Missouri Long Term Care Facilities Directory

ADAIR

ARBORS AT HIGHLAND CREST -	ALZHEIMERS ASSISTED LIV	ING BY AMERICARE, THE		
620 GILASPY ROAD		Telephone (660) 627-8004	Alzheimer's Unit	Ye
KIRKSVILLE	MO 63501-4678	Level of Care ALF**	Bed Capacity	28
Mailing Address 620 GILASPY RD		County ADAIR	DMH Licensed	No
KIRKSVILLE	MO 63501-4678	Region 5	Facility Number	23608
HIGHLAND CREST - ASSISTED L	IVING BY AMERICARE			
2204 S HALLIBURTON ST		Telephone (660) 627-8004	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-4651	Level of Care ALF**	Bed Capacity	42
Mailing Address 2204 S HALLIBURT	FON ST	County ADAIR	DMH Licensed	N
KIRKSVILLE	MO 63501-4651	Region 5	Facility Number	1678:
KIRKSVILLE MANOR CARE CEN	TER			
1705 EAST LAHARPE		Telephone (660) 665-3774	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-3927	Level of Care SNF	Bed Capacity	13
Mailing Address 1705 EAST LAHAR	PE	County ADAIR	DMH Licensed	Ν
KIRKSVILLE	MO 63501-3927	Region 5 Medicare/Medicaid	Facility Number	0416
PREFERRED FAMILY HEALTHC	ARE, INC			
900 EAST LAHARPE		Telephone (660) 665-1962	Alzheimer's Unit	N
KIRKSVILLE	MO 63501-4520	Level of Care RCF*	Bed Capacity	5
Mailing Address PO BOX 767		County ADAIR	DMH Licensed	Ye
KIRKSVILLE	MO 63501-0767	Region 5	Facility Number	2185
TWIN PINES ADULT CARE CENT	ER			
1900 S JAMISON		Telephone (660) 665-2887	Alzheimer's Unit	Ye
KIRKSVILLE	MO 63501-5302	Level of Care SNF	Bed Capacity	12
Mailing Address 1900 S JAMISON		County ADAIR	DMH Licensed	N
KIRKSVILLE	MO 63501-5302	Region 5 Medicare/Medicaid	Facility Number	08218
		ANDREW		
ANEW HEALTHCARE SAVANNAI	H	Telephone (216) 224 5001	Alzheimen's Unit	Va
13277 STATE ROUTE D	MO 64495 0421	Telephone (816) 324-5991	Alzheimer's Unit	Ye 8
SAVANNAH	MO 64485-9431	Level of Care SNF	Bed Capacity DMH Licensed	
Mailing Address 13277 STATE ROU'		County ANDREW	Facility Number	N
SAVANNAH	MO 64485-9431	Region 4 Medicare/Medicaid	Facinity Number	0714
LAVERNA MANOR HEALTH & R	EHABILITATION	Telephone (016) 224 2195	Algheimen's Unit	Va
904 SOUTH HALL AVE	MO 64495 1052	Telephone (816) 324-3185 Level of Core SNE	Alzheimer's Unit	Ye
SAVANNAH	MO 64485-1952	Level of Care SNF	Bed Capacity	12 N
Mailing Address 904 SOUTH HALL		County ANDREW	DMH Licensed	N 0447
SAVANNAH	MO 64485-1952	Region 4 Medicare/Medicaid	Facility Number	0447

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

ATCHISON

PLEASANT VIEW NURSING HOME

470 RAINBOW DR		
ROCK PORT	MO	64482-1641
Mailing Address PO BOX 273		
ROCK PORT	MO	64482-0273

Telephone	(660) 744-6252	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	60
County AT	CHISON	DMH Licensed	No
Region 4 M	Medicare/Medicaid	Facility Number	06041

TARKIO REHABILITATION & HEALTH CARE 200 CEDAD ST

300 CEDAR ST		Telephone ((660) 736-4116	Alzheimer's Unit	No
TARKIO	MO 64491-1174	Level of Care S	SNF	Bed Capacity	95
Mailing Address 300 CEDAR ST		County ATCH	HISON	DMH Licensed	No
TARKIO	MO 64491-1174	Region 4 Me	edicare/Medicaid	Facility Number	00494

AUDRAIN

1700 ASBURY CIRCLE WEST		Telephone (573) 581-8777	Alzheimer's Unit	Ye
MEXICO	MO 65265-1400	Level of Care ALF**	Bed Capacity	39
Mailing Address 1722 HUNTINGF	IELD DR	County AUDRAIN	DMH Licensed	Ne
MEXICO	MO 65265-3808	Region 5	Facility Number	13544
BAPTIST HOMES, TRI-COUNTY	č			
601 NORTH GALLOWAY RD		Telephone (573) 594-6467	Alzheimer's Unit	No
VANDALIA	MO 63382-1252	Level of Care RCF	Bed Capacity	20
Mailing Address 601 NORTH GAL	LOWAY RD	County AUDRAIN	DMH Licensed	Ne
VANDALIA	MO 63382-1252	Region 5	Facility Number	08096
BAPTIST HOMES, TRI-COUNTY	č			
601 NORTH GALLOWAY RD		Telephone (573) 594-6467	Alzheimer's Unit	YES
VANDALIA	MO 63382-1252	Level of Care SNF	Bed Capacity	90
Mailing Address 601 NORTH GAL	LOWAY RD	County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5 Medicare/Medicaid	Facility Number	08096
ESSEX OF MEXICO, THE				
1109 OLD FARM RD WEST		Telephone (573) 581-5223	Alzheimer's Unit	No
MEXICO	MO 65265-3250	Level of Care RCF	Bed Capacity	12
Mailing Address 1109 OLD FARM	RD WEST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-3250	Region 5	Facility Number	24425
KING'S DAUGHTERS HOME, TI	HE			
620 WEST BOULEVARD ST		Telephone (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care RCF*	Bed Capacity	12
Mailing Address 620 WEST BOUL	EVARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
KING'S DAUGHTERS HOME, TI	HE			
620 WEST BOULEVARD ST		Telephone (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care ICF	Bed Capacity	30
Mailing Address 620 WEST BOUL	EVARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

PIN OAKS LIVING CENTER			
1525 WEST MONROE ST	Telephone (573) 581-7261	Alzheimer's Unit	No
MEXICO MO 65265-1201	Level of Care SNF	Bed Capacity	124
Mailing Address 1525 WEST MONROE ST	County AUDRAIN	DMH Licensed	No
MEXICO MO 65265-1201	Region 5 Medicare/Medicaid	Facility Number	05804
	Region 5 Medical environtatu	Tuchty Rumber	05004
SOUTHSIDE TOWNE HOUSE			
510 SOUTH WASHINGTON	Telephone (573) 581-3203	Alzheimer's Unit	No
MEXICO MO 65265-2786	Level of Care RCF*	Bed Capacity	12
Mailing Address PO BOX 6	County AUDRAIN	DMH Licensed	Yes
MEXICO MO 65265-0006	Region 5	Facility Number	16987
TEAL LAKE - ASSISTED LIVING BY AMERICARE			
1722 HUNTINGFIELD DR	Telephone (573) 582-7800	Alzheimer's Unit	No
MEXICO MO 65265-3808	Level of Care ALF**	Bed Capacity	42
Mailing Address 1722 HUNTINGFIELD DR	County AUDRAIN	DMH Licensed	No
MEXICO MO 65265-3808	Region 5	Facility Number	23534
TOWNE HOUSE, THE			
221 EAST WHITLEY	Telephone (573) 581-2547	Alzheimer's Unit	No
MEXICO MO 65265-2815	Level of Care RCF*	Bed Capacity	29
Mailing Address PO BOX 6	County AUDRAIN	DMH Licensed	Yes
MEXICO MO 65265-0006	Region 5	Facility Number	08077
	BARRY		
	DARKI		
CASSVILLE HEALTH CENTER FOR REHAB AND HEALTHCAR	E		N
1300 COUNTY FARM RD	Telephone (417) 847-3386	Alzheimer's Unit	No
1300 COUNTY FARM RD CASSVILLE MO 65625-1726	E Telephone (417) 847-3386 Level of Care SNF	Bed Capacity	60
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD	E Telephone (417) 847-3386 Level of Care SNF County BARRY	Bed Capacity DMH Licensed	60 No
1300 COUNTY FARM RD CASSVILLE MO 65625-1726	E Telephone (417) 847-3386 Level of Care SNF	Bed Capacity	60
1300 COUNTY FARM RDCASSVILLEMO65625-1726Mailing Address1300 COUNTY FARM RDCASSVILLEMO65625-1726	E Telephone (417) 847-3386 Level of Care SNF County BARRY	Bed Capacity DMH Licensed	60 No
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC	RE Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	60 No 01097
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE	E Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	60 No 01097 No
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RU CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 01097 No 30
 1300 COUNTY FARM RD CASSVILLE M0 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE M0 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE M0 65625-1755 Mailing Address PO BOX 633 	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RU CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 01097 No 30
 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes
1300 COUNTY FARM RDCASSVILLEMO65625-1726Mailing Address 1300 COUNTY FARM RDKOCASSVILLEMO65625-1726CEDAR RIDGE CARE CENTER, LLCT1 SYCAMORECASSVILLEMO65625-1755Mailing Address PO BOX 633KO65625-0633CASSVILLEMO65625-0633	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 CASSVILLE MO 65625-0633	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region ¹	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 01097 No 30 Yes 15295
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 CASSVILLE MO 65625-0633 CASSVILLE MO 65625-0633	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region ¹ Telephone (417) 235-4040 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 01097 No 30 Yes 15295 No
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 CASSVILLE MO 65625-0633	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes 15295 No 33 Yes
1300 COUNTY FARM RDCASSVILLEMO65625-1726Mailing Address 1300 COUNTY FARM RDCASSVILLEMO65625-1726CEDAR RIDGE CARE CENTER, LLC71 SYCAMORECASSVILLEMO65625-1755Mailing Address PO BOX 633CASSVILLEMO65625-0633COUNTRYSIDE CARE CENTER, LLC385 SOUTH EISENHOWERMONETTMO65708-8266Mailing Address PO BOX 434	Telephone (417) 847-3386 Level of Care SNF County BARRY Region ¹ Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region ¹ Telephone (417) 235-4040 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 01097 No 30 Yes 15295 No 33
1300 COUNTY FARM RDCASSVILLEMO65625-1726Mailing Address 1300 COUNTY FARM RDCASSVILLEMO65625-1726CEDAR RIDGE CARE CENTER, LLC71 SYCAMORECASSVILLEMO65625-1755Mailing Address PO BOX 633CASSVILLEMO65625-0633COUNTRYSIDE CARE CENTER, LLC385 SOUTH EISENHOWERMONETTMO65708-8266Mailing Address PO BOX 434	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes 15295 No 33 Yes
1300 COUNTY FARM RDCASSVILLEM065625-1726Mailing Address 1300 COUNTY FARM KDKCASSVILLEM065625-1726CEDAR RIDGE CARE CENTER, LLC71 SYCAMORECASSVILLEM065625-1755Mailing Address PO BOX 633KCASSVILLEM065625-0633CASSVILLEM065625-0633CASSVILLEM065625-0633COUNTRYSIDE CARE CENTER, LLCS185 SOUTH EISENHOWERM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0MONETTM0	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 01097 No 30 Yes 15295 No 33 Yes
1300 COUNTY FARM RDCASSVILLEM065625-1726Mailing Address 1300 COUNTY FARM RDCASSVILLEM065625-1726CASSVILLEM065625-172671 SYCAMORECASSVILLEM065625-175565 SOUTHECASSVILLEM065625-175565 SOUTHECOUNTRYSIDE CARE CENTER, LLCM065625-0633COUNTRYSIDE CARE CENTER, LLC385 SOUTH EISENHOWERM0MONETTM065708-8266Mailing Address PO BOX 434M065708-0434MONETTM065708-0434MONETTM065708-0434MONETTM065708-0434	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY Region 1	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 01097 No 30 Yes 15295 No 33 Yes 12737
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 CASSVILLE MO 65625-0633 CASSVILLE MO 65625-0633 CASSVILLE MO 65708-8266 Mailing Address PO BOX 434 MONETT MO 65708-8266 Mailing Address PO BOX 434 MONETT MO 65708-0434	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-7895	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 01097 No 30 Yes 15295 No 33 Yes 12737
1300 COUNTY FARM RD CASSVILLE MO 65625-1726 Mailing Address 1300 COUNTY FARM RD CASSVILLE MO 65625-1726 CEDAR RIDGE CARE CENTER, LLC 71 SYCAMORE CASSVILLE MO 65625-1755 Mailing Address PO BOX 633 CASSVILLE MO 65625-0633 CASSVILLE MO 65708-8266 Mailing Address PO BOX 434 MONETT MO 65708-8266 Mailing Address PO BOX 434 MONETT MO 65708-0434	Telephone (417) 847-3386 Level of Care SNF County BARRY Region 1 Medicare/Medicaid Telephone (417) 847-5546 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-4040 Level of Care RCF* County BARRY Region 1 Telephone (417) 235-7895 Level of Care SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 01097 No 30 Yes 15295 No 33 Yes 12737 No 79

105 Titley Address Non-Stription	LEISURE LIVING			
MORETT MO 63708-2312 Level of Care RCF Bef Capacity 20 MORETT MO 63708-2312 Region 1 MILLones of MILLONE VES MORETT MO 65708-2312 Region 1 MILLONE Facility Number 18227 ROARING: RIVER HEALTH AND REHABILITATION R12 OLD EXCITER RD CASSULLE MO 65525-1704 Level of Care SNN Bef Capacity 20 Malling Address 812 OLD EXETUR RD CASSULLE NO 65525-1704 Region 1 Medicare/Medicaid Pacifity Number 10644 No 65525-1704 RD Caunty BARRY DMH Leensed No CASSULLE NO 65525-1704 RD Caunty BARRY DMH Leensed No Caunty BARRY DM 64759-2303 Caunty BARRY DMH Leensed No LAMAR MIS NO 64759-2303 Caunty BARRY DMH Leensed No LAMAR NO 64759-2303 Region 1 MILLONE NO LAMAR NO 64759-2303 Region 1 PEACHNY BARTON DMH Leensed No LAMAR NO 64759-2303 Region 1 PEACHNY BARTON DMH Leensed No LAMAR NO 64759-2303 Region 1 PEACHNY BARTON DMH Leensed No LAMAR NO 64759-2303 Region 1 PEACHNY BARTON DMH Leensed No LAMAR NO 64759-2303 Region 1 PEACHNY BARTON DMH 20869 LAMAR NO 64759-2313 Region 1 PEACHNY BARTON DMH 20869 LAMAR NO 64759-2313 Region 1 PEACHNY BARTON DMH 20869 LAMAR NO 64759-2313 Region 1 PEACHNY BARTON DMH 20869 LAMAR NO 64759-1291 Region 1 Medicard Redicid Region 1 PEACHNY BARTON DMH 20869 LAMAR NO 64759-1291 Region 1 Medicard Redicid Region 10366 EXTENT DOMES OF ADRIAN Malling Address 402 WIST FIRST FLANE LAMAR NO 64720-277 Region 3 PEACHNY BARTON DMH 20803 MAININ AM 64720-9277 Region 3 PEACHNY BARTON DMH 20803 MAININ NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 MAININ AM 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BARTON DMH 20803 PEACHNY BARTON NO 64720-9277 Region 3 PEACHNY BEACHNY BARTON D		Telephone (417) 235-5959	Alzheimer's Unit	No
MONETT MO. 65708-2312 Regin 1 Facility Number 18227 ROARING RIVER HEALTH AND REHABILITATION R12 OLD EXETER RD CASSVILLE MO. 65625-1704 Telephone (417) 947-2184 Atheimer's Unit Yes. CASSVILLE MO. 65625-1704 Caret of Care SNF Ded Capacity Yes. CASSVILLE MO. 65625-1704 Region 1 Medicare/Medicaid No DMH Lecende No BARTON BARRY DMH I Lecende No Facility Number No No GASSVILLE MO. 64759-2303 Telephone (417) 682-6762 Atheimer's Unit No LAMAR MO. 64759-2303 Level of Care RCF Bed Capacity No LAMAR MO. 64759-2303 Region 1 Pacility Number 18951 MAPLE SENIOR LIVING LLC SOUTHWEST FIRST LANE Telephone (417) 682-5718 Atheimer's Unit No LAMAR MO. 64759-8313 Level of Care RCF Bed Capacity No LAMAR MO. 64759-8313 Level of Care RCF Bed Capacity No LAMAR MO. 64759-8313 Level of Care RCF Bed Capacity No LAMAR MO. 64759-1291 Level of Care SNF Bed Capacity <td></td> <td></td> <td></td> <td></td>				
MONETT MO 63708-2312 Regin 1 Facility Number 18227 ROARING RIVER HEALTI AND REHABILITATION 812 OLD EXETER RD CASSVILLE MO 65625-1704 Telephone (417) 947-2184 Atheimer's Unit Yes Yes RASSVILLE MO 65625-1704 Telephone (417) 647-2184 Atheimer's Unit Pacifity Number Yes CASSVILLE MO 65625-1704 Region 1 Medicare/Medicaid Facility Number 10644 DMH Lecessed NO 65625-1704 Telephone (417) 682-6762 Atheimer's Unit No No Level of Care RCF Bed Capacity No AMAR MO 64759-2303 Level of Care RCF Bed Capacity No Atheimer's Unit No AMAR MO 64759-2303 Region 1 Pacility Number 18951 MAPLE SENOR LIVING LLC SUUTHWERT FIRST LANE Telephone (417) 682-6718 Atheimer's Unit No LAMAR MO 64759-8313 Level of Care RCF Bed Capacity No Atheimer's Unit No Atheimer's Unit No LAMAR MO 64759-1291 Level of Care SNF LAMAR MO 64759-1291 Level of Care	Mailing Address 305 5TH ST	County BARRY		Yes
NAME REPORTER RD Telephone (417) 847-2184 Atheimer's Unit Yes CASSVILLE MO 656251704 Level of Care SNF Bed Capacity 90 Consy BARRY BARTON BARTON BARTON Facility Number 10644 DEPENDENCE (117) 682-6762 Atheimer's Unit No County BARRY BARTON BARTON BARTON County BARRY No Atheimer's Unit No County BARRY Dott Iterestee DATA MON OF LAMAR OS EAST 1771 ST Telephone (417) 682-6762 Atheimer's Unit No LAMAR MO 64759-2303 Regton 1 Facility Number 18951 MATHELE EXENOR LIVINC LLC SOUTHWEST IRST LANE Telephone (417) 682-6718 Atheimer's Unit No LAMAR MO 64759-8313 County BARTON DMIL Lecosed No LAMAR MO 64759-1291 Telephone (417) 682-5718 Athein	-	Region 1	Facility Number	18227
S12 OLD EXETER RD M0 65625-1704 Telephone (417) 847-2184 Abdeimer's Unit Yes CASSVILLE M0 65625-1704 Region I BARRY DMI Licemed NO CASSVILE M0 65625-1704 Region I Medicare/Medicaid Facility Number 10644 Interest Care SNF Bed Capacity 90 DMI Licemed NO County BARRY DMI Licemed NO DMI Store Soft Care RCF Bed Capacity 12 County BARRON DMI Licemed NO LAMAR M0 64759-2303 Region 1 Facility Number 18531 Adding Address 603 LAST 17TH ST LAMAR M0 64759-2303 Region 1 Facility Number 18531 Address 603 LAST 17TH ST County BARTON DMIH Licemed NO LAMAR M0 64759-2303 Region 1 Facility Number 20869 County BARTON DMIH Licemed NO LAMAR M0 64759-8313 Region 1 Facility Number 20869 County BARTON			·	
CASSVILJE MO 65625-1704 Level of Care SNF Bed Capacity 90 Multing Address 812 OLD EXETER RD CASSVILJE MO 65625-1704 Region 1 Medicare/Medicaid Facility Number 10644 ASSVILJE MO 65625-1704 Region 1 Medicare/Medicaid Facility Number 10644 BARRY Modelsare/Medicaid Facility Number 10644 BARRY Modelsare/Medicaid Facility Number 10644 BARRY Modelsare/Medicaid Facility Number 10644 Modelsare/Medicaid Facility Number 10644 Modelsare/Medicaid Facility Number 10644 Modelsare/Medicaid Facility Number 10852-6762 Address 603 EAST 171H ST LAMAR MO 64759-2303 Level of Care RCF Bed Capacity 12 County BARRON BOHL Number 18951 MAPLE SENIOR LIVING LLC 35 OUTHWEST FIRST LANE MO 64759-8313 County BARRON BOHL Number 18951 MARKA MO 64759-8313 Cevel of Care RCF ¹⁶ Bed Capacity 56 LAMAR MO 64759-8313 Cevel of Care RCF ¹⁶ Bed Capacity 56 LAMAR MO 64759-8313 Cevel of Care RCF ¹⁶ Bed Capacity 56 LAMAR MO 64759-8313 Cevel of Care RCF ¹⁶ Bed Capacity 12 County BARRON DOHL Level 0 No Halting Address 206 WEST FIRST LANE MO 64759-1291 County BARRON DOHL Level 0 No LAMAR MO 64759-1291 County BARRON DOHL Level 120 County BARES EXECUTED TO DOHL Level 120 County BARES DOHL 120 County BARES	ROARING RIVER HEALTH AND REHABILITATION			
Mailing Address 812 OLD FXFTER RD County BARRY DMIL Lecond No. CASSVILLE MO 65625-1704 Region 1 Medicare/Medicaid Facility Number 10644 Image: County BARRY DMIL Lecond No. BARTON BARTON BRISTOL MANOR OF LAMAR No. 64759-2303 Telephone (417) 682-6762 Abheimer's Unit No. Advised for the second of the second	812 OLD EXETER RD	Telephone (417) 847-2184	Alzheimer's Unit	Yes
CASSVILLE MO 6525-1704 Regin 1 Medicare/Medical Facility Number 10644 BARTON BRISTOL MANOR OF LAMAR GOI EAST 17TH 5T LAMAR MO 64759-2303 Level of Care RCF Bed Capacity 12 County BARTON DAMAR MO 64759-2303 Regin 1 Particle Senior Living LLCessed MO 64759-2303 Regin 1 Particle Senior Living LLCessed No 64759-2303 Regin 1 Particle Senior Living LLCessed No 64759-2303 Regin 1 Particle Senior Living LLC SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Level of Care RCF* DM Levensed No 64759-8313 Level of Care SNF* DM Levensed No 64759-1291 Levensed No 64750-2277 Levensed No 64720-9277 Levense No 64720-9277 Levense No 64720-9277 Regin 3 Reg	CASSVILLE MO 65625-1704	Level of Care SNF	Bed Capacity	90
BARTON BARTON BARTON BARTON BARTON Maling Address 603 EAST 17TH ST County BARTON DMIL Licensed No Lawar MARR Mo 64759-2303 Region 1 BARTON DMIL Licensed No LAWAR MO 64759-2303 Region 1 DMIL Licensed 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Level of Care REGIONE LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Level of Care Region 1 Pacifity Number DMIL Licensed NO Address 40 64759-1291 Level of Care REGE DMIL Licensed No Lawar Mailing Address 40	Mailing Address 812 OLD EXETER RD	County BARRY	DMH Licensed	No
RISTOL MANOR OF LAMAR 603 EAST 17TH ST LAMAR M0 64759-2303 LAMAR M0 64759-2303 LAMAR M0 64759-2303 LAMAR M0 64759-2303 Region 1 MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR M0 64759-8313 Mailing Address 40 MC 64759-8313 County BARTON MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR M0 64759-8313 Region 1 Telephone (417) 682-6184 Alzheimer's Unit No BARTON DHI Licensed No Pacility Number 20809 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR M0 64759-1291 Region 1 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR M0 64759-1291 Region 1 Region 1 Medicare/Medicaid Facility Number 20809 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR M0 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 No Region 3 Region 4 Region 3 Regi	CASSVILLE MO 65625-1704	Region 1 Medicare/Medicaid	Facility Number	10644
RISTOL MANOR OF LAMAR 603 EAST 17TH ST LAMAR M0 64759-2303 LAMAR M0 64759-2303 LAMAR M0 64759-2303 LAMAR M0 64759-2303 Region 1 MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR M0 64759-8313 Mailing Address 40 MC 64759-8313 County BARTON MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR M0 64759-8313 Region 1 Telephone (417) 682-6184 Alzheimer's Unit No BARTON DHI Licensed No Pacility Number 20809 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR M0 64759-1291 Region 1 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR M0 64759-1291 Region 1 Region 1 Medicare/Medicaid Facility Number 20809 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR M0 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 No Region 3 Region 4 Region 3 Regi				
603 EAST 17TH ST M0 64759-2303 Telephone (417) 682-6762 Abbeimer's Unit No LAMAR M0 64759-2303 Level of Care RCF Bed Capacity 12 Malling Address 603 EAST 17TH ST M0 64759-2303 Region 1 Facility Number 18951 MAR M0 64759-2303 Region 1 Abbeimer's Unit No MAR M0 64759-8313 Telephone (417) 682-6184 Abbeimer's Unit No LAMAR M0 64759-8313 Level of Care RCF* Bed Capacity 56 Malling Address 3 SOUTHWEST FIRST LANE County BARTON DHI Lecesde No LAMAR M0 64759-8313 Level of Care SNF Bed Capacity 20809 TRUMAN HEALTHCARE & REHABILITATION CENTER County BARTON DHI Lecesde No LAMAR M0 64759-1291 Level of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET M0 64720-9277 Level of Care SNF Bed Capacity 38 Maling Address 402 WEST IST STREET M0 64720-9277	BAI	RTON		
LAMAR M0 64759-2303 Level of Care RCF Bed Capacity 12 Mailing Address 603 EAST 17TH ST M0 64759-2303 Region 1 PARTON DMH Licensed N0 LAMAR M0 64759-2303 Region 1 Particle Care RCF Bed Capacity 56 MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE Level of Care RCF* DMH Licensed N0 LAMAR M0 64759-8313 Region 1 Particle Care RCF* DMH Licensed N0 LAMAR M0 64759-8313 Region 1 Particle Care RCF* DMH Licensed N0 LAMAR M0 64759-8313 Region 1 Particle Care RCF* DMH Licensed N0 LAMAR M0 64759-1291 County BARTON DMH Licensed N0 Hailing Address 206 WEST FIRST ST LANE County BARTON DMH Licensed N0 LAMAR M0 64759-1291 County BARTON DMH Licensed N0 LAMAR M0 64759-1291 County BARTON DMH Licensed N0 BATES DMH Licensed N0 AMAR M0 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BARTON Region 3 Particle N0 ADRIAN M0 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BARTON Region 3 Particle N0 ADRIAN M0 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed N0 ADRIAN M0 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed N0 ADRIAN M0 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed N0 ADRIAN M0 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed N0 BUTLER M0 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 411 S DELAWARE COUNTY BATES DMH Licensed N0 BUTLER M0 64730-2311 Region 3 Facility Number 18817 MUTLER M0 64730-1827 Region 3 Facility	BRISTOL MANOR OF LAMAR			
Mailing Address 603 EAST 17TH ST County BARTON DMH Licensed No LAMAR MO 64759-2303 Region 1 Facility Number 18951 MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE Telephone (417) 682-6184 Alzheimer's Unit No LAMAR MO 64759-8313 Level of Care RCF* Bed Capacity 56 Mailing Address 3 SOUTHWEST FIRST LANE County BARTON DMH Licensed No LAMAR MO 64759-8313 Region 1 Facility Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER County BARTON DMH Licensed No 206 WEST FIRST ST Lawel of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST County BARTON DMH Licensed No LAMAR MO 64759-1291 Level of Care SNF Bed Capacity 123 MAILIN MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 DUEXT IST STREET MO 64750-1291 Region 3 Facility Number 0032 ADRIAN MO 64720-9277 County BATES DMH Licensed No <td>603 EAST 17TH ST</td> <td>Telephone (417) 682-6762</td> <td>Alzheimer's Unit</td> <td>No</td>	603 EAST 17TH ST	Telephone (417) 682-6762	Alzheimer's Unit	No
LAMAR MO 64759-2303 Region 1 Fechlity Number 18951 MAPLE SENIOR LIVING LLC SOUTHWEST FIRST LANE MO 64759-8313 Level of Care RCF* Bed Capacity 56 Mailing Address 3 SOUTHWEST FIRST LANE MO 64759-8313 Region 1 BARTON PAGING PAGE NO 64759-8313 Region 1 Pacifity Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Pacifity Number 20869 LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Pacifity Number 20169 LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Pacifity Number 20169 EBATES BATTIST HOMES OF ADRIAN 402 WEST IST STREET ADRIAN MO 64720-9277 Region 3 DMH Licensed NO ADRIAN MO 64720-9277 Region 3 DMH Licensed NO ADRIAN MO 64720-9277 Region 3 PATES PARTING NO BATTES NO BATTES NO ADRIAN MO 64730-2311 Region 3 PATES PARTING NO BUTLER MO 64730-2311 Region 3 PATES PATTES PATTES PATTES PATTES NO BUTLER MO 64730-2311 Region 3 PATES PATTES PATTE	LAMAR MO 64759-2303	Level of Care RCF	Bed Capacity	12
MAPLE SENIOR LIVING LLC Telephone (417) 682-6184 Alzheimer's Unit No J AMAR MO 64759-8313 Level of Care RCF* Bed Capacity 56 Mailing Address 3 SOUTHWEST FIRST LANE County DMRTON DMH Licensed No LAMAR MO 64759-8313 Region 1 Facility Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER 200 WEST FIRST ST Level of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST MO 64759-1291 Level of Care SNF Bed Capacity 123 MAIR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 SATTES BATTIST HOMES OF ADRIAN 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 30 ADRIAN MO 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 402 WEST IST STREET MO 64730-2311 Level of Care SNF Bed Capacity 30 ADRIAN MO 64730-2311 Level of Care Region 3 Facility Number 0032 BUTLER MO	Mailing Address 603 EAST 17TH ST	County BARTON	DMH Licensed	No
3 SOUTHWEST FIRST LANE Telephone (417) 682-6184 Alzheimer's Unit No LAMAR MO 64759-8313 Level of Care RCF ^a Bed Capacity 56 Ounty BARTON BARTON DMH Licensed No Region 1 Facility Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR MO 64759-1291 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 Mailing Address 206 WEST FIRST ST LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 BATTES BATTES BATTIST HOMES OF ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET AND 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 PRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 416 S HIGH ST NO 64730-1827 Level of Care SNF Bell Capacity 98 Mailing Address 416 S HIGH ST NO 64730-1827 Level SNF County BATES DMH Licensed NO	LAMAR MO 64759-2303	Region 1	Facility Number	18951
3 SOUTHWEST FIRST LANE Telephone (417) 682-6184 Alzheimer's Unit No LAMAR MO 64759-8313 Level of Care RCF ^a Bed Capacity 56 Ounty BARTON BARTON DMH Licensed No Region 1 Facility Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMAR MO 64759-1291 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 Mailing Address 206 WEST FIRST ST LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 BATTES BATTES BATTIST HOMES OF ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET AND 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET COUNTY BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 PRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 411 S DELAWARE NO 64730-2311 Level of Care SNF Bell Capacity 12 Mailing Address 416 S HIGH ST NO 64730-1827 Level of Care SNF Bell Capacity 98 Mailing Address 416 S HIGH ST NO 64730-1827 Level SNF County BATES DMH Licensed NO				
LAMARMO 64759-8313Level of CareRCF*Bed Capacity56Mailing Address 3 SOUTHWEST FIRST LANECountyBARTONDMH LicensedNoLAMARMO 64759-8313Region 1Facility Number20869TRUMAN HEALTHCARE & REHABILITATION CENTERTelephone(417) 682-5718Alzheimer's UnitYesLAMARMO 64759-1291Level of CareSNFBed Capacity123Mailing Address 206 WEST FIRST STCountyBARTONDMH LicensedNoLAMARMO 64759-1291Level of CareSNFBed Capacity134402 WEST 1ST STREETMO 64759-1291Telephone(816) 297-8901Alzheimer's UnitNo402 WEST 1ST STREETMO 64720-9277Level of CareSNFBed Capacity38Mailing Address 402 WEST 1ST STREETCountyBATESDMH LicensedNoADRIANMO 64720-9277Level of CareSNFBed Capacity38Mailing Address 401 SDLAWAREMO 64730-2311Level of CareSNFBed Capacity12BUTLERMO 64730-2311Level of CareSNFBed Capacity12Mailing Address 411 S DELAWAREMO 64730-2311CountyBATESDMH LicensedNoBUTLER REHAB AND HEALTHCARE CENTERTelephone(600) 679-3661Alzheimer's UnitNoBUTLERMO 64730-1827Level of CareSNFBed Capacity18817BUTLERMO 64730-1827Level of CareSNFBed Capacity198BUTLE				
Mailing Address 3 SOUTHWEST FIRST LANE County BARTON DMH Licensed No LAMAR MO 64759-8313 Region 1 Facility Number 20869 TRUMAN HEALTHCARE & REHABILITATION CENTER Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Level of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST County BARTON DMH Licensed No LAMAR MO 64759-1291 Level of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST County BARTON DMH Licensed No LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 STRET ADVEST STREET A00 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64730-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No BUTLER MO 64730-2311 Level of Care Regi		•		
LAMAMO 64759-8313Regin 1Facility Number20869TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST LAMARMO 64759-1291Telephone (417) 682-5718 Level of Care SNF County BARTON Region 1Alzheimer's Unit Bed CapacityYes Bed CapacityMailing Address 206 WEST FIRST ST LAMARMO 64759-1291Telephone (417) 682-5718 Bed CapacityAlzheimer's Unit Yes Bed CapacityYes DMH LicensedBATESMO 64759-1291BATESDMH LicensedNo Facility Number01346BATESBATESBATIST HOMES OF ADRIAN 402 WEST 1ST STREET ADRIANMO 64720-9277Telephone (816) 297-8901 Level of Care SNFAlzheimer's Unit Bed CapacityNo ADRIANMO 64720-9277County BATES Region 3DMH LicensedNo Bod CapacityNo BUTLERHISOUTH DELAWARE BUTLERMO 64730-2311Telephone (660) 679-3661 County BATESAlzheimer's Unit No Bed CapacityNo Bed CapacityNo Bet 732BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST BUTLERMO 64730-1827Level of Care SNF County BATESAlzheimer's Unit No Bed CapacityNo Bed CapacityNo Bed CapacityBUTLER Mailing Address 416 S HIGH STMO 64730-1827Level of Care SNF County BATESAlzheimer's Unit No Bed CapacityNo Bed CapacityBUTLER Mailing Address 416 S HIGH STMO 64730-1827Level of Care SNF County BATESAlzheimer's Unit No Bed CapacityNo Bed CapacityNo Sed Capacity <td></td> <td></td> <td></td> <td></td>				
TRUMAN HEALTHCARE & REHABILITATION CENTER 206 WEST FIRST ST MO 64759-1291 Telephone (417) 682-5718 Alzheimer's Unit Yes LAMAR MO 64759-1291 Level of Care SNF Bed Capacity 123 Mailing Address 206 WEST FIRST ST MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 BATTES BATIST HOMES OF ADRIAN 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64730-2311 Level of Care SNF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 <td>-</td> <td>·</td> <td></td> <td></td>	-	·		
206 WEST FIRST ST LAMARMO64759-1291Telephone(417) 682-5718Alzheimer's UnitYesMailing Address 206 WEST FIRST ST LAMARMO64759-1291CountyBARTON Region 1DMH LicensedNoRegion 1Medicare/MedicaidFacility Number01346BATESBATTST HOMES OF ADRIAN402 WEST 1ST STREET ADRIANMO64720-9277Telephone(816) 297-8901Alzheimer's UnitNoADRIANMO64720-9277Level of CareSNFBed Capacity38Mailing Address 402 WEST 1ST STREET ADRIANMO64720-9277Region 3Pacifity Number00032BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE BUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWARE BUTLERMO64730-2311Level of CareRCFBed Capacity12BUTLER REHAB AND HEALTHCARE HIGH ST BUTLERMO64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity198BUTLER KEHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98BUTLER KEHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98BUTLER Mailing Address 416 S HIGH STCountyBATESDMH LicensedNo </td <td>LAMAR MO 64759-8313</td> <td>Region 1</td> <td>Facility Number</td> <td>20869</td>	LAMAR MO 64759-8313	Region 1	Facility Number	20869
206 WEST FIRST ST LAMARMO64759-1291Telephone(417) 682-5718Alzheimer's UnitYesMailing Address 206 WEST FIRST ST LAMARMO64759-1291CountyBARTON Region 1DMH LicensedNoRegion 1Medicare/MedicaidFacility Number01346BATESBATTST HOMES OF ADRIAN402 WEST 1ST STREET ADRIANMO64720-9277Telephone(816) 297-8901Alzheimer's UnitNoADRIANMO64720-9277Level of CareSNFBed Capacity38Mailing Address 402 WEST 1ST STREET ADRIANMO64720-9277Region 3Pacifity Number00032BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE BUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWARE BUTLERMO64730-2311Level of CareRCFBed Capacity12BUTLER REHAB AND HEALTHCARE HIGH ST BUTLERMO64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity198BUTLER KEHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98BUTLER KEHAB AND HEALTHCARE Miling Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98BUTLER Mailing Address 416 S HIGH STCountyBATESDMH LicensedNo </td <td>TRUMAN HEALTHCARE & REHABILITATION CENTER</td> <td></td> <td></td> <td></td>	TRUMAN HEALTHCARE & REHABILITATION CENTER			
Mailing Address 206 WEST FIRST ST LAMARCounty MO 64759-1291BARTON Region 1DMH Licensed Medicare/MedicaidNo Facility NumberNo 01346BATESBATIST HOMES OF ADRIAN 402 WEST 1ST STREET ADRIANMO 64720-9277 Mo 64720-9277Telephone Level of Care Region 3(816) 297-8901 Facility NumberAlzheimer's Unit No Bed CapacityNo 01346BAPTIST HOMES OF ADRIAN 402 WEST 1ST STREET ADRIANMO 64720-9277 MO 64720-9277Telephone Region 3(816) 297-8901 Facility NumberAlzheimer's Unit No Bed CapacityNo 38BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE BUTLERMO 64730-2311 Mo 64730-2311Telephone Level of Care Region 3G600 679-3661 Facility NumberAlzheimer's Unit No Bed CapacityNo 12BUTLERMO 64730-2311Telephone Level of Care Region 3G600 679-6158 Facility NumberAlzheimer's Unit 18817BUTLER REHAB AND HEALTHCARE BUTLERMO 64730-1827Telephone Level of Care SNFG600 679-6158 Bed CapacityAlzheimer's Unit No 18817BUTLERMO 64730-1827Telephone Level of Care SNFMohemer's Unit Bed CapacityNo 98 Bed Capacity98 98 Mailing Address 416 S HIGH STMO 64730-1827Telephone Level of Care SNFMohemer's Unit Bed CapacityNo 98 98 MH LicensedNo 98 MH LicensedMohemer's Unit 98 MH LicensedNo 98 MH LicensedMo 98 MH LicensedMo 98 MH LicensedMo 98 MH LicensedM		Telephone (417) 682-5718	Alzheimer's Unit	Yes
LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 BATES BATIST HOMES OF ADRIAN 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 BRISTOL MANOR OF BUTLER Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-1827 Level of Care	LAMAR MO 64759-1291	Level of Care SNF	Bed Capacity	123
LAMAR MO 64759-1291 Region 1 Medicare/Medicaid Facility Number 01346 BATES BATIST HOMES OF ADRIAN 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST IST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 BRISTOL MANOR OF BUTLER Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER MO 64730-1827 Level of Care	Mailing Address 206 WEST FIRST ST	County BARTON	DMH Licensed	No
BAPTIST HOMES OF ADRIAN 402 WEST 1ST STREET Telephone (816) 297-8901 Alzheimer's Unit No ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST 1ST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Level of Care RCF Bed Capacity 12 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST Telephone (660) 679-6158 Alzheimer's Unit No BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST MO 64730-1827 Level of C		Region 1 Medicare/Medicaid	Facility Number	01346
BAPTIST HOMES OF ADRIAN 402 WEST 1ST STREET Telephone (816) 297-8901 Alzheimer's Unit No ADRIAN MO 64720-9277 Level of Care SNF Bed Capacity 38 Mailing Address 402 WEST 1ST STREET County BATES DMH Licensed No ADRIAN MO 64720-9277 Region 3 Facility Number 00032 BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE Telephone (660) 679-3661 Alzheimer's Unit No BUTLER MO 64730-2311 Level of Care RCF Bed Capacity 12 Mailing Address 411 S DELAWARE MO 64730-2311 Level of Care RCF Bed Capacity 12 BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST Telephone (660) 679-6158 Alzheimer's Unit No BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST MO 64730-1827 Level of C				
402 WEST 1ST STREETTelephone(816) 297-8901Alzheimer's UnitNoADRIANMO64720-9277Level of CareSNFBed Capacity38Mailing Address 402 WEST 1ST STREETCountyBATESDMH LicensedNoADRIANMO64720-9277Region3Facility Number00032BRISTOL MANOR OF BUTLERTelephone(660) 679-3661Alzheimer's UnitNo411 SOUTH DELAWAREMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO64730-2311Level of CareRCFBed Capacity18817BUTLERMO64730-2311Region3Facility Number18817BUTLERMO64730-2311Level of CareRCFBed Capacity18817BUTLERMO64730-2311RegionAlzheimer's UnitNoBUTLERMO64730-2311Level of CareSNFBed Capacity18817BUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STCountyBATESDMH LicensedNo	BA	ATES		
ADRIANMO64720-9277Level of CareSNFBed Capacity38Mailing Address 402 WEST 1ST STREETMO64720-9277Level of CareSNFBed Capacity38ADRIANMO64720-9277Region 3Facility Number00032BRISTOL MANOR OF BUTLERTelephone(660) 679-3661Alzheimer's UnitNo411 SOUTH DELAWARETelephone(660) 679-3661Alzheimer's UnitNoBUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO64730-2311Level of CareRCFBed Capacity18817BUTLERMO64730-2311Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-2311Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-2311Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-2311Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827CountyBATESDMH LicensedNo	BAPTIST HOMES OF ADRIAN			
Mailing Address 402 WEST 1ST STREETCountyBATESDMH LicensedNoADRIANMO 64720-9277Region 3Facility Number00032BRISTOL MANOR OF BUTLERTelephone(660) 679-3661Alzheimer's UnitNo411 SOUTH DELAWAREMO 64730-2311Level of CareRCFBed Capacity12BUTLERMO 64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO 64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE CENTERTelephone(660) 679-6158Alzheimer's UnitNoBUTLERMO 64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO 64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO 64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827Level of CareSNFBed Capacity98	402 WEST 1ST STREET	Telephone (816) 297-8901	Alzheimer's Unit	No
ADRIANMO 64720-9277Regin 3Facility Number00032BRISTOL MANOR OF BUTLER <td< td=""><td>ADRIAN MO 64720-9277</td><td>Level of Care SNF</td><td>Bed Capacity</td><td>38</td></td<>	ADRIAN MO 64720-9277	Level of Care SNF	Bed Capacity	38
BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE BUTLER MO 64730-2311 Mailing Address 411 S DELAWARE BUTLER MO 64730-2311 Level of Care RCF BUTLER MO 64730-2311 Level of Care Region 3 Facility Number 18817 BUTLER REHAB AND HEALTHCARE CENTER Telephone 416 SOUTH HIGH ST MO 64730-1827 BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST County BATES Moi lig Address 416 S HIGH ST County BATES	Mailing Address 402 WEST 1ST STREET	County BATES		No
411 SOUTH DELAWARETelephone(660) 679-3661Alzheimer's UnitNoBUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO64730-2311CountyBATESDMH LicensedNoBUTLERMO64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE CENTER416 SOUTH HIGH STMO64730-1827Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STVO64730-1827CountyBATESDMH LicensedNo	ADRIAN MO 64720-9277	Region 3	Facility Number	00032
411 SOUTH DELAWARETelephone(660) 679-3661Alzheimer's UnitNoBUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO64730-2311CountyBATESDMH LicensedNoBUTLERMO64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE CENTER416 SOUTH HIGH STMO64730-1827Telephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STVO64730-1827CountyBATESDMH LicensedNo				
BUTLERMO64730-2311Level of CareRCFBed Capacity12Mailing Address 411 S DELAWAREMO64730-2311CountyBATESDMH LicensedNoBUTLERMO64730-2311Region 3Facility Number18817BUTLER REHAB AND HEALTHCARE CENTER416 SOUTH HIGH STTelephone(660) 679-6158Alzheimer's UnitNoBUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STMO64730-1827CountyBATESDMH LicensedNo				
Mailing Address 411 S DELAWARE County BATES DMH Licensed No BUTLER MO 64730-2311 Region 3 Facility Number 18817 BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST Telephone (660) 679-6158 Alzheimer's Unit No BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST Yo Gounty BATES DMH Licensed No				
BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST BUTLER MO 64730-1827 MO 64730-1827 Mailing Address 416 S HIGH ST MO 64730-1827 MO				
BUTLER REHAB AND HEALTHCARE CENTER 416 SOUTH HIGH ST BUTLER MO 64730-1827 Mo 64730-1827 Mo 64730-1827 County BATES Mo H Licensed No	0			
416 SOUTH HIGH ST Telephone (660) 679-6158 Alzheimer's Unit No BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST County BATES DMH Licensed No	BUILER MO 64/30-2311	Region 3	Facility Number	18817
416 SOUTH HIGH ST Telephone (660) 679-6158 Alzheimer's Unit No BUTLER MO 64730-1827 Level of Care SNF Bed Capacity 98 Mailing Address 416 S HIGH ST County BATES DMH Licensed No	RUTLER REHAR AND HEAT THCAPE CENTER			
BUTLERMO64730-1827Level of CareSNFBed Capacity98Mailing Address 416 S HIGH STCountyBATESDMH LicensedNo		Telephone (660) 679-6158	Alzheimer's Unit	No
Mailing Address 416 S HIGH STCountyBATESDMH LicensedNo		• • •		
•				
	-	·		
				50021

MEDICALODGES BUTLER

103 EAST NURSERYMO64730-2331BUTLERMO64730-2331BUTLERMO64730-2331

Telephone(660) 679-3179Alzheimer's UnitLevel of CareSNFBed CapacityCountyBATESDMH LicensedRegion 3Medicare/MedicaidFacility Number

Yes

110

No

05319

BENTON

ANEW SENIOR LIVING COLE CAN	MP			
517 NORTH OAK		Telephone (660) 668-3140	Alzheimer's Unit	No
COLE CAMP	MO 65325-1264	Level of Care RCF	Bed Capacity	30
Mailing Address PO BOX 252		County BENTON	DMH Licensed	No
COLE CAMP	MO 65325-0252	Region 6	Facility Number	26313
		August -		20313
BRISTOL MANOR OF LINCOLN				
204 SOUTH HIGHWAY 65		Telephone (660) 547-2580	Alzheimer's Unit	No
LINCOLN	MO 65338-2587	Level of Care RCF	Bed Capacity	12
Mailing Address 204 SOUTH HIGHW	/AY 65	County BENTON	DMH Licensed	No
LINCOLN	MO 65338-2587	Region 6	Facility Number	18092
BRISTOL MANOR OF WARSAW				
1600 ESTATE DR		Telephone (660) 438-7173	Alzheimer's Unit	No
WARSAW	MO 65355-3061	Level of Care RCF	Bed Capacity	12
Mailing Address 1600 ESTATE DR		County BENTON	DMH Licensed	No
WARSAW	MO 65355-3061	Region 6	Facility Number	16343
			·	
GOOD SAMARITAN CARE CENTE	ER			
403 WEST MAIN ST		Telephone (660) 668-4515	Alzheimer's Unit	No
COLE CAMP	MO 65325-1144	Level of Care SNF	Bed Capacity	72
Mailing Address 403 WEST MAIN ST		County BENTON	DMH Licensed	No
COLE CAMP	MO 65325-1144	Region 6 Medicare/Medicaid	Facility Number	03039
LAKESIDE SUITES				
205 TIMBERLINE DR		Telephone (660) 547-3322	Alzheimer's Unit	No
LINCOLN	MO 65338-2007	Level of Care ALF	Bed Capacity	14
Mailing Address 205 TIMBERLINE D	DR	County BENTON	DMH Licensed	No
LINCOLN	MO 65338-2007	Region 6	Facility Number	04803
LINCOLN COMMUNITY CARE CE	ENTER			
205 TIMBERLINE DR		Telephone (660) 547-3322	Alzheimer's Unit	No
LINCOLN	MO 65338-2007	Level of Care SNF	Bed Capacity	66
Mailing Address 205 TIMBERLINE D	DR	County BENTON	DMH Licensed	No
LINCOLN	MO 65338-2007	Region 6 Medicare/Medicaid	Facility Number	04803
		Ŭ		
WARSAW HEALTH AND REHABI	LITATION CENTER			37
1609 SUNCHASE DR	MO (5255 2050	Telephone (660) 438-2970 L L C	Alzheimer's Unit	Yes
WARSAW	MO 65355-3059	Level of Care SNF	Bed Capacity	90 No
Mailing Address 1609 SUNCHASE D		County BENTON	DMH Licensed	No
WARSAW	MO 65355-3059	Region 6 Medicare/Medicaid	Facility Number	15243

