

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ABBEVILLE NURSING HOME 83 THOMSON CIR ABBEVILLE, SC 29620-5652 FACILITY #:864-366-5122 HUGHES SR ALAN L PH#: 864-366-5122 Facility Email: ABBNH@WCTEL.NET Fac. Contact Email: ABBNH@WCTEL.NET	NCF-0266 / 12/31/2019 Abbeville / Corporation 83 THOMSON CIR ABBEVILLE, SC 29620-5652 ABBEVILLE NURSING HOME INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:94
ANCHOR REHABILITATION AND HEALTHCARE CENTER OF AIKEN 550 EASTGATE DR AIKEN, SC 29803-7688 FACILITY #:803-643-3694 GINN KEVIN J PH#: 803-643-3694 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: KGINN1@ORIANNA.COM	NCF-1011 / 01/31/2020 Aiken / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 ANCHOR REHABILITATION AND HEALTHCARE CENTER OF AIKEN LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:20
ARBORETUM AT THE WOODLANDS 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FACILITY #:864-371-3100 PH#: Facility Email: CBABBITT@TWAFFSC.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0957 / 06/30/2019 Greenville / Non-Profit Corporation 50 ARBORETUM LN GREENVILLE, SC 29617-6227 UPSTATE SENIOR LIVING INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:30
BAYVIEW MANOR 11 TODD DR BEAUFORT, SC 29902-6113 FACILITY #:843-524-8911 DRINKARD CHRISTY PH#: 843-524-8911 Facility Email: ADMIN@BAYVIEWMANOR.NET Fac. Contact Email: ADMIN@BAYVIEWMANOR.NET	NCF-0898 / 05/31/2019 Beaufort / Ltd. Liability 11 TODD DR BEAUFORT, SC 29902-6113 BAYVIEW MANOR LLC
Alzheimer Care: Yes Max # Residents 30 Alzheimer Unit: Yes Max # Beds: 42	Total Number of Licensed Beds:70
BETHEA BAPTIST HEALTH CARE CENTER 157 HOME AVE DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867 SPURLING BENJAMIN S PH#: 843-393-2867 Facility Email: BSPURLING@SCBMA.COM Fac. Contact Email: BSPURLING@SCBMA.COM	NCF-0189 / 06/30/2019 Darlington / Non-Profit Corporation 157 HOME AVE DARLINGTON, SC 29532-7625 SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:88

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BISHOP GADSDEN EPISCOPAL HEALTH CARE CENTER 3 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 FACILITY #:843-762-3300 COOK JONNA PH#: 843-762-3300 Facility Email: JONNA.COOK@BISHOPGADSDEN.ORG Fac. Contact Email: JONNA.COOK@BISHOPGADSDEN.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0577 / 04/30/2020 Charleston / Non-Profit Corporation 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY Total Number of Licensed Beds50
BLUE RIDGE IN BROOKVIEW HOUSE 510 THOMPSON ST GAFFNEY, SC 29340-3620 FACILITY #:864-489-3101 SAIN SUSAN PH#: 864-489-3101 Facility Email: ADMIN@BROOKVIEW.CARE Fac. Contact Email: ADMIN@BROOKVIEW.CARE Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0979 / 12/31/2019 Cherokee / Limited Liability Limited Partnership 510 THOMPSON ST GAFFNEY, SC 29340-3620 BLUE RIDGE IN BROOKVIEW HOUSE LLC Total Number of Licensed Beds132
BLUE RIDGE IN GEORGETOWN 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 FACILITY #:843-546-4123 KASS LOUIS PH#: 803-546-4123 Facility Email: ADMIN@GEORGETOWN.CARE Fac. Contact Email: ADMIN@GEORGETOWN.CARE Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0633 / 03/31/2020 Georgetown / Limited Liability 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 BLUE RIDGE IN GEORGETOWN LLC Total Number of Licensed Beds84
BLUE RIDGE OF SUMTER 1761 PINWOOD RD SUMTER, SC 29154-9056 FACILITY #:803-481-8591 JOHNSON PATRICIA W PH#: 803-481-8591 Facility Email: ADMIN@SUMTER.CARE Fac. Contact Email: ADMIN@SUMTER.CARE Alzheimer Care: Yes Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0745 / 03/31/2020 Sumter / Limited Liability 1761 PINWOOD RD SUMTER, SC 29154-9056 BLUE RIDGE OF SUMTER LLC Total Number of Licensed Beds96
BRIAN CENTER OF NURSING CARE-ST ANDREWS 3514 SIDNEY RD COLUMBIA, SC 29210-4494 FACILITY #:803-798-9715 MORLEY MILLICENT PH#: 803-798-9715 Facility Email: STANDREWS@CHOICE-HEALTH.NET Fac. Contact Email: STANDREWS@CHOICE-HEALTH.NET Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0875 / 05/31/2019 Lexington / Ltd. Liability 3514 SIDNEY RD COLUMBIA, SC 29210-4494 BRIAN CENTER/ST ANDREWS LLC Total Number of Licensed Beds108

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BRIGHTWATER SKILLED NURSING CENTER 171 BRIGHTWATER DR MYRTLE BEACH, SC 29579 FACILITY #:843-903-8300 PH#: Facility Email: LICENSING@BRIGHTWATER-LIVING.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0955 / 04/30/2020 Horry / Limited Liability 3530 TORINGDON WAY STE 204 CHARLOTTE, NC 28277-3436 BRIGHTWATER RETIREMENT LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds67
BROAD CREEK CARE CENTER SKILLED NURSING 801 LEMON GRASS CT HILTON HEAD ISLAND, SC 29928-3022 FACILITY #:843-341-7300 JACKSON WILLIAM F PH#: 843-341-7300 Facility Email: TCOPE@VILIVING.COM Fac. Contact Email: FJACKSON@VILIVING.COM	NCF-0753 / 07/31/2019 Beaufort / Corporation 700 TIDEPOINTE WAY HILTON HEAD ISLAND, SC 29928-3040 CC-HILTON HEAD INC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds25
BROOKDALE ANDERSON 311 SIMPSON RD ANDERSON, SC 29621-2157 FACILITY #:864-261-3875 JENKINS BRIAN PH#: 864-261-3875 Facility Email: BJENKINS1@BROOKDALE.COM Fac. Contact Email: BJENKINS1@BROOKDALE.COM	NCF-0872 / 12/31/2019 Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERICARE INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds44
BROOKDALE EASLEY 706 PELZER HWY EASLEY, SC 29642-3800 FACILITY #:864-859-0167 PHILLIPS WENDELL PH#: 864-859-0167 Facility Email: WENDELL.PHILLIPS@BROOKDALE.COM Fac. Contact Email: WENDELL.PHILLIPS@BROOKDALE.COM	NCF-0701 / 02/28/2020 Pickens / Limited Liability 706 PELZER HWY EASLEY, SC 29642-3800 EMERICARE COUNTRYSIDE VILLAGE LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
BROOKDALE GREENVILLE 1306 PELHAM RD GREENVILLE, SC 29615-3600 FACILITY #:864-286-6600 HUNTER ANDREA M PH#: 864-286-6600 Facility Email: AHUNTER2@BROOKDALE.COM Fac. Contact Email: AHUNTER2@BROOKDALE.COM	NCF-0785 / 10/31/2019 Greenville / Corporation 1306 PELHAM RD GREENVILLE, SC 29615-3600 EMERICARE INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds45

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BRUSHY CREEK POST ACUTE 101 COTTAGE CREEK CIR GREER, SC 29650-2438 FACILITY #:864-688-3800 COTTINGHAM LINDSAY PH#: 864-688-3800 Facility Email: JASON.MURRAY@PROVIDENCEGROUPHC.COM Fac. Contact Email: LINDSAY.COTTINGHAM@BRUSHYCREEKPA.COM	NCF-1024 / 01/31/2020 Greenville / Limited Liability 101 COTTAGE CREEK CIR GREER, SC 29650-2438 GREER POST ACUTE LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 44
C M TUCKER JR NURSING CARE CENTER FEWELL AND STONE PAVILIONS 2200 HARDEN ST COLUMBIA, SC 29203-7199 FACILITY #:803-737-5399 MORGAN ROBERT PH#: 803-737-5399 Facility Email: ROBERT.MORGAN@SCDMH.ORG Fac. Contact Email: ROBERT.MORGAN@SCDMH.ORG	NCF-0334 / 12/31/2019 Richland / State 2200 HARDEN ST COLUMBIA, SC 29203-7199 SC DEPARTMENT OF MENTAL HEALTH
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 52
C M TUCKER JR NURSING CARE CENTER RODDEY PAVILION 2200 HARDEN ST COLUMBIA, SC 29203-7199 FACILITY #:803-737-5303 JONES TED P PH#: 803-737-5303 Facility Email: TED.JONES@SCDMH.ORG Fac. Contact Email: TED.JONES@SCDMH.ORG	NCF-0726 / 12/31/2019 Richland / State 2200 HARDEN ST COLUMBIA, SC 29203-7199 SC DEPARTMENT OF MENTAL HEALTH
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 38
CALHOUN CONVALESCENT CENTER 601 DANTZLER ST SAINT MATTHEWS, SC 29135-1522 FACILITY #:803-655-7101 KIZER MELISSA R PH#: 803-655-7101 Facility Email: MELISSA.KIZER@FUNDLTC.COM Fac. Contact Email: MELISSA.KIZER@FUNDLTC.COM	NCF-0505 / 02/28/2020 Calhoun / Corporation 601 DANTZLER ST SAINT MATTHEWS, SC 29135-1522 SAINT MATTHEWS HEALTH CARE LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 20
CAPSTONE REHABILITATION AND HEALTHCARE CENTER 1850 CRESTVIEW RD EASLEY, SC 29642-3528 FACILITY #:864-859-3236 DUNLAP TOYA R PH#: 864-859-3236 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: TDUNLAP1@ORIANNA.COM	NCF-1010 / 01/31/2020 Pickens / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 CAPSTONE REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 60

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CARLYLE SENIOR CARE OF AIKEN 123 DUPONT DR NW AIKEN, SC 29801-4089 FACILITY #:803-648-0434 ARMSTRONG TIME PH#: 803-648-0434 Facility Email: RCRANFORD@CARLYLESENIORCARE.COM Fac. Contact Email: RCRANFORD@CARLYLESENIORCARE.COM	NCF-0982 / 07/31/2019 Aiken / Limited Liability PO BOX 2829 AIKEN, SC 29802 CARLYLE SENIORCARE OF AIKEN LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds86
CARLYLE SENIOR CARE OF FLORENCE 133 W CLARKE RD FLORENCE, SC 29501-0722 FACILITY #:843-669-4374 SIMON SHIRLEY K PH#: 843-669-4374 Facility Email: RCRANFORD@CMCSENIORCARE.COM Fac. Contact Email: SSIMON@CARLYLESENIORCARE.COM	NCF-0983 / 07/31/2019 Florence / Limited Liability 133 W CLARKE RD FLORENCE, SC 29501-0722 CARLYLE SENIOR CARE OF FLORENCE LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
CARLYLE SENIOR CARE OF FORK 1727 BUCK SWAMP RD FORK, SC 29543-6116 FACILITY #:843-464-6212 MOORE JOHN PH#: 843-464-6212 Facility Email: RCRANFORD@CARLYLESENIORCARE.COM Fac. Contact Email: JMOORE@CARLYLESENIORCARE.COM	NCF-0987 / 07/31/2019 Dillon / Limited Liability 1727 BUCK SWAMP RD FORK, SC 29543-6116 CARLYLE SENIOR CARE OF FORK LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds11
CARLYLE SENIOR CARE OF FOUNTAIN INN 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 FACILITY #:864-862-2554 STEWART LISA PH#: 864-862-2554 Facility Email: RCRANFORD@CARLYLESENIORCARE.COM Fac. Contact Email: LSTEWART@CARLYLESENIORCARE.COM	NCF-0985 / 07/31/2019 Greenville / Limited Liability 1402-D MEADORS FARM RD FLORENCE, SC 29504 CARLYLE SENIOR CARE OF FOUNTAIN INN LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
CARLYLE SENIOR CARE OF KINGSTREE 401 NELSON BLVD KINGSTREE, SC 29556-4024 FACILITY #:843-355-6116 SLAVINSKI CANDICE J PH#: 803-648-0434 Facility Email: CSLAVINSKI@CARLYLESENIORCARE.COM Fac. Contact Email: CSLAVINSKI@CARLYLESENIORCARE.COM	NCF-0984 / 07/31/2019 Williamsburg / Limited Liability 1402-D MEADORS FARM RD FLORENCE, SC 29504 CARLYLE SENIOR CARE OF KINGSTREE LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds96

