

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

ADVANCED HOME HEALTH

2424 INDIA HOOK RD STE 130
ROCK HILL, SC 29732-1278 FACILITY #:803-285-2026
AGNEW CYNTHIA PH#:

HHA-0395 / 03/31/2021
York / Limited Liability

Facility Email: ANGIE.MATTINGLY@BRIGHTSPRINGHEALTH.COM

ADORATION HOME HEALTH CARE VIRGINIA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: **Lancaster, York**

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

AMEDISYS HOME HEALTH CARE

127 E MILL ST
KINGSTREE, SC 29556 FACILITY #:843-355-5103
POWELL WELCH MEREDITH PH#:

HHA-0188 / 01/31/2021

Williamsburg / Limited Liability

127 E MILL ST

KINGSTREE, SC 29556

Facility Email: 2241@AMEDISYS.COM

GEORGETOWN HOSPITAL HOME HEALTH LLC

Fac. Cont. Email: MELANIE.ONG@AMEDISYS.COM

Total Counties Served: 4

County/Counties Served: **Clarendon, Florence, Georgetown, Williamsburg**

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 Services:

Satellite Location: **AMEDISYS HOME HEALTH CARE OF FLORENCE**

Phone: 854-400-6609

Address: 1800 SECOND LOOP ROAD SUITE 5

City: FLORENCE

State: SC

Zip Code: 29501

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF BEAUFORT 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 FACILITY #:843-379-2320 SNYDER SHAUN PH#: Facility Email: 2210@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0189 / 01/31/2021 Beaufort / Ltd. Liability 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 AMEDISYS SC LLC

Total Counties Served: 2**County/Counties Served: Beaufort, Jasper****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 Services:

AMEDISYS HOME HEALTH OF BLUFFTON 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 FACILITY #:800-697-5235 RYAN LORI PH#: Facility Email: 2216@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0203 / 02/28/2021 Beaufort / Ltd. Liability 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 AMEDISYS SC LLC
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Total Counties Served: 4**County/Counties Served: Allendale, Beaufort, Hampton, Jasper****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 Services:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF CAMDEN 2209 W DELKAB STE I CAMDEN, SC 29020-3624 FACILITY #:803-713-9774 KING DORI PH#: Facility Email: 2216@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0194 / 02/28/2021 Kershaw / Ltd. Liability 1110 BROAD ST STE B CAMDEN, SC 29020-3624 AMEDISYS SC LLC

Total Counties Served: 9County/Counties Served: **Calhoun, Darlington, Fairfield, Kershaw, Lexington, Marlboro, Newberry, Orangeburg, Richland****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 Services:

Satellite Location: WEST COLUMBIA OFFICE
Address: 2611 FOREST DRIVE SUITE 120

Phone:

City: COLUMBIA State:SC Zip Code: 29204

AMEDISYS HOME HEALTH OF CHARLESTON 2675 LAKE PARK DR NORTH CHARLESTON, SC 29406-9100 FACILITY #:843-553-1263 CRAVEN KAREN L PH#: Facility Email: 2203@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0172 / 08/31/2021 Charleston / Limited Liability 2675 LAKE PARK DR NORTH CHARLESTON, SC 29406-9100 AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC
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Total Counties Served: 3County/Counties Served: **Berkeley, Charleston, Dorchester****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 Services:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF CHARLESTON EAST 1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 FACILITY #:843-556-0200 BARBER MELISSA BLANTON PH#: Facility Email: 2207@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0191 / 01/31/2021 Charleston / Ltd. Liability 1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 AMEDISYS SC LLC

Total Counties Served: 6

County/Counties Served: Allendale, Berkeley, Charleston, Colleton, Dorchester, Hampton

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 Services:

Satellite Location: MOUNT PLEASANT OFFICE Address: 930 JOHNNIE DODDS BOULEVARD SUITE A City: MOUNT PLEASANT State:SC Zip Code: 29464	Phone: 803-713-9774
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Satellite Location: WALTERBORO OFFICE Address: 305 ROBERTSON BLVD City: WALTERBORO State:SC Zip Code: 29488	Phone: 843-542-9020
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AMEDISYS HOME HEALTH OF CLINTON 210 PHYSICIANS PARK DR STE U CLINTON, SC 29325-7565 FACILITY #:864-833-3212 SUMNER WENDY C PH#: 864-833-3212 Facility Email: ALEXANDRA.DUPOUIS@AMEDISYS.COM Fac. Cont. Email: 2204@AMEDISYS.COM	HHA-0186 / 01/31/2021 Laurens / Limited Liability 210 PHYSICIANS PARK DR STE U CLINTON, SC 29325-7565 AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC
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Total Counties Served: 10

County/Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Spartanburg, Union

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 Services:

Satellite Location: GREENVILLE OFFICE Address: 440 ROPER MOUNTAIN RD STE G-1 City: GREENVILLE State:SC Zip Code: 29615-421	Phone: 864-288-9441
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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF CONWAY 208 ELM ST CONWAY, SC 29526 FACILITY #:866-205-4247 JONES BRITTANY PH#: 843-347-5899 Facility Email: 2222@AMEDISYS.COM Fac. Cont. Email: 2222@AMEDISYS.COM	HHA-0195 / 03/31/2021 Horry / Limited Liability 176 WACCAMAW MEDICAL PARK CT CONWAY, SC 29526-8965 AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 5County/Counties Served: **Darlington, Dillon, Horry, Marion, Marlboro****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 Services:

AMEDISYS HOME HEALTH OF GEORGETOWN 2503 HIGHMARKET ST GEORGETOWN, SC 29440-2900 FACILITY #:843-546-1730 LANGSTON JENNIFER PH#: Facility Email: 2245@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0192 / 01/31/2021 Georgetown / Limited Liability 2503 HIGHMARKET ST GEORGETOWN, SC 29440-2900 GEORGETOWN HOSPITAL HOME HEALTH LLC
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Total Counties Served: 2County/Counties Served: **Georgetown, Williamsburg****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 Services:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF LEXINGTON 714 S LAKE DR STE 250 LEXINGTON, SC 29072-3462 FACILITY #:803-359-2253 BURLESON ANDREA PH#: Facility Email: 2211@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0190 / 01/31/2021 Lexington / Ltd. Liability 714 S LAKE DR STE 250 LEXINGTON, SC 29072-3462 AMEDISYS SC LLC

Total Counties Served: 13

County/Counties Served: Aiken, Bamberg, Barnwell, Calhoun, Edgefield, Lee, Lexington, McCormick, Newberry, Orangeburg, Richland, Saluda, Sumter

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 Services:

Satellite Location: SUMTER OFFICE	Phone: 803-720-5244
Address: 3481 DECLARATION BLVD	
City: SUMTER	State:SC Zip Code: 29154
Satellite Location: NEWBERRY OFFICE	Phone: 803-276-9359
Address: 184 COMMERCE DR	
City: NEWBERRY	State:SC Zip Code: 29108
Satellite Location: ORANGEBURG OFFICE	Phone: 803-534-2022
Address: 1704 VILLAGE PARK DR	
City: ORANGEBURG	State:SC Zip Code: 29118
Satellite Location: AIKEN OFFICE	Phone:
Address: 6240 WOODSIDE EXECUTIVE COURT	
City: AIKEN	State:SC Zip Code: 29803

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
AMEDISYS HOME HEALTH OF MYRTLE BEACH 1309 PROFESSIONAL DR STE 100 MYRTLE BEACH, SC 29577-5701 FACILITY #:843-916-0931 NEASBITT LEISA VICTORIA PH#: 843-916-0931 Facility Email: ALEXANDRA.DUPOUIS@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0187 / 01/31/2021 Horry / Limited Liability 1309 PROFESSIONAL DR STE 100 MYRTLE BEACH, SC 29577-5701 GEORGETOWN HOSPITAL HOME HEALTH LLC

Total Counties Served: 1**County/Counties Served: Horry****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 Services:

ANMED HEALTH HOME HEALTH AGENCY 1926 MCCONNELL SPRINGS RD ANDERSON, SC 29621-2642 FACILITY #:864-512-6410 GETSINGER CHRISTI A PH#: 864-512-6410 Facility Email: DONNA.RICHARDSON@ANMEDHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0068 / 02/28/2021 Anderson / Non-Profit Corporation PO BOX 195 ANDERSON, SC 29622-0195 ANMED HEALTH
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Total Counties Served: 2**County/Counties Served: Anderson, Pickens****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 Services:

