

County: Lancaster

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GOLDENCARE 403 W MEETING ST LANCASTER, SC 29720-2321 FAC.#:803-416-8000 GOLDSMITH JOSEPH P PH#: 803-416-8000 Facility Email: GOLDSMITH_PATRICK@YAHOO.COM	Lancaster / Corporation 403 W MEETING ST LANCASTER, SC 29720-2321 GOLDENCARE INC ADC-0233 / 11/30/2020	60
Number of Participants:		60

Totals For Facility/License Type: <u>Adult Day Care</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>60</u>

County: Lancaster

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SURGERY CENTER AT EDGEWATER 2536 LENGERS WAY FORT MILL, SC 29707-7126 FAC.#:803-802-9500 GORE HEATHER PH#: 352-359-6952 Facility Email: ATKINSAM@MUSC.EDU	Lancaster / Ltd. Liability 2536 LENGERS WAY FORT MILL, SC 29707-7126 CAROLINA SURGERY CENTER LLC ASF-0110 / 02/28/2021	5
Operating Rooms: 3 Procedure Rooms: 1 Endoscopy Rooms: 1		

Totals For Facility/License Type: <u>Ambulatory Surgery</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>5</u>

County: Lancaster

Facility Type: CDAP Outpatient

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

LANCASTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE	Lancaster / County	1
114 S MAIN ST		
LANCASTER, SC 29720-2442 FAC.#:803-285-6911		
HERCHEK DONNA PH#: 803-285-6911	LANCASTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE-BOARD	
Facility Email: DHERCHEKCSL@COMPORIUM.NET	OPF-0032 / 09/30/2021	

Certifications:None

Totals For Facility/License Type: <u>CDAP Outpatient</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>1</u>

County: Lancaster

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BLAKE AT EDGEWATER 1099 EDGEWATER CORPORATE PKWY INDIAN LAND, SC 29707 FAC. #: 803-310-4242 FISHER JASON PH#: Facility Email: JASON.FISHER@BLAKELIVING.COM	Lancaster / Limited Liability EDGEWATER SENIOR CARE LLC CRC-2112 / 11/30/2020	105
Alzheimer Care: Yes Max # Resident: 0	Alzheimer Unit: Yes Max # Beds: 40	
Certifications: None		
HEATH SPRINGS RESIDENTIAL CARE CENTER 614 HART ST HEATH SPRINGS, SC 29058-8411 FAC. #: 803-273-3227 CASSANOVA CATHY PH#: Facility Email: MGMT.HSRCC@GMAIL.COM	Lancaster / Corporation PO BOX 8118 SADDLE BROOK, NJ 07663-8118 HSRCC PARTNERS LLC CRC-1903 / 12/31/2020	64
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
MORNINGSIDE OF LANCASTER 1004 HARDIN ST LANCASTER, SC 29720-1609 FAC. #: 803-285-8152 HEMPHILL TREVONDA PH#: 803-283-8152 Facility Email: LICENSING@5SSL.COM	Lancaster / Limited Liability Limited Partnership 400 CENTRE ST, LICENSING DEPT NEWTON, MA 02458-2094 MORNINGSIDE OF SOUTH CAROLINA LP CRC-1146 / 03/31/2021	65
Alzheimer Care: Yes Max # Resident: 14	Alzheimer Unit: Yes Max # Beds: 14	
Certifications: None		
WATERCREST FORT MILL ASSISTED LIVING AND MEMORY CARE 8154 ENGLISH CLOVER LN INDIAN LAND, SC 29707 FAC. #: 803-590-7005 PH#: Facility Email: JWILLIAMS@WATERCRESTSLG.COM	Lancaster / Limited Liability 445 24TH ST STE 300 VERO BEACH, FL 32960-0961 WAYPOINT WATERCREST FORT MILL SL LLC CRC-2024 / 07/31/2021	117
Alzheimer Care: Yes Max # Resident: 0	Alzheimer Unit: Yes Max # Beds: 32	
Certifications: None		

Totals For Facility/License Type: <u>Community Residential Care Facility</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 351

County: Lancaster

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
NANCY J MCCONNELL COMMUNITY RESIDENCE 219 S PLANTATION RD LANCASTER, SC 29720-1847 FAC.#:803-285-4368 MCWATERS SHEILA O PH#: 803-285-4368 Facility Email: RBRITT@DDSN.SC.GOV	Lancaster / State PO BOX 4706, DDSN C/O RUFUS BRITT COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0075 / 05/31/2021	8
TOM MANGUM COMMUNITY RESIDENCE 223 SOUTH PLANTATION RD LANCASTER, SC 29720 FAC.#:803-285-4368 MCWATER SHELIA PH#: 803-285-4368 Facility Email: RBRITT@DDSN.SC.GOV	Lancaster / State PO BOX 4706, DDSN C/O RUFUS BRITT COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0074 / 05/31/2021	8