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CHERAW HEALTHCARE 400 MOFFAT RD CHERAW, SC 29520-3048 FACILITY #:843-320-7500 DYSON JOEL W PH#: 843-320-7500 Facility Email: JDYSON@CHERAWHC.COM Fac. Contact Email: JDYSON@CHERAWHC.COM	NCF-0951 / 04/30/2020 Chesterfield / Corporation PO BOX 967 CHERAW, SC 29520-0967 CHERAW HEALTHCARE INC
Alzheimer Care: Yes Max # Residents 25 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 20
CLEMSON AREA RETIREMENT CENTER-HEALTH CARE CENTER 500 DOWNS LOOP CLEMSON, SC 29631-2099 FACILITY #:864-654-1155 LEHEUP JOHN D PH#: 864-654-1155 Facility Email: WANDA@CLEMSONDOWNS.COM Fac. Contact Email: JLEHEUP@CLEMSONDOWNS.COM	NCF-0391 / 10/31/2019 Pickens / Corporation 500 DOWNS LOOP CLEMSON, SC 29631-2099 CARC INC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 68
COMMANDER NURSING CENTER 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 FACILITY #:843-669-3502 COMMANDER IV JOSEPH M PH#: 843-669-3502 Facility Email: JOECOMMANDER@HOTMAIL.COM Fac. Contact Email: JOECOMMANDER@HOTMAIL.COM	NCF-0233 / 07/31/2019 Florence / Corporation 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 COMMANDER HEALTH CARE FACILITIES INC
Alzheimer Care: Yes Max # Residents 91 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 63
COMPASS POST ACUTE REHABILITATION 2320 HWY 378 CONWAY, SC 29527-4911 FACILITY #:843-397-2273 TILLER RAYMOND PH#: 843-397-2273 Facility Email: RENEWALS@ENSIGNSERVICES.NET Fac. Contact Email: RTILLER@ENSIGNSERVICES.NET	NCF-0977 / 12/31/2019 Horry / Corporation 27101 PUERTA REAL STE 450 MISSION VIEJO, CA 92691-8566 CAROLINA HEALTHCARE INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 95
CONWAY MANOR 3300 4TH AVE CONWAY, SC 29527-6002 FACILITY #:843-248-5728 BURKHART LISA PH#: 843-248-5728 Facility Email: ADMIN@CONWAYMANOR.NET Fac. Contact Email: ADMIN@CONWAYMANOR.NET	NCF-0899 / 05/31/2019 Horry / Ltd. Liability 3300 4TH AVE CONWAY, SC 29527-6002 CONWAY MANOR LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 90

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
COUNTRYWOOD NURSING CENTER 1645 RIDGE RD HOPKINS, SC 29061-8432 FACILITY #:803-776-3873 HUNT JOSEPH R PH#: 803-776-3873 Facility Email: JHUNT@STERLING-HEALTH.COM Fac. Contact Email: JHUNT@STERLING-HEALTH.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0946 / 11/30/2019 Richland / Ltd. Liability 1645 RIDGE RD HOPKINS, SC 29061-8432 COUNTRYWOOD NURSING CENTER LLC Total Number of Licensed Beds38
COVENANT PLACE NURSING CENTER 2825 CARTER RD SUMTER, SC 29150-1712 FACILITY #:803-469-7007 LINDER SR RISLEY E PH#: 803-469-7007 Facility Email: RLINDER@COVENANTPLACE.ORG Fac. Contact Email: RLINDER@COVENANTPLACE.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0632 / 05/31/2020 Sumter / Non-Profit Corporation 2825 CARTER RD SUMTER, SC 29150-1712 COVENANT PLACE OF SUMTER INC Total Number of Licensed Beds44
DR RONALD E MCNAIR NURSING AND REHABILITATION CENTER 56 GENESIS DR LAKE CITY, SC 29560-5531 FACILITY #:843-389-3685 FRIERSON SARAH L PH#: 843-389-3685 Facility Email: MCNAIRNSGCTR@FTC-I.NET Fac. Contact Email: MCNAIRNSGCTR@FTC-I.NET Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0918 / 11/30/2019 Williamsburg / Corporation 56 GENESIS DR LAKE CITY, SC 29560-5531 HEALTHCARE PANASCOPE INC Total Number of Licensed Beds88
DUNDEE MANOR 710 HWY 15-401 BYP W BENNETTSTVILLE, SC 29512-3641 FACILITY #:843-479-6251 PH#: Facility Email: ADMIN@DUNDEEMANOR.NET Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0897 / 05/31/2019 Marlboro / Ltd. Liability PO BOX 858 BENNETTSTVILLE, SC 29512-0858 DUNDEE MANOR LLC Total Number of Licensed Beds1:10
EDISTO POST ACUTE 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 FACILITY #:803-534-7771 LOCKLAIR JERRY L PH#: 803-534-7771 Facility Email: JASON.MURRAY@PROVIDENCEGROUPHC.COM Fac. Contact Email: JERRY.LOCKLAIR@EDISTOPACOM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1026 / 01/31/2020 Orangeburg / Limited Liability 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 ORANGEBURG POST ACUTE LLC Total Number of Licensed Beds1:13

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ELLEN SAGAR NURSING CENTER 1817 JONESVILLE HWY UNION, SC 29379-9793 FACILITY #:864-301-3500 SCHAPER ANNETTE PH#: 864-301-3500 Facility Email: ASCHAPER@SRHS.COM Fac. Contact Email: ASCHAPER@SRHS.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0217 / 07/31/2019 Union / District 1817 JONESVILLE HWY UNION, SC 29379-9793 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC Total Number of Licensed Beds:13
ELLENBURG NURSING CENTER 611 E HAMPTON ST ANDERSON, SC 29624-2899 FACILITY #:864-226-5054 ELLENBURG LYNDON W PH#: 864-226-5054 Facility Email: LELLENBURG@ELLENBURGNURSINGCENTER.COM Fac. Contact Email: LELLENBURG@ELLENBURGNURSINGCENTER.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0231 / 03/31/2020 Anderson / Corporation 611 E HAMPTON ST ANDERSON, SC 29624-2899 ELLENBURG NURSING CENTER INC Total Number of Licensed Beds:81
FAITH HEALTHCARE CENTER 617 W MARION ST FLORENCE, SC 29501-2470 FACILITY #:843-669-9958 ARNETTE BROOKS PH#: 843-669-9958 Facility Email: BROOKS.ARNETTE@PALMLTC.COM Fac. Contact Email: BROOKS.ARNETTE@PALMLTC.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0927 / 09/30/2019 Florence / Ltd. Liability 617 W MARION ST FLORENCE, SC 29501-2470 PALMETTO FAITH OPERATING LLC Total Number of Licensed Beds:04
FLEETWOOD REHABILITATION AND HEALTHCARE CENTER 200 ANNE DR EASLEY, SC 29640 FACILITY #:864-859-9754 PH#: Facility Email: FLEETWOODABOM@SA-HC.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1022 / 01/31/2020 Pickens / Limited Liability 200 ANNE DR EASLEY, SC 29640 SC-GA2018 FLEETWOOD REHABILITATION AND HEALTHCARE CENTER LLC Total Number of Licensed Beds:03
FRANKE HEALTH CARE CENTER 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FACILITY #:843-856-4700 STOLL SANDRA A PH#: 843-856-4700 Facility Email: SSTOLL@FRANKEATSEASIDE.ORG Fac. Contact Email: SSTOLL@FRANKEATSEASIDE.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0800 / 07/31/2019 Charleston / Non-Profit Corporation 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 LUTHERAN HOMES OF SOUTH CAROLINA INC Total Number of Licensed Beds44

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
FRASER HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747 MARSHALL PETER C PH#: 843-842-3747 Facility Email: PMARSHALL@THESEABROOK.COM Fac. Contact Email: PMARSHALL@THESEABROOK.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0414 / 09/30/2019 Beaufort / Non-Profit Corporation 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 SEABROOK OF HILTON HEAD INC Total Number of Licensed Beds33
GOLDEN AGE OPERATIONS 82 N MAIN ST INMAN, SC 29349-1416 FACILITY #:864-472-6636 JOHNSON TIMOTHY A PH#: 864-472-6636 Facility Email: TAJOHNSON4@SAVASC.COM Fac. Contact Email: TAJMAHAL26@AOL.COM Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1032 / 03/31/2020 Spartanburg / Limited Liability 82 N MAIN ST INMAN, SC 29349-1416 GOLDEN AGE OPERATIONS LLC Total Number of Licensed Beds44
GRAND STRAND REHAB AND NURSING CENTER 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 FACILITY #:843-293-1137 FLANSBURG CHRISTINE PH#: 843-293-1137 Facility Email: SWEESNER@WILSONSENIORCARE.COM Fac. Contact Email: CFLANSBURG@WILSONSENIORCARE.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0993 / 09/30/2019 Horry / Limited Liability 116 CASHUA ST DARLINGTON, SC 29532-3202 GRAND STRAND REHAB AND NURSING CENTER LLC Total Number of Licensed Beds88
GREENVILLE POST ACUTE 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 FACILITY #:864-232-2442 GREEN BRANDI PH#: 864-232-2442 Facility Email: JASON.MURRAY@PROVIDENCEGROUPHC.COM Fac. Contact Email: BRANDI.GREEN@GREENVILLEPOSTACUTE.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1025 / 01/31/2020 Greenville / Limited Liability 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 GREENVILLE POST ACUTE LLC Total Number of Licensed Beds132
GREENWOOD TRANSITIONAL REHABILITATION UNIT 1530 PKWY GREENWOOD, SC 29646-4027 FACILITY #:864-330-1800 BENCEBI ELIZABETH PH#: 864-330-1800 Facility Email: ELIZABETHBENCEBI@ERNESTHEALTH.COM Fac. Contact Email: ELIZABETHBENCEBI@ERNESTHEALTH.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0944 / 10/31/2019 Greenwood / Ltd. Liability 1530 PKWY GREENWOOD, SC 29646-4027 GREENWOOD REGIONAL REHABILITATION HOSPITAL LLC Total Number of Licensed Beds12

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
GREER REHABILITATION AND HEALTHCARE CENTER 401 CHANDLER RD GREER, SC 29651-1243 FACILITY #:864-879-1370 MURRAY ANNE PH#: 864-879-1370 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: AMURRAY1@ORIANNA.COM	NCF-1015 / 01/31/2020 Greenville / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 GREER REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:33
HALLMARK HEALTHCARE CENTER 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FACILITY #:843-821-5005 PH#: Facility Email: RUSTY.FLATHMANN@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0932 / 09/30/2019 Dorchester / Ltd. Liability 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 PALMETTO HALLMARK OPERATING LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
HEARTLAND HEALTH AND REHABILITATION CARE CENTER-HANAHAN 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 FACILITY #:843-553-0656 PH#: Facility Email: 4015ADMIN@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0526 / 12/31/2019 Berkeley / Limited Liability 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 HEARTLAND-CHARLESTON OF HANAHAN SC LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:35
HEARTLAND HEALTH CARE CENTER-GREENVILLE EAST 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 FACILITY #:864-246-2721 WILSON KATHLEEN S PH#: 864-246-2721 Facility Email: 4032ADMIN@HCR-MANORCARE.COM Fac. Contact Email: KATHLEEN.WILSON@HCR-MANORCARE.COM	NCF-0952 / 12/31/2019 Greenville / Limited Liability 601 SULPHUR SPRING RD GREENVILLE, SC 29617 OAKMONT EAST-GREENVILLE SC LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
HEARTLAND HEALTH CARE CENTER-GREENVILLE WEST 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1622 FACILITY #:864-246-2721 LOYD DEREK PH#: 864-246-2721 Facility Email: 4033ADMIN@HCR-MANORCARE.COM Fac. Contact Email: DEREK.LOYD@HCR-MANORCARE.COM	NCF-0953 / 12/31/2019 Greenville / Limited Liability 333 N SUMMIT ST, LICENSURE SUPPORT TOLEDO, OH 43604-1531 OAKMONT WEST-GREENVILLE SC LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:25