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BOLLINGER

		BOONE		
			-	
Mailing Address 702 HWY 34 WE MARBLE HILL	MO 63764-4301	County BOLLINGER Region 2 Medicare/Medicaid	DMH Licensed Facility Number	No 10864
MARBLE HILL	MO 63764-4301	Level of Care SNF	Bed Capacity	98 N-
STONEBRIDGE MARBLE HILL 702 HIGHWAY 34 WEST		Telephone (573) 238-2614	Alzheimer's Unit	No
MARBLE HILL	MO 63764-9510	Region 2	Facility Number	08707
Mailing Address ROUTE 2, BOX 2	2790	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9510	Level of Care RCF*	Bed Capacity	32
ROUTE 2, BOX 2790		Telephone (573) 238-4253	Alzheimer's Unit	No
RANCH RESIDENTIAL CARE F.	ACILITY THE			
MARBLE HILL	MO 63764-0378	Region 2	Facility Number	07171
Mailing Address PO BOX 378		County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-0378	Level of Care RCF*	Bed Capacity	12
104 WESBECHER	11/11/1 11	Telephone (573) 238-1008	Alzheimer's Unit	No
J & J RESIDENTIAL CARE FAC				
PATTON	MO 63662-0010	Region 2	Facility Number	18783
Mailing Address PO BOX B		County BOLLINGER	DMH Licensed	Yes
PATTON	MO 63662-9760	Level of Care ALF	Bed Capacity	24
HERITAGE HILLS ASSISTED LA ROUTE 5, BOX 68	IVING FACILITY	Telephone (573) 866-2003	Alzheimer's Unit	No
MARBLE HILL	MO 63764-9408	Region 2	Facility Number	23940
Mailing Address HC 64, BOX 4677	7	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9408	Level of Care RCF	Bed Capacity	40
DIANA'S BOARDING HOME 2 25140 BUZZARD DR		Telephone (573) 238-3344	Alzheimer's Unit	No
MARBLE HILL	MO 63764-7487	Region 2	Facility Number	11123
Mailing Address 15431 STATE HIG	GHWAY M	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-7487	Level of Care RCF	Bed Capacity	20
DIANA'S BOARDING HOME 1, I 15432 STATE HIGHWAY M	NC	Telephone (573) 866-2010	Alzheimer's Unit	No
MARBLE HILL	WIO 03704-9408	Region 2	Facility Number	30984
Mailing Address 25228 BUZZARD	MO 63764-9408	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9408	Level of Care RCF	Bed Capacity	40
25228 BUZZARD DRIVE		Telephone (573) 238-1300	Alzheimer's Unit	No
ANNIE'S HOUSE INC				

ASHLAND HEALTHCARE

TEMPORARY CLOSURE - STAFFING

300 SOUTH HENRY CLAY BLVD		Telephone (57	73) 657-2877	Alzheimer's Unit	No
ASHLAND	MO 65010-9438	Level of Care SN	IF	Bed Capacity	60
Mailing Address 300 S HENRY CLAY	BLVD	County BOONE	C	DMH Licensed	No
ASHLAND	MO 65010-9438	Region 6 Medie	icare/Medicaid	Facility Number	17908

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

ASHLAND VILLA - ASSISTED LIVING BY AMERICARE			
301 SOUTH HENRY CLAY BLVD	Telephone (573) 657-1920	Alzheimer's Unit	No
ASHLAND MO 65010-9439	Level of Care ALF**	Bed Capacity	72
Mailing Address 301 SOUTH HENRY CLAY BLVD	County BOONE	DMH Licensed	No
ASHLAND MO 65010-9439	Region 6	Facility Number	20303
	Region	Facility Number	20505
BLUEGRASS TERRACE			
102 REDTAIL DR	Telephone (573) 657-0899	Alzheimer's Unit	No
ASHLAND MO 65010-1179	Level of Care RCF	Bed Capacity	16
Mailing Address 102 REDTAIL DR	County BOONE	DMH Licensed	No
ASHLAND MO 65010-1179	Region 6	Facility Number	25731
BLUFF CREEK TERRACE - ASSISTED LIVING BY AMERICARE			
3104 BLUFF CREEK DR	Telephone (573) 815-9111	Alzheimer's Unit	Yes
COLUMBIA MO 65201-3524	Level of Care ALF**	Bed Capacity	48
Mailing Address 3104 BLUFF CREEK DR	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-3524	Region 6	Facility Number	20625
BLUFFS, THE			
3105 BLUFF CREEK DR	Telephone (573) 442-6060	Alzheimer's Unit	Yes
COLUMBIA MO 65201-3529	Level of Care SNF	Bed Capacity	132
Mailing Address 3105 BLUFF CREEK DR	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-3529	Region 6 Medicare/Medicaid	Facility Number	00754
BRISTOL MANOR OF CENTRALIA610 NORTH JEFFERSON STCENTRALIAMO65240-1178Mailing Address610 NORTH JEFFERSON STCENTRALIAMO65240-1178	Telephone(573) 682-5913Level of CareRCFCountyBOONERegion6	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 18286
CEDARHURST OF COLUMBIA			
2333 CHAPEL HILL RD	Telephone (573) 234-1091	Alzheimer's Unit	Yes
COLUMBIA MO 65203-1537	Level of Care ALF**	Bed Capacity	127
Mailing Address 2333 CHAPEL HILL RD	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-1537	Region 6	Facility Number	29874
COLONY POINTE-ASSISTED LIVING BY AMERICARE			
1510 CHAPEL HILL RD	Telephone (573) 234-1193	Alzheimer's Unit	Yes
COLUMBIA MO 65203-5457	Level of Care ALF**	Bed Capacity	59
Mailing Address 1510 CHAPEL HILL RD	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-5457	Region 6	Facility Number	28191
COLUMBIA MANOR HEALTH & REHABILITATION			
2012 E. NIFONG BLVD	Telephone (573) 449-1246	Alzheimer's Unit	No
2012 E. NIFONG BLVDCOLUMBIAMO65201-3874	Level of Care SNF	Bed Capacity	52
2012 E. NIFONG BLVD	-		

COLUMBIA POST ACUTE			
3535 BERRYWOOD DRIVE	Telephone (573) 397-7144	Alzheimer's Unit	No
COLUMBIA MO 65201-6584	Level of Care SNF	Bed Capacity	70
Mailing Address 3535 BERRYWOOD DRIVE	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-6584	Region 6 Medicare/Medicaid	Facility Number	30959
	Region · Medicale/Medicale		00,0,
HARAMBEE HOUSE, INC			
703 NORTH EIGHTH ST	Telephone (573) 443-6972	Alzheimer's Unit	No
COLUMBIA MO 65201-4516	Level of Care RCF*	Bed Capacity	15
Mailing Address 703 NORTH EIGHTH ST	County BOONE	DMH Licensed	Yes
COLUMBIA MO 65201-4516	Region 6	Facility Number	17197
	-		
HERITAGE HALL NURSING CENTER			
750 EAST HIGHWAY 22	Telephone (573) 682-5551	Alzheimer's Unit	No
CENTRALIA MO 65240-1146	Level of Care SNF	Bed Capacity	60
Mailing Address 750 EAST HIGHWAY 22	County BOONE	DMH Licensed	No
CENTRALIA MO 65240-1146	Region 6 Medicare/Medicaid	Facility Number	03069
HILLCREST RESIDENTIAL CARE, INC			
9415 NORTH BROWN STATION RD	Telephone (573) 696-3201	Alzheimer's Unit	No
COLUMBIA MO 65202-8671	Level of Care ALF	Bed Capacity	33
Mailing Address 9415 NORTH BROWN STATION RD	County BOONE	DMH Licensed	Yes
COLUMBIA MO 65202-8671	Region 6	Facility Number	03572
LAKE GEORGE ASSISTED LIVING			
5000 E RICHLAND RD	Telephone (573) 442-0577	Alzheimer's Unit	No
COLUMBIA MO 65201-9606	Level of Care ALF**	Bed Capacity	10
Mailing Address 5000 EAST RICHLAND RD	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-9606	Region 6	Facility Number	28997
LENOIR HEALTH CARE CENTER			
3850 CARTWRIGHT LANE	Telephone (573) 876-5800	Alzheimer's Unit	No
COLUMBIA MO 65201-7779	Level of Care SNF	Bed Capacity	100
Mailing Address 3850 CARTWRIGHT LANE	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-7779	Region 6 Medicare/Medicaid	Facility Number	04750
LENOIR MANOR			
3850 CARTWRIGHT LANE	Telephone (573) 876-5800	Alzheimer's Unit	Yes
COLUMBIA MO 65201-	Level of Care ALF**	Bed Capacity	92
Mailing Address 3850 CARTWRIGHT LANE	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-	Region 6	Facility Number	04750
MILL ODEER VILLAGE ACCIONED LIVING BY AMERICAN	<i>v</i>		
MILL CREEK VILLAGE-ASSISTED LIVING BY AMERICARI 1990 W SOUTHAMPTON DR	Telephone (573) 381-2510	Alzheimer's Unit	Yes
COLUMBIA MO 65203-6238	Level of Care ALF**	Bed Capacity	1 es 50
Mol 05205-0238 Mailing Address 1990 W SOUTHAMPTON DR	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-6238	Region 6	Facility Number	30107
MIO 05205 0250	ingion v	- activy i valibel	50107

NEIGHBORHOODS REHABILITATION & SKILLED NURSING BY T	GERPLACE, THE	
3003 FALLING LEAF COURT	Telephone (573) 256-4620	Alzheimer's Unit No
COLUMBIA MO 65201-3549	Level of Care SNF	Bed Capacity 120
Mailing Address 3003 FALLING LEAF COURT	County BOONE	DMH Licensed No
COLUMBIA MO 65201-3549	Region 6 Medicare/Medicaid	Facility Number 24341
	Kegion o Meultare/Meultaru	
PARKSIDE MANOR		
1201 HUNT AVE	Telephone (573) 449-1448	Alzheimer's Unit Yes
COLUMBIA MO 65202-1367	Level of Care SNF	Bed Capacity 120
Mailing Address 1201 HUNT AVE	County BOONE	DMH Licensed No
COLUMBIA MO 65202-1367	Region 6 Medicare/Medicaid	Facility Number 11262
SOUTH HAMPTON PLACE		
4700 BRANDON WOODS	Telephone (573) 874-3674	Alzheimer's Unit No
COLUMBIA MO 65203-7169	Level of Care SNF	Bed Capacity 100
Mailing Address 4700 BRANDON WOODS	County BOONE	DMH Licensed No
0	·	
COLUMBIA MO 65203-7169	Region 6 Medicare/Medicaid	Facility Number19799
STUART HOUSE, LLC THE		
117 S HICKMAN	Telephone (573) 682-3204	Alzheimer's Unit No
CENTRALIA MO 65240-1316	Level of Care ICF	Bed Capacity 27
Mailing Address 117 S HICKMAN	County BOONE	DMH Licensed No
CENTRALIA MO 65240-1316	Region 6	Facility Number 10146
STURGEON RESIDENTIAL CARE315 E STONE STSTURGEONMO65284-8907Mailing Address PO BOX 328STURGEONMO65284-0328	Telephone(573) 687-3012Level of CareRCFCountyBOONERegion6	Alzheimer's UnitNoBed Capacity20DMH LicensedNoFacility Number07733
TIGER PLACE		
2910 BLUFF CREEK DR	Telephone (573) 256-4620	Alzheimer's Unit No
COLUMBIA MO 65201-3522	Level of Care ICF	Bed Capacity 112
Mailing Address 2910 BLUFF CREEK DR	County BOONE	DMH Licensed No
COLUMBIA MO 65201-3522	Region 6	Facility Number24341
VILLA AT BLUE RIDGE, THE		
701 BLUE RIDGE ROAD	Telephone (573) 474-6111	Alzheimer's Unit No
COLUMBIA MO 65201-3734	Level of Care SNF	Bed Capacity 97
Mailing Address 701 BLUE RIDGE ROAD	County BOONE	DMH Licensed No
COLUMBIA MO 65201-3734	Region 6 Medicare/Medicaid	Facility Number 01706
WESTBURY SENIOR LIVING THE	Talaphana (572) 818 7020	Alzhaimar's Unit Vac
550 STONE VALLEY PARKWAY	Telephone (573) 818-7030 Lowel of Come ALE**	Alzheimer's Unit Yes
COLUMBIA MO 65203-5567	Level of Care ALF**	Bed Capacity 66
Mailing Address 550 STONE VALLEY PARKWAY	County BOONE	DMH Licensed No
COLUMBIA MO 65203-5567	Region 6	Facility Number32666

BUCHANAN

64505-1872
64505-1872

Telephone (816) 364-4200	Alzheimer's Unit	No
Level of Care SNF	Bed Capacity	180
County BUCHANAN	DMH Licensed	No
Region 4 Medicare/Medicaid	Facility Number	08000

BELLEVIEW CARE CENT	ER			
1616 WEISENBORN RD			Telephone	(81
SAINT JOSEPH	MO	64507-2527	Level of Care	AL
Mailing Address 1616 WEIS	ENBORN RD		County BU	CHA
SAINT JOSEPH	MO	64507-2527	Region 4	

BELLEVIEW CARE CENTER

1616 WEISENBORN RD			
SAINT JOSEPH	MO	64507-2527	
Mailing Address 1616 WEISENBORN RD			
SAINT JOSEPH	MO	64508-2527	

CARRIAGE SQUARE REHAB AND HEALTHCARE CENTER

4009 GENE FIELD RD			
SAINT JOSEPH	MO	64506-1864	
Mailing Address 4009 GENE FIELD RD			
SAINT JOSEPH	MO	64506-1864	

CARRIAGE SQUARE REHAB AND HEALTHCARE CENTER

4009 GENE FIELD RD			
SAINT JOSEPH	MO	64506-1864	
Mailing Address 4009 GENE FIELD RD			
SAINT JOSEPH	MO	64506-1864	

FIELD POINTE ASSISTED LIVING BY AMERICARE

5002 GENE FIELD ROAD		
SAINT JOSEPH	MO	64506-2056
Mailing Address 5002 GENE FIELD RO	DAD	
SAINT JOSEPH	MO	64506-2056

HEARTLAND II RESIDENTIAL CARE FACILITY, INC

117 SOUTH 15TH ST		
SAINT JOSEPH	MO	64501-2904
Mailing Address 117 SOUTH 15TH ST		
SAINT JOSEPH	MO	64501-2904

HEARTLAND III RCF

1606 SOUTH 38TH ST		
SAINT JOSEPH	MO	64507-2216
Mailing Address PO BOX 8923		
SAINT JOSEPH	MO	64508-8923

Telephone	(816) 749-3919	Alzheimer's Unit	No
Level of Care	ALF	Bed Capacity	100
County BUC	HANAN	DMH Licensed	Yes
Region 4		Facility Number	10346

Telephone	(816) 749-3919	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	90
County BU	CHANAN	DMH Licensed	No
Region 4	Medicare/Medicaid	Facility Number	10346

Telephone	(816) 364-1526	Alzheimer's Unit	No
Level of Care	RCF*	Bed Capacity	32
County BUG	CHANAN	DMH Licensed	No
Region 4		Facility Number	01061

Telephone (8	816) 364-1526	Alzheimer's Unit	No
Level of Care SI	NF	Bed Capacity	130
County BUCH	IANAN	DMH Licensed	No
Region 4 Med	dicare/Medicaid	Facility Number	01061

Telephone (816) 688-4001	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	65
County BUCHANAN	DMH Licensed	No
Region 4	Facility Number	32538

Telephone	(816) 676-1506	Alzheimer's Unit	No
Level of Care	RCF*	Bed Capacity	52
County BUCI	HANAN	DMH Licensed	Yes
Region 4		Facility Number	18620

Telephone	(816) 390-8941	Alzheimer's Unit	No
Level of Care	RCF	Bed Capacity	18
County BU	CHANAN	DMH Licensed	Yes
Region 4		Facility Number	00920

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

HEARTLAND RESIDENTIAL CARE FACILITY, INC			
1311 FRANCIS ST	Telephone (816) 233-5779	Alzheimer's Unit	No
SAINT JOSEPH MO 64501-2318	Level of Care RCF	Bed Capacity	20
Mailing Address 1311 FRANCIS ST	County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH MO 64501-2318	Region 4	Facility Number	02491
I WING COMMINITY OF CT INCEDI			
LIVING COMMUNITY OF ST JOSEPH	$T_{-1} = 1 + 1 = 1 = 0$	A 1-1	No
1202 HEARTLAND RD	Telephone (816) 671-8500	Alzheimer's Unit	No
SAINT JOSEPH MO 64506-3200	Level of Care ALF**	Bed Capacity	35
Mailing Address 1202 HEARTLAND RD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH MO 64506-3200	Region 4	Facility Number	24179
LIVING COMMUNITY OF ST JOSEPH			
1202 HEARTLAND RD	Telephone (816) 671-8500	Alzheimer's Unit	No
SAINT JOSEPH MO 64506-3200	Level of Care SNF	Bed Capacity	96
Mailing Address 1202 HEARTLAND RD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH MO 64506-3200	Region 4 Medicare/Medicaid	Facility Number	24179
	Region + Medicale/Medicalu	racinty rumber	24179
MCDONALD BOARDING HOME			
438 NORTH 17TH ST	Telephone (816) 233-7060	Alzheimer's Unit	No
SAINT JOSEPH MO 64501-2015	Level of Care RCF	Bed Capacity	8
Mailing Address 438 NORTH 17TH ST	County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH MO 64501-2015	Region 4	Facility Number	05170
ST JOSEPH CHATEAU			
811 NORTH 9TH ST	Telephone (816) 233-5164	Alzheimer's Unit	No
SAINT JOSEPH MO 64501-1651	Level of Care SNF	Bed Capacity	69
Mailing Address 811 NORTH 9TH ST	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH MO 64508-1651	Region 4 Medicare/Medicaid	Facility Number	07532
	Region + Medicale/Medicalu	racinty rumber	07552
ST JOSEPH MANOR HEALTH & REHABILITATION			
1317 NORTH 36TH ST	Telephone (816) 676-1630	Alzheimer's Unit	No
SAINT JOSEPH MO 64506-2359	Level of Care SNF	Bed Capacity	110
Mailing Address 1317 NORTH 36TH ST	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH MO 64506-2359	Region 4 Medicare/Medicaid	Facility Number	00526
THOMAS RESIDENTIAL CARE FACILITY 3			
1415 OLIVE ST	Telephone (816) 273-5070	Alzheimer's Unit	No
SAINT JOSEPH MO 64503-2443	Level of Care RCF	Bed Capacity	20
Mailing Address 1415 OLIVE ST	County BUCHANAN	DMH Licensed	Yes
	•		
SAINT JOSEPH MO 64503-2443	Region 4	Facility Number	06076
VINTAGE GARDENS ASSISTED LIVING			
3302 NORTH WOODBINE ROAD	Telephone (816) 279-3330	Alzheimer's Unit	Yes
SAINT JOSEPH MO 64505-9323	Level of Care ALF	Bed Capacity	51
Mailing Address 3302 NORTH WOODBINE RD	County BUCHANAN	DMH Licensed	No
SAINT JOSPEH MO 64505-9323	Region 4	Facility Number	22959
	~		

Thursday, April 4, 2024

VINTAGE GARDENS ASSISTED LIVING

3302 NORTH WOODBINE ROAD SAINT JOSEPH MO 64505-9323 Mailing Address 3302 N WOODBINE ROAD SAINT JOSEPH MO 64505-9323
 Telephone
 (816) 279-3330

 Level of Care
 ALF**

 County
 BUCHANAN

 Region
 4

Alzheimer's UnitNoBed Capacity44DMH LicensedNoFacility Number22959

BUTLER

CEDARGATE HEALTHCARE 2350 KANELL BLVD		Telephone (573) 785-0188	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4036	Level of Care SNF	Bed Capacity 108
Mailing Address 2350 KANELL BLVD		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4036	Region 2 Medicare/Medicaid	Facility Number 01182
		-	
CEDARGATE HEALTHCARE			
2350 KANELL BLVD		Telephone (573) 785-0188	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4036	Level of Care ALF	Bed Capacity 16
Mailing Address 2350 KANELL BLVD		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4036	Region 2	Facility Number01182
MANOR, THE			
2071 BARRON RD		Telephone (573) 686-1147	Alzheimer's Unit No
	MO 63901-1903	Level of Care SNF	Bed Capacity 90
Mailing Address 2071 BARRON RD		County BUTLER	DMH Licensed No
	MO 63901-1903	Region 2 Medicare/Medicaid	Facility Number 00683
		-	
MARK TWAIN CARING CENTER			
3001 MAY ST		Telephone (573) 686-6999	Alzheimer's Unit Yes
POPLAR BLUFF	MO 63901-1942	Level of Care SNF	Bed Capacity 120
Mailing Address 3001 MAY ST		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-1942	Region 2 Medicare/Medicaid	Facility Number 16013
NEW HOPE ASSISTED LIVING LLC			
328 NORTH NEW HOPE DRIVE		Telephone (573) 300-4877	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4819	Level of Care ALF	Bed Capacity 15
Mailing Address 328 NORTH NEW HOP	PE DR	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4819	Region 2	Facility Number32690
OAKDALE CARE CENTER			
2702 DEBBIE LN		Telephone (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care SNF	Bed Capacity 70
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-2650	Region 2 Medicare/Medicaid	Facility Number 18157
OAKDALE CARE CENTER			
2702 DEBBIE LN		Telephone (573) 686-5242	Alzheimer's Unit No
	MO 63901-2650	Level of Care RCF*	Aizheiner's UnitNoBed Capacity36
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed Yes
	MO 63901-2650	Region 2	Facility Number 18157
	05701-2050 05701-2050	KCGIUII 2	Facility Mulliber 1815/

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

OAKDALE CARE CENTER			
2702 DEBBIE LN	Telephone (573) 686-5242	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-2650	Level of Care ALF	Bed Capacity	60
Mailing Address 2702 DEBBIE LN	County BUTLER	DMH Licensed	No
POPLAR BLUFF MO 63901-2650	Region 2	Facility Number	18157
OWEN ACRES RESIDENTIAL CARE FACILITY			
614 COUNTY ROAD 466	Telephone (573) 778-0497	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-2964	Level of Care RCF	Bed Capacity	20
Mailing Address 614 COUNTY RD 466	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF MO 63901-2964	Region 2	Facility Number	21093
PORTIA'S RESIDENTIAL CARE			
307 NORTH BROADWAY	Telephone (573) 686-3446	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-5103	Level of Care RCF	Bed Capacity	20
Mailing Address 307 N BROADWAY	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF MO 63901-5103	Region 2	Facility Number	03002
RIVER MIST - ASSISTED LIVING BY AMERICARE			
2050 WEST MAUD	Telephone (573) 686-2833	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-4000	Level of Care ALF**	Bed Capacity	42
Mailing Address 2050 WEST MAUD	County BUTLER	DMH Licensed	No
POPLAR BLUFFMO63901-4000	Region 2	Facility Number	20291
SWIFT CREEK RESIDENTIAL CARE CENTER			
1673 HIGHWAY 53	Telephone (573) 776-6501	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-4132	Level of Care RCF*	Bed Capacity	12
Mailing Address 1673 HIGHWAY 53	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF MO 63901-4132	Region 2	Facility Number	20386
SWITZER RESIDENTIAL CARE			
3260 MYSTIC LANE	Telephone (573) 785-9399	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-3067	Level of Care RCF*	Bed Capacity	20
Mailing Address 3260 MYSTIC LANE	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF MO 63901-3067	Region 2	Facility Number	20739
	Region 2	Tuenity Mullioer	2013)
WESTWOOD HILLS HEALTH & REHABILITATION CENTER			
3100 WARRIOR LANE	Telephone (573) 785-0851	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-8686	Level of Care SNF	Bed Capacity	132
Mailing Address 3100 WARRIOR LANE	County BUTLER	DMH Licensed	No
POPLAR BLUFF MO 63901-8686	Region 2 Medicare/Medicaid	Facility Number	08512
			00012
WHISPERING OAKS RCF II, LLC			
203 NORTH B ST	Telephone (573) 686-4490	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-5413	Level of Care RCF*	Bed Capacity	45
Mailing Address 203 NORTH B ST	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF MO 63901-5413	Region 2	Facility Number	16751
	-		

CALDWELL

GOLDEN AGE NURSING HOME

12498 SE HWY 116		
BRAYMER	MO	64624-9107
Mailing Address 12498 SE HWY 116		
BRAYMER	MO	64624-9107

 HILL CREST MANOR
 Selection

 801 SOUTH COLBY
 MO
 64644-8287

 HAMILTON
 MO
 64644-8287

 HAMILTON
 MO
 64644-8287

HILL CREST MANOR

801 SOUTH COLBY		
HAMILTON	MO	64644-8287
Mailing Address 801 SOUTH COLBY		
HAMILTON	MO	64644-8287

Telephone	(660) 645-2243	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	83
County CA	LDWELL	DMH Licensed	No
Region 4	Medicare/Medicaid	Facility Number	02957

Telephone	(816) 583-2119	Alzheimer's Unit	No
Level of Care	RCF	Bed Capacity	24
County CA	LDWELL	DMH Licensed	No
Region 4		Facility Number	03315
-			

Telephone	(816) 583-2119	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	90
County CA	LDWELL	DMH Licensed	No
Region 4	Medicare/Medicaid	Facility Number	03315

CALLAWAY

ASHBURY HEIGHTS OF FULTON 704 WEST CHESTNUT FULTON Mailing Address 704 WEST CHESTN FULTON	MO 65251-1254 UT MO 65251-1254	Telephone(573) 642-2015Level of CareRCFCountyCALLAWAYRegion6	Bed Capacity	No 12 No 23
		rigion -		
BRIDGEWAY RESIDENTIAL CAR	E FACILITY			
828 JEFFERSON ST		Telephone (573) 642-7770	Alzheimer's Unit	No
FULTON	MO 65251-1877	Level of Care RCF*	Bed Capacity	94
Mailing Address 828 JEFFERSON ST		County CALLAWAY	DMH Licensed Y	es
FULTON	MO 65251-1877	Region 6	Facility Number 1352	22
BRISTOL MANOR OF FULTON				
750 SIGN PAINTER ROAD		Telephone (573) 642-7557	Alzheimer's Unit	No
FULTON	MO 65251-2514	Level of Care RCF	Bed Capacity	12
Mailing Address 750 SIGN PAINTER	RD	County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2514	Region 6	Facility Number 1857	75
CHURCHILL TERRACE - ASSISTE	ED LIVING BY AMERICARE			
120 HOSPITAL DR		Telephone (573) 642-5222	Alzheimer's Unit	No
FULTON	MO 65251-2511	Level of Care ALF**	Bed Capacity	57
Mailing Address 120 HOSPITAL DR		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2511	Region 6	Facility Number 207	83
FULTON MANOR CARE CENTER				
520 MANOR DR		Telephone (573) 642-6834	Alzheimer's Unit	No
FULTON	MO 65251-2429	Level of Care SNF	Bed Capacity	52
Mailing Address 520 MANOR DR		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2429	Region 6 Medicare/Medicaid	Facility Number 0272	25

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

FULTON NURSING & REHAB 1510 BLUFF ST FULTON Mailing Address 1510 BLUFF ST FULTON	MO 65251-2345 MO 65251-2345	Telephone(573) 642-0202Level of CareSNFCountyCALLAWAYRegion6Medicare/Medicaid	Alzheimer's UnitYesBed Capacity100DMH LicensedNoFacility Number03492
KINGDOM CARE SENIOR LIVING 811 CENTER ST FULTON Mailing Address 811 CENTER ST FULTON	LLC MO 65251-1922 MO 65251-1922	Telephone(573) 642-6646Level of CareSNFCountyCALLAWAYRegion6Medicare/Medicaid	Alzheimer's UnitNoBed Capacity36DMH LicensedNoFacility Number18735
KINGDOM CARE SENIOR LIVING 811 CENTER ST FULTON Mailing Address 811 CENTER ST FULTON	LLC MO 65251-1922 MO 65251-1922	Telephone(573) 642-6646Level of CareALFCountyCALLAWAYRegion6	Alzheimer's UnitNoBed Capacity41DMH LicensedNoFacility Number18735
RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE Mailing Address 10303 STATE RD C MOKANE	MO 65059-1211 MO 65059-1211	Telephone(573) 676-3136Level of CareSNFCountyCALLAWAYRegion6Medicare/Medicaid	Alzheimer's UnitNoBed Capacity60DMH LicensedNoFacility Number06730
SUMMIT VILLA LIFECARE 229 KAREN DR HOLTS SUMMIT Mailing Address 229 KAREN DR HOLTS SUMMIT	MO 65043-2522 MO 65043-2522	Telephone(573) 896-8567Level of CareALF**CountyCALLAWAYRegion6	Alzheimer's UnitYesBed Capacity50DMH LicensedNoFacility Number21318
TIMBERS, THE 239 KAREN DRIVE HOLTS SUMMIT Mailing Address 239 KAREN DRIVE HOLTS SUMMIT	MO 65043-2522 MO 65043-2522	Telephone(573) 415-0390Level of CareALF**CountyCALLAWAYRegion6	Alzheimer's UnitNoBed Capacity50DMH LicensedNoFacility Number30384
VALLEY PARK NORTH 2631 FAIRWAY DR FULTON Mailing Address 2631 FAIRWAY DR FULTON	MO 65251-3936 MO 65251-3936	Telephone(573) 592-4995Level of CareRCFCountyCALLAWAYRegion6	Alzheimer's UnitNoBed Capacity19DMH LicensedNoFacility Number29982
VALLEY PARK RETIREMENT CEN 355 KAREN DR HOLTS SUMMIT Mailing Address 355 KAREN DR HOLTS SUMMIT	NTER MO 65043-2519 MO 65043-2519	Telephone(573) 896-0208Level of CareRCFCountyCALLAWAYRegion6	Alzheimer's UnitNoBed Capacity22DMH LicensedNoFacility Number27986

ARROWHEAD SENIOR LIVIN	G COMMUNITY	Talaphana $(572) 202 7111$	Alzheimen's Unit	V
6100 ARROWHEAD DRIVE	NO. 65065 2754	Telephone (573) 302-7111	Alzheimer's Unit	Y
OSAGE BEACH	MO 65065-2754	Level of Care ALF**	Bed Capacity	9
Mailing Address 6100 ARROWH		County CAMDEN	DMH Licensed	N
OSAGE BEACH	MO 65065-2754	Region 6	Facility Number	3153
ARROWHEAD SENIOR LIVIN	G COMMUNITY			
6100 ARROWHEAD DRIVE		Telephone (573) 302-7111	Alzheimer's Unit	N
OSAGE BEACH	MO 65065-2754	Level of Care SNF	Bed Capacity	8
Mailing Address 6100 ARROWH		County CAMDEN	DMH Licensed	Ν
OSAGE BEACH	MO 65065-2754	Region 6 Medicare/Medicaid	Facility Number	3153
BRISTOL MANOR OF CAMDE	NTON			
75 FOURTH ST		Telephone (573) 346-6800	Alzheimer's Unit	Ν
CAMDENTON	MO 65020-6891	Level of Care RCF	Bed Capacity	
Mailing Address 75 FOURTH ST		County CAMDEN	DMH Licensed	١
CAMDENTON	MO 65020-6891	Region 6	Facility Number	179
CAMDENTON WINDSOR EST	ATES			
2042 N BUSINESS ROUTE 5		Telephone (573) 346-5654	Alzheimer's Unit	1
CAMDENTON	MO 65020-2611	Level of Care SNF	Bed Capacity	
Mailing Address 2042 N BUSINE	ESS ROUTE 5	County CAMDEN	DMH Licensed	1
CAMDENTON	MO 65020-2611	Region 6 Medicare/Medicaid	Facility Number	0868
LAKE PARKE SENIOR LIVING	3			
145 4TH ST		Telephone (573) 745-0874	Alzheimer's Unit	Ν
CAMDENTON	MO 65020-7138	Level of Care RCF	Bed Capacity	4
Mailing Address 145 4TH ST		County CAMDEN	DMH Licensed	1
CAMDENTON	MO 65020-7138	Region 6	Facility Number	300
OSAGE BEACH REHABILITAT	FION AND HEALTH CARE CENTER			
844 PASSOVER RD		Telephone (573) 348-2225	Alzheimer's Unit	1
OSAGE BEACH	MO 65065-2834	Level of Care SNF	Bed Capacity	1
Mailing Address 844 PASSOVER	R RD	County CAMDEN	DMH Licensed	Y
OSAGE BEACH	MO 65065-2834	Region 6 Medicare/Medicaid	Facility Number	061
OZARK REHABILITATION &	HEALTH CARE CENTER			
1083 OZARK CARE DR		Telephone (573) 348-1711	Alzheimer's Unit	1
OSAGE BEACH	MO 65065-3016	Level of Care SNF	Bed Capacity	
Mailing Address PO BOX 270		County CAMDEN	DMH Licensed	I
8		Region 6 Medicare/Medicaid	Facility Number	062

CAMDEN

AUBURN CREEK - ASSISTED LIVI	NG BY AMERICARE			
2910 BEAVER CREEK DR		Telephone (573) 651-0199	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63701-1732	Level of Care ALF	Bed Capacity	53
Mailing Address 2910 BEAVER CREI	EK DR	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-1732	Region 2	Facility Number	19892

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BARNABAS ACRES				
210 FRANKS LN		Telephone (573) 803-8887	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-8439	Level of Care ALF	Bed Capacity	56
Mailing Address 210 FRANKS LN		County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-8439	Region 2	Facility Number	05130
		C C		
CAPETOWN ASSISTED LIVING				
2857 CAPE LACROIX RD		Telephone (573) 334-4855	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63701-8588	Level of Care ALF**	Bed Capacity	48
Mailing Address 2857 CAPE LACRO	IX RD	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-8588	Region 2	Facility Number	23989
CHATEAU GIRARDEAU				
3120 INDEPENDENCE ST		Telephone (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5043	Level of Care SNF	Bed Capacity	75
Mailing Address 3120 INDEPENDEN	ICE ST	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5043	Region 2 Medicare/Medicaid	Facility Number	01386
CHATEAU GIRARDEAU				
3120 INDEPENDENCE ST		Telephone (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5043	Level of Care ALF**	Bed Capacity	55
Mailing Address 3120 INDEPENDEN		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5043	Region 2	Facility Number	01386
FOUNTAINDI FAULODOF				
FOUNTAINBLEAU LODGE 2001 NORTH KINGSHIGHWAY		Telephone (573) 335-1999	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-2193	Level of Care ALF	Bed Capacity	56
Mailing Address 2001 NORTH KING		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-2193	Region 2	Facility Number	12751
		Region -		12751
FOUNTAINBLEAU LODGE				
2001 NORTH KINGSHIGHWAY		Telephone (573) 335-1999	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-2193	Level of Care SNF	Bed Capacity	33
Mailing Address 2001 NORTH KING	SHIGHWAY	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-2193	Region 2 Medicare/Medicaid	Facility Number	12751
FREDERICK STREET MANOR				
429 NORTH FREDERICK STREET		Telephone (573) 334-2662	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4834	Level of Care RCF*	Bed Capacity	32
Mailing Address 429 NORTH FREDE		County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-4834	Region 2	Facility Number	02662
HEARTLAND CARE AND REHABI	П ІТАТІОМ СЕМТЕР			
2525 BOUTIN DR	LITATION CENTER	Telephone (573) 334-5225	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63701-8551	Level of Care SNF	Bed Capacity	102
Mailing Address 2525 BOUTIN DR		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-8551	Region 2 Medicare/Medicaid	Facility Number	01023
-				

LA CECON MANOR				
JACKSON MANOR 710 BROADRIDGE DR		Telephone (573) 243-3101	Alzheimer's Unit	No
JACKSON	MO 63755-3042	Level of Care SNF	Bed Capacity	90
Mailing Address 710 BROADRID		County CAPE GIRARDEAU	DMH Licensed	90 No
JACKSON	MO 63755-3042	•	Facility Number	03438
JACKSON	WO 03755-5042	Region 2 Medicare/Medicaid	Facility Number	03438
LIFE CARE CENTER OF CAPE	GIRARDEAU			
365 SOUTH BROADVIEW ST		Telephone (573) 335-2086	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5725	Level of Care SNF	Bed Capacity	120
Mailing Address 365 SOUTH BRO	DADVIEW ST	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5725	Region 2 Medicare/Medicaid	Facility Number	01032
LUTHERAN HOME ASSISTED	LIVING			
2825 BLOOMFIELD RD		Telephone (573) 335-0158	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-6335	Level of Care ALF**	Bed Capacity	115
Mailing Address 2825 BLOOMFIE		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6335	Region 2	Facility Number	13536
CALEGINANDEAU	MO 03703-0335	Kegion 2	Facility Rumber	15550
LUTHERAN HOME, THE				
2825 BLOOMFIELD RD		Telephone (573) 335-0158	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63703-6335	Level of Care SNF	Bed Capacity	274
Mailing Address 2825 BLOOMFIE		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6335	Region 2 Medicare/Medicaid	Facility Number	13536
MAPLE CREST MANOR				
430 NORTH FREDERICK STREE	Г	Telephone (573) 334-2662	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4835	Level of Care RCF*	Bed Capacity	48
Mailing Address 430 NORTH FRE	EDERICK STREET	County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-4835	Region 2	Facility Number	03628
MONTICELLO HOUSE				
1115 K LAND DR		Telephone (573) 243-8989	Alzheimer's Unit	Yes
JACKSON	MO 63755-2588	Level of Care SNF	Bed Capacity	105
Mailing Address PO BOX 740		County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-0740	Region 2 Medicare/Medicaid	Facility Number	14454
MONTICELLO HOUSE				
1115 K LAND DR		Telephone (573) 243-8989	Alzheimer's Unit	No
JACKSON	MO 63755-2588	Level of Care RCF*	Bed Capacity	32
Mailing Address PO BOX 740		County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-0740	Region 2	Facility Number	14454
NEWBRIDGE RETIREMENT C	OMMUNITY			
1205 S. MOUNT AUBURN RD		Telephone (573) 803-1863	Alzheimer's Unit	YES
CAPE GIRARDEAU	MO 63703-6581	Level of Care ALF**	Bed Capacity	94
Mailing Address 1205 S. MOUNT		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6581	Region 2	Facility Number	33246
		105101 -		25210

RATLIFF CARE CENTER				
717 NORTH SPRIGG		Telephone (573) 335-5810	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4815	Level of Care SNF	Bed Capacity	46
Mailing Address 717 NORTH SPRIG	ſĠ	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-4815	Region 2 Medicare/Medicaid	Facility Number	17420
VILLAS OF JACKSON LLC THE				
670 BROADRIDGE DRIVE		Telephone (573) 986-8210	Alzheimer's Unit	Yes
JACKSON	MO 63755-3044	Level of Care ALF**	Bed Capacity	84
Mailing Address 670 BROADRIDGE	DRIVE	County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-3044	Region 2	Facility Number	30623
		CARROLL		
BRISTOL MANOR OF CARROLL	ION			
1016 EAST 10TH ST		Telephone (660) 542-2349	Alzheimer's Unit	No
CARROLLTON	MO 64633-9348	Level of Care RCF	Bed Capacity	12
Mailing Address 1016 EAST 10TH S	Т	County CARROLL	DMH Licensed	No
CARROLLTON	MO 64633-9348	Region 4	Facility Number	18316
CARROLLION	MO 04033-9348	Kegion 4	Facility Number	18310
CARROLL HOUSE				
307 GRAND		Telephone (660) 542-1599	Alzheimer's Unit	No
CARROLLTON	MO 64633-2265	Level of Care SNF	Bed Capacity	63
Mailing Address 307 GRAND		County CARROLL	DMH Licensed	No
CARROLLTON	MO 64633-2265	Region 4 Medicare/Medicaid	Facility Number	22027
LIFE CARE CENTER OF CARROL 300 LIFE CARE LN CARROLLTON Mailing Address 300 LIFE CARE LN CARROLLTON	MO 64633-1861	Telephone(660) 542-0155Level of CareSNFCountyCARROLLRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 11500
		CARTER		
RIVERWAYS MANOR				
403 WATERCRESS RD		Telephone (573) 323-4282	Alzheimer's Unit	No
VAN BUREN	MO 63965-9100	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 969		County CARTER	DMH Licensed	No
VAN BUREN	MO 63965-0969	Region 2 Medicare/Medicaid	Facility Number	06744
SKYLINE ASSISTED LIVING LLC				
100 HARD ROCK RD		Telephone (573) 323-2108	Alzheimer's Unit	No
VAN BUREN	MO 63965-7259	Level of Care ALF**	Bed Capacity	26
Mailing Address PO BOX 780		County CARTER	DMH Licensed	Yes
	MO 63965-0780	•		29947
MAN DURLIN	MO 05705-0700	Kegion 2	racinty Nulliber	29947
		CASS		
BEAUTIFUL SAVIOR HOME				
1003 SOUTH CEDAR ST		Telephone (816) 331-0781	Alzheimer's Unit	No
BELTON	MO 64012-3703	Level of Care SNF	Bed Capacity	126
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed	No
BELTON	MO 64012-3703	Region 3 Medicare/Medicaid	Facility Number	00342
1003 SOUTH CEDAR ST BELTON Mailing Address 1003 S CEDAR ST		Telephone (816) 331-0781 Level of Care SNF County CASS	Bed Capacity DMH Licensed	

BEAUTIFUL SAVIOR HOME			
1003 SOUTH CEDAR ST	Telephone (816) 331-0781	Alzheimer's Unit	No
BELTON MO 64012-3703	Level of Care ALF	Bed Capacity	55
Mailing Address 1003 S CEDAR ST	County CASS	DMH Licensed	No
BELTON MO 64012-3703	Region 3	Facility Number	00342
BENTON HOUSE OF RAYMORE			
2100 JOHNSTON DR	Telephone (816) 322-2111	Alzheimer's Unit	Yes
RAYMORE MO 64083-8122	Level of Care ALF**	Bed Capacity	95
Mailing Address 2100 JOHNSTON DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-8122	Region 3	Facility Number	29896
BRISTOL MANOR OF PLEASANT HILL			
2124 HIGHRIDGE	Telephone (816) 987-2562	Alzheimer's Unit	No
PLEASANT HILL MO 64080-1912	Level of Care RCF	Bed Capacity	12
Mailing Address 2124 HIGHRIDGE	County CASS	DMH Licensed	No
PLEASANT HILL MO 64080-1912	Region 3	Facility Number	16538
BRISTOL MANOR OF RAYMORE			
604 EAST SUNRISE DR	Telephone (816) 322-6782	Alzheimer's Unit	No
RAYMORE MO 64083-9037	Level of Care RCF	Bed Capacity	12
Mailing Address 604 EAST SUNRISE DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-9037	Region 3	Facility Number	19730
CARNEGIE VILLAGE REHABILITATION & HEALTH CARE CENT	ΓER, LLC		
CARNEGIE VILLAGE REHABILITATION & HEALTH CARE CENT 105 BERNARD DRIVE	TER, LLC Telephone (816) 348-8815	Alzheimer's Unit	No
		Alzheimer's Unit Bed Capacity	No 78
105 BERNARD DRIVE	Telephone (816) 348-8815		
105 BERNARD DRIVEBELTONMO 64012-6181	Telephone (816) 348-8815 Level of Care SNF	Bed Capacity	78
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVE	Telephone(816) 348-8815Level of CareSNFCountyCASS	Bed Capacity DMH Licensed	78 No
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVE	Telephone(816) 348-8815Level of CareSNFCountyCASS	Bed Capacity DMH Licensed	78 No
105 BERNARD DRIVEMO64012-6181BELTONMO64012-6181BELTONMO64012-6181	Telephone(816) 348-8815Level of CareSNFCountyCASS	Bed Capacity DMH Licensed	78 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address105 BERNARD DRIVEBELTONMO64012-6181CARNEGIE VILLAGE SENIOR LIVING COMMUNITY	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	78 No 30531
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVE BELTON MO 64012-6181 CARNEGIE VILLAGE SENIOR LIVING COMMUNITY 103 BERNARD DR	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	78 No 30531 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address105 BERNARD DRIVEBELTONMO64012-6181CARNEGIE VILLAGE SENIOR LIVING COMMUNITY103 BERNARD DRBELTONMOBELTONMO64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	78 No 30531 No 85
105 BERNARD DRIVEBELTONMO 64012-6181Mailing Address 105 BERNARD DRIVUBELTONMO 64012-6181CARNEGIE VILLAGE SENIOR LIVURG COMMUNITY103 BERNARD DRBELTONMO 64012-6182Mailing Address 103 BERNARD DR	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 85 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address 105 BERNARD DRIVUTEBELTONMO64012-6181DERNARD DR103 BERNARD DRMO64012-6182BELTONMO64012-6182Mailing Address 103 BERNARD DRMO64012-6182BELTONMO64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 85 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address105 BERNARD DRIVBELTONMO64012-6181CARNEGIE VILLAGE SENIOR LIVVNG COMMUNITY103 BERNARD DRBELTONMOBELTONMO64012-6182Mailing Address103 BERNARD DRBELTONMO64012-6182Mailing Address103 BERNARD DRBELTONMO64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 85 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address 105 BERNARD DRIVUTEBELTONMO64012-6181DERNARD DR103 BERNARD DRMO64012-6182BELTONMO64012-6182Mailing Address 103 BERNARD DRMO64012-6182BELTONMO64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	78 No 30531 No 25482
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVUTS BELTON MO 64012-6181 CARNEGIE VILLAGE SENIOR LIVUS COMMUNITS 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 SELTON MO 64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	78 No 30531 No 25482 No
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVUTS BELTON MO 64012-6181 CARNEGIE VILLAGE SENIOR LIVUS COMMUNITY 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 SOUT EAST ELM MO 64012-6182	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	78 No 30531 No 25482 No 118
105 BERNARD DRIVEBELTONMO 64012-6181Mailing Address 105 BERNARD DRIVBELTONMO 64012-6181CARNEGIE VILLAGE SENIOR LIVVIC COMMUNITY103 BERNARD DRBELTONMO 64012-6182BELTONMO 64012-6182Mailing Address 103 BERNARD DRBELTONMO 64012-6182CROWN REHAB AND HEALTHCARE VENTER3001 EAST ELMHARRISONVILLEMO 64701-1196Mailing Address 3001 EAST ELM	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 25482 No 118 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address 105 BERNARD DRIVUBELTONMO64012-6181CARNEGIE VILLAGE SENIOR LIVVO SUMUNITY103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182HARRISONVILLEMO64701-1196HARRISONVILLEMO64701-1196	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 25482 No 118 No
105 BERNARD DRIVEBELTONMO 64012-6181Mailing Address 105 BERNARD DRIVUBELTONMO 64012-6181CARNEGIE VILLAGE SENIOR LIVVS COMMUNITY103 BERNARD DRBELTONMO 64012-6182Mailing Address 103 BERNARD DRBELTONMO 64012-6182Mailing Address 103 BERNARD DRBELTONMO 64012-6182HARRISONVILLEMO 64012-6182HARRISONVILLEMO 64701-1196HARRISONVILLEMO 64701-1196HARRISONVILLEMO 64701-1196	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASSRegion3Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	78 No 30531 No 25482 No 118 No
105 BERNARD DRIVEBELTONMO64012-6181Mailing Address 105 BERNARD DRIVUBELTONMO64012-6181CARNEGIE VILLAGE SENIOR LIVVO SUMUNITY103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182Mailing Address 103 BERNARD DRBELTONMO64012-6182HARRISONVILLEMO64701-1196HARRISONVILLEMO64701-1196	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	78 No 30531 No 25482 No 118 No 21031
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVU BELTON MO 64012-6181 CARNEGIE VILLAGE SENIOR LIVURG COMMUNITY 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 CROWN REHAB AND HEALTHCAUETER 3001 EAST ELM HARRISONVILLE MO 64701-1196 Mailing Address 3001 EAST ELM HARRISONVILLE MO 64701-1196	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 380-6525Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 331-3111	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	78 No 30531 No 25482 No 118 No 21031 Yes
105 BERNARD DRIVE BELTON MO 64012-6181 Mailing Address 105 BERNARD DRIVU BELTON MO 64012-6181 CARNEGIE VILLAGE SENIOR LIVUS COMMUNITY 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 Mailing Address 103 BERNARD DR BELTON MO 64012-6182 CROWN REHAB AND HEALTHCAUETER 3001 EAST ELM HARRISONVILLE MO 64701-1196 Mailing Address 3001 EAST ELM HARRISONVILLE MO 64701-1196	Telephone(816) 348-8815Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 322-0844Level of CareALF**CountyCASSRegion3Telephone(816) 380-6525Level of CareSNFCountyCASSRegion3Medicare/MedicaidTelephone(816) 331-3111Level of CareSNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	78 No 30531 No 25482 No 118 No 21031 Yes 108