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ATRIUM HEALTH AT HOME YORK 226 NORTHPARK DR STE 120 ROCK HILL, SC 29730 FACILITY #:803-327-8874 PH#:	HHA-0327 / 06/30/2021 York / Limited Liability CAROLINAS MEDICAL CENTER AT HOME LLC
Facility Email: MARIE.MCCARTERFROHNA@ATRIUMHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	

Total Counties Served: 2County/Counties Served: **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 Services: RESPIRATORY THERAPY

BAYADA HOME HEALTH CARE-GREENVILLE 25 WOODS LAKE ROAD BUILDING 5, STES 503 & 504 GREENVILLE, SC 29607 FACILITY #:864-263-4801 HENDRICKS STEPHANIE PH#: 864-263-4801 Facility Email: SHENDRICKS@BAYADA.COM Fac. Cont. Email: SHENDRICKS@BAYADA.COM	HHA-0345 / 08/31/2021 Greenville / Corporation BAYADA HOME HEALTH CARE INC
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Total Counties Served: 3County/Counties Served: **Anderson, Greenville, Spartanburg**

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 Services: SKILLED NURSING SERVICES

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BAYADA HOME HEALTH CARE-ROCK HILL 454 S ANDERSON RD STE 320 ROCK HILL, SC 29730 FACILITY #:803-281-4550 NOEL DAN PH#: Facility Email: EYOCUM@BAYADA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0331 / 01/31/2021 York / Corporation BAYADA HOME HEALTH CARE INC

Total Counties Served: 3County/Counties Served: **Chester, 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 Services: **SKILLED NURSING SERVICES**

BETHEA HOME HEALTH 157 HOME AVE DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867 MCKITTRICK RN PATRICIA M PH#: 843-393-2867 Facility Email: BSPURLING@SCBMA.COM Fac. Cont. Email: BSPURLING@SCBMA.COM	HHA-0143 / 07/31/2021 Darlington / Non-Profit Corporation 157 HOME AVE DARLINGTON, SC 29532-7625 SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC
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Total Counties Served: 1County/Counties Served: **Darlington**License Restrictions: **SERVING CAMPUS RESIDENTS ONLY**

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

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Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BIOSCRIP INFUSION SERVICES

160 CONGRESS BLVD STE D
DUNCAN, SC 29334-8890 FACILITY #:864-583-8190
VANPUTTE MARTHA PH#:

Facility Email: LICENSURE@BIOSCRIP.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0211 / 11/30/2020
Spartanburg / Corporation
1600 BROADWAY STE 700
DENVER, CO 80202
HOMECHOICE PARTNERS INC

Total Counties Served: 9

County/Counties Served: **Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union, York**

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: **SKILLED NURSING**

BRIGHTSTAR CARE

2012 HWY 160 W STE 4
FORT MILL, SC 29708-8401 FACILITY #:803-578-9900
PH#:

Facility Email: STEVEN.SMITH@BRIGHTSTARCARE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0376 / 05/31/2021
York / Corporation

FUTURESMITH INC

Total Counties Served: 2

County/Counties Served: **Lancaster, York**

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BRIGHTSTAR CARE OF CHARLESTON 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 FACILITY #:843-300-3008 JAMES KRISTIN PH#: 843-300-3008 Facility Email: KRISTIN.JAMES@BRIGHTSTARCARE.COM Fac. Cont. Email: KRISTINJAMES@BRIGHTSTARCARE.COM	HHA-0229 / 06/30/2021 Charleston / Limited Liability 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 TOWNES HOLDINGS LLC

Total Counties Served: 1**County/Counties Served: Charleston****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 Services: IV-IG INFUSION

BRIGHTSTAR CARE-BLUFFTON 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FACILITY #:843-837-3773 WHITTELSEY SUSAN PH#: 843-837-3773 Facility Email: SWHITTELSEY@BRIGHTSTARCARE.COM Fac. Cont. Email: LOWCOUNTRY@BRIGHTSTARCARE.COM	HHA-0223 / 12/31/2020 Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC
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Total Counties Served: 2**County/Counties Served: Beaufort, Jasper****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 Services:

Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BRIGHTSTAR OF SPARTANBURG 110 W CHURCH ST STE A GREER, SC 29650-0000 FACILITY #:864-599-0452 PH#: Facility Email: FRANK.SANDERS@BRIGHTSTARCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0328 / 06/30/2021 Greenville / Limited Liability SANDERS HEALTHCARE LLC

Total Counties Served: 2County/Counties Served: **Greenville, Spartanburg**

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: **INFUSION THERAPY**

CAROLINAS HOME HEALTH 1945 W PALMETTO ST STE 405 FLORENCE, SC 29501 FACILITY #:843-629-6811 POSTON JOE A PH#: 843-629-6811 Facility Email: LRA@LHCGROUP.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0109 / 12/31/2020 Florence / Limited Liability 121 E CEDAR ST FLORENCE, SC 29506-2576 FLORENCE HOME CARE SERVICES LLC
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Total Counties Served: 6County/Counties Served: **Darlington, Dillon, Florence, Marion, Marlboro, Williamsburg**

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 Services: **SKILLED NURSING**

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CHESTERFIELD VISITING NURSES SERVICE 918 CHESTERFIELD HWY CHERAW, SC 29520-7008 FACILITY #:843-537-3020 AMERSON ELIZABETH ANN PH#: Facility Email: JJOHNSON@AHCE.NET Fac. Cont. Email: No Facility Contact Email on Record	HHA-0065 / 08/31/2021 Chesterfield / Corporation PO BOX 813 CHERAW, SC 29520-0813 CHESTERFIELD VISITING NURSES SERVICE INC

Total Counties Served: 3**County/Counties Served: Chesterfield, Darlington, Marlboro****License Restrictions:****Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: SKILLED NURSING**

COASTAL HEALTH LLC 2420 HOFFMEYER RD STE C FLORENCE, SC 29501 FACILITY #:843-229-0029 WEBB-WILLIAMS ROBIN PH#: 843-680-4509 Facility Email: COASTALHEALTHLLC@GMAIL.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0381 / 04/30/2021 Florence / Limited Liability COASTAL HEALTH LLC
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Total Counties Served: 5**County/Counties Served: Clarendon, Dillon, Florence, Marion, Williamsburg****License Restrictions:****Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services:**

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CONTINUUM PEDIATRIC NURSING 7741 DORCHESTER ROAD UNIT B CHARLESTON, SC 29418 FACILITY #:843-353-2280 PH#:	HHA-0378 / 11/30/2020 Charleston / Corporation MPS HEALTHCARE INC
Facility Email: WFIDDLER@CONTINUUM-NURSING.COM Fac. Cont. Email: No Facility Contact Email on Record	

Total Counties Served: 3County/Counties Served: **Berkeley, Charleston, Dorchester****License Restrictions:**

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

COVENANT PLACE CCRC HOME HEALTH SERVICES 2825 CARTER RD SUMTER, SC 29150-1712 FACILITY #:803-469-7007 WILSEY JENNIFER PH#: 803-469-7007	HHA-0209 / 05/31/2021 Sumter / Non-Profit Corporation 2825 CARTER RD SUMTER, SC 29150-1712 COVENANT PLACE OF SUMTER INC
Facility Email: RLINDER@COVENANTPLACE.ORG Fac. Cont. Email: No Facility Contact Email on Record	

Total Counties Served: 1County/Counties Served: **Sumter, Special Note - RESTRICTED TO RESIDENTS OF COVENANT PLACE OF SUMTER CAMPUS ONLY****License Restrictions: SERVING CAMPUS RESIDENTS ONLY**

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: **HOME HEALTH SERVICES**

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CYPRESS CLUB HOME HEALTH AGENCY 20 LADY SLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 FACILITY #:843-689-7017 SHEA SUZANNE BARBARA PH#: Facility Email: SSHEA@THECYPRESS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0146 / 07/31/2021 Beaufort / Corporation 20 LADYSLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 CYPRESS CLUB INC

Total Counties Served: 1

County/Counties Served: **Beaufort, Special Note - Restricted to Residents of The Cypress Club Only on Hilton Head Island, South Carolina**

License Restrictions: **SERVING CAMPUS RESIDENTS ONLY**

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

ENCOMPASS HEALTH HOME HEALTH-AIKEN 37 VARDEN DR STE C AIKEN, SC 29803 FACILITY #:803-335-0977 JONES SYLVIA PH#: 803-335-0977 Facility Email: LISA.ARBUCKLE@ENCOMPASSHEALTH.COM Fac. Cont. Email: LICENSING@EHHI.COM	HHA-0218 / 10/31/2020 Aiken / Limited Liability 6688 N CENTRAL EXPRESSWAY STE 1300 DALLAS, TX 75206 CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC
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Total Counties Served: 3