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HEARTLAND HEALTH CARE CENTER-UNION 709 RICE AVE EXT UNION, SC 29379-9023 FACILITY #:864-427-0306 PH#: Facility Email: 4031ADMIN@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0443 / 12/31/2019 Union / Limited Liability 709 RICE AVE EXT UNION, SC 29379-9023 OAKMONT OF UNION SC LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:88
HEARTLAND OF COLUMBIA REHABILITATION AND NURSING CENTER 2601 FOREST DR COLUMBIA, SC 29204-2363 FACILITY #:803-256-4983 JENKINS HAZEL B PH#: 803-256-4983 Facility Email: 512ADMIN@HCR-MANORCARE.COM Fac. Contact Email: HAZEL.JENKINS@HCR-MANORCARE.COM	NCF-0316 / 12/31/2019 Richland / Limited Liability 2601 FOREST DR COLUMBIA, SC 29204-2363 COLUMBIA REHABILITATION AND NURSING CENTER - COLUMBIA SC LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
HEARTLAND OF WEST ASHLEY REHABILITATION AND NURSING CENTER 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3360 FACILITY #:843-763-0233 PH#: Facility Email: WILLIAM.LEVERETT@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0413 / 12/31/2019 Charleston / Limited Liability 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3360 WEST ASHLEY REHABILITATION AND NURSING CENTER - CHARLESTON SC LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:25
HERITAGE AT LOWMAN REHABILITATION AND HEALTHCARE 201 FORTRESS DR CHAPIN, SC 29036 FACILITY #:803-732-3000 HYMAN ASHLEY PH#: 803-732-3000 Facility Email: AHYMAN@LHOMES.ORG Fac. Contact Email: AHYMAN@LHOMES.ORG	NCF-0688 / 05/31/2019 Richland / Non-Profit Corporation PO BOX 444 WHITE ROCK, SC 29177-0444 LUTHERAN HOMES OF SOUTH CAROLINA INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:76
HERITAGE HOME OF FLORENCE 515 WARLEY ST FLORENCE, SC 29501-5199 FACILITY #:843-662-4573 WELCH PAIGE S PH#: 843-662-4573 Facility Email: PWELCH@HERITAGEFLORENCE.COM Fac. Contact Email: PWELCH@HERITAGEFLORENCE.COM	NCF-0450 / 02/28/2020 Florence / Corporation 515 S WARLEY ST FLORENCE, SC 29501-5199 HERITAGE HOME OF FLORENCE INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HONORAGE NURSING CENTER 1207 N CASHUA RD FLORENCE, SC 29501-6969 FACILITY #:843-665-6172 TAYLOR PAMELA M PH#: 843-665-6172 Facility Email: PTAYLOR1549@AOL.COM Fac. Contact Email: PTAYLOR1549@AOL.COM Alzheimer Care: Yes Max # Residents 88 Alzheimer Unit: No Max # Beds:	NCF-0329 / 12/31/2019 Florence / Corporation 1207 N CASHUA RD FLORENCE, SC 29501-6969 HONORAGE NURSING HOME OF FLORENCE SC INC Total Number of Licensed Beds88
INMAN OPERATIONS 51 N MAIN ST INMAN, SC 29349-1437 FACILITY #:864-472-9370 PH#: Facility Email: TAJOHNSON4@SAVASC.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1030 / 03/31/2020 Spartanburg / 82 N MAIN ST INMAN, SC 29349-1416 INMAN OPERATIONS LLC Total Number of Licensed Beds40
IVA REHABILITATION AND HEALTHCARE CENTER 406 W BROAD ST IVA, SC 29655-9765 FACILITY #:864-848-7433 FIELDS ANTHONY PH#: 864-348-7433 Facility Email: IVAADMINISTRATOR@SA-HC.COM Fac. Contact Email: AFIELDS1@ORIANNA.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1023 / 01/31/2020 Anderson / Limited Liability 406 W BROAD ST IVA, SC 29655-9765 SC-GA2018 IVA REHABILITATION AND HEALTHCARE CENTER LLC Total Number of Licensed Beds60
J F HAWKINS NURSING HOME 1330 KINARD ST NEWBERRY, SC 29108-3096 FACILITY #:803-276-2601 RANDELL TY L PH#: 803-276-2601 Facility Email: TRANSDSELL@NEWBERRYCCRC.COM Fac. Contact Email: TRANSDSELL@NEWBERRYCCRC.COM Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 20	NCF-0234 / 02/28/2020 Newberry / Limited Liability 1330 KINARD ST NEWBERRY, SC 29108-3096 NEWBERRY OPERATOR LLC Total Number of Licensed Beds18
JOHN EDWARD HARTER NURSING CENTER 185 REVOLUTIONARY TRL FAIRFAX, SC 29827-7105 FACILITY #:803-632-3334 GOODING GENE L PH#: 803-632-3334 Facility Email: LARIG@ACHOSPITAL.ORG Fac. Contact Email: LARIG@ACHOSPITAL.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0259 / 04/30/2020 Allendale / County PO BOX 218 FAIRFAX, SC 29827-0218 ALLENDALE COUNTY HOSPITAL BOARD OF TRUSTEES Total Number of Licensed Beds44

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 FACILITY #:843-559-5888 FRENCH LINDSAY PH#: 843-559-5888 Facility Email: LFRENCH@ORIANNA.COM Fac. Contact Email: LFRENCH@ORIANNA.COM	NCF-0911 / 11/30/2019 Charleston / Limited Liability 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 32
JOLLEY ACRES HEALTHCARE CENTER 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 FACILITY #:803-534-1001 BLANKENSHIP LINDA PH#: 803-531-1001 Facility Email: TRUDY.WINGARD@PALMLTC.COM Fac. Contact Email: LINDA.BLANKENSHIP@PALMLTC.COM	NCF-0929 / 09/30/2019 Orangeburg / Ltd. Liability 415 SNAPDRAGON ST COPE, SC 29038 PALMETTO JOLLEY ACRES OPERATING LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 60
KERSHAWHEALTH KARESH LONG TERM CARE 1311 ROBERTS ST CAMDEN, SC 29020-3737 FACILITY #:803-713-6376 HANLEY JEANNE H PH#: 803-713-6376 Facility Email: KHEITKAMP@WHITEOAKMANOR.COM Fac. Contact Email: JHANLEY@WHITEOAKMANOR.COM	NCF-0313 / 09/30/2019 Kershaw / County 130 E MAIN ST SPARTANBURG, SC 29306 KERSHAWHEALTH BOARD OF TRUSTEES
Alzheimer Care: Yes Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 96
LAKE CITY-SCRANTON HEALTHCARE CENTER 1940 BOYD RD SCRANTON, SC 29591-5835 FACILITY #:843-389-9201 GIBBS JEFFREY PH#: 843-389-9201 Facility Email: JEFFREY.GIBBS@PALMLTC.COM Fac. Contact Email: JEFFREY.GIBBS@PALMLTC.COM	NCF-0928 / 09/30/2019 Florence / Ltd. Liability 3321 DOGWOOD CHASE FLORENCE, SC 29501 PALMETTO LAKE CITY OPERATING LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 88
LAKE EMORY POST ACUTE CARE 59 BLACKSTOCK RD INMAN, SC 29349-1827 FACILITY #:864-472-2028 PH#: Facility Email: ROBERT.KNEELAND0532@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0862 / 08/31/2019 Spartanburg / Ltd. Liability 59 BLACKSTOCK RD INMAN, SC 29349-1827 THI OF SOUTH CAROLINA AT CAMP CARE LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 88

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>LAKE MARION NURSING FACILITY 1527 URBANARD SUMMERTON, SC 29148-8929 FACILITY #:803-485-2317 MILES ANETTE C PH#: 803-485-2317 Facility Email: RMATTHEWS@CLARENDONLTC.ORG Fac. Contact Email: AMILES@CLARENDONLTC.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0736 / 01/31/2020 Clarendon / District PO BOX 57 MANNING, SC 29102-0057 CLARENDON HOSPITAL DISTRICT Total Number of Licensed Beds88</p>
<p>LAKE MOULTRIE NURSING HOME 1038 MCGILL LN SAINT STEPHEN, SC 29479-3196 FACILITY #:843-567-2307 DRIGGERS JOANN C PH#: 843-567-2307 Facility Email: RMATTHEWS@CLARENDONLTC.ORG Fac. Contact Email: JDRIGGERS@CLARENDONLTC.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0738 / 12/31/2019 Berkeley / District PO BOX 57 MANNING, SC 29102-0057 CLARENDON HOSPITAL DISTRICT Total Number of Licensed Beds88</p>
<p>LAKES AT LITCHFIELD SKILLED NURSING CENTER 80 TIMBERVIEW CT PAWLEYS ISLAND, SC 29585-5798 FACILITY #:843-235-9393 BARBER JEFF B PH#: 843-235-9393 Facility Email: LICENSING@LAKES-LITCHFIELD.COM Fac. Contact Email: LICENSING@LAKES-LITCHFIELD.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0843 / 12/31/2019 Georgetown / Ltd. Liability 120 LAKES AT LITCHFIELD DR GREENVILLE, SC 29607 LITCHFIELD RETIREMENT LLC Total Number of Licensed Beds24</p>
<p>LANCASTER HEALTH AND REHABILITATION 2044 PAGELAND HWY LANCASTER, SC 29720-7608 FACILITY #:803-285-7907 SKINNER JEFF PH#: 803-285-7907 Facility Email: JEFF.SKINNER@FUNDLTC.COM Fac. Contact Email: JEFF.SKINNER@FUNDLTC.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0551 / 02/28/2020 Lancaster / Corporation 2044 PAGELAND HWY LANCASTER, SC 29720-7608 LANCASTER HEALTH CARE LLC Total Number of Licensed Beds142</p>
<p>LAUREL BAYE HEALTHCARE OF BLACKVILLE 1612 JONES BRIDGE RD BLACKVILLE, SC 29817 FACILITY #:803-284-4313 MYERS MITZI PH#: 803-284-4313 Facility Email: MMYERS@LAURELBAYE.COM Fac. Contact Email: MMYERS@LAURELBAYE.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0755 / 08/31/2019 Barnwell / Ltd. Liability 1612 JONES BRIDGE RD BLACKVILLE, SC 29817-3066 LAUREL BAYE HEALTHCARE OF BLACKVILLE LLC Total Number of Licensed Beds85</p>

