

County: Beaufort

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
BAYVIEW MANOR 11 TODD DR BEAUFORT, SC 29902-6113 FAC.#:843-524-8911 SIMMONS TEDDIE D PH#: 803-545-4292 Facility Email: ADMIN@BAYVIEWMANOR.NET	Beaufort / Ltd. Liability 11 TODD DR BEAUFORT, SC 29902-6113 BAYVIEW MANOR LLC NCF-0898 / 05/31/2017	170
Licensed Beds: Nursing Home: 170 Institutional Nursing Home: 0 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		
BROAD CREEK CARE CENTER SKILLED NURSING 801 LEMON GRASS CT HILTON HEAD ISLAND, SC 29928-3022 FAC.#:843-341-7300 JACKSON WILLIAM F PH#: 843-341-7300 Facility Email: Not on File	Beaufort / Corporation 700 TIDEPOINTE WAY HILTON HEAD ISLAND, SC 29928-3040 CC-HILTON HEAD INC NCF-0753 / 07/31/2017	25
Licensed Beds: Nursing Home: 25 Institutional Nursing Home: 0 Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		
FRASER HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FAC.#:843-842-3740 MARSHALL PETER C PH#: 843-689-9143 Facility Email: PMARSHALL@THESEABROOK.COM	Beaufort / Non-Profit Corporation 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 SEABROOK OF HILTON HEAD INC NCF-0414 / 09/30/2017	33
Licensed Beds: Nursing Home: 19 Institutional Nursing Home: 14 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		
LIFE CARE CENTER OF HILTON HEAD 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 FAC.#:843-681-6006 BLEDSOE COURTNEY E PH#: 843-681-6006 Facility Email: COURTNEY_BLEDSOE@LCCA.COM	Beaufort / Corporation 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 LIFE CARE CENTERS OF AMERICA INC NCF-0725 / 05/31/2017	88
Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		

County: Beaufort

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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NHC HEALTHCARE BLUFFTON 3039 OKATIE HWY BLUFFTON, SC 29909-5101 FAC.#:843-705-8220 YOKLEY STEVEN T PH#: 843-705-8220 Facility Email: SYOKLEY@NHCBLUFFTON.COM	Beaufort / Limited Liability 3039 OKATIE HWY BLUFFTON, SC 29909-5101 NHC HEALTHCARE/BLUFFTON LLC NCF-0958 / 01/31/2017	120
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Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

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

Certifications:None

PRESTON HEALTH CENTER 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 FAC.#:843-689-7077 GRIFFIN-BUKOSKEY SANDRA PH#: 843-689-7077 Facility Email: SBUKOSKEY@THECYPRESS.COM	Beaufort / Limited Liability Limited 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP NCF-0576 / 04/30/2017	77
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Licensed Beds: Nursing Home: 69 Institutional Nursing Home: 8

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>6</u>	Number Licensed Units: <u>513</u>

Number of Activities/Facilities licensed in county of : <u>Beaufort</u>	# Lics: <u>6</u>
	Number Licensed Units : <u>513</u>

County: Berkeley

Facility Type: Nursing Home

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

HEARTLAND HEALTH AND REHABILITATION CARE CENTER-HANAHAN	Berkeley / Limited Liability	135
1800 EAGLE LANDING BLVD	333 N SUMMIT ST, LICENSURE SUPPORT	
HANAHAN, SC 29410-8517 FAC.#:843-553-0656	TOLEDO, OH 43604-1531	
DAVIS JANE E PH#: 843-553-0656	HEARTLAND-CHARLESTON OF HANAHAN SC LLC	
Facility Email: 4015ADMIN@HCR-MANORCARE.COM	NCF-0526 / 12/31/2017	
Licensed Beds: Nursing Home: 135	Institutional Nursing Home: 0	

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

Certifications:None

LAKE MOULTRIE NURSING HOME	Berkeley / District	88
1038 MCGILL LN	PO BOX 1108	
SAINT STEPHEN, SC 29479-3196 FAC.#:843-567-2307	SAINT STEPHEN, SC 29479-1108	
DRIGGERS JOANN C PH#: 843-567-2307	CLARENDON HOSPITAL DISTRICT	
Facility Email: JDRIGGERS@CLARENDONLTC.ORG	NCF-0738 / 12/31/2016 (Renewal Pending)	

Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

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

Certifications:None

FRUITTHEALTH-MONCKS CORNER	Berkeley / Limited Liability	132
505 S LIVE OAK DR	505 S LIVE OAK DR	
MONCKS CORNER, SC 29461-3554 FAC.#:843-761-8368	MONCKS CORNER, SC 29461-3554	
FLANSBURG CHRISTINE PH#: 843-761-8368	FRUITTHEALTH-MONCKS CORNER LLC	
Facility Email: CFLANSBURG@FRUITTHEALTH.COM	NCF-0943 / 10/31/2017	

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

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>3</u>	Number Licensed Units: <u>355</u>

Number of Activities/Facilities licensed in county of : <u>Berkeley</u>	# Lics: <u>3</u>
	Number Licensed Units : <u>355</u>

County: Charleston

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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BISHOP GADSDEN EPISCOPAL HEALTH CARE CENTER 3 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 FAC.#:843-762-3300 TRAWICK C WILLIAM PH#: 843-762-3300 Facility Email: SARAH.TIPTON@BISHOPGADSDEN.ORG	Charleston / Non-Profit Corporation BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY NCF-0577 / 04/30/2017	50
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Licensed Beds: Nursing Home: 41 Institutional Nursing Home: 9

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

Certifications:None

FRANKE HEALTH CARE CENTER 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FAC.#:843-856-4700 STOLL SANDRA A PH#: 843-856-4700 Facility Email: SSTOLL@FRANKEATSEASIDE.ORG	Charleston / Non-Profit Corporation 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC) NCF-0800 / 07/31/2017	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

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

Certifications:None

HEARTLAND OF WEST ASHLEY REHABILITATION AND NURSING CENTER 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 FAC.#:843-763-0233 MCDANIEL BILL PH#: 843-763-0233 Facility Email: 531ADMIN@HCR-MANORCARE.COM	Charleston / Limited Liability 333 N SUMMIT ST, LEGAL DEPARTMENT TOLEDO, OH 43604-1531 WEST ASHLEY REHABILITATION AND NURSING CENTER - CHARLESTON SC LLC NCF-0413 / 12/31/2017	125
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Licensed Beds: Nursing Home: 125 Institutional Nursing Home: 0

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

Certifications:None

JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 FAC.#:843-559-5888 BYRUM DENA L PH#: 843-559-5888 Facility Email: DBYRUM@ORIANNA.COM	Charleston / Limited Liability 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER LLC NCF-0911 / 11/30/2017	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

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

Certifications:None

County: Charleston

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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LIFE CARE CENTER OF CHARLESTON	Charleston / Ltd. Liability	148
2600 ELMS PLANTATION BLVD	2600 ELMS PLANTATION BLVD	
NORTH CHARLESTON, SC 29406-9180 FAC.#:843-764-3500	NORTH CHARLESTON, SC 29406-9180	
CLIETT BETH A PH#: 843-764-3500	CHARLESTON MEDICAL INVESTORS LLC	
Facility Email: BETH_CLIETT@LCCA.COM	NCF-0878 / 11/30/2017	

Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

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

Certifications:None

MOUNT PLEASANT MANOR	Charleston / Ltd. Liability	132
921 BOWMAN RD	921 BOWMAN RD	
MOUNT PLEASANT, SC 29464-3234 FAC.#:843-884-8903	MOUNT PLEASANT, SC 29464-3234	
WHITE BRUCE L PH#: 843-884-8903	MOUNT PLEASANT MANOR LLC	
Facility Email: BWHITE@MOUNTPLEASANTMANOR.COM	NCF-0896 / 05/31/2017	

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

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

Certifications:None

NHC HEALTHCARE CHARLESTON	Charleston / Limited Liability	132
2230 ASHLEY CROSSING DR	2230 ASHLEY CROSSING DR	
CHARLESTON, SC 29414-5700 FAC.#:843-766-5228	CHARLESTON, SC 29414-5700	
BARTLETT GREGORY PH#: 843-766-5228	NHC HEALTHCARE-CHARLESTON LLC	
Facility Email: TBARTLETT@NHCCHARLESTONHEALTHCARE.COM	NCF-0871 / 09/30/2017	

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

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

Certifications:None

RIVERSIDE HEALTH AND REHAB	Charleston / Ltd. Liability	160
2375 BAKER HOSPITAL BLVD	2375 BAKER HOSPITAL BLVD	
NORTH CHARLESTON, SC 29405-8291 FAC.#:843-744-2750	NORTH CHARLESTON, SC 29405-8291	
PH#:	THI OF SOUTH CAROLINA AT CHARLESTON LLC	
Facility Email: RUSTY.FLATHMANN@FUNDLTC.COM	NCF-0870 / 08/31/2017	