County/Counties Served: **Aiken, Lexington, Richland**

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 Services:

Satellite Location: WEST COLUMBIA Address: 200 CENTER POINT CIRCLE, SUITE 150 City: COLUMBIA State: SC Zip Code: 29210	Phone: 803-638-4212
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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ENCOMPASS HEALTH HOME HEALTH-BLUFFTON 1 WESTBURY PKWY STE 250 BLUFFTON, SC 29909 FACILITY #:843-705-8044 HINSON MELISSA PH#: Facility Email: LISA.ARBUCKLE@ENCOMPASSHEALTH.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0330 / 10/31/2020 Beaufort / Limited Liability CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC

Total Counties Served: 2**County/Counties Served: Beaufort, Jasper****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 Services:

FIRST PRIORITY HOME HEALTH CARE 111 WILDEWOOD PARK DR COLUMBIA, SC 29223 FACILITY #:803-661-8805 STEWART WILLIAM PH#: 803-541-2691 Facility Email: FIRSTPRIORITYHOMECARE@GMAIL.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0354 / 03/31/2021 Richland / Limited Liability FIRST PRIORITY HOME CARE LLC
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Total Counties Served: 1**County/Counties Served: Richland****License Restrictions:**
Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

Home Health Agencies

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Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
FLORENCE VISITING NURSES SERVICE 2527 CASHUA DR FLORENCE, SC 29501 FACILITY #:843-667-1515 JACKSON-MEEKINS JOAN PH#: 843-667-1515 Facility Email: JJOHNSON@AHCE.NET Fac. Cont. Email: JJOHNSON@AHCE.NET	HHA-0064 / 01/31/2021 Florence / Corporation PO BOX 1485 WAYCROSS, GA 31502 FLORENCE VISITING NURSES SERVICE INC

Total Counties Served: 4**County/Counties Served: Dillon, Florence, Lee, Marion****License Restrictions:****Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: SKILLED NURSING**

GROVE PARK PHARMACY HOME CARE 1353 GROVE PARK NE ORANGEBURG, SC 29115 FACILITY #:803-536-6644 HARE DEBBIE B PH#: 803-536-6644 Facility Email: DEBBIE@GROVEPARKPHARMACY.COM Fac. Cont. Email: DEBBIE@GROVEPARKPHARMACY.COM	HHA-0370 / 07/31/2021 Orangeburg / Limited Liability GROVE PARK PHARMACY HOME CARE LLC
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Total Counties Served: 1**County/Counties Served: Orangeburg****License Restrictions:****Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services:**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HEALTH RELATED HOME CARE 104 W PICKENS ST ABBEVILLE, SC 29620-2427 FACILITY #:864-366-9151 SMITH LISA ANN PH#: Facility Email: LSMITH@HRHC.NET Fac. Cont. Email: No Facility Contact Email on Record	HHA-0116 / 12/31/2020 Abbeville / County 104 W PICKENS ST ABBEVILLE, SC 29620-2427 ABBEVILLE COUNTY MEMORIAL HOSPITAL

Total Counties Served: 9County/Counties Served: **Abbeville, Anderson, Edgefield, Greenville, Greenwood, Laurens, McCormick, Newberry, Saluda**

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: Y

Other Services:

Satellite Location: **CLINTON OFFICE** Phone: 864-833-1999
Address: 500 PLAZA CIR
STE K
City: CLINTON State:SC Zip Code: 29325

Satellite Location: **GREENWOOD OFFICE** Phone:
Address: 520 EPTING AVENUE
City: GREENWOOD State:SC Zip Code: 29646

Satellite Location: **LAURENS OFFICE** Phone:
Address: 500 PLAZA CIRCLE
City: LAURENS State:SC Zip Code: 29360

HOME CARE OF HOSPICE CARE OF THE PIEDMONT 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 FACILITY #:864-227-9393 CORLEY RN NANCY B PH#: 864-227-9393 Facility Email: NCORLEY@HOSPICEPIEDMONT.ORG Fac. Cont. Email: NCORLEY@HOSPICEPIEDMONT.ORG	HHA-0134 / 09/30/2019 (Renewal Pending) Greenwood / Corporation 408 W ALEXANDER AVE GREENWOOD, SC 29646-4031 HOME CARE OF HOSPICE CARE OF THE PIEDMONT INC
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Total Counties Served: 5County/Counties Served: **Abbeville, Greenwood, Laurens, McCormick, Saluda**License Restrictions: **FOR THE TERMINALLY ILL ONLY**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services: **SKILLED NURSING, SPIRITUAL COUNSELING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HOME CARE OF LANCASTER 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 FACILITY #:803-286-1472 KENNINGTON CINDY PH#: Facility Email: LRA@LHCGROUP.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0050 / 12/31/2020 Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC

Total Counties Served: 4**County/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 Services: REGISTERED DIETITION**

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE 105 VINECREST CT STE 400 GREENWOOD, SC 29646-8031 FACILITY #:864-725-7600 MANOS GEORGE PH#: Facility Email: EWHITE@SELFREGIONAL.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0049 / 01/31/2021 Greenwood / Non-Profit Corporation 105 VINCREST CT STE 400 GREENWOOD, SC 29646 GREENWOOD COUNTY HOSPITAL BOARD DBA SELF REGIONAL HEALTHCARE
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Total Counties Served: 7**County/Counties Served: Abbeville, Edgefield, Greenwood, Laurens, McCormick, Newberry, Saluda****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 Services: SKILLED NURSING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HOMECARE OF THE REGIONAL MEDICAL CENTER 1175 COOK RD STE 325 ORANGEBURG, SC 29118-8201 FACILITY #:803-395-2600 CLECKLEY CIARA PH#: 803-290-5390 Facility Email: NSHENDRICKS@REGMED.COM Fac. Cont. Email: CACLECKLEY@REGMED.COM	HHA-0122 / 01/31/2021 Orangeburg / County PO BOX 2352 ORANGEBURG, SC 29116-2352 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD)

Total Counties Served: 3County/Counties Served: **Bamberg, Calhoun, Orangeburg**

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: **SKILLED NURSING**

INTERIM HEALTHCARE 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29406 FACILITY #:843-518-5437 PITTMAN ASHLEE PH#: Facility Email: DABAKER@INTERIMHEALTHCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0208 / 03/31/2021 Charleston / Limited Liability 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29418 LOWCOUNTRY NURSING GROUP LLC
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Total Counties Served: 4County/Counties Served: **Beaufort, Berkeley, Charleston, Dorchester**

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 Services: **BEAUFORT IS RESTRICTED TO PEDIATRIC HOME HEALTH 0-18 YOA ONLY**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
INTERIM HEALTHCARE OF ROCK HILL 154 AMENDMENT AVE STE 106 ROCK HILL, SC 29732-3156 FACILITY #:803-324-4166 WEBB MARGARET D PH#: 252-206-7205 Facility Email: TPILKINGTON@INTERIMHEALTHCARE.COM Fac. Cont. Email: TERRIPILKINGTON@INTERIM-MGI.COM	HHA-0169 / 11/30/2020 York / Corporation 2526 WARD BLVD WILSON, NC 27893-1600 INTERIM HEALTHCARE OF THE TRIAD INC

Total Counties Served: 3**County/Counties Served: Chester, 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 Services:**

INTERIM HEALTHCARE OF THE UPSTATE 16 HYLAND RD GREENVILLE, SC 29615-5756 FACILITY #:864-627-1200 GRAY JACQUELINE PH#: 864-627-1200 Facility Email: JONATHAN.GRUBB@INTERIMCARES.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0332 / 01/31/2021 Greenville / Limited Liability INVESTSOUTH IHC LLC
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Total Counties Served: 8**County/Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union****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: Y****Other Services:**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

INTREPID USA HEALTHCARE SERVICES

2694 LAKE PARK DR 1ST FLOOR

NORTH CHARLESTON, SC 29406-9826 FACILITY #:843-569-3516

MCLAUGHLIN JEFFERY S PH#:

Facility Email: KYLE.CHANDLER@INTREPIDUSA.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0180 / 06/30/2021

Charleston / Corporation

4055 VALLEY VIEW LN STE 500

DALLAS, TX 75244-5048

FC OF SOUTH CAROLINA INC

Total Counties Served: 6County/Counties Served: **Allendale, Berkeley, Charleston, Colleton, Dorchester, Georgetown**