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>LAUREL BAYE HEALTHCARE OF WILLISTON 5721 SPRINGFIELD RD WILLISTON, SC 29853-1917 FACILITY #:803-266-3229 RIDENOUR BRENDA PH#: 803-266-3229 Facility Email: BRIDENOUR@LAURELBAYE.COM Fac. Contact Email: BRIDENOUR@LAURELBAYE.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0754 / 08/31/2019 Barnwell / Ltd. Liability 5721 SPRINGFIELD RD WILLISTON, SC 29853-1917 LAUREL BAYE HEALTHCARE OF WILLISTON LLC Total Number of Licensed Beds44</p>
<p>LAUREL CREST RETIREMENT COMMUNITY 100 JOSEPH WALKER DR WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370 DEEL JAMES F PH#: 803-796-0370 Facility Email: JIM.DEEL@LAURELCREST.ORG Fac. Contact Email: JIM.DEEL@LAURELCREST.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1001 / 01/31/2020 Lexington / Non-Profit Corporation 100 JOSEPH WALKER DR WEST COLUMBIA, SC 29169-6939 LAUREL CREST RETIREMENT COMMUNITY (NPC) Total Number of Licensed Beds12</p>
<p>LEXINGTON MEDICAL CENTER EXTENDED CARE 815 OLD CHEROKEE RD LEXINGTON, SC 29072-8115 FACILITY #:803-359-5181 GILL KATHRYN PH#: 803-359-5181 Facility Email: KDGILL@LEXHEALTH.ORG Fac. Contact Email: KDGILL@LEXHEALTH.ORG Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 80</p>	<p>NCF-0730 / 12/31/2019 Lexington / Corporation 815 OLD CHEROKEE RD LEXINGTON, SC 29072-8115 LEXMED INC Total Number of Licensed Beds38</p>
<p>LIFE CARE CENTER OF CHARLESTON 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 FACILITY #:843-764-3500 CLIETT BETH A PH#: 843-764-3500 Facility Email: BETH_CLIETT@LCCA.COM Fac. Contact Email: BETH_CLIETT@LCCA.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0878 / 11/30/2019 Charleston / Ltd. Liability 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 CHARLESTON MEDICAL INVESTORS LLC Total Number of Licensed Beds148</p>
<p>LIFE CARE CENTER OF COLUMBIA 2514 FARAWAY DR COLUMBIA, SC 29223-3969 FACILITY #:803-865-1999 STUDNICKA STEPHANIE D PH#: 803-865-1999 Facility Email: STEPHANIE_STUDNICKA@LCCA.COM Fac. Contact Email: STEPHANIE_STUDNICKA@LCCA.COM Alzheimer Care: No Max # Residents 80 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0634 / 06/30/2019 Richland / Corporation 2514 FARAWAY DR COLUMBIA, SC 29223-3969 RCM-COLUMBIA INC Total Number of Licensed Beds179</p>

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LIFE CARE CENTER OF HILTON HEAD 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 FACILITY #:843-681-6006 LEWIS DANIEL PH#: 843-681-6006 Facility Email: DANIEL_LEWIS@LCCA.COM Fac. Contact Email: DANIEL_LEWIS@LCCA.COM	NCF-0725 / 05/31/2019 Beaufort / Corporation 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 LIFE CARE CENTERS OF AMERICA INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
LINLEY PARK REHABILITATION AND HEALTHCARE CENTER 208 JAMES ST ANDERSON, SC 29625-2942 FACILITY #:864-226-3427 HERITAGE CARLA PH#: 864-226-3427 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: CHERITAGE@ORIANNA.COM	NCF-1019 / 01/31/2020 Anderson / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 LINLEY PARK REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
LINVILLE COURTS AT THE CASCADES VERDAE 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FACILITY #:864-528-5529 WOOD ZACHARY L PH#: 864-528-5529 Facility Email: LICENSING@CASCADES-VERDAE.COM Fac. Contact Email: LICENSING@CASCADES-VERDAE.COM	NCF-0956 / 04/30/2020 Greenville / Limited Liability 3530 TORINGDON WAY STE 204 CHARLOTTE, NC 28277-3436 CASCADES NURSING LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds44
LODGE AT WELLMORE 111 WELLMORE DR TEGA CAY, SC 29708-0039 FACILITY #:803-835-7000 DUNN DAVID M PH#: 803-835-7000 Facility Email: DAVID.DUNN@WELL-MORE.COM Fac. Contact Email: DAVID.DUNN@WELL-MORE.COM	NCF-0988 / 09/30/2019 York / Limited Liability 111 WELLMORE DR TEGA CAY, SC 29708-0039 WELLMORE OF TEGA CAY LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
LORIS REHAB AND NURSING CENTER 3620 STEVENS ST LORIS, SC 29569-2953 FACILITY #:843-716-7106 OATES MARGARET PH#: 843-716-7106 Facility Email: SWEESNER@WILSONSENIORCARE.COM Fac. Contact Email: BOATES@WILSONSENIORCARE.COM	NCF-0207 / 08/30/2019 Horry / Limited Liability 116 CASHUA ST DARLINGTON, SC 29532-3202 LORIS REHAB AND NURSING CENTER LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>MAGNOLIA MANOR-GREENVILLE 411 ANSEL ST GREENVILLE, SC 29601-3499 FACILITY #:864-232-5368 COCHRAN AMANDA C PH#: 864-232-5368 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: AMANDA.COCHRAN@FUNDLTC.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0860 / 08/31/2019 Greenville / Ltd. Liability 411 ANSEL ST GREENVILLE, SC 29601-3499 THI OF SOUTH CAROLINA AT GREENVILLE LLC Total Number of Licensed Beds99</p>
<p>MAGNOLIA MANOR-GREENWOOD 1415 PKWY GREENWOOD, SC 29646-4044 FACILITY #:864-227-9500 GOFORTH EDITH C PH#: 864-227-9500 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: EDITH.GOFORTH@FUNDLTC.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0866 / 08/31/2019 Greenwood / Ltd. Liability 1415 PKWY GREENWOOD, SC 29646-4044 THI OF SOUTH CAROLINA AT GREENWOOD LLC Total Number of Licensed Beds88</p>
<p>MAGNOLIA MANOR-INMAN 63 BLACKSTOCK RD INMAN, SC 29349-1849 FACILITY #:864-472-9055 PH#: Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0863 / 08/31/2019 Spartanburg / Ltd. Liability 63 BLACKSTOCK RD INMAN, SC 29349-1849 THI OF SOUTH CAROLINA AT MAGNOLIA MANOR-INMAN LLC Total Number of Licensed Beds176</p>
<p>MAGNOLIA MANOR-ROCK HILL 127 MURRAH DR ROCK HILL, SC 29732-2390 FACILITY #:803-324-7591 PH#: Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0859 / 08/31/2019 York / Ltd. Liability 127 MURRAH DR ROCK HILL, SC 29732-2390 THI OF SOUTH CAROLINA AT ROCK HILL LLC Total Number of Licensed Beds106</p>
<p>MAGNOLIA MANOR-SPARTANBURG 375 SERPENTINE DR SPARTANBURG, SC 29303-3026 FACILITY #:864-585-0218 WINN ANNE O PH#: 864-585-0218 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: ANN.WINN@FUNDLTC.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0867 / 08/31/2019 Spartanburg / Ltd. Liability 375 SERPENTINE DR SPARTANBURG, SC 29303-3026 THI OF SOUTH CAROLINA AT SPARTANBURG LLC Total Number of Licensed Beds95</p>

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MANNA REHABILITATION AND HEALTHCARE CENTER
716 E CEDAR ROCK ST
PICKENS, SC 29671-2324 FACILITY #:864-878-4739
GRIGGS TODD PH#: 864-878-4739
Facility Email: KRUGGIERO@HCNAVIGATOR.NET
Fac. Contact Email: TGRIGGS@ORIANNA.COM

NCF-1012 / 01/31/2020
Pickens / Limited Liability
4 W RED OAK LN STE 201
WHITE PLAINS, NY 10604
SC-GA2018 MANNA REHABILITATION AND HEALTHCARE CENTER LLC

Alzheimer Care: No Max # Residents:
Alzheimer Unit: No Max # Beds:

Total Number of Licensed Beds:30

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY
1 MARTHA FRANKS DR
LAURENS, SC 29360-1799 FACILITY #:864-984-4541
PH#:
Facility Email: KHOLLIDAY@SCBMA.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0435 / 03/31/2020
Laurens / Non-Profit Corporation
1 MARTHA FRANKS DR
LAURENS, SC 29360-1799
SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimer Care: Yes Max # Residents 20
Alzheimer Unit: Yes Max # Beds: 20

Total Number of Licensed Beds88

MCCORMICK REHABILITATION AND HEALTHCARE CENTER
204 HOLIDAY ST
MCCORMICK, SC 29835 FACILITY #:864-391-2390
PH#:
Facility Email: KRUGGIERO@HCNAVIGATOR.NET
Fac. Contact Email: No Facility Contact Email on Record

NCF-1018 / 01/31/2020
McCormick / Limited Liability
4 W RED OAK LN STE 201
WHITE PLAINS, NY 10604
SC-GA2018 MCCORMICK REHABILITATION AND HEALTHCARE CENTER LLC

Alzheimer Care: No Max # Residents:
Alzheimer Unit: No Max # Beds:

Total Number of Licensed Beds:20

MCCOY MEMORIAL NURSING CENTER
207 CHAPPELL DR
BISHOPVILLE, SC 29010-1167 FACILITY #:803-484-5636
MCCASKILL CARLETTE PH#: 803-484-5636
Facility Email: CMCCASKILL@CARLYLESENIORCARE.COM
Fac. Contact Email: CMCCASKILL@CARLYLESENIORCARE.COM

NCF-0986 / 07/31/2019
Lee / Limited Liability
1402-D MEADORS FARM RD
FLORENCE, SC 29504
CARLYLE SENIOR CARE OF BISHOPVILLE LLC

Alzheimer Care: No Max # Residents:
Alzheimer Unit: No Max # Beds:

Total Number of Licensed Beds:20

MEDFORD NURSING CENTER
105 MEDFORD DR
DARLINGTON, SC 29532-2719 FACILITY #:843-398-7000
LOFE TYLER A PH#: 843-398-7000
Facility Email: SWEESNER@WILSONSENIORCARE.COM
Fac. Contact Email: TLOFE@WILSONSENIORCARE.COM

NCF-0891 / 08/31/2019
Darlington / Ltd. Liability
116 CASHUA ST
DARLINGTON, SC 29532-3202
MEDFORD NURSING CENTER LLC

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

Total Number of Licensed Beds88

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
METHODIST MANOR HEALTHCARE CENTER 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 FACILITY #:843-664-0700 TABOR TERESSA L PH#: 843-664-0700 Facility Email: TTABOR@THEMANORSENIORLIVING.COM Fac. Contact Email: TTABOR@THEMANORSENIORLIVING.COM	NCF-0579 / 09/30/2019 Florence / Non-Profit Corporation 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 UNITED METHODIST MANOR OF THE PEE DEE
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
METHODIST OAKS 1000 METHODIST OAKS DR ORANGEBURG, SC 29115-1813 FACILITY #:803-534-1212 TILL ELAINE M PH#: 803-534-1212 Facility Email: ETILL@THEOAKSSC.COM Fac. Contact Email: ETILL@THEOAKSSC.COM	NCF-0735 / 11/30/2019 Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:22
MIDLANDS HEALTH & REHABILITATION CENTER 1007 N KINGS ST COLUMBIA, SC 29223-1916 FACILITY #:803-699-4111 STANLEY MATT PH#: 803-699-4111 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: MATT.STANLEY@FUNDLTC.COM	NCF-0868 / 08/31/2019 Richland / Ltd. Liability 1007 N KINGS ST COLUMBIA, SC 29223-1916 THI OF SOUTH CAROLINA AT COLUMBIA LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:88
MILLENNIUM POST ACUTE REHABILITATION 2416 SUNSET BLVD WEST COLUMBIA, SC 29169-4791 FACILITY #:803-796-8024 NADKARNI NATASHA PH#: 803-796-8024 Facility Email: RENEWALS@ENSIGNSERVICES.NET Fac. Contact Email: NNADKARNI@ENSIGNSERVICES.NET	NCF-0948 / 11/30/2019 Lexington / Corporation 27101 PUERTA REAL STE 450 MISSION VIEJO, CA 92691 STONEY HILL HEALTHCARE INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
MORRELL NURSING CENTER 900 N MARQUIS HWY HARTSVILLE, SC 29550-3526 FACILITY #:843-383-5164 BYRD ANNA PH#: 843-383-5164 Facility Email: ABYRD@WILSONSENIORCARE.COM Fac. Contact Email: ABYRD@WILSONSENIORCARE.COM	NCF-0881 / 08/31/2019 Darlington / Limited Liability 116 CASHUA ST DARLINGTON, SC 29532-3202 MORRELL NURSING CENTER LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:54