FOXWOOD SPRINGS LIVING CENTER			
1500 WEST FOXWOOD DR	Telephone (816) 331-3111	Alzheimer's Unit	No
RAYMORE MO 64083-9347	Level of Care ALF**	Bed Capacity	62
Mailing Address 1500 WEST FOXWOOD DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-9347	Region 3	Facility Number	02649
GOLDEN YEARS CENTER FOR REHAB AND HEALTHCARE			
2001 JEFFERSON PARKWAY	Telephone (816) 380-4731	Alzheimer's Unit	Yes
HARRISONVILLE MO 64701-3714	Level of Care SNF	Bed Capacity	128
Mailing Address 2001 JEFFERSON PARKWAY	County CASS	DMH Licensed	No
HARRISONVILLE MO 64701-3714	Region ³ Medicare/Medicaid	Facility Number	12458
MEADOW VIEW HEALTH & REHABILITATION			
2203 EAST MECHANIC ST	Telephone (816) 380-2622	Alzheimer's Unit	Yes
HARRISONVILLE MO 64701-2060	Level of Care SNF	Bed Capacity	120
Mailing Address 2203 EAST MECHANIC ST	County CASS	DMH Licensed	No
HARRISONVILLE MO 64701-2060	Region 3 Medicare/Medicaid	Facility Number	00968
PLEASANT HILL HEALTH AND REHABILITATION CENTER			37
1300 BROADWAY	Telephone (816) 540-2116	Alzheimer's Unit	Yes
PLEASANT HILL MO 64080-1842	Level of Care SNF	Bed Capacity	90 N
Mailing Address 1300 BROADWAY	County CASS	DMH Licensed	No
PLEASANT HILL MO 64080-1842	Region 3 Medicare/Medicaid	Facility Number	15101
SUNRISE NURSING & MEMORY CARE			
600 EAST SUNRISE DR	Telephone (816) 322-1991	Alzheimer's Unit	Yes
RAYMORE MO 64083-9037	Level of Care SNF	Bed Capacity	152
Mailing Address 600 EAST SUNRISE DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-9037	Region 3 Medicare/Medicaid	Facility Number	16170
	CEDAR		
COMMUNITY SPRINGS HEALTHCARE FACILITY			
400 EAST HOSPITAL RD	Telephone (417) 876-2531	Alzheimer's Unit	Yes
EL DORADO SPRINGS MO 64744-2024	Level of Care SNF	Bed Capacity	120
Mailing Address 400 EAST HOSPITAL RD	County CEDAR	DMH Licensed	No
EL DORADO SPRINGS MO 64744-2024	Region ¹ Medicare/Medicaid	Facility Number	01740
EL DODADO ODDINOS DESIDENTIAL CADE			
EL DORADO SPRINGS RESIDENTIAL CARE	Telephone $(417) 97(4079)$	Alzheimer's Unit	NT -
805 NORTH JACKSON ST EL DORADO SPRINGS MO 64744-2912	Telephone (417) 876-4278 Level of Care RCF	Alzheimer's Unit Bed Capacity	No 60
Mailing Address 805 NORTH JACKSON ST	County CEDAR	DMH Licensed	Yes
EL DORADO SPRINGS MO 64744-2912	Region 1	Facility Number	12621
LAKE STOCKTON HEALTHCARE FACILITY			
1523 3RD ROAD	Telephone (417) 276-5126	Alzheimer's Unit	Yes
STOCKTON MO 65785-9608	Level of Care SNF	Bed Capacity	90
Mailing Address PO BOX 945	County CEDAR	DMH Licensed	No
STOCKTON MO 65785-0945	Region ¹ Medicare/Medicaid	Facility Number	07680
			0,000

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

CHARITON

102 NORTH WILLIE ST				
SALISBURY	MO	65281-1458		
Mailing Address 102 NORTH WILLIE ST				
SALISBURY	MO	65281-1458		

Telephone	(660) 388-5728	Alzheimer's Unit	No
Level of Care	RCF	Bed Capacity	12
County CHA	RITON	DMH Licensed	No
Region 5		Facility Number	18325

BRUNSWICK NURSING & R	EHAB			
721 W HARRISON ST		Telephone (660) 548-3182	Alzheimer's Unit	No
BRUNSWICK	MO 65236-1096	Level of Care SNF	Bed Capacity	60
Mailing Address 721 W HARR	ISON ST	County CHARITON	DMH Licensed	No
BRUNSWICK	MO 65236-1096	Region 5 Medicare/Medicaid	Facility Number	03123
CHARITON PARK HEALTH	CARE CENTER			
	CARE CENTER			N
902 MANOR DR		Telephone (660) 388-6486	Alzheimer's Unit	No
SALISBURY	MO 65281-1236	Level of Care SNF	Bed Capacity	120
Mailing Address 902 MANOR	DR	County CHARITON	DMH Licensed	No
SALISBURY	MO 65281-1236	Region 5 Medicare/Medicaid	Facility Number	06469

PIONEER SKILLED NURSING CENTER 1500 SOUTH KANSAS AVE Telephone (660) 376-2001 Alzheimer's Unit No MARCELINE SNF MO 64658-1716 Level of Care **Bed Capacity** 96 Mailing Address 1500 S KANSAS AVE County CHARITON **DMH Licensed** No MARCELINE MO 64658-1716 **Facility Number** Medicare/Medicaid Region 5 05900

CHRISTIAN

BAPTIST HOME, THE			
1625 WEST GARTON RD		Telephone (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care ICF	Bed Capacity 33
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number21509
BAPTIST HOME, THE			
1625 WEST GARTON RD		Telephone (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care ALF**	Bed Capacity 30
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number21509
BRADFORD COURT - ASSISTED L	IVING BY AMERICARE		
902 NORTH MAIN		Telephone (417) 725-0177	Alzheimer's Unit No
NIXA	MO 65714-9384	Level of Care ALF**	Bed Capacity 50
Mailing Address 902 NORTH MAIN		County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9384	Region 1	Facility Number17732
CASTLEWOOD SENIOR LIVING T	THE		
1538 N OLD CASTLE ROAD		Telephone (417) 724-8188	Alzheimer's Unit Yes
NIXA	MO 65714-9902	Level of Care ALF**	Bed Capacity 66
Mailing Address 1538 N OLD CASTL		County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9902	e e e e e e e e e e e e e e e e e e e	
MAA	MO 03/14-9902	Region 1	Facility Number30722

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

CENTURY PINES ASSISTED LIVING			
709 EAST MCCRACKEN RD	Telephone (417) 581-7278	Alzheimer's Unit	No
OZARK MO 65721-9499	Level of Care ALF	Bed Capacity	80
Mailing Address 709 EAST MCCRACKEN RD	County CHRISTIAN	DMH Licensed	Yes
OZARK MO 65721-9499	Region 1	Facility Number	01200
	Acground 1		01200
CENTURY PINES ASSISTED LIVING			
709 EAST MCCRACKEN RD	Telephone (417) 581-7278	Alzheimer's Unit	No
OZARK MO 65721-9499	Level of Care ALF**	Bed Capacity	23
Mailing Address 709 EAST MCCRACKEN RD	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-9499	Region 1	Facility Number	01200
COTTAGE AT CENTURY PINES, THE			
707 EAST MCCRACKEN ROAD	Telephone (417) 581-7278	Alzheimer's Unit	Yes
OZARK MO 65721-9499	Level of Care ALF**	Bed Capacity	24
Mailing Address 709 EAST MCCRACKEN ROAD	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-9499	Region 1	Facility Number	30579
	Kigion 1	Tuenny Tuniber	50577
ESSEX OF OZARK, THE			
5173 NORTH 22ND	Telephone (417) 485-4185	Alzheimer's Unit	No
OZARK MO 65721-7637	Level of Care RCF	Bed Capacity	12
Mailing Address 5173 NORTH 22ND	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-7637	Region ¹	Facility Number	24318
HOPEDALE COTTAGE ASSISTED LIVING THE			
1314 W SCHOOL STREET	Telephone (417) 581-1308	Alzheimer's Unit	Yes
OZARK MO 65721-6618	Level of Care ALF**	Bed Capacity	14
Mailing Address 1314 W SCHOOL STREET	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-6618	Region 1	Facility Number	30302
LIFE ENHANCEMENT VILLAGE OF THE OZARKS INC			
732 SOUTH GREGG ROAD	Telephone (417) 725-5166	Alzheimer's Unit	No
NIXA MO 65714-7419	Level of Care RCF*	Bed Capacity	44
Mailing Address 732 SOUTH GREGG RD	County CHRISTIAN	DMH Licensed	Yes
NIXA MO 65714-7419	Region 1	Facility Number	14190
NIXA NURSING & REHAB			
1104 NORTH MAIN ST	Telephone (417) 725-1777	Alzheimer's Unit	No
NIXA MO 65714-9316	Level of Care SNF	Bed Capacity	82
Mailing Address 1104 N MAIN ST	County CHRISTIAN	DMH Licensed	No
NIXA MO 65714-9316	Region 1 Medicare/Medicaid	Facility Number	13840
	negion i intenteare/intenteald	i acmity i vullibel	13040
NORTHPARK VILLAGE - ASSISTED LIVING BY AMERICARE			
4449 N STATE HIGHWAY NN	Telephone (417) 581-3200	Alzheimer's Unit	No
OZARK MO 65721-7221	Level of Care ALF**	Bed Capacity	52
Mailing Address 4449 N STATE HIGHWAY NN	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-7221	Region ¹	Facility Number	20003

OAKS COTTAGE ASSISTED LIVIN	G, THE			
5448 N 2ND AVENUE		Telephone (417) 581-0330	Alzheimer's Unit	Yes
OZARK	MO 65721-6210	Level of Care ALF**	Bed Capacity	12
Mailing Address 5448 N 2ND AVENU	JE	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-6210	Region 1	Facility Number	31804
OZARK NURSING & CARE CENTE	ъ			
1486 NORTH RIVERSIDE RD	ZK	Telephone (417) 581-7126	Alzheimer's Unit	No
OZARK	MO 65721-7688	Level of Care SNF	Bed Capacity	93
Mailing Address 1486 NORTH RIVER		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-7688	•	Facility Number	
ULARK	MO 03721-7088	Region 1 Medicare/Medicaid	Facility Number	06240
OZARK RIVERVIEW MANOR				N
1200 WEST HALL ST		Telephone (417) 581-6025	Alzheimer's Unit	No
OZARK	MO 65721-9103	Level of Care SNF	Bed Capacity	90
Mailing Address PO BOX 157		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-0157	Region ¹ Medicare/Medicaid	Facility Number	01426
PROMISE CARE CENTER, LLC				
1111 CARE AVE		Telephone (417) 494-5037	Alzheimer's Unit	No
NIXA	MO 65714-9679	Level of Care RCF	Bed Capacity	126
Mailing Address 1111 CARE AVE		County CHRISTIAN	DMH Licensed	No
NIXA	MO 65714-9679	Region 1	Facility Number	15935
RIVERVIEW RESIDENTIAL PLACE	E			
1200 WEST HALL ST		Telephone (417) 581-2510	Alzheimer's Unit	No
OZARK	MO 65721-9103	Level of Care RCF*	Bed Capacity	40
Mailing Address PO BOX 157		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-0157	Region ¹	Facility Number	01426
SPECIAL FORCE FAMILY MINIST	RIES			
428 SOUTH HARRISON ST		Telephone (417) 725-7917	Alzheimer's Unit	No
NIXA	MO 65714-7809	Level of Care RCF	Bed Capacity	12
Mailing Address PO BOX 882		County CHRISTIAN	DMH Licensed	Yes
NIXA	MO 65714-0882	Region 1	Facility Number	18764
	CLA	RK		
CLARK COUNTY NURSING HOME	E			
1260 N JOHNSON ST		Telephone (660) 727-3303	Alzheimer's Unit	No
КАНОКА	MO 63445-1100	Level of Care RCF*	Bed Capacity	22
Mailing Address 1260 N JOHNSON ST	Г	County CLARK	DMH Licensed	No
КАНОКА	MO 63445-1100	Region 5	Facility Number	01480
CLARK COUNTY NURSING HOME	2			
1260 N JOHNSON ST		Telephone (660) 727-3303	Alzheimer's Unit	No
КАНОКА	MO 63445-1100	Level of Care SNF	Bed Capacity	103
Mailing Address 1260 N JOHNSON S	Г	County CLARK	DMH Licensed	No
KAHOKA	MO 63445-1100	Region ⁵ Medicare/Medicaid	Facility Number	01480

CLAY

ADDINGTON PLACE OF SH	OAL CREEK			
9601 NORTH TULLIS DR		Telephone (816) 407-9667	Alzheimer's Unit	Yes
KANSAS CITY	MO 64157-7890	Level of Care ALF**	Bed Capacity	88
Mailing Address 9601 NORTH	I TULLIS DR	County CLAY	DMH Licensed	No
KANSAS CITY	MO 64157-7890	Region 4	Facility Number	28129
ASPIRE SENIOR LIVING EX	CELSIOR SPRINGS			
1003 MEADOWLARK LN		Telephone (816) 630-3145	Alzheimer's Unit	No
EXCELSIOR SPRINGS	MO 64024-3304	Level of Care SNF	Bed Capacity	108
Mailing Address 1003 MEADO	DWLARK LN	County CLAY	DMH Licensed	No
EXCELSIOR SPRINGS	MO 64024-3304	Region 4 Medicare/Medicaid	Facility Number	19197
AVALON VIEW HEALTH AN	ND WELLNESS			
1200 WEST COLLEGE ST		Telephone (816) 781-3020	Alzheimer's Unit	Yes
LIBERTY	MO 64068-1036	Level of Care SNF	Bed Capacity	140
Mailing Address 1200 WEST (County CLAY	DMH Licensed	No
LIBERTY	MO 64068-1036	Region 4 Medicare/Medicaid	Facility Number	01961
BENTON HOUSE OF STALE	Y HILLS			
11071 N WOODLAND AVE		Telephone (816) 372-1888	Alzheimer's Unit	Yes
KANSAS CITY	MO 64155-1552	Level of Care ALF**	Bed Capacity	80
Mailing Address 11071 N WO		County CLAY	DMH Licensed	No
KANSAS CITY	MO 64155-1552	Region 4	Facility Number	30774
BRISTOL MANOR OF SMIT	HVILLE			
1502 SOUTH COMMERCIAL		Telephone (816) 532-4490	Alzheimer's Unit	No
SMITHVILLE	MO 64089-8474	Level of Care RCF	Bed Capacity	12
Mailing Address 1502 S COM		County CLAY	DMH Licensed	No
SMITHVILLE	MO 64089-8474	Region 4	Facility Number	17515
CEDARS OF LIBERTY HEA	LTH CARE CENTER			
200 WEST RUTH EWING RD		Telephone (816) 781-7600	Alzheimer's Unit	No
LIBERTY	MO 64068-9496	Level of Care RCF	Bed Capacity	206
Mailing Address 200 WEST RU		County CLAY	DMH Licensed	Yes
LIBERTY	MO 64068-9496	Region 4	Facility Number	13854
GRAND ROYALE, THE				
2900 NE KENDALLWOOD PK	WY	Telephone (816) 280-4280	Alzheimer's Unit	No
GLADSTONE	MO 64119-1831	Level of Care SNF	Bed Capacity	45
Mailing Address 2900 NE KEN	NDALLWOOD PKWY	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4 Medicare/Medicaid	Facility Number	03086
GRAND ROYALE, THE				
2900 NE KENDALLWOOD PK	WY	Telephone (816) 280-4280	Alzheimer's Unit	NO
GLADSTONE	MO 64119-1831	Level of Care ALF**	Bed Capacity	25
Mailing Address 2900 NE KEN	NDALLWOOD PKWY	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4	Facility Number	03086

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

HERITAGE VILLAGE OF GLADSTONE			
3000 NORTH EAST 64TH ST	Telephone (816) 454-5130	Alzheimer's Unit	No
GLADSTONE MO 64119-1569	Level of Care ALF**	Bed Capacity	60
Mailing Address 3000 NE 64TH ST	County CLAY	DMH Licensed	No
GLADSTONE MO 64119-1569	Region 4	Facility Number	12510
GLADSTONE 1410-1509	kegion →	Facility Nulliber	12310
LIBERTY HEALTH AND WELLNESS			
2201 GLENN HENDREN DR	Telephone (816) 736-8800	Alzheimer's Unit	No
LIBERTY MO 64068-3375	Level of Care SNF	Bed Capacity	143
Mailing Address 2201 GLENN HENDREN DR	County CLAY	DMH Licensed	No
LIBERTY MO 64068-3375	Region 4 Medicare/Medicaid	Facility Number	16715
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET	Telephone (816) 268-4000	Alzheimer's Unit	No
GLADSTONE MO 64119-7400	Level of Care ALF**	Bed Capacity	40
Mailing Address 2901 NE 72ND STREET	County CLAY	DMH Licensed	No
GLADSTONE MO 64119-7400	Region 4	Facility Number	30156
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET	Telephone (816) 268-4000	Alzheimer's Unit	No
GLADSTONE MO 64119-7400	Level of Care SNF	Bed Capacity	40
Mailing Address 2901 NE 72ND STREET	County CLAY	DMH Licensed	No
GLADSTONE MO 64119-7400	Region 4 Medicare/Medicaid	Facility Number	30156
MCCRITE PLAZA AT BRIARCLIFF ASSISTED LIVING			
1201 NW TULLISON RD	Telephone (816) 888-7930	Alzheimer's Unit	Yes
KANSAS CITY MO 64116-2639	Level of Care ALF**	Bed Capacity	164
Mailing Address 1201 NW TULLISON RD	County CLAY	DMH Licensed	No
KANSAS CITYMO64116-2639	Region 4	Facility Number	29084
MCCRITE PLAZA AT BRIARCLIFF SKILLED FACILITY			
1301 TULLISON ROAD	Telephone (816) 888-7930	Alzheimer's Unit	No
KANSAS CITY MO 64116-2640	Level of Care SNF	Bed Capacity	56
Mailing Address 1201 NW TULLISON ROAD	County CLAY	DMH Licensed	No
KANSAS CITY MO 64116-2639	Region 4 Medicare	Facility Number	29084
MOCKINGBIRD MANOR RESIDENTIAL CARE			
227 W FRANKLIN	Telephone (816) 781-8058	Alzheimer's Unit	No
LIBERTY MO 64068-1641	Level of Care RCF*	Bed Capacity	16
Mailing Address PO BOX 121	County CLAY	DMH Licensed	Yes
LIBERTY MO 64069-0121	Region 4	Facility Number	05450
NEW MARK CARE CENTER			
11221 NORTH NASHUA DR	Telephone (816) 734-4433	Alzheimer's Unit	Yes
KANSAS CITY MO 64155-1159	Level of Care SNF	Bed Capacity	199
Mailing Address 11221 N NASHUA DR	County CLAY	DMH Licensed	No
KANSAS CITY MO 64155-1159	Region 4 Medicare/Medicaid	Facility Number	12688

NORTERRE 2555 NORTERRE CIRCLE Telephone (816) 479-4793 **Alzheimer's Unit** No MO 64068-3313 Level of Care SNF **Bed Capacity** 60 LIBERTY Mailing Address 2555 NORTERRE CIRCLE County DMH Licensed No CLAY LIBERTY MO 64086-3313 **Facility Number** Region 4 31005 Medicare/Medicaid NORTERRE 2580 NORTERRE CIRCLE Telephone (816) 479-4793 **Alzheimer's Unit** Yes LIBERTY MO 64068-3412 ALF** 60 Level of Care **Bed Capacity** Mailing Address 2580 NORTERRE CIRCLE County CLAY **DMH Licensed** No LIBERTY MO 64068-3412 **Facility Number** Region 4 31005 NORTHLAND REHABILITATION & HEALTH CARE CENTER 4301 NE PARVIN ROAD Telephone (816) 702-8000 **Alzheimer's Unit** No KANSAS CITY Level of Care SNF 118 MO 64117-3001 **Bed Capacity** Mailing Address 4301 NE PARVIN ROAD County **DMH Licensed** No CLAY KANSAS CITY MO 64117-3001 Region 4 Medicare/Medicaid **Facility Number** 31230 OAK POINTE OF KEARNEY 200 MEADOWBROOK DR (816) 628-0075 Alzheimer's Unit Yes Telephone ALF** KEARNEY MO 64060-8788 Level of Care **Bed Capacity** 55 Mailing Address 200 MEADOWBROOK DR County CLAY DMH Licensed No KEARNEY MO 64060-8788 Region 4 **Facility Number** 29803 OUR LADY OF MERCY COUNTRY HOME 2160 MERCY DRIVE **Alzheimer's Unit** No Telephone (816) 781-5711 LIBERTY MO 64068-7955 Level of Care RCF* 44 **Bed Capacity** Mailing Address 2115 MATURANA DRIVE County **DMH Licensed** No CLAY LIBERTY MO 64068-7955 Region 4 **Facility Number** 06153 OXFORD GRAND AT SHOAL CREEK 8280 N TULLIS AVENUE Telephone (816) 781-8282 **Alzheimer's Unit** Yes KANSAS CITY MO 64158-7683 Level of Care ALF** **Bed Capacity** 98 Mailing Address 8280 N TULLIS AVENUE County CLAY **DMH Licensed** No KANSAS CITY Region 4 **Facility Number** MO 64158-7683 30758 PLEASANT VALLEY MANOR CARE CENTER 6814 SOBBIE RD Telephone (816) 781-5277 **Alzheimer's Unit** No LIBERTY MO 64068-9555 102 Level of Care SNF **Bed Capacity** Mailing Address 6814 SOBBIE RD DMH Licensed County CLAY No LIBERTY MO 64068-9555 Region 4 Medicare/Medicaid **Facility Number** 06020 VALLEY MANOR AND REHABILITATION CENTER 1410 HOSPITAL DR Telephone (816) 637-1010 **Alzheimer's Unit** No EXCELSIOR SPRINGS MO 64024-1168 Level of Care SNF 120 **Bed Capacity** Mailing Address 1410 HOSPITAL DR County CLAY **DMH Licensed** No EXCELSIOR SPRINGS **Facility Number** MO 64024-1168 Region 4 Medicare/Medicaid 02425

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

WELLINGTON SENIOR LIVING,TI 1051 KENT STREET LIBERTY Mailing Address 1051 KENT STREET LIBERTY	MO 64068-2257	Telephone(816) 222-0379Level of CareALF**CountyCLAYRegion4	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	YES 66 No 33016
WESTBROOK CARE CENTER, INC 401 S PLATTE CLAY WAY KEARNEY Mailing Address 401 S PLATTE CLA KEARNEY	MO 64060-7714	Telephone(816) 628-2222Level of CareRCF*CountyCLAYRegion4	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27 No 19757
	CLIN	ΓΟΝ		
BRISTOL MANOR OF CAMERON 920 NORTH HARRIS CAMERON Mailing Address 920 NORTH HARRIS CAMERON	MO 64429-1145 MO 64429-1145	Telephone(816) 632-6133Level of CareRCFCountyCLINTONRegion4	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 18295
CAMERON NURSING CENTER 801 EUCLID AVE CAMERON Mailing Address PO BOX 438 CAMERON	MO 64429-2003 MO 64429-0438	Telephone(816) 632-7254Level of CareSNFCountyCLINTONRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 120 No 00983
GOWER CONVALESCENT CENTE 323 SOUTH HIGHWAY 169 GOWER Mailing Address PO BOX 170 GOWER	R, INC MO 64454-9116 MO 64454-0170	Telephone(816) 424-6483Level of CareSNFCountyCLINTONRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 82 No 03107
NICK'S HEALTH CARE CENTER, I 253 EAST HIGHWAY 116 PLATTSBURG Mailing Address 253 EAST HWY 116 PLATTSBURG	LLC MO 64477-1561 MO 64477-1561	Telephone(816) 539-2376Level of CareSNFCountyCLINTONRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 70 No 22058
OAKRIDGE OF PLATTSBURG 205 EAST CLAY AVE PLATTSBURG Mailing Address PO BOX 247 PLATTSBURG	MO 64477-8100 MO 64477-0247	Telephone(816) 539-2128Level of CareSNFCountyCLINTONRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 60 No 05994
VILLAGE WEST, THE 318 EAST LITTLE BRICK ROAD CAMERON Mailing Address 318 EAST LITTLE B CAMERON	MO 64429-1231 RICK RD MO 64429-1231	Telephone (816) 632-7611 Level of Care RCF* County CLINTON Region 4	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27 No 18104

VILLAGE, THE 320 EAST LITTLE BRICK RD CAMERON MO 64429-1231 Mailing Address 320 EAST LITTLE BRICK RD CAMERON MO 64429-1231

Telephone(816) 632-7611Level of CareRCF*CountyCLINTONRegion4

Alzheimer's Unit	No
Bed Capacity	49
DMH Licensed	No
Facility Number	08945

	COL	Æ			
ARBORS AT WESTBROOK TERRACE-A	LZHEIMER'S ASSISTED LIVIN	G BY AMERICA	RE		
3409 NORTH 10 MILE DR		Telephone	(573) 556-5648	Alzheimer's Unit	Yes
JEFFERSON CITY MO	65109-0530	Level of Care	ALF**	Bed Capacity	26
Mailing Address 3409 NORTH 10 MILE DR	2	County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	0 65109-0530	Region 6		Facility Number	27914
ASHBURY HEIGHTS OF JEFFERSON C	ITY				
834 WEATHERED ROCK COURT		Telephone	(573) 634-7402	Alzheimer's Unit	No
JEFFERSON CITY MC	0 65101-1824	Level of Care	RCF	Bed Capacity	12
Mailing Address 834 WEATHERED ROCK	COURT	County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	0 65101-1824	Region 6		Facility Number	23936
AUBURN RIDGE LIVING CENTER					
1425 ASHBURY WAY		Telephone	(573) 634-2031	Alzheimer's Unit	No
WARDSVILLE MC	65101-1007	Level of Care	RCF	Bed Capacity	24
Mailing Address 1425 ASHBURY WAY		County CO	LE	DMH Licensed	No
WARDSVILLE MC	0 65101-1007	Region 6		Facility Number	31832
BRISTOL MANOR OF JEFFERSON CITY	Y				
510 KENSINGTON PARK		Telephone	(573) 761-5772	Alzheimer's Unit	No
JEFFERSON CITY MC	0 65109-6247	Level of Care	RCF	Bed Capacity	12
Mailing Address 510 KENSINGTON PARK		County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	0 65109-6247	Region 6		Facility Number	20116
HEISINGER BLUFFS HEALTHCARE WI	ESTERN CAMPUS				
1306 WEST MAIN ST		Telephone	(573) 635-0166	Alzheimer's Unit	No
	0 65109-1356	Level of Care	SNF	Bed Capacity	69
Mailing Address 1306 WEST MAIN ST		County CO		DMH Licensed	No
JEFFERSON CITY MC	65109-1356	Region 6	Medicare/Medicaid	Facility Number	07572
HEISINGER BLUFFS REHAB AND HEAI	LTHCARE CENTER				
1002 WEST MAIN ST		Telephone	(573) 636-6288	Alzheimer's Unit	No
	0 65109-6901	Level of Care	SNF	Bed Capacity	60
Mailing Address 1002 WEST MAIN ST		County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	0 65109-6901	Region 6	Medicare/Medicaid	Facility Number	03479
HEISINGER BLUFFS SENIOR LIVING					
1002 WEST MAIN ST		Telephone	(573) 636-6288	Alzheimer's Unit	Yes
	0 65109-6901	Level of Care	ALF**	Bed Capacity	111
Mailing Address 1002 WEST MAIN ST		County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	65109-6901	Region 6		Facility Number	03479

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

JEFFERSON CITY MANOR CA	RE CENTER			
1720 VIETH DR		Telephone (573) 635-6193	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2522	Level of Care SNF	Bed Capacity	102
Mailing Address 1720 VIETH DR		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-2522	Region 6 Medicare/Medicaid	Facility Number	03870
		Region - Actuation Chicaleuru		00070
JEFFERSON CITY NURSING A	ND REHABILITATION CENTER	,LLC		
1221 SOUTHGATE LN		Telephone (573) 635-3131	Alzheimer's Unit	Yes
JEFFERSON CITY	MO 65109-2465	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 104118		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65110-4118	Region 6 Medicare/Medicaid	Facility Number	01865
MAPLEWOOD, INC				
1827 CRADER DR		Telephone (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care ALF**		24
			Bed Capacity DMH Licensed	
Mailing Address 1827 CRADER I	MO 65109-2005	County COLE		Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number	16964
MAPLEWOOD, INC				
1827 CRADER DR		Telephone (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care ALF	Bed Capacity	13
Mailing Address 1827 CRADER I	DR	County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number	16964
MELODY HOUSE				
3031 SOUTH TEN MILE DR		Telephone (573) 893-7228	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-6816	Level of Care RCF*	Bed Capacity	15
Mailing Address 3031 S TEN MIL		County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-6816	Region 6	Facility Number	14376
DDIMDOSE DETIDEMENT CON	MMUNITY OF JEFFERSON CITY	7		
1214 FREEDOM BLVD	MINUMITI OF JEFFERSON CIT	Telephone (573) 634-5408	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-0082	Level of Care ALF**	Bed Capacity	49
Mailing Address 1214 FREEDOM		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0082	Region 6	Facility Number	29697
	A 11/D X /			
RIVER CITY LIVING COMMU		T-1		¥-
3038 WEST TRUMAN BLVD	MO 65100 0525	Telephone (573) 893-3404 Lorgel of Comp SNE	Alzheimer's Unit	Yes
JEFFERSON CITY	MO 65109-0525	Level of Care SNF	Bed Capacity	87 No
Mailing Address 3038 WEST TRU		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0525	Region 6 Medicare/Medicaid	Facility Number	04826
STONEBRIDGE ADAMS STREI	ET			
1024 ADAMS ST		Telephone (573) 635-1320	Alzheimer's Unit	No
JEFFERSON CITY	MO 65101-3408	Level of Care SNF	Bed Capacity	120
Mailing Address 1024 ADAMS ST	Г	County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65101-3408	Region 6 Medicare/Medicaid	Facility Number	01339

STONEBRIDGE OAK TREE			
3108 WEST TRUMAN BLVD	Telephone (573) 893-3063	Alzheimer's Unit	No
JEFFERSON CITY MO 65109-4918	Level of Care SNF	Bed Capacity	42
Mailing Address 3108 WEST TRUMAN BLVD	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-4918	Region 6 Medicare/Medicaid	Facility Number	10300
STONEBRIDGE OAK TREE			
3108 WEST TRUMAN BLVD	Telephone (573) 893-3063	Alzheimer's Unit	No
JEFFERSON CITY MO 65109-4918	Level of Care ALF	Bed Capacity	80
Mailing Address 3108 WEST TRUMAN BLVD	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-4918	Region 6	Facility Number	10300
STONEBRIDGE VILLA MARIE			
1030 EDMONDS ST	Telephone (573) 635-3381	Alzheimer's Unit	Yes
JEFFERSON CITY MO 65109-5213	Level of Care SNF	Bed Capacity	120
Mailing Address 1030 EDMONDS ST	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-5213	Region 6 Medicare/Medicaid	Facility Number	08282
WESTBROOK TERRACE - ASSISTED LIVING BY AMERICAE	RE		
3335 NORTH TEN MILE DR	Telephone (573) 635-2600	Alzheimer's Unit	No
JEFFERSON CITY MO 65109-0528	Level of Care ALF**	Bed Capacity	36
Mailing Address 3335 NORTH TEN MILE DR	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-0528	Region 6	Facility Number	20440
	COODER		
	COOPER		
	000121		
ASHLEY MANOR HEALTH & REHABILITATION			
ASHLEY MANOR HEALTH & REHABILITATION 1630 RADIO HILL ROAD	Telephone (660) 882-6584	Alzheimer's Unit	No
		Alzheimer's Unit Bed Capacity	No 52
1630 RADIO HILL ROAD	Telephone (660) 882-6584		
1630 RADIO HILL ROAD BOONVILLE MO 65233-1957	Telephone (660) 882-6584 Level of Care SNF	Bed Capacity	52
1630 RADIO HILL ROAD BOONVILLE MO 65233-1957 Mailing Address 1630 RADIO HILL ROAD	Telephone (660) 882-6584 Level of Care SNF County COOPER	Bed Capacity DMH Licensed	52 No
1630 RADIO HILL ROAD BOONVILLE MO 65233-1957 Mailing Address 1630 RADIO HILL ROAD	Telephone (660) 882-6584 Level of Care SNF County COOPER	Bed Capacity DMH Licensed	52 No
1630 RADIO HILL ROADMO65233-1957BOONVILLEMO65233-1957BOONVILLEMO65233-1957	Telephone (660) 882-6584 Level of Care SNF County COOPER	Bed Capacity DMH Licensed	52 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLE	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	52 No 00216
1630 RADIO HILL ROAD BOONVILLE MO 65233-1957 Mailing Address 1630 RADIO HILL ROAD BOONVILLE MO 65233-1957 BRISTOL MANOR OF BOONVILLE 1290 ASHLEY RD	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	52 No 00216 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLE1290 ASHLEY RDMO65233-2108BOONVILLEMO65233-2108	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	52 No 00216 No 12
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADMOBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEHO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDHOBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDHOBOONVILLEMO65233-2108	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	52 No 00216 No 12 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLE1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEBOONVILLEMo65233-2108Mailing AddressHARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310
1630 RADIO HILL ROADBOONVILLEMOBOONVILLEBOONVILLEBOONVILLEBRISTOL MANOR OF BOONVILLE1290 ASHLEY RDBOONVILLEBOONVILLEBOONVILLEBOONVILLEMoi 65233-2108Mailing Address 1290 ASHLEY RDBOONVILLEBOONVILLEBOONVILLEBOONVILLEBOONVILLEBOONVILLEBOONVILLEBOONNULLE </td <td>Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933</td> <td>Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number</td> <td>52 No 00216 No 12 No 17310 No</td>	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTEDIVING BY AMERICARE615 RANKIN MILL LNMO65233-2873	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933Level of CareALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	52 No 00216 No 12 No 17310
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTED LIVING BY AMERICAREE615 RANKIN MILL LNBOONVILLEMO65233-2873Mailing Address 615 RANKIN MILL LN	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	52 No 00216 No 12 No 17310 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTEDIVING BY AMERICARE615 RANKIN MILL LNMO65233-2873	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933Level of CareALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	52 No 00216 No 12 No 17310 No 42
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTED LIVING BY AMERICAREE615 RANKIN MILL LNBOONVILLEMO65233-2873Mailing Address 615 RANKIN MILL LNBOONVILLEMO65233-2873	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933Level of CareALF**CountyCOOPER	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	52 No 00216 No 12 No 17310 No 42 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE615 RANKIN MILL LNBOONVILLEMO65233-2873Mailing Address615 RANKIN MILL LNBOONVILLEMO65233-2873	Telephone (660) 882-6584 Level of Care SNF County COOPER Region 6 Medicare/Medicaid Telephone (660) 882-3393 Level of Care RCF County COOPER Region 6 Telephone (660) 882-9933 Level of Care ALF** County COOPER Region 6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310 No 42 No 26026
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE615 RANKIN MILL LNBOONVILLEMOBOONVILLEMO65233-2873Mailing Address615 RANKIN MILL LNBOONVILLEMO65233-2873KATY MANOR205 PROSPECT	Telephone (660) 882-6584 Level of Care SNF County COOPER Region 6 Medicare/Medicaid Telephone (660) 882-3393 Level of Care RCF County COOPER Region 6 Telephone (660) 882-9933 Level of Care ALF** County COOPER Region 6 Telephone (660) 834-3111	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310 No 26026 No
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTEDLIVING BY AMERICARE615 RANKIN MILL LNMO65233-2873BOONVILLEMO65233-2873Mailing Address615 RANKIN MILL LNBOONVILLEMO65233-2873KATY MANORMO65233-2873CATY MANOR205 PROSPECTPILOT GROVEMO65276-1111	Telephone(660) 882-6584Level of CareSNFCountyCOOPERRegion6Medicare/MedicaidTelephone(660) 882-3393Level of CareRCFCountyCOOPERRegion6Telephone(660) 882-9933Level of CareALF**CountyCOOPERRegion6Telephone(660) 834-3111Level of CareSNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310 No 26026 No 60
1630 RADIO HILL ROADBOONVILLEMO65233-1957Mailing Address1630 RADIO HILL ROADBOONVILLEMO65233-1957BRISTOL MANOR OF BOONVILLEMO65233-2108BOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108Mailing Address1290 ASHLEY RDBOONVILLEMO65233-2108HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE615 RANKIN MILL LNBOONVILLEMOBOONVILLEMO65233-2873Mailing Address615 RANKIN MILL LNBOONVILLEMO65233-2873KATY MANOR205 PROSPECT	Telephone (660) 882-6584 Level of Care SNF County COOPER Region 6 Medicare/Medicaid Telephone (660) 882-3393 Level of Care RCF County COOPER Region 6 Telephone (660) 882-9933 Level of Care ALF** County COOPER Region 6 Telephone (660) 834-3111	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	52 No 00216 No 12 No 17310 No 26026 No

LAKEVIEW HEALTH CARE & REI	HABILITATION CENTER	Talaphana (660) 882 7007	Alzheimer's Unit	No
1450 ASHLEY RD BOONVILLE	MO (5222-2141	Telephone (660) 882-7007 Level of Come BCE*		No
	MO 65233-2141	Level of Care RCF*	Bed Capacity	17
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2141	Region 6	Facility Number	01602
LAKEVIEW HEALTH CARE & RE	HABILITATION CENTER			
1450 ASHLEY RD		Telephone (660) 882-7007	Alzheimer's Unit	No
BOONVILLE	MO 65233-2141	Level of Care SNF	Bed Capacity	60
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2141	Region 6 Medicare/Medicaid	Facility Number	01602
LAKEVIEW HEALTH CARE & RE	HABILITATION CENTER			
1450 ASHLEY RD		Telephone (660) 882-7007	Alzheimer's Unit	No
BOONVILLE	MO 65233-2141	Level of Care ICF	Bed Capacity	19
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2141	Region 6 Medicaid	Facility Number	01602
DOOLATEL	110 05255 2141	Kegion o meurcaiu	Facility Pulliber	01002
RIVERDELL CARE CENTER		T-lash-ang (660) 882 7600		No
1121 11TH ST	NO (5222 1410	Telephone (660) 882-7600	Alzheimer's Unit	No
BOONVILLE	MO 65233-1419	Level of Care SNF	Bed Capacity	60 N
Mailing Address 1121 11TH ST		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-1419	Region 6 Medicare/Medicaid	Facility Number	14428
	CRAWI	FORD		
ARBORS AT VICTORIAN PLACE ()F CUBA, MEMORY CARE ASSISTED	LIVING BY AMERICARE. THE		
	OF CUBA, MEMORY CARE ASSISTEI		Alzheimer's Unit	Vec
903 HWY DD		Telephone (573) 885-0551	Alzheimer's Unit	Yes
903 HWY DD CUBA	DF CUBA, MEMORY CARE ASSISTEI MO 65453-8089	Telephone (573) 885-0551 Level of Care ALF**	Bed Capacity	32
903 HWY DD CUBA Mailing Address 903 HWY DD	MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORD	Bed Capacity DMH Licensed	32 No
903 HWY DD CUBA		Telephone (573) 885-0551 Level of Care ALF**	Bed Capacity	32
903 HWY DD CUBA Mailing Address 903 HWY DD	MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORD	Bed Capacity DMH Licensed	32 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA	MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORD	Bed Capacity DMH Licensed	32 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR	MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6	Bed Capacity DMH Licensed Facility Number	32 No 27071
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD	MO 65453-8089 MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	32 No 27071 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON	MO 65453-8089 MO 65453-8089	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	32 No 27071 No 47
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON	MO 65453-8089 MO 65453-8089 MO 65441-8218	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	32 No 27071 No 47 Yes
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON	MO 65453-8089 MO 65453-8089 MO 65441-8218	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	32 No 27071 No 47 Yes 08609
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	32 No 27071 No 47 Yes 08609 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA	MO 65453-8089 MO 65453-8089 MO 65441-8218	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	32 No 27071 No 47 Yes 08609 No 90
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65443-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	32 No 27071 No 47 Yes 08609 No 90 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	32 No 27071 No 47 Yes 08609 No 90
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65443-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	32 No 27071 No 47 Yes 08609 No 90 No
 903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR H194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR CUBA Mailing Address 10 ELDON DR CUBA Mailing Address 10 ELDON DR CUBA 	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65443-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORDRegion6Medicare/MedicaidTelephone(573) 885-6443	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	32 No 27071 No 47 Yes 08609 No 90 No
903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR 1194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR CUBA Mailing Address 210 ELDON DR	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65443-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORDRegion6Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	32 No 27071 No 47 Yes 08609 No 90 No 21149
 903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR H194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR CUBA Mailing Address 10 ELDON DR CUBA Mailing Address 10 ELDON DR CUBA 	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65453-1642 MO 65453-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORDRegion6Medicare/MedicaidTelephone(573) 885-6443	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	32 No 27071 No 47 Yes 08609 No 21149 No
 903 HWY DD CUBA Mailing Address 903 HWY DD CUBA BARNABAS REDWOOD MANOR H194 LANDON RD BOURBON Mailing Address 1194 LANDON RD BOURBON CUBA MANOR, INC 210 ELDON DR CUBA Mailing Address 210 ELDON DR CUBA FEQUILIBRIUM RANCH 81 PILKENTON LN CUBA 	 MO 65453-8089 MO 65453-8089 MO 65441-8218 MO 65441-8218 MO 65453-1642 MO 65453-1642 	Telephone(573) 885-0551Level of CareALF**CountyCRAWFORDRegion6Telephone(573) 468-8150Level of CareRCFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORDRegion6Telephone(573) 885-4500Level of CareSNFCountyCRAWFORDRegion6Telephone(573) 885-6443Level of CareRCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	32 No 27071 No 47 Yes 08609 No 21149 No 18

MERAMEC NURSING CENTER				
940 MATTOX DR		Telephone (573) 468-7733	Alzheimer's Unit	No
SULLIVAN	MO 63080-2364	Level of Care SNF	Bed Capacity	60
Mailing Address 940 MATTOX DR		County CRAWFORD	DMH Licensed	No
SULLIVAN	MO 63080-2364	Region 6 Medicare/Medicaid	Facility Number182'	77
STEELVILLE SENIOR LIVING				
311 NORTH SPRING ST		Telephone (573) 260-8850	Alzheimer's Unit	No
STEELVILLE	MO 65565-5089	Level of Care ALF	Bed Capacity	21
Mailing Address 311 NORTH SPRING	ST	County CRAWFORD	DMH Licensed	No
STEELVILLE	MO 65565-5089	Region 6	Facility Number 028	60
STEELVILLE SENIOR LIVING				
311 NORTH SPRING ST		Telephone (573) 260-8850	Alzheimer's Unit	No
STEELVILLE	MO 65565-5089	Level of Care SNF	Bed Capacity	72
Mailing Address 311 NORTH SPRING	ST	County CRAWFORD	DMH Licensed	No
STEELVILLE	MO 65565-5089	Region 6 Medicare/Medicaid	Facility Number 028	60
STUBBLEFIELD MANOR CNSL OP	ERATION LLC			
5349 HIGHWAY P		Telephone (573) 885-3661	Alzheimer's Unit	No
CUBA	MO 65453-6281	Level of Care RCF*	Bed Capacity	34
Mailing Address PO BOX 647		County CRAWFORD	DMH Licensed Y	es
CUBA	MO 65453-0647	Region 6	Facility Number 178	94
VICTORIAN PLACE OF CUBA, RES	SIDENTIAL CARE BY AMERICARE			
901 HIGHWAY DD		Telephone (573) 885-0551	Alzheimer's Unit	No
CUBA	MO 65453-8089	Level of Care RCF	Bed Capacity	48
Mailing Address 901 HWY DD		County CRAWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6	Facility Number 254	63
	DAI	DE		
GOOD SHEPHERD COMMUNITY C	CARE AND REHABILITATION			
200 WEST 12TH ST		Telephone (417) 232-4571	Alzheimer's Unit Y	es
LOCKWOOD	MO 65682-8337	Level of Care SNF	1 0	69
Mailing Address 200 WEST 12TH ST		County DADE		No
LOCKWOOD	MO 65682-8337	Region 1 Medicare/Medicaid	Facility Number 030	51
GOOD SHEPHERD RESIDENTIAL (CARE FACILITY			
200 WEST 12TH		Telephone (417) 232-4571		No
LOCKWOOD	MO 65682-8337	Level of Care RCF*	1 0	20
Mailing Address 200 WEST 12TH		County DADE		No
LOCKWOOD	MO 65682-8337	Region 1	Facility Number 030	51
	DALI	LAS		
BRISTOL MANOR OF BUFFALO		Telephone (417) 245 5500		Ν.
1002 SOUTH BIRCH	MO 65622 0455	Telephone (417) 345-5500 Level of Core BCE		No 12
BUFFALO	MO 65622-9455	Level of Care RCF	1 0	12 No
Mailing Address 1002 SOUTH BIRCH		County DALLAS		No 42
BUFFALO	MO 65622-9455	Region 1	Facility Number 1814	42

BUFFALO PRAIRIE CENTER FOR	REHAB AND HEALTHCARE	Tolophone (417) 245 5422	Alzheimer's Unit NO
631 WEST MAIN ST BUFFALO	MO 65622-7496	Telephone(417) 345-5422Level of CareSNF	Alzheimer's UnitNOBed Capacity60
Mailing Address 631 WEST MAIN ST BUFFALO	MO 65622-7496	County DALLAS Region ¹ Medicare/Medicaid	DMH LicensedNoFacility Number16700
COLONIAL SPRINGS HEALTHCAR 750 W COOPER ST	RE CENTER	Telephone (417) 345-2228	Alzheimer's Unit Yes
BUFFALO	MO 65622-8662	Level of Care SNF	Bed Capacity 134
Mailing Address PO BOX 978		County DALLAS	DMH Licensed No
BUFFALO	MO 65622-0978	Region ¹ Medicare/Medicaid	Facility Number01302
PINE LODGE RESIDENTIAL CARE			
967 N MAPLE ST	MO (5(2) 75(9	Telephone (417) 345-0310 Learnhaft Come DCE	Alzheimer's Unit No
BUFFALO Mailing Address 967 N MAPLE ST	MO 65622-7568	Level of Care RCF County DALLAS	Bed Capacity 22 DMH Licensed No
BUFFALO	MO 65622-7568	Region 1	Facility Number25563
URBANA GROUP HOME 310 WALNUT ST		Telephone (800) 993-5141	Alzheimer's Unit No
URBANA	MO 65767-9208	Level of Care RCF	Alzneimer's UnitNoBed Capacity20
Mailing Address 310 WALNUT ST		County DALLAS	DMH Licensed Yes
URBANA	MO 65767-9208	Region 1	Facility Number08242
	DAVI	TESS	
DAVIESS COUNTY NURSING AND 1337 WEST GRAND	REHABILITATION	Telephone (660) 663-2197	Alzheimer's Unit Yes
GALLATIN	MO 64640-8320	Telephone (660) 663-2197 Level of Care SNF	Bed Capacity 97
Mailing Address 1337 WEST GRAND		County DAVIESS	DMH Licensed No
GALLATIN	MO 64640-8320	Region 4 Medicare/Medicaid	Facility Number02032
	DEKA	ALB	
QUAIL RUN HEALTH CARE CENT	FR		
1405 WEST GRAND AVE		Telephone (816) 632-2151	Alzheimer's Unit No
CAMERON	MO 64429-1118	Level of Care SNF	Bed Capacity 84
Mailing Address PO BOX 525		County DEKALB	DMH Licensed No
CAMERON	MO 64429-0525	Region 4 Medicare/Medicaid	Facility Number03829
SUNSET HOME			
1201 SOUTH POLK		Telephone (816) 449-2158	Alzheimer's Unit No
MAYSVILLE	MO 64469-4028	Level of Care SNF	Bed Capacity 60
Mailing Address 1201 S POLK MAYSVILLE	MO 64469-4028	County DEKALB Region 4 Medicare/Medicaid	DMH Licensed No Facility Number 07798
		Region · medicale/medicale	
	DEN	NT	
SALEM CARE CENTER			
1203 NORTH JACKSON		Telephone (573) 729-6649	Alzheimer's Unit No
SALEM Mailing Address 1203 NOPTH LACKS	MO 65560-1076	Level of Care SNF County DENT	Bed Capacity60DMH LicensedNo
Mailing Address 1203 NORTH JACKS SALEM	MO 65560-1076	County DENT Region 6 Medicaid	DMH LicensedNoFacility Number02354
		-B Mediculu	

Mailing Address 1207 EAST ROOSEVE	MO 65560-9676 LT ST MO 65560-9676	Telephone(573) 729-9449Level of CareRCF*CountyDENTRegion6	Alzheimer's UnitNoBed Capacity35DMH LicensedNoFacility Number19746
Mailing Address 35625 HIGHWAY 72	MO 65560-7217 MO 65560-0746	Telephone(573) 729-6141Level of CareSNFCountyDENTRegion6Medicare/Medicaid	Alzheimer's UnitNoBed Capacity90DMH LicensedNoFacility Number07110
	DOUG	LAS	
AVA PLACE			
1101 LYLE STREET AVA Mailing Address PO BOX 1269	MO 65608-1269 MO 65608-1269	Telephone(417) 683-6999Level of CareRCF*CountyDOUGLASRegion1	Alzheimer's UnitNoBed Capacity40DMH LicensedYesFacility Number20718
Mailing Address PO BOX 727	CARE CENTER MO 65608-8903 MO 65608-0727	Telephone(417) 683-4129Level of CareSNFCountyDOUGLASRegion1Medicare/Medicaid	Alzheimer's UnitNoBed Capacity120DMH LicensedNoFacility Number01290
	DUNK	LIN	
Mailing Address 1209 STOKELAN	MO 63863-1335 MO 63863-1335	Telephone(573) 276-5115Level of CareSNFCountyDUNKLINRegion2Medicare/Medicaid	Alzheimer's UnitYesBed Capacity70DMH LicensedNoFacility Number12465
CAMPBELL HEALTHCARE & SENIO	OR LIVING		
17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62	MO 63933-6383 MO 63933-6383	Telephone(573) 246-2155Level of CareSNFCountyDUNKLINRegion2Medicare/Medicaid	Alzheimer's UnitYesBed Capacity90DMH LicensedNoFacility Number02820
HAMPTON HOUSE RESIDENTIAL C	ARE		
201 N DECATUR STREET MALDEN Mailing Address 201 N DECATUR STR	MO 63863-2017	Telephone(573) 276-6054Level of CareRCF*CountyDUNKLINRegion2	Alzheimer's UnitNoBed Capacity22DMH LicensedYesFacility Number03331
Mailing Address 612 SOUTH BY-PASS	MO 63857-3240 MO 63857-3240	Telephone(573) 888-1201Level of CareRCF*CountyDUNKLINRegion2	Alzheimer's UnitNoBed Capacity64DMH LicensedYesFacility Number27620