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 Services:

Satellite Location: **WALTERBORO OFFICE**

Phone:

Address: **302 MEDICAL PARK DRIVE SUITE 215**City: **WALTERBORO**State: **SC**Zip Code: **29488****ISLAND HEALTH CARE**

300 NEW RIVER PKWY, STE 7

HARDEEVILLE, SC 29927-4450 FACILITY #:843-208-3660

BOLCH ELLEN B PH#: 843-208-3660

Facility Email: EBOLCH@THAGROUP.ORG

Fac. Cont. Email: EBOLCH@THAGROUP.ORG

HHA-0111 / 02/28/2021

Jasper / Corporation

PO BOX 8011

SAVANNAH, GA 31412-8011

ISLAND HEALTH CARE INC

Total Counties Served: 2County/Counties Served: **Beaufort, Jasper**

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 Services:

Satellite Location: **BEAUFORT OFFICE**

Phone:

Address: **1211 NEW CASTLE ST****STEC**City: **BEAUFORT**State: **SC**Zip Code: **29902**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

KERSHAWHEALTH HOME HEALTH

1165 HWY 1 S STE 400
LUGOFF, SC 29078-0340 FACILITY #:803-425-1182
FRY TERESA PH#: 803-425-1182
Facility Email: AMYW@KERSHAWHEALTH.ORG
Fac. Cont. Email: TFRY@KERSHAWHEALTH.ORG

HHA-0321 / 07/31/2021
Kershaw / Limited Liability
1165 HWY 1 SOUTH STE 400
LUGOFF, SC 29078-0000
KERSHAW HOSPITAL LLC

Total Counties Served: 1

County/Counties Served: **Kershaw**

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 Services:

KINDRED AT HOME

2000 CENTER POINT RD STE 2300
COLUMBIA, SC 29210-7318 FACILITY #:803-731-2365
FENNEL SHEENA PH#:
Facility Email: JANET.COMBS@GENTIVA.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0154 / 11/30/2020
Richland / Limited Liability
12900 FOSTER ST STE 400
OVERLAND PARK, KS 66213-2696
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 4

County/Counties Served: **Calhoun, Lexington, Orangeburg, Richland**

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 Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

KINDRED AT HOME-ANDERSON

1704 E GREENVILLE ST STE 2D
ANDERSON, SC 29621-7914 FACILITY #:864-332-8200
PRICE MELISSA PH#:
Facility Email: JANET.COMBS@GENTIVA.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0001 / 12/31/2020
Anderson / Limited Liability
12900 FOSTER ST STE 400
OVERLAND PARK, KS 66213-2696
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 11

County/Counties Served: **Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, McCormick, Oconee, Pickens, Spartanburg, Union**

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 Services: REGISTERED NURSE

Satellite Location: PICKENS OFFICE

Phone: 864-898-5839

Address: 200 MCDANIEL AVENUE

City: PICKENS

State:SC

Zip Code: 29671

Satellite Location: SPARTANBURG OFFICE

Phone: 864-596-3320

Address: 151 EAST WOOD STREET

City: SPARTANBURG

State:SC

Zip Code: 29303

Satellite Location: CLINTON OFFICE

Phone:

Address: 93 HUMAN SERVICE RD

City: CLINTON

State:SC

Zip Code: 29325

KINDRED AT HOME-CHARLESTON

4975 LACROSS RD STE 354
CHARLESTON, SC 29406-6525 FACILITY #:843-744-1191
SEBEN LAUREN MPH#:
Facility Email: JANET.COMBS@GENTIVA.COM
Fac. Cont. Email: No Facility Contact Email on Record

HHA-0051 / 08/31/2021
Charleston / Corporation
LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40
OVERLAND PARK, KS 66213-2696
GENTIVA CERTIFIED HEALTHCARE CORPORATION

Total Counties Served: 3

County/Counties Served: **Berkeley, Charleston, Dorchester**

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 Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
KINDRED AT HOME-COASTAL 1240 21ST AVE N STE 200 MYRTLE BEACH, SC 29577-7401 FACILITY #:843-448-7060 MILLER AMANDA J PH#: 843-448-7060 Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0179 / 11/30/2020 Horry / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 TOTAL CARE HOME HEALTH OF SOUTH CAROLINA LLC

Total Counties Served: 3County/Counties Served: **Georgetown, Horry, Williamsburg**

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 Services:

KINDRED AT HOME-GREENVILLE 15 BRENDAN WAY STE 250 GREENVILLE, SC 29615-3562 FACILITY #:864-297-5711 FRY CYNTHIA PH#: Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0158 / 01/31/2021 Greenville / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC
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Total Counties Served: 8County/Counties Served: **Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union**

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 Services: REGISTERED NURSE

Satellite Location: SPARTANBURG OFFICE Address: 905 E MAIN ST City: SPARTANBURG State:SC Zip Code: 29302-2111	Phone:
Satellite Location: ANDERSON OFFICE Address: 1704 E GREENVILLE ST City: ANDERSON State:SC Zip Code: 29621-7907	Phone:
Satellite Location: SENECA OFFICE Address: 10 ACCOUNTANTS CIR THE COMMONS City: SENECA State:SC Zip Code: 29678	Phone:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
KINDRED AT HOME-LOW COUNTRY 415 ROBERTSON BLVD STE E WALTERBORO, SC 29488-5713 FACILITY #:843-542-9540 BROOKS DEBORAH CALHOUN PH#: Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0011 / 12/31/2020 Colleton / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 9

County/Counties Served: Allendale, Bamberg, Beaufort, Berkeley, Charleston, Colleton, Dorchester, Hampton, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: NORTH CHARLESTON-OFFICE	Phone: 843-953-2450
Address: 4050 BRIDGEVIEW DRIVE	

City: CHARLESTON State:SC Zip Code: 29405

Satellite Location: VARNILLE-OFFICE	Phone: 803-943-4649
Address: 531 CAROLINA AVE	

City: VARNVILLE State:SC Zip Code: 29944

Satellite Location: ORANGEBURG-OFFICE	Phone: 803-268-5734
Address: 1550 CAROLINA AVENUE	

City: ORANGEBURG State:SC Zip Code: 29115

KINDRED AT HOME-MIDLANDS 2521 EVANS ST NEWBERRY, SC 29108 FACILITY #:803-276-0273 GUY HARRIETT PH#: 803-276-0273 Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0040 / 12/31/2020 Newberry / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC
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Total Counties Served: 11

County/Counties Served: Aiken, Barnwell, Chester, Edgefield, Fairfield, Lancaster, Lexington, Newberry, Richland, Saluda, 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 Services: REGISTERED NURSE

Satellite Location: BARNWELL OFFICE	Phone: 803-541-1190
Address: 11015 ELLENTON STREET	

City: BARNWELL State:SC Zip Code: 29812

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

Satellite Location: LANCASTER OFFICE
Address: 1822 PAGELAND HIGHWAY

Phone:

City: LANCASTER State:SC Zip Code: 29720

Satellite Location: FORT MILL OFFICE
Address: 1061 RED VENTURES DR STE 165

Phone: 803-547-7612

City: FORT MILL State:SC Zip Code: 29707-25

KINDRED AT HOME-PEE DEE

702 PAMPLICO HWY STE B
FLORENCE, SC 29505-6199 FACILITY #:843-317-9686
GOLDING RN JULIE K PH#:

Facility Email: JANET.COMBS@GENTIVA.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0009 / 12/31/2020
Florence / Limited Liability
12900 FOSTER ST STE 400
OVERLAND PARK, KS 66213-2696
CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC

Total Counties Served: 13

County/Counties Served: **Chesterfield, Clarendon, Darlington, Dillon, Florence, Georgetown, Horry, Kershaw, Lee, Marion, Marlboro, Sumter, Williamsburg**

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 Services: REGISTERED NURSE

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
KINDRED AT HOME-UPSTATE 206 CHESNEE HWY STE H GAFFNEY, SC 29341-2757 FACILITY #:864-488-0898 RANDOLPH TERESA PH#: 864-488-0898 Facility Email: JANET.COMBS@GENTIVA.COM Fac. Cont. Email: N/A	HHA-0178 / 11/30/2020 Cherokee / Limited Liability LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 40 OVERLAND PARK, KS 66213-2696 TOTAL CARE HOME HEALTH OF NORTH CAROLINA LLC

Total Counties Served: 4

County/Counties Served: Cherokee, Chester, Union, 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 Services:

Satellite Location: UNION OFFICE

Phone: 864-429-4821

Address: 1261 S DUNCAN BYPASS

City: UNION

State:SC

Zip Code: 29379

Satellite Location: ROCK HILL OFFICE

Phone: 803-329-3184

Address: 250 PIEDMONT BLVD

City: ROCK HILL

State:SC

Zip Code: 29732-18

LAUREL CREST HOME HEALTH

HHA-0333 / 01/31/2021

100 JOSEPH WALKER DR

Lexington / Corporation

WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370

DEEL JAMES F PH#: 803-796-0370

Facility Email: JIM.DEEL@LAURELCREST.ORG

LAUREL CREST RETIREMENT COMMUNITY

Fac. Cont. Email: JIM.DEEL@LAURELCREST.ORG

Total Counties Served: 0

County/Counties Served: Lexington

License Restrictions: RESTRICTED TO RESIDENTS OF LAUREL CREST CAMPUS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LIBERTY HOME CARE-MYRTLE BEACH 1293 PROFESSIONAL DR STE C MYRTLE BEACH, SC 29577-5754 FACILITY #:843-839-2273 HARRIS KAREN PH#: 843-839-2273 Facility Email: HMACDONALD@LIBERTYHOMECARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0163 / 12/31/2020 Horry / Ltd. Liability 1293 PROFESSIONAL DR STE C MYRTLE BEACH, SC 29577-5754 LIBERTY HOME CARE LLC

Total Counties Served: 2County/Counties Served: **Georgetown, Horry**

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 Services:

MCLEOD HOME HEALTH 300 S DARGAN ST FLORENCE, SC 29506-2537 FACILITY #:843-777-3050 MELTON DENISE J PH#: 803-435-4494 Facility Email: DENISE.MELTON@MCLEODHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0085 / 05/31/2021 Florence / Non-Profit Corporation 300 S DARGAN ST FLORENCE, SC 29506-2537 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC
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Total Counties Served: 10County/Counties Served: **Chesterfield, Clarendon, Darlington, Dillon, Florence, Horry, Lee, Marion, Marlboro, Sumter**

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: MCLEOD HOME HEALTH - CHERAW Address: 711 CHESTERFIELD HIGHWAY City: CHERAW State:SC Zip Code: 29520	Phone: 843-320-5510
Satellite Location: MCLEOD HOME HEALTH - HORRY Address: 3655 MITCHELL STREET City: LORIS State:SC Zip Code: 29569	Phone: 843-716-7337
Satellite Location: MCLEOD HOME HEALTH - CLARENDON Address: 619 SOUTH MANNING STREET City: MANNING State:SC Zip Code: 29102	Phone: 803-435-4494

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

Satellite Location: MCLEOD HOME HEALTH - DILLON

Phone: 843-487-1371

Address: 807 SIXTH STREET

City: DILLON

State:SC

Zip Code: 29536

MEDICAL SERVICES OF AMERICA - COASTAL

4685 HWY 17 BYP S

MYRTLE BEACH, SC 29577-6681 FACILITY #:843-293-4614

MOORE TONYA PH#:

Facility Email: LICENSING@MSA-CORP.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0039 / 02/28/2021

Horry / Corporation

4685 HWY 17 BYP S

MYRTLE BEACH, SC 29577-6681

INCARE HOME HEALTH INC

Total Counties Served: 11

County/Counties Served: **Berkeley, Charleston, Chesterfield, Darlington, Dillon, Florence, Georgetown, Horry, Marion, Marlboro, Williamsburg**

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: Y

Other Services: DIETARY

Satellite Location: GEORGETOWN OFFICE

Phone:

Address: 107 QUEEN ST

UNIT A

City: GEORGETOWN

State:SC

Zip Code: 29440-361

Satellite Location: NORTH MYRTLE BEACH OFFICE

Phone:

Address: 106 HWY 17 S

SUNDIAL CENTER

City: N MYRTLE BEACH

State:SC

Zip Code: 29582

Satellite Location: FLORENCE OFFICE

Phone: 843-665-8135

Address: 1402 D MEADORS FARM ROAD

City: FLORENCE

State:SC

Zip Code: 29505-271

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

Satellite Location: CONWAY OFFICE

Phone:

Address: 1261 HWY 501 E

STEC

City: CONWAY

State:SC

Zip Code: 29526

MEDICAL SERVICES OF AMERICA HOME HEALTH

2 PALMETTO WOOD PKWY STE 201

IRMO, SC 29063-2881 FACILITY #:803-561-7680

THORPE MELISSA PH#:

Facility Email: LICENSING@MSA-CORP.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0026 / 12/31/2020

Lexington / Corporation

PO BOX 609

LEXINGTON, SC 29071

TRI-COUNTY HOME HEALTH CARE & SERVICES INC

Total Counties Served: 35

County/Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Calhoun, Cherokee, Chester, Clarendon, Colleton, Dorchester, Edgefield, Fairfield, Greenville, Greenwood, Hampton, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, 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 Services:

Satellite Location: AIKEN OFFICE

Phone: 803-641-1127

Address: 2130 WOODSIDE EXECUTIVE COURT

City: AIKEN

State:SC

Zip Code: 29803

Satellite Location: UNION OFFICE

Phone: 864-427-8322

Address: 101 SOUTH BOYCE ST

STEB

City: UNION

State:SC

Zip Code: 29379

Satellite Location: AIKEN OFFICE

Phone:

Address: 186 FABIAN DIVE

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

Satellite Location: SUMTER OFFICE

Phone:

Address: 2560 TAHOE DRIVE

City: SUMTER

State:SC

Zip Code: 29150

Satellite Location: BATESBURG OFFICE

Phone:

Address: 120 W CHURCH ST

STE D

City: BATESBURG

State:SC

Zip Code: 29006

METHODIST MANOR HOME HEALTH

2100 TWIN CHURCH RD

FLORENCE, SC 29501-8200 FACILITY #:843-664-0700

REICH TERESSA L PH#: 843-664-0700

Facility Email: TTABOR@THEMANORSENIORLIVING.COM

Fac. Cont. Email: TREICH@THEMANORSENIORLIVING.COM

HHA-0207 / 02/28/2021

Florence / Non-Profit Corporation

2100 TWIN CHURCH RD

FLORENCE, SC 29501-8200

UNITED METHODIST MANOR OF THE PEE DEE

Total Counties Served: 1

County/Counties Served: **Florence**

License Restrictions: **RESTRICTED TO CCRC RESIDENTS OF THE METHODIST MANOR RETIREMENT COMMUNITY**

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
MUSC HEALTH AT HOME BY BAYADA - CONWAY 1300 S CAROLINA HWY 544 STE F-107 CONWAY, SC 29526 FACILITY #:843-492-6602 BLASZCZYK BRYAN PH#: 843-492-6602 Facility Email: BBLASZCZYK@BAYADA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0329 / 01/31/2021 Horry / Limited Liability SCHHA LLC

Total Counties Served: 2**County/Counties Served: Georgetown, Horry****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 Services: SKILLED NURSING SERVICES

MUSC HEALTH AT HOME BY BAYADA-CHARLESTON 1671 BELLE ISLE DR STE 115-B MOUNT PLEASANT, SC 29464 FACILITY #:843-576-5378 KUKULKA DIANE PH#: Facility Email: DKUKULKA@BAYADA.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0324 / 12/31/2020 Charleston / Limited Liability 176 CROGHAN SPUR RD STE 102 CHARLESTON, SC 29407 SCHHA LLC
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Total Counties Served: 3**County/Counties Served: Berkeley, Charleston, Dorchester****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 Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY 1645 J A COCHRAN BYP STE I CHESTER, SC 29706-3101 FACILITY #:866-327-3205 LANNEN RN DEBRA PH#: Facility Email: 2226@AMEDISYS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0198 / 08/31/2021 Chester / Ltd. Liability 1645 J A COCHRAN BYP STE I CHESTER, SC 29706-3101 AMEDISYS SC LLC

Total Counties Served: 4**County/Counties Served: Cherokee, Chester, 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 Services:****Satellite Location: AMEDISYS HOME HEALTH OF ROCK HILL****Phone: 844-227-3491****Address: 231 SOUTH HERLONG AVE SUITE 201****City: ROCK HILL****State: SC****Zip Code: 29732-111****NHC HOMECARE-AIKEN**

74 PHYSICIAN DR

AIKEN, SC 29803 FACILITY #:803-643-1701

SNEAD-ELAM DIANE PH#:

Facility Email: LSMITH@NHCCARE.COM**Fac. Cont. Email:** No Facility Contact Email on Record