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>MOUNT PLEASANT MANOR 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 FACILITY #:843-884-8903 WHITE BRUCE L PH#: 843-884-8903 Facility Email: BWHITE@MOUNTPLEASANTMANOR.COM Fac. Contact Email: BWHITE@MOUNTPLEASANTMANOR.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0896 / 05/31/2019 Charleston / Ltd. Liability 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 MOUNT PLEASANT MANOR LLC Total Number of Licensed Beds:32</p>
<p>MOUNTAINVIEW NURSING HOME 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 FACILITY #:864-582-4175 DILLARD WILSON K PH#: 864-582-4175 Facility Email: WDILLARD@MOUNTAINVIEWNH.COM Fac. Contact Email: WDILLARD@MOUNTAINVIEWNH.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0149 / 06/30/2019 Spartanburg / Corporation 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 COMMUNITY SERVICES FOR THE AGING INC Total Number of Licensed Beds:32</p>
<p>MUSC HEALTH CHESTER NURSING CENTER ONE MEDICAL PARK DR CHESTER, SC 29706 FACILITY #:803-581-3151 BRICE ANTHONY BERNARD PH#: 803-581-3151 Facility Email: ELLIST@MUSC.EDU Fac. Contact Email: BRICEAN@MUSC.EDU Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1028 / 03/31/2020 Chester / 169 ASHLEY AVE CHARLESTON, SC 29425 MEDICAL UNIVERSITY HOSPITAL AUTHORITY Total Number of Licensed Beds80</p>
<p>MUSC HEALTH LANCASTER NURSING CENTER 800 W MEETING ST LANCASTER, SC 29720 FACILITY #:803-286-1481 GOSNELL LISA R PH#: 803-286-1837 Facility Email: ELLIST@MUSC.EDU Fac. Contact Email: LISA_GOSNELL@CHS.NET Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1029 / 03/31/2020 Lancaster / 169 ASHLEY AVE CHARLESTON, SC 29425 MEDICAL UNIVERSITY HOSPITAL AUTHORITY Total Number of Licensed Beds14</p>
<p>MUSC HEALTH MULLINS NURSING CENTER 518 S MAIN ST MULLINS, SC 29574-3510 FACILITY #:843-464-8211 GRIGGS DEBRA PH#: 843-464-8211 Facility Email: ELLIST@MUSC.EDU Fac. Contact Email: DGRIGGS@MCMED.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1027 / 03/31/2020 Marion / 169 ASHLEY AVE CHARLESTON, SC 29425 MEDICAL UNIVERSITY HOSPITAL AUTHORITY Total Number of Licensed Beds92</p>

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
MYRTLE BEACH MANOR 9547 HWY 17 N MYRTLE BEACH, SC 29572-0000 FACILITY #:843-449-5283 PH#: Facility Email: LICENSING@5SSL.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0829 / 01/31/2020 Horry / Corporation 9547 HWY 17N MYRTLE BEACH, SC 29572 FS TENANT POOL I TRUST
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 60
NHC HEALTHCARE ANDERSON 1501 E GBREENVILLE ST ANDERSON, SC 29621 FACILITY #:864-226-8356 HILL HEATH E PH#: 864-226-8356 Facility Email: HEATH.HILL@NHCCARE.COM Fac. Contact Email: HEATH.HILL@NHCCARE.COM	NCF-0801 / 06/30/2019 Anderson / Ltd. Liability 1501 E GREENVILLE ST ANDERSON, SC 29621-2004 NHC HEALTHCARE/ANDERSON LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 290
NHC HEALTHCARE BLUFFTON 3039 OKATIE HWY BLUFFTON, SC 29909-5101 FACILITY #:843-705-8220 YOKLEY STEVEN T PH#: 843-705-8220 Facility Email: STEVEN.YOKLEY@NHCCARE.COM Fac. Contact Email: STEVEN.YOKLEY@NHCCARE.COM	NCF-0958 / 01/31/2020 Beaufort / Limited Liability 3039 OKATIE HWY BLUFFTON, SC 29909-5101 NHC HEALTHCARE/BLUFFTON LLC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 40	Total Number of Licensed Beds: 120
NHC HEALTHCARE CHARLESTON 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 FACILITY #:843-766-5228 BARTLETT GREGORY T PH#: 843-766-5228 Facility Email: TYLER.BARTLETT@NHCCARE.COM Fac. Contact Email: TYLER.BARTLETT@NHCCARE.COM	NCF-0871 / 09/30/2019 Charleston / Limited Liability 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 NHC HEALTHCARE-CHARLESTON LLC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 32
NHC HEALTHCARE CLINTON 304 JACOBS HWY CLINTON, SC 29325-7279 FACILITY #:864-833-2550 HOLDER CHARLES E PH#: 864-833-2550 Facility Email: CHUCK.HOLDER@NHCCARE.COM Fac. Contact Email: CHUCK.HOLDER@NHCCARE.COM	NCF-0804 / 06/30/2019 Laurens / Ltd. Liability 304 JACOBS HWY CLINTON, SC 29325 NHC HEALTHCARE/CLINTON LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 31

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>NHC HEALTHCARE GARDEN CITY 9405 HWY 17 BYP MURRELLS INLET, SC 29576-9301 FACILITY #:843-650-2213 PH#: Facility Email: ALEX.SELLARS@NHCCARE.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0825 / 10/31/2019 Horry / Ltd. Liability PO BOX 309 MURRELLS INLET, SC 29576-0309 NHC HEALTHCARE/GARDEN CITY LLC Total Number of Licensed Beds:48</p>
<p>NHC HEALTHCARE GREENVILLE 1305 BOILING SPRINGS RD GREER, SC 29650-4139 FACILITY #:864-458-7566 MOORHOUSE BRYAN M PH#: 864-458-7566 Facility Email: BMOORHOUSE@NHCGREENVILLE.COM Fac. Contact Email: BMOORHOUSE@NHCGREENVILLE.COM Alzheimer Care: Yes Max # Residents 21 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0807 / 06/30/2019 Greenville / Ltd. Liability 1305 BOILING SPRINGS RD GREER, SC 29650-4139 NHC HEALTHCARE/GREENVILLE LLC Total Number of Licensed Beds:76</p>
<p>NHC HEALTHCARE GREENWOOD 437 CAMBRIDGE AVE E GREENWOOD, SC 29646-2244 FACILITY #:864-223-1950 SELLARS RICHARD A PH#: 864-223-1950 Facility Email: RICK.SELLARS@NHCCARE.COM Fac. Contact Email: RICK.SELLARS@NHCCARE.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0802 / 06/30/2019 Greenwood / Ltd. Liability 437 E CAMBRIDGE AVE GREENWOOD, SC 29646-2244 NHC HEALTHCARE/GREENWOOD LLC Total Number of Licensed Beds:52</p>
<p>NHC HEALTHCARE LAURENS 379 PINEHAVEN ST EXT LAURENS, SC 29360-2672 FACILITY #:864-984-6584 SHEARER RICKIE L PH#: 864-984-6584 Facility Email: RICKIE.SHEARER@NHCCARE.COM Fac. Contact Email: RICKIE.SHEARER@NHCCARE.COM Alzheimer Care: Yes Max # Residents 44 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0326 / 06/30/2019 Laurens / Ltd. Liability 379 PINEHAVEN ST EXT LAURENS, SC 29360-2672 NHC HEALTHCARE/LAURENS LLC Total Number of Licensed Beds:76</p>
<p>NHC HEALTHCARE LEXINGTON 2993 SUNSET BLVD WEST COLUMBIA, SC 29169-3421 FACILITY #:803-939-0026 MANLEY MICHAEL W PH#: 803-939-0026 Facility Email: MICHAEL.MANLEY@NHCCARE.COM Fac. Contact Email: MICHAEL.MANLEY@NHCCARE.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0798 / 06/30/2019 Lexington / Ltd. Liability 2993 SUNSET BLVD WEST COLUMBIA, SC 29169-3421 NHC HEALTHCARE/LEXINGTON LLC Total Number of Licensed Beds:70</p>

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HEALTHCARE MAULDIN 850 E BUTLER RD GREENVILLE, SC 29607-5842 FACILITY #:864-675-6421 SELLARS GIDEON A PH#: 864-675-6421 Facility Email: GIDEON.SELLARS@NHCCARE.COM Fac. Contact Email: GIDEON.SELLARS@NHCCARE.COM Alzheimer Care: Yes Max # Residents 90 Alzheimer Unit: Yes Max # Beds: 30	NCF-0796 / 06/30/2019 Greenville / Ltd. Liability 850 E BUTLER RD GREENVILLE, SC 29607-5842 NHC HEALTHCARE/MAULDIN LLC Total Number of Licensed Beds:80
NHC HEALTHCARE NORTH AUGUSTA 350 AUSTIN GRAYBILL RD NORTH AUGUSTA, SC 29841 FACILITY #:803-278-4272 TROXEL-HARBIN HOLLY PH#: 803-278-4272 Facility Email: HOLLY.HARBIN@NHCCARE.COM Fac. Contact Email: HOLLY.HARBIN@NHCCARE.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0799 / 06/30/2019 Aiken / Ltd. Liability 350 AUSTIN GRAYBILL RD NORTH AUGUSTA, SC 29841 NHC HEALTHCARE/NORTH AUGUSTA LLC Total Number of Licensed Beds:92
NHC HEALTHCARE PARKLANE 7601 PARKLANE RD COLUMBIA, SC 29223-6122 FACILITY #:803-741-9090 ARGO MELISSA B PH#: 803-741-9090 Facility Email: MELISSA.ARG0@NHCCARE.COM Fac. Contact Email: MELISSA.ARG0@NHCCARE.COM Alzheimer Care: Yes Max # Residents 38 Alzheimer Unit: Yes Max # Beds: 30	NCF-0797 / 06/30/2019 Richland / Ltd. Liability 7601 PARKLANE RD COLUMBIA, SC 29223-6122 NHC HEALTHCARE/PARKLANE LLC Total Number of Licensed Beds:80
NHC HEALTHCARE SUMTER 1018 N GUIGNARD DR SUMTER, SC 29150-2423 FACILITY #:803-773-5567 CROTTS JEANIE S PH#: 803-773-5567 Facility Email: JEANIE.CROTTS@NHCCARE.COM Fac. Contact Email: JEANIE.CROTTS@NHCCARE.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0471 / 01/31/2020 Sumter / Corporation 1018 N GUIGNARD DR SUMTER, SC 29150-2423 NATIONAL HEALTH CORPORATION Total Number of Licensed Beds:38
OAKBROOK HEALTH AND REHABILITATION CENTER 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 FACILITY #:843-875-9053 LEVERETT KEVIN PH#: 843-875-9053 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: KEV.LEVERETT@FUNDLTC.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0998 / 08/31/2019 Dorchester / Limited Liability 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 OAKBROOK HEALTH CARE LLC Total Number of Licensed Beds88

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
OAKHAVEN NURSING CENTER 123 OAK ST DARLINGTON, SC 29532-2628 FACILITY #:843-398-7041 PRUITT KELLEY PH#: 843-398-7041 Facility Email: SWEESNER@WILSONSENIORCARE.COM Fac. Contact Email: KPURITT@WILSONSENIORCARE.COM	NCF-0890 / 08/31/2019 Darlington / Limited Liability 116 CASHUA ST DARLINGTON, SC 29532-3202 OAKHAVEN NURSING CENTER LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:88
OPUS POST ACUTE REHABILITATION 300 AGAPE DR WEST COLUMBIA, SC 29169-3307 FACILITY #:803-739-5282 GUZMAN CHARLES N PH#: 803-739-5282 Facility Email: RENEWALS@ENSIGNSERVICES.NET Fac. Contact Email: CHGUZMAN@ENSIGNSERVICES.NET	NCF-0976 / 12/31/2019 Lexington / Corporation 27101 PUERTA REAL STE 450 MISSION VIEJO, CA 92691-8566 SOUTHERN CHARM HEALTHCARE INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:100
PATEWOOD REHABILITATION AND HEALTHCARE CENTER 2 GRIFFITH RD GREENVILLE, SC 29607-3503 FACILITY #:864-990-1918 CLEMENTS JAMES A PH#: 864-990-1918 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: JCLEMENTS1@ORIANNA.COM	NCF-1013 / 01/31/2020 Greenville / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 PATEWOOD REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:120
PEACHTREE CENTRE 1434 N LIMESTONE ST GAFFNEY, SC 29340-4798 FACILITY #:864-487-2717 PH#: Facility Email: ANSHELNIEDERMAN@GMAIL.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0972 / 11/30/2019 Cherokee / Limited Liability 1434 N LIMESTONE ST GAFFNEY, SC 29340-4798 PEACHTREE OPERATING GROUP LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:11
PHYSICAL REHABILITATION AND WELLNESS CENTER OF SPARTANBURG 8020 WHITE AVE SPARTANBURG, SC 29303-2099 FACILITY #:864-542-8515 PH#: Facility Email: BETHANY.BAYNARD@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0861 / 08/31/2019 Spartanburg / Ltd. Liability 8020 WHITE AVE SPARTANBURG, SC 29303-2099 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT SPARTANBURG LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:120

