

County: Anderson

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
HORIZON ADULT DAY CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-225-3370 DUNN LEIGH A PH#: Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS ADC-0248 / 10/31/2017	46
Number of Participants:		46
MARKETPLACE CINEMA ADULT DAY CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-225-3370 VICKERY SHERRY PH#: 864-225-3370 Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS ADC-0246 / 01/31/2017 (Renewal Pending)	40
Number of Participants:		40
NEW HOPE ADULT DAY CARE 1214 NEW HOPE RD ANDERSON, SC 29625-5460 FAC.#:864-222-2986 SIMS LARRY V PH#: 864-222-2986 Facility Email: L.SIMS13@YAHOO.COM	Anderson / Sole Proprietorship 1214 NEW HOPE RD ANDERSON, SC 29625-5460 SIMS JR LARRY V ADC-0237 / 03/31/2017	35
Number of Participants:		35

Totals For Facility/License Type: <u>Adult Day Care</u>	
Number of Activities/Facilities licensed: _____	Number Licensed Units: _____
3	121

County: Anderson

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
ANMED HEALTH MEDICUS SURGERY CENTER 107 PROFESSIONAL CT ANDERSON, SC 29621-2052 FAC.#:864-716-7900 EATON ANGELA R PH#: 864-716-7900 Facility Email: ANGIEKAY@MEDICUS1.COM	Anderson / Limited Liability PO BOX 1886 ANDERSON, SC 29622-1886 ANMED HEALTH MEDICUS SURGERY CENTER LLC ASF-0100 / 04/30/2017	5
Operating Rooms: 3 Procedure Rooms: 2 Endoscopy Rooms: 0		
UPSTATE ENDOSCOPY CENTER 1922 MCCONNELL SPRINGS RD STE B ANDERSON, SC 29621-2642 FAC.#:864-716-6555 ATKINS DEBORAH A PH#: 864-716-6555 Facility Email: DEBORAH.ATKINS@ANMEDHEALTH.ORG	Anderson / Ltd. Liability 1922 MCCONNELL SPRINGS RD STE B ANDERSON, SC 29621-2642 ANMED ENTERPRISES INC UPSTATE ENDOSCOPY CENTER LLC ASF-0083 / 06/30/2017	2
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 2		

Totals For Facility/License Type: <u>Ambulatory Surgery</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>7</u>

County: Anderson

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AGGRESSIVE INK III BODY PIERCING 407 HWY 28 BYP UNIT B ANDERSON, SC 29624-3044 FAC.#:864-226-3793 RICKETTS STEVE G PH#: 864-940-6552 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 407 HWY 28 BYP UNIT B ANDERSON, SC 29624-3044 RICKETTS STEVE G BP-0210 / 07/31/2017	1
PAINTED PONY PIERCING LLC 738 WHITEHALL RD ANDERSON, SC 29625-2264 FAC.#:864-314-8599 PRUITT THOMAS PH#: 864-354-8978 Facility Email: PAINTEDPONYPIERCING@YAHOO.COM	Anderson / Sole Proprietorship 738 WHITEHALL RD ANDERSON, SC 29625-2264 THOMAS PRUITT BP-0251 / 06/30/2017	1
THE EDGE 100 ELECTRIC CITY BLVD STE 60 ANDERSON, SC 29621-2306 FAC.#:864-359-2172 BROWN ASHLEY NICOLE PH#: 678-227-9973 Facility Email: ANDERSONTHEEDGE@GMAIL.COM	Anderson / 100 ELECTRIC CITY BLVD STE 60 ANDERSON, SC 29621-2306 RAINER BROWN & COMPANY LLC BP-0246 / 07/31/2017	1
XPRESSIONS TANNING SALON 112 W SHOCKLEY FERRY RD ANDERSON, SC 29624-3733 FAC.#:864-225-4806 GINN DONNA PH#: 864-225-4806 Facility Email: ANGLNURARMS@AOL.COM	Anderson / Sole Proprietorship 112 W SHOCKLEY FERRY RD ANDERSON, SC 29624-3733 GINN DONNA BP-0193 / 02/28/2017	1

Totals For Facility/License Type: <u>Body Piercing</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 4