HHA-0181 / 06/30/2021

Aiken / Limited Liability Limited Partnership

PO BOX 3636

AIKEN, SC 29802-3636

NHC/OP LP

Total Counties Served: 5**County/Counties Served: Aiken, Allendale, Barnwell, Edgefield, Orangeburg****License Restrictions:****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: DIETARY CONSULTATION**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HOMECARE-BEAUFORT 22 PLANTATION PARK DR STE 105B BLUFFTON, SC 29910 FACILITY #:843-705-8230 FORTSON CHASITY PH#: Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0216 / 09/30/2021 Beaufort / Limited Liability PO BOX 1199 BLUFFTON, SC 29910 NHC HOMECARE-SOUTH CAROLINA LLC

Total Counties Served: 4**County/Counties Served: Beaufort, Colleton, Hampton, Jasper****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 Services: DIETARY CONSULTATION**

NHC HOMECARE-GREENWOOD 452 E CAMBRIDGE AVE GREENWOOD, SC 29646 FACILITY #:864-229-9888 OWENS ETHEL PH#: 864-229-9888 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0182 / 06/30/2021 Greenwood / Limited Liability Limited Partnership PO BOX 1708 GREENWOOD, SC 29648-1708 NHC/OP LP
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Total Counties Served: 5**County/Counties Served: Abbeville, Greenwood, McCormick, Newberry, Saluda****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 Services: DIETARY CONSULTATION**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HOMECARE-LAURENS 700 PLAZA CIR STE O CLINTON, SC 29325-7556 FACILITY #:864-833-2368 HOPKINS GREG PH#: 803-481-3131 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: NHC@NHCHOMECARELAURENS.COM	HHA-0183 / 06/30/2021 Laurens / Limited Liability Limited Partnership PO BOX 309 LAURENS, SC 29360-0309 NHC/OP LP

Total Counties Served: 6County/Counties Served: **Anderson, Greenville, Laurens, Oconee, Pickens, Spartanburg****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 Services: DIETARY CONSULTATION

Satellite Location: **GREENVILLE OFFICE**

Phone: 864-289-9982

Address: 111 SMITH HINES ROAD, SUITE L

City: **GREENVILLE**State: **SC**Zip Code: **29607**

NHC HOMECARE-LOW COUNTRY 2070 NORTHBROOK BLVD STE B1 NORTH CHARLESTON, SC 29406 FACILITY #:843-851-0999 SCRUGGS MASON PH#: 843-851-0999 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0138 / 04/30/2021 Charleston / Limited Liability 2070 NORTHBROOK BLVD SUITE B1 NORTH CHARLESTON, SC 29406 NHC HOMECARE-SOUTH CAROLINA LLC
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Total Counties Served: 6County/Counties Served: **Bamberg, Berkeley, Charleston, Clarendon, Dorchester, Williamsburg****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 Services: DIETARY CONSULTATION

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HOMECARE-MIDLANDS 3229 SUNSET BLVD STE N WEST COLUMBIA, SC 29169-3202 FACILITY #:803-939-0266 SINGLETON GWENDOLYN PH#: 803-939-0266 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0151 / 04/30/2021 Lexington / Limited Liability PO BOX 3876 WEST COLUMBIA, SC 29171-3876 NHC HOMECARE-SOUTH CAROLINA LLC

Total Counties Served: 6**County/Counties Served: Calhoun, Fairfield, Kershaw, Lexington, Richland, Sumter****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 Services: DIETARY CONSULTATION**

NHC HOMECARE-MURRELLS INLET 11947 GRANDHAVEN DR STE K MURRELLS INLET, SC 29576 FACILITY #:843-945-9850 SIMMONS JULIE C PH#: 803-641-9955 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0215 / 09/30/2021 Horry / Limited Liability 9405 HWY 17 BYP MURRELLS INLET, SC 29576-9301 NHC HOMECARE-SOUTH CAROLINA LLC
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Total Counties Served: 4**County/Counties Served: Dillon, Georgetown, Horry, Marion****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 Services: DIETARY CONSULTATION**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HOMECARE-PIEDMONT 1674 CRANIUM DR STE 101 ROCK HILL, SC 29732-3506 FACILITY #:803-325-1455 WILLIAMSON BONNIE PH#: 803-643-0001 Facility Email: LSMITH@NHCCARE.COM Fac. Cont. Email: BWILLIAMSON@LIBERTYHOMECARE.COM	HHA-0099 / 04/30/2021 York / Limited Liability PO BOX 2525 ROCK HILL, SC 29732-4525 NHC HOMECARE-SOUTH CAROLINA LLC

Total Counties Served: 4County/Counties Served: **Chester, Lancaster, Union, 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 Services: **DIETARY CONSULTATION**

OAKS HOME HEALTH 1000 METHODIST OAKS DR ORANGEBURG, SC 29116 FACILITY #:803-534-1212 KREIL VALDEKO PH#: 000-000-0000 Facility Email: VAL.KREIL@THEOAKSSC.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0200 / 01/31/2021 Orangeburg / Non-Profit Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC
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Total Counties Served: 1County/Counties Served: **Orangeburg, Special Note - SERVING CAMPUS RESIDENTS ONLY****License Restrictions: SERVING CAMPUS RESIDENTS ONLY**

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC 107 WESTPARK BLVD STE 110 COLUMBIA, SC 29210 FACILITY #:800-950-3963 PH#: _____ Facility Email: FERN.MATTHEWS@OPTUM.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0130 / 03/31/2021 Lexington / Limited Liability OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC

Total Counties Served: 13

County/Counties Served: Aiken, Beaufort, Berkeley, Charleston, Colleton, Dorchester, Fairfield, Georgetown, Kershaw, Lancaster, Lexington, Newberry, Richland

License Restrictions: OBSTETRIC PATIENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services: IV THERAPY & SERVICE TO OBSTETRICAL PATIENTS

OPTUM WOMEN'S AND CHILDREN'S HEALTH-PIEDMONT 2 INDEPENDENCE POINTE GREENVILLE, SC 29615 FACILITY #:800-950-3963 ACKERMAN KRISTI PH#: _____ Facility Email: FERN.MATTHEWS@OPTUM.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0128 / 03/31/2021 Greenville / Limited Liability OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC
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Total Counties Served: 33

County/Counties Served: Abbeville, Allendale, Anderson, Bamberg, Barnwell, Calhoun, Cherokee, Chester, Chesterfield, Clarendon, Darlington, Dillon, Edgefield, Florence, Greenville, Greenwood, Hampton, Horry, Jasper, Laurens, Lee, Marion, Marlboro, McCormick, Oconee, Orangeburg, Pickens, Saluda, Spartanburg, Sumter, Union, Williamsburg, York

License Restrictions: OBSTETRIC PATIENTS ONLY

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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PALLIATIVE CARE OF THE LOWCOUNTRY 7 PLANTATION PARK DR UNIT 4 STE C2 BLUFFTON, SC 29910 FACILITY #:843-706-4094 BRASINGTON RN JENNY PH#: 843-706-2296 Facility Email: JBRASINGTON@HOSPICECARELC.ORG Fac. Cont. Email: INFO@HOSPICECARELC.ORG	HHA-0117 / 09/30/2021 Beaufort / Non-Profit Corporation PO BOX 3827 BLUFFTON, SC 29910-3827 HOSPICE CARE OF THE LOWCOUNTRY INC

Total Counties Served: 2

County/Counties Served: Beaufort, Jasper, Special Note - RESTRICTED TO RESIDENTS WHO ARE TRERMINALLY ILL AS DEFINED IN REGULATION 61-78

License Restrictions: RESTRICTED TO RESIDENTS WHO ARE TERMINALLY ILL AS DEFINED IN REGULATION 61-78

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 Services:

PALMETTO INFUSION SERVICES 147 PROFESSIONAL LN STE C PAWLEYS ISLAND, SC 29585 FACILITY #:843-979-7061 ROGERS RN ANGIE PH#: Facility Email: DAVIDGOODALL@WINYAHRX.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0371 / 11/30/2020 Georgetown / Limited Liability PALMETTO INFUSION SERVICES LLC
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Total Counties Served: 46

County/Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York

License Restrictions:

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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PHC HOME HEALTH 408 FOLLY RD CHARLESTON, SC 29412-2625 FACILITY #:843-762-3601 DURRENCE HUGH D PH#: 843-762-3601 Facility Email: SARAHWILBANKS@PHCHEALTH.COM Fac. Cont. Email: LORIWOOD@PHCHEALTH.COM	HHA-0084 / 03/30/2021 Charleston / Corporation 1923-D MAYBANK HWY CHARLESTON, SC 29412-2115 HEDGEMARK BRENTWOOD MEDICAL SERVICES INC