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PLACE AT PEPPER HILL 3525 AUGUSTUS RD AIKEN, SC 29801-2701 FACILITY #:803-642-8376 BURTON CARMELLA PH#: 803-642-8376 Facility Email: MELISSAODEN@MSN.COM Fac. Contact Email: CARMELLABURTON@PEPPERHILL.COM Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1009 / 10/31/2019 Aiken / Limited Liability 3525 AUGUSTUS RD AIKEN, SC 29801-2701 PLACE AT PEPPER HILL LLC Total Number of Licensed Beds:25
POINSETT REHABILITATION AND HEALTHCARE CENTER 8 N TEXAS AVE GREENVILLE, SC 29611-5034 FACILITY #:864-295-1331 ADDISON MICHELLE PH#: 864-295-1331 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: MADDISON@ORIANNA.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1016 / 01/31/2020 Greenville / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 POINSETT REHABILITATION AND HEALTHCARE CENTER LLC Total Number of Licensed Beds:32
PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-CLINTON 801 MUSGROVE ST CLINTON, SC 29325-1796 FACILITY #:864-833-5190 PRIDMORE ROBERT P PH#: 864-833-5190 Facility Email: PAUL.PRIDMORE@PRESCOMM.ORG Fac. Contact Email: PAUL.PRIDMORE@PRESCOMM.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0366 / 04/30/2020 Laurens / Non-Profit Corporation 801 MUSGROVE ST CLINTON, SC 29325-1796 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA Total Number of Licensed Beds64
PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-COLUMBIA 700 DAVEGA DR LEXINGTON, SC 29073-9698 FACILITY #:803-796-8700 BASILE JASON PH#: 803-796-8700 Facility Email: JASON.BASILE@PRESCOMM.ORG Fac. Contact Email: JASON.BASILE@PRESCOMM.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0545 / 12/31/2019 Lexington / Non-Profit Corporation 700 DAVEGA DR LEXINGTON, SC 29073-9698 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA Total Number of Licensed Beds44
PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-FLORENCE 2350 W LUCAS ST FLORENCE, SC 29501-1201 FACILITY #:843-665-2222 PH#: Facility Email: BEN.PRINCE@PRESCOMM.ORG Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0420 / 09/30/2019 Florence / Non-Profit Corporation 2350 W LUCAS ST FLORENCE, SC 29501-1201 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA Total Number of Licensed Beds44

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-FOOTHILLS 205 BUD NALLEY DR EASLEY, SC 29642 FACILITY #:864-859-3367 NICHOLS KAREN H PH#: 864-859-3367 Facility Email: KAREN.NICHOLS@PRESHOMESC.ORG Fac. Contact Email: KAREN.NICHOLS@PRESHOMESC.ORG	NCF-0809 / 10/31/2019 Pickens / Non-Profit Corporation 205 BUD NALLEY DR EASLEY, SC 29642 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 20	Total Number of Licensed Beds 44
PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-SUMMERVILLE 201 W 9TH NORTH ST SUMMERVILLE, SC 29483-6721 FACILITY #:843-873-2553 WHITE YOLANDA M PH#: 843-873-2553 Facility Email: YOLANDA.WHITE@PRESHOMESC.ORG Fac. Contact Email: YOLANDA.WHITE@PRESHOMESC.ORG	NCF-0202 / 04/30/2020 Dorchester / Non-Profit Corporation 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds 88
PRESTON HEALTH CENTER 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 FACILITY #:843-689-7077 PH#:	NCF-0576 / 04/30/2019 (Renewal Pending) Beaufort / Limited Liability Limited Partnership 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP
Facility Email: SBUKOSKEY@THECYPRESS.COM Fac. Contact Email: No Facility Contact Email on Record	Total Number of Licensed Beds 77
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 11	
PRINCE GEORGE HEALTHCARE CENTER 901 MAPLE ST GEORGETOWN, SC 29440-4333 FACILITY #:843-546-6101 PORTER RICHARD PH#: 843-546-6101 Facility Email: RICHARD.PORTER@PALMLTC.COM Fac. Contact Email: RICHARD.PORTER@PALMLTC.COM	NCF-0930 / 09/30/2019 Georgetown / Ltd. Liability 901 MAPLE ST GEORGETOWN, SC 29440-4333 PALMETTO PRINCE GEORGE OPERATING LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds 48
PRISMA HEALTH GREENVILLE MEM SUBACUTE 701 GROVE RD GREENVILLE, SC 29605 FACILITY #:864-455-7000 TALBERT ADRIENNE PH#: 864-455-7000 Facility Email: GMMCAR@PRISMAHEALTH.ORG Fac. Contact Email: ATALBERT@GHS.ORG	NCF-0989 / 10/31/2019 Greenville / Corporation 701 GROVE RD GREENVILLE, SC 29605 PRISMA HEALTH-UPSTATE
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds 15

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRISMA HEALTH LILA DOYLE 101 LILA DOYLE DR SENECA, SC 29672-9495 FACILITY #:864-885-7979 SEAWRIGHT PHYLLIS PH#: 864-885-7679 Facility Email: PHYLLIS.SEAWRIGHT@PRISMAHEALTH.ORG Fac. Contact Email: PHYLLIS.SEAWRIGHT@PRISMAHEALTH.ORG	NCF-0990 / 10/31/2019 Oconee / Corporation 101 LILA DOYLE DR SENECA, SC 29672-9495 PRISMA HEALTH-UPSTATE
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 20
PRUITTHEALTH - BAMBERG 439 NORTH ST BAMBERG, SC 29003-1317 FACILITY #:803-245-7525 SELLARS RICHARD PH#: 803-245-7525 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: RSELLARS@PRUITTHEALTH.COM	NCF-0322 / 08/31/2019 Bamberg / Limited Liability 439 NORTH ST BAMBERG, SC 29003-1317 PRUITTHEALTH - BAMBERG LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 88
PRUITTHEALTH - CONWAY AT CONWAY MEDICAL CENTER 2379 CYPRESS CIR CONWAY, SC 29526-8921 FACILITY #:843-347-8179 PH#: Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-1007 / 10/31/2019 Horry / Limited Liability PRUITTHEALTH - CONWAY LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 88
PRUITTHEALTH - DILLON 413 LAKESIDE CT DILLON, SC 29536-1926 FACILITY #:843-774-2741 CAMPBELL CELESTE PH#: 843-774-2741 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: CCAMPBELL@PRUITTHEALTH.COM	NCF-0835 / 11/30/2019 Dillon / Ltd. Liability 413 LAKESIDE CT DILLON, SC 29536-1926 PRUITTHEALTH - DILLON LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 84
PRUITTHEALTH - ESTILL 252 LIBERTY AVE S ESTILL, SC 29918 FACILITY #:803-625-3852 YOUNG JACQUELINE PH#: 803-625-3852 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: JEYOUNG@PRUITTHEALTH.COM	NCF-0922 / 09/30/2019 Hampton / Ltd. Liability 252 LIBERTY AVE S ESTILL, SC 29918 PRUITTHEALTH - ESTILL LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 04

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRUITTHEALTH - PICKENS 163 LOVE AND CARE RD SIX MILE, SC 29682-9569 FACILITY #:864-868-2307 PH#: Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0580 / 04/30/2020 Pickens / Limited Liability 163 LOVE AND CARE RD SIX MILE, SC 29682-9569 PRUITTHEALTH - PICKENS LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:44
PRUITTHEALTH - WALTERBORO 401 WITSELL ST WALTERBORO, SC 29488-3052 FACILITY #:843-549-5546 PH#: Facility Email: KLANTZ@PRUITTHEALTH.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0949 / 10/31/2019 Colleton / Ltd. Liability 401 WITSELL ST WALTERBORO, SC 29488-3052 PRUITTHEALTH - WALTERBORO LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
PRUITTHEALTH ROCK HILL 261 S HERLONG AVE ROCK HILL, SC 29732-1159 FACILITY #:803-366-7133 CARVER DENNIS PH#: 803-366-7133 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: DCARVER@PRUITTHEALTH.COM	NCF-0947 / 01/31/2020 York / Limited Liability 261 S HERLONG AVE ROCK HILL, SC 29732-1159 PRUITTHEALTH ROCK HILL LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
PRUITTHEALTH-AIKEN 830 LAURENS ST AIKEN, SC 29801-0475 FACILITY #:803-649-6264 PORTER NANCY PH#: 803-649-6264 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: NPORTER@PRUITTHEALTH.COM	NCF-0942 / 06/30/2019 Aiken / Limited Liability 830 LAURENS ST AIKEN, SC 29801-0475 PRUITTHEALTH-AIKEN LLC
Alzheimer Care: Yes Max # Residents 21 Alzheimer Unit: Yes Max # Beds: 44	Total Number of Licensed Beds:76
PRUITTHEALTH-BARNWELL 31 WREN ST BARNWELL, SC 29812-1528 FACILITY #:803-259-5547 JAMISON MARY ANNE PH#: 803-259-5547 Facility Email: MJAMISON@PRUITTHEALTH.COM Fac. Contact Email: MJAMISON@PRUITTHEALTH.COM	NCF-0893 / 07/31/2019 Barnwell / Limited Liability 31 WREN ST BARNWELL, SC 29812-1528 PRUITTHEALTH-BARNWELL LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:44

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRUITTHEALTH-BLYTHEWOOD 1075 HEATHER GREEN DR COLUMBIA, SC 29229-7831 FACILITY #:803-382-2300 WASHBURN YVONNE PH#: 803-382-2300 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: YWASHBURN@PRUITTHEALTH.COM	NCF-0959 / 08/31/2019 Richland / Corporation 1075 HEATHER GREEN DR COLUMBIA, SC 29229-7831 OAKS OF BLYTHEWOOD INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:20
PRUITTHEALTH-COLUMBIA 2451 FOREST DR COLUMBIA, SC 29204-2026 FACILITY #:803-254-5960 LEE PATRICIA PH#: 803-254-5960 Facility Email: PLEE@PRUITTHEALTH.COM Fac. Contact Email: PLEE@PRUITTHEALTH.COM	NCF-0880 / 01/31/2020 Richland / Limited Liability 2451 FOREST DR COLUMBIA, SC 29204-2026 PRUITTHEALTH-COLIMBIA LLC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: Yes Max # Beds: 39	Total Number of Licensed Beds:85
PRUITTHEALTH-MONCKS CORNER 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 FACILITY #:843-761-8368 WALROND JEFF PH#: 843-761-8368 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: JWALROND@PRUITTHEALTH.COM	NCF-0943 / 10/31/2019 Berkeley / Limited Liability 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 PRUITTHEALTH-MONCKS CORNER LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
PRUITTHEALTH-NORTH AUGUSTA 1200 TALISMAN DR NORTH AUGUSTA, SC 29841-4098 FACILITY #:803-278-2170 PH#: Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0721 / 10/31/2019 Aiken / Limited Liability 1200 TALISMAN DR NORTH AUGUSTA, SC 29841-4098 PRUITTHEALTH-NORTH AUGUSTA LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
PRUITTHEALTH-ORANGEBURG 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 FACILITY #:803-534-7036 ROBINSON GWENDOLYN PH#: 803-534-7036 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: GLROBINSON@PRUITTHEALTH.COM	NCF-0617 / 09/30/2019 Orangeburg / Limited Liability 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 PRUITTHEALTH-ORANGEBURG LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRUITTHEALTH-RIDGEWAY 213 TANGLEWOOD CT RIDGEWAY, SC 29130-7100 FACILITY #:803-337-3211 PHILLIPS KAREN PH#: 803-337-3211 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Contact Email: LEGALSERVICES@PRUITTHEALTH.COM	NCF-0710 / 10/31/2019 Fairfield / Limited Liability 213 TANGLEWOOD CT RIDGEWAY, SC 29130-7100 PRUITTHEALTH-RIDGEWAY LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:50
REHAB CENTER OF CHERAW 1150 STATE RD CHERAW, SC 29520-2048 FACILITY #:843-537-2060 PH#: Facility Email: KIMBERLY.WILCOX@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0552 / 02/28/2020 Chesterfield / Limited Liability 1150 STATE RD CHERAW, SC 29520-2048 REHAB CENTER OF CHERAW LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:04
RETREAT AT WELLMORE OF DANIEL ISLAND 580 ROBERT DANIEL DR CHARLESTON, SC 29492 FACILITY #:843-566-1000 SEEDS ASHLEY PH#: 843-566-1000 Facility Email: DANIELISLAND.LICENSING@WELL-MORE.COM Fac. Contact Email: DANIELISLAND.LICENSING@WELL-MORE.COM	NCF-0965 / 03/31/2020 Berkeley / Limited Liability 3530 TORINGDON WAY STE 204 CHARLOTTE, NC 28277-3431 WELLMORE OF DANIEL ISLAND LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
RETREAT AT WELLMORE OF LEXINGTON 200 WELLMORE DR BLDG #4 LEXINGTON, SC 29072 FACILITY #:803-520-1200 TREMBLE WILLIAM M PH#: 803-520-1200 Facility Email: LEXINGTON.LICENSING@WELL-MORE.COM Fac. Contact Email: MTREMBLE@MAXWELL-GROUP.COM	NCF-0966 / 07/31/2019 Lexington / 3530 TORINGDON WY STE 204 CHARLOTTE, NC 28277 WELLMORE OF LEXINGTON LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
RICE ESTATE REHABILITATION AND HEALTHCARE 100 FINLEY RD COLUMBIA, SC 29203-9264 FACILITY #:803-691-5720 REAVIS LISA D PH#: 803-691-5720 Facility Email: LREAVIS@RICEESTATE.ORG Fac. Contact Email: LREAVIS@RICEESTATE.ORG	NCF-0831 / 05/31/2019 Richland / Non-Profit Corporation 100 FINLEY RD COLUMBIA, SC 29203-9264 LUTHERAN HOMES OF SOUTH CAROLINA INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds80