	- SKILLED NURSING BY AMERI		41-h -:	N
1802 SAINT FRANCIS ST KENNETT	MO 63857-1568	Telephone (573) 888-1044 Level of Care SNF	Alzheimer's Unit Bed Capacity	No 72
Mailing Address PO BOX 827	MO 03837-1308	County DUNKLIN	DMH Licensed	72 No
KENNETT	MO 63857-0827	Region 2 Medicare/Medicaid	Facility Number	17533
KENNETT	MO 03857-0827	Region 2 Medicare/Medicaid	Facinity Number	17555
NHC HEALTHCARE, KENNETT	ſ			
1120 FALCON		Telephone (573) 888-1150	Alzheimer's Unit	Yes
KENNETT	MO 63857-3825	Level of Care SNF	Bed Capacity	170
Mailing Address PO BOX 696		County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-0696	Region 2 Medicare/Medicaid	Facility Number	04268
RIDGEVIEW LIVING COMMUN	ЛТҮ			
500 BARRETT DRIVE		Telephone (573) 276-3843	Alzheimer's Unit	No
MALDEN	MO 63863-1204	Level of Care SNF	Bed Capacity	96
Mailing Address 500 BARRETT D	RIVE	County DUNKLIN	DMH Licensed	No
MALDEN	MO 63863-1204	Region 2 Medicare/Medicaid	Facility Number	06656
SENATH SOUTH HEALTH CAR	E CENTER			
300 EAST HORNBECK ST		Telephone (573) 738-2627	Alzheimer's Unit	No
SENATH	MO 63876-9225	Level of Care SNF	Bed Capacity	150
Mailing Address PO BOX 940		County DUNKLIN	DMH Licensed	No
SENATH	MO 63876-0940	Region 2 Medicare/Medicaid	Facility Number	16147
SOUTHAVEN				
612 SOUTH BYPASS EAST		Telephone (573) 888-9213	Alzheimer's Unit	No
KENNETT	MO 63857-3240	Level of Care RCF*	Bed Capacity	36
Mailing Address 612 SOUTH BYP	'ASS EAST	County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-3240	Region 2	Facility Number	24336
ST FRANCIS PARK - ASSISTED	LIVING BY AMERICARE			
1806 SAINT FRANCIS ST		Telephone (573) 888-1188	Alzheimer's Unit	No
KENNETT	MO 63857-1568	Level of Care ALF**	Bed Capacity	50
Mailing Address PO BOX 629		County DUNKLIN	DMH Licensed	No
KENNETT	MO 63857-0629	Region 2	Facility Number	18903
	FI	RANKLIN		
ARBORS AT DUNSFORD COUR	T- MEMORY CARE ASSISTED LI	VING BY AMERICARE		
775 DUNSFORD ROAD		Telephone (573) 468-2600	Alzheimer's Unit	Yes
SULLIVAN	MO 63080-1270	Level of Care ALF**	Bed Capacity	50
Mailing Address 775 DUNSFORD	RD	County FRANKLIN	DMH Licensed	No
SULLIVAN	MO 63080-1270	Region 6	Facility Number	16094
ARBORS AT VICTORIAN PLAC	E OF WASHINGTON, MEMORY (CARE ASSISTED LIVING BY AMERICARE,	THE	
2701 RABBIT TRAIL DR	-	Telephone (636) 390-9500	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-6711	Level of Care ALF**	Bed Canacity	32

2701 KABBIT TRAIL DR		Telephone (636) 390-9500	Alzheimer's Unit	Y es
WASHINGTON	MO 63090-6711	Level of Care ALF**	Bed Capacity	32
Mailing Address 2701 RABBIT TRAIL	DR	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6711	Region 6	Facility Number	28065

ARIZONA CARE CENTER			
101 ARIZONA ST	Telephone (573) 237-4830	Alzheimer's Unit	No
NEW HAVEN MO 63068-1210	Level of Care ALF	Bed Capacity	15
Mailing Address 101 ARIZONA ST	County FRANKLIN	DMH Licensed	Yes
NEW HAVEN MO 63068-1210	Region 6	Facility Number	19080
	ingion -		19000
ASPEN VALLEY			
1888 EAST 9TH STREET	Telephone (696) 346-9634	Alzheimer's Unit	Yes
WASHINGTON MO 63090-3549	Level of Care ALF**	Bed Capacity	14
Mailing Address 1888 EAST 9TH STREET	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-3549	Region 6	Facility Number	32779
BRISTOL MANOR OF PACIFIC			
2049 ROSE LN	Telephone (636) 257-8020	Alzheimer's Unit	No
PACIFIC MO 63069-1165	Level of Care RCF	Bed Capacity	12
Mailing Address 2049 ROSE LN	County FRANKLIN	DMH Licensed	No
PACIFIC MO 63069-1165	Region 6	Facility Number	20237
BRISTOL MANOR OF WASHINGTON			
100 WEST 12TH ST	Telephone (636) 390-0050	Alzheimer's Unit	No
WASHINGTON MO 63090-4445	Level of Care RCF	Bed Capacity	12
Mailing Address 100 WEST 12TH ST	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-4445	Region 6	Facility Number	20138
CORNERSTONE LIVING CENTER			
533 E CANNAN RD	Telephone (573) 764-5141	Alzheimer's Unit	NO
GERALD MO 63037-2515	Level of Care ALF**	Bed Capacity	60 N
Mailing Address 533 E CANNAN RD GERALD MO 63037-2515	County FRANKLIN	DMH Licensed	No
GERALD MO 63037-2515	Region 6	Facility Number	13926
CRAB APPLE VILLAGE SENIOR ESTATES			
214 HARTMAN PL, SUITE 100	Telephone (636) 629-6161	Alzheimer's Unit	Yes
SAINT CLAIR MO 63077-2458	Level of Care ALF**	Bed Capacity	65
Mailing Address 214 HARTMAN PL, SUITE 100	County FRANKLIN	DMH Licensed	No
SAINT CLAIR MO 63077-2458	Region 6	Facility Number	24395
	0	·	
GRANDVIEW HEALTHCARE CENTER			
201 GRAND AVE	Telephone (636) 239-9190	Alzheimer's Unit	No
WASHINGTON MO 63090-1209	Level of Care SNF	Bed Capacity	102
Mailing Address 201 GRAND AVE	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-1209	Region 6 Medicare/Medicaid	Facility Number	15045
HOMESTEAD AT HICKORY VIEW RETIREMENT COMMUNITY, THE			
1481 MARBACH DRIVE	Telephone (636) 239-1941	Alzheimer's Unit	No
WASHINGTON MO 63090-4636	Level of Care ALF	Bed Capacity	36
Mailing Address 1481 MARBACH DRIVE	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-4636	Region 6	Facility Number	32345
	~	-	

LIFE CARE CENTER OF SULLIVAN	N			
875 DUNSFORD DR		Telephone (573) 468-3128	Alzheimer's Unit	No
SULLIVAN	MO 63080-1238	Level of Care SNF	Bed Capacity	120
Mailing Address 875 DUNSFORD DR		County FRANKLIN	DMH Licensed	No
SULLIVAN	MO 63080-1238	Region 6 Medicare/Medicaid	Facility Number	07744
NEW HAVEN CARE CENTER				
9503 HIGHWAY 100		Telephone (573) 237-2103	Alzheimer's Unit	No
NEW HAVEN	MO 63068-1300	Level of Care SNF	Bed Capacity	90
Mailing Address 9503 HWY 100	MO 05000 1500	County FRANKLIN	DMH Licensed	No
NEW HAVEN	MO 63068-1300	Region 6 Medicare/Medicaid	Facility Number	05738
NEW HAVEN	MO 05008-1500	Kegion o Medicare/Medicaid	Facility Number	03738
NEW HAVEN CARE CENTER				
9503 HIGHWAY 100		Telephone (573) 237-2103	Alzheimer's Unit	No
NEW HAVEN	MO 63068-1300	Level of Care ALF	Bed Capacity	16
Mailing Address 9503 HWY 100	MO 05006-1500	County FRANKLIN	DMH Licensed	No
NEW HAVEN	MO 62068 1200	•		
NEW HAVEN	MO 63068-1300	Region 6	Facility Number	05738
OAK POINTE OF WASHINGTON				
1650 HIGH STREET		Telephone (636) 390-3290	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-4354	Level of Care ALF**	Bed Capacity	65
Mailing Address 1650 HIGH STREET	MO 03070 +334	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-4354	•		
WASHINGTON	MO 05090-4554	Region 6	Facility Number	32114
PACIFIC CARE CENTER				
105 SOUTH SIXTH ST		Telephone (636) 271-4222	Alzheimer's Unit	No
PACIFIC	MO 63069-1328	Level of Care ALF**	Bed Capacity	16
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed	No
PACIFIC	MO 63069-1328	Region 6	Facility Number	12638
		Region -		12000
PACIFIC CARE CENTER				
105 SOUTH SIXTH ST		Telephone (636) 271-4222	Alzheimer's Unit	No
PACIFIC	MO 63069-1328	Level of Care SNF	Bed Capacity	120
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed	No
PACIFIC	MO 63069-1328	Region 6 Medicare/Medicaid	Facility Number	12638
RIDGEWAY RESIDENTIAL CARE				
431 RUSSELL		Telephone (573) 468-4318	Alzheimer's Unit	No
SULLIVAN	MO 63080-2228	Level of Care ALF	Bed Capacity	20
Mailing Address PO BOX 267		County FRANKLIN	DMH Licensed	Yes
SULLIVAN	MO 63080-0267	Region 6	Facility Number	06668
SOUTH POINTE - ASSISTED LIVIN	C BY AMERICARE			
5125 OLD HWY 100	5 24 millinonne	Telephone (636) 239-0670	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-3855	Level of Care ALF**	Bed Capacity	72
	1410 020-2622			
Mailing Address 5125 OLD HWY 100	MO (2000 2855	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-3855	Region 6	Facility Number	13735

ST CLAIR NURSING CENTER			
1035 PLAZA COURT NORTH	Telephone (636) 629-2100	Alzheimer's Unit	No
SAINT CLAIR MO 63077-1129	Level of Care SNF	Bed Capacity	79
Mailing Address 1035 PLAZA CT NORTH	County FRANKLIN	DMH Licensed	No
SAINT CLAIR MO 63077-1129	Region 6 Medicare/Medicaid	Facility Number	13744
	Incurrent of the second		
SUNSET HEALTH CARE CENTER			
400 WEST PARK AVE	Telephone (636) 583-2252	Alzheimer's Unit	No
UNION MO 63084-1140	Level of Care SNF	Bed Capacity	120
Mailing Address 400 WEST PARK AVE	County FRANKLIN	DMH Licensed	No
UNION MO 63084-1140	Region 6 Medicare/Medicaid	Facility Number	07831
INION CADE CENTER			
UNION CARE CENTER 1080 MARIE LANE	Telephone (636) 206-8585	Alzheimer's Unit	No
UNION MO 63084-1056	Level of Care SNF	Bed Capacity	60
More 05084-1050 Mailing Address 1080 MARIE LANE	County FRANKLIN	DMH Licensed	No
UNION MO 63084-1056	Region 6 Medicare/Medicaid	Facility Number	31476
UNION INO 05064-1050	Kegion 0 Medicare/Medicald	Facility Number	31470
VICTORIAN PLACE OF ST CLAIR, ASSISTED LIVING BY AMERICAR	£		
160 CHARLES DR	Telephone (636) 322-0003	Alzheimer's Unit	No
SAINT CLAIR MO 63077-1936	Level of Care ALF**	Bed Capacity	48
Mailing Address 160 CHARLES DR	County FRANKLIN	DMH Licensed	No
SAINT CLAIR MO 63077-1936	Region 6	Facility Number	26005
VICTORIAN PLACE OF SULLIVAN, ASSISTED LIVING BY AMERICA	DE		
1250 EAST SPRINGFIELD RD	Telephone (573) 468-5217	Alzheimer's Unit	No
SULLIVAN MO 63080-1358	Level of Care ALF**	Bed Capacity	48
Mailing Address 1250 EAST SPRINGFIELD RD	County FRANKLIN	DMH Licensed	No
SULLIVAN MO 63080-1358	Region 6	Facility Number	26324
	8		
VICTORIAN PLACE OF UNION, ASSISTED LIVING BY AMERICARE			
1320 W MAIN	Telephone (636) 584-0085	Alzheimer's Unit	No
UNION MO 63084-1084	Level of Care ALF**	Bed Capacity	48
Mailing Address 1320 W MAIN	County FRANKLIN	DMH Licensed	No
UNION MO 63084-1084	Region 6	Facility Number	24408
VICTORIAN PLACE OF WASHINGTON, RESIDENTIAL CARE BY AME	RICARE		
2800 RABBIT TRAIL DR	Telephone (636) 390-9500	Alzheimer's Unit	No
WASHINGTON MO 63090-6737	Level of Care ALF**	Bed Capacity	48
Mailing Address 2800 RABBIT TRAIL DR	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-6737	Region 6	Facility Number	27659
WILLOW BROOKE - ASSISTED LIVING BY AMERICARE			
#1 NORTH POTOMAC CT	Telephone (636) 583-2799	Alzheimer's Unit	No
UNION MO 63084-1113	Level of Care ALF**	Bed Capacity	50
			50
			No
Mailing Address 1 NORTH POTOMAC CT UNION MO 63084-1113	County FRANKLIN Region 6	DMH Licensed Facility Number	No 13596

GASCONADE

GASCONADE MANOR NURSING	HOME			
1910 NURSING HOME RD		Telephone (573) 437-4101	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care SNF	Bed Capacity	79
Mailing Address PO BOX 520		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6 Medicare/Medicaid	Facility Number	02804
GASCONADE TERRACE RETIRI	EMENT CENTER			
1930 NURSING HOME RD		Telephone (573) 437-4833	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care ALF	Bed Capacity	19
Mailing Address PO BOX 520		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6	Facility Number	14143
STONEBRIDGE HERMANN				
1800 WEIN ST		Telephone (573) 486-3155	Alzheimer's Unit	No
HERMANN	MO 65041-1601	Level of Care ALF	Bed Capacity	18
Mailing Address PO BOX 468		County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-0468	Region 6	Facility Number	02690
STONEBRIDGE HERMANN				
1800 WEIN ST		Telephone (573) 486-3155	Alzheimer's Unit	No
HERMANN	MO 65041-1601	Level of Care SNF	Bed Capacity	118
Mailing Address PO BOX 468		County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-0468	Region 6 Medicare/Medicaid	Facility Number	02690
STONEBRIDGE OWENSVILLE				
1016 W HIGHWAY 28		Telephone (573) 437-6877	Alzheimer's Unit	Yes
OWENSVILLE	MO 65066-1677	Level of Care SNF	Bed Capacity	131
Mailing Address PO BOX 593		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0593	Region 6 Medicare/Medicaid	Facility Number	19051
VICTORIAN PLACE OF HERMA	NN, RESIDENTIAL CARE BY A	MERICARE		
2120 VILLAGE LANE		Telephone (573) 486-5060	Alzheimer's Unit	No
HERMANN	MO 65041-1600	Level of Care RCF	Bed Capacity	48
Mailing Address 2120 VILLAGE LA	ANE	County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-1600	Region 6	Facility Number	24982
VICTORIAN PLACE OF OWENS	VILLE, RESIDENTIAL CARE B	Y AMERICARE		
301 NORTH 7TH ST		Telephone (573) 437-5396	Alzheimer's Unit	No
OWENSVILLE	MO 65066-1075	Level of Care RCF	Bed Capacity	48
Mailing Address 301 NORTH 7TH S		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-1075	Region 6	Facility Number	24133
		GENTRY		
PINE VIEW MANOR, INC		Telephone (6(0) 702 2110	Alzhoimoula TI-it	NT _
307 NORTH PINEVIEW ST	MO 64490 1500	Telephone (660) 783-2118	Alzheimer's Unit	No 12
STANBERRY Mailing Address 207 NOPTH DINE	MO 64489-1509	Level of Care ALF**	Bed Capacity	12 No
Mailing Address 307 NORTH PINE		County GENTRY	DMH Licensed	No
STANBERRY	MO 64489-1509	Region 4	Facility Number	05832

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

THE TET MANON, INC	PINE	VIEW	MANOR,	INC
--------------------	------	------	--------	-----

307 NORTH PINEVIEW STMO64489-1509STANBERRYMO64489-1509STANBERRYMO64489-1509

WILD-KAT ESTATES, LLC

300 WEST FAIRVIEW STREETKING CITYMO64463-9606Mailing Address 300 WEST FAIRVIEWSTREETKING CITYMO64463-9606

Telephone	(660) 783-2118	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	70
County GEN	NTRY	DMH Licensed	No
Region 4 N	/ledicare/Medicaid	Facility Number	05832

Telephone (660) 728-2301	Alzheimer's Unit	No
Level of Care ALF**	Bed Capacity	24
County GENTRY	DMH Licensed	No
Region 4	Facility Number	04305

GREENE

ASH GROVE HEALTHCARE FACILITY			
401 NORTH MEDICAL DR	Telephone (417) 751-2575	Alzheimer's Unit	Yes
ASH GROVE MO 65604-1004	Level of Care SNF	Bed Capacity	82
Mailing Address PO BOX 247	County GREENE	DMH Licensed	No
ASH GROVE MO 65604-0247	Region 1 Medicare/Medicaid	Facility Number	00200
BIRCH POINTE HEALTH AND REHABILITATION			
3705 S JEFFERSON AVE	Telephone (417) 889-0773	Alzheimer's Unit	Yes
SPRINGFIELD MO 65807-5880	Level of Care SNF	Bed Capacity	120
Mailing Address 3705 S JEFFERSON AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-5880	Region ¹ Medicare/Medicaid	Facility Number	31013
	ingion i meneralemeneral		51015
DDICTOL MANOD OF DEDUDI IC			
BRISTOL MANOR OF REPUBLIC	T-l (417) 722 8008	A 1-1	N-
634 EAST HIGHWAY 174 REPUBLIC MO 65738-1124	Telephone (417) 732-8998 Level of Care RCF	Alzheimer's Unit	No 12
		Bed Capacity DMH Licensed	12 No
Mailing Address 634 EAST HWY 174 REPUBLIC MO 65738-1124			
REPUBLIC MO 65738-1124	Region 1	Facility Number	20841
BRISTOL MANOR OF WILLARD			N
511 WATSON	Telephone (417) 742-0090	Alzheimer's Unit	No
WILLARD MO 65781-8314	Level of Care RCF	Bed Capacity	12
Mailing Address 511 WATSON	County GREENE	DMH Licensed	No
WILLARD MO 65781-8314	Region 1	Facility Number	20838
BROOKHAVEN NURSING & REHAB			
3405 WEST MT VERNON	Telephone (417) 874-9600	Alzheimer's Unit	No
SPRINGFIELD MO 65802-5241	Level of Care SNF	Bed Capacity	90
Mailing Address 3405 WEST MT VERNON	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	09512
BUNGALOWS AT CHESTERFIELD VILLAGE, THE			
2410 WEST CHESTERFIELD BLVD	Telephone (417) 886-4000	Alzheimer's Unit	No
SPRINGFIELD MO 65807-8631	Level of Care RCF	Bed Capacity	92
Mailing Address 2410 W CHESTERFIELD BLVD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-8631	Region 1	Facility Number	22584

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

BUNGALOWS AT SPRINGFIELD EAST, THE 3540 EAST CHEROKEE	Telephone (417) 889-2222	Alzheimer's Unit No
SPRINGFIELD MO 65809-2828	Level of Care RCF	Alzheimer's UnitNoBed Capacity67
Mo 0309-2028 Mailing Address 3540 EAST CHEROKEE	County GREENE	DMH Licensed No
SPRINGFIELD MO 65809-2828		
SPRINOPIELD MO 03809-2828	Region 1	Facility Number21025
CEDARHURST OF SPRINGFIELD		
1146 EAST LAKEWOOD ST	Telephone (417) 885-9050	Alzheimer's Unit Yes
SPRINGFIELD MO 65810-2614	Level of Care ALF**	Bed Capacity 66
Mailing Address 1146 E LAKEWOOD ST	County GREENE	DMH Licensed No
SPRINGFIELD MO 65810-2614	Region 1	Facility Number28295
FREMONT SENIOR LIVING, THE		
1520 EAST BATES ST	Telephone (417) 881-0500	Alzheimer's Unit Yes
SPRINGFIELD MO 65804-8401	Level of Care ALF**	Bed Capacity 72
Mailing Address 1520 EAST BATES ST	County GREENE	DMH Licensed No
SPRINGFIELD MO 65804-8401	Region 1	Facility Number28782
GARDENS, THE		
1302 WEST SUNSET	Telephone (417) 889-7600	Alzheimer's Unit Yes
SPRINGFIELD MO 65807-5943	Level of Care ALF**	Bed Capacity 148
Mailing Address 1302 WEST SUNSET	County GREENE	DMH Licensed No
SPRINGFIELD MO 65807-5943	Region 1	Facility Number20288
		20200
GLENDALE GARDENS NURSING & REHAB		
3535 EAST CHEROKEE	Telephone (417) 889-9955	Alzheimer's Unit No
SPRINGFIELD MO 65809-2829	Level of Care SNF	Bed Capacity 120
Mailing Address 3535 EAST CHEROKEE	County GREENE	DMH Licensed No
SPRINGFIELD MO 65809-2829	Region 1 Medicare/Medicaid	Facility Number16735
GOLDEN ESTATE RESIDENTIAL CARE		
1134 WEST NORTON RD	Telephone (417) 833-4440	Alzheimer's Unit No
SPRINGFIELD MO 65803-1070	Level of Care RCF*	Bed Capacity 31
Mailing Address 1134 WEST NORTON RD	County GREENE	DMH Licensed Yes
SPRINGFIELD MO 65803-1070	Region 1	Facility Number02984
JACOBS CARE CENTER, LLC		
932 WEST STATE	Telephone (417) 865-6140	Alzheimer's Unit No
SPRINGFIELD MO 65806-2846	Level of Care RCF	Bed Capacity 12
Mailing Address 932 WEST STATE	County GREENE	DMH Licensed Yes
SPRINGFIELD MO 65806-2846	Region 1	Facility Number06229
JAMES RIVER NURSING AND REHABILITATION		
3550 EAST BATTLEFIELD	Telephone (417) 889-9500	Alzheimer's Unit No
SPRINGFIELD MO 65809-3400	Level of Care SNF	Bed Capacity 120
Mailing Address 3550 EAST BATTLEFIELD	County GREENE	DMH Licensed No
SPRINGFIELD MO 65809-3400	Region ¹ Medicare/Medicaid	Facility Number 17645
	August - meuter concultatu	17045

JOY ASSISTED LIVING FOR SENIORS			
2030 W MOUNT VERNON ST	Telephone (417) 864-8805	Alzheimer's Unit	No
SPRINGFIELD MO 65802-4846	Level of Care ALF	Bed Capacity	74
Mailing Address PO BOX 9655	County GREENE	DMH Licensed	Yes
SPRINGFIELD MO 65801-9655	Region 1	Facility Number	19668
	5		
LAKEWOOD - ASSISTED LIVING BY AMERICARE			
4685 ROBBERSON AVE	Telephone (417) 881-1411	Alzheimer's Unit	Yes
SPRINGFIELD MO 65810-1785	Level of Care ALF**	Bed Capacity	67
Mailing Address 4685 ROBBERSON AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65810-1785	Region 1	Facility Number	23613
LODGES, THE			
2401 W GRAND ST	Telephone (417) 864-4545	Alzheimer's Unit	No
SPRINGFIELD MO 65802-4967	Level of Care RCF*	Bed Capacity	99
Mailing Address 2401 W GRAND ST	County GREENE	DMH Licensed	Yes
SPRINGFIELD MO 65802-4967	Region 1	Facility Number	09756
		·	
MAGNOLIA SQUARE NURSING AND REHAB			
1502 WEST EDGEWOOD	Telephone (417) 877-7545	Alzheimer's Unit	No
SPRINGFIELD MO 65807-3567	Level of Care SNF	Bed Capacity	120
Mailing Address 1502 WEST EDGEWOOD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-3567	Region 1 Medicare/Medicaid	Facility Number	23400
MANOR AT ELFINDALE, THE			
1707 WEST ELFINDALE ST	Telephone (417) 831-2273	Alzheimer's Unit	Yes
SPRINGFIELD MO 65807-1246	Level of Care SNF	Bed Capacity	100
Mailing Address 1707 WEST ELFINDALE ST SPRINGFIELD MO 65807-1246	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-1246	Region 1 Medicare	Facility Number	17371
MAPLES HEALTH AND REHABILITATION, THE			
610 WEST SUNSET ST	Telephone (417) 891-1700	Alzheimer's Unit	No
SPRINGFIELD MO 65807-3696	Level of Care SNF	Bed Capacity	120
Mailing Address 610 WEST SUNSET ST	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-3696	Region 1 Medicare/Medicaid	Facility Number	06441
MARANATHA VILLAGE, INC			
233 EAST NORTON RD	Telephone (417) 833-0016	Alzheimer's Unit	No
SPRINGFIELD MO 65803-3633	Level of Care SNF	Bed Capacity	120
Mailing Address 233 EAST NORTON RD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65803-3633	Region 1 Medicare/Medicaid	Facility Number	04907
MARANATHA VILLAGE, INC			
233 EAST NORTON RD	Telephone (417) 833-0016	Alzheimer's Unit	No
SPRINGFIELD MO 65803-3633	Level of Care RCF	Bed Capacity	29
Mailing Address 233 EAST NORTON RD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65803-3633	Region 1	Facility Number	04907
	8		

MISSION RIDGE			
4349 S KANSAS AVE	Telephone (417) 520-7020	Alzheimer's Unit	NO
SPRINGFIELD MO 65810-1413	Level of Care ALF**	Bed Capacity	60
Mailing Address 4349 S KANSAS AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65810-1413	Region ¹	Facility Number	33342
		·	
NEIGHBORHOODS AT QUAIL CREEK, THE			
1514 WEST LARK	Telephone (417) 889-1275	Alzheimer's Unit	Yes
SPRINGFIELD MO 65810-2270	Level of Care SNF	Bed Capacity	120
Mailing Address 1514 WEST LARK	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65810-2270	Region ¹ Medicare/Medicaid	Facility Number	24701
QUALITY RESIDENTIAL CARE			
2034 WEST COLLEGE	Telephone (417) 831-6466	Alzheimer's Unit	No
SPRINGFIELD MO 65806-1524	Level of Care RCF*	Bed Capacity	42
Mailing Address PO BOX 8127	County GREENE	DMH Licensed	Yes
SPRINGFIELD MO 65801-8127	Region 1	Facility Number	13150
	8	U	
RAVENWOOD - ASSISTED LIVING BY AMERICARE			
1950 EAST REPUBLIC RD	Telephone (417) 890-6000	Alzheimer's Unit	Yes
SPRINGFIELD MO 65804-6763	Level of Care ALF**	Bed Capacity	66
Mailing Address 1950 E REPUBLIC RD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65804-6763	Region ¹	Facility Number	20791
		·	
REPUBLIC NURSING & REHAB			
901 EAST HIGHWAY 174	Telephone (417) 732-1822	Alzheimer's Unit	Yes
REPUBLIC MO 65738-1155	Level of Care SNF	Bed Capacity	127
Mailing Address 901 EAST HIGHWAY 174	County GREENE	DMH Licensed	No
REPUBLIC MO 65738-1155	Region 1 Medicare/Medicaid	Facility Number	13684
SONSHINE MANOR			
300 SOUTH COTTONWOOD AVE	Telephone (417) 732-2929	Alzheimer's Unit	No
REPUBLIC MO 65738-2093	Level of Care SNF	Bed Capacity	69
Mailing Address 300 SOUTH COTTONWOOD AVE	County GREENE	DMH Licensed	No
REPUBLIC MO 65738-2093	Region 1 Medicare/Medicaid	Facility Number	16723
SPRING RIDGE - ASSISTED LIVING BY AMERICARE			NT
2828 SOUTH MEADOWBROOK	Telephone (417) 889-7100	Alzheimer's Unit	No
SPRINGFIELD MO 65807-5925	Level of Care ALF**	Bed Capacity	44
Mailing Address 2828 SOUTH MEADOWBROOK	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-5925	Region 1	Facility Number	19713
SPRING VALLEY ASSISTED LIVING			
2915 SOUTH FREMONT AVE	Telephone (417) 883-4022	Alzheimer's Unit	No
SPRINGFIELD MO 65804-3608	Level of Care ALF	Bed Capacity	40
Mailing Address 2915 SOUTH FREMONT AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65804-3608	Region 1	Facility Number	00144

SPRING VALLEY HEALTH & REHABILITATION CENTER			
2915 SOUTH FREMONT AVE	Telephone (417) 883-4022	Alzheimer's Unit	Yes
SPRINGFIELD MO 65804-3608	Level of Care SNF	Bed Capacity	194
Mailing Address 2915 SOUTH FREMONT AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65804-3608	Region ¹ Medicare/Medicaid	Facility Number	00144
SPRINGFIELD REHABILITATION & HEALTH CARE CENTER			
2800 S FORT AVE	Telephone (417) 882-0035	Alzheimer's Unit	No
SPRINGFIELD MO 65807-3480	Level of Care SNF	Bed Capacity	146
Mailing Address PO BOX 3438 GS	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65808-3438	Region 1 Medicare/Medicaid	Facility Number	07460
SDDINCEIELD SVILLED CADE CENTED			
SPRINGFIELD SKILLED CARE CENTER	T -l	A 1-1	N-
2401 W GRAND ST	Telephone (417) 864-4545 L L SNF	Alzheimer's Unit	No
SPRINGFIELD MO 65802-4967	Level of Care SNF	Bed Capacity	120
Mailing Address 2401 W GRAND ST	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65802-4967	Region 1 Medicare/Medicaid	Facility Number	09756
SPRINGFIELD VILLA			
1100 EAST MONTCLAIR	Telephone (417) 820-8500	Alzheimer's Unit	Yes
SPRINGFIELD MO 65807-5076	Level of Care SNF	Bed Capacity	146
Mailing Address 1100 EAST MONTCLAIR	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-5076	Region 1 Medicare/Medicaid	Facility Number	05280
SPRINGHOUSE VILLAGE EAST, LLC			
3877 EAST FARM ROAD 132	Telephone (417) 877-1717	Alzheimer's Unit	Yes
SPRINGFIELD MO 65802-	Level of Care ALF**	Bed Capacity	100
Mol 03002- Mailing Address 3877 EAST FARM ROAD 132	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65802-	Region ¹	Facility Number	32469
STRENCHILLD MIG 05002	Kegion 1	Tuenty Rumber	52409
STRAFFORD CARE CENTER			
505 WEST EVERGREEN	Telephone (417) 736-9332	Alzheimer's Unit	Yes
STRAFFORD MO 65757-8625	Level of Care SNF	Bed Capacity	78
Mailing Address 505 WEST EVERGREEN	County GREENE	DMH Licensed	No
STRAFFORD MO 65757-8625	Region ¹ Medicare/Medicaid	Facility Number	21285
SUNTERRA SPRINGS SPRINGFIELD			
4935 S NATIONAL AVE	Telephone (417) 720-8050	Alzheimer's Unit	No
SPRINGFIELD MO 65810-2989	Level of Care SNF	Bed Capacity	38
Mailing Address 4935 S NATIONAL AVE	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65810-2989	Region 1 Medicare	Facility Number	31273
TOWNSHIP SENIOR LIVING, THE			
4150 WEST REPUBLIC ROAD	Telephone (417) 881-7800	Alzheimer's Unit	Yes
BATTLEFIELD MO 65619-7111	Level of Care ALF**	Bed Capacity	66
Mailing Address 4150 WEST REPUBLIC ROAD	County GREENE	DMH Licensed	No
BATTLEFIELD MO 65619-7111	Region 1	Facility Number	31903
	NGIVII .	- using i tuiliber	51705

CODING VALLEY HEALTH & DEHADI ITATION CENTED

TURNERS ROCK			
3911 EAST HIGHWAY D	Telephone (417) 459-4070	Alzheimer's Unit	Yes
SPRINGFIELD MO 65809-	Level of Care ALF**	Bed Capacity	70
Mailing Address 3911 EAST HIGHWAY D	County GREENE	DMH Licensed	No
SPRINGFEILD MO 65809-	Region 1	Facility Number	32441
	0		
VSL SPRINGFIELD ASSISTED LIVING, LLC			
1401 WEST ELFINDALE STREET	Telephone (417) 831-3828	Alzheimer's Unit	No
SPRINGFIELD MO 65807-1295	Level of Care ALF	Bed Capacity	50
Mailing Address 1401 WEST ELFINDALE STREET	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-1295	Region ¹	Facility Number	32492
		U U	
WILLARD CARE CENTER			
400 WEST WALNUT LN	Telephone (417) 742-3593	Alzheimer's Unit	Yes
WILLARD MO 65781-9432	Level of Care SNF	Bed Capacity	66
Mailing Address 400 W WALNUT LN	County GREENE	DMH Licensed	No
WILLARD MO 65781-9432	Region 1 Medicare/Medicaid	Facility Number	16393
		·	
WILSON'S CREEK NURSING & REHAB			
3403 WEST MT VERNON	Telephone (417) 864-5600	Alzheimer's Unit	Yes
SPRINGFIELD MO 65802-5241	Level of Care SNF	Bed Capacity	172
Mailing Address 3403 WEST MT VERNON	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	05579
WOODLAND MANOR			
1347 EAST VALLEY WATERMILL RD	Telephone (417) 833-1220	Alzheimer's Unit	No
SPRINGFIELD MO 65803-3739	Level of Care SNF	Bed Capacity	94
Mailing Address 1347 EAST VALLEY WATERMILL RD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65803-3739	Region 1 Medicare/Medicaid	Facility Number	05794
GR	UNDY		
BRISTOL MANOR OF TRENTON			
1701 EAST 28TH ST	Telephone (660) 359-5599	Alzheimer's Unit	No
TRENTON MO 64683-1177	Level of Care RCF	Bed Capacity	12
Mailing Address 1701 EAST 28TH ST	County GRUNDY	DMH Licensed	No
TRENTON MO 64683-1177	Region 4	Facility Number	18597
	Region		10077
EASTVIEW MANOR CARE CENTER			
1622 EAST 28TH ST	Telephone (660) 359-2251	Alzheimer's Unit	No
TRENTON MO 64683-1104	Level of Care SNF	Bed Capacity	90
Mailing Address 1622 EAST 28TH ST	County GRUNDY	DMH Licensed	No
TRENTON MO 64683-1104	Region 4 Medicare/Medicaid	Facility Number	18267
SUNNYVIEW NURSING HOME & APARTMENTS			
1311 EAST 28TH ST	Telephone (660) 359-5647	Alzheimer's Unit	No
TRENTON MO 64683-1103	Level of Care SNF	Bed Capacity	154
Mailing Address 1311 EAST 28TH ST	County GRUNDY	DMH Licensed	No
TRENTON MO 64683-1103	Region 4 Medicare/Medicaid	Facility Number	18509

Thursday, April 4, 2024

SUNNYVIEW NURSING HOME & APARTMENTS

 1311 EAST 28TH ST
 MO
 64683-1103

 TRENTON
 MO
 64683-1103

 TRENTON
 MO
 64683-1103

Telephone (660) 359-5647 Alzl Level of Care RCF* Bed County GRUNDY DM Region 4 Fac

zheimer's Unit	No
d Capacity	38
AH Licensed	No
cility Number	18509

	HARR	ISON		
BRISTOL MANOR OF BETHANY				
811 SOUTH 24TH ST		Telephone (660) 425-7133	Alzheimer's Unit	No
BETHANY	MO 64424-2631	Level of Care RCF	Bed Capacity	12
Mailing Address 811 SOUTH 24TH ST		County HARRISON	DMH Licensed	No
BETHANY	MO 64424-2631	Region 4	Facility Number	19068
		Kigion -		17000
CRESTVIEW HOME				
1313 SOUTH 25TH ST		Telephone (660) 425-3128	Alzheimer's Unit	No
BETHANY	MO 64424-2634	Level of Care SNF	Bed Capacity	92
Mailing Address PO BOX 430		County HARRISON	DMH Licensed	No
BETHANY	MO 64424-0430	Region 4 Medicare/Medicaid	Facility Number	01936
	HEN	RY		
ADAIR VILLAGE				
1801 N GAINES DR		Telephone (660) 885-8196	Alzheimer's Unit	Yes
CLINTON	MO 64735-1127	Level of Care SNF	Bed Capacity	120
Mailing Address 1801 N GAINES DR		County HENRY	DMH Licensed	No
CLINTON	MO 64735-1127	Region 1 Medicare/Medicaid	Facility Number	08521
ARBORS AT GLENDALE GARDENS	- MEMORY CARE BY AMERICARI	СТНЕ		
1300 SOUTH MAIN		Telephone (660) 885-2272	Alzheimer's Unit	Yes
CLINTON	MO 64735-2728	Level of Care ALF**	Bed Capacity	42
Mailing Address 1300 S MAIN		County HENRY	DMH Licensed	No
CLINTON	MO 64735-2728	Region 1	Facility Number	17054
BRISTOL MANOR OF CLINTON				
1402 EAST FRANKLIN		Telephone (660) 885-8391	Alzheimer's Unit	No
CLINTON	MO 64735-1768	Level of Care RCF	Bed Capacity	12
Mailing Address 1402 EAST FRANKLI	N	County HENRY	DMH Licensed	No
CLINTON	MO 64735-1768	Region 1	Facility Number	16656
CUNTON HEAT THEADE AND DEH				
CLIMITON HEALTHCAKE AND KEN	ABII ITATION CENTED			
1009 FAST OHIO	ABILITATION CENTER	Telephone (660) 885 5571	Alzheimer's Unit	No
1009 EAST OHIO CUNTON		Telephone (660) 885-5571	Alzheimer's Unit Bed Capacity	No 120
CLINTON	ABILITATION CENTER MO 64735-2455	Level of Care SNF	Bed Capacity	120
CLINTON Mailing Address 1009 EAST OHIO	MO 64735-2455	Level of Care SNF County HENRY	Bed Capacity DMH Licensed	120 No
CLINTON		Level of Care SNF	Bed Capacity	120 No
CLINTON Mailing Address 1009 EAST OHIO	MO 64735-2455 MO 64735-2455	Level of Care SNF County HENRY	Bed Capacity DMH Licensed	120 No
CLINTON Mailing Address 1009 EAST OHIO CLINTON	MO 64735-2455 MO 64735-2455	Level of Care SNF County HENRY	Bed Capacity DMH Licensed	120 No
CLINTON Mailing Address 1009 EAST OHIO CLINTON JEFFERSON GARDENS - ASSISTED	MO 64735-2455 MO 64735-2455	Level of Care SNF County HENRY Region ¹ Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 01318
CLINTON Mailing Address 1009 EAST OHIO CLINTON JEFFERSON GARDENS - ASSISTED 509 WEST ROGERS ST	MO 64735-2455 MO 64735-2455 LIVING BY AMERICARE MO 64735-2548	Level of Care SNF County HENRY Region 1 Medicare/Medicaid Telephone (660) 885-9770	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 01318 No

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

JOY ADULT CARE CENTER 614 SOUTH MAIN CLINTON Mailing Address PO BOX 8 CLINTON WINDSOR HEALTHCARE & REHA 809 WEST BENTON WINDSOR Mailing Address PO BOX 5 WINDSOR	MO 64735-2620 MO 64735-0008 AB CENTER MO 65360-1239 MO 65360-0005	Telephone(660) 885-8328Level of CareRCF*CountyHENRYRegion1Telephone(660) 647-3102Level of CareSNFCountyHENRYRegion1Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 42 Yes 07268 No 60 No 21715
	HICK	ORV		
	піск			
HERMITAGE NURSING & REHAB 18599 FIRST STREET HERMITAGE Mailing Address PO BOX 325 HERMITAGE	MO 65668-9129 MO 65668-0325	Telephone(417) 745-2111Level of CareSNFCountyHICKORYRegion1Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 10240
	НО	LT		
OREGON HEALTHCARE 501 MONROE OREGON Mailing Address PO BOX 19 OREGON	MO 64473-7800 MO 64473-0019	Telephone(660) 446-3355Level of CareSNFCountyHOLTRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 60 No 06097
TIFFANY HEIGHTS 1531 NEBRASKA ST MOUND CITY Mailing Address PO BOX 308 MOUND CITY	MO 64470-1610 MO 64470-0308	Telephone(660) 442-3146Level of CareSNFCountyHOLTRegion4Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 60 No 07998
	НОЖ	ARD		
ASHBURY HEIGHTS OF FAYETTE 200 GROCE ST FAYETTE Mailing Address 200 GROCE ST FAYETTE	MO 65248-9813 MO 65248-9813	Telephone(660) 248-3603Level of CareRCFCountyHOWARDRegion5	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 23894
GLASGOW GARDENS 100 AUDSLEY DR GLASGOW Mailing Address 100 AUDSLEY DR GLASGOW	MO 65254-9537 MO 65254-9537	Telephone(660) 338-2297Level of CareSNFCountyHOWARDRegion5Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 59 No 01659
LODGE, THE 542 STATE ROAD DD FAYETTE Mailing Address 542 STATE RD DD FAYETTE	MO 65248-9658 MO 65248-9658	Telephone(660) 248-2277Level of CareALF**CountyHOWARDRegion5	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 60 Yes 28815

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

HOWELL

BROOKE HAVEN HEALTHCARE			
1410 NORTH KENTUCKY AVE	Telephone (417) 256-7975	Alzheimer's Unit	Yes
WEST PLAINS MO 65775-1822	Level of Care SNF	Bed Capacity	120
Mailing Address 1410 NORTH KENTUCKY AVE	County HOWELL	DMH Licensed	No
WEST PLAINS MO 65775-1822	Region 2 Medicare/Medicaid	Facility Number	06253
CEDARHURST OF WEST PLAINS			
1521 US HIGHWAY 63	Telephone (417) 372-8940	Alzheimer's Unit	YES
WEST PLAINS MO 65775-9809	Level of Care ALF**	Bed Capacity	84
Mailing Address 1521 US HIGHWAY 63	County HOWELL	DMH Licensed	No
WEST PLAINS MO 65775-9809	Region 2	Facility Number	32028
LAMPLIGHT VILLAGE			
309 LOCUST ST	Telephone (417) 256-2749	Alzheimer's Unit	No
WEST PLAINS MO 65775-3906			32
		Bed Capacity	S2 Yes
Mailing Address PO BOX 166WEST PLAINSMO 65775-0166	County HOWELL	DMH Licensed	
WEST PLAINS MO 05/75-0100	Region 2	Facility Number	21563
MOUNTAIN VIEW HEALTHCARE			
1211 NORTH ASH ST	Telephone (417) 934-6818	Alzheimer's Unit	No
MOUNTAIN VIEW MO 65548-7376	Level of Care SNF	Bed Capacity	105
Mailing Address PO BOX 879	County HOWELL	DMH Licensed	No
MOUNTAIN VIEW MO 65548-0879	Region 2 Medicare/Medicaid	Facility Number	15542
NHC HEALTHCARE, WEST PLAINS			
211 DAVIS DR	Telephone (417) 256-0798	Alzheimer's Unit	Yes
WEST PLAINS MO 65775-2242	Level of Care SNF	Bed Capacity	114
Mailing Address PO BOX 497	County HOWELL	DMH Licensed	No
WEST PLAINS MO 65775-0497	Region 2 Medicare/Medicaid	Facility Number	08434
PARK PLACE APARTMENTS			
1211 NORTH ASH ST	Telephone (417) 934-6818	Alzheimer's Unit	No
MOUNTAIN VIEW MO 65548-7376	Level of Care ALF	Bed Capacity	18
Mailing Address PO BOX 879	County HOWELL	DMH Licensed	No
MOUNTAIN VIEW MO 65548-0879	Region 2	Facility Number	15542
PLEASANT VALLEY MANOR			
213 DAVIS DR	Telephone (417) 257-0179	Alzheimer's Unit	No
WEST PLAINS MO 65775-2274	Level of Care RCF*	Bed Capacity	72
Mailing Address 213 DAVIS DR	County HOWELL	DMH Licensed	No
WEST PLAINS MO 65775-2274	Region 2	Facility Number	13641
SOUTH VIEW HEALTH CARE, LLC			
951 CREAMERY ROAD	Telephone (417) 255-9322	Alzheimer's Unit	No
WEST PLAINS MO 65775-6052	Level of Care RCF*	Bed Capacity	32
Mailing Address PO BOX 88	County HOWELL	DMH Licensed	Yes
WEST PLAINS MO 65775-0088	Region 2	Facility Number	23567

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

WEST VUE NURSING AND REHAB	ILITATION CENTER	T 1 1 (117) 055 0150		
210 DAVIS DR	NO (5775 004)	Telephone (417) 256-2152	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-2241	Level of Care SNF	Bed Capacity	130
Mailing Address 210 DAVIS DR		County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-2241	Region 2 Medicare/Medicaid	Facility Number	21733
WILLOW CARE NURSING HOME				
2646 STATE ROUTE 76		Telephone (417) 469-3152	Alzheimer's Unit	Yes
WILLOW SPRINGS	MO 65793-8254	Level of Care SNF	Bed Capacity	105
Mailing Address PO BOX 309		County HOWELL	DMH Licensed	No
WILLOW SPRINGS	MO 65793-0309	Region 2 Medicare/Medicaid	Facility Number	08614
WILLOW WEST APARTMENTS				
2644 STATE ROUTE 76		Telephone (417) 469-3152	Alzheimer's Unit	No
WILLOW SPRINGS	MO 65793-8254	Level of Care ALF	Bed Capacity	36
Mailing Address PO BOX 309		County HOWELL	DMH Licensed	No
WILLOW SPRINGS	MO 65793-0309	Region 2	Facility Number	08614
WILLOW SI KINGS	WO 05775-0507	Kegion 2	Facility Number	08014
	IRC	DN		
BAPTIST HOME, THE				
101 RIGGS-SCOTT LN		Telephone (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care ICF	Bed Capacity	49
Mailing Address PO BOX 87	MO 03030-4330	County IRON	DMH Licensed	No
•	MO (2(50.0007	·		
IRONTON	MO 63650-0087	Region 2 Medicaid	Facility Number	00274
BAPTIST HOME, THE				
101 RIGGS-SCOTT LN		Telephone (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care ALF	Bed Capacity	56
Mailing Address PO BOX 87		County IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2	Facility Number	00274
BELLEVIEW VALLEY NURSING H	(OME			
23144 HIGHWAY 32		Telephone (573) 697-5311	Alzheimer's Unit	No
BELLEVIEW	MO 63623-6346	Level of Care SNF	Bed Capacity	122
Mailing Address 23144 HIGHWAY 32		County IRON	DMH Licensed	No
BELLEVIEW	MO 63623-6346	Region 2 Medicare/Medicaid	Facility Number	00382
	MO 05025-0540	Region 2 Medicare/Medicard	Facinity Number	00382
GOGGIN BOARDING HOME LLC				
620 COUNTY ROAD 40		Telephone (573) 697-5894	Alzheimer's Unit	No
CALEDONIA	MO 63631-9133	Level of Care RCF	Bed Capacity	12
Mailing Address 620 COUNTY RD 40		County IRON	DMH Licensed	Yes
CALEDONIA	MO 63631-9133	Region 2	Facility Number	02937
GRANITE HOUSE RCF LLC				
321 SOUTH MAIN ST		Telephone (573) 546-7283	Alzheimer's Unit	No
IRONTON	MO 63650-1406	Level of Care RCF	Bed Capacity	60
Mailing Address PO BOX 6		County IRON	DMH Licensed	Yes
IRONTON	MO 63650-0066	Region 2	Facility Number	04628

MEADOWBROOK RESIDENTIAL	L CARE, INC			
806 WEST MULBERRY		Telephone (573) 546-7065	Alzheimer's Unit	No
PILOT KNOB	MO 63663-	Level of Care ALF**	Bed Capacity	36
Mailing Address PO BOX 510		County IRON	DMH Licensed	No
PILOT KNOB	MO 63663-0510	Region 2	Facility Number	20513
STONECREST HEALTHCARE				
2 HIGHWAY Y		Telephone (573) 244-3171	Alzheimer's Unit	No
VIBURNUM	MO 65566-0707	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 707		County IRON	DMH Licensed	No
VIBURNUM	MO 65566-0707	Region 2 Medicare/Medicaid	Facility Number	16689
VALLEY RESIDENTIAL CARE				
101 SOUTH KNOB ST		Telephone (573) 546-3080	Alzheimer's Unit	No
IRONTON	MO 63650-1501	Level of Care RCF	Bed Capacity	12
Mailing Address 203 SOUTH WASH	INGTON ST	County IRON	DMH Licensed	Yes
FARMINGTON	MO 63640-1836	Region 2	Facility Number	01901
		JACKSON		
ADDINGTON PLACE OF LEE'S S	UMMIT			
2160 SE BLUE PARKWAY		Telephone (816) 554-0101	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64063-1007	Level of Care ALF**	Bed Capacity	88
Mailing Address 2160 SE BLUE PA	RKWAY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64063-1007	Region 3	Facility Number	28136
ALPINE BREEZE HEALTH AND	WELLNESS			
6124 RAYTOWN RD		Telephone (816) 358-8222	Alzheimer's Unit	Yes
RAYTOWN	MO 64133-4007	Level of Care SNF	Bed Capacity	154
Mailing Address 6124 RAYTOWN I		County JACKSON	DMH Licensed	No
RAYTOWN	MO 64133-4007	Region ³ Medicare/Medicaid	Facility Number	00768
KATIOWN	MO 04133-4007	Kegion 5 Medicare/Medicald	Facility Number	00708
ANTHOLOGY OF THE PLAZA				
2 EMANUEL CLEAVER II BLVD		Telephone (816) 505-3030	Alzheimer's Unit	Yes
KANSAS CITY	MO 64112-1712	Level of Care ALF**	Bed Capacity	96
Mailing Address 2 EMANUEL CLE	AVER II BLVD	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64112-1712	Region 3	Facility Number	31791
ARMOUR OAKS SENIOR LIVING	J COMMUNITY		AT T	
8100 WORNALL RD		Telephone (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care SNF	Bed Capacity	38
Mailing Address 8100 WORNALL F		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3 Medicare/Medicaid	Facility Number	00199
ARMOUR OAKS SENIOR LIVING	G COMMUNITY			
8100 WORNALL RD		Telephone (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care ALF	Bed Capacity	47
Mailing Address 8100 WORNALL F		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3	Facility Number	00199
		melini -	- active realiser	00177