Total Counties Served: 3County/Counties Served: **Berkeley, Charleston, Dorchester****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 Services:

PHC HOME HEALTHCARE 2460 INDIA HOOK RD STE 201-G ROCK HILL, SC 29732 FACILITY #:803-659-3350 PH#:	HHA-0341 / 01/31/2021 York / Limited Liability PERSONAL HOME CARE OF NORTH CAROLINA LLC
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Facility Email: PHC_NC@BELLSOUTH.NET
Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1County/Counties Served: **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 Services: **NURSING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY 2817 ASHLAND RD COLUMBIA, SC 29210-5009 FACILITY #:803-772-5885 STAMPER AMANDA L PH#: 803-772-5885 Facility Email: MANDY.STAMPER@PRESCOMM.ORG Fac. Cont. Email: MANDY.STAMPER@PRESHOMESC.ORG	HHA-0212 / 12/31/2020 Lexington / Non-Profit Corporation 2817 ASHLAND RD COLUMBIA, SC 29210-5009 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA

Total Counties Served: 7

County/Counties Served: Berkeley, Dorchester, Florence, Laurens, Lexington, Pickens, Richland, Special Note - Berkeley, Dorchester, Florence, Laurens, Lexington Pickens & Richland CCRC campus residents only

License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY CAMPUSES ONLY IN 7 COUNTIES AS LISTED

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 Services:

Satellite Location: CLINTON BRANCH Phone:
Address: 801 MUSGROVE ST

City: CLINTON State:SC Zip Code: 29325

Satellite Location: COLUMBIA BRANCH Phone:
Address: 700 DAVEGA DR

City: LEXINGTON State:SC Zip Code: 29073-961

Satellite Location: FLORENCE BRANCH Phone:
Address: 2350 W LUCAS ST

City: FLORENCE State:SC Zip Code: 29501

Satellite Location: FOOTHILLS BRANCH Phone:
Address: 205 BUD NALLEY DR

City: EASLEY State:SC Zip Code: 29642

Satellite Location: SUMMERVILLE BRANCH Phone:
Address: 201 W 9TH NORTH ST

City: SUMMERVILLE State:SC Zip Code: 29483-671

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRISMA HEALTH HOME HEALTH 1400 PICKENS ST COLUMBIA, SC 29201-3465 FACILITY #:803-296-3100 PH#: _____ Facility Email: KIM.PRICE@PRISMAHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0148 / 02/28/2021 Richland / Non-Profit Corporation PO BOX 7275 COLUMBIA, SC 29202-7275 PRISMA HEALTH - MIDLANDS

Total Counties Served: 2**County/Counties Served: Lexington, Richland****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 Services: CHAPLAINEY, DIETARY AND ENTEROSTOMAL THERAPIST

PRISMA HEALTH HOME HEALTH-UPSTATE 440 ROPER MOUNTAIN RD GREENVILLE, SC 29615 FACILITY #:864-522-5350 SNYDER LIZ PH#: _____ Facility Email: LESLIE.HEISLER@PRISMAHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0323 / 10/31/2021 Greenville / Corporation 440 ROPER MOUNTAIN RD GREENVILLE, SC 29615 PRISMA HEALTH - UPSTATE
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Total Counties Served: 4**County/Counties Served: Anderson, Greenville, Oconee, Pickens****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 Services: INTRAVENOUS THERAPY

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRISMA HEALTH TUOMEY HOME HEALTH 500 PINWOOD RD STE 2 SUMTER, SC 29154-6197 FACILITY #:803-773-4663 PH#: Facility Email: KIM.PRICE@PRISMAHEALTH.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0315 / 12/31/2020 Sumter / Non-Profit Corporation 129 N WASHINGTON ST SUMTER, SC 29150-4983 PRISMA HEALTH TUOMEY HOSPITAL

Total Counties Served: 3**County/Counties Served: Clarendon, Lee, Sumter****License Restrictions:**
Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

PROVIDENCE CARE AT HOME 202 WALL ST PIEDMONT, SC 29673-6754 FACILITY #:864-982-0489 ANSTEY LENORA PH#: 803-325-1455 Facility Email: CDEJACIMO@PROVIDENCECANHELP.COM Fac. Cont. Email: NHC@NHCHOMECAREPIEDMONT.COM	HHA-0363 / 05/31/2021 Anderson / Limited Liability PROVIDENCE HOME HEALTH LLC
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Total Counties Served: 9**County/Counties Served: Anderson, Cherokee, Chester, Greenville, Lancaster, Laurens, Pickens, Spartanburg, York****License Restrictions:**
Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N
Medical Supplies/Appliances/Durable Medical Equipment: N
Other Services:

Satellite Location: PROVIDENCE AT HOME Address: 500 LAKESHORE PKWY City: ROCK HILL State:SC Zip Code: 29730	Phone: 803-372-5885
Satellite Location: PROVIDENCE AT HOME Address: 634 FAIRVIEW RD City: SIMPSONVILLE State:SC Zip Code: 29680	Phone: 864-757-9521

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PROVIDENCE HOME HEALTH 140 STONERIDGE DR STE 620 COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100 OWENS JENNIFER PH#: 803-939-2788 Facility Email: LRA@LHCGROUP.COM Fac. Cont. Email: DHANSARD@PORTSBRIDGEHOSPICE.COM	HHA-0361 / 03/31/2021 Richland / Limited Liability SOUTH CAROLINA IN-HOME PARTNER-I LLC

Total Counties Served: 2County/Counties Served: **Richland, Sumter**

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

PRUITTHEALTH @ HOME - COLUMBIA 240 STONERIDGE DR STE 100 COLUMBIA, SC 29210-8013 FACILITY #:803-626-0089 YOUNG STEPHANIE PH#: 803-359-2253 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Cont. Email: 2211@AMEDISYS.COM	HHA-0232 / 01/31/2021 Richland / Corporation 118 YORK ST CHESTER, SC 29706-1484 PRUITTHEALTH HOME HEALTH INC
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Total Counties Served: 20County/Counties Served: **Abbeville, Anderson, Calhoun, Cherokee, Chester, Fairfield, Greenville, Greenwood, Kershaw, Lancaster, Laurens, Lexington, Newberry, Oconee, Pickens, Richland, Spartanburg, Sumter, Union, 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 Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRUITTHEALTH @ HOME - FLORENCE 2051 ELIJAH LUDD RD STE 1 FLORENCE, SC 29501-5222 FACILITY #:843-665-1759 MOORE SHARON PH#: 843-662-8633 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0233 / 02/28/2021 Florence / Corporation 609 S COIT ST FLORENCE, SC 29501-5222 PRUITTHEALTH HOME HEALTH INC

Total Counties Served: 11

County/Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Florence, Georgetown, Horry, Lee, Marion, Marlboro, Williamsburg

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 Services:

PRUITTHEALTH @ HOME - LOW COUNTRY 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 FACILITY #:843-872-0946 KINARD ROBIN PH#: 843-322-0280 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM Fac. Cont. Email: RKINARD@PRUITTHEALTH.COM	HHA-0214 / 04/30/2021 Beaufort / Corporation 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 PRUITTHEALTH HOME HEALTH INC
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Total Counties Served: 15

County/Counties Served: Aiken, Allendale, Bamberg, Barnwell, Beaufort, Berkeley, Charleston, Colleton, Dorchester, Edgefield, Hampton, Jasper, McCormick, Orangeburg, Saluda

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 Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ROLLING GREEN VILLAGE HOME HEALTH AGENCY 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800 TOERNER RYAN PH#: 864-987-9800 Facility Email: RYANT@ROLLINGGREENVILLAGE.COM Fac. Cont. Email: RYANT@ROLLINGGREENVILLAGE.COM	HHA-0213 / 12/31/2020 Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 ROLLING GREEN VILLAGE

Total Counties Served: 1**County/Counties Served: Greenville****License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY AT ROLLING GREEN VILLAGE RESIDENTS ONLY.****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services: HOME HEALTH AGENCY FOR RGC RESIDENTS ONLY**