Totals For Facility/License Type: <u>Habilitation R15</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 16

County: Lancaster

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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HOME CARE OF LANCASTER 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 FAC.#:803-286-1472 KENNINGTON CINDY PH#: Facility Email: LRA@LHCGROUP.COM	Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC HHA-0050 / 12/31/2020	4
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Counties Served: Chester, Kershaw, Lancaster, York

License Restrictions:

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

Other: REGISTERED DIETITION

Totals For Facility/License Type: <u>Home Health</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>4</u>

County: Lancaster

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HOSPICE & PALLIATIVE CARE PALMETTO REGION 1057 RED VENTURES DR STE 150 FORT MILL, SC 29707-2518 FAC.#:803-548-3708 BRUNNICK PETER A PH#: 864-833-6287 Facility Email: BRUNNICKP@HPCCR.ORG	Lancaster / Corporation 1420 E 7TH ST CHARLOTTE, NC 28204-2448 HOSPICE & PALLIATIVE CARE CHARLOTTE REGION HPC-0047 / 01/31/2021	14
Counties Served: Anderson, Cherokee, Chester, Chesterfield, Fairfield, Greenville, Kershaw, Lancaster, Oconee, Pickens, Richland, Spartanburg, Union, York		
HOSPICE OF LANCASTER AND THE PIEDMONT 901 W MEETING ST STE 104 LANCASTER, SC 29720-6210 FAC.#:803-286-1472 HARRIS TRINA PH#: 803-286-1472 Facility Email: LRA@LHCGROUP.COM	Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC HPC-0039 / 12/31/2020	6
Counties Served: Chester, Chesterfield, Fairfield, Kershaw, Lancaster, York		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 20

County: Lancaster

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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MUSC HEALTH LANCASTER MEDICAL CENTER 800 W MEETING ST LANCASTER, SC 29720 FAC.#:803-286-1487	Lancaster / MEDICAL UNIVERSITY HOSPITAL AUTHORITY	211
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PH#: _____ HTL-0951 / 03/31/2021

Facility Email: ELLIST@MUSC.EDU

Licensed Beds: General: 199 Psychiatric: 12 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 4

Certifications: Abortions, Perinatal Level II, JCAHO Accredited

REBOUND BEHAVIORAL HEALTH 134 E REBOUND RD LANCASTER, SC 29720-7712 FAC.#:803-313-3700 BOLISH CAMERON PH#: 803-313-3700	Lancaster / Limited Liability 134 E REBOUND RD LANCASTER, SC 29720-7712 REBOUND BEHAVIORAL HEALTH LLC	63
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Facility Email: KAREN.ORSINI@ACADIAHEALTHCARE.COM