County: Anderson

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
BROOKDALE ANDERSON 311 SIMPSON RD ANDERSON, SC 29621-2157 FAC.#:864-261-3875 JENKINS BRIAN PH#: 864-261-3875 Facility Email: BJENKINS1@BROOKDALE.COM	Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERITUS CORPORATION CRC-1303 / 03/31/2017	40
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
FAITH HOPE AND CHARITY RETIREMENT 101 COE ST ANDERSON, SC 29624 FAC.#:864-226-0990 PH#: Facility Email: Not on File	Anderson / Sole Proprietorship PO BOX 13866 ANDERSON, SC 29624-0018 MARY SIMS TOUCHTON CRC-0760 / 04/30/2017	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GARDEN HOUSE LLC 201 EDGEBROOK DR ANDERSON, SC 29621-2573 FAC.#:864-964-5668 BRADLEY-GUIBAULT KATHLEEN PH#: 864-964-5668 Facility Email: DIRECTOR@GARDENHOUSE.COM	Anderson / Ltd. Liability 201 EDGEBROOK DR ANDERSON, SC 29621-2545 ARHC GHANDSC01 TRS LLC CRC-1437 / 07/31/2017	75
Alzheimer Care:Yes Max # Resident:18	Alzheimer Unit: Yes Max # Beds: 18	
Certifications:None		
LAKEVIEW ASSISTED LIVING 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-638-5212 GILLESPIE MARTHA PH#: 864-638-5212 Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 LAKEVIEW ASSISTED LIVING INC CRC-0086 / 04/30/2017	19
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MAPLES OF HONEA PATH 224 WILDWOOD DR HONEA PATH, SC 29654-1335 FAC.#:864-369-2000 WILLIS MARK N PH#: 864-369-2000 Facility Email: WILLISFORHOUSE@GMAIL.COM	Anderson / Corporation 224 WILDWOOD DR HONEA PATH, SC 29654-1335 MAPLE MANOR INC CRC-0819 / 05/31/2017	74
Alzheimer Care:Yes Max # Resident:30	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Anderson

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
MARCHBANKS ASSISTED LIVING AND MEMORY CARE 2203 MARCHBANKS AVE ANDERSON, SC 29621-2247 FAC.#:864-231-7786 SWENEY CYNTHIA J PH#: 864-231-7786 Facility Email: CYNTHIA@MARCHBANKSASSISTEDLIVING.COM	Anderson / Ltd. Liability 2203 MARCHBANKS AVE ANDERSON, SC 29621-2247 CAROLINA RETIREMENT SERVICES OF ANDERSON LLC CRC-1413 / 05/31/2017	60
Alzheimer Care:Yes Max # Resident:10	Alzheimer Unit: Yes Max # Beds: 23	
Certifications:None		
MORNINGSIDE OF ANDERSON 1304 MCLEES RD ANDERSON, SC 29621-3345 FAC.#:864-964-9088 SPEER RICHARD W PH#: 864-964-9088 Facility Email: RSPEER@5SQC.COM	Anderson / Limited Liability Limited 400 CENTRE ST NEWTON, MA 02458-2094 MORNINGSIDE OF ANDERSON LP CRC-1093 / 04/30/2017	88
Alzheimer Care:Yes Max # Resident:15	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
NORTH POINTE ASSISTED LIVING 701 SIMPSON RD ANDERSON, SC 29621-3077 FAC.#:864-226-5505 GARRISON ANDREW HODGE PH#: 864-226-5505 Facility Email: SSTROVALL@CAPITALSENIORLIVING.NET	Anderson / Limited Liability CSL NORTH POINTE SC LLC CRC-1454 / 10/31/2017	70
Alzheimer Care:Yes Max # Resident:28	Alzheimer Unit: Yes Max # Beds: 28	
Certifications:None		
OAKVIEW PARK 110 HOOD RD GREENVILLE, SC 29611 FAC.#:864-412-8990 LITTLE DAVID D PH#: 864-579-0086 Facility Email: DLITTLE3@MINDSPRING.COM	Anderson / PO BOX 6384 SPARTANBURG, SC 29304-6384 OAKVIEW PARK ALF CRC-1566 / 10/31/2017	90
Alzheimer Care:Yes Max # Resident:0	Alzheimer Unit: Yes Max # Beds: 30	
Certifications:None		
RESTING PLACE #1 207 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3731 FAC.#:864-226-0990 TOUCHTON MARY S PH#: 864-226-0990 Facility Email: Not on File	Anderson / Sole Proprietorship PO BOX 13866 ANDERSON, SC 29624-0018 MARY SIMS TOUCHTON CRC-0499 / 11/30/2017	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Anderson