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
RICHARD M CAMPBELL VETERANS NURSING HOME 4605 BELTON HWY ANDERSON, SC 29621-5045 FACILITY #:864-261-6734 EVATT RUSSELL PH#: 864-261-6734 Facility Email: REVATT@HMRVSI.COM Fac. Contact Email: REVATT@HMRVSI.COM	NCF-0549 / 02/28/2020 Anderson / State 4605 BELTON HWY ANDERSON, SC 29621-5045 SC DEPARTMENT OF MENTAL HEALTH
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 20
RIDGE REHABILITATION AND HEALTHCARE CENTER 226 W AREEL DR EDGEFIELD, SC 29824-4534 FACILITY #:803-637-5312 OTHMAN MOHAMED M PH#: 803-637-5312 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: MOTHMAN@ORIANNA.COM	NCF-1014 / 01/31/2020 Edgefield / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 RIDGE REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 20
RIDGELAND NURSING CENTER 1516 GRAYS HWY RIDGELAND, SC 29936-5440 FACILITY #:843-726-5581 BOYLES SHERI P PH#: 843-726-5581 Facility Email: SBOYLES@RIDGELANDNC.COM Fac. Contact Email: SBOYLES@RIDGELANDNC.COM	NCF-0553 / 08/31/2019 Jasper / Corporation PO BOX 1570 RIDGELAND, SC 29936-2627 RIDGELAND NURSING CENTER INC
Alzheimer Care: No Max # Residents: 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 88
RIDGEWAY MANOR HEALTHCARE CENTER 117 BELLFIELD RD RIDGEWAY, SC 29130-8261 FACILITY #:803-337-2257 MCCOLLUM JAMES M PH#: 803-337-2257 Facility Email: MATT.MCCOLLUM@RIDGEWAYMANORHEALTHCARE Fac. Contact Email: MATT.MCCOLLUM@RIDGEWAYMANORHEALTHCARE	NCF-1031 / 08/31/2019 Fairfield / Limited Liability 117 BELLFIELD RD RIDGEWAY, SC 29130-8261 RIDGEWAY MANOR HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 12
RIVER FALLS REHABILITATION AND HEALTHCARE CENTER 2906 GEER HWY MARIETTA, SC 29661-9517 FACILITY #:864-836-6381 HAMMETT WARREN PH#: 864-836-6381 Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: WHAMMETT@ORIANNA.COM	NCF-1020 / 01/31/2020 Greenville / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 RIVER FALLS REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds: 44

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
RIVERSIDE HEALTH AND REHAB 2375 BAKER HOSPITAL BLVD NORTH CHARLESTON, SC 29405-8291 FACILITY #:843-744-2750 MONTGOMERY-SMALL JERROLYN PH#: 843-744-2750 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0870 / 08/31/2019 Charleston / Ltd. Liability 2375 BAKER HOSPITAL BLVD CHARLESTON, SC 29405-8291 THI OF SOUTH CAROLINA AT CHARLESTON LLC Total Number of Licensed Beds:60
ROCK HILL POST ACUTE CARE CENTER 159 SEDGEWOOD DR ROCK HILL, SC 29732-2315 FACILITY #:803-329-6565 PH#: Facility Email: RENEWALS@ENSIGNSERVICES.NET Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0975 / 12/31/2019 York / Corporation 27101 PUERTA REAL STE 450 MISSION VIEJO, CA 92691-8566 ROCK HILL HEALTHCARE INCORPORATED Total Number of Licensed Beds99
ROLLING GREEN VILLAGE HEALTH CARE FACILITY 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800 TURNER RYAN PH#: 864-987-9800 Facility Email: RYANT@ROLLINGGREENVILLAGE.COM Fac. Contact Email: RYANT@ROLLINGGREENVILLAGE.COM Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0456 / 10/31/2019 Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 ROLLING GREEN VILLAGE Total Number of Licensed Beds74
ROSECREST REHABILITATION AND HEALTHCARE 200 FORTRESS DR INMAN, SC 29349-9160 FACILITY #:864-599-8600 YETTER MELISSA PH#: 864-599-8600 Facility Email: MYETTER@LHOMES.ORG Fac. Contact Email: MYETTER@LHOMES.ORG Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-0817 / 04/30/2020 Spartanburg / Non-Profit Corporation 200 FORTRESS DR INMAN, SC 29349-9160 LUTHERAN HOMES OF SOUTH CAROLINA INC Total Number of Licensed Beds75
SALUDA NURSING CENTER 581 NEWBERRY HWY SALUDA, SC 29138-7808 FACILITY #:864-445-2146 PAUL KEITH PH#: 864-445-2146 Facility Email: KPAUL@SALUDANURSING.ORG Fac. Contact Email: KPAUL@SALUDANURSING.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0265 / 06/30/2019 Saluda / County 581 NEWBERRY HWY SALUDA, SC 29138 SALUDA COUNTY Total Number of Licensed Beds:76

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>SANDPIPER REHAB & NURSING 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 FACILITY #:843-881-3210 PH#: Facility Email: DSTINSON@SANDPIPERCENTER.COM Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0876 / 10/31/2019 Charleston / Limited Liability 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 SANDPIPER REHAB & NURSING-DELAWARE LLC Total Number of Licensed Beds:76</p>
<p>SAVANNAH GRACE AT THE PALMS OF MT PLEASANT 1010 LAKE HUNTER CIR MOUNT PLEASANT, SC 29464-5417 FACILITY #:843-388-2030 SOTO JOSEPH L PH#: 843-388-2030 Facility Email: LICENSING@5SSL.COM Fac. Contact Email: JSOTO@5SSL.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0926 / 06/30/2019 Charleston / 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE SG TENANT LLC Total Number of Licensed Beds48</p>
<p>SENECA HEALTH AND REHABILITATION CENTER 140 TOKEENA RD SENECA, SC 29678-1799 FACILITY #:864-882-1642 PARSON DIANE PH#: 864-882-1642 Facility Email: DMPARSON@SAVASC.COM Fac. Contact Email: DMPARSON@SAVASC.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-0917 / 09/30/2019 Oconee / Ltd. Liability 140 TOKEENA RD SENECA, SC 29678-1799 SSC SENECA OPERATING COMPANY LLC Total Number of Licensed Beds:32</p>
<p>SIMPSONVILLE REHABILITATION AND HEALTHCARE CENTER 807 SE MAIN ST SIMPSONVILLE, SC 29681-7150 FACILITY #:864-963-6069 PH#: Facility Email: KRUGGIERO@HCNAVIGATOR.NET Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1017 / 01/31/2020 Greenville / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 SIMPSONVILLE REHABILITATION AND HEALTHCARE CENTER LLC Total Number of Licensed Beds:32</p>
<p>SKYLYN NURSING AND REHABILITATION CENTER 1705 SKYLYN DR SPARTANBURG, SC 29307-1090 FACILITY #:864-582-2833 KENNEDY SHERRY S PH#: 864-582-6838 Facility Email: MNELSON@PACIFICASENIORLIVING.COM Fac. Contact Email: ED.SKYLYN@PACIFICASENIORLIVING.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:</p>	<p>NCF-1008 / 08/30/2019 Spartanburg / Limited Liability 1775 HANCOCK ST STE 200 SAN DIEGO, CA 92110 PACIFICA SKYLYN LLC Total Number of Licensed Beds44</p>

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPE 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 FACILITY #:803-796-6490 ROBERTSON NIKKI W PH#: 803-796-6490 Facility Email: NROBERTSON@STILLHOPES.ORG Fac. Contact Email: NROBERTSON@STILLHOPES.ORG	NCF-0392 / 12/31/2019 Lexington / Corporation 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds70
SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER 109 BENTZ RD PIEDMONT, SC 29673-1412 FACILITY #:864-845-5177 PH#: Facility Email: KRUGGIERO@HCVNAVIGATOR.NET Fac. Contact Email: No Facility Contact Email on Record	NCF-1021 / 01/31/2020 Anderson / Limited Liability 4 W RED OAK LN STE 201 WHITE PLAINS, NY 10604 SC-GA2018 SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
SOUTHLAND HEALTH CARE CENTER 722 S DARGAN ST FLORENCE, SC 29506-2562 FACILITY #:843-669-4403 COMMANDER CHARLES S PH#: 843-669-4403 Facility Email: CCOMMANDER@SC.RR.COM Fac. Contact Email: CCOMMANDER@SC.RR.COM	NCF-0599 / 12/31/2019 Florence / Corporation 722 S DARGAN ST FLORENCE, SC 29506-2562 COMMANDER HEALTH CARE FACILITIES INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
SOUTHPOINTE HEALTHCARE AND REHABILITATION 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FACILITY #:864-288-1415 BROOME KIRK PH#: 864-288-1415 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: K.BROOME@FUNDLTC.COM	NCF-0869 / 08/31/2019 Greenville / Ltd. Liability 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT GREENVILLE LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds120
SPARTANBURG HOSPITAL FOR RESTORATIVE CARE SNF 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 FACILITY #:864-560-3232 STIMAC PATRICIA M PH#: 864-560-3232 Facility Email: PSTIMAC@SRHS.COM Fac. Contact Email: PSTIMAC@SRHS.COM	NCF-0915 / 02/28/2020 Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds25