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). Thursday, April 4, 2024

ASPIRE SENIOR LIVING OAK GROVE			37
2108 SW MITCHELL STREET	Telephone (816) 690-4118	Alzheimer's Unit	Yes
OAK GROVE MO 64075-9472	Level of Care SNF	Bed Capacity	90 N
Mailing Address 2108 S MITCHELL	County JACKSON	DMH Licensed	No
OAK GROVE MO 64075-9472	Region 3 Medicare/Medicaid	Facility Number	05849
BAPTIST HOMES OF INDEPENDENCE			
17451 MEDICAL CENTER PARKWAY	Telephone (816) 373-7795	Alzheimer's Unit	No
INDEPENDENCE MO 64057-1805	Level of Care SNF	Bed Capacity	118
Mailing Address 17451 MEDICAL CENTER PRKWY	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-1805	Region 3 Medicare/Medicaid	Facility Number	03782
BAPTIST HOMES OF INDEPENDENCE			
17451 MEDICAL CENTER PARKWAY	Telephone (816) 373-7795	Alzheimer's Unit	NO
INDEPENDENCE MO 64057-1805	Level of Care RCF	Bed Capacity	20
Mailing Address 17451 MEDICAL CENTER PARKWAY	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-1805	Region ³	Facility Number	03782
BEACON HILL RESIDENTIAL CARE			
2905 CAMPBELL	Telephone (816) 531-6168	Alzheimer's Unit	No
KANSAS CITY MO 64109-1417	Level of Care RCF*	Bed Capacity	37
Mailing Address 2905 CAMPBELL	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64109-1417	Region 3	Facility Number	00329
	ingion -	Tuchity Humber	00527
BEEHIVE HOMES OF GRAIN VALLEY			
101 CROSS CREEK DR	Telephone (816) 224-2700	Alzheimer's Unit	No
GRAIN VALLEY MO 64029-9561	Level of Care ALF**	Bed Capacity	32
Mailing Address 101 CROSS CREEK DR	County JACKSON	DMH Licensed	No
GRAIN VALLEY MO 64029-9561	Region 3	Facility Number	24279
BENTON HOUSE OF BLUE SPRINGS			
1701 NW JEFFERSON ST	Telephone (816) 224-2727	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-7229	Level of Care ALF**	Bed Capacity	95
Mailing Address 1701 NW JEFFERSON ST	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-7229	Region 3	Facility Number	29729
BISHOP SPENCER PLACE, INC, THE			
4301 MADISON AVE	Telephone (816) 931-4277	Alzheimer's Unit	No
KANSAS CITY MO 64111-3491	Level of Care ALF**	Bed Capacity	40
Mailing Address 4301 MADISON AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64111-3491	Region 3	Facility Number	20635
	ingivii -	Luchity Mulloci	20055
BISHOP SPENCER PLACE, INC, THE			
4301 MADISON AVE	Telephone (816) 931-4277	Alzheimer's Unit	No
KANSAS CITY MO 64111-3491	Level of Care SNF	Bed Capacity	57
Mailing Address 4301 MADISON AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64111-3491	Region 3 Medicare/Medicaid	Facility Number	20635

DI LE HILLE DECT HOME INC			
BLUE HILLS REST HOME, INC	$T_{alaphana}$ (816) 706 2276	Alzheimer's Unit	No
2207 NORTH BLUE MILLS RD INDEPENDENCE MO 64058-2022	Telephone (816) 796-3376 Level of Care ALF**	Bed Capacity	No 63
MO 64036-2022 Mailing Address 2207 N BLUE MILLS RD	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64058-2022	Region 3	Facility Number	11146
INDEFENDENCE INO 04030-2022	Kegion 5	Facility Nulliber	11140
BRIDGEWOOD HEALTH CARE CENTER			
11515 TROOST	Telephone (816) 943-0101	Alzheimer's Unit	NO
KANSAS CITY MO 64131-3769	Level of Care SNF	Bed Capacity	166
Mailing Address 11515 TROOST	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64131-3769	Region ³ Medicare/Medicaid	Facility Number	06555
BRISTOL MANOR OF OAK GROVE			
300 NORTH AUSTIN	Telephone (816) 625-8691	Alzheimer's Unit	No
OAK GROVE MO 64075-8109	Level of Care RCF	Bed Capacity	12
Mailing Address 300 N AUSTIN	County JACKSON	DMH Licensed	No
OAK GROVE MO 64075-8109	Region 3	Facility Number	16552
OAK OKOVE 100 04075-8109	Kegion 5	Facility Number	10332
BROOKDALE WORNALL PLACE			
501 WEST 107TH ST	Telephone (816) 941-7777	Alzheimer's Unit	No
KANSAS CITY MO 64114-5919	Level of Care ALF**	Bed Capacity	68
Mailing Address 501 WEST 107TH ST	County JACKSON	DMH Licensed	No
KANSAS CITYMO 64114-5919	Region 3	Facility Number	29304
BUTTERFLY HAVEN			
11500 CAMPBELL ST	Telephone (816) 941-2836	Alzheimer's Unit	No
KANSAS CITY MO 64131-3829	Level of Care RCF	Bed Capacity	12
Mailing Address PO BOX 481578	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64148-1578	Region 3	Facility Number	18207
CARMEL HILLS WELLNESS & REHABILITATION			
810 EAST WALNUT ST	Telephone (816) 461-9600	Alzheimer's Unit	Yes
INDEPENDENCE MO 64050-4025	Level of Care SNF	Bed Capacity	194
Mailing Address 810 EAST WALNUT ST	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64050-4025	Region ³ Medicare/Medicaid	Facility Number	23422
CADDIE DUMAS I ONC TEDM CADE EACH ITY			
CARRIE DUMAS LONG TERM CARE FACILITY 2836 BENTON BLVD	Telephone (816) 924-5017	Alzheimer's Unit	No
KANSAS CITY MO 64128-1140	Level of Care ALF		34
Mo 04120-1140 Mailing Address 2836 BENTON BLVD	County JACKSON	Bed Capacity DMH Licensed	Yes
KANSAS CITY MO 64128-1140	•	Facility Number	18550
ME 1979 CH 1 MO 04120-1140	Region 3	Facinty NullDel	10550
CEDARHURST OF BLUE SPRINGS			
20551 E TRINITY PLACE	Telephone (816) 685-8863	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-9501	Level of Care ALF**	Bed Capacity	89
Mailing Address 20551 E TRINITY PLACE	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-9501	Region 3	Facility Number	31581

CLARA MANOR NURSING HOME				
3621 WARWICK BLVD		Telephone (816) 756-1593	Alzheimer's Unit	No
KANSAS CITY	MO 64111-1403	Level of Care SNF	Bed Capacity	90
Mailing Address 3621 WARWICK BL	LVD	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64111-1403	Region ³ Medicaid	Facility Number	14102
COLUER CARE HOME INC				
COLLIER CARE HOME, INC 3001 NW VESPER ST		Telephone (816) 225-9317	Alzheimer's Unit	No
BLUE SPRINGS	MO 64015-3104	Telephone(816) 225-9317Level of CareRCF*	Bed Capacity	15
Mailing Address 3001 NW VESPER S		County JACKSON	DMH Licensed	Yes
BLUE SPRINGS	MO 64015-3104	Region 3	Facility Number	01591
BLUE SI KIINGS	WO 0+013-510+	Kegion 3	Facility Number	01591
CROSS CREEK AT LEE'S SUMMIT	ſ			
3320 NE WILSHIRE DR		Telephone (816) 607-5700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64064-2077	Level of Care ALF**	Bed Capacity	55
Mailing Address 3320 NE WILSHIRE		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64064-2077	Region 3	Facility Number	30996
EDGEWOOD MANOR HEALTH CA	ARE CENTER			
11900 JESSICA LN		Telephone (816) 358-7858	Alzheimer's Unit	No
RAYTOWN	MO 64138-2649	Level of Care SNF	Bed Capacity	91
Mailing Address 11900 JESSICA LN		County JACKSON	DMH Licensed	No
RAYTOWN	MO 64138-2649	Region ³ Medicare/Medicaid	Facility Number	14119
ESSEX OF GRAIN VALLEY, THE				
401 SOUTHWEST ROCK CREEK LN		Telephone (816) 443-3992	Alzheimer's Unit	No
GRAIN VALLEY	MO 64029-8460	Level of Care RCF	Bed Capacity	12
Mailing Address 401 SOUTHWEST R	OCK CREEK LN	County JACKSON	DMH Licensed	No
GRAIN VALLEY	MO 64029-8460	Region ³	Facility Number	24475
		-		
GREGORY RIDGE HEALTH CARE	CENTED			
7001 CLEVELAND AVE	E CENTER	Telephone (816) 333-0700	Alzheimer's Unit	No
KANSAS CITY	MO 64132-1622	Level of Care SNF	Bed Capacity	116
Mailing Address 7001 CLEVELAND		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64132-1622	Region ³ Medicare/Medicaid	Facility Number	04109
		Region 5 Medical Chiedrand		01109
HARRIS HOUSE RESIDENTIAL CA	ARE FACILITY, THE			
3859 EAST 59TH TERRACE		Telephone (816) 599-5230	Alzheimer's Unit	No
KANSAS CITY	MO 64130-4410	Level of Care RCF	Bed Capacity	7
Mailing Address 3859 EAST 59TH TE		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64130-4410	Region 3	Facility Number	16225
HIDDEN LAKE CARE CENTER				
11400 HIDDEN LAKE DR		Telephone (816) 737-1010	Alzheimer's Unit	No
RAYTOWN	MO 64133-7409	Level of Care RCF*	Bed Capacity	48
 				
Mailing Address 11400 HIDDEN LAK RAYTOWN		County JACKSON Region ³	DMH Licensed Facility Number	No 17146

HIDDEN LAKE CARE CENTER		
11400 HIDDEN LAKE DR	Telephone (816) 737-1010	Alzheimer's Unit No
RAYTOWN MO 64133-7409	Level of Care SNF	Bed Capacity 112
Mailing Address 11400 HIDDEN LAKE DR	County JACKSON	DMH Licensed No
RAYTOWN MO 64133-7409	Region ³ Medicare/Medicaid	Facility Number 17146
HIGHLAND REHABILITATION & HEALTH CARE CENTER		
904 EAST 68TH ST	Telephone (816) 333-5485	Alzheimer's Unit NO
KANSAS CITY MO 64131-1305	Level of Care SNF	Bed Capacity 162
Mailing Address 904 EAST 68TH ST	County JACKSON	DMH Licensed No
KANSAS CITY MO 64131-1305	Region 3 Medicare/Medicaid	Facility Number 06782
	incurcare incurcant	
HILLTOP AT BLUE RIVER, THE		
10425 CHESTNUT DR	Telephone (816) 763-4444	Alzheimer's Unit Yes
KANSAS CITY MO 64137-3201	Level of Care SNF	Bed Capacity 160
Mailing Address 10425 CHESTNUT DR	County JACKSON	DMH Licensed No
KANSAS CITY MO 64137-3201	Region 3 Medicare/Medicaid	Facility Number 19114
	Region 5 Witheart Muturealu	Tuenty Runber 17114
HOPE CARE CENTER		
115 EAST 83RD ST	Telephone (816) 523-3988	Alzheimer's Unit No
KANSAS CITY MO 64114-2537	Level of Care SNF	Bed Capacity 16
Mailing Address 115 EAST 83RD ST	County JACKSON	DMH Licensed No
KANSAS CITY MO 64114-2537	Region ³ Medicaid	Facility Number 21370
	incurcaiu	21070
HOUSE OF CARE CENTER		
3744 BENTON BLVD	Telephone (816) 921-6852	Alzheimer's Unit No
KANSAS CITY MO 64128-2515	Level of Care RCF	Bed Capacity 8
Mailing Address 3744 BENTON BLVD	County JACKSON	DMH Licensed Yes
KANSAS CITY MO 64128-7912	Region ³	Facility Number 17001
IGNITE MEDICAL RESORT BLUE SPRINGS		
20511 E TRINITY PLACE	Telephone (816) 622-2900	Alzheimer's Unit NO
BLUE SPRINGS MO 64015-9501	Level of Care SNF	Bed Capacity 90
Mailing Address 20511 E TRINITY PLACE	County JACKSON	DMH Licensed No
BLUE SPRINGS MO 64015-9501	Region 3 Medicare/Medicaid	Facility Number32246
IGNITE MEDICAL RESORT CARONDELET LLC		
621 CARONDELET DR	Telephone (816) 941-1300	Alzheimer's Unit No
KANSAS CITY MO 64114-4670	Level of Care SNF	Bed Capacity 162
Mailing Address 621 CARONDELET DR	County JACKSON	DMH Licensed No
KANSAS CITYMO64114-4670	Region 3 Medicare/Medicaid	Facility Number12185
IGNITE MEDICAL RESORT ST MARYS LLC		
111 MOCK AVE	Telephone (816) 220-4200	Alzheimer's Unit Yes
BLUE SPRINGS MO 64014-2504	Level of Care SNF	Bed Capacity 130
Mailing Address 111 MOCK AVE	County JACKSON	DMH Licensed No
BLUE SPRINGS MO 64014-2504	Region ³ Medicare/Medicaid	Facility Number 13219
	Region - Meurcare/Meurcaru	13219

INDEPENDENCE MANOR CARE CENTER			
1600 SOUTH KINGS HIGHWAY	Telephone (816) 833-4777	Alzheimer's Unit	Yes
INDEPENDENCE MO 64055-1853	Level of Care SNF	Bed Capacity	99
Mailing Address 1600 SOUTH KINGS HIGHWAY	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64055-1853	Region 3 Medicare/Medicaid	Facility Number	03807
A CIRCON CREEK MEMORY CARE			
JACKSON CREEK MEMORY CARE 19400 EAST 40TH ST COURT SOUTH	T_{2}	A 1-1	Vac
	Telephone (816) 478-5689 Learning ICE	Alzheimer's Unit	Yes 70
INDEPENDENCE MO 64057-1548 Mailing Address 19400 EAST 40TH ST COURT SOUTH	Level of Care ICF	Bed Capacity DMH Licensed	70 No
INDEPENDENCE MO 64057-1548	County JACKSON	Facility Number	
INDEPENDENCE INO 04037-1348	Region 3	Facility Number	25894
JACKSON CREEK POST ACUTE			
3980 SOUTH JACKSON DR	Telephone (816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE MO 64057-2205	Level of Care SNF	Bed Capacity	120
Mailing Address 3980 S JACKSON DR	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-2205	Region 3 Medicare/Medicaid	Facility Number	25709
JACKSON CREEK POST ACUTE			
3980 SOUTH JACKSON DR	Telephone (816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE MO 64057-2205	Level of Care ALF**	Bed Capacity	62
Mailing Address 3980 S JACKSON DR	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-2205	Region 3	Facility Number	25709
JEANNE JUGAN CENTER			
8745 JAMES A REED ROAD	Telephone (816) 761-4744	Alzheimer's Unit	No
KANSAS CITY MO 64138-4414	Level of Care ICF	Bed Capacity	26
Mailing Address 8745 JAMES A REED RD	County JACKSON	DMH Licensed	No
KANSAS CITYMO64138-4414	Region 3 Medicaid	Facility Number	12724
TEANNE THICAN CENTER			
JEANNE JUGAN CENTER 8745 JAMES A REED ROAD	Talaphana $(816) 761 4744$	Alzheimer's Unit	No
KANSAS CITY MO 64138-4414	Telephone(816) 761-4744Level of CareSNF	Bed Capacity	No 26
Mailing Address 8745 JAMES A REED RD	County JACKSON	DMH Licensed	20 No
KANSAS CITY MO 64138-4414	•	Facility Number	12724
KANSAS CITT INO 04136-4414	Region ³ Medicaid	Facility Number	12724
JEFFERSON HEALTH CARE			
615 SW OLDHAM PARKWAY	Telephone (816) 524-3328	Alzheimer's Unit	No
LEE'S SUMMIT MO 64081-2602	Level of Care SNF	Bed Capacity	120
Mailing Address 615 SW OLDHAM PKWY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT MO 64081-2602	Region 3 Medicare/Medicaid	Facility Number	04415
JOHN KNOX VILLAGE CARE CENTER			
600 NW PRYOR ROAD	Telephone (816) 347-2400	Alzheimer's Unit	Yes
LEE'S SUMMIT MO 64081-1104	Level of Care SNF	Bed Capacity	430
Mailing Address 600 NW PRYOR RD	County JACKSON	DMH Licensed	No
LEE'S SUMMIT MO 64081-1104	Region 3 Medicare/Medicaid	Facility Number	14529
		•	

KANSAS CITY	МО	64110-1220
Mailing Address 3920 FOREST		
KANSAS CITY	MO	64110-1220
3920 FOREST		

10000 WORNALL RD		
KANSAS CITY	MO	64114-4359
Mailing Address 10000 WORNALL RD		
KANSAS CITY	MO	64114-4359

KINGSWOOD			
10000 WORNALL RD			
KANSAS CITY	MO	64114-4359	
Mailing Address 10000 WORNALL RD			
KANSAS CITY	MO	64114-4359	

LEE'S SUMMIT PLACE

1501 SW 3RD ST	
LEE'S SUMMIT	MO 64081-2424
Mailing Address 1501 SW 3RD ST	
LEE'S SUMMIT	MO 64081-2424

LIFE CARE CENTER OF GRANDVIEW	
6301 FAST 125TH ST	

6301 EAST 125TH ST		
GRANDVIEW	MO	64030-1884
Mailing Address 6301 EAST 125TH ST		
GRANDVIEW	MO	64030-1884

LODGE RESIDENTIAL CARE FACILITY, THE	
3860 EAST 60TH ST	

KANSAS CITY	MO	64130-4418
Mailing Address 3860 EAST 60TH ST		
KANSAS CITY	MO	64130-4418

LUXLIFE SENIOR LIVING

111 MOCK AVE		
BLUE SPRINGS	MO	64014-2504
Mailing Address 111 MOCK AVE		
BLUE SPRINGS	MO	64014-2504

MADISON SENIOR LIVING THE

14001 MADISON AVENUE		
KANSAS CITY	MO 64145-1613	
Mailing Address 14001 MADISON AVENUE		
KANSAS CITY	MO 64145-1613	

110-1220	Telephone(816) 531-5308Level of CareRCFCountyJACKSONRegion3	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 17 Yes 03982
114-4359	Telephone (816) 942-0994 Level of Care SNF	Alzheimer's Unit Bed Capacity	Yes 86
114-4359	CountyJACKSONRegion3Medicare/Medicaid	DMH Licensed Facility Number	No 04152
	Telephone (816) 942-0994	Alzheimer's Unit	Yes
114-4359	Level of Care ALF**	Bed Capacity	67
	County JACKSON	DMH Licensed	Yes
114-4359	Region 3	Facility Number	04152
	Telephone (816) 525-6300	Alzheimer's Unit	No
081-2424	Level of Care SNF	Bed Capacity	60
	County JACKSON	DMH Licensed	No
081-2424	Region ³ Medicare/Medicaid	Facility Number	12484
020 1994	Telephone (816) 765-7714	Alzheimer's Unit	Yes
030-1884	Level of Care SNF	Bed Capacity DMH Licensed	172 No
030-1884	CountyJACKSONRegion3Medicare/Medicaid	Facility Number	11929
HE			
120 4419	Telephone (816) 599-5235 Level of Care RCF	Alzheimer's Unit	No
130-4418	Level of Care RCF County JACKSON	Bed Capacity DMH Licensed	8 No
130-4418	Region 3	Facility Number	16211
	Telephone (816) 220-4200	Alzheimer's Unit	No
014-2504	Level of Care ALF**	Bed Capacity	57
	County JACKSON	DMH Licensed	No
014-2504	Region 3	Facility Number	13219
.145-1613	Telephone 816-627-1726 Level of Care ALF**	Alzheimer's Unit Bed Capacity	Yes 66
	County JACKSON	DMH Licensed	No
145 1610			

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Region 3

32321

Facility Number

MAVWOOD MANOD			
MAYWOOD MANOR 1041 WEST TRUMAN RD	Telephone (816) 254-6789	Alzheimer's Unit	No
INDEPENDENCE MO 64050-3447	Level of Care RCF*	Bed Capacity	24
Mailing Address 1041 WEST TRUMAN RD	County JACKSON	DMH Licensed	Yes
INDEPENDENCE MO 64050-3447	Region 3	Facility Number	03948
	Kegion 5	Facility Number	03948
MAYWOOD TERRACE LIVING CENTER			
10300 EAST TRUMAN RD	Telephone (816) 836-1250	Alzheimer's Unit	Yes
INDEPENDENCE MO 64052-2258	Level of Care SNF	Bed Capacity	89
Mailing Address 10300 EAST TRUMAN RD	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64052-2258	Region 3 Medicare/Medicaid	Facility Number	08673
MONTEREY PARK REHABILITATION & HEALTH CARE CENTER			N.
4600 LITTLE BLUE PARKWAY	Telephone (816) 795-7888	Alzheimer's Unit	No
INDEPENDENCE MO 64057-8302	Level of Care SNF	Bed Capacity	122
Mailing Address 4600 LITTLE BLUE PRKWY	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-8302	Region ³ Medicare/Medicaid	Facility Number	15987
MY BLESSED HOME			
305 E 63RD ST	Telephone (816) 678-8061	Alzheimer's Unit	No
KANSAS CITY MO 64113-2225	Level of Care RCF	Bed Capacity	11
Mailing Address 305 E 63RD ST	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64113-2225	Region 3	Facility Number	27175
MYERS NURSING & CONVALESCENT CENTER			
2315 WALROND AVE	Telephone (816) 231-3180	Alzheimer's Unit	No
KANSAS CITY MO 64127-4210	Level of Care ICF	Bed Capacity	84
Mailing Address 2315 WALROND AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64127-4210	Region ³ Medicaid	Facility Number	05626
OAKS, THE			
5550 NOLAND ROAD	Telephone (816) 356-0200	Alzheimer's Unit	No
KANSAS CITY MO 64133-3685	Level of Care RCF	Bed Capacity	62
Mailing Address 5550 NOLAND RD	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64133-3685	Region 3	Facility Number	13440
PARKVIEW HEALTHCARE			NT
128 NORTH HARDESTY	Telephone (816) 241-2020	Alzheimer's Unit	No 120
KANSAS CITY MO 64123-1404	Level of Care SNF	Bed Capacity	120
Mailing Address 128 NORTH HARDESTY	County JACKSON	DMH Licensed	No
KANSAS CITYMO64123-1404	Region 3 Medicare/Medicaid	Facility Number	02928
PARKWAY HEALTH CARE CENTER			
2323 SWOPE PARKWAY	Telephone (816) 924-1122	Alzheimer's Unit	No
KANSAS CITY MO 64130-2638	Level of Care SNF	Bed Capacity	97
Mailing Address 2323 SWOPE PARKWAY	County JACKSON	DMH Licensed	No
KANSAS CITYMO64130-2638	Region 3 Medicare/Medicaid	Facility Number	07092

PARKWAY SENIOR LIVING, THE			
550 NE NAPOLEON DR	Telephone (816) 228-8866	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64014-5403	Level of Care ALF**	Bed Capacity	72
Mailing Address 550 NE NAPOLEON DR	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64014-5403	Region 3	Facility Number	29917
	Region 5	Tuchity Pulliber	27717
PRINCETON SENIOR LIVING THE			
1701 S E OLDHAM PARKWAY	Telephone (816) 875-4950	Alzheimer's Unit	Yes
LEE'S SUMMIT MO 64081-	Level of Care ALF**	Bed Capacity	68
Mailing Address 1701 S E OLDHAM PARKWAY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT MO 64081-	Region ³	Facility Number	32762
DEHAD OF VANSAS CITY SOUTH			
REHAB OF KANSAS CITY SOUTH 8033 HOLMES ROAD	Telephone (816) 363-6222	Alzheimer's Unit	No
KANSAS CITY MO 64131-2115	Telephone (816) 363-6222 Level of Care SNF	Bed Capacity	100
		DMH Licensed	No
Mailing Address 8033 HOLMES ROAD KANSAS CITY MO 64131-2115	·		03680
KANSAS CITY MO 04131-2115	Region 3 Medicare/Medicaid	Facility Number	03680
REHABILITATION CENTER OF INDEPENDENCE, THE			
1800 S SWOPE DR	Telephone (816) 257-2566	Alzheimer's Unit	Yes
INDEPENDENCE MO 64057-1084	Level of Care SNF	Bed Capacity	130
Mailing Address 1800 S SWOPE DR	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057-1084	Region ³ Medicare/Medicaid	Facility Number	22063
ROCKHILL MANOR ASSISTED LIVING			
4235 LOCUST ST	Telephone (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY MO 64110-1016	Level of Care ALF	Bed Capacity	154
Mailing Address PO BOX 5930	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64171-0930	Region 3	Facility Number	06794
ROCKHILL MANOR ASSISTED LIVING			
4235 LOCUST ST	Telephone (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY MO 64110-1016	Level of Care ALF**	Bed Capacity	36
Mailing Address PO BOX 5930	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64171-0930	Region 3	Facility Number	06794
ROSEWOOD REHAB AND HEALTHCARE CENTER			
1415 WEST WHITE OAK	Telephone (816) 254-3500	Alzheimer's Unit	Yes
INDEPENDENCE MO 64050-2590	Level of Care SNF	Bed Capacity	300
Mailing Address 1415 WEST WHITE OAK	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64050-2590	Region 3 Medicare/Medicaid	Facility Number	06604
		Tacinty Mulliou	0004
SEASONS REHAB AND HEALTHCARE CENTER			
15600 WOODS CHAPEL RD	Telephone (816) 478-4757	Alzheimer's Unit	Yes
KANSAS CITY MO 64139-1261	Level of Care SNF	Bed Capacity	78
Mailing Address 15600 WOODS CHAPEL RD	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64139-1261	Region ³ Medicare/Medicaid	Facility Number	23712

SHANGRI-LA REHAB & LIVING CEN	TER		
930 NORTH EAST DUNCAN RD		Telephone (816) 229-6677	Alzheimer's Unit No
BLUE SPRINGS	MO 64014-2173	Level of Care SNF	Bed Capacity 120
Mailing Address 930 NORTH EAST DUI	NCAN RD	County JACKSON	DMH Licensed No
	MO 64014-2173	Region ³ Medicare/Medicaid	Facility Number 00677
		ingion - Incurant of Incurant	
SILVERADO LEE'S SUMMIT			
3101 SW 3RD STREET		Telephone (816) 321-1648	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-4060	Level of Care ALF**	Bed Capacity 54
Mailing Address 3101 SW 3RD STREET		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-4060	Region 3	Facility Number 31077
ST ANTHONY'S			
1010 EAST 68TH STREET		Telephone (816) 846-0870	Alzheimer's Unit Yes
KANSAS CITY	MO 64131-1311	Level of Care ALF**	Bed Capacity 81
Mailing Address 1010 EAST 68TH STRE	BET	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64131-1311	Region 3	Facility Number32075
SUMMIT, THE			
3660 SUMMIT		Telephone (816) 931-1196	Alzheimer's Unit No
	MO 64111-4632	Level of Care SNF	Bed Capacity 64
Mailing Address 3660 SUMMIT	10 04111 4052	County JACKSON	DMH Licensed No
•	MO 64111-4632		
KANSAS CITT	WIO 04111-4032	Region 3 Medicare/Medicaid	Facility Number18330
SUMMITVIEW TERRACE ASSISTED	LIVING BY AMERICARE		
12101 EAST BANNISTER RD		Telephone (816) 763-6667	Alzheimer's Unit No
KANSAS CITY	MO 64138-4913	Level of Care ALF**	Bed Capacity 52
Mailing Address 12101 EAST BANNIST	ER RD	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64138-4913	Region 3	Facility Number16311
SUNTERRA SPRINGS INDEPENDENC	CE		
19200 E 37TH TERRACE S		Telephone (816) 335-3008	Alzheimer's Unit No
	MO 64057-8324	Level of Care SNF	Bed Capacity 38
Mailing Address 19200 E 37TH TERRAC		County JACKSON	DMH Licensed No
8	MO 64057-8324	Region ³ Medicare	Facility Number30894
TIMBERLAKE CARE CENTER			
12110 HOLMES RD		Telephone (816) 941-3006	Alzheimer's Unit No
	MO 64145-1707	Level of Care SNF	Bed Capacity 122
Mailing Address 12110 HOLMES RD		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64145-1707	Region 3 Medicare/Medicaid	Facility Number10962
TRUSTWELL LIVING OF RAYTOWN	ī		
9110 EAST 63RD ST		Telephone (816) 353-3400	Alzheimer's Unit No
RAYTOWN	MO 64133-4893	Level of Care ALF**	Bed Capacity 76
Mailing Address 9110 EAST 63RD ST		County JACKSON	DMH Licensed No
RAYTOWN	MO 64133-4893	Region ³	Facility Number 24227
		-	

VILLAGE ASSISTED LIVING				
1701 NW O'BRIEN RD		Telephone (816) 347-2700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care ALF**	Bed Capacity	50
Mailing Address 1701 NW O'BRIEN	NRD	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number	29258
VILLAGE ASSISTED LIVING				
1704 NORTHWEST O'BRIEN RD		Telephone (816) 347-2700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care ALF**	Bed Capacity	172
Mailing Address 1704 NORTHWES	T O'BRIEN RD	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number	16108
VILLAGE AT CARROLL PARK,	THE			
5301 HARRY TRUMAN DR		Telephone (816) 761-6838	Alzheimer's Unit	No
GRANDVIEW	MO 64030-1708	Level of Care ICF	Bed Capacity	93
Mailing Address 5301 HARRY TRU	JMAN DR	County JACKSON	DMH Licensed	Yes
GRANDVIEW	MO 64030-1708	Region 3	Facility Number	03157
WATERFORD LADIES HOME				
500 NW VESPER ST		Telephone (816) 228-6337	Alzheimer's Unit	No
BLUE SPRINGS	MO 64014-2744	Level of Care RCF	Bed Capacity	27
Mailing Address 500 NW VESPER	ST	County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-2744	Region 3	Facility Number	13774
WHITE OAK ASSISTED LIVING				
1515 WEST WHITE OAK		Telephone (816) 254-3500	Alzheimer's Unit	No
INDEPENDENCE	MO 64050-2557	Level of Care ALF**	Bed Capacity	78
Mailing Address 1515 WEST WHIT	'E OAK	County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64050-2557	Region 3	Facility Number	06604
WILSHIRE AT LAKEWOOD REH	HAB CENTER			
600 NE MEADOWVIEW DR		Telephone (816) 554-9866	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64064-1983	Level of Care SNF	Bed Capacity	170
Mailing Address 600 NE MEADOW	/VIEW DR	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64064-1983	Region 3 Medicare/Medicaid	Facility Number	22471
WOOD OAKS, INC				
1804 SOUTH STERLING AVE		Telephone (816) 254-5400	Alzheimer's Unit	No
INDEPENDENCE	MO 64052-3845	Level of Care RCF*	Bed Capacity	30
Mailing Address PO BOX 520049		County JACKSON	DMH Licensed	Yes
INDEPENDENCE	MO 64052-0049	Region 3	Facility Number	02389
		JASPER		
ANEW HEALTHCARE OPERATI	ONS-SARCOXIE, LLC			
1505 MINER	MO. (49(2) (211	Telephone (417) 548-3434	Alzheimer's Unit	No
SARCOXIE	MO 64862-9211	Level of Care SNF	Bed Capacity	40 No
Mailing Address 1505 MINER		County JASPER	DMH Licensed	No

MO 64862-0248

Region 1

Medicare/Medicaid

SARCOXIE

06864

Facility Number

AUTUMN PLACE RESIDENTIAL CARE OF JOPLIN			
2030 E ZORA ST	Telephone (417) 626-8900	Alzheimer's Unit	No
JOPLIN MO 64801-1170	Level of Care RCF*	Bed Capacity	38
Mailing Address 2030 E ZORA ST	County JASPER	DMH Licensed	No
JOPLIN MO 64801-1170	Region ¹	Facility Number	20779
BRISTOL MANOR OF CARTHAGE			
2131 SOUTH RIVER AVE	Telephone (417) 358-9788	Alzheimer's Unit	No
CARTHAGE MO 64836-3350	Level of Care RCF	Bed Capacity	12
Mailing Address 2131 S RIVER AVE	County JASPER	DMH Licensed	Yes
CARTHAGE MO 64836-3350	Region 1	Facility Number	20858
BRISTOL MANOR OF WEBB CITY			
1803 NORTH MAIN, HIGHWAY D	Telephone (417) 673-4231	Alzheimer's Unit	No
WEBB CITY MO 64870-1193	Level of Care RCF	Bed Capacity	12
Mailing Address 1803 NORTH MAIN, HIGHWAY D	County JASPER	DMH Licensed	No
WEBB CITY MO 64870-1193	Region ¹	Facility Number	20537
CARL JUNCTION RESIDENTIAL CARE			
201 FIR RD	Telephone (417) 782-5659	Alzheimer's Unit	No
CARL JUNCTION MO 64834-9222	Level of Care RCF*	Bed Capacity	37
Mailing Address 201 FIR RD	County JASPER	DMH Licensed	No
CARL JUNCTION MO 64834-9222	Region 1	Facility Number	20550
			20000
CARTHAGE HEALTH AND REHABILITATION CENTER			
1901 BUENA VISTA AVE	Telephone (417) 358-1937	Alzheimer's Unit	Yes
CARTHAGE MO 64836-3178	Level of Care SNF	Bed Capacity	120
Mailing Address 1901 BUENA VISTA AVE	County JASPER	DMH Licensed	No
CARTHAGE MO 64836-3178	Region ¹ Medicare/Medicaid	Facility Number	12472
COMMUNITIES OF WILDWOOD RANCH			
3222 SOUTH JOHN DUFFY DR	Telephone (417) 621-0175	Alzheimer's Unit	No
JOPLIN MO 64804-1569	Level of Care SNF	Bed Capacity	120
Mailing Address 3222 SOUTH JOHN DUFFY DR	County JASPER	DMH Licensed	No
JOPLIN MO 64804-1569	Region ¹ Medicare/Medicaid	Facility Number	29077
EQUEEDEN TEDDA CE A COLOTER I MUNICI DU AMERICA DE			
FOXBERRY TERRACE - ASSISTED LIVING BY AMERICARE 4316 NORTH ST LOUIS AVE	Tolophere $(417) 625 1000$	Alzhoimoula II:4	Vac
	Telephone (417) 625-1000 Level of Care ALF**	Alzheimer's Unit	Yes 46
WEBB CITY MO 64870-9550 Mailing Address 4316 NORTH ST LOUIS AVE	Level of Care ALF** County JASPER	Bed Capacity DMH Licensed	40 No
0	•		
WEBB CITY MO 64870-9550	Region 1	Facility Number	25428
JOPLIN GARDENS			
2810 SOUTH JACKSON AVE	Telephone (417) 572-0041	Alzheimer's Unit	No
JOPLIN MO 64804-2524	Level of Care SNF	Bed Capacity	92
Mailing Address 2810 SOUTH JACKSON AVE	County JASPER	DMH Licensed	No
JOPLIN MO 64804-2524	Region 1 Medicare/Medicaid	Facility Number	01373

MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICARE			
2510 CLINTON ST	Telephone (417) 358-7201	Alzheimer's Unit	No
CARTHAGE MO 64836-3427	Level of Care ALF**	Bed Capacity	50
Mailing Address 2510 CLINTON ST	County JASPER		No
CARTHAGE MO 64836-3427	Region 1	Facility Number 1766	60
	- Constant		
OAK POINTE OF CARTHAGE			
300 W AIRPORT DR	Telephone (417) 358-3355	Alzheimer's Unit Y	es
CARTHAGE MO 64836-3511	Level of Care ALF**	Bed Capacity	55
Mailing Address 300 W AIRPORT DR	County JASPER		No
CARTHAGE MO 64836-3511	Region 1	Facility Number 3016	68
SPRING RIVER CHRISTIAN VILLAGE, INC			
201 S NORTHPARK LN	Telephone (417) 623-4313	Alzheimer's Unit N	No
JOPLIN MO 64801-8426	Level of Care ALF**	Bed Capacity	93
Mailing Address 201 S NORTHPARK LN	County JASPER	DMH Licensed N	No
JOPLIN MO 64801-8426	Region 1	Facility Number 1425	51
ST LUKE'S CARE CENTER, INC			_
1220 EAST FAIRVIEW AVE	Telephone (417) 358-9084		No
CARTHAGE MO 64836-3122	Level of Care ALF**	1	41
Mailing Address 1220 EAST FAIRVIEW AVE	County JASPER		No
CARTHAGE MO 64836-3122	Region ¹	Facility Number 0760)6
ST LUKE'S NURSING CENTER, INC			
1220 EAST FAIRVIEW AVE	Telephone (417) 358-9084	Alzheimer's Unit Yo	es
CARTHAGE MO 64836-3122	Level of Care SNF	Bed Capacity	95
Mailing Address 1220 EAST FAIRVIEW AVE	County JASPER		No
CARTHAGE MO 64836-3122	Region ¹ Medicare/Medicaid	Facility Number 0760	06
SUNNY HILLS RESIDENTIAL CARE FACILITY			
17562 IMPERIAL RD	Telephone (417) 358-6122	Alzheimer's Unit N	Nо
CARTHAGE MO 64836-8753	Level of Care RCF	Bed Capacity	18
Mailing Address 17562 IMPERIAL RD	County JASPER	DMH Licensed N	No
CARTHAGE MO 64836-8753	Region ¹	Facility Number 1335	51
WEBB CITY HEALTH AND REHABILITATION CENTER			
2077 STADIUM DR	Telephone (417) 673-1933	Alzheimer's Unit Y	es
WEBB CITY MO 64870-9743	Level of Care SNF		20
Mailing Address 2077 STADIUM DR	County JASPER	1 5	No
WEBB CITY MO 64870-9743	Region 1 Medicare/Medicaid	Facility Number 1228	
WESTGATE			
3130 JOHN DUFFY DR	Telephone (417) 553-3688		es
JOPLIN MO 64804-1569	Level of Care SNF		20
Mailing Address 3130 JOHN DUFFY DR	County JASPER		No
JOPLIN MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 3175	54

WHISPERING PINES SENIOR LIVING			
4904 EAST WELLRIDGE LN	Telephone (417) 781-0099	Alzheimer's Unit	No
JOPLIN MO 64801-8793	Level of Care RCF*	Bed Capacity	20
Mailing Address 4904 EAST WELLRIDGE LN	County JASPER	DMH Licensed	No
JOPLIN MO 64801-8793	Region 1	Facility Number	09477
WILDWOOD SENIOR LIVING THE			
3002 SOUTH JOHN DUFFY DRIVE	Telephone (417) 623-2233	Alzheimer's Unit	Yes
JOPLIN MO 64804-1656	Level of Care ALF**	Bed Capacity	74
Mailing Address 3002 SOUTH JOHN DUFFY DRIVE	County JASPER	DMH Licensed	No
JOPLIN MO 64804-1656	Region 1	Facility Number	31370
	JEFFERSON		
ARBOR VIEW NURSING AND REHABILITATION			
6400 THE CEDARS COURT	Telephone (636) 274-1777	Alzheimer's Unit	NO
CEDAR HILL MO 63016-2220	Level of Care SNF	Bed Capacity	150
Mailing Address 6400 THE CEDARS CT	County JEFFERSON	DMH Licensed	No
CEDAR HILL MO 63016-2220	Region 2 Medicare/Medicaid	Facility Number	12647
	Kegion 2 - Weuteart/Weuteart	Tuenity Pulliber	12047
AUTUMN RIDGE RESIDENCES			
300 AUTUMN RIDGE DR	Telephone (636) 931-8400	Alzheimer's Unit	No
HERCULANEUM MO 63048-1506	Level of Care RCF*	Bed Capacity	81
Mailing Address 300 AUTUMN RIDGE DR	County JEFFERSON	DMH Licensed	Yes
HERCULANEUM MO 63048-1506	Region 2	Facility Number	15845
BAISCH NURSING CENTER			
3260 BAISCH DR	Telephone (636) 586-2291	Alzheimer's Unit	No
DE SOTO MO 63020-5046	Level of Care RCF*	Bed Capacity	18
Mailing Address 3260 BAISCH DR	County JEFFERSON	DMH Licensed	No
DE SOTO MO 63020-5046	Region 2	Facility Number	00910
BAISCH NURSING CENTER			
3260 BAISCH DR	Talanhana (636) 586 2201	Alphaiman's Unit	No
DE SOTO MO 63020-5046	Telephone (636) 586-2291 Level of Care SNF	Alzheimer's Unit Bed Capacity	61
		DMH Licensed	No
Mailing Address3260 BAISCH DRDE SOTOMO 63020-5046	·		
DE 5010 100 05020-5040	Region 2 Medicare/Medicaid	Facility Number	00910
CEDARHURST OF ARNOLD			
2069 MISSOURI STATE ROAD	Telephone (636) 333-2715	Alzheimer's Unit	Yes
ARNOLD MO 63010-4809	Level of Care ALF**	Bed Capacity	94
Mailing Address 2069 MISSOURI STATE ROAD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4809	Region 2	Facility Number	32428
COLLINS HOUSE, THE			
102 COLLINS RD	Telephone (314) 749-0986	Alzheimer's Unit	NO
FESTUS MO 63028-	Level of Care ALF**	Bed Capacity	8
Mailing Address 102 COLLINS RD	County JEFFERSON	DMH Licensed	No
FESTUS MO 63028-	Region 2	Facility Number	33443

COLONIAL HOUSE OF FESTUS II				
129 GRAY ST		Telephone (636) 465-0994	Alzheimer's Unit	No
FESTUS	MO 63028-1950	Level of Care RCF	Bed Capacity	20
Mailing Address 129 GRAY ST		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-1950	Region 2	Facility Number	07322
		-		
CORI MANOR HEALTHCARE & R	EHABILITATION CENTER			
560 CORISANDE HILLS RD		Telephone (636) 343-2282	Alzheimer's Unit	No
FENTON	MO 63026-5613	Level of Care SNF	Bed Capacity	144
Mailing Address 560 CORISANDE H	ILLS RD	County JEFFERSON	DMH Licensed	No
FENTON	MO 63026-5613	Region 2 Medicare/Medicaid	Facility Number	01800
CRYSTAL OAKS				
1500 CALVARY CHURCH RD		Telephone (636) 933-1818	Alzheimer's Unit	Yes
FESTUS	MO 63028-4125	Level of Care ALF**	Bed Capacity	60
Mailing Address 1500 CALVARY CH		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-4125	Region 2	Facility Number	99932
CRYSTAL OAKS				
1500 CALVARY CHURCH RD		Telephone (636) 933-1818	Alzheimer's Unit	Yes
FESTUS	MO 63028-4125	Level of Care SNF	Bed Capacity	131
Mailing Address 1500 CALVARY CH		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-4125	Region ² Medicare/Medicaid	Facility Number	99932
		ingion 2 miculary/micularu	Tuenny Tuniber	<i>}}</i>
FESTUS MANOR				
627 WESTWOOD DR S		Telephone (636) 931-9066	Alzheimer's Unit	No
FESTUS	MO 63028-2062	Level of Care SNF	Bed Capacity	150
Mailing Address 627 WESTWOOD D	R S	County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-2062	Region 2 Medicare/Medicaid	Facility Number	02546
	TED			
FOUNTAINBLEAU NURSING CEN 1349 HIGHWAY 61	IEK	Telephone (636) 937-3500	Alzheimer's Unit	No
FESTUS	MO 63028-4107	Level of Care SNF	Bed Capacity	106
	WO 03028-4107	County JEFFERSON	DMH Licensed	No
Mailing Address PO BOX 700 FESTUS	MO 63028-0700	·	Facility Number	17080
FESTUS	MO 03028-0700	Region 2 Medicare/Medicaid	Facility Number	17080
HILLCREST CARE CENTER, INC				
1108 CLARKE ST		Telephone (636) 586-3022	Alzheimer's Unit	No
DE SOTO	MO 63020-2706	Level of Care SNF	Bed Capacity	120
Mailing Address 1108 CLARKE ST		County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-2706	Region 2 Medicare/Medicaid	Facility Number	20084
		-	-	
MAGNOLIA HOUSE				
204 GRAND AVE		Telephone (636) 933-0662	Alzheimer's Unit	No
FESTUS	MO 63028-1842	Level of Care RCF	Bed Capacity	12
Mailing Address 204 GRAND AVE		County JEFFERSON	DMH Licensed	Yes
FESTUS	MO 63028-1842	Region 2	Facility Number	13697

MEADOWVIEW MEMORY CARE			
555 WOODLAND VILLAS LANE	Telephone (636) 296-1400	Alzheimer's Unit	Yes
ARNOLD MO 63010-2011	Level of Care ALF**	Bed Capacity	24
Mailing Address 555 WOODLAND VILLAS LANE	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-2011	Region 2	Facility Number	12549
	ingion -	2 donioj 1 (dino of	12519
MY PLACE RESIDENTIAL CARE, L.C.			
23 NORTH SIXTH ST	Telephone (636) 933-1793	Alzheimer's Unit	No
FESTUS MO 63028-1301	Level of Care ALF	Bed Capacity	44
Mailing Address 23 NORTH SIXTH ST	County JEFFERSON	DMH Licensed	Yes
FESTUS MO 63028-1301	Region 2	Facility Number	10631
MY PLACE TOO, INC			
1107 CLARKE ST	Telephone (636) 586-7871	Alzheimer's Unit	No
DE SOTO MO 63020-2709	Level of Care RCF*	Bed Capacity	50
Mailing Address 1107 CLARKE ST	County JEFFERSON	DMH Licensed	Yes
DE SOTO MO 63020-2709	Region 2	Facility Number	16234
PINE VALLEY AT THE WOODLANDS			
620 WOODLAND MEADOWS	Telephone (636) 202-1050	Alzheimer's Unit	No
ARNOLD MO 63010-2030	Level of Care ALF**	Bed Capacity	48
Mailing Address 620 WOODLAND MEADOWS	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-2030	Region 2	Facility Number	31974
SCENIC NURSING AND REHABILITATION CENTER, LLC			
1333 SCENIC DR	Telephone (636) 931-2995	Alzheimer's Unit	Yes
HERCULANEUM MO 63048-1550	Level of Care SNF	Bed Capacity	189
Mailing Address 1333 SCENIC DR	County JEFFERSON	DMH Licensed	No
HERCULANEUM MO 63048-1550	Region 2 Medicare/Medicaid	Facility Number	09605
	Region 2 Metucale/Metucalu	Tuenity Number	09005
SOUTH COUNTY NURSING HOME, INC			
1101 WEST OUTER 21 RD	Telephone (636) 296-5455	Alzheimer's Unit	No
ARNOLD MO 63010-4644	Level of Care SNF	Bed Capacity	153
Mailing Address 1101 WEST OUTER 21 RD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4644	Region 2 Medicare/Medicaid	Facility Number	03650
STANEDDIDCE DESATA			
STONEBRIDGE DESOTO	T L L ((2)) 59((55)		N-
1550 VILLAS DR	Telephone (636) 586-6559 L L SNE	Alzheimer's Unit	No
DE SOTO MO 63020-2586	Level of Care SNF	Bed Capacity	56 N
Mailing Address 1550 VILLAS DR	County JEFFERSON	DMH Licensed	No
DE SOTO MO 63020-2586	Region 2 Medicare/Medicaid	Facility Number	13501
STONEBRIDGE DESOTO			
1550 VILLAS DR	Telephone (636) 586-6559	Alzheimer's Unit	No
DE SOTO MO 63020-2586	Level of Care RCF*	Bed Capacity	80
Mailing Address 1550 VILLAS DR	County JEFFERSON	DMH Licensed	No
DE SOTO MO 63020-2586	Region 2	Facility Number	13501