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
ROCKY RIVER BAPTIST ASSOCIATION RESIDENTIAL CARE HOME 250 UNION HIGH DR BELTON, SC 29627-2445 FAC.#:864-338-1410 TOUCHTON JORDANA M PH#: 864-338-1410 Facility Email: ROCKYRIVERRCF@YAHOO.COM	Anderson / Non-Profit Corporation 250 UNION HIGH DR BELTON, SC 29627-2445 ROCKY RIVER BAPTIST ASSOCIATION CRC-1270 / 04/30/2017	28
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SUMMIT PLACE OF ANDERSON 107 PERPETUAL SQ ANDERSON, SC 29621-1713 FAC.#:864-222-9880 COOLEY LARINDA PH#: 864-675-0220 Facility Email: LCOOLEY@CAPITALSENIORLIVING.NET	Anderson / Limited Liability CSL SUMMIT PLACE SC LLC CRC-1151 / 10/31/2017	89
Alzheimer Care:Yes Max # Resident:28	Alzheimer Unit: Yes Max # Beds: 32	
Certifications:None		
UPSTATE RESIDENTIAL CARE 1302 S MCDUFFIE ST ANDERSON, SC 29624-2745 FAC.#:864-225-6901 KELLER BOBBIE J PH#: 864-225-6901 Facility Email: HORACEALEXANDER@MYLASOUNDS.COM	Anderson / Sole Proprietorship PO BOX 14922 ANDERSON, SC 29624-0036 HORACE J ALEXANDER CRC-0233 / 08/31/2017	10
Alzheimer Care:Yes Max # Resident:1	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
VILLAGE COMMUNITY CARE HOME-UNIT A 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0563 / 01/31/2018	11
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
VILLAGE COMMUNITY CARE HOME-UNIT B 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0564 / 01/31/2018	11
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Anderson

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
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VILLAGE COMMUNITY CARE HOME-UNIT C 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0565 / 01/31/2018	11
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Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

VILLAGE COMMUNITY CARE HOME-UNIT D 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0566 / 01/31/2018	11
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Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Community Residential Care Facility
 Number of Activities/Facilities licensed: 17 Number Licensed Units: 707

County: Anderson

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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ANMED HEALTH HOME HEALTH AGENCY 1926 MCCONNELL SPRINGS RD ANDERSON, SC 29621-2642 FAC.#:864-512-6410 GETSINGER CHRISTI A PH#: 864-512-6410 Facility Email: CHRISTI.GETSINGER@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation PO BOX 195 ANDERSON, SC 29622-0195 ANMED HEALTH HHA-0068 / 02/28/2017	1
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Counties Served: Anderson

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:

GENTIVA HEALTH SERVICES-ANDERSON 1704 E GREENVILLE ST STE 2D ANDERSON, SC 29621-7914 FAC.#:864-932-4970 MERCK FREDA L PH#:	Anderson / 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC HHA-0001 / 12/31/2017	11
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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: REGISTERED NURSE

Totals For Facility/License Type: Home Health

Number of Activities/Facilities licensed: 2 Number Licensed Units: 12

County: Anderson

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CALLIE & JOHN RAINEY HOSPICE HOUSE 1835 ROGERS RD ANDERSON, SC 29621-2278 FAC.#:864-224-3358 MELBOURNE PAMELA S PH#: 864-224-3358 Facility Email: PMELBOURNE@HOSPICEHOUSE.NET	Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621-2278 HOSPICE OF THE UPSTATE INC HPF-0001 / 08/31/2017	32

Totals For Facility/License Type: <u>Hospice Facility</u>	
Number of Activities/Facilities licensed: _____ 1	Number Licensed Units: _____ 32

County: Anderson

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 OF THE UPSTATE 1835 ROGERS RD ANDERSON, SC 29621-2278 FAC.#:864-224-3358 MELBOURNE PAMELA S PH#: 864-224-3358 Facility Email: PMELBOURNE@HOSPICEHOUSE.NET	Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621-2278 HOSPICE OF THE UPSTATE INC HPC-0017 / 07/31/2017	5
Counties Served: Abbeville, Anderson, Greenville, Oconee, Pickens		
PROVIDENCE HOSPICE 202 WALL ST PIEDMONT, SC 29673-6754 FAC.#:864-295-8714 CARROLL KIERSTEN PH#: 864-295-8714 Facility Email: TKING@PROVIDENCECANHELP.COM	Anderson / Limited Liability PROVIDENCE HOSPICE LLC HPC-0157 / 11/30/2016 (Renewal Pending)	18
Counties Served: Anderson, Berkeley, Charleston, Cherokee, Chester, Colleton, Dorchester, Fairfield, Greenville, Kershaw, Lancaster, Laurens, Oconee, Orangeburg, Pickens, Spartanburg, Union, York		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 23