Licensed Beds: Nursing Home: 160 Institutional Nursing Home: 0

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

Certifications:None

County: Charleston

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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SANDPIPER REHAB & NURSING	Charleston / Limited Liability	176
1049 ANNA KNAPP BLVD	1049 ANNA KNAPP BLVD	
MOUNT PLEASANT, SC 29464-3133 FAC.#:843-881-3210	MOUNT PLEASANT, SC 29464-3133	
WALROND JAMES J PH#:	SANDPIPER REHAB & NURSING-DELAWARE LLC	
Facility Email: REFER@SANDPIPERCENTER.COM	NCF-0876 / 10/31/2017	

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

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

Certifications:None

SAVANNAH GRACE AT THE PALMS OF MT PLEASANT	Charleston /	48
1010 LAKE HUNTER CIR	1010 LAKE HUNTER CIR	
MOUNT PLEASANT, SC 29464-5417 FAC.#:843-388-2030	MOUNT PLEASANT, SC 29464-5417	
SEEDS ASHLEY PH#: 843-388-2030	SNH SE SG TENANT LLC	
Facility Email: JCARR@5SSL.COM	NCF-0926 / 06/30/2017	

Licensed Beds: Nursing Home: 48 Institutional Nursing Home: 0

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

Certifications:None

VIBRA HOSPITAL OF CHARLESTON-TCU	Charleston / Limited Liability	35
1200 HOSPITAL DR	1200 HOSPITAL DR	
MOUNT PLEASANT, SC 29464-3251 FAC.#:843-375-4220	MOUNT PLEASANT, SC 29464-3251	
CARR JOSEPH PH#: 843-375-4000	VIBRA HOSPITALOF CHARLESTON LLC	
Facility Email: JCARR@VHCHARLESTON.COM	NCF-0960 / 08/31/2017	

Licensed Beds: Nursing Home: 35 Institutional Nursing Home: 0

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

Certifications:None

WHITE OAK MANOR CHARLESTON INC	Charleston / Corporation	176
9285 MEDICAL PLAZA DR	9285 MEDICAL PLAZA DR	
N CHARLESTON, SC 29406-9126 FAC.#:843-797-8282	N CHARLESTON, SC 29406-9126	
WALKER RUTH P PH#: 843-797-8282	WHITE OAK MANOR CHARLESTON INC	
Facility Email: RWALKER@WHITEOAKMANOR.COM	NCF-0892 / 12/31/2017	

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

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>12</u>	Number Licensed Units: <u>1,358</u>

County: Charleston

Number of Activities/Facilities licensed in county of :	<u>Charleston</u>	# Lics: <u>12</u>
		Number Licensed Units : <u>1,358</u>

County: Colleton

Facility Type: Nursing Home

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

PRUITTHEALTH - WALTERBORO	Colleton / Ltd. Liability	132
401 WITSELL ST	401 WISTELL ST	
WALTERBORO, SC 29488-3052 FAC.#:843-549-5546	WALTERBORO, SC 29488	
DRINKARD CHRISTY PH#: 843-549-5546	PRUITTHEALTH - WALTERBORO LLC	
Facility Email: CDRINKARD@PRUITTHEALTH.COM	NCF-0949 / 10/31/2017	

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

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

Certifications:None

VETERANS VICTORY HOUSE	Colleton / State	220
2461 SIDNEYS RD	2461 SIDNEYS RD	
WALTERBORO, SC 29488-6783 FAC.#:843-538-3000	WALTERBORO, SC 29488-6783	
FERGUSON SANDRA L PH#: 843-538-3000	SC DEPARTMENT OF MENTAL HEALTH	
Facility Email: SFERGUSON@HMRVSI.COM	NCF-0921 / 10/31/2017	

Licensed Beds: Nursing Home: 220 Institutional Nursing Home: 0

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>352</u>

Number of Activities/Facilities licensed in county of : <u>Colleton</u>	# Lics: <u>2</u>
	Number Licensed Units : <u>352</u>

County: **Dorchester**

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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HALLMARK HEALTHCARE CENTER 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FAC.#:843-821-5005 STINSON DURENA PH#: 843-821-5005 Facility Email: DURENA.STINSON@PALMLTC.COM	Dorchester / Ltd. Liability 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 PALMETTO HALLMARK OPERATING LLC NCF-0932 / 09/30/2017	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

OAKBROOK HEALTH & REHABILITATION CENTER 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 FAC.#:843-875-9053 HIERS KELLIE PH#: 843-875-9053 Facility Email: K.HIERS@PALMLTC.COM	Dorchester / Ltd. Liability 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 PALMETTO OAKBROOK OPERATING LLC NCF-0923 / 09/30/2017	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

PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-SUMMERVILLE 201 W 9TH NORTH ST SUMMERVILLE, SC 29483-6721 FAC.#:843-873-2550 WHITE YOLANDA M PH#: 843-873-2550 Facility Email: YOLANDA.WHITE@PRESHOMESC.ORG	Dorchester / Non-Profit Corporation 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA NCF-0202 / 04/30/2017	87
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Licensed Beds: Nursing Home: 87 Institutional Nursing Home: 0
 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

ST GEORGE HEALTHCARE CENTER 905 DUKES ST SAINT GEORGE, SC 29477-2059 FAC.#:843-563-4602 TAYLOR JASON PH#: 843-563-4602 Facility Email: DIANE.JOHNSON@PALMLTC.COM	Dorchester / Ltd. Liability 905 DUKES ST SAINT GEORGE, SC 29477-2059 PALMETTO ST GEORGE OPERATING LLC NCF-0924 / 09/30/2017	88
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Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0
 Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: **Nursing Home**
 Number of Activities/Facilities licensed: 4 Number Licensed Units: 351

County: Dorchester

Number of Activities/Facilities licensed in county of :	<u>Dorchester</u>	# Lics: _____	<u>4</u>
		Number Licensed Units :	<u>351</u>

County: Georgetown

Facility Type: Nursing Home

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

BLUE RIDGE IN GEORGETOWN	Georgetown / Limited Liability	84
2715 S ISLAND RD	2715 S ISLAND RD	
GEORGETOWN, SC 29440-4415 FAC.#:843-546-4123	GEORGETOWN, SC 29440-4415	
BRYANT COLBY E PH#: 843-546-4123	BLUE RIDGE IN GEORGETOWN LLC	
Facility Email: ADMIN@GEORGETOWN.CARE	NCF-0633 / 03/31/2017	

Licensed Beds: Nursing Home: 84 Institutional Nursing Home: 0

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

Certifications:None

LAKES AT LITCHFIELD SKILLED NURSING CENTER	Georgetown / Ltd. Liability	24
80 TIMBERVIEW CT	120 LAKES AT LITCHFIELD DR	
PAWLEYS ISLAND, SC 29585-5798 FAC.#:843-235-2421	PAWLEYS ISLAND, SC 29585-5515	
BARBER JEFF B PH#: 843-235-2421	LITCHFIELD RETIREMENT LLC	
Facility Email: JBARBER@LAKES-LITCHFIELD.COM	NCF-0843 / 12/31/2016 (Renewal Pending)	

Licensed Beds: Nursing Home: 17 Institutional Nursing Home: 7

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

Certifications:None

PRINCE GEORGE HEALTHCARE CENTER	Georgetown / Ltd. Liability	148
901 MAPLE ST	901 MAPLE ST	
GEORGETOWN, SC 29440-4333 FAC.#:843-546-6101	GEORGETOWN, SC 29440-4333	
PORTER RICHARD PH#: 843-546-6101	PALMETTO PRINCE GEORGE OPERATING LLC	
Facility Email: RICHARD.PORTER@PALMLTC.COM	NCF-0930 / 09/30/2017	

Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>3</u>	Number Licensed Units: <u>256</u>

Number of Activities/Facilities licensed in county of : <u>Georgetown</u>	# Lics: <u>3</u>
	Number Licensed Units : <u>256</u>

County: Horry

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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BRIGHTWATER SKILLED NURSING CENTER	Horry / Limited Liability	67
171 BRIGHTWATER DR	171 BRIGHTWATER DR	
MYRTLE BEACH, SC 29579 FAC.#:843-903-8300	MYRTLE BEACH, SC 29579	
HAYES ELIZABETH A PH#: 843-903-8300	BRIGHTWATER RETIREMENT LLC	
Facility Email: EHAYES@BRIGHTWATER-LIVING.COM	NCF-0955 / 04/30/2017	

Licensed Beds: Nursing Home: 67 Institutional Nursing Home: 0

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

Certifications:None

COMPASS POST ACUTE REHABILITATION	Horry / Corporation	95
2320 HWY 378	27101 PUERTA REAL STE 450	
CONWAY, SC 29527-4911 FAC.#:843-397-2273	MISSION VIEJO, CA 92691-8566	
POWELL STEVE PH#: 843-397-2273	CAROLINA HEALTHCARE INC	
Facility Email: RENEWALS@ENSIGNSERVICES.NET	NCF-0977 / 12/31/2017	