CUNNIVIHI I INDEDENDENCE CENTED				
SUNNYHILL INDEPENDENCE CENTER 3343 ARMBRUSTER ROAD		Telephone (636) 586-2188	Alzheimer's Unit	No
	63020-4506	Level of Care ALF**		32
	03020-4300		Bed Capacity	
Mailing Address 3343 ARMBRUSTER RD	(2020 450)	County JEFFERSON	DMH Licensed	Yes
DE SOTO MO	63020-4506	Region 2	Facility Number	29674
SUPERIOR MANOR OF FESTUS, LLC				
12827 HIGHWAY TT		Telephone (314) 624-5575	Alzheimer's Unit	No
FESTUS MO	63028-4351	Level of Care SNF	Bed Capacity	55
Mailing Address 12827 HWY TT		County JEFFERSON	DMH Licensed	No
-	63028-4351	Region 2 Medicare/Medicaid	Facility Number	06820
WOODLAND MANOR NURSING CENTER				
100 WOODLAND COURT		Telephone (636) 296-1400	Alzheimer's Unit	No
	63010-2030	Level of Care SNF	Bed Capacity	178
Mailing Address 100 WOODLAND CT		County JEFFERSON	DMH Licensed	No
ARNOLD MO	63010-2030	Region 2Medicare/Medicaid	Facility Number	12549
	JOHNS	ON		
ARBORS AT HARMONY GARDENS-MEM	ODV CADE ASSISTED I IVINC	DV AMEDICADE THE		
539 EAST YOUNG AVENUE	OKI CARE ASSISTED LIVING	Telephone (660) 429-0034	Alzheimer's Unit	Yes
	64093-1228	Level of Care ALF**		24
			Bed Capacity	
Mailing Address 539 EAST YOUNG AVENU		County JOHNSON	DMH Licensed	No
WARRENSBURG MO	64093-1228	Region 3	Facility Number	31389
BRISTOL MANOR OF HOLDEN				
501 WEST SECOND		Telephone (816) 732-6789	Alzheimer's Unit	No
HOLDEN MO	64040-1205	Level of Care RCF	Bed Capacity	12
Mailing Address 501 WEST SECOND		County JOHNSON	DMH Licensed	No
HOLDEN MO	64040-1205	Region 3	Facility Number	17951
BRISTOL MANOR OF WARRENSBURG				
603 CREACH		Telephone (660) 747-8319	Alzheimer's Unit	No
	64093-1994	Level of Care RCF	Bed Capacity	12
Mailing Address 603 CREACH	0+0/3-1//+	County JOHNSON	DMH Licensed	No
0	64093-1994	Region 3	Facility Number	
WARKENSBURG MO	04093-1994	Kegion 5	Facility Number	16599
COUNTRY CLUB REHAB AND HEALTHC	CARE CENTER			
503 REGENT DR		Telephone (660) 429-4444	Alzheimer's Unit	No
WARRENSBURG MO	64093-3231	Level of Care SNF	Bed Capacity	73
Mailing Address 503 REGENT DR		County JOHNSON	DMH Licensed	No
WARRENSBURG MO	64093-3231	Region 3 Medicare/Medicaid	Facility Number	20892
COUNTRY CLUB REHAB AND HEALTHC	ARE CENTER			
503 REGENT DR		Telephone (660) 429-4444	Alzheimer's Unit	No
	64093-3231	Level of Care RCF*	Bed Capacity	40
Mo Mailing Address 503 REGENT DR	0.070 0201	County JOHNSON	DMH Licensed	No
-	64093-3231	Region 3	Facility Number	
MU MU	UTU/J-J2J1	NC21011 J	Facinty number	20892

HARMONY GARDENS - ASSISTED LIVING BY AMERICARE			
503 BURKARTH ROAD	Telephone (660) 747-5411	Alzheimer's Unit	No
WARRENSBURG MO 64093-3145	Level of Care ALF**	Bed Capacity	44
Mailing Address 503 BURKARTH RD	County JOHNSON	DMH Licensed	No
WARRENSBURG MO 64093-3145	Region 3	Facility Number	18615
	Region 5	1 dennig 1 (diniser	10015
HOLDEN MANOR HEALTH & REHABILITATION			
2005 SOUTH LEXINGTON	Telephone (816) 732-4138	Alzheimer's Unit	No
HOLDEN MO 64040-1610	Level of Care SNF	Bed Capacity	52
Mailing Address 2005 SOUTH LEXINGTON	County JOHNSON	DMH Licensed	No
HOLDEN MO 64040-1610	Region ³ Medicare/Medicaid	Facility Number	08334
JOHNSON COUNTY CARE CENTER			
122 EAST MARKET ST	Telephone (660) 747-8101	Alzheimer's Unit	No
WARRENSBURG MO 64093-1818	Level of Care ICF	Bed Capacity	87
Mailing Address 122 EAST MARKET ST	County JOHNSON	DMH Licensed	No
WARRENSBURG MO 64093-1818	Region ³ Medicaid	Facility Number	05309
MOOREVIEW RESIDENTIAL			
130 WEST CULTON	Telephone (660) 429-1587	Alzheimer's Unit	No
WARRENSBURG MO 64093-1720	Level of Care RCF	Bed Capacity	20
Mailing Address 130 WEST CULTON	County JOHNSON	DMH Licensed	Yes
WARRENSBURG MO 64093-1720	Region 3	Facility Number	11225
WARRENSBORG NO 04035-1720	Kegion 5	Facility Number	11223
RIDGE CREST NURSING CENTER			
706 SOUTH MITCHELL	Telephone (660) 429-2177	Alzheimer's Unit	Yes
WARRENSBURG MO 64093-2828	Level of Care SNF	Bed Capacity	120
Mailing Address 706 SOUTH MITCHELL	County JOHNSON	DMH Licensed	No
WARRENSBURG MO 64093-2828	Region 3 Medicare/Medicaid	Facility Number	06640
WADDENGDUDG MANOD GADE GENTED			
WARRENSBURG MANOR CARE CENTER	Telephone (660) 747 2216	Alzheimer's Unit	No
400 CARE CENTER DR WARRENSBURG MO 64093-3100	Telephone (660) 747-2216 Level of Care SNF		No 88
	County JOHNSON	Bed Capacity DMH Licensed	
Mailing Address 400 CARE CENTER DR WARRENSBURG MO 64093-3100			No
WARRENSBURG MO 64093-3100	Region ³ Medicare/Medicaid	Facility Number	08383
K	NOX		
BLESSING CENTER, THE			
302 NORTH MAIN	Telephone (660) 397-2293	Alzheimer's Unit	No
EDINA MO 63537-1353	Level of Care RCF	Bed Capacity	51
Mailing Address 302 NORTH MAIN	County KNOX	DMH Licensed	Yes
EDINA MO 63537-1353	Region 5	Facility Number	03728
KNOX COUNTY NURSING HOME DISTRICT			
55774 STATE HIGHWAY 6	Telephone (660) 397-2282	Alzheimer's Unit	No
EDINA MO 63537-4253	Level of Care SNF	Bed Capacity	60
Mailing Address 55774 STATE HIGHWAY 6	County KNOX	DMH Licensed	No
EDINA MO 63537-4253	Region 5 Medicare/Medicaid	Facility Number	04173

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

LACLEDE

ANNA'S HOUSE ASSISTED LIVING FACILITY			
25466 NORTH HWY 5	Telephone (417) 839-7637	Alzheimer's Unit	No
LEBANON MO 65536-	Level of Care ALF	Bed Capacity	80
Mailing Address PO BOX 969	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-0969	Region 1	Facility Number	08791
	-		
CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA	PF		
842 LYNN STREET	Telephone (417) 815-0122	Alzheimer's Unit	Yes
LEBANON MO 65536-3832	Level of Care ALF**	Bed Capacity	90
Mailing Address 842 LYNN STREET	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-3832	Region 1	Facility Number	31890
	Region	Tuenity Runiber	51070
COUNTRACTOR HOME II C			
COUNTRYSIDE HOME, LLC	T-l (417) 522 7419	A 1-1	N-
24499 PARK DR	Telephone (417) 532-7418	Alzheimer's Unit	No
LEBANON MO 65536-5843	Level of Care RCF	Bed Capacity	20 V
Mailing Address 24499 PARK DR	County LACLEDE	DMH Licensed	Yes
LEBANON MO 65536-5843	Region ¹	Facility Number	15052
ESSEX OF LEBANON, THE			
1316 DEADRA DR	Telephone (417) 532-4863	Alzheimer's Unit	No
LEBANON MO 65536-4609	Level of Care RCF	Bed Capacity	12
Mailing Address 1316 DEADRA DR	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-4609	Region 1	Facility Number	24257
LEBANON NORTH NURSING & REHAB			
596 MORTON RD	Telephone (417) 532-9173	Alzheimer's Unit	Yes
LEBANON MO 65536-3648	Level of Care SNF	Bed Capacity	180
Mailing Address 596 MORTON RD	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-3648	Region 1 Medicare/Medicaid	Facility Number	04369
LEBANON SOUTH NURSING & REHAB			
514 WEST FREMONT ROAD	Telephone (417) 532-5351	Alzheimer's Unit	No
LEBANON MO 65536-4244	Level of Care SNF	Bed Capacity	116
Mailing Address 514 WEST FREMONT ROAD	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-4244	Region ¹ Medicare/Medicaid	Facility Number	15650
LEBANON SOUTH NURSING & REHAB			
514 WEST FREMONT RD	Telephone (417) 532-5351	Alzheimer's Unit	No
LEBANON MO 65536-4244	Level of Care RCF	Bed Capacity	68
Mailing Address 514 WEST FREMONT ROAD	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-4244	Region 1	Facility Number	15650
NORTHRIDGE PLACE - ASSISTED LIVING BY AMERICARE	Talashana (417) 522 0702		V
NORTHRIDGE PLACE - ASSISTED LIVING BY AMERICARE 1500 LYNN ST	Telephone (417) 532-9793	Alzheimer's Unit	Yes
NORTHRIDGE PLACE - ASSISTED LIVING BY AMERICARE 1500 LYNN ST LEBANON MO 65536-4409	Level of Care ALF**	Bed Capacity	50
NORTHRIDGE PLACE - ASSISTED LIVING BY AMERICARE 1500 LYNN ST	-		

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

LAFAYETTE

ANEW HEALTHCARE ODESSA				
609 GOLF ST		Telephone (816) 230-7530	Alzheimer's Unit	No
ODESSA	MO 64076-1462	Level of Care SNF	Bed Capacity	60
Mailing Address 609 GOLF ST	110 04070 1402	County LAFAYETTE	DMH Licensed	No
ODESSA	MO 64076-1462	Region ³ Medicare/Medicaid	Facility Number	05749
ODESSIX	110 04070 1402	Region 9 Micultare/Micultaru	Facility Number	03749
APPLE RIDGE CARE CENTER				
100 WEST THOMAS AVE		Telephone (660) 493-2232	Alzheimer's Unit	Yes
WAVERLY	MO 64096-9143	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 188		County LAFAYETTE	DMH Licensed	No
WAVERLY	MO 64096-0188	Region 3 Medicare/Medicaid	Facility Number	08823
BRISTOL MANOR OF LEXINGTO	N			
2615 MAIN ST	1	Telephone (660) 259-6655	Alzheimer's Unit	No
LEXINGTON	MO 64067-1974	Level of Care RCF	Bed Capacity	12
Mailing Address 2615 MAIN ST	MO 04007 1774	County LAFAYETTE	DMH Licensed	No
LEXINGTON	MO 64067-1974	Region ³	Facility Number	17543
	100000000000000000000000000000000000000	Kegion 5	Facility Number	17545
BRISTOL MANOR OF ODESSA				
115 SOUTH 5TH ST		Telephone (816) 633-8692	Alzheimer's Unit	No
ODESSA	MO 64076-1330	Level of Care RCF	Bed Capacity	12
Mailing Address 115 S 5TH ST		County LAFAYETTE	DMH Licensed	No
ODESSA	MO 64076-1330	Region 3	Facility Number	16547
ESSEX OF CONCORDIA, THE				
402 REDBUD		Telephone (660) 463-0200	Alzheimer's Unit	No
CONCORDIA	MO 64020-8358	Level of Care RCF	Bed Capacity	12
Mailing Address 402 REDBUD		County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-8358	Region 3	Facility Number	24461
LUTHERAN GOOD SHEPHERD H	OME			
202 S WEST ST		Telephone (660) 463-2267	Alzheimer's Unit	NO
CONCORDIA	MO 64020-9643	Level of Care ALF**	Bed Capacity	53
Mailing Address PO BOX 849		County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-0849	Region 3	Facility Number	04705
I UTHER AN NURSENC HOME				
LUTHERAN NURSING HOME 202 S WEST ST		Tolophono (660) 462 0267	Alzheimer's Unit	Yes
	MO 64020 0642	Telephone (660) 463-2267 Level of Care SNF		
CONCORDIA Mailing Address PO BOX 849	MO 64020-9643	Level of Care SNF County LAFAYETTE	Bed Capacity DMH Licensed	113 No
CONCORDIA	MO 64020-0849	•	Facility Number	
CONCORDIA	1120 04020-0047	Region 3Medicare/Medicaid	Facinty Number	04705
MEYER CARE CENTER				
1201 WEST 19TH ST		Telephone (660) 584-7111	Alzheimer's Unit	No
HIGGINSVILLE	MO 64037-1458	Level of Care SNF	Bed Capacity	56
Mailing Address 1201 WEST 19TH S		County LAFAYETTE	DMH Licensed	No
HIGGINSVILLE	MO 64037-1458	Region 3 Medicare/Medicaid	Facility Number	05326

Mailing Address 1201 WEST 19TH ST HIGGINSVILLE MO 64 RIVERBEND HEIGHTS HEALTH & REHAB 1221 HIGHWAY 13 SOUTH	4037-1458 4037-1458 BILITATION	Telephone Level of Care County LAF Region ³ Telephone Level of Care	(660) 584-7111 ALF** FAYETTE (660) 259-4695 SNF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 39 No 05326 No 154
Mailing Address 1221 HIGHWAY 13 SOUTH	10/7 7107	2	FAYETTE	DMH Licensed	No
LEXINGTON MO 64	4067-7187	Region 3 M	/ledicare/Medicaid	Facility Number	04333
	LAWRE	NCE			
AURORA NURSING CENTER					
1700 SOUTH HUDSON AVE		Telephone	(417) 678-2165	Alzheimer's Unit	Yes
AURORA MO 65	5605-2717	Level of Care	SNF	Bed Capacity	125
Mailing Address 1700 S HUDSON AVE		County LAV	WRENCE	DMH Licensed	No
AURORA MO 65	5605-2717	Region 1 N	/ledicare/Medicaid	Facility Number	00234
BRISTOL MANOR OF AURORA					
740 SOUTH HUDSON	- (05. 0510	Telephone	(417) 678-7535	Alzheimer's Unit	No
	5605-2512	Level of Care	RCF WRENCE	Bed Capacity DMH Licensed	12 No
Mailing Address 740 SOUTH HUDSON AURORA MO 65	5605-2512	County LAV Region 1	WRENCE	Facility Number	20352
		8		·	
COMMUNITY OF AUTUMN COURT AT MT	VERNON, THE				
1421 S LANDRUM ST		Telephone	(417) 466-3549	Alzheimer's Unit	No
	5712-1912	Level of Care	ALF**	Bed Capacity	34
Mailing Address 1421 S LANDRUM ST	710 1010	2	WRENCE	DMH Licensed	No
MOUNT VERNON MO 65	5712-1912	Region 1		Facility Number	20809
HUDSON HOUSE					N
1700-B SOUTH HUDSON AVE	- (05 0717	Telephone	(417) 678-2169	Alzheimer's Unit	No
		Level of Care	RCF* WRENCE	Bed Capacity DMH Licensed	41 No
Mailing Address 1700-B S HUDSON AVE AURORA MO 65		County LAV Region 1	WRENCE	Facility Number	10444
	0005-2717	Kegioli 1		Facility Number	10444
LAWRENCE COUNTY MANOR					
915 CARL ALLEN ST		Telephone	(417) 466-2183	Alzheimer's Unit	Yes
		Level of Care	SNF	Bed Capacity	90 No
Mailing Address 915 CARL ALLEN ST MT VERNON MO 65		•	WRENCE /ledicare/Medicaid	DMH Licensed Facility Number	No 04349
	7/12 1012		neurcare/meurcaru	Facinty mullioti	04349

LAWRENCE COUNTY RESIDENTIAL CARE CENTER

915 CARL ALLEN ST MT VERNON MO 65712-1612 Mailing Address 915 CARL ALLEN ST MT VERNON MO 65712-1612 Telephone(417) 466-2183Alzheimer's UnitNoLevel of CareRCF*Bed Capacity30CountyLAWRENCEDMH LicensedNoRegion1Facility Number04349

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

MT VERNON NURSING			
1425 SOUTH LANDRUM		Telephone (417) 466-2260	Alzheimer's Unit NO
MT VERNON	MO 65712-1912	Level of Care SNF	Bed Capacity 60
Mailing Address 1425 S LANDRUM		County LAWRENCE	DMH Licensed No
MT VERNON	MO 65712-1912	Region 1 Medicare/Medicaid	Facility Number 16304
OAK POINTE OF MONETT			
1011 OLD AIRPORT ROAD		Telephone (417) 235-3500	Alzheimer's Unit Yes
MONETT	MO 65708-1375	Level of Care ALF**	Bed Capacity 55
Mailing Address 1011 OLD AIRPORT	ROAD	County LAWRENCE	DMH Licensed No
MONETT	MO 65708-1375	Region 1	Facility Number30206
OZARKS METHODIST MANOR, TH	HE		
205 SOUTH COLLEGE		Telephone (417) 258-2573	Alzheimer's Unit Yes
MARIONVILLE	MO 65705-9340	Level of Care SNF	Bed Capacity 78
Mailing Address PO BOX 403		County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region ¹ Medicare/Medicaid	Facility Number06273
OZARKS METHODIST MANOR, TH	HE		
205 SOUTH COLLEGE	MO (5705 0240	Telephone (417) 258-2573	Alzheimer's Unit No
MARIONVILLE	MO 65705-9340	Level of Care RCF	Bed Capacity 76
Mailing Address PO BOX 403 MARIONVILLE	MO 65705-0403	County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 03703-0405	Region ¹	Facility Number06273
POPA GOOD SAMARITAN SERVIC	TES, LLC		
16979 HWY 39		Telephone (417) 353-4448	Alzheimer's Unit Yes
VERONA	MO 65769-6319	Level of Care ALF**	Bed Capacity 8
Mailing Address 16979 HWY 39		County LAWRENCE	DMH Licensed No
VERONA	MO 65769-6319	Region 1	Facility Number30440
	LEV	VIS	
COUNTRY AIRE RETIREMENT CH	ENTER		
18540 STATE HIGHWAY 16		Telephone (573) 215-2216	Alzheimer's Unit No
LEWISTOWN	MO 63452-2111	Level of Care RCF*	Bed Capacity 8
Mailing Address 18540 STATE HIGHV	WAY 16	County LEWIS	DMH Licensed No
LEWISTOWN	MO 63452-2111	Region 5	Facility Number16896
COUNTRY AIRE RETIREMENT CE	ENTER		
18540 STATE HIGHWAY 16		Telephone (573) 215-2216	Alzheimer's Unit No
LEWISTOWN	MO 63452-2111	Level of Care SNF	Bed Capacity 60
Mailing Address 18540 STATE HIGHV		County LEWIS	DMH Licensed No
LEWISTOWN	MO 63452-2111	Region ⁵ Medicare/Medicaid	Facility Number 16896
LA BELLE MANOR CARE CENTEI	R		
1002 CENTRAL		Telephone (660) 213-3234	Alzheimer's Unit Yes
LA BELLE	MO 63447-2092	Level of Care SNF	Bed Capacity 94
Mailing Address 1002 CENTRAL		County LEWIS	DMH Licensed No
LA BELLE	MO 63447-2092	Region 5 Medicare/Medicaid	Facility Number04212
		meanear of meanearu	

LEWIS COUNTY NURSING HOME DISTRICT

 17528 STATE HIGHWAY 81 N

 CANTON
 MO
 63435-3463

 Mailing Address PO BOX 266

 CANTON
 MO
 63435-0266

Telephone(573) 288-4454Alzheimer's UnitLevel of CareSNFBed CapacityCountyLEWISDMH LicensedRegion 5Medicare/MedicaidFacility Number

Yes

120

No

04790

LINCOLN

BRISTOL MANOR OF ELSBERRY				
1402 RIVERVIEW DR		Telephone (573) 898-5955	Alzheimer's Unit	No
ELSBERRY	MO 63343-1612	Level of Care RCF	Bed Capacity	12
Mailing Address 1402 RIVERVIEW D	DR	County LINCOLN	DMH Licensed	No
ELSBERRY	MO 63343-1612	Region 5	Facility Number	20015
ELSBERRY MISSOURI HEALTH C	ARE CENTER			
1827 HIGHWAY B		Telephone (573) 898-2880	Alzheimer's Unit	No
ELSBERRY	MO 63343-3126	Level of Care SNF	Bed Capacity	56
Mailing Address 1827 HWY B		County LINCOLN	DMH Licensed	No
ELSBERRY	MO 63343-3126	Region 5 Medicare/Medicaid	Facility Number	02336
		Region - Wieucard/Weucard	Tuchity Rumber	02550
ELSBERRY MISSOURI HEALTH C	AKE CENTER	$T_{alambana}$ (572) 909 2990	Alabaiman'a Unit	NO
1827 HIGHWAY B	MO 62242 2126	Telephone (573) 898-2880 Lovel of Core AL E**	Alzheimer's Unit	NO 12
ELSBERRY	MO 63343-3126	Level of Care ALF**	Bed Capacity	12 N-
Mailing Address 1827 HIGHWAY B	MO (2242 212)	County LINCOLN	DMH Licensed	No
ELSBERRY	MO 63343-3126	Region 5	Facility Number	02336
	~			
FOUR SEASONS ASSISTED LIVIN	G.			
230 RAILROAD ST		Telephone (636) 366-4231	Alzheimer's Unit	No
MOSCOW MILLS	MO 63362-1600	Level of Care ALF	Bed Capacity	30
Mailing Address 230 RAILROAD ST		County LINCOLN	DMH Licensed	Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number	02624
FOUR SEASONS RCF I				N
220 RAILROAD ST	NO (22(2)1(0)	Telephone (636) 366-4231	Alzheimer's Unit	No
MOSCOW MILLS	MO 63362-1600	Level of Care RCF	Bed Capacity	23
Mailing Address 230 RAILROAD ST		County LINCOLN	DMH Licensed	Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number	02624
LINCOLN COUNTY NURSING & R	ЕНАВ	$T_{\rm clash} = ((2)) 529, 5712$	A 1-1	N-
1145 EAST CHERRY ST	MQ (2270 1520	Telephone(636) 528-5712Level of CareSNF	Alzheimer's Unit	No
TROY	MO 63379-1520		Bed Capacity	90 N
Mailing Address PO BOX 130		County LINCOLN	DMH Licensed	No
TROY	MO 63379-0130	Region 5 Medicare/Medicaid	Facility Number	15750
SH EV COMMUNITY CADE				
SILEX COMMUNITY CARE 111 DUNCAN MANSION RD		$T_{alaphana}$ (572) 294 5219	Alaboimon's Unit	No
SILEX	MO 62277 2220	Telephone(573) 384-5218Lovel of CoreSNE	Alzheimer's Unit	No 60
	MO 63377-2229	Level of Care SNF	Bed Capacity	60 No
Mailing Address 111 DUNCAN MAN		County LINCOLN	DMH Licensed	No
SILEX	MO 63377-2229	Region 5 Medicare/Medicaid	Facility Number	06838

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

SILEX RESIDENTIAL HOME, LLC		
145 DUNCAN MANSION RD	Telephone (573) 384-5213 Alzheimer's Unit No	0
SILEX MO 63377-2229	Level of Care RCF* Bed Capacity 6	0
Mailing Address 145 DUNCAN MANSION RD	County LINCOLN DMH Licensed Ye	s
SILEX MO 63377-2229	Region 5Facility Number2098.	2
SSTAR LLC		
125 ANNA AVE, #18	Telephone(636) 462-6979Alzheimer's UnitNo	0
TROY MO 63379-2402	Level of Care RCF Bed Capacity 2	0
Mailing Address 125 ANNA AVE, #18	County LINCOLN DMH Licensed Ye	s
TROY MO 63379-2402	Region5Facility Number1699	2
SUGAR CREEK - ASSISTED LIVING BY AMERICARE		
161 PROFESSIONAL PARKWAY	Telephone(636) 528-3136Alzheimer's UnitYe	8
TROY MO 63379-2829	Level of Care ALF** Bed Capacity 6	0
Mailing Address 161 PROFESSIONAL PRKWY	County LINCOLN DMH Licensed N	0
TROY MO 63379-2829	Region 5Facility Number2634	9
TROY MANOR		
200 THOMPSON DR	Telephone (636) 528-8446 Alzheimer's Unit No	0
TROY MO 63379-2308	Level of Care ALF Bed Capacity 2	0
Mailing Address 200 THOMPSON DR	County LINCOLN DMH Licensed N	0
TROY MO 63379-2308	Region5Facility Number0539	7
TROY MANOR		
200 THOMPSON DR	Telephone (636) 528-8446 Alzheimer's Unit Ye	s
TROY MO 63379-2308	Level of Care SNF Bed Capacity 13	0
Mailing Address 200 THOMPSON DR	County LINCOLN DMH Licensed N	0
TROY MO 63379-2308	Region 5 Medicare/Medicaid Facility Number 0539	7
TROY RH CNSL OPERATION LLC		
350 CAP AU GRIS	Telephone (636) 462-4915 Alzheimer's Unit No	0
TROY MO 63379-1761	Level of Care RCF* Bed Capacity 2.	3
Mailing Address PO BOX 271	County LINCOLN DMH Licensed N	0
TROY MO 63379-0271	Region 5 Facility Number 0812	9
WINFIELD RESIDENTIAL CARE		
220 WEST WALNUT ST	Telephone (636) 668-8110 Alzheimer's Unit No	0
WINFIELD MO 63389-1122	Level of Care RCF Bed Capacity 2	
Mailing Address 220 WEST WALNUT ST	County LINCOLN DMH Licensed Ye	
WINFIELD MO 63389-1122	Region 5 Facility Number 0872	
	LINN	
		1
BRISTOL MANOR OF BROOKFIELD		
338 THOMPSON	Telephone(660) 258-5065Alzheimer's UnitNoNoDDD	
BROOKFIELD MO 64628-2419	Level of Care RCF Bed Capacity 11	
Mailing Address 338 THOMPSON	County LINN DMH Licensed N	
BROOKFIELD MO 64628-2419	Region 5Facility Number1866	6

102 EAST HAYDEN		Telephone (660) 376-2210	Alzheimer's Unit	No
MARCELINE	MO 64658-2003	Level of Care RCF	Bed Capacity	12
Mailing Address 102 EAST HAYDEN		County LINN	DMH Licensed	No
MARCELINE	MO 64658-2003	Region 5	Facility Number	17764
LIFE CARE CENTER OF BROOKFI	ELD			
315 HUNT ST		Telephone (660) 258-3367	Alzheimer's Unit	Yes
BROOKFIELD	MO 64628-2412	Level of Care SNF	Bed Capacity	120
Mailing Address 315 HUNT ST		County LINN	DMH Licensed	No
BROOKFIELD	MO 64628-2412	Region 5 Medicare/Medicaid	Facility Number	00822
MCLARNEY MANOR				
215 EAST PRATT		Telephone (660) 258-7402	Alzheimer's Unit	No
BROOKFIELD	MO 64628-1300	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 129		County LINN	DMH Licensed	No
BROOKFIELD	MO 64628-0129	Region ⁵ Medicare/Medicaid	Facility Number	05220
	LIV	INGSTON		
ASHBURY HEIGHTS OF CHILLICO	THE			
603 ST LOUIS ST		Telephone (660) 707-1270	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-2438	Level of Care RCF	Bed Capacity	12
Mailing Address 603 ST LOUIS ST		County LIVINGSTON	DMH Licensed	Yes
CHILLICOTHE	MO 64601-2438	Region 4	Facility Number	23909
BAPTIST HOME, THE				
500 BAPTIST HOME LN		Telephone (660) 646-6219	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-3973	Level of Care ALF**	Bed Capacity	20
Mailing Address 500 BAPTIST HOME	LN	County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number	14084
CHILLICOTHE MANOR I LLC				
1301 MONROE ST		Telephone (660) 646-5180	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-1345	Level of Care RCF*	Bed Capacity	64
Mailing Address 1301 MONROE ST		County LIVINGSTON	DMH Licensed	Yes
CHILLICOTHE	MO 64601-1345	Region 4	Facility Number	04632
GRAND RIVER HEALTH CARE				
118 TRENTON RD		Telephone (660) 646-0353	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-4002	Level of Care SNF	Bed Capacity	60
Mailing Address 118 TRENTON RD		County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-4002	Region 4 Medicare/Medicaid	Facility Number	16939
LIVINGSTON MANOR CARE CENT	ER			
939 E BIRCH DR		Telephone (660) 646-5177	Alzheimer's Unit	Yes
	MO 64601-2189	Level of Care SNF	Bed Capacity	94
CHILLICOTHE	1010 04001-2107			
CHILLICOTHE Mailing Address 939 E BIRCH DR	MO 04001-210)	County LIVINGSTON	DMH Licensed	No

MORNINGSIDE CENTER				
1700 MORNINGSIDE DR		Telephone (660) 646-0170	Alzheimer's Unit No)
	64601-1545	Level of Care SNF	Bed Capacity 60	
Mailing Address 1700 MORNINGSIDE DR		County LIVINGSTON	DMH Licensed No.	
-	64601-1545	Region 4 Medicare/Medicaid	Facility Number 05557	
	01001 1010	Region i Meureare/Meureare		
MORNINGSIDE CENTER ASSISTED LIVI	ING APARTMENTS			
1702 MORNINGSIDE DR		Telephone (660) 646-0170	Alzheimer's Unit No)
CHILLICOTHE MO	64601-1545	Level of Care ALF	Bed Capacity 31	i
Mailing Address 1702 MORNINGSIDE DR		County LIVINGSTON	DMH Licensed No.)
CHILLICOTHE MO	64601-1545	Region 4	Facility Number 05557	!
STONEBRIDGE CHILLICOTHE				
2601 FAIR ST		Telephone (660) 646-4123	Alzheimer's Unit No	
	64601-3525	Level of Care RCF*	Bed Capacity 40	
Mailing Address 2601 FAIR ST		County LIVINGSTON	DMH Licensed No.	
CHILLICOTHE MO	64601-3525	Region 4	Facility Number03833	i
STONEBRIDGE CHILLICOTHE				
2601 FAIR ST		Telephone (660) 646-4123	Alzheimer's Unit No)
CHILLICOTHE MO	64601-3525	Level of Care SNF	Bed Capacity 75	5
Mailing Address 2601 FAIR ST		County LIVINGSTON	DMH Licensed No)
-	64601-3525	Region 4 Medicare/Medicaid	Facility Number 03833	;
	MACO	ON		
BRISTOL MANOR OF MACON				
707 RANCHLAND DR		Telephone (660) 385-3020	Alzheimer's Unit No	,
	63552-1994	Level of Care RCF	Bed Capacity 12	
Mailing Address 707 RANCHLAND DR	00002 1771	County MACON	DMH Licensed No.	
8	63552-1994	Region 5	Facility Number 17865	
MACON	05552-1994	Kegion 5	Facility Number 17805	'
LA PLATA NURSING HOME				
100 OLD STAGECOACH RD		Telephone (660) 332-4315	Alzheimer's Unit No)
LA PLATA MO	63549-1362	Level of Care SNF	Bed Capacity 52	2
Mailing Address 100 OLD STAGECOACH R	D	County MACON	DMH Licensed No.)
LA PLATA MO	63549-1362	Region 5Medicare/Medicaid	Facility Number04395	i
LOCH HAVEN				
701 SUNSET HILLS DR				
		Telephone (660) 385-3113	Alzheimer's Unit Vac	1
	63552 2165	Telephone (660) 385-3113 Level of Care SNE	Alzheimer's Unit Yes Bod Conscity 100	
	63552-2165	Level of Care SNF	Bed Capacity 100)
Mailing Address PO BOX 187		Level of Care SNF County MACON	Bed Capacity100DMH LicensedNo)
Mailing Address PO BOX 187	63552-2165 63552-0187	Level of Care SNF	Bed Capacity 100)
Mailing Address PO BOX 187		Level of Care SNF County MACON	Bed Capacity100DMH LicensedNo)
Mailing AddressPO BOX 187MACONMO		Level of Care SNF County MACON	Bed Capacity100DMH LicensedNo))
Mailing Address PO BOX 187 MACON MO LOCH HAVEN 701 SUNSET HILLS DR		Level of Care SNF County MACON Region ⁵ Medicare/Medicaid	Bed Capacity100DMH LicensedNoFacility Number04739)))))))
Mailing Address PO BOX 187 MACON MO LOCH HAVEN 701 SUNSET HILLS DR	63552-0187	Level of Care SNF County MACON Region 5 Medicare/Medicaid Telephone (660) 385-3113 Level of Care RCF* County MACON	Bed Capacity100DMH LicensedNoFacility Number04739Alzheimer's UnitNo))))
Mailing Address PO BOX 187MACONMOLOCH HAVEN701 SUNSET HILLS DRMACONMOMailing Address PO BOX 187	63552-0187	Level of Care SNF County MACON Region 5 Medicare/Medicaid Telephone (660) 385-3113 Level of Care RCF*	Bed Capacity100DMH LicensedNoFacility Number04739Alzheimer's UnitNoBed Capacity26	

MACON HEALTH CARE CENTER				
29612 KELLOGG AVE		Telephone (660) 385-5797	Alzheimer's Unit	Yes
MACON	MO 63552-3702	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 465	MO 62552 0465	County MACON	DMH Licensed	No
MACON	MO 63552-0465	Region 5 Medicare/Medicaid	Facility Number	04914
WELLER PLACE RETIREMENT C	ENTER			
510 WELLER STREET		Telephone (660) 395-2273	Alzheimer's Unit	No
MACON	MO 63552-1996	Level of Care RCF	Bed Capacity	18
Mailing Address 510 WELLER STREE	ET	County MACON	DMH Licensed	No
MACON	MO 63552-1996	Region 5	Facility Number	30888
	MAD	ISON		
CLARU DEVILLE NURSING CENT	ER			
105 SPRUCE ST		Telephone (573) 783-3993	Alzheimer's Unit	Yes
FREDERICKTOWN	MO 63645-1002	Level of Care SNF	Bed Capacity	90
Mailing Address 105 SPRUCE ST		County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-1002	Region 2 Medicare/Medicaid	Facility Number	17527
OZARK MANOR				
1013 HIGHWAY Z		Telephone (573) 783-8338	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-8035	Level of Care ALF**	Bed Capacity	55
Mailing Address 1013 HIGHWAY Z		County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-8035	Region 2	Facility Number	22947
WAGNER RESIDENTIAL CARE, IN	ĨĊ			
320 N CHAMBER DR		Telephone (573) 783-4511	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-7947	Level of Care RCF	Bed Capacity	40
Mailing Address 320 N CHAMBER D	R	County MADISON	DMH Licensed	Yes
FREDERICKTOWN	MO 63645-7947	Region 2	Facility Number	28451
	MAR	RIES		
MARIES MANOR				
174 BALLPARK RD		Telephone (573) 422-3177	Alzheimer's Unit	No
VIENNA	MO 65582-8043	Level of Care SNF	Bed Capacity	98
Mailing Address 174 BALLPARK RD	MO (5592 9942	County MARIES	DMH Licensed	No
VIENNA	MO 65582-8043	Region 6 Medicare/Medicaid	Facility Number	10491
VIENNA POINTE RESIDENTIAL C.	ARE			
112 PARKWAY DR		Telephone (573) 422-3230	Alzheimer's Unit	No
VIENNA	MO 65582-8003	Level of Care RCF	Bed Capacity	48
Mailing Address 112 PARKWAY DR	NO (5592 2002	County MARIES	DMH Licensed	No
VIENNA	MO 65582-8003	Region 6	Facility Number	23333
	MAR	ION		
BELOVED HEALTH AND REHABI	LITATION CENTER			
328 MUNGER LANE	MO (2401 2201	Telephone (573) 577-2100	Alzheimer's Unit	No
HANNIBAL Mailing Address 328 MUNGER LANE	MO 63401-2361	Level of Care SNF County MARION	Bed Capacity DMH Licensed	111 No
Mailing Address 328 MUNGER LANE HANNIBAL	MO 63401-2361	County MARION Region ⁵ Medicare/Medicaid	Facility Number	03340

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BETH HAVEN NURSING HOME			
2500 PLEASANT ST	Telephone (573) 221-6000	Alzheimer's Unit	Yes
HANNIBAL MO 63401-2600	Level of Care SNF	Bed Capacity	105
Mailing Address 2500 PLEASANT ST	County MARION	DMH Licensed	No
HANNIBAL MO 63401-2600	Region 5 Medicare/Medicaid	Facility Number	00469
BRISTOL MANOR OF PALMYRA			N
1815 SOUTH MAIN	Telephone (573) 769-2127	Alzheimer's Unit	No
PALMYRA MO 63461-1961	Level of Care RCF	Bed Capacity	12
Mailing Address 1815 SOUTH MAIN	County MARION	DMH Licensed	No
PALMYRA MO 63461-1961	Region 5	Facility Number	20260
HAROLD AND LOUISE HEALTHCARE CENTER			
135 COMMUNICATION DR	Telephone (573) 221-1189	Alzheimer's Unit	No
HANNIBAL MO 63401-3670	Level of Care RCF	Bed Capacity	98
Mailing Address 135 COMMUNICATION DR	County MARION	DMH Licensed	Yes
HANNIBAL MO 63401-3670	Region 5	Facility Number	29639
HANNIDAL INO 05401-5070	Kegion 5	Facility Number	29039
LEVERING REGIONAL HEALTH CARE CENTER			
1734 MARKET ST	Telephone (573) 221-2930	Alzheimer's Unit	No
HANNIBAL MO 63401-4025	Level of Care SNF	Bed Capacity	179
Mailing Address 1734 MARKET ST	County MARION	DMH Licensed	No
HANNIBAL MO 63401-4025	Region ⁵ Medicare/Medicaid	Facility Number	15954
LEVERING REGIONAL HEALTH CARE CENTER			
1734 MARKET ST	Telephone (573) 221-2930	Alzheimer's Unit	No
HANNIBAL MO 63401-4025	Level of Care RCF*	Bed Capacity	35
Mailing Address 1734 MARKET ST	County MARION	DMH Licensed	Yes
HANNIBAL MO 63401-4025	Region 5	Facility Number	15954
	Region 5	Tuenty Pullion	13734
LUTHER MANOR RETIREMENT & NURSING CENTER			
3170 HIGHWAY 61 NORTH	Telephone (573) 221-5533	Alzheimer's Unit	No
HANNIBAL MO 63401-6571	Level of Care SNF	Bed Capacity	64
Mailing Address 3170 HIGHWAY 61 NORTH	County MARION	DMH Licensed	No
HANNIBAL MO 63401-6571	Region ⁵ Medicare/Medicaid	Facility Number	04673
MAPLE LAWN NURSING HOME			
1410 WEST LINE ST	Telephone (573) 769-2213	Alzheimer's Unit	Yes
PALMYRA MO 63461-1831	Level of Care SNF	Bed Capacity	110
Mailing Address PO BOX 232	County MARION	DMH Licensed	No
PALMYRA MO 63461-0232	·	Facility Number	09961
1 ALWINA 1910 03401-0232	Region 5 Medicare/Medicaid	Facinty Mulliper	09901
MONROE CITY MANOR CARE CENTER			
1010 HIGHWAY 24 & 36 EAST	Telephone (573) 735-4850	Alzheimer's Unit	No
MONROE CITY MO 63456-1116	Level of Care SNF	Bed Capacity	60
Mailing Address 1010 HWY 24 & 36 EAST	County MARION	DMH Licensed	No
MONROE CITY MO 63456-1116	Region ⁵ Medicare/Medicaid	Facility Number	05473

PLEASANT VIEW

641 EUCLID AVE HANNIBAL MO 63401-2959 Mailing Address 641 EUCLID AVE HANNIBAL MO 63401-2959 Telephone(573) 406-1090Level of CareALF**CountyMARIONRegion5

Alzheimer's UnitNoBed Capacity41DMH LicensedNoFacility Number25358

	MCDONALD		
MCDONALD COUNTY LIVING CENTER			
1000 PATTERSON ST	Telephone (417) 845-3351	Alzheimer's Unit	Ye
ANDERSON MO 64831-7327	Level of Care SNF	Bed Capacity	90
Mailing Address 1000 PATTERSON ST	County MCDONALD	DMH Licensed	No
ANDERSON MO 64831-7327	Region 1 Medicare/Medicaid	Facility Number	05183
	MERCER		
BRISTOL MANOR OF PRINCETON			
200 NORTH FULLERTON	Telephone (660) 748-4354	Alzheimer's Unit	No
PRINCETON MO 64673-1176	Level of Care RCF	Bed Capacity	12
Mailing Address 200 N FULLERTON	County MERCER	DMH Licensed	No
PRINCETON MO 64673-1176	Region 4	Facility Number	18846
PEARL'S II EDEN FOR ELDERS			
611 NORTH COLLEGE	Telephone (660) 748-4407	Alzheimer's Unit	No
PRINCETON MO 64673-1051	Level of Care SNF		60
		Bed Capacity DMH Licensed	No
Mailing Address 611 NORTH COLLEGE	County MERCER		
PRINCETON MO 64673-1051	Region 4 Medicare/Medicaid	Facility Number	06453
	MILLER		
BRISTOL MANOR OF ELDON			
1201 EAST NORTH ST	Telephone (573) 392-1200	Alzheimer's Unit	No
ELDON MO 65026-2651	Level of Care RCF	Bed Capacity	12
Mailing Address 1201 EAST NORTH ST	County MILLER	DMH Licensed	No
ELDON MO 65026-2651	Region 6	Facility Number	17701
ELDON NURSING & REHAB			
1001 E NORTH ST	Telephone (573) 392-3164	Alzheimer's Unit	Yes
ELDON MO 65026-2634	Level of Care SNF	Bed Capacity	90
Mailing Address 1001 E NORTH ST	County MILLER	DMH Licensed	No
ELDON MO 65026-2634	Region 6 Medicare/Medicaid	Facility Number	06139
LEE HOUSE SENIOR LIVING LLC			
105 NORTH MILL ST	Talanhana (573) 302 5558	Alzhoimor's Unit	No
	Telephone (573) 392-5558 Level of Core PCE	Alzheimer's Unit	No
ELDON MO 65026-1728	Level of Care RCF	Bed Capacity	53 No
Mailing Address 105 NORTH MILL ST	County MILLER	DMH Licensed	No
ELDON MO 65026-1728	Region 6	Facility Number	13089
MILLER COUNTY CARE AND REHABILITATION CENTER			
1157 HIGHWAY 17	Telephone (573) 369-2318	Alzheimer's Unit	Yes
TUSCUMBIA MO 65082-2100	Level of Care SNF	Bed Capacity	86
Mailing Address 1157 HWY 17	County MILLER	DMH Licensed	No
TUSCUMBIA MO 65082-2100	Region 6 Medicare/Medicaid	Facility Number	05422
100 0002 2100	Region V Meuicale/Meuicalu	Facincy Mulliper	05422

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

ROCK ISLAND VILLAGE 619 EAST 8TH STREET		Telephone	(573) 557-9545	Alzheimer's Unit	Yes
	0 65026-4740	Level of Care	ALF**	Bed Capacity	70
Mailing Address 619 EAST 8TH STREET			LER	DMH Licensed	No
-	0 65026-4740	Region 6		Facility Number	30865
ST ELIZABETH CARE CENTER					
649 SOUTH WALNUT ST		Telephone	(573) 493-2215	Alzheimer's Unit	No
	65075-2440	Level of Care	SNF	Bed Capacity	63
Mailing Address 649 SOUTH WALNUT ST			LER	DMH Licensed	No
8	0 65075-2440	Į.	ledicare/Medicaid	Facility Number	07523
STONEBRIDGE LAKE OZARK					
872 COLLEGE BLVD		Telephone	(573) 302-0900	Alzheimer's Unit	No
	65065-8408	Level of Care	ALF**	Bed Capacity	40
Mailing Address 872 COLLEGE BLVD			LER	DMH Licensed	No
-	65065-8408	Region 6		Facility Number	20926
STONEBRIDGE LAKE OZARK					
872 COLLEGE BLVD		Telephone	(573) 302-0900	Alzheimer's Unit	No
	65065-8408	Level of Care	SNF	Bed Capacity	66
Mailing Address 872 COLLEGE BLVD			LER	DMH Licensed	No
-	65065-8408		ledicare/Medicaid	Facility Number	20926
					20720
	MISSISS	SIPPI			
ASPIRE SENIOR LIVING EAST PRAIRIE	Ξ				
186 MILLAR RD		Telephone	(573) 649-3551	Alzheimer's Unit	No
	63845-1180	Level of Care	SNF	Bed Capacity	70
Mailing Address PO BOX 299	600.4 5 0000	·	SISSIPPI	DMH Licensed	No
EAST PRAIRIE MC	0 63845-0299	Region 2 N	Iedicare/Medicaid	Facility Number	12083
BERTRAND NURSING AND REHAB CEM	NTER				
603 WEST HIGHWAY 62		Telephone	(573) 683-4290	Alzheimer's Unit	No
	63823-9738	Telephone Level of Care	(573) 683-4290 SNF	Alzheimer's Unit Bed Capacity	No 60
	63823-9738	Level of Care			
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62	63823-973863823-9738	Level of Care County MIS	SNF	Bed Capacity	60
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62		Level of Care County MIS	SNF SISSIPPI	Bed Capacity DMH Licensed	60 No
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC		Level of Care County MIS	SNF SISSIPPI	Bed Capacity DMH Licensed	60 No
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC CHARLESTON MANOR 1220 EAST MARSHALL		Level of Care County MIS Region 2 M Telephone Level of Care	SNF SISSIPPI Iedicare/Medicaid (573) 683-3721 SNF	Bed Capacity DMH Licensed Facility Number	60 No 00440
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC CHARLESTON MANOR 1220 EAST MARSHALL	0 63823-9738	Level of Care County MIS Region 2 M Telephone Level of Care	SNF SISSIPPI Iedicare/Medicaid (573) 683-3721	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	60 No 00440 Yes
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC CHARLESTON MANOR 1220 EAST MARSHALL CHARLESTON MC Mailing Address 1220 EAST MARSHALL	0 63823-9738	Level of Care County MIS Region ² M Telephone Level of Care County MIS	SNF SISSIPPI Iedicare/Medicaid (573) 683-3721 SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 00440 Yes 120
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC CHARLESTON MANOR 1220 EAST MARSHALL CHARLESTON MC Mailing Address 1220 EAST MARSHALL	 63823-9738 63834-1349 	Level of Care County MIS Region 2 M Telephone Level of Care County MIS Region 2 M	SNF SISSIPPI Iedicare/Medicaid (573) 683-3721 SNF SISSIPPI	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00440 Yes 120 No
BERTRAND MC Mailing Address 603 WEST HIGHWAY 62 BERTRAND MC CHARLESTON MANOR 1220 EAST MARSHALL CHARLESTON MC Mailing Address 1220 EAST MARSHALL	 63823-9738 63834-1349 63834-1349 	Level of Care County MIS Region 2 M Telephone Level of Care County MIS Region 2 M	SNF SISSIPPI Iedicare/Medicaid (573) 683-3721 SNF SISSIPPI	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00440 Yes 120 No

ASILUKT IEIGHTS OF TH TON				
908 SOUTH PARK		Telephone (660) 433-6496	Alzheimer's Unit	No
TIPTON	MO 65081-8408	Level of Care RCF	Bed Capacity	12
Mailing Address 908 SOUTH PARK		County MONITEAU	DMH Licensed	No
TIPTON	MO 65081-8408	Region 6	Facility Number	16506