County: Anderson

Facility Type: Hospital or Institutional General Infirmery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ANMED HEALTH MEDICAL CENTER 800 N FANT ST ANDERSON, SC 29621-5793 FAC.#:864-512-1109 PH#:	Anderson / Non-Profit Corporation 800 N FANT ST ANDERSON, SC 29621-5793 ANMED HEALTH HTL-0044 / 11/30/2017	461
Facility Email: BILL.MANSON@ANMEDHEALTH.ORG		
Licensed Beds: General: 423 Psychiatric: 38 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Abortions, Trauma Center Level II, JCAHO Accredited

ANMED HEALTH REHABILITATION HOSPITAL 1 SPRING BACK WAY ANDERSON, SC 29621-2676 FAC.#:864-716-2600 SKRIPPS MICHELE M PH#: 864-716-2600	Anderson / Ltd. Liability 1 SPRING BACK WAY ANDERSON, SC 29621-2676 ANMED ENTERPRISES INC/HEALTHSOUTH LLC HTL-0838 / 12/31/2017	60
Facility Email: MICHELE.SKRIPPS@HEALTHSOUTH.COM		
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 60 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

ANMED HEALTH WOMEN'S AND CHILDREN'S HOSPITAL 2000 E GREENVILLE ST ANDERSON, SC 29621-1580 FAC.#:864-512-4801 MANSON WILLIAM T PH#: 864-512-4801	Anderson / Non-Profit Corporation 2000 E GREENVILLE ST, ANMED HEALTH CAMPUS ANDERSON, SC 29621-1580 ANMED HEALTH HTL-0896 / 06/30/2017	72
Facility Email: TINA.JURY@ANMEDHEALTH.ORG		
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 13		

Certifications:Abortions, Perinatal Level II, JCAHO Accredited

PATRICK B HARRIS PSYCHIATRIC HOSPITAL 130 HWY 252 ANDERSON, SC 29621-5054 FAC.#:864-231-2600 MCENIRY ALLEN PH#: 864-231-2600	Anderson / State PO BOX 2907 ANDERSON, SC 29622-2907 SC DEPARTMENT OF MENTAL HEALTH HTL-0503 / 11/30/2017	200
Facility Email: ALLEN.MCENIRY@SCDMH.ORG		
Licensed Beds: General: 0 Psychiatric: 200 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmery</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 793

County: Anderson

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
ASSURANCE HEALTHCARE SERVICES LLC 802 N MAIN ST ANDERSON, SC 29621-5525 FAC. #:864-642-4739 PH#: Facility Email: LASHERRIE_ASSURANCEHS@YAHOO.COM	Anderson / Limited Liability 802 N MAIN ST ANDERSON, SC 29621-5525 ASSURANCE HEALTHCARE SERVICES LLC IHCP-0512 / 03/31/2017	- 1
BEYOND CARE HOME CARE SERVICES LLC - HONEA PATH 512-A E GREER ST HONEA PATH, SC 29654 FAC. #:864-369-0222 PH#: Facility Email: BEYONDCAREHC@ATT.NET	Anderson / 512-A E GREER ST HONEA PATH, SC 29654 BEYOND CARE LLC IHCP-0107 / 04/30/2017	- 1
C 3 ELDERCARE 107 N MAIN ST ANDERSON, SC 29621 FAC. #:864-934-5600 PH#: Facility Email: JCAREYJONES@AOL.COM	Anderson / Corporation 107 N MAIN ST ANDERSON, SC 29621 C3 ELDERCARE A SUBSIDIARY OF CONSOLIDATED SOUTHERN INDUSTRIES IHCP-0214 / 07/31/2017	- 1
CARING HANDS HOME CARE OF THE UPSTATE INC 3466 CINEMA BLVD, STE A ANDERSON, SC 29621 FAC. #:864-224-6953 PH#: Facility Email: CHHC@CARINGHANDSHC.COM	Anderson / Corporation PO BOX 300 HONEA PATH, SC 29654 CARING HANDS HOME CARE OF THE UPSTATE INC IHCP-0210 / 06/30/2017	- 1
COMFORT KEEPERS - ANDERSON 402 E GREENVILLE ST ANDERSON, SC 29621-5536 FAC. #:864-760-1900 PH#: Facility Email: ANDERSON@COMFORTKEEPERS.COM	Anderson / Limited Liability 402 E GREENVILLE ST ANDERSON, SC 29621-5536 JOE AND MELISA LLC IHCP-0146 / 05/31/2017	- 1
CORPORATE CARE LLC-ANDERSON 1212 N MAIN ST ANDERSON, SC 29624 FAC. #:864-261-8488 PH#: Facility Email: CCOOLEY1@CORPORARE-SERVICESSC.COM	Anderson / Limited Liability PO BOX 16148 GREENVILLE, SC 29606-7148 CORPORATE CARE LLC IHCP-0277 / 08/31/2017	- 1
FAMILY CARE MANAGEMENT LLC 716 ANDERSON ST STE C BELTON, SC 29627-2148 FAC. #:864-392-1810 PH#: Facility Email: CRYSTAL@FAMILYCAREMANAGEMENT.ORG	Anderson / Limited Liability 716 ANDERSON ST STE C BELTON, SC 29627-2148 FAMILY CARE MANAGEMENT LLC IHCP-0506 / 06/30/2017	- 1
HOME BY CHOICE-FIRST UP INC 3466 CINEMA BLVD STE B ANDERSON, SC 29621 FAC. #:864-224-4907 PH#: Facility Email: HOMEBYCHOICE579@BELLSOUTH.NET	Anderson / Sole Proprietorship 3466 CINEMA BLVD ANDERSON, SC 29621 HOME BY CHOICE INC IHCP-0209 / 06/30/2017	- 1