ROPER-ST FRANCIS HOME HEALTH CARE 1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796 FACILITY #:843-402-7000 SHEEHAN TERRI PH#: Facility Email: BONNIE.MELLO@RSFH.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0062 / 12/31/2020 Charleston / Non-Profit Corporation 1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796 ROPER HOSPITAL INC
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Total Counties Served: 3**County/Counties Served: Berkeley, Charleston, Dorchester****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 Services: REGISTERED DIETITIAN/CDE; CERTIFIED WOUND AND OSTOMY NURSES; TELEMONTORING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
SEABROOK WELLNESS AND HOME HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747 LEE ROBERT M PH#: 843-842-3747 Facility Email: RLEE@THESEABROOK.COM Fac. Cont. Email: RLEE@THESEABROOK.COM	HHA-0173 / 11/30/2020 Beaufort / Non-Profit Corporation 300 WOODHAVEN DR OFC HILTON HEAD ISLAND, SC 29928-7512 SEABROOK OF HILTON HEAD INC

Total Counties Served: 1**County/Counties Served: Beaufort, Special Note - SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT****License Restrictions: SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: Y****Other Services:**

SPARTANBURG MEDICAL CENTER HOME HEALTH 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29303 FACILITY #:864-560-3900 ANDERSON DAVID PH#: Facility Email: DANDERSON3@SRHS.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0038 / 09/30/2021 Spartanburg / District 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC
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Total Counties Served: 4**County/Counties Served: Cherokee, Greenville, Spartanburg, Union****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 Services: SKILLED NURSING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ST FRANCIS HOSPITAL HOME CARE 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 FACILITY #:864-233-5300 PH#: _____ Facility Email: REGINA_ERVIN@BSHSI.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0167 / 12/31/2020 Greenville / Corporation 10 PATEWOOD DR BLDG 6 STE 300 GREENVILLE, SC 29615-6341 ST FRANCIS HOSPITAL INC

Total Counties Served: 4County/Counties Served: **Anderson, Greenville, Pickens, Spartanburg****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 Services:

STILL HOPES HOME HEALTH 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 FACILITY #:803-223-6173 ROBERTSON NIKKI W PH#: 803-739-5043 Facility Email: EILDERTON@STILLHOPES.ORG Fac. Cont. Email: NROBERTSON@STILLHOPES.ORG	HHA-0199 / 12/31/2020 Lexington / Corporation PO BOX 2959 WEST COLUMBIA, SC 29171-2959 SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC
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Total Counties Served: 1County/Counties Served: **Lexington, Special Note - SERVING CAMPUS RESIDENTS ONLY****License Restrictions: SERVING CAMPUS RESIDENTS ONLY**

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
TRINITY HOME HEALTH OF AIKEN 690 MEDICAL PARK DR 400 AIKEN, SC 29801 FACILITY #:803-641-8220 KEATING RN JULIE PH#: 803-641-8220 Facility Email: LRA@LHCGROUP.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0316 / 11/30/2020 Aiken / Limited Liability 690 MEDICAL PARK DR STE 400 AIKEN, SC 29801-6348 AUGUSTA HOME CARE SERVICES LLC

Total Counties Served: 3**County/Counties Served: Aiken, Barnwell, Edgefield****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 Services: SKILLED NURSING

UNIVERSITY HOME HEALTH NORTH AUGUSTA 106 E MARTINTOWN RD UNIT B NORTH AUGUSTA, SC 29841-3425 FACILITY #:803-278-0770 HARDEN RN MARY J PH#: 803-278-0770 Facility Email: MHARDEN@UH.ORG Fac. Cont. Email: MHARDEN@UH.ORG	HHA-0137 / 10/31/2020 Aiken / Corporation 106 E MARTINTOWN RD UNIT B NORTH AUGUSTA, SC 29841-3425 UNIVERSITY HEALTH SERVICES INC
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Total Counties Served: 2**County/Counties Served: Aiken, Edgefield****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 Services:

Satellite Location: EDGEFIELD OFFICE Address: 1168 BAUSKETT ST STE A City: EDGEFIELD State:SC Zip Code: 29824	Phone:
Satellite Location: WAGENER OFFICE Address: 109 RAILROAD AVE City: WAGENER State:SC Zip Code: 29164	Phone:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
VNA OF GREATER BAMBERG 923 MIDWAY ST BAMBERG, SC 29003-1957 FACILITY #:803-245-5611 WEATHERFORD JENNIFER PH#: 803-245-5611 Facility Email: VNABAMBERG@YAHOO.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0045 / 12/31/2020 Bamberg / Corporation PO BOX 1048 BAMBERG, SC 29003-1048 VNA OF GREATER BAMBERG INC

Total Counties Served: 7County/Counties Served: **Allendale, Bamberg, Barnwell, Calhoun, Colleton, Hampton, Orangeburg**

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Y

Other Services: **SKILLED NURSING**Satellite Location: **ORANGEBURG OFFICE**

Phone:

Address: **1695 CHESTNUT ST NE**City: **ORANGEBURG**State: **SC**Zip Code: **29116**

WELL CARE HOME HEALTH OF THE LOWCOUNTRY 1039 44TH AVENUE NORTH STE 101 MYRTLE BEACH, SC 29577 FACILITY #:888-815-5310 GROSS-MILLSAP CATHY PH#: Facility Email: DTHOMPSON@WELLCAREHEALTH.COM Fac. Cont. Email: No Facility Contact Email on Record	HHA-0339 / 05/31/2021 Horry / Corporation WELL CARE HOME HEALTH OF THE LOWCOUNTRY INC
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Total Counties Served: 9County/Counties Served: **Beaufort, Berkeley, Charleston, Colleton, Dorchester, Georgetown, Horry, Marion, Williamsburg**

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: Y

Other Services: **SKILLED NURSING**

Home Health Agencies

DHEC Regulation 61-77

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WELL CARE HOME HEALTH OF THE MIDLANDS

2215-F W PALMETTO ST
FLORENCE, SC 29501 FACILITY #:888-815-5310
GROSS-MILLSAP CATHY PH#:

HHA-0347 / 12/31/2020
Florence / Corporation

Facility Email: DTHOMPSON@WELLCAREHEALTH.COM

WELL CARE HOME HEALTH OF THE MIDLANDS INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 15

County/Counties Served: **Aiken, Calhoun, Clarendon, Darlington, Dillon, Fairfield, Florence, Kershaw, Lee, Lexington, Newberry, Orangeburg, Richland, Saluda, Sumter**

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: Y
Other Services: **SKILLED NURSING**

WELL CARE HOME HEALTH OF THE UPSTATE

1658 CRANIUM DR STE 105
ROCK HILL, SC 29732 FACILITY #:888-815-5310
PH#:

HHA-0368 / 06/30/2021
York / Corporation

Facility Email: DTHOMPSON@WELLCAREHEALTH.COM

WELL CARE HOME HEALTH OF THE UPSTATE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 11

County/Counties Served: **Anderson, Cherokee, Chester, Greenville, Lancaster, Laurens, Oconee, Pickens, Spartanburg, Union, York**

License Restrictions:

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

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WESLEY COMMONS HOME HEALTH CARE 1110 MARSHALL RD GREENWOOD, SC 29646-4299 FACILITY #:864-227-7480 DAVIS DORIS E PH#: 864-227-7480 Facility Email: DDAVIS@WESLEYCOMMONS.ORG Fac. Cont. Email: DDAVIS@WESLEYCOMMONS.ORG	HHA-0202 / 02/28/2021 Greenwood / Non-Profit Corporation 1110 MARSHALL RD GREENWOOD, SC 29646-4299 WESLEY COMMONS

Total Counties Served: 1**County/Counties Served: Greenwood, Special Note - SERVING CAMPUS RESIDENTS ONLY****License Restrictions: SERVING CAMPUS RESIDENTS ONLY****Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: N****Other Services:**

WESTMINSTER TOWERS HOME HEALTH 1330 INDIA HOOK RD ROCK HILL, SC 29732-2462 FACILITY #:803-328-5121 LAUGHLIN AMY PH#: Facility Email: ALAUGHLIN@WESTMINSTERTOWERS.ORG Fac. Cont. Email: No Facility Contact Email on Record	HHA-0201 / 01/31/2021 York / Non-Profit Corporation 1330 INDIA HOOK RD ROCK HILL, SC 29732-2462 WESTMINSTER PRESBYTERIAN CENTER INC
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Total Counties Served: 1**County/Counties Served: York, Special Note - SERVING CAMPUS RESIDENTS ONLY****License Restrictions: SERVING CAMPUS RESIDENTS ONLY****Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y****Medical Supplies/Appliances/Durable Medical Equipment: Y****Other Services:****Total Number of Facilities: 100****Total Counties Served : 579**