HTL-0912 / 10/31/2020

Licensed Beds: General: 0 Psychiatric: 45 Rehab: 0 Substance Abuse: 18

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 274

County: Lancaster

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
A&T CARE - KERSHAW 207 W SUMTER ST KERSHAW, SC 29067 FAC.#:803-577-1776 BARBER AMELIA A PH#: 803-287-6801 Facility Email: AMELIABARBER@ATADULTDAYCARE.US	Lancaster / Corporation 207 W SUMTER ST KERSHAW, SC 29067 A&T CARE IHCP-0583 / 08/31/2021	- 1
CHOSEN HANDS IN HOME CARE 524 ECHO WOODS DR LANCASTER, SC 29720 FAC.#:803-288-2928 WILLIAMS JAMESILA PH#: Facility Email: CHOSENHANDS19@YAHOO.COM	Lancaster / Limited Liability CHOSEN HANDS IN HOME CARE LLC IHCP-1033 / 05/31/2021	- 1
CRYSTAL CLEAR HOME CARE INC 405 E GAY ST LANCASTER, SC 29720 FAC.#:803-804-2674 MONTGOMERY PATIENCE PH#: Facility Email: CRYSTALCLEARHOMECARE@AOL.COM	Lancaster / Corporation 405 E GAY ST LANCASTER, SC 29720 CRYSTAL CLEAR HOME CARE INC IHCP-0640 / 08/31/2020 (Renewal Pending)	- 1
FAITHFUL NURSES HEALTHCARE 108 D WOODLAND PARK DR LANCASTER, SC 29720 FAC.#:843-620-8358 CRANE CANTRELLE PH#: 803-374-2438 Facility Email: JWILLIAMS@FNHCS.COM	Lancaster / Corporation FAITHFUL NURSES HEALTHCARE INC IHCP-1291 / 09/30/2021	- 1
FIRST LIGHT HOME CARE- LANCASTER 106C WOODLAND DR LANCASTER, SC 29720 FAC.#:803-792-9199 LYONS CLARENCE PH#: 803-804-3729 Facility Email: CLYONS@FIRSTLIGHTHOMECARE.COM	Lancaster / Limited Liability LYONS LEGACY PARTNERS LLC IHCP-1004 / 05/31/2021	- 1
GOLDEN CARE IN HOME PERSONAL CARE 403 W MEETING ST LANCASTER, SC 29720-2321 FAC.#:803-416-8000 GOLDSMITH JOSEPH PH#: 803-416-8000 Facility Email: GOLDENCAREADC@GMAIL.COM	Lancaster / Corporation 403 W MEETING ST LANCASTER, SC 29720-2321 GOLDENCARE INC IHCP-0053 / 02/28/2021	- 1
HOME HELPERS & DIRECT LINK OF FAIRFIELD SC 1553 LYNWOOD DR LANCASTER, SC 29720 FAC.#:770-403-6062 PH#: Facility Email: ARPIITT@GMAIL.COM	Lancaster / Limited Liability 1553 LYNWOOD DR LANCASTER, SC 29720 OHM HELPERS LLC IHCP-0501 / 04/30/2021	- 1
INDEPENDENT LIVING HOME CARE AGENCY 8931 N DORCHESTER TRACE FORT MILL, SC 29707 FAC.#:803-398-3733 PH#: Facility Email: NURSEJERNIGAN@GMAIL.COM	Lancaster / Limited Liability INDEPENDENT LIVING HOME CARE AGENCY LLC IHCP-0953 / 02/28/2021	- 1

County: Lancaster

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MMM HEALTHCARE 1499D LYNWOOD DR LANCASTER, SC 29720 FAC. #: 803-285-2245 PH#:	Lancaster / Limited Liability MMM HEALTHCARE LLC IHCP-1279 / 09/30/2021	- 1
OMNI SENIOR CARE 2010 PALACE WAY INDIAN LAND, SC 29707 FAC. #: 803-850-0057 MORAN MARILYN PH#:	Lancaster / Limited Liability OMNI HEALTH SERVICES LLC IHCP-1102 / 09/30/2020 (Renewal Pending)	- 1

Facility Email: TWITTY_DOUGLAS@YAHOO.COM

Facility Email: MARILYN@OMNIHEALTHSERVICES.COM

Totals For Facility/License Type: <u>Inhome Care Provider</u>	
Number of Activities/Facilities licensed: <u>10</u>	Number Licensed Units: <u>- 10</u>

County: Lancaster

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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LANCASTER HEALTH AND REHABILITATION 2044 PAGELAND HWY LANCASTER, SC 29720-7608 FAC.#:803-285-7907 SKINNER JEFF PH#: 803-285-7907 Facility Email: JEFF.SKINNER@FUNDLTC.COM	Lancaster / Corporation 2044 PAGELAND HWY LANCASTER, SC 29720-7608 LANCASTER HEALTH CARE LLC NCF-0551 / 02/28/2021	142
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Licensed Beds: Nursing Home: 142 Institutional Nursing Home: 0

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

Certifications:None

WHITE OAK MANOR LANCASTER 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 FAC.#:803-286-1464 HEITKAMP RYAN M PH#: 803-286-1464 Facility Email: RHEITKAMP@WHITEOAKMANOR.COM	Lancaster / Corporation 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 WHITE OAK MANOR LANCASTER INC NCF-0883 / 12/31/2020	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>274</u>

County: Lancaster

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LANCASTER SC DIALYSIS 1100 W MEETING ST LANCASTER, SC 29720-2251 FAC.#:803-313-6600 CRIMINGER LORIS PH#: 803-313-6600 Facility Email: SCL_C@DAVITA.COM	Lancaster / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC ERD-0077 / 01/31/2021	29

Licensed Stations: Hemodialysis: 29 Peritoneal: 2

Totals For Facility/License Type: <u>Renal Dialysis</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>29</u>

Number of Activities/Facilities licensed in county of : <u>Lancaster</u>	# Lics: <u>27</u>
	Number Licensed Units : <u>1,024</u>

Report Totals

Total Number of Activities/Facilities licensed: 27 Total Number Licensed Units: 1,024