County: Anderson

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
HOME INSTEAD SENIOR CARE - ANDERSON 716 E GREENVILLE ST ANDERSON, SC 29621-4837 FAC. #:864-642-6780 PH#: Facility Email: WMARSHBURN@HOMEINSTEAD.COM	Anderson / Corporation 716 E GREENVILLE ST ANDERSON, SC 29621-4837 UPSTATE TARHEELS INC IHCP-0043 / 01/31/2018	- 1
MAINSTREAM REHABILITATIVE SERVICES LLC 4124 CLEMSON BLVD STE 5 ANDERSON, SC 29621-1169 FAC. #:864-351-9434 SMITH CHAKA PH#: 864-351-9434 Facility Email: CHASMI9@AOL.COM	Anderson / Limited Liability 112 SENTINEL RDG BELTON, SC 29627 MAINSTREAM REHABILITATIVE SERVICES LLC IHCP-0255 / 11/30/2016 (Renewal Pending)	- 1
NO PLACE LIKE HOME OF SOUTH CAROLINA - ANDERSON 211 E CALHOUN ST ANDERSON, SC 29621-5542 FAC. #:864-224-3430 PH#: Facility Email: JLANE@MEDICAREGIVERS.COM	Anderson / Limited Liability 1172 OLD SALEM RD CONYERS, GA 30094-5944 NO PLACE LIKE HOME OF SOUTH CAROLINA LLC IHCP-0246 / 07/31/2017	- 1
RESCARE HOMECARE ANDERSON 1103 N FANT ST ANDERSON, SC 29621-2037 FAC. #:864-224-9121 PH#: Facility Email: BSKELLY@RESCARE.COM	Anderson / Corporation 1103 FANT ST ANDERSON, SC 29621 SOUTHERN HOME CARE SERVICES INC DBA RESCARE HOMECARE IHCP-0012 / 06/30/2017	- 1
SELECT ONE HEALTHCARE SOLUTIONS LLC 550 CROWTHER DR ANDERSON, SC 29621-6551 FAC. #:864-760-1433 PH#: Facility Email: LASHERRIE@SELECTONESTAFF.COM	Anderson / Limited Liability 550 CROWTHER DR ANDERSON, SC 29621-6551 SELECT ONE HEALTHCARE SOLUTIONS LLC IHCP-0330 / 09/30/2016 (Renewal Pending)	- 1
SENIOR SOLUTIONS - IN HOME CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC. #:864-225-3370 PH#: Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS IHCP-0444 / 09/30/2017	- 1
SENIORS HELPERS - ANDERSON 1214 N MAIN ST ANDERSON, SC 29621 FAC. #:864-844-9151 PH#: Facility Email: VRICKETTS@SENIORHELPERS.COM	Anderson / Limited Liability 2435 E NORTH ST # 165 GREENVILLE, SC 29615-1491 MARIE ANTHONY COMPANY LLC IHCP-0166 / 05/31/2017	- 1
UPSTATE HEALTHCARE SERVICES 212 E GREENVILLE ST ANDERSON, SC 29621-5509 FAC. #:864-209-8245 PH#: Facility Email: PENNELL@UHSSC.COM	Anderson / 212 E GREENVILLE ST ANDERSON, SC 29621-5509 UPSTATE MEDICAL STAFFING INC IHCP-0149 / 05/31/2017	- 1

County: Anderson

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
WELL CARE AT HOME LLC 1209-B N FANT ST STE A ANDERSON, SC 29621 FAC.#:864-540-8005 LEE CHASTITY PH#: 864-540-8005 Facility Email: WELLCARE_ATHOME@YAHOO.COM	Anderson / Limited Liability 1209-B N FANT ST STE A ANDERSON, SC 29621 WELL CARE AT HOME LLC IHCP-0329 / 12/31/2017	- 1