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BRISTOL MANOR OF CALIFORNIA			
605 PARKVIEW DR	Telephone (573) 796-4342	Alzheimer's Unit	No
CALIFORNIA MO 65018-2001	Level of Care RCF	Bed Capacity	12
Mailing Address 605 PARKVIEW DR	County MONITEAU	DMH Licensed	No
CALIFORNIA MO 65018-2001			
CALIFORNIA MO 05018-2001	Region 6	Facility Number	17401
CALIFORNIA CARE CENTER			
1106 SOUTH OAK, ROUTE 3	Telephone (573) 796-3127	Alzheimer's Unit	No
CALIFORNIA MO 65018-1462	Level of Care SNF	Bed Capacity	60
Mailing Address 1106 SOUTH OAK, ROUTE 3	County MONITEAU	DMH Licensed	No
CALIFORNIA MO 65018-1462	Region 6 Medicare/Medicaid	Facility Number	10437
TIPTON OAK MANOR			
601 WEST MORGAN ST	Telephone (660) 433-5574	Alzheimer's Unit	Yes
TIPTON MO 65081-8214	Level of Care SNF	Bed Capacity	66
Mailing Address 601 WEST MORGAN ST	County MONITEAU	DMH Licensed	No
TIPTON MO 65081-8214	Region 6 Medicare/Medicaid	Facility Number	08036
VALLEY PARK WEST			
678 WINDMILL RIDGE	Telephone (573) 796-2520	Alzheimer's Unit	No
CALIFORNIA MO 65018-1964	Level of Care RCF	Bed Capacity	34
Mailing Address 678 WINDMILL RIDGE	County MONITEAU	DMH Licensed	No
CALIFORNIA MO 65018-1964	Region 6	Facility Number	30595
	MONROE		
BRISTOL MANOR OF MONROE CITY			
1017 EAST LAWN ST	Telephone (573) 735-3068	Alzheimer's Unit	No
1017 EAST LAWN STMONROE CITYMO 63456-1433	Level of Care RCF	Bed Capacity	12
1017 EAST LAWN ST MONROE CITY MO 63456-1433 Mailing Address 1017 EAST LAWN ST	Level of Care RCF County MONROE	Bed Capacity DMH Licensed	12 Yes
1017 EAST LAWN STMONROE CITYMO 63456-1433	Level of Care RCF	Bed Capacity	12
1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433MONROE CITYMO63456-1433	Level of Care RCF County MONROE	Bed Capacity DMH Licensed	12 Yes
1017 EAST LAWN STMONROE CITYMO63456-1433Mailing Address1017 EAST LAWN STMONROE CITYMO63456-1433	Level of Care RCF County MONROE Region 5	Bed Capacity DMH Licensed Facility Number	12 Yes 20045
1017 EAST LAWN ST MONROE CITY MO 63456-1433 Mailing Address 1017 EAST LAWN ST MONROE CITY MO 63456-1433 JONES' WILDWOOD CARE CENTER 12806 HWY 151	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	12 Yes 20045 No
1017 EAST LAWN ST MONROE CITY MO 63456-1433 Mailing Address 1017 EAST LAWN ST MONROE CITY MO 63456-1433 JONES' WILDWOOD CARE CENTER 12806 HWY 151 MADISON MO 65263-3114	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	12 Yes 20045 No 32
1017 EAST LAWN STMONROE CITYMO63456-1433Mailing Address1017 EAST LAWN STMONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151101MADISONMO65263-3114Mailing Address PO BOX 69500	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	12 Yes 20045 No 32 Yes
1017 EAST LAWN ST MONROE CITY MO 63456-1433 Mailing Address 1017 EAST LAWN ST MONROE CITY MO 63456-1433 JONES' WILDWOOD CARE CENTER 12806 HWY 151 MO 65263-3114	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	12 Yes 20045 No 32
1017 EAST LAWN STMONROE CITYMO63456-1433Mailing Address1017 EAST LAWN STMONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151101MADISONMO65263-3114Mailing Address PO BOX 69500	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	12 Yes 20045 No 32 Yes
1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433MONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 15112806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MO65263-0069	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	12 Yes 20045 No 32 Yes
1017 EAST LAWN STMONROE CITYMO 63456-1433Mailing Address 1017 EAST LAWN STMONROE CITYMO 63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO 65263-3114Mailing Address PO BOX 69MADISONMO 65263-0069MADISONMO 65263-0069	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573
1017 EAST LAWN STMONROE CITYMO63456-1433Mailing Address 1017 EAST LAWN STMONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MADISONMOMO65263-0069MILLER RESIDENT CARE, INC210 ROCK RD	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No
1017 EAST LAWN STMONROE CITYMO 63456-1433Mailing Address 1017 EAST LAWN STMONROE CITYMO 63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO 65263-3114Mailing Address PO BOX 69MADISONMO 65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO 65275-1282	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	12 Yes 20045 No 32 Yes 08573 No 40
1017 EAST LAWN STMONROE CITYMO 63456-1433Mailing Address 1017 EAST LAWN STMONROE CITYMO 63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO 65263-3114Mailing Address PO BOX 69MADISONMO 65263-0069MADISONMO 65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO 65275-1282Mailing Address 210 ROCK RD	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	12 Yes 20045 No 32 Yes 08573 No 40 No
1017 EAST LAWN STMONROE CITYMO 63456-1433Mailing Address 1017 EAST LAWN STMONROE CITYMO 63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO 65263-3114Mailing Address PO BOX 69MADISONMO 65263-0069MADISONMO 65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO 65275-1282Mailing Address 210 ROCK RDPARISMO 65275-1282MAISMO 65275-1282	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE Region 5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No 40 No 18026
1017 EAST LAWN STMONROE CITYMO63456-1433Mailing Address 1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MO65263-0069MADISONMO65263-0069MADISONMO65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO65275-1282Mailing Address 210 ROCK RDMOPARISMO65275-1282MONROE MANOR 200 SOUTH ST200 SOUTH ST	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE Region 5 Telephone (660) 327-4125	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No 40 No 18026 Yes
1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433Mailing Address 1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MOMADISONMO65263-0069MADISONMO65263-0069MADISONMO65275-1282MILLER RESIDENT CARE, INC210 ROCK RDPARISMO65275-1282Mailing Address 210 ROCK RDMOPARISMO65275-1282MONROE MANOR200 SOUTH STPARISMO65275-1165	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE Region 5 Telephone (660) 327-4125 Level of Care SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No 40 No 18026 Yes 119
1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433Mailing Address 1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MOMADISONMO65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO65275-1282Mailing Address 210 ROCK RDMOPARISMO65275-1282MONROE MANORMO65275-1282200 SOUTH STMO65275-1165PARISMO65275-1165Mailing Address 200 SOUTH STMO	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE Region 5 Telephone (660) 327-4125 Level of Care SNF County MONROE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No 40 No 18026 Yes 119 No
1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433Mailing Address 1017 EAST LAWN STMO63456-1433MONROE CITYMO63456-1433JONES' WILDWOOD CARE CENTER12806 HWY 151MADISONMO65263-3114Mailing Address PO BOX 69MOMADISONMO65263-0069MADISONMO65263-0069MILLER RESIDENT CARE, INC210 ROCK RDPARISMO65275-1282Mailing Address 210 ROCK RDMOPARISMO65275-1282MOMONROE MANOR200 SOUTH STPARISMO65275-1165MO	Level of Care RCF County MONROE Region 5 Telephone (660) 291-8636 Level of Care RCF County MONROE Region 5 Telephone (660) 327-5680 Level of Care RCF* County MONROE Region 5 Telephone (660) 327-4125 Level of Care SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	12 Yes 20045 No 32 Yes 08573 No 40 No 18026 Yes 119

MONTGOMERY

	MONTO	JUNIERI		
ANEW HEALTHCARE AND REHA	B-WELLSVILLE			
250 E LOCUST		Telephone (573) 684-2002	Alzheimer's Unit	No
WELLSVILLE	MO 63384-1422	Level of Care SNF	Bed Capacity	112
Mailing Address 250 E LOCUST		County MONTGOMERY	DMH Licensed	No
WELLSVILLE	MO 63384-1422	Region 6 Medicare/Medicaid	Facility Number	02740
ASHBURY HEIGHTS OF MONTGO	DMERY CITY			
625 WEST 2ND ST		Telephone (573) 564-3386	Alzheimer's Unit	No
MONTGOMERY CITY	MO 63361-1762	Level of Care RCF	Bed Capacity	12
Mailing Address 625 WEST 2ND ST		County MONTGOMERY	DMH Licensed	No
MONTGOMERY CITY	MO 63361-1762	Region 6	Facility Number	20160
ASPIRE SENIOR LIVING JONESBU	URG			
308 CEDAR AVE		Telephone (636) 488-5400	Alzheimer's Unit	Yes
JONESBURG	MO 63351-1126	Level of Care SNF	Bed Capacity	90
Mailing Address PO BOX 218		County MONTGOMERY	DMH Licensed	No
JONESBURG	MO 63351-0218	Region 6 Medicare/Medicaid	Facility Number	13265
ST ANDREW'S AT NEW FLORENC	CE			
515 PICNIC ST		Telephone (573) 415-9333	Alzheimer's Unit	No
NEW FLORENCE	MO 63363-2223	Level of Care SNF	Bed Capacity	87
Mailing Address 515 PICNIC ST	NO. (22(2.22)2	County MONTGOMERY	DMH Licensed	No
NEW FLORENCE	MO 63363-2223	Region 6 Medicare/Medicaid	Facility Number	05723
ST ANDREW'S AT NEW FLORENC	CE			
515 PICNIC ST		Telephone (573) 415-9333	Alzheimer's Unit	No
NEW FLORENCE	MO 63363-2223	Level of Care RCF*	Bed Capacity DMH Licensed	33
Mailing Address 515 PICNIC ST NEW FLORENCE	MO 63363-2223	County MONTGOMERY Region 6	Facility Number	No 05723
	MO	RGAN		
ASHBURY HEIGHTS OF LAURIE	NO.	NGAN		
299 HIGHWAY RA		Telephone (573) 374-0076	Alzheimer's Unit	No
LAURIE	MO 65038-6024	Level of Care RCF	Bed Capacity	12
Mailing Address 299 HIGHWAY RA		County MORGAN	DMH Licensed	No
LAURIE	MO 65038-6024	Region 6	Facility Number	23915
BRISTOL MANOR OF STOVER				
607 WEST 4TH ST		Telephone (573) 377-4519	Alzheimer's Unit	No
STOVER	MO 65078-0807	Level of Care RCF	Bed Capacity	12
Mailing Address 607 WEST 4TH ST			DMH Licensed	No
		County MORGAN		
STOVER	MO 65078-0807	County MORGAN Region ⁶	Facility Number	18863
GOLDEN AGE LIVING CENTER	MO 65078-0807	Region 6		
GOLDEN AGE LIVING CENTER 404 E THIRD ST		Region 6 Telephone (573) 377-4521	Facility Number Alzheimer's Unit	18863 Yes
GOLDEN AGE LIVING CENTER 404 E THIRD ST STOVER	MO 65078-0807 MO 65078-0947	Region 6 Telephone (573) 377-4521 Level of Care SNF	Facility Number Alzheimer's Unit Bed Capacity	18863 Yes 61
GOLDEN AGE LIVING CENTER 404 E THIRD ST		Region 6 Telephone (573) 377-4521	Facility Number Alzheimer's Unit	18863 Yes

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

GOOD SHEPHERD CARE CENTER		
1101 WEST CLAY RD	Telephone(573) 378-5411Alzheimer's Unit	No
VERSAILLES MO 65084-2	177 Level of Care SNF Bed Capacity	120
Mailing Address 1101 WEST CLAY RD	County MORGAN DMH Licensed	No
VERSAILLES MO 65084-	177 Region 6 Medicare/Medicaid Facility Number	21631
KIDWELL HOME		
1000 KIDWELL DR	Telephone(573) 378-5175Alzheimer's Unit	No
VERSAILLES MO 65084-2	177 Level of Care RCF* Bed Capacity	44
Mailing Address 1000 KIDWELL DR	County MORGAN DMH Licensed	No
VERSAILLES MO 65084-1	177Region6Facility Number	21631
LAURIE CARE CENTER		
610 HWY O	Telephone(573) 374-8263Alzheimer's Unit	Yes
LAURIE MO 65038-		108
Mailing Address PO BOX 1068	County MORGAN DMH Licensed	No
LAURIE MO 65038-	068 Region 6 Medicare/Medicaid Facility Number	04449
LAURIE KNOLLS		N
610 HIGHWAY O	Telephone (573) 374-8263 Alzheimer's Unit	No
LAURIE MO 65038-		66
Mailing Address PO BOX 1068	County MORGAN DMH Licensed	No
LAURIE MO 65038-1	068 Region 6 Facility Number	04449
	NEW MADRID	
COTTON POINT LIVING CENTER		
609 SOUTH RAILROAD ST	Telephone(573) 471-7861Alzheimer's Unit	Yes
MATTHEWS MO 63867-9	× •	98
Mailing Address 609 SOUTH RAILROAD ST	County NEW MADRID DMH Licensed	No
MATTHEWS MO 63867-9	751 Region 2 Medicare/Medicaid Facility Number	07057
DELTA SOUTH NURSING & REHABILITATION		NO
640 COLONEL GEORGE E DAY PARKWAY	Telephone (573) 471-3400Alzheimer's UnitC24C24C24	NO
SIKESTON MO 63801-0		60 N
Mailing Address 640 COLONEL GEORGE E DAY PA		No
SIKESTON MO 63801-(624 Region 2 Medicare/Medicaid Facility Number	30584
GIDEON CARE CENTER		
300 LUNBECK	Telephone(573) 448-3505Alzheimer's Unit	Yes
GIDEON MO 63848-9	-	72
Mailing Address PO BOX 197	County NEW MADRID DMH Licensed	No
GIDEON MO 63848-(
	197 Region 2 Medicare/Medicaid Facility Number	15538
NEW MADRID LIVING CENTER		
1050 DAWSON RD	Telephone(573) 748-5622Alzheimer's Unit	Yes
NEW MADRID MO 63869-1	-	112
Mailing Address 1050 DAWSON RD	County NEW MADRID DMH Licensed	No
NEW MADRID MO 63869-1	•	04952

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

PORTAGEVILLE HEALTH CARE CENTER

290 WEST STATE HWY 162 Alzheimer's Unit Telephone (573) 379-2017 PORTAGEVILLE MO 63873-9397 Level of Care SNF **Bed Capacity** Mailing Address PO BOX 408 County NEW MADRID **DMH Licensed** PORTAGEVILLE MO 63873-0408 **Facility Number** Region 2 Medicare/Medicaid

NEWTON

GRAN VILLAS NEOSHO			
420 LYON DR	Telephone (417) 451-7071	Alzheimer's Unit	No
NEOSHO MO 64850-9194	Level of Care RCF	Bed Capacity	30
Mailing Address 420 LYON DR	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-9194	Region 1	Facility Number	20156
GRANBY HOUSE			N
301 SOUTH MAIN GRANBY MO 64844-8336	Telephone (417) 472-6271	Alzheimer's Unit	No
	Level of Care SNF	Bed Capacity	60 No
Mailing Address 301 SOUTH MAIN	County NEWTON	DMH Licensed	No
GRANBY MO 64844-8336	Region ¹ Medicare/Medicaid	Facility Number	16481
HENLEY PLACE OF NEOSHO, A SENIOR RESIDENCE BY AMERIC	ARE		
1105 VILLAGE RD	Telephone (417) 451-1000	Alzheimer's Unit	No
NEOSHO MO 64850-9076	Level of Care RCF	Bed Capacity	50
Mailing Address 1105 VILLAGE RD	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-9076	Region ¹	Facility Number	20193
JOPLIN HEALTH AND REHABILITATION CENTER			
2218 WEST 32ND ST	Telephone (417) 623-5264	Alzheimer's Unit	Yes
JOPLIN MO 64804-3514	Level of Care SNF	Bed Capacity	120
Mailing Address 2218 WEST 32ND ST	County NEWTON	DMH Licensed	No
JOPLIN MO 64804-3514	Region 1 Medicare/Medicaid	Facility Number	12583
MEDICALODGES NEOSHO			
400 LYON DR	Telephone (417) 451-2544	Alzheimer's Unit	Yes
NEOSHO MO 64850-9194	Level of Care SNF	Bed Capacity	114
Mailing Address 400 LYON DR	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-9194	Region ¹ Medicare/Medicaid	Facility Number	05383
NHC HEALTHCARE, JOPLIN 2700 EAST 34TH ST	Telephone (417) 781-1737	Alzheimer's Unit	No
JOPLIN MO 64804-4310	Level of Care SNF	Bed Capacity	126
Mailing Address 2700 EAST 34TH ST	County NEWTON	DMH Licensed	No
JOPLIN MO 64803-2877	·	Facility Number	04044
JOFLIN 140 04003-2017	Region ¹ Medicare/Medicaid	Facility Number	04044
OAK POINTE OF NEOSHO			
2601 OAK RIDGE EXTENSION	Telephone (417) 451-8872	Alzheimer's Unit	Yes
NEOSHO MO 64850-7765	Level of Care ALF**	Bed Capacity	55
Mailing Address 2601 OAK RIDGE EXTENSION	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-7765	Region ¹	Facility Number	29972

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

No

60

No

17119

OZARK OAKS RESIDENTIAL CARE FACILITY II			
3405 S SCHIFFERDECKER	Telephone (417) 347-7760	Alzheimer's Unit	No
JOPLIN MO 64804-1388	Level of Care RCF*	Bed Capacity	30
Mailing Address PO BOX 2526	County NEWTON	DMH Licensed	Yes
JOPLIN MO 64803-2526	Region 1	Facility Number	13636
SENECA HOME PLACE			
2400 SOUTH CHEROKEE AVE	Telephone (417) 776-8053	Alzheimer's Unit	No
SENECA MO 64865-9323	Level of Care RCF*	Bed Capacity	30
Mailing Address 2400 SOUTH CHEROKEE AVE	County NEWTON	DMH Licensed	No
SENECA MO 64865-9323	Region 1	Facility Number	17571
	C .		
CENTECTA NUIDCINC			
SENECA NURSING			N
914 CHICKESAW ST	Telephone (417) 776-8041	Alzheimer's Unit	No
SENECA MO 64865-9281	Level of Care SNF	Bed Capacity	80 N
Mailing Address 914 CHICKESAW ST	County NEWTON	DMH Licensed	No
SENECA MO 64865-9281	Region 1 Medicare/Medicaid	Facility Number	17090
SILVER CREEK - ASSISTED LIVING BY AMERICARE			
3325 TEXAS AVE	Telephone (417) 626-8100	Alzheimer's Unit	Yes
JOPLIN MO 64804-4343	Level of Care ALF**	Bed Capacity	68
Mailing Address 3325 TEXAS AVE	County NEWTON	DMH Licensed	No
JOPLIN MO 64804-4343	Region 1	Facility Number	20541
WERWOOD ASSISTED LIVING LLC			
WEBWOOD ASSISTED LIVING, LLC	T-l	A 1-1	NO
1640 WALDO HATLER DRIVE	Telephone (417) 451-2997 Lowel of Comp ALE	Alzheimer's Unit	
NEOSHO MO 64850-8059	Level of Care ALF	Bed Capacity	31 N-
Mailing Address 1640 WALDO HATLER DRIVE	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-8059	Region 1	Facility Number	31265
NOD	AWAY		
BRISTOL MANOR OF MARYVILLE			
323 EAST SUMMIT DR	Telephone (660) 582-4131	Alzheimer's Unit	No
MARYVILLE MO 64468-3619	Level of Care RCF	Bed Capacity	12
Mailing Address 323 EAST SUMMIT DR	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-3619	Region 4	Facility Number	19843
	region -	2 weiling 1 (willow)	19015
MARYVILLE CHATEAU			
1101 E 5TH STREET	Telephone (660) 582-7447	Alzheimer's Unit	No
MARYVILLE MO 64468-1955	Level of Care RCF	Bed Capacity	20
Mailing Address 1101 E 5TH STREET	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-1955	Region 4	Facility Number	05149
MARYVILLE LIVING CENTER			
524 NORTH LAURA	Telephone (660) 582-7447	Alzheimer's Unit	Yes
MARYVILLE MO 64468-1955	Level of Care SNF	Bed Capacity	105
Mailing Address 524 NORTH LAURA	County NODAWAY	DMH Licensed	No
MARYVILLE MO 64468-1955	Region 4 Medicare/Medicaid	Facility Number	05149
	incurcar (incurcalu		00177

NODAWAY HEALTHCARE				
22371 STATE HIGHWAY 46		Telephone (660) 562-2876	Alzheimer's Unit	No
MARYVILLE	MO 64468-8157	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 307		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-0307	Region 4 Medicare/Medicaid	Facility Number	05766
		5		
OAK POINTE OF MARYVILLE				
817 SOUTH COUNTRY CLUB DR		Telephone (660) 562-2799	Alzheimer's Unit	Yes
MARYVILLE	MO 64468-1477	Level of Care ALF**	Bed Capacity	55
Mailing Address 817 SOUTH COUN		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-1477	Region 4	Facility Number	29544
PARKDALE MANOR HEALTH &	DEHARII ITATION			
814 WEST SOUTH AVE	REHADILITATION	Telephone (660) 582-8161	Alzheimer's Unit	No
MARYVILLE	MO 64468-2772	Level of Care SNF	Bed Capacity	86
Mailing Address 814 WEST SOUTH		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2772	Region 4 Medicare/Medicaid	Facility Number	06308
	MO 04400 2772	Kegion - Meuicale/Meuicalu	Facility Pulliber	00508
VILLACE CADE CENTED INC				
VILLAGE CARE CENTER, INC 810 EAST EDWARDS ST		Telephone (660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care RCF*	Bed Capacity	18
Mailing Address 810 EAST EDWAR		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917	Region 4	Facility Number	20361
		ingion -	1 401109 1 (41100)	20501
VILLAGE CARE CENTER, INC				
810 EAST EDWARDS ST		Telephone (660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care SNF	Bed Capacity	46
Mailing Address 810 EAST EDWAR		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917	Region 4 Medicare/Medicaid	Facility Number	20361
	110 01100 2017	Region · medicale/medicald	1 401109 1 (41100)	20501
	OR	EGON		
SHADY OAKS HEALTHCARE CE	NTED			
335 BUSINESS ROUTE 63	NIER	Telephone (417) 264-7256	Alzheimer's Unit	No
THAYER	MO 65791-1415	Telephone(417) 264-7256Level of CareSNF	Bed Capacity	120
Mailing Address 335 BUSINESS RO		County OREGON	DMH Licensed	No
THAYER	MO 65791-1415	Region 2 Medicare/Medicaid	Facility Number	01364
mailk	MO 05771-1415	Kegion 2 Medicale/Medicalu	Facility Number	01504
SHEPHERD'S VIEW ASSISTED LI	VINC			
100 SHEPHERDS LN	110	Telephone (417) 778-7959	Alzheimer's Unit	No
ALTON	MO 65606-0429	Level of Care ALF**	Bed Capacity	39
Mailing Address PO BOX 429	110 05000 0425	County OREGON	DMH Licensed	No
ALTON	MO 65606-0429	Region 2	Facility Number	23135
	110 05000 0129	Region 2	Tuenity Planber	23133
	0	SAGE		
HARBOR PLACE - LINN				
24 TRENSHAW TRAIL		Telephone (573) 897-2100	Alzheimer's Unit	NO
24 IRENSHAW IRAIL LINN	MO 65051-2874	Level of Care RCF	Bed Capacity	24
Mailing Address 24 TRENSHAW TR		County OSAGE	DMH Licensed	Z4 No
LINN	MO 65051-2874	Region 6	Facility Number	31116
		Acgivii V	ruenty runnor	51110

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

STONEBRIDGE WESTPHALIA 1899 HIGHWAY 63 WESTPHALIA Mailing Address 1899 HWY 63 WESTPHALIA STONEBRIDGE WESTPHALIA	MO 65085-2215 MO 65085-2215	Telephone(573) 455-2280Level of CareSNFCountyOSAGERegion6Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 64 No 18653
1899 HIGHWAY 63 WESTPHALIA	MO 65085-2215	Telephone (573) 455-2280 Level of Care RCF*	Alzheimer's Unit Bed Capacity	No 28
Mailing Address 1899 HWY 63 WESTPHALIA	MO 65085-2215	County OSAGE Region ⁶	DMH Licensed Facility Number	No 18653
	OZA	RK		
GAINESVILLE NURSING 77 MEDICAL DR GAINESVILLE	MO 65655-0628	Telephone (417) 679-4921 Level of Care SNF	Alzheimer's Unit Bed Capacity	No 99
Mailing Address PO BOX 628 GAINESVILLE	MO 65655-0628	County OZARK Region ¹ Medicare/Medicaid	DMH Licensed Facility Number	No 12868
	PEMIS	SCOT		
RIVER OAKS CARE CENTER		Telephone (573) 695-2121	Alzheimer's Unit	No
STEELE Mailing Address 1001 N WALNUT	MO 63877-1355	Level of Care SNF	Bed Capacity DMH Licensed	90 No
STEELE	MO 63877-1355	County PEMISCOT Region 2 Medicare/Medicaid	Facility Number	06672
SOUTHGATE LIVING CENTER 500 TRUMAN BLVD		Telephone (573) 333-5150	Alzheimer's Unit	No
CARUTHERSVILLE Mailing Address 500 TRUMAN BLVD CARUTHERSVILLE	MO 63830-1261) MO 63830-1261	Level of Care SNF County PEMISCOT Region ² Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	94 No 01081
CINCOTIENSVILLE			racinty Number	01081
	PER	KI		
ESTATES OF PERRYVILLE, LLC, 7 430 NORTH WEST ST PERRYVILLE	MO 63775-1359	Telephone (573) 547-1011 Level of Care SNF	Alzheimer's Unit Bed Capacity	No 156
Mailing Address 430 NORTH WEST S PERRYVILLE	MO 63775-1359	CountyPERRYRegion2Medicare/Medicaid	DMH Licensed Facility Number	No 00137
HOLIDAY RESIDENTIAL CARE 1019 OLD ST MARY'S RD		Telephone (573) 547-7398	Alzheimer's Unit	No
PERRYVILLE	MO 63775-1298	Level of Care RCF*	Bed Capacity	20
Mailing Address 1019 OLD ST MARY PERRYVILLE	''S RD MO 63775-1298	County PERRY Region 2	DMH Licensed Facility Number	No 19872
INDEPENDENCE CARE CENTER C 800 SOUTH KINGSHIGHWAY	OF PERRY COUNTY	Telephone (573) 547-6546	Alzheimer's Unit	Yes
PERRYVILLE	MO 63775-2106	Level of Care SNF	Bed Capacity	133
Mailing Address 800 SOUTH KINGSH PERRYVILLE	IWY MO 63775-2106	County PERRY	DMH Licensed	No
I LINT VILLE	MO 0 <i>3113</i> -2100	Region 2 Medicare/Medicaid	Facility Number	06393

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

INDEPENDENCE COURT

121 INDEPENDENCE DR PERRYVILLE MO 63775-1496 Mailing Address 121 INDEPENDENCE DR PERRYVILLE MO 63775-1496 Telephone (573) 547-1499 Level of Care RCF* County PERRY Region 2

Alzheimer's Unit No 75 **Bed Capacity DMH Licensed** No **Facility Number** 06393

PETTIS				
BRISTOL MANOR OF SEDALIA				
1208 EAST 24TH ST		Telephone (660) 827-2028	Alzheimer's Unit	No
SEDALIA	MO 65301-8231	Level of Care RCF	Bed Capacity	12
Mailing Address 1208 EAST 24TH ST	Γ	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-8231	Region 6	Facility Number	15808
E W THOMPSON HEALTH & REH	A DIL IT ATIONI CENTED			
975 MITCHELL ROAD	ADILITATION CENTER	Telephone (660) 851-0668	Alzheimer's Unit	Yes
SEDALIA	MO 65301-2133	Level of Care SNF	Bed Capacity	60
Mailing Address 975 MITCHELL ROA		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2133	Region 6 Medicare/Medicaid	Facility Number	30182
ESSEX BY BRISTOL, THE				
301 EAST 3RD		Telephone (660) 829-1758	Alzheimer's Unit	No
SEDALIA	MO 65301-4335	Level of Care RCF	Bed Capacity	24
Mailing Address 301 EAST 3RD		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-4335	Region 6	Facility Number	23020
FAIR VIEW NURSING HOME				
1714 WEST 16TH ST		Telephone (660) 827-1594	Alzheimer's Unit	No
SEDALIA	MO 65301-5273	Level of Care SNF	Bed Capacity	75
Mailing Address 1714 WEST 16TH S	Г	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-5273	Region 6 Medicare/Medicaid	Facility Number	02469
FOUR SEASONS LIVING CENTER				
2800 HIGHWAY TT		Telephone (660) 826-8803	Alzheimer's Unit	Yes
SEDALIA	MO 65301-1410	Level of Care SNF	Bed Capacity	239
Mailing Address 2800 HIGHWAY TT		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-1410	Region 6 Medicare/Medicaid	Facility Number	00836
LOVING ARMS MEMORY CARE A	AND ASSISTED LIVING			
1300 EAST 24TH ST		Telephone (660) 851-2266	Alzheimer's Unit	yes
SEDALIA	MO 65301-8233	Level of Care ALF**	Bed Capacity	20
Mailing Address 1300 EAST 24TH ST		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-8233	Region 6	Facility Number	15971
PETTIS COUNTY ASSISTED LIVIN	NG, LLC			
3017 BROOKING PARK AVENUE		Telephone (660) 827-3222	Alzheimer's Unit	No
SEDALIA	MO 65301-9327	Level of Care ALF**	Bed Capacity	139
Mailing Address 3017 BROOKING PA		County PETTIS	DMH Licensed	Yes
SEDALIA	MO 65301-9327	Region 6	Facility Number	30112

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

PRIMROSE OF SEDALIA			
3761 WEST 10TH ST	Telephone (660) 527-7054	Alzheimer's Unit	No
SEDALIA MO 65301-2524	Level of Care ALF**	Bed Capacity	90
Mailing Address 3761 WEST 10TH ST	County PETTIS	DMH Licensed	No
SEDALIA MO 65301-2524	Region 6	Facility Number	25967
REST HAVEN CONVALESCENT & RETIREMENT HOME			
1800 SOUTH INGRAM	Telephone (660) 827-0845	Alzheimer's Unit	No
SEDALIA MO 65301-7538	Level of Care SNF	Bed Capacity	86
Mailing Address 1800 S INGRAM	County PETTIS	DMH Licensed	No
SEDALIA MO 65301-7538	Region 6 Medicare/Medicaid	Facility Number	06582
	-		
STONEY RIDGE VILLAGE			
25023 BOTHWELL PARK RD	Telephone (660) 827-3993	Alzheimer's Unit	No
SEDALIA MO 65301-0084	Level of Care RCF	Bed Capacity	81
Mailing Address 25023 BOTHWELL PARK RD	County PETTIS	DMH Licensed	No
SEDALIA MO 65301-0084	Region 6	Facility Number	05035
	0		
SUNNY MEADOWS LIVING CENTER			
419 NORTH PROSPECT AVE	Telephone (660) 826-5353	Alzheimer's Unit	No
SEDALIA MO 65301-2729	Level of Care RCF	Bed Capacity	12
Mailing Address 419 N PROSPECT AVE	County PETTIS	DMH Licensed	Yes
SEDALIA MO 65301-2729	Region 6	Facility Number	06527
		U U	
SYLVIA G THOMPSON RESIDENCE CENTER, INC			
3333 WEST TENTH ST	Telephone (660) 826-2118	Alzheimer's Unit	Yes
SEDALIA MO 65301-2113	Level of Care SNF	Bed Capacity	120
Mailing Address 3333 WEST TENTH ST	County PETTIS	DMH Licensed	No
SEDALIA MO 65301-2113	Region 6 Medicaid	Facility Number	17278
PI	HELPS		
ARBORS AT PARKSIDE - MEMORY CARE ASSISTED LIVING BY A	MERICARE		
1700 EAST 10TH ST	Telephone (573) 364-2602	Alzheimer's Unit	Yes
ROLLA MO 65401-4600	Level of Care ALF**	Bed Capacity	22
Mailing Address 1700 EAST 10TH ST	County PHELPS	DMH Licensed	No
ROLLA MO 65401-4600	Region 6	Facility Number	13589
AURORA HEALTH AND REHABILITATION			
1200 MCCUTCHEN RD	Telephone (573) 364-2311	Alzheimer's Unit	No
ROLLA MO 65401-2615	Level of Care SNF	Bed Capacity	116
Mailing Address 1200 MCCUTCHEN RD	County PHELPS	DMH Licensed	No
ROLLA MO 65401-2615	Region 6 Medicare/Medicaid	Facility Number	08862
CEDAR KNOLL PARTNERSHIP			
13635 STATE ROUTE V	Telephone (573) 265-3658	Alzheimer's Unit	No
SAINT JAMES MO 65559-8331	Level of Care ALF	Bed Capacity	32
Mailing Address 13635 STATE ROUTE V		DMH Licensed	Yes
	County PHELPS	Diviti Licenseu	168
SAINT JAMES MO 65559-8331	County PHELPS Region 6	Facility Number	01142

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

CEDAR POINTE			
1800 WHITE COLUMNS DR	Telephone (573) 364-7766	Alzheimer's Unit	Yes
ROLLA MO 65401-2044	Level of Care SNF	Bed Capacity	102
Mailing Address 1800 WHITE COLUMNS DR	County PHELPS	DMH Licensed	No
ROLLA MO 65401-2044	Region 6 Medicare/Medicaid	Facility Number	06801
COUNTRY VALLEY HOME			
15750 COUNTY RD 2430	Telephone (573) 265-8250	Alzheimer's Unit	No
SAINT JAMES MO 65559-8211	Level of Care RCF*	Bed Capacity	23
Mailing Address 15750 COUNTY RD 2430	County PHELPS	DMH Licensed	Yes
SAINT JAMES MO 65559-8211	Region 6	Facility Number	01852
FERNDALE, INC 15677 COUNTY RD 2430	Telephone (573) 265-3344	Alzheimer's Unit	No
SAINT JAMES MO 65559-8210	Level of Care ALF	Bed Capacity	32
Mailing Address 15677 COUNTY RD 2430	County PHELPS	DMH Licensed	Yes
SAINT JAMES MO 65559-8210	Region 6	Facility Number	02526
	Region -		02320
OAK POINTE OF ROLLA			
1000 EAST LIONS CLUB DRIVE	Telephone (573) 426-2186	Alzheimer's Unit	Yes
ROLLA MO 65401-4356	Level of Care ALF**	Bed Capacity	65
Mailing Address 1000 EAST LIONS CLUB DRIVE	County PHELPS	DMH Licensed	No
ROLLA MO 65401-4356	Region 6	Facility Number	31216
PARKSIDE-ASSISTED LIVING BY AMERICARE			
2100 PARKSIDE AVE	Telephone (573) 308-0834	Alzheimer's Unit	NO
ROLLA MO 65401-5472	Level of Care ALF**	Bed Capacity	28
Mailing Address 2100 PARKSIDE AVE	County PHELPS	DMH Licensed	No
ROLLA MO 65401-5472	Region 6	Facility Number	31191
ROLLA PRESBYTERIAN MANOR			
1200 HOMELIFE PLAZA	Telephone (573) 364-7336	Alzheimer's Unit	Yes
ROLLA MO 65401-2512	Level of Care ALF**	Bed Capacity	37
Mailing Address 1200 HOMELIFE PLAZA	County PHELPS	DMH Licensed	No
ROLLA MO 65401-2512	Region 6	Facility Number	18727
ROLLA PRESBYTERIAN MANOR			
1200 HOMELIFE PLAZA	Telephone (573) 364-7336	Alzheimer's Unit	No
ROLLA MO 65401-2512	Level of Care SNF	Bed Capacity	30
Mailing Address 1200 HOMELIFE PLAZA	County PHELPS	DMH Licensed	No
ROLLA MO 65401-2512	Region 6 Medicare/Medicaid	Facility Number	18727
ROSEWOOD RESIDENTIAL CARE			
13450 COUNTY RD 7040	Telephone (573) 341-8000	Alzheimer's Unit	No
ROLLA MO 65401-8122	Level of Care RCF	Bed Capacity	9
Mailing Address 13450 COUNTY RD 7040	County PHELPS	DMH Licensed	No
ROLLA MO 65401-8122	Region 6	Facility Number	21083

SILVERSTONE PLACE			
2735 EAGLESON DR		Telephone (573) 426-6200	Alzheimer's Unit No
ROLLA	MO 65401-8384	Level of Care SNF	Bed Capacity 110
Mailing Address 2735 EAGLESON DR		County PHELPS	DMH Licensed No
ROLLA	MO 65401-8384	Region 6 Medicare/Medicaid	Facility Number29351
ST JAMES LIVING CENTER			
415 SIDNEY ST		Telephone (573) 265-8921	Alzheimer's Unit Yes
SAINT JAMES	MO 65559-1070	Level of Care SNF	Bed Capacity 90
Mailing Address PO BOX 69		County PHELPS	DMH Licensed No
SAINT JAMES	MO 65559-0069	Region 6 Medicare/Medicaid	Facility Number 05238
	PIK	E	
BOWLING GREEN RESIDENTIAL C	ARE		
119 WEST CENTENNIAL AVE		Telephone (573) 324-5560	Alzheimer's Unit No
BOWLING GREEN	MO 63334-1605	Level of Care RCF*	Bed Capacity 25
Mailing Address 119 WEST CENTENN	IAL AVE	County PIKE	DMH Licensed Yes
BOWLING GREEN	MO 63334-1605	Region 5	Facility Number 07712
COUNTRY VIEW NURSING FACILIT	ΓY. INC		
2106 WEST MAIN ST		Telephone (573) 324-2216	Alzheimer's Unit No
BOWLING GREEN	MO 63334-1049	Level of Care SNF	Bed Capacity 60
Mailing Address PO BOX 330		County PIKE	DMH Licensed No
BOWLING GREEN	MO 63334-0330	Region 5 Medicare/Medicaid	Facility Number14926
LYNN'S HERITAGE HOUSE, INC			
800 KELLY LN		Telephone (573) 754-4020	Alzheimer's Unit Yes
	MO 63353-2415	Level of Care ALF**	Bed Capacity 44
Mailing Address 800 KELLY LN	WO 05555-2415	County PIKE	DMH Licensed No
	MO 63353-2415	Region 5	Facility Number21055
MAPLE GROVE LODGE			
2407 KENTUCKY ST		Telephone (573) 754-5456	Alzheimer's Unit No
LOUISIANA	MO 63353-2503	Telephone(573) 754-5456Level of CareSNF	
Mailing Address 2407 KENTUCKY ST	WO 03333-2303	County PIKE	Bed Capacity90DMH LicensedNo
LOUISIANA	MO 63353-2503	Region 5 Medicare/Medicaid	Facility Number05002
			•
PARKSIDE MANOR, LLC			
300 S SAINT CHARLES ST		Telephone (573) 324-9918	Alzheimer's Unit No
BOWLING GREEN	MO 63334-2221	Level of Care ALF**	Bed Capacity 44
Mailing Address 300 S SAINT CHARLE	ES ST	County PIKE	DMH Licensed No
BOWLING GREEN	MO 63334-2221	Region 5	Facility Number 05511
	PLAT	TE	
ASPIRE SENIOR LIVING PLATTE C	ITY		
220 O'ROURKE DRIVE		Telephone (816) 858-5222	Alzheimer's Unit No
PLATTE CITY	MO 64079-9360	Level of Care SNF	Bed Capacity 120
Mailing Address PO BOX 1310		County PLATTE	DMH Licensed No

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

Region 4

Medicare/Medicaid

MO 64079-1310

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

PLATTE CITY

12655

Facility Number

AUTUMN WOODS, INC			
5500 NW HOUSTON LAKE DR	Telephone (816) 587-2263	Alzheimer's Unit	No
KANSAS CITY MO 64151-3472	Level of Care RCF*	Bed Capacity	28
Mailing Address PO BOX 12008	County PLATTE	DMH Licensed	Yes
KANSAS CITY MO 64152-0008	Region 4	Facility Number	10857
BENTON HOUSE OF TIFFANY SPRINGS			
5901 NW 88TH ST	Telephone (816) 505-4555	Alzheimer's Unit	Yes
KANSAS CITY MO 64154-1607	Level of Care ALF**	Bed Capacity	80
Mailing Address 5901 NW 88TH ST	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-1607	Region 4	Facility Number	29519
BRISTOL MANOR OF WESTON			
178 WALNUT	Telephone (816) 386-5507	Alzheimer's Unit	No
WESTON MO 64098-1328	Level of Care RCF	Bed Capacity	12
Mailing Address 178 WALNUT	County PLATTE	DMH Licensed	No
WESTON MO 64098-1328	Region 4	Facility Number	16741
BURLINGTON CREEK SENIOR LIVING, THE			V
6311 NORTH COSBY AVENUE KANSAS CITY MO 64151-2344	Telephone (816) 527-8504 Level of Care ALF**	Alzheimer's Unit	Yes 110
Mo 04151-2544 Mailing Address 448 NORTH LASALLE DRIVE FLOOR 2	County PLATTE	Bed Capacity DMH Licensed	No
CHICAGO MO 60654-4518	Region 4	Facility Number	30198
MO 0005-4510	Region 7	Facility Number	30198
GARDENS AT BARRY ROAD, THE			
8300 NW BARRY RD	Telephone (816) 584-3200	Alzheimer's Unit	Yes
KANSAS CITY MO 64153-1634	Level of Care ALF**	Bed Capacity	40
Mailing Address 8300 NW BARRY RD	County PLATTE	DMH Licensed	No
KANSAS CITYMO64153-1634	Region 4	Facility Number	23774
CADDENCAT BADDY DOAD THE			
GARDENS AT BARRY ROAD, THE 8300 NW BARRY ROAD	Telephone (816) 584-3200	Alzheimer's Unit	No
KANSAS CITY MO 64153-1634	Level of Care ALF	Bed Capacity	100
Mailing Address 8300 NW BARRY RD	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64153-1634	Region 4	Facility Number	23774
	itegion -		20771
HERITAGE VILLAGE OF PLATTE CITY			
15 WALLINGFORD DR	Telephone (816) 858-2182	Alzheimer's Unit	No
PLATTE CITY MO 64079-9604	Level of Care RCF*	Bed Capacity	30
Mailing Address 15 WALLINGFORD DR	County PLATTE	DMH Licensed	No
PLATTE CITY MO 64079-9604	Region 4	Facility Number	13182
ICNITE MEDICAL DESORT KANSAS OUTVILO			
IGNITE MEDICAL RESORT KANSAS CITY LLC 2100 NW BARRY ROAD	Telephone (816) 521-6610	Alzheimer's Unit	No
KANSAS CITY MO 64154-1000	Level of Care SNF	Bed Capacity	90
Mailing Address 2100 NW BARRY ROAD	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-1000	Region 4 Medicare/Medicaid	Facility Number	31464
	intrateur of intrateuru		

LEONA HOUSE				
5000 NW OLD TRAIL ROAD		Telephone (816) 584-1033	Alzheimer's Unit	Yes
	MO 64151-1946	Level of Care ALF**	Bed Capacity	7
Mailing Address 5000 NW OLD TRAIL		County PLATTE	DMH Licensed	, No
	MO 64151-1946	Region 4	Facility Number	24748
	110 04191 1940	Kegion +	Facility Pulliber	24740
PRIMROSE RETIREMENT COMMUN	NITY OF KANSAS CITY			
8559 NORTH LINE CREEK PARKWAY		Telephone (816) 468-8282	Alzheimer's Unit	No
KANSAS CITY	MO 64154-2100	Level of Care ALF**	Bed Capacity	44
Mailing Address 8559 NORTH LINE CR	REEK PARKWAY	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-2100	Region 4	Facility Number	29020
RIVERSIDE NURSING & REHABILIT	TATION CENTER, LLC			
4700 NW CLIFFVIEW DR		Telephone (816) 741-5105	Alzheimer's Unit	NO
	MO 64150-1237	Level of Care SNF	Bed Capacity	180
Mailing Address 4700 NW CLIFFVIEW		County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-1237	Region 4 Medicare/Medicaid	Facility Number	01532
TIFFANY SPRINGS REHABILITATIO	ON & HEALTH CARE CENTER			
9191 N AMBASSADOR DR	on a mealin care center	Telephone (816) 741-5570	Alzheimer's Unit	No
	MO 64154-7247	Level of Care SNF	Bed Capacity	120
Mailing Address 9191 N AMBASSADO		County PLATTE	DMH Licensed	No
e e	MO 64154-7247	Region 4 Medicare/Medicaid	Facility Number	30748
		Region i Meurcare/Meurcaru	Facility Pulliber	50740
TIFFANY SPRINGS SENIOR CARE C	COMMUNITY			
9101 N AMBASSADOR DRIVE		Telephone 816-621-3810	Alzheimer's Unit	Yes
KANSAS CITY	MO 64154-7295	Level of Care ALF**	Bed Capacity	89
Mailing Address 9101 N AMBASSADO	R DRIVE	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-7295	Region 4	Facility Number	30748
WEXFORD PLACE ASSISTED LIVIN	IG AND MEMORY SUPPORT BY SE	NIOR STAR		
6460 NORTH COSBY AVE		Telephone (816) 743-4259	Alzheimer's Unit	Yes
	MO 64151-2377	Level of Care ALF**	Bed Capacity	98
Mailing Address 6460 NORTH COSBY		County PLATTE	DMH Licensed	No
	MO 64151-2377	Region 4	Facility Number	28861
WINDEMERE HEALTHCARE CENT	ERLLC			
3100 NORTH WEST VIVION RD		Telephone (816) 741-0753	Alzheimer's Unit	NO
RIVERSIDE	MO 64150-9436	Level of Care RCF	Bed Capacity	65
Mailing Address 3100 NORTH WEST V	VIVION RD	County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-9436	Region 4	Facility Number	08668
	POI	.K		
BIG SPRING CARE CENTER FOR RE	EHAB AND HEALTHCARE			
202 EAST MILL ST		Telephone (417) 754-8711	Alzheimer's Unit	No
HUMANSVILLE	MO 65674-8507	Level of Care SNF	Bed Capacity	60
Mailing Address 202 EAST MILL ST		County POLK	DMH Licensed	No
	MO 65674-8507	Region ¹ Medicare/Medicaid	Facility Number	18672

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BLUE CASTLE BOLIVAR LLC			
1830 E LAVERNE ST	Telephone (417) 777-2583	Alzheimer's Unit	No
BOLIVAR MO 65613-1488	Level of Care RCF*	Bed Capacity	30
Mailing Address 1830 E LAVERNE ST	County POLK	DMH Licensed	Yes
BOLIVAR MO 65613-1488	Region 1	Facility Number	24698
BOLIVAR MANOR HOUSE			
404 EAST BROADWAY	Telephone (417) 327-5790	Alzheimer's Unit	No
BOLIVAR MO 65613-2019	Level of Care RCF*	Bed Capacity	20
Mailing Address PO BOX 175	County POLK	DMH Licensed	Yes
BOLIVAR MO 65613-0175	Region 1	Facility Number	04529
BUTTERFIELD RESIDENTIAL CARE CENTER	Talaphana $(417) 226 5200$	Alabaiman'a Unit	No
1120 NORTH BUTTERFIELD RD BOLIVAR MO 65613-1000	Telephone (417) 326-5200 Level of Care RCF*	Alzheimer's Unit Bed Capacity	No 66
Molivar MO 03015-1000 Mailing Address 1120 N BUTTERFIELD RD	County POLK	DMH Licensed	No
BOLIVAR MO 65613-1000	Region 1	Facility Number	14436
BOLIVAK WO 05015-1000	Region 1	Facility Number	14430
BUTTERFIELD RESIDENTIAL CARE CENTER			
1120 NORTH BUTTERFIELD RD	Telephone (417) 326-5200	Alzheimer's Unit	No
BOLIVAR MO 65613-1000	Level of Care RCF	Bed Capacity	24
Mailing Address 1120 N BUTTERFIELD RD	County POLK	DMH Licensed	No
BOLIVAR MO 65613-1000	Region 1	Facility Number	14436
CITIZENS MEMORIAL HEALTH CARE FACILITY			
1218 W LOCUST ST	Telephone (417) 326-7648	Alzheimer's Unit	No
BOLIVAR MO 65613-1312	Level of Care SNF	Bed Capacity	111
Mailing Address PO BOX 590	County POLK	DMH Licensed	No
BOLIVAR MO 65613-0590	Region 1 Medicare/Medicaid	Facility Number	00710
LAKESHORES RESIDENTIAL CARE FACILITY			
102 SOUTH BOLIVAR RD	Telephone (417) 754-2272	Alzheimer's Unit	No
HUMANSVILLE MO 65674-8553	Level of Care RCF*	Bed Capacity	30
Mailing Address PO BOX 221	County POLK	DMH Licensed	Yes
HUMANSVILLE MO 65674-0221	Region 1	Facility Number	15309
NORTHWOOD HILLS CARE CENTER			
NORTHWOOD HILLS CARE CENTER 800 NORTH ARTHUR ST	Telephone (417) 754-2208	Alzheimer's Unit	Yes
HUMANSVILLE MO 65674-8655	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 187	County POLK	DMH Licensed	No
HUMANSVILLE MO 65674-0187	Region 1 Medicare/Medicaid	Facility Number	10607
	incurato/neuralu	2	10007
PARKVIEW HEALTH CARE FACILITY	_		
119 WEST FOREST	Telephone (417) 326-3000	Alzheimer's Unit	Yes
BOLIVAR MO 65613-1316	Level of Care SNF	Bed Capacity	78 N
Mailing Address119 WEST FORESTBOLIVARMO 65613-1316	County POLK Region ¹ Medicare/Medicaid	DMH Licensed Facility Number	No 17638
2020010-1010	Acgion 4 Micultart/Micultaru	r acting r tuniber	17050

		PULASKI		
DIXON NURSING & REHAB				
403 EAST 10TH ST		Telephone (573) 759-2135	Alzheimer's Unit	No
DIXON	MO 65459-6049	Level of Care SNF	Bed Capacity	60
Mailing Address 403 EAST 10TH ST	Г	County PULASKI	DMH Licensed	No
DIXON	MO 65459-6049	Region 6 Medicare/Medicaid	Facility Number	15510
LIFE CARE CENTER OF WAYNE	SVILLE			
700 BIRCH LN		Telephone (573) 774-6456	Alzheimer's Unit	Yes
WAYNESVILLE	MO 65583-2275	Level of Care SNF	Bed Capacity	120
Mailing Address 700 BIRCH LN		County PULASKI	DMH Licensed	No
WAYNESVILLE	MO 65583-2275	Region 6 Medicare/Medicaid	Facility Number	04592
DICHI AND CADE CENTED INC				
RICHLAND CARE CENTER, INC 400 TRI-COUNTY LANE		Telephone (573) 765-3243	Alzheimer's Unit	No
RICHLAND	MO 65556-8582	Level of Care SNF	Bed Capacity	86
	MO 05550-8582	County PULASKI	DMH Licensed	No
Mailing Address PO BOX 756 RICHLAND	MO 65556-0756	Region 6 Medicare/Medicaid	Facility Number	08100
REILAND	MO 05550-0750	Region 6 Medicare/Medicald	Facility Number	08100
		PUTNAM		
BRISTOL MANOR OF UNIONVIL	LE			
715 NORTH 22ND ST, HWY 5 NOR		Telephone (660) 947-2151	Alzheimer's Unit	No
UNIONVILLE	MO 63565-1142	Level of Care RCF	Bed Capacity	12
Mailing Address 715 NORTH 22ND	ST, HWY 5 NORTH	County PUTNAM	DMH Licensed	No
UNIONVILLE	MO 63565-1142	Region 5	Facility Number	19153
PUTNAM COUNTY CARE CENTI	D			
1814 OAK ST		Telephone (660) 947-2492	Alzheimer's Unit	NC
UNIONVILLE	MO 63565-1275	Level of Care SNF	Bed Capacity	60
Mailing Address 1814 OAK ST	MO 05505-1275	County PUTNAM	DMH Licensed	No
UNIONVILLE	MO 63565-1275	Region 5 Medicare/Medicaid	Facility Number	06516
UNIONVILLE	MO 03505-1275	Region 5 Medicare/Medicald	Facility Number	00310
		RALLS		
COUNTRY AIRE ESTATES, LLC				
49303 RENSSELAER LN		Telephone (573) 221-5400	Alzheimer's Unit	No
HANNIBAL	MO 63401-7356	Level of Care RCF*	Bed Capacity	16
Mailing Address 49303 RENSSELA	ER LN	County RALLS	DMH Licensed	Yes
HANNIBAL	MO 63401-7356	Region 5	Facility Number	14270
WESTVIEW NURSING HOME				
301 WEST DUNLOP ST		Telephone (573) 267-3920	Alzheimer's Unit	No
CENTER	MO 63436-2267	Level of Care SNF	Bed Capacity	60
CENTER			1 2	No
Mailing Address 201 WEST DUNI	ND ST			
Mailing Address 301 WEST DUNLO CENTER	OP ST MO 63436-2267	County RALLS Region ⁵ Medicare/Medicaid	DMH Licensed Facility Number	15634

