC 29527-4911 CAROLINAS COMMUNITY HOSPICE INC HPF-0016 / 03/31/2010	24

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed:	1
Number Licensed Units	24

Number of Activities/Facilities licensed in county of	Horry	# Lics	1
	Number Licensed Units :	24	

County: Laurens

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE OF LAURENS COUNTY-HOSPICE HOUSE 1304 SPRINGDALE DR CLINTON, SC 29325-7226 FAC.#:864-833-6287 BROWN, LINDA R PH#: 864-833-6287 Facility Email: LBROWN@HOSPICEOFLAURENSCOUNTY.COM	Laurens / Non-Profit Corporation PO BOX 178 CLINTON, SC 29325-0178 HOSPICE OF LAURENS COUNTY INC HPF-0014 / 10/31/2010	12

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units <input type="text" value="12"/>

Number of Activities/Facilities licensed in county of	Laurens	# Lics	1
	Number Licensed Units :	12	

County: Lexington

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ASCENSION HOUSE 7142 WOODROW ST IRMO, SC 29063-2832 FAC.#:803-796-9296 WILLIAMS, ROGER W PH#: 803-796-9296 Facility Email: ROGERW@ASCENSIONHOSPICE.COM	Lexington / Corporation PO BOX 1367 IRMO, SC 29063-1367 ASCENSION HOUSE INC HPF-0009 / 06/30/2010	14

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="14"/>

Number of Activities/Facilities licensed in county of	Lexington	# Lics	1
	Number Licensed Units :	14	

County: Oconee

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
OCONEE HOSPICE OF THE FOOTHILLS COTTINGHAM HOUSE 220 TUCKER LN SENECA, SC 29672-6669 FAC.#:864-882-8940 SINES, TENNA R PH#: 864-882-8940 Facility Email: TENNA.SINES@OCONEEMED.ORG	Oconee / Non-Profit Corporation 390 KEOWEE SCHOOL RD SENECA, SC 29672-6743 OCONEE MEDICAL CENTER INC HPF-0011 / 09/30/2010	15

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units <input type="text" value="15"/>

Number of Activities/Facilities licensed in county of	Oconee	# Lics	1
	Number Licensed Units :	15	

County: Richland

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HEARTLAND HOSPICE HOUSE OF THE MIDLANDS 141 STONERIDGE DR COLUMBIA, SC 29210-8240 FAC.#:803-939-2788 LOMASTRO, BRIAN PH#: 803-939-2788 Facility Email: 4739ADMIN@HER-MANORCARE.COM	Richland / Limited Liability 141 STONERIDGE DR COLUMBIA, SC 29210-8240 IN HOME HEALTH LLC HPF-0013 / 12/31/2009	12

Totals For Facility/License Type Hospice Facility	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="12"/>

Number of Activities/Facilities licensed in county of Richland	# Lics	1
Number Licensed Units :	12	

County: Spartanburg

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE HOUSE OF THE CAROLINA FOOTHILLS 260 FAIRWINDS RD LANDRUM, SC 29356-9075 FAC.#:828-894-7000 ECKERT, JEAN H PH#: 828-894-7000 Facility Email: ASTERRITT@HOCF.ORG	Spartanburg / Non-Profit Corporation 130 FOREST GLEN RD COLUMBUS, NC 28722-3456 HOSPICE OF THE CAROLINA FOOTHILLS INC HPF-0015 / 03/31/2010	12
SPARTANBURG REGIONAL HOSPICE HOME 686 JEFF DAVIS DR SPARTANBURG, SC 29303-2092 FAC.#:864-560-5620 DAWKINS, TRACEY L PH#: 864-560-5620 Facility Email: LHARRIS@SRHS.COM	Spartanburg / District 686 JEFF DAVIS DR SPARTANBURG, SC 29303-2092 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HPF-0007 / 12/31/2009	15

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	2	Number Licensed Units 27

Number of Activities/Facilities licensed in county of	Spartanburg	# Lics	2
	Number Licensed Units :	27	

County: York

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE & COMMUNITY CARE HOUSE 2275 INDIA HOOK RD ROCK HILL, SC 29732-1223 FAC.#:803-329-1500 ARMSTRONG, JAYNE M PH#: 803-329-4663 Facility Email: JANE@HOSPICECOMMUNITYCARE.ORG	York / Non-Profit Corporation PO BOX 993 ROCK HILL, SC 29731-6993 CAROLINA COMMUNITY CARE INC HPF-0012 / 12/31/2009	16

Totals For Facility/License Type Hospice Facility		
Number of Activities/Facilities licensed:	1	Number Licensed Units
		16

Number of Activities/Facilities licensed in county of York	# Lics	1
	Number Licensed Units :	16

Report Total

Total Number of Activities/Facilities licensed	14	Total Number Licensed Units	241
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