Totals For Facility/License Type: Inhome Care Provider

Number of Activities/Facilities licensed: 17 Number Licensed Units: - 17

County: Anderson

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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BROOKDALE ANDERSON 311 SIMPSON RD ANDERSON, SC 29621-2157 FAC.#:864-261-3875 JENKINS BRIAN PH#: 864-261-3875 Facility Email: BJENKINS1@BROOKDALE.COM	Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERICARE INC NCF-0872 / 12/31/2016 (Renewal Pending)	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

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

Certifications:None

ELLENBURG NURSING CENTER 611 E HAMPTON ST ANDERSON, SC 29624-2899 FAC.#:864-226-5054 ELLENBURG LYNDON W PH#: 864-226-5054 Facility Email: FUZZERONE@AOL.COM	Anderson / Corporation 611 E HAMPTON ST ANDERSON, SC 29624-2899 ELLENBURG NURSING CENTER INC NCF-0231 / 03/31/2017	181
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Licensed Beds: Nursing Home: 181 Institutional Nursing Home: 0

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

Certifications:None

IVA REHABILITATION AND HEALTHCARE CENTER 406 W BROAD ST IVA, SC 29655-1119 FAC.#:864-348-7433 FIELDS ANTHONY PH#: 864-224-3898 Facility Email: AFIELDS@ORIANNA.COM	Anderson / Limited Liability 406 W BROAD ST IVA, SC 29655-1119 IVA REHABILITATION AND HEALTHCARE CENTER LLC NCF-0904 / 11/30/2017	60
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Licensed Beds: Nursing Home: 60 Institutional Nursing Home: 0

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

Certifications:None

LINLEY PARK REHABILITATION AND HEALTHCARE CENTER 208 JAMES ST ANDERSON, SC 29625-2942 FAC.#:864-226-3427 HERITAGE CARLA PH#: 864-226-3427 Facility Email: CHERITAGE@ORIANNA.COM	Anderson / Limited Liability 208 JAMES ST ANDERSON, SC 29625-2942 LINLEY PARK REHABILITATION AND HEALTHCARE CENTER LLC NCF-0909 / 11/30/2017	88
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Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

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

Certifications:None

County: Anderson

Facility Type: Nursing Home

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

NHC HEALTHCARE ANDERSON	Anderson / Ltd. Liability	290
1501 E GBREENVILLE ST	PO BOX 1327	
ANDERSON, SC 29621 FAC.#:864-226-8356	ANDERSON, SC 29622-1327	
MOORHOUSE BRADLEY W PH#: 864-226-8356	NHC HEALTHCARE/ANDERSON LLC	
Facility Email: LPENA@NHCANDERSON.COM	NCF-0801 / 06/30/2017	

Licensed Beds: Nursing Home: 290 Institutional Nursing Home: 0

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

Certifications:None

RICHARD M CAMPBELL VETERANS NURSING HOME	Anderson / State	220
4605 BELTON HWY	4605 BELTON HWY	
ANDERSON, SC 29621-5045 FAC.#:864-261-6734	ANDERSON, SC 29621-5045	
EVATT RUSSELL PH#: 864-261-6734	SC DEPARTMENT OF MENTAL HEALTH	
Facility Email: Not on File	NCF-0549 / 02/28/2017	

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

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

Certifications:None

SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER	Anderson / Limited Liability	88
109 BENTZ RD	109 BENTZ RD	
PIEDMONT, SC 29673-1412 FAC.#:864-845-5177	PIEDMONT, SC 29673-1412	
FARTHING SHANNON PH#:	SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER LLC	
Facility Email: SFARTHING@ORIANNA.COM	NCF-0907 / 11/30/2017	

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

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

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>7</u>	Number Licensed Units: <u>971</u>

County: Anderson

Facility Type: PSAD Outpatient

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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ADULT DRUG COURT TREATMENT 100 S MAIN ST ANDERSON, SC 29624-1619 FAC.#:864-260-4042 BRANYON AMY PH#: 864-260-1027 Facility Email: NIKKI.LINDSEY@SOLICITOR10.ORG	Anderson / County PO BOX 8002 ANDERSON, SC 29622-8002 ANDERSON COUNTY 10TH CIRCUIT SOLICITOR'S OFFICE OTP-0099 / 01/31/2018	1
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Certifications:None