RANDOLPH

ASPIRE SENIOR LIVING MOBERLY	7			
700 EAST URBANDALE DR	-	Telephone (660) 263-9060	Alzheimer's Unit	Yes
MOBERLY	MO 65270-1966	Level of Care SNF	Bed Capacity	120
Mailing Address 700 EAST URBANDA	LE DR	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-1966	Region ⁵ Medicare/Medicaid	Facility Number	12523
BROOK CHERITH ASSISTED LIVIN	G			
104 EAST ELM ST	NO. (5250 1111	Telephone (660) 277-4439	Alzheimer's Unit	No
HUNTSVILLE	MO 65259-1111	Level of Care ALF	Bed Capacity	38
Mailing Address 104 EAST ELM ST	NO (5250 1111	County RANDOLPH	DMH Licensed	Yes
HUNTSVILLE	MO 65259-1111	Region 5	Facility Number	10918
COATES STREET COMFORT HOUS	E			
612 WEST COATES ST		Telephone (660) 263-6759	Alzheimer's Unit	No
MOBERLY	MO 65270-1319	Level of Care RCF	Bed Capacity	20
Mailing Address PO BOX 781		County RANDOLPH	DMH Licensed	Yes
MOBERLY	MO 65270-0781	Region 5	Facility Number	08220
MARK TWAIN ASSISTED LIVING, I	NC			
901 UNION AVE	ne -	Telephone (660) 263-6515	Alzheimer's Unit	No
MOBERLY	MO 65270-2456	Level of Care ALF**	Bed Capacity	42
Mailing Address 901 UNION AVE	NO 05270 2450	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-2456	Region 5		16369
MODERET	110 05270 2150	Kegion 5	Tuchty Public	10507
MEADOW RIDGE SENIOR LIVING				
521 MEADOW RIDGE LANE		Telephone (660) 263-0550	Alzheimer's Unit	No
MOBERLY	MO 65270-4550	Level of Care ALF**	Bed Capacity	57
Mailing Address 521 MEADOW RIDGE		County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-4550	Region 5	Facility Number	28019
NORTH VILLAGE PARK				
2041 SILVA LN		Telephone (660) 269-7300	Alzheimer's Unit	No
MOBERLY	MO 65270-3658	Level of Care SNF	Bed Capacity	184
Mailing Address 2041 SILVA LN		County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-3658	Region 5 Medicare/Medicaid		06481
DAVENIMOOD TEDDACE ACCIETE	DI IVINC DV AMEDICADE			
RAVENWOOD TERRACE - ASSISTE 1830 RAVENWOOD	D LIVING DI AMERICARE	Telephone (660) 263-8004	Alzheimer's Unit	Yes
MOBERLY	MO 65270-3002	Level of Care ALF**	Bed Capacity	55
Modelee 1 Mailing Address 1830 RAVENWOOD	110 05270-5002	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-3002	Region 5		16411
MODERET	110 05270-5002	Kegion 5	Facinty Number	10411
VALLEY VIEW HEALTH & REHABI	ILITATION			
1600 EAST ROLLINS ST		Telephone (660) 263-6887	Alzheimer's Unit	No
MOBERLY	MO 65270-2478	Level of Care SNF	Bed Capacity	96
Mailing Address 1600 E ROLLINS ST		County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-2478	Region 5 Medicare/Medicaid	Facility Number	13167
MODERLI	1410 0J2/0-24/0	region 5 medicare/medicaid	Facinity multiper	1310/

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

RAY

	KA.	L		
LAWSON MANOR & REHAB				
210 WEST 8TH TERRACE		Telephone (816) 580-3269	Alzheimer's Unit	Yes
	MO 64062-9357	Level of Care SNF	Bed Capacity	60
Mailing Address 210 WEST 8TH TERRA		County RAY	DMH Licensed	No
	MO 64062-9357	·	Facility Number	07395
LAWSON	MO 04002-9337	Region ⁴ Medicare/Medicaid	Facility Number	07395
OAK RIDGE ASSISTED LIVING				
403 CRISPIN ST		Telephone (816) 776-3435	Alzheimer's Unit	Yes
RICHMOND	MO 64085-1212	Level of Care ALF**	Bed Capacity	55
Mailing Address 403 CRISPIN ST		County RAY	DMH Licensed	No
	MO 64085-1212	Region 4	Facility Number	29711
SHIRKEY NURSING & REHABILITAT	TION CENTER	Talaphana (816) 776 5402	Alabaiman's Unit	Vaa
804 WOLLARD BLVD	NO. 64005 2227	Telephone (816) 776-5403	Alzheimer's Unit	Yes
	MO 64085-2227	Level of Care SNF	Bed Capacity	197
Mailing Address 804 WOLLARD BLVD		County RAY	DMH Licensed	No
RICHMOND	MO 64085-2227	Region 4 Medicare/Medicaid	Facility Number	07289
	REYNC	OLDS		
BRENT B TINNIN MANOR				
220 EUEL POLK DR		Telephone (573) 663-2545	Alzheimer's Unit	No
	MO 63638-7967	Level of Care SNF	Bed Capacity	60
Mailing Address 220 EUEL POLK DR	MO 05050-7707	County REYNOLDS	DMH Licensed	No
	MO 63638-7967	2		
ELLINGTON	MO 03038-7907	Region 2 Medicare/Medicaid	Facility Number	08027
BUNKER RESIDENTIAL HOME				
500 CULLER AVE		Telephone (573) 689-1392	Alzheimer's Unit	No
	MO 63629-	Level of Care RCF	Bed Capacity	12
Mailing Address PO BOX 276		County REYNOLDS	DMH Licensed	Yes
e e	MO 63629-0276	Region 2	Facility Number	16882
DOMALIA	110 05027 0270	Region 2	Tacinity Planiber	10882
	RIPL	EY		
COLONIAL HOME, THE				
102 SUMMIT ST		Telephone (573) 996-4283	Alzheimer's Unit	No
DONIPHAN	MO 63935-1328	Level of Care ALF**	Bed Capacity	31
Mailing Address 102 SUMMIT ST		County RIPLEY	DMH Licensed	No
DONIPHAN	MO 63935-1328	Region 2	Facility Number	01610
CURRENT RIVER NURSING CENTER	P INC			
1015 NORTH GRAND AVE	N, 111C			Yes
		(572) 006 4720		165
	MO 62025 1770	Telephone (573) 996-4239 Level of Core SNE	Alzheimer's Unit	120
DONIPHAN	MO 63935-1779	Level of Care SNF	Bed Capacity	120 No
DONIPHAN Mailing Address 1015 NORTH GRAND	AVE	Level of Care SNF County RIPLEY	Bed Capacity DMH Licensed	No
DONIPHAN Mailing Address 1015 NORTH GRAND		Level of Care SNF	Bed Capacity	
DONIPHAN Mailing Address 1015 NORTH GRAND	AVE MO 63935-1779	Level of Care SNF County RIPLEY	Bed Capacity DMH Licensed	No
DONIPHAN Mailing Address 1015 NORTH GRAND ADONIPHAN	AVE MO 63935-1779	Level of Care SNF County RIPLEY Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed	No
DONIPHAN I Mailing Address 1015 NORTH GRAND I DONIPHAN I WALNUT STREET ASSISTED LIVING 404 WALNUT ST	AVE MO 63935-1779	Level of Care SNF County RIPLEY Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	No 17125
DONIPHAN M Mailing Address 1015 NORTH GRAND A DONIPHAN M WALNUT STREET ASSISTED LIVING 404 WALNUT ST DONIPHAN M	AVE MO 63935-1779 G	Level of Care SNF County RIPLEY Region 2 Medicare/Medicaid Telephone (573) 996-4283 Level of Care ALF	Bed Capacity DMH Licensed Facility Number	No 17125 No
DONIPHAN A Mailing Address 1015 NORTH GRAND A DONIPHAN M WALNUT STREET ASSISTED LIVING 404 WALNUT ST DONIPHAN M Mailing Address 404 WALNUT ST	AVE MO 63935-1779 G	Level of Care SNF County RIPLEY Region 2 Medicare/Medicaid Telephone (573) 996-4283	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 17125 No 35

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

SAINT CHARLES

ABBEY SENIOR HEALTH				
206 NORTH MAIN ST		Telephone (636) 240-5754	Alzheimer's Unit	NO
O'FALLON	MO 63366-	Level of Care ALF**	Bed Capacity	10
Mailing Address 206 NORTH	MAIN ST	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-2299	Region 5	Facility Number	27367
ABBEY SENIOR HEALTH				
206 NORTH MAIN ST		Telephone (636) 240-5754	Alzheimer's Unit	No
O'FALLON	MO 63366-2299	Level of Care SNF	Bed Capacity	55
Mailing Address 206 NORTH		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-2299	Region 5 Medicare/Medicaid	Facility Number	27367
ARBORS AT MOUNT CARM	IEL. THE			
723 FIRST CAPITOL DR	,	Telephone (636) 946-4140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2729	Level of Care ALF**	Bed Capacity	30
Mailing Address 723 FIRST CA		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2729	Region 5	Facility Number	29396
		ingion -		2,570
ASPEN POINT HEALTH AN	D REHABILITATION			
2840 WEST CLAY ST		Telephone (636) 946-6100	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2536	Level of Care SNF	Bed Capacity	180
Mailing Address 2840 WEST C	CLAY ST	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2536	Region 5 Medicare/Medicaid	Facility Number	01521
ASSISTED LIVING AT THE	MEADOWLANDS			
135 MEADOWLANDS ESTAT	ES LN	Telephone (636) 978-3600	Alzheimer's Unit	Yes
O'FALLON	MO 63366-4591	Level of Care ALF**	Bed Capacity	86
Mailing Address 135 MEADO	WLANDS ESTATES LN	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-4591	Region 5	Facility Number	26475
BARATHAVEN ALZHEIME I	R'S SPECIAL CARE CENTER			
1030 BARATHAVEN DR		Telephone (636) 329-9160	Alzheimer's Unit	Yes
DARDENNE PRAIRIE	MO 63368-8606	Level of Care ALF**	Bed Capacity	66
Mailing Address 1030 BARAT		County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE	MO 63368-8606	Region 5	Facility Number	26902
DOULDYARD (ENIOD I WI				
BOULEVARD SENIOR LIVE	NG OF 51 CHAKLED, IHE	Telephone (626) 757 5077	Alzhoimen's Unit	Var
3340 EHLMANN ROAD SAINT CHARLES	MO 63301-4087	Telephone (636) 757-5077 Level of Care ALF**	Alzheimer's Unit	Yes
Mailing Address 3340 EHLMA			Bed Capacity DMH Licensed	128 No
8		·		
SAINT CHARLES	MO 63301-4087	Region 5	Facility Number	31029
BOULEVARD SENIOR LIVI	NG OF WENTZVILLE, THE			
120 PERRY CATE BOULEVAL	RD	Telephone (636) 698-9458	Alzheimer's Unit	Yes
WENTZVILLE	MO 63385-4719	Level of Care ALF**	Bed Capacity	62
Mailing Address 120 PERRY (CATE BOULEVARD	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-4719	Region 5	Facility Number	31404

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

BRISTOL MANOR OF WENTZVILLE			
840 WEST NORTHVIEW	Telephone (636) 639-6777	Alzheimer's Unit	No
WENTZVILLE MO 63385-1036	Level of Care RCF	Bed Capacity	12
Mailing Address 840 W NORTHVIEW	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE MO 63385-1036	Region 5	Facility Number 2	20397
	0		
CAREGIVERS INN			
1297 FEISE RD	Telephone (636) 240-7979	Alzheimer's Unit	Yes
DARDENNE PRAIRIE MO 63368-6710	Level of Care ALF**	Bed Capacity	30
Mailing Address 1297 FEISE RD	County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE MO 63368-6710	Region 5	Facility Number	15342
CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY CARI	E		
1800 FIRST CAPITOL DRIVE	Telephone (636) 255-8094	Alzheimer's Unit	Yes
SAINT CHARLES MO 63301-1646	Level of Care ALF**	Bed Capacity	155
Mailing Address 1800 FIRST CAPITOL DRIVE	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63301-1646	Region 5	Facility Number	30676
CHESTNUT GLENN - ASSISTED LIVING BY AMERICARE			
121 KLONDIKE CROSSING	Telephone (636) 928-4200	Alzheimer's Unit	Yes
SAINT PETERS MO 63376-5394	Level of Care ALF**	Bed Capacity	74
Mailing Address 121 KLONDIKE CROSSING	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS MO 63376-5394	Region 5	Facility Number 2	25446
CLARENDALE OF ST PETERS			
10 DUBRAY DRIVE	Telephone (636)706-5100	Alzheimer's Unit	yes
SAINT PETERS MO 63376-3558	Level of Care ALF**	Bed Capacity	110
Mailing Address 10 DUBRAY DRIVE	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS MO 63376-3558	Region 5	Facility Number	32095
COTTAGES OF LAKE ST LOUIS			
2885 TECHNOLOGY DRIVE	Telephone (636) 614-3510	Alzheimer's Unit	No
LAKE SAINT LOUIS MO 63367-4123	Level of Care SNF	Bed Capacity	60
Mailing Address 2885 TECHNOLOGY DRIVE	County SAINT CHARLES	DMH Licensed	No
LAKE SAINT LOUIS MO 63367-4123	Region 5 Medicare	Facility Number 3	30318
DELMAR GARDENS OF O'FALLON			
7068 SOUTH OUTER 364	Telephone (636) 240-6100	Alzheimer's Unit	Yes
O'FALLON MO 63368-7757	Level of Care SNF	Bed Capacity	240
Mailing Address 7068 SOUTH OUTER 364	County SAINT CHARLES	DMH Licensed	No
O'FALLON MO 63368-7757	Region 5 Medicare/Medicaid		24291
GARDEN VIEW CARE CENTER			
700 GARDEN PATH	Telephone (636) 240-2840	Alzheimer's Unit	YES
O'FALLON MO 63366-3052	Level of Care SNF	Bed Capacity	120
Mailing Address 700 GARDEN PATH	County SAINT CHARLES	DMH Licensed	No
O'FALLON MO 63366-3052	Region 5 Medicare/Medicaid	Facility Number	13963

GARDEN VILLAS OF O'FALLON			
7092 SOUTH OUTER 364 ROAD	Telephone (636) 240-5560	Alzheimer's Unit	No
O'FALLON MO 63368-7757	Level of Care ALF	Bed Capacity	95
Mailing Address 7092 SOUTH OUTER 364 RD	County SAINT CHARLES	DMH Licensed	No
O'FALLON MO 63368-7757	Region 5	Facility Number	27793
GLENFIELD MEMORY CARE 118 OHMES ROAD	Telephone (636) 447-4440	Alzheimer's Unit	Yes
COTTLEVILLE MO 63376-7649	Level of Care ALF**	Bed Capacity	12
Mailing Address 118 OHMES RD		DMH Licensed	No
COTTLEVILLE MO 63376-7649	County SAINT CHARLES Region 5	Facility Number	
MO 05570-7049	Kegion 5	Facility Number	30372
HAMPTON MANOR OF WENTZVILLE			
21 MIDLAND PARK DR	Telephone (636) 538-6700	Alzheimer's Unit	YES
WENTZVILLE MO 63385-8100	Level of Care ALF**	Bed Capacity	85
Mailing Address 21 MIDLAND PARK DR	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE MO 63385-8100	Region 5	Facility Number	33289
HARVESTER RESIDENTIAL CARE			
35 LILLIAN DR	Telephone (636) 939-3833	Alzheimer's Unit	No
SAINT CHARLES MO 63304-7032	Level of Care RCF*	Bed Capacity	38
Mailing Address 35 LILLIAN DR	County SAINT CHARLES	DMH Licensed	Yes
SAINT CHARLES MO 63304-7032	Region 5	Facility Number	03411
LAKE ST CHARLES ASSISTED LIVING APARTMENTS			
45 HONEY LOCUST LN	Telephone (636) 947-1100	Alzheimer's Unit	No
SAINT CHARLES MO 63303-5711	Level of Care ALF	Bed Capacity	50
Mailing Address 45 HONEY LOCUST LN	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63303-5711	Region 5	Facility Number	18030
LANDING OF O'FALLON, THE			
1000 LANDING CIRCLE	Telephone (636) 669-0780	Alzheimer's Unit	Yes
SAINT CHARLES MO 63304-7647	Level of Care ALF**	Bed Capacity	142
Mailing Address 1000 LANDING CIRCLE	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63304-7647	Region 5	Facility Number	31181
LEWIS & CLARK GARDENS			
1221 BOONES LICK RD	Telephone (636) 946-6140	Alzheimer's Unit	No
SAINT CHARLES MO 63301-2328	Level of Care SNF	Bed Capacity	142
Mailing Address 1221 BOONES LICK RD	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63301-2328	Region 5 Medicare/Medicaid	Facility Number	01266
		•	=
LUTHERAN SENIOR SERVICES AT BREEZE PARK			
600 BREEZE PARK DR	Telephone (636) 939-5223	Alzheimer's Unit	Yes
SAINT CHARLES MO 63304-9139	Level of Care ALF**	Bed Capacity	23
Mailing Address 600 BREEZE PARK DR	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63304-9139	Region 5	Facility Number	20704

I LUTHED AN CENICOD CEDVIC	TEG AT DDEEZE DADZ			
LUTHERAN SENIOR SERVIC 600 BREEZE PARK DR	LES AT BREEZE PARK	Telephone (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care ALF	Bed Capacity	56
Mailing Address 600 BREEZE F		County SAINT CHARLES	DMH Licensed	J0 No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number	20704
SAINT CHARLES	MO 05504-9159	kegion 5	Facility Number	20704
LUTHERAN SENIOR SERVIC	CES AT BREEZE PARK			
600 BREEZE PARK DR		Telephone (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care SNF	Bed Capacity	81
Mailing Address 600 BREEZE F	PARK DR	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region ⁵ Medicare/Medicaid	Facility Number	20704
MCCLAN SENIOD CADE				
MCCLAY SENIOR CARE 3801 MCCLAY ROAD		Telephone (626) 244 2222	Alzheimer's Unit	No
SAINT PETERS	MO 63376-7327	Telephone (636) 244-3323 Level of Care SNF		No 60
			Bed Capacity DMH Licensed	No
Mailing Address 3801 MCCLAY SAINT PETERS	MO 63376-7327	·		
SAINT PETEKS	MO 05570-7527	Region 5 Medicare/Medicaid	Facility Number	29933
MOUNT CARMEL SENIOR L	IVING - ST CHARLES, LLC			
723 FIRST CAPITOL DR		Telephone (636) 946-4140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2729	Level of Care SNF	Bed Capacity	110
Mailing Address 723 FIRST CA	PITOL DR	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2729	Region 5 Medicare/Medicaid	Facility Number	07560
NHC HEALTHCARE, ST CHA	RLES			
35 SUGAR MAPLE LN		Telephone (636) 946-8887	Alzheimer's Unit	No
SAINT CHARLES	MO 63303-5740	Level of Care SNF	Bed Capacity	120
Mailing Address 35 SUGAR MA	APLE LN	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63303-5740	Region 5 Medicare/Medicaid	Facility Number	07503
PARK PLACE II				
2000 BOARDWALK PLACE DR		Telephone (636) 625-2900	Alzheimer's Unit	No
O'FALLON	MO 63368-3901	Level of Care ALF**	Bed Capacity	124
Mailing Address 2000 BOARD		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-3901	Region 5	Facility Number	29016
		Region 0		29010
SPENCER PLACE - ASSISTEI	D LIVING BY AMERICARE			
265 SPENCER RD		Telephone (636) 441-6662	Alzheimer's Unit	No
SAINT PETERS	MO 63376-2430	Level of Care ALF**	Bed Capacity	74
Mailing Address 265 SPENCER		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2430	Region 5	Facility Number	13294
ST PETERS POST ACUTE				
5400 EXECUTIVE CENTRE PK	WY	Telephone (636) 922-7600	Alzheimer's Unit	No
SAINT PETERS	MO 63376-2594	Level of Care ALF**	Bed Capacity	62
Mailing Address 5400 EXECUT	IVE CENTRE PKWY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5	Facility Number	26014

ST PETERS POST ACUTE			
5400 EXECUTIVE CENTRE PKWY	Telephone (636) 922-7600	Alzheimer's Unit	Yes
SAINT PETERS MO 63376-2594	Level of Care SNF	Bed Capacity	130
Mailing Address 5400 EXECUTIVE CENTRE PKWY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS MO 63376-2594	Region 5 Medicare/Medicaid	Facility Number	26014
	Region 5 Meurale Meuralu	Tuenny Pulliber	20014
ST PETERS REHAB AND HEALTHCARE CENTER			
230 SPENCER RD	Telephone (636) 441-2750	Alzheimer's Unit	No
SAINT PETERS MO 63376-2425	Level of Care SNF	Bed Capacity	96
Mailing Address 230 SPENCER RD	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS MO 63376-2425	Region 5 Medicare/Medicaid	Facility Number	07613
SUNTERRA SPRINGS DARDENNE PRAIRIE		AII · · · · · · · · · · · · · · · · · ·	N
7275 STATE HIGHWAY N	Telephone (636) 865-0200	Alzheimer's Unit	No
DARDENNE PRAIRIE MO 63368-7128	Level of Care SNF	Bed Capacity	38
Mailing Address 7275 STATE HIGHWAY N	County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE MO 63368-7128	Region 5 Medicare	Facility Number	32331
TWIN OAKS AT HERITAGE POINTE			
228 SAVANNAH TERRACE	Telephone (636) 542-5200	Alzheimer's Unit	Yes
WENTZVILLE MO 63385-3741	Level of Care ALF**	Bed Capacity	70
Mailing Address 228 SAVANNAH TERRACE	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE MO 63385-3741	Region 5	Facility Number	26877
TWIN OAKS ESTATE, INC			
707 EMGE RD	Telephone (636) 542-5200	Alzheimer's Unit	No
O'FALLON MO 63366-2118	Level of Care RCF*	Bed Capacity	149
Mailing Address 707 EMGE RD	County SAINT CHARLES	DMH Licensed	No
O'FALLON MO 63366-2118	Region 5	Facility Number	08209
VILLAGE CENTER CARE OF WENTZVILLE			
909 E PITMAN AVE	Telephone (636) 327-1907	Alzheimer's Unit	No
WENTZVILLE MO 63385-1818	Level of Care ALF**	Bed Capacity	22
Mailing Address 909 E PITMAN AVE	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE MO 63385-1818	Region 5	Facility Number	28026
VILLAGES OF ST PETERS MEMORY CARE			
5300 EXECUTIVE CENTER PARKWAY	Telephone (636) 477-6955	Alzheimer's Unit	Yes
SAINT PETERS MO 63376-3182	Level of Care ALF**	Bed Capacity	60
Mailing Address 5300 EXECUTIVE CENTER PARKWAY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS MO 63376-3182	Region 5	Facility Number	29889
Shirt (E12KS 140 05570-5162	KCEIUN J	Facility Mulliber	23003
WINDSOR ESTATES OF ST CHARLES			
2150 WEST RANDOLPH ST	Telephone (636) 946-4966	Alzheimer's Unit	No
SAINT CHARLES MO 63301-0894	Level of Care SNF	Bed Capacity	66
Mailing Address 2150 WEST RANDOLPH ST	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES MO 63301-0894	Region 5 Medicare/Medicaid	Facility Number	06316

SAINT CLAIR

APPLETON CITY MANOR				
600 NORTH OHIO ST		Telephone (660) 476-2128	Alzheimer's Unit	No
APPLETON CITY	MO 64724-1609	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed	No
APPLETON CITY	MO 64724-0098	Region ¹ Medicare/Medicaid	Facility Number	01637
COUNTRYSIDE ESTATES				
500 NORTH OHIO		Telephone (660) 476-2128	Alzheimer's Unit	No
APPLETON CITY	MO 64724-1625	Level of Care RCF*	Bed Capacity	24
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed	No
APPLETON CITY	MO 64724-0098	Region 1	Facility Number	15005
TRUMAN LAKE MANOR, INC				
600 EAST 7TH ST		Telephone (417) 644-2248	Alzheimer's Unit	No
LOWRY CITY	MO 64763-9671	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 415		County SAINT CLAIR	DMH Licensed	No
LOWRY CITY	MO 64763-0415	Region 1 Medicare/Medicaid	Facility Number	08140
	SAI	NT FRANCOIS		
ANNA DODSON HOME				
4616 HIGHWAY D		Telephone (573) 756-5530	Alzheimer's Unit	No
FARMINGTON	MO 63640-7241	Level of Care RCF	Bed Capacity	17
Mailing Address 4616 HWY D		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number	02160
ANNA DODSON HOME				
4616 HIGHWAY D		Telephone (573) 756-5530	Alzheimer's Unit	No
FARMINGTON	MO 63640-7241	Level of Care RCF*	Bed Capacity	20

FARMINGTON	МО	63640-7241
ASHBROOK - ASSISTED LI	VING BY AM	ERICARE

Mailing Address 4616 HWY D

			-	
500 ASHBROOF	K DR			
FARMINGTON		MO	63640-9235	
Mailing Address	s 500 ASHBR	OOK DR		
FARMINGTON		MO	63640-9235	

BAILEY HOUSE 102 BAILEY ST Telephone FARMINGTON MO 63640-1819 Level of Care RCF Mailing Address 102 BAILEY ST County FARMINGTON MO 63640-1819 Region 2

BAYLESS BOARDING HOME 3719 SAND CREE FARMINGTON Mailing Address 3 FARMINGTON

Alzheimer's Unit (573) 756-6374 No **Bed Capacity** 12 SAINT FRANCOIS **DMH Licensed** Yes **Facility Number** 00256

DMH Licensed

Facility Number

Alzheimer's Unit

Bed Capacity

DMH Licensed

Facility Number

Yes

No

72

No

18138

02160

EK ROAD		Telephone	(573) 747-0889	Alzheimer's Unit	No
МО	63640-7349	Level of Care	RCF	Bed Capacity	12
3719 SAND CREEK RD		County SAI	NT FRANCOIS	DMH Licensed	Yes
МО	63640-7349	Region 2		Facility Number	17300

County

Region 2

Telephone

County

Region 2

Level of Care

SAINT FRANCOIS

(573) 756-5544

ALF**

SAINT FRANCOIS

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

BROOKSIDE MANOR RESIDENTIAL CA	RE, LLC			
2434 HIGHWAY H		Telephone (573) 756-6434	Alzheimer's Unit	No
FARMINGTON MO	63640-7033	Level of Care RCF*	Bed Capacity	20
Mailing Address 2434 HIGHWAY H		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO	63640-7033	Region 2	Facility Number	20034
		-		
CAMELOT NURSING AND REHABILITA	TION CENTER			
705 GRAND CANYON DRIVE		Telephone (573) 756-8911	Alzheimer's Unit	NO
FARMINGTON MO	63640-2161	Level of Care SNF	Bed Capacity	97
Mailing Address 705 GRAND CANYON DRI	IVE	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO	63640-2161	Region 2 Medicare/Medicaid	Facility Number	00978
CARRIAGE RESIDENTIAL CARE CENTE	ER LLC			
508 NORTH WASHINGTON ST		Telephone (573) 756-8140	Alzheimer's Unit	No
FARMINGTON MO	63640-1756	Level of Care RCF*	Bed Capacity	20
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed	Yes
-	63640-0675	Region 2	Facility Number	07824
		5	·	
CEDARHURST OF FARMINGTON				
200 MAPLE VALLEY DRIVE		Telephone (573) 713-9150	Alzheimer's Unit	Yes
FARMINGTON MO	63640-7331	Level of Care ALF**	Bed Capacity	84
Mailing Address 200 MAPLE VALLEY DRIV	Æ	County SAINT FRANCOIS	DMH Licensed	No
	63640-7331	Region 2	Facility Number	32159
		8	·	
COLONIAL RESIDENTIAL CARE FACIL	ITY II			
1162 CEDAR ST		Telephone (573) 734-2846	Alzheimer's Unit	No
BISMARCK MO	63624-8920	Level of Care RCF*	Bed Capacity	48
Mailing Address PO BOX 134		County SAINT FRANCOIS	DMH Licensed	Yes
MOUNTAIN GROVE MO	65711-0134	Region 2	Facility Number	01693
COLUMBIA STREET RESIDENTIAL CAR	RE CENTER LLC	T-l	A 1_b _:	N-
208 WEST COLUMBIA ST	C2C40 1705	Telephone (573) 756-7481 Leavel of Comp DCE	Alzheimer's Unit	No
	63640-1705	Level of Care RCF	Bed Capacity	16 Vac
Mailing Address PO BOX 272 FARMINGTON MO	63640-0675	County SAINT FRANCOIS	DMH Licensed Facility Number	Yes 01729
PARMINOTON	03040-0075	Region 2	Facility Number	01729
COMMUNITY MANOR				
783 WEBER ROAD		Telephone (573) 756-8998	Alzheimer's Unit	No
	63640-3318	Level of Care SNF	Bed Capacity	99
Mailing Address 783 WEBER RD	050+0 5510	County SAINT FRANCOIS	DMH Licensed	No
0	63640-3318	Region 2 Medicare/Medicaid	Facility Number	13887
		megion - mituical t/mituicalu	runny runner	1000/
COUNTRY MEADOWS				
1301 N ST JOE DR		Telephone (573) 431-2889	Alzheimer's Unit	No
	63601-1965	Level of Care ALF	Bed Capacity	15
Mailing Address 1301 N ST JOE DR		County SAINT FRANCOIS	DMH Licensed	No
	63601-1965	Region 2	Facility Number	14443
		0	• • • • •	

COUNTRY MEADOWS				
1301 N ST JOE DR	Telephone	(573) 431-2889	Alzheimer's Unit	No
PARK HILLS MO 636	-		Bed Capacity	72
Motors 1301 N ST JOE DR	County	SAINT FRANCOIS	DMH Licensed	No
PARK HILLS MO 636	•	Medicare/Medicaid	Facility Number	14443
	Kegion 2	Weulcal e/ Weulcalu	Facility Pulliber	14445
CRAWFORD RANCH DOARDING HOME II	C			
CRAWFORD RANCH BOARDING HOME, LL 2200 VARVERA RD	Telephone	(573) 756-4656	Alzheimer's Unit	No
DOE RUN MO 636	•		Bed Capacity	32
Mailing Address 2200 VARVERA RD	County	SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN MO 636	•	SAINT FRANCOIS	Facility Number	13193
	Kejon 2		Tuenty Pulliber	15175
FARMINGTON MANOR				
2879 US HIGHWAY 67	Telephone	(573) 756-7566	Alzheimer's Unit	No
FARMINGTON MO 636	•		Bed Capacity	70
Mailing Address 2879 US HWY 67	County	SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 636	•		Facility Number	15140
	0			
FARMINGTON PRESBYTERIAN MANOR				
500 CAYCE ST	Telephone	(573) 756-6768	Alzheimer's Unit	Yes
FARMINGTON MO 636	540-2910 Level of Ca	ire SNF	Bed Capacity	90
Mailing Address 500 CAYCE ST	County	SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 636	640-2910 Region 2	Medicare/Medicaid	Facility Number	06181
FARMINGTON PRESBYTERIAN MANOR				
500 CAYCE ST	Telephone	(573) 756-6768	Alzheimer's Unit	No
FARMINGTON MO 636	•		Bed Capacity	60
Mailing Address 500 CAYCE ST	County	SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 636	•		Facility Number	06181
FARMINGTON PRESBYTERIAN MANOR				
500 CAYCE ST	Telephone	(573) 756-6768	Alzheimer's Unit	No
FARMINGTON MO 636			Bed Capacity	60
Mailing Address 500 CAYCE ST	County	SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 636	640-2910 Region 2		Facility Number	06181
GREEN ACRES RESIDENTIAL CARE FACILI				
3688 SAND CREEK ROAD	Telephone	(573) 756-2917	Alzheimer's Unit	No
FARMINGTON MO 636	•		Bed Capacity	12
Mailing Address 3688 SAND CREEK RD	County	SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 636	•		Facility Number	17289
	Kgivii 2			1,207
HARRIS RESIDENTIAL CARE CENTER LLC				
401 SOUTH HENRY	Telephone	(573) 756-5376	Alzheimer's Unit	No
FARMINGTON MO 636	540-1823 Level of Ca	are RCF*	Bed Capacity	37
Mailing Address PO BOX 671	County	SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 636	640-0675 Region 2		Facility Number	02256

MAPLE RIDGE RESIDENTIAL CAI	RE CENTER LLC			
1034 DORIS DR		Telephone (573) 760-0155	Alzheimer's Unit	No
FARMINGTON	MO 63640-1954	Level of Care RCF*	Bed Capacity	20
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0272	Region 2	Facility Number	19808
MAPLEBROOK-ASSISTED LIVING	BY AMERICARE			
520 MAPLE VALLEY DR		Telephone (573) 756-2777	Alzheimer's Unit	Yes
FARMINGTON	MO 63640-1981	Level of Care ALF**	Bed Capacity	61
Mailing Address 520 MAPLE VALLE	Y DR	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-1981	Region 2	Facility Number	28635
NEW HORIZONS RCF II				
5858 BUSIEK ROAD		Telephone (573) 756-2426	Alzheimer's Unit	No
FARMINGTON	MO 63640-7325	Level of Care ALF	Bed Capacity	15
Mailing Address PO BOX 510	WIO 03040-7325	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0510	Region 2	Facility Number	
TARMINOTON	1410 03040-0310	Kegion 2	Facility Rulliber	14868
NHC HEALTHCARE, DESLOGE				
801 BRIM ST		Telephone (573) 431-0223	Alzheimer's Unit	Yes
DESLOGE	MO 63601-3441	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX AA		County SAINT FRANCOIS	DMH Licensed	No
DESLOGE	MO 63601-0568	Region 2 Medicare/Medicaid	Facility Number	02143
PINE VALLEY RCF				
3381 1st STREET		Telephone (573) 760-8601	Alzheimer's Unit	No
DOE RUN	MO 63637-3155	Level of Care RCF	Bed Capacity	12
Mailing Address 3381 1st STREET		County SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN	MO 63637-3155	Region 2	Facility Number	08379
SECRET GARDENS				
351 KEITH ST		Telephone (573) 518-0444	Alzheimer's Unit	No
PARK HILLS	MO 63601-2049	Level of Care RCF	Bed Capacity	10
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number	17813
SOUTHBROOK NURSING CENTER	2			
1101 HAZEL LANE	•	Telephone (573) 756-6658	Alzheimer's Unit	No
FARMINGTON	MO 63640-1920	Level of Care SNF	Bed Capacity	104
Mailing Address 1101 HAZEL LANE		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-1920	Region 2 Medicare/Medicaid	Facility Number	02577
				02311
ST FRANCOIS MANOR				
1180 OLD JACKSON RD		Telephone (573) 760-1700	Alzheimer's Unit	No
FARMINGTON	MO 63640-3428	Level of Care RCF	Bed Capacity	11
Mailing Address 1180 OLD JACKSON		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-3428	Region 2	Facility Number	21512

ST FRANCOIS MANOR			
1180 OLD JACKSON RD	Telephone (573) 760-1700	Alzheimer's Unit	No
FARMINGTON MO 63640-3428	Level of Care RCF*	Bed Capacity	29
Mailing Address 1180 OLD JACKSON RD	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 63640-3428	Region 2	Facility Number	21512
ST FRANCOIS MANOR			
1180 OLD JACKSON RD	Telephone (573) 760-1700	Alzheimer's Unit	No
FARMINGTON MO 63640-3428	Level of Care SNF	Bed Capacity	118
Mailing Address 1180 OLD JACKSON RD	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 63640-3428	Region 2 Medicare/Medicaid	Facility Number	21512
ST JOE MANOR			
10 LAKE DR	Telephone (573) 358-2800	Alzheimer's Unit	No
BONNE TERRE MO 63628-1820	Level of Care ALF**	Bed Capacity	36
Mailing Address 10 LAKE DR	County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE MO 63628-1820	Region 2	Facility Number	22664
ST JOE MANOR			
10 LAKE DR	Telephone (573) 358-2800	Alzheimer's Unit	Yes
BONNE TERRE MO 63628-1820	Level of Care SNF	Bed Capacity	145
Mailing Address 10 LAKE DR	County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE MO 63628-1820	Region 2 Medicare/Medicaid	Facility Number	22664
ST JOE MANOR			
10 LAKE DR	Telephone (573) 358-2800	Alzheimer's Unit	No
BONNE TERRE MO 63628-1820	Level of Care ALF	Bed Capacity	10
Mailing Address 10 LAKE DR	County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE MO 63628-1820	Region 2	Facility Number	22664
WATTS STREET MANOR			
301 WATTS ST	Telephone (573) 431-4874	Alzheimer's Unit	No
PARK HILLS MO 63601-1839	Level of Care RCF*	Bed Capacity	16
Mailing Address PO BOX 481	County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS MO 63601-0481	Region 2	Facility Number	06579

SAINT LOUIS CITY

AKINS HEALTH CARE, INC 4432 WEST BELLE PL	NO. (2100.2017	Telephone (314) 652-8908	Alzheimer's Unit No
SAINT LOUIS Mailing Address 4432 WEST BELLE	MO 63108-2617 PL	Level of Care RCF County SAINT LOUIS CITY	Bed Capacity20DMH LicensedYes
SAINT LOUIS	MO 63108-2617	Region 7	Facility Number 00078
AVALON GARDEN			
4359 TAFT AVE		Telephone (314) 752-2022	Alzheimer's Unit No
SAINT LOUIS	MO 63116-1533	Level of Care SNF	Bed Capacity 77
Mailing Address 4359 TAFT AVE		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63116-1533	Region 7 Medicare/Medicaid	Facility Number 00244

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

BEAUVAIS REHAB AND HEALTHCARE CENTER			V
3625 MAGNOLIA AVE	Telephone (314) 771-2990	Alzheimer's Unit	Yes
SAINT LOUIS MO 63110-4048	Level of Care SNF	Bed Capacity	184
Mailing Address 3625 MAGNOLIA AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63110-4048	Region 7 Medicare/Medicaid	Facility Number	09528
BENEDICT JOSEPH LABRE CENTER			
3863 CLEVELAND	Telephone (314) 664-3927	Alzheimer's Unit	No
SAINT LOUIS MO 63110-4009	Level of Care RCF	Bed Capacity	15
Mailing Address 3863 CLEVELAND	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63110-4009	Region 7	Facility Number	21163
BERNARD CARE CENTER			
4335 WEST PINE BLVD	Telephone (314) 371-0200	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2205	Level of Care SNF	Bed Capacity	141
Mailing Address 4335 WEST PINE BLVD	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63108-2205	Region 7 Medicare/Medicaid	Facility Number	00436
SAINI LOUIS MO 05106-2205	Kegion / Medicare/Medicald	Facility Number	00436
BLUE CIRCLE REHAB AND NURSING			
2939 MAGAZINE STREET	Telephone (314) 531-0500	Alzheimer's Unit	No
SAINT LOUIS MO 63106-1245	Level of Care SNF	Bed Capacity	90
Mailing Address 2939 MAGAZINE STREET	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63106-1245	Region 7 Medicare/Medicaid	Facility Number	15258
CARONDELET RETIREMENT MANOR			
6811 MICHIGAN	Telephone (314) 353-9552	Alzheimer's Unit	No
SAINT LOUIS MO 63111-2834	Level of Care RCF*	Bed Capacity	34
Mailing Address PO BOX 37073	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63141-1573	Region 7	Facility Number	01058
CARRIE ELLIGSON GIETNER HOME			
5000 SOUTH BROADWAY	Telephone (314) 752-0000	Alzheimer's Unit	No
SAINT LOUIS MO 63111-2015	Level of Care SNF	Bed Capacity	130
Mailing Address 5000 S BROADWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63111-2015	Region ⁷ Medicare/Medicaid	Facility Number	02877
CENTRAL RESIDENCE CNSL OPERATION LLC			
5143 WATERMAN BLVD	Telephone (314) 367-5620	Alzheimer's Unit	No
SAINT LOUIS MO 63108-1103	Level of Care RCF*	Bed Capacity	41
Mailing Address 5143 WATERMAN BLVD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63108-1103	Region 7	Facility Number	02785
SAIA 19015 MO 05106-1105	Region /	Facility rulliber	02783
CHATEAU ANN MARIE			
7700 MINNESOTA AVE	Telephone (314) 449-1497	Alzheimer's Unit	No
SAINT LOUIS MO 63111-3336	Level of Care ALF	Bed Capacity	22
Mailing Address 7700 MININESOTA AVE	County SAINT LOUIS CITY	DMILLY 1	¥7
Mailing Address 7700 MINNESOTA AVE SAINT LOUIS MO 63111-3336	County SAINT LOUIS CITY Region 7	DMH Licensed Facility Number	Yes 14711

CHEROKEE RESIDENTIAL CARE	ACQUISITION, LLC			
3409 MISSOURI AVE	2 <i>i</i>	Telephone (314) 771-8360	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-3236	Level of Care RCF*	Bed Capacity	34
Mailing Address 3409 MISSOURI AV	E	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63118-3236	Region 7	Facility Number	14047
COOPER HOUSE				
4385 MARYLAND AVE		Telephone (314) 535-1919	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2703	Level of Care RCF*	Bed Capacity	36
Mailing Address 4385 MARYLAND A	AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2703	Region 7	Facility Number	21439
DELHAVEN MANOR				
5460 DELMAR BLVD		Telephone (314) 361-2902	Alzheimer's Unit	No
SAINT LOUIS	MO 63112-3104	Level of Care SNF	Bed Capacity	156
Mailing Address 5460 DELMAR BLV	D	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63112-3104	Region 7 Medicare/Medicaid	Facility Number	02089
DUTCHTOWN CARE CENTER				
3421 GASCONADE ST		Telephone (314) 832-4700	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-4201	Level of Care SNF	Bed Capacity	120
Mailing Address 3421 GASCONADE	ST	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63118-4201	Region 7 Medicare/Medicaid	Facility Number	21455
GRAND MANOR NURSING & REH	ABILITATION CENTER			
3645 COOK AVE		Telephone (314) 531-2352	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-3801	Level of Care SNF	Bed Capacity	120
Mailing Address 3645 COOK AVE	NO. (2112.2001	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63113-3801	Region 7 Medicare/Medicaid	Facility Number	13324
HILLSIDE REHAB AND HEALTHC	ARE CENTER			
1265 MCLARAN AVE		Telephone (314) 388-4121	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63147-1606	Level of Care SNF	Bed Capacity	208
Mailing Address 1265 MCLARAN AV		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63147-1606	Region 7 Medicare/Medicaid	Facility Number	04687
			·	
HOLLY HILLS RETIREMENT HON	ИЕ			
6421 MINNESOTA		Telephone (314) 351-0767	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2808	Level of Care RCF*	Bed Capacity	15
Mailing Address 6421 MINNESOTA		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63111-2808	Region 7	Facility Number	03678

KASEY PAIGE HEALTH CARE CENTER

3715 JAMIESON AVE		
SAINT LOUIS	MO	63109-1109
Mailing Address 3715 JAMIESON AVE	1	
SAINT LOUIS	MO	63109-1109

Telephone(314) 781-0222Alzheimer's UnitNoLevel of CareRCFBed Capacity111CountySAINT LOUIS CITYDMH LicensedYesRegion 7Facility Number04650

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

LANSDOWNE VILLAGE			
4624 LANSDOWNE AVE	Telephone (314) 351-6888	Alzheimer's Unit	No
SAINT LOUIS MO 63116-1523	Level of Care SNF	Bed Capacity	145
Moling Address 4624 LANSDOWNE AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63116-1523	Region 7 Medicare/Medicaid	Facility Number	14557
SAINI LOUIS MO 05110-1525	Region / Medicare/Medicald	Facility Number	14557
LIFE CARE CENTER OF ST LOUIS			
3520 CHOUTEAU AVE	Telephone (314) 771-2100	Alzheimer's Unit	No
SAINT LOUIS MO 63103-2916	Level of Care SNF	Bed Capacity	100
Mailing Address 3520 CHOUTEAU AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63103-2916	Region 7 Medicare/Medicaid	Facility Number	19823
LINDEN MANOR CNSL OPERATION LLC			
4336 LINDELL BLVD	Telephone (314) 652-4828	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2702	Level of Care RCF*	Bed Capacity	20
Mailing Address PO BOX 525	County SAINT LOUIS CITY	DMH Licensed	Yes
CUBA MO 65453-	Region 7	Facility Number	10470
	Region /	Facility Rumber	10470
LIVING LIFE LONG RESIDENTIAL CARE, LLC			
5076 WATERMAN	Telephone (314) 495-5498	Alzheimer's Unit	No
SAINT LOUIS MO 63108-1102	Level of Care RCF	Bed Capacity	20
Mailing Address 303 UNION BLVD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63108-4400	Region 7	Facility Number	05212
NEWSTEAD PLACE			
19 NORTH NEWSTEAD	Telephone (314) 286-4510	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2260	Level of Care RCF*	Bed Capacity	20
Mailing Address 19 N NEWSTEAD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63108-2260	Region 7	Facility Number	19169
OAK PARK CARE CENTER			
6637 BERTHOLD AVE	Telephone (314) 781-3444	Alzheimer's Unit	No
SAINT LOUIS MO 63139-3318	Level of Care SNF	Bed Capacity	120
Mailing Address 6637 BERTHOLD AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63139-3318	Region 7 Medicare/Medicaid	Facility Number	05914
OASIS RESIDENTIAL CARE FACILITY			
3508 PRAIRIE AVE	Telephone (314) 534-3355	Alzheimer's Unit	No
SAINT LOUIS MO 63107-2214	Level of Care RCF*	Bed Capacity	20
Mailing Address 3508 PRAIRIE AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63107-2214	Region 7	Facility Number	15415
PROVISION OF PROMISE			
4528 NORTH MARKET ST	Telephone (314) 535-5509	Alzheimer's Unit	No
SAINT LOUIS MO 63113-2113	Level of Care RCF	Bed Capacity	20
Mailing Address 4528 NORTH MARKET ST	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63113-2113	Region 7	Facility Number	17937

SILVER SPUR			
3300 TEXAS AVE	Telephone (314) 773-3408	Alzheimer's Unit	No
SAINT LOUIS MO 63118-3111	Level of Care ALF	Bed Capacity	37
Mailing Address 3300 TEXAS AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63118-3111	Region 7	Facility Number	00185
		·	
SMILEY MANOR LLC			
5415 THEKLA AVE	Telephone (314) 932-1360	Alzheimer's Unit	No
SAINT LOUIS MO 63120-2513	Level of Care RCF	Bed Capacity	20
Mailing Address 5415 THEKLA AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63120-2513	Region 7	Facility Number	04078
SMILEY MANOR WEST, LLC			
1119 GOODFELLOW BLVD	Telephone (314) 833-3238	Alzheimer's Unit	No
SAINT LOUIS MO 63112-2513	Level of Care RCF	Bed Capacity	27
Mailing Address 1119 GOODFELLOW BLVD	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63112-2513	Region 7	Facility Number	31147
SPRING MANOR			
3610 PALM ST	Telephone (314) 533-3111	Alzheimer's Unit	No
SAINT LOUIS MO 63107-2505	Level of Care ALF**	Bed Capacity	94
Mailing Address 3610 PALM ST	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63107-2505	Region 7	Facility Number	28552
ST ELIZABETH HALL			
325 NORTH NEWSTEAD AVE	Telephone (314) 652-9525	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2707	Level of Care ALF**	Bed Capacity	50
Mailing Address 325 N NEWSTEAD AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63108-2707	Region 7	Facility Number	07516
	8	•	
ST LOUIS ALTENHEIM			
5408 SOUTH BROADWAY	Telephone (314) 353-7225	Alzheimer's Unit	Yes
SAINT LOUIS MO 63111-2023	Level of Care ALF**	Bed Capacity	23
Mailing Address 5408 SOUTH BROADWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63111-2023	Region 7	Facility Number	07585
ST LOUIS ALTENHEIM			
5408 SOUTH BROADWAY	Telephone (314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS MO 63111-2023	Level of Care SNF	Bed Capacity	48
Mailing Address 5408 SOUTH BROADWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63111