Licensed Beds: Nursing Home: 95 Institutional Nursing Home: 0

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

Certifications:None

CONWAY MANOR	Horry / Ltd. Liability	190
3300 4TH AVE	3300 4TH AVE	
CONWAY, SC 29527-6002 FAC.#:843-248-5728	CONWAY, SC 29527-6002	
TILLER RAYMOND G PH#: 843-248-5728	CONWAY MANOR LLC	
Facility Email: RTILLER@CONWAYMANOR.NET	NCF-0899 / 05/31/2017	

Licensed Beds: Nursing Home: 190 Institutional Nursing Home: 0

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

Certifications:None

COVENANT TOWERS HEALTH CARE	Horry / Non-Profit Corporation	30
5001 LITTLE RIVER RD	5001 LITTLE RIVER RD, COVENANT TOWERS W-505	
MYRTLE BEACH, SC 29577-2478 FAC.#:843-449-2484	MYRTLE BEACH, SC 29577-2478	
HENDRICK DEBBIE M PH#: 843-449-2484	COVENANT TOWERS HOMEOWNERS ASSOCIATION INC	
Facility Email: DEBBIE@COVENANTTOWERS.COM	NCF-0469 / 08/31/2017	

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

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

Certifications:None

County: Horry

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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GRAND STRAND REHAB AND NURSING CENTER 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 FAC.#:843-293-1137 TAYLOR JUDY PH#: 843-293-1137 Facility Email: SWEESNER@WILSONSENIORCARE.COM	Horry / Limited Liability PO BOX 510 DARLINGTON, SC 29540-0510 GRAND STRAND REHAB AND NURSING CENTER LLC NCF-0993 / 09/30/2017	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

KINGSTON NURSING CENTER 2379 CYPRESS CIR CONWAY, SC 29526-8921 FAC.#:843-347-8179 FOWLER LAURA L PH#: 843-347-8179 Facility Email: LFOWLER@CMC-SC.COM	Horry / Non-Profit Corporation PO BOX 1496 CONWAY, SC 29528-1496 CONWAY HOSPITAL INC NCF-0518 / 06/30/2017	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

LORIS REHAB AND NURSING CENTER 3620 STEVENS ST LORIS, SC 29569-2953 FAC.#:843-716-7106 OATES MARGARET PH#: 843-716-7106 Facility Email: BOATES@WILSONSENIORCARE.COM	Horry / Limited Liability PO BOX 510 DARLINGTON, SC 29540-0510 LORIS REHAB AND NURSING CENTER LLC NCF-0207 / 08/31/2017	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

MYRTLE BEACH MANOR 9547 HWY 17 N MYRTLE BEACH, SC 29572-0000 FAC.#:843-449-5283 BEARD MICHAEL PH#: 843-449-5283 Facility Email: MBEARD@5SSL.COM	Horry / Corporation 400 CENTRE ST NEWTON, MA 02458-2094 FS TENANT POOL I TRUST NCF-0829 / 01/31/2017	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

County: Horry

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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NHC HEALTHCARE GARDEN CITY 3405 HWY 17 BYP MURRELLS INLET, SC 29576-9301 FAC.#:843-650-2213 SELLARS GIDEON PH#: 843-650-2213 Facility Email: GSELLARS@NHCGARDENCITY.COM	Horry / Ltd. Liability PO BOX 309 MURRELLS INLET, SC 29576-0309 NHC HEALTHCARE/GARDEN CITY LLC NCF-0825 / 10/31/2017	148
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Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>9</u>	Number Licensed Units: <u>854</u>

Number of Activities/Facilities licensed in county of : <u>Horry</u>	# Lics: <u>9</u>
	Number Licensed Units : <u>854</u>

County: Jasper

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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RIDGELAND NURSING CENTER 1516 GRAYS HWY RIDGELAND, SC 29936-5440 FAC.#:843-726-5581 BOYLES SHERI P PH#: 843-726-5581 Facility Email: SBOYLES@RIDGELANDNC.COM	Jasper / Corporation PO BOX 1570 RIDGELAND, SC 29936-2627 RIDGELAND NURSING CENTER INC NCF-0553 / 08/31/2017	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

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>88</u>

Number of Activities/Facilities licensed in county of : <u>Jasper</u>	# Lics: <u>1</u>
	Number Licensed Units : <u>88</u>

Report Totals

Total Number of Activities/Facilities licensed: 40 Total Number Licensed Units: 4,127