ANDERSON-OCONEE BEHAVIORAL HEALTH SERVICES 226 MCGEE RD ANDERSON, SC 29625-2104 FAC.#:864-260-4168 BECK RN KAREN B PH#: 864-260-4168 Facility Email: KARENBECK@AOBHS.ORG	Anderson / County 226 MCGEE RD ANDERSON, SC 29625-2104 ANDERSON-OCONEE BEHAVIORAL HEALTH SERVICES-BOARD OTP-0030 / 09/30/2017	2
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Certifications:None

SOUTHWEST CAROLINA TREATMENT CENTER 341 W BELTLINE BLVD ANDERSON, SC 29625-1505 FAC.#:864-222-9798 WHITMIRE PAM PH#: 864-222-9798 Facility Email: JOY.BAILLEY@CAROLINATREATCENTERS.COM	Anderson / Limited Liability 1200 WOODRUFF RD STE A3 GREENVILLE, SC 29607-5732 SOUTHWEST CAROLINA TREATMENT CENTER LLC OTPN-0049 / 02/28/2018	1
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Certifications:Narcotics Treatment Program, Methodone Treatment Program

Totals For Facility/License Type: <u>PSAD Outpatient</u>	
Number of Activities/Facilities licensed: _____ 3	Number Licensed Units: _____ 4

County: Anderson

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
FRESENIUS MEDICAL CARE ANDERSON DIALYSIS CLINIC 416 E CALHOUN ST STE A ANDERSON, SC 29621-5852 FAC.#:864-224-1678 WADSWORTH AMANDA MARLENE PH#: 864-224-1678 Facility Email: AMANDA.WADSWORTH@FMC-NA.COM	Anderson / Limited Liability 416 E CALHOUN ST STE A ANDERSON, SC 29621-5852 FRESENIUS MEDICAL CARE ANDERSON LLC ERD-0105 / 07/31/2017	48
Licensed Stations: Hemodialysis: 47 Peritoneal: 1		
FRESENIUS MEDICAL CARE BELTON-HONEA PATH 200 CHURCH ST HONEA PATH, SC 29654-2213 FAC.#:864-369-6509 LINDLEY SHARON PH#: 864-369-6509 Facility Email: SHARON.LINDLEY@FMC-NA.COM	Anderson / Corporation 200 CHURCH ST HONEA PATH, SC 29654-2213 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0146 / 05/31/2017	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		
FRESENIUS MEDICAL CARE NORTH ANDERSON 2021 CARDINAL CIR ANDERSON, SC 29621-1503 FAC.#:864-224-0024 PORTER BRITTANY PH#: 864-224-0024 Facility Email: BRITTANY.PORTER@FMC-NA.COM	Anderson / Limited Liability 2021 CARDINAL CIR ANDERSON, SC 29621-1503 FRESENIUS MEDICAL CARE ANDERSON LLC ERD-0217 / 02/28/2017	25
Licensed Stations: Hemodialysis: 21 Peritoneal: 2		
FRESENIUS MEDICAL CARE PENDLETON 908 S MECHANIC ST PENDLETON, SC 29670-1815 FAC.#:864-646-6607 BARNETT DEBORAH PH#: 864-646-6607 Facility Email: DEBORAH.BARNETT@FMC-NA.COM	Anderson / Corporation 908 S MECHANIC ST PENDLETON, SC 29670-1815 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0145 / 12/31/2017	11
Licensed Stations: Hemodialysis: 11 Peritoneal: 0		
PENDLETON DIALYSIS 7703 HWY 76 PENDLETON, SC 29670-1818 FAC.#:864-646-7715 BOWSER DEBRA L PH#: 864-227-6011 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Anderson / Limited Liability Limited 5200 VINCENNA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 RENAL TREATMENT CENTERS-SOUTHEAST LP ERD-0143 / 10/31/2017	10
Licensed Stations: Hemodialysis: 10 Peritoneal: 0		

Totals For Facility/License Type: <u>Renal Dialysis</u>	
Number of Activities/Facilities licensed: <u>5</u>	Number Licensed Units: <u>111</u>

County: Anderson

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AGGRESSIVE INK 3 407 HWY 28 BYP STE C ANDERSON, SC 29624-3044 FAC.#:864-226-3793 RICKETTS STEVE G PH#: 864-940-6552 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 407 HWY 28 BYP STE C ANDERSON, SC 29624-3044 RICKETTS STEVE G TF-0073 / 06/30/2017	3
AGGRESSIVE INK II 324 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3824 FAC.#:864-231-9257 RICKETTS STEVE G PH#: 864-231-9257 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 324 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3824 RICKETTS STEVE G TF-0031 / 12/31/2016 (Renewal Pending)	2
ARTISTIC INK 99 WELPINE RD PENDLETON, SC 29670-9606 FAC.#:864-226-1703 BROWN TIMOTHY D PH#: 843-312-7831 Facility Email: TERRYROWLAND777@YAHOO.COM	Anderson / Sole Proprietorship BROWN TIMOTHY D TF-0059 / 10/31/2017	4
BLVD TATTOO CO 3704 LIBERTY HWY ANDERSON, SC 29621-1309 FAC.#:864-224-7922 CHARPING STEVEN J PH#: 864-224-7922 Facility Email: BLVDTATTOOCO@YAHOO.COM	Anderson / Sole Proprietorship 3704 LIBERTY HWY ANDERSON, SC 29621-1309 CHARPING STEVEN J TF-0111 / 11/30/2016 (Renewal Pending)	5
CHERRY BOMB TATTOO 3 7202 HWY 76 STE C PENDLETON, SC 29670-9158 FAC.#:864-654-8282 ROACH JONATHAN PH#: 864-973-1994 Facility Email: CHERRYBOMBSTATTOOS@YAHOO.COM	Anderson / Sole Proprietorship 7202 HWY 76 STE C PENDLETON, SC 29670-9158 ROACH JONATHAN AND ROACH WENDY TF-0262 / 10/31/2017	3
HAZZARD LINE TATTOO 1804 HWY 86 PIEDMONT, SC 29673 FAC.#:864-845-1700 PH#: Facility Email: HAZZARDLINE@GMAIL.COM	Anderson / Sole Proprietorship 1804 HWY 86 PIEDMONT, SC 29673 BRANDY DUNCAN TF-0279 / 08/31/2017	1
HONKY TONK TATTOO 121 VW CT ANDERSON, SC 29624-3000 FAC.#:864-328-9018 FILIPOVIC MICHAEL W PH#: 864-353-7400 Facility Email: HONKYTONK08@YAHOO.COM	Anderson / Sole Proprietorship 121 VW CT ANDERSON, SC 29624-3000 FILIPOVIC MICHAEL W TF-0084 / 11/30/2016 (Renewal Pending)	2
PAINTED PONY TATTOO-ANDERSON 734 WHITEHALL RD ANDERSON, SC 29625-2264 FAC.#:864-226-2500 BRANDT KAREN L PH#: 864-226-2500 Facility Email: PAINTEDPONYTATTOO@YAHOO.COM	Anderson / Sole Proprietorship BRANDT KAREN AND PRUITT THOMAS TF-0034 / 02/28/2018	5

County: Anderson

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
RELENTLESS TATTOO LLC 34 HALTER DR PIEDMONT, SC 29673-6741 FAC.#:864-295-2237 BARNES JR REX C PH#: 864-295-2237 Facility Email: REXALL127@YAHOO.COM	Anderson / Limited Liability 34 HALTER DR PIEDMONT, SC 29673-6741 RELENTLESS TATTOO LLC TF-0120 / 04/30/2017	5
SIREN'S COVE TATTOO 3121-A HWY 153 PIEDMONT, SC 29673-7722 FAC.#:864-283-6900 ROBERSON ALYSIA PH#: 864-283-6900 Facility Email: ALYSIA_ROBERSON@YAHOO.COM	Anderson / Sole Proprietorship 13D EDGEWOOD DR WILLIAMSTON, SC 29697 ALYSIA ROBERSON TF-0183 / 07/31/2017	3
STUDIO 22 100 ELECTRIC CITY BLVD STE 50 ANDERSON, SC 29621-2306 FAC.#:864-437-8161 WILSON TODD EVAN PH#: 864-940-9034 Facility Email: TODDSTUDIO22@GMAIL.COM	Anderson / Sole Proprietorship 100 ELECTRIC CITY BLVD STE 50 ANDERSON, SC 29621-2306 WILSON TODD EVAN TF-0165 / 01/31/2017 (Renewal Pending)	3
VANGUARD STUDIO 4365 HWY 24 STE A ANDERSON, SC 29626 FAC.#:864-993-8924 ALEWINE LISA MARIE PH#: 864-993-8924 Facility Email: LISAMARIE8924@GMAIL.COM	Anderson / Limited Liability 1866 BELL RD IVA, SC 29655 VANGUARD STUDIOS LLC TF-0272 / 06/30/2017	4

Totals For Facility/License Type: <u>Tattoo Facility</u>	
Number of Activities/Facilities licensed: <u>12</u>	Number Licensed Units: <u>40</u>

Number of Activities/Facilities licensed in county of : <u>Anderson</u>	# Lics: <u>79</u>
	Number Licensed Units : <u>2,808</u>

Report Totals

Total Number of Activities/Facilities licensed: 79 Total Number Licensed Units: 2,808