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
SPRENGER HEALTHCARE OF BLUFFTON 60 OKATIE VILLAGE DR OKATIE, SC 29909 FACILITY #:843-548-2500 SHAW JANELLE PH#: 843-548-2500 Facility Email: ASANFILIPPO@SPRENGERHEALTHCARE.COM Fac. Contact Email: JSHAW@SPRENGERHEALTHCARE.COM	NCF-0996 / 03/31/2020 Beaufort / Corporation 60 OKATIE VILLAGE DR OKATIE, SC 29909 SPRENGER HEALTHCARE OF BLUFFTON INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
SPRENGER HEALTHCARE OF PORT ROYAL 1810 RICHMOND AVE PORT ROYAL, SC 29935 FACILITY #:843-781-7700 PH#: Facility Email: LTHOMAS@SPRENGERHEALTHCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0980 / 05/31/2019 Beaufort / Corporation 3905 OBERLIN AVE LORAIN, OH 44053 SPRENGER HEALTHCARE OF PORT ROYAL INC (DELAWARE CORP)
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds65
SPRINGDALE HEALTHCARE CENTER 146 BATTLESHIP RD CAMDEN, SC 29020-2060 FACILITY #:803-432-3741 PH#: Facility Email: JENNIFER.SPARKS@PALMLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0925 / 09/30/2019 Kershaw / Ltd. Liability 146 BATTLESHIP RD CAMDEN, SC 29020-2060 PALMETTO SPRINGDALE OPERATING LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds148
ST GEORGE HEALTHCARE CENTER 905 DUKES ST SAINT GEORGE, SC 29477-2059 FACILITY #:843-563-4602 ENGEL CHRISTINA L PH#: 843-563-4602 Facility Email: ROBIN.GOODMAN@FUNDLTC.COM Fac. Contact Email: C.ENGEL@FUNDLTC.COM	NCF-0999 / 08/31/2019 Dorchester / Limited Liability 905 DUKES ST SAINT GEORGE, SC 29477-2059 ST GEORGE HEALTH CARE LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
SUMMIT HILLS SKILLED NURSING FACILITY 100 SUMMIT HILLS DR SPARTANBURG, SC 29307-1532 FACILITY #:864-591-2222 PH#: Facility Email: LICENSING@SUMMIT-HILLS.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0950 / 03/31/2020 Spartanburg / Ltd. Liability 3530 TORINGDON WAY STE 204 CHARLOTTE, NC 28277-3436 SUMMIT HILLS LLC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds33

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
SUMTER EAST HEALTH AND REHABILITATION CENTER 880 CAROLINA AVE SUMTER, SC 29150-2815 FACILITY #:803-775-5394 NADKARNI NATASHA PH#: 803-775-5394 Facility Email: NANADKARNI@SAVASC.COM Fac. Contact Email: NANADKARNI@SAVASC.COM	NCF-0919 / 09/30/2019 Sumter / Ltd. Liability 880 CAROLINA AVE SUMTER, SC 29150-2815 SSC SUMTER EAST OPERATING COMPANY LLC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:76
VALLEY FALLS TERRACE 400 LOCUST GROVE RD SPARTANBURG, SC 29303-4898 FACILITY #:864-503-0377 PH#: Facility Email: PAT.HARRIS@FUNDLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0495 / 02/28/2020 Spartanburg / Corporation 400 LOCUST GROVE SPARTANBURG, SC 29303-4831 SPARTANBURG HEALTH CARE LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
VETERANS VICTORY HOUSE 2461 SIDNEYS RD WALTERBORO, SC 29488-6783 FACILITY #:843-538-3000 PH#: Facility Email: GMCNEILL@HMRVSI.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0921 / 10/31/2019 Colleton / State 2461 SIDNEYS RD WALTERBORO, SC 29488-6783 SC DEPARTMENT OF MENTAL HEALTH
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds20
VIBRA HOSPITAL OF CHARLESTON-TCU 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 FACILITY #:843-375-4201 CARR JOSEPH PH#: 843-375-4201 Facility Email: VTZITZIS@VHCHARLESTON.COM Fac. Contact Email: JCARR@VHCHARLESTON.COM	NCF-0960 / 08/31/2019 Charleston / Limited Liability 1200 HOSPITAL DR 2ND FL MOUNT PLEASANT, SC 29464-3251 VIBRA HOSPITAL OF CHARLESTON LLC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds35
WESLEY COMMONS HEALTH AND REHABILITATION CENTER 1075 BYPASS 25 SE GREENWOOD, SC 29646 FACILITY #:864-227-7250 HOLMES MOODY KIMBERLY K PH#: 864-227-7250 Facility Email: KMOODY@WESLEYCOMMONS.ORG Fac. Contact Email: KMOODY@WESLEYCOMMONS.ORG	NCF-0304 / 03/31/2020 Greenwood / Non-Profit Corporation 1110 MARSHALL RD GREENWOOD, SC 29646-4299 WESLEY COMMONS
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds80

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WESTMINSTER HEALTH AND REHABILITATION CENTER 831 MCDOW DR ROCK HILL, SC 29732-2415 FACILITY #:803-326-3100 ROCQUEMORE TANYA PH#: 803-362-3100 Facility Email: TROCQUEMORE@WESTMINSTERTOWERS.ORG Fac. Contact Email: TROCQUEMORE@WESTMINSTERTOWERS.ORG	NCF-0819 / 08/31/2019 York / Non-Profit Corporation 831 MCDOW DR ROCK HILL, SC 29732-2415 WESTMINSTER PRESBYTERIAN CENTER INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:66
WHITE OAK AT NORTH GROVE 290 N GROVE MEDICAL PARK DR SPARTANBURG, SC 29303-4222 FACILITY #:864-345-1700 NELSON ANDREW R PH#: 864-345-1700 Facility Email: ANELSON@WHITEOAKMANOR.COM Fac. Contact Email: ANELSON@WHITEOAKMANOR.COM	NCF-0971 / 05/31/2020 Spartanburg / Corporation 290 N GROVE MEDICAL PARK DR SPARTANBURG, SC 29303-4222 WHITE OAK AT NORTH GROVE INC
Alzheimer Care: Yes Max # Residents 33 Alzheimer Unit: Yes Max # Beds: 22	Total Number of Licensed Beds:32
WHITE OAK ESTATES 400 WEBBER RD SPARTANBURG, SC 29307-2400 FACILITY #:864-579-7004 CRISP SONIA A PH#: 864-579-7004 Facility Email: SCRISP@WHITEOAKMANOR.COM Fac. Contact Email: SCRISP@WHITEOAKMANOR.COM	NCF-0888 / 12/31/2019 Spartanburg / Corporation 400 WEBBER RD SPARTANBURG, SC 29307-2400 WHITE OAK ESTATES INC
Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds88
WHITE OAK MANOR CHARLESTON INC 9285 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9126 FACILITY #:843-797-8282 GIBBS TAMMY L PH#: 843-797-8282 Facility Email: TGIBBS@WHITEOAKMANOR.COM Fac. Contact Email: TGIBBS@WHITEOAKMANOR.COM	NCF-0892 / 12/31/2019 Charleston / Corporation 9285 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9126 WHITE OAK MANOR CHARLESTON INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:76
WHITE OAK MANOR COLUMBIA 3001 BEECHAVEN RD COLUMBIA, SC 29204-2701 FACILITY #:803-782-4363 NEAL MICHAEL S PH#: 803-782-4363 Facility Email: SNEAL@WHITEOAKMANOR.COM Fac. Contact Email: SNEAL@WHITEOAKMANOR.COM	NCF-0886 / 12/31/2019 Richland / Corporation 3001 BEECHAVEN RD COLUMBIA, SC 29204-2701 WHITE OAK MANOR COLUMBIA INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:20

Nursing Homes

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WHITE OAK MANOR LANCASTER 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 FACILITY #:803-286-1464 HEITKAMP RYAN MPH#: 803-286-1464 Facility Email: RHEITKAMP@WHITEOAKMANOR.COM Fac. Contact Email: RHEITKAMP@WHITEOAKMANOR.COM	NCF-0883 / 12/31/2019 Lancaster / Corporation 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 WHITE OAK MANOR LANCASTER INC
Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds:32
WHITE OAK MANOR SPARTANBURG 295 E PEARL ST SPARTANBURG, SC 29303-3666 FACILITY #:864-585-0241 CECIL III O KENT PH#: 864-585-0241 Facility Email: KCECIL@WHITEOAKMANOR.COM Fac. Contact Email: KCECIL@WHITEOAKMANOR.COM	NCF-0889 / 12/31/2019 Spartanburg / Corporation 295 E PEARL ST SPARTANBURG, SC 29303-3606 WHITE OAK MANOR SPARTANBURG INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds60
WHITE OAK MANOR YORK 111 S CONGRESS ST YORK, SC 29745-1836 FACILITY #:803-684-0035 LAMBERT MICHELLE PH#: 803-684-0035 Facility Email: MLAMBERT@WHITEOAKMANOR.COM Fac. Contact Email: MLAMBERT@WHITEOAKMANOR.COM	NCF-0887 / 12/31/2019 York / Corporation 111 S CONGRESS ST YORK, SC 29745 WHITE OAK MANOR YORK INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds109
WHITE OAK MANOR-NEWBERRY 2555 KINARD ST NEWBERRY, SC 29108-2903 FACILITY #:803-276-6060 GILLIAM MELISSA S PH#: 803-276-6060 Facility Email: MGILLIAM@WHITEOAKMANOR.COM Fac. Contact Email: MGILLIAM@WHITEOAKMANOR.COM	NCF-0884 / 12/31/2019 Newberry / Corporation 2555 KINARD ST NEWBERRY, SC 29108-2903 WHITE OAK MANOR - NEWBERRY INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds146
WHITE OAK OF ROCK HILL 1915 EBENEZER RD ROCK HILL, SC 29732-1097 FACILITY #:803-366-8155 CURTIS NIKKI PH#: 803-366-8155 Facility Email: NCURTIS@WHITEOAKMANOR.COM Fac. Contact Email: NCURTIS@WHITEOAKMANOR.COM	NCF-0885 / 12/31/2019 York / Corporation 1915 EBENEZER RD ROCK HILL, SC 29732-1097 WHITE OAK MANOR ROCK HILL INC
Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	Total Number of Licensed Beds141

**SCDHEC
Nursing Homes**

May 15, 2019

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WILDEWOOD DOWNS NURSING AND REHABILITATION CENTER 731 POLO RD COLUMBIA, SC 29223-4462 FACILITY #:803-788-5115 CHAVIS DIANA L PH#: 803-788-5115 Facility Email: DCHAVIS@WILDEWOODDOWNS.COM Fac. Contact Email: DCHAVIS@WILDEWOODDOWNS.COM Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0914 / 12/31/2019 Richland / Ltd. Liability 731 POLO RD COLUMBIA, SC 29223-4462 WILDEWOOD DOWNS RETIREMENT LLC Total Number of Licensed Beds80
WILLOWBROOKE COURT AT PARK POINTE VILLAGE 2993 VAN VALIN DR ROCK HILL, SC 29732-8079 FACILITY #:803-980-8621 PH#: Facility Email: STEVEN.ROBISON@ACTSLIFE.ORG Fac. Contact Email: No Facility Contact Email on Record Alzheimer Care: Yes Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1006 / 09/30/2019 York / Corporation 3025 CHESBROUGH BLVD ROCK HILL, SC 29732-8078 ACTS RETIREMENT-LIFE COMMUNITIES INC Total Number of Licensed Beds40
WINDSOR MANOR NURSING HOME 5583 SUMMERTON HWY MANNING, SC 29102-5217 FACILITY #:803-478-2323 JORDAN HEATHER PH#: 803-478-2323 Facility Email: RMATTHEWS@CLARENDONLTC.ORG Fac. Contact Email: HJORDAN@CLARENDONLTC.ORG Alzheimer Care: No Max # Residents 0 Alzheimer Unit: No Max # Beds:	NCF-0737 / 01/31/2020 Clarendon / District PO BOX 57 MANNING, SC 29102-0057 CLARENDON HOSPITAL DISTRICT Total Number of Licensed Beds64
WOODRUFF MANOR 1114 E GEORGIA RD WOODRUFF, SC 29388 FACILITY #:864-476-7092 TERRELL C ADAM PH#: 864-476-7092 Facility Email: CTERRELL@SRHS.COM Fac. Contact Email: CTERRELL@SRHS.COM Alzheimer Care: No Max # Residents: Alzheimer Unit: No Max # Beds:	NCF-1000 / 09/30/2019 Spartanburg / District 1114 E GEORGIA RD WOODRUFF, SC 29388 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC Total Number of Licensed Beds88
Total Number of Facilities: 194 Alzheimers Care : 30 Alzheimers Units : 12 Licensed Beds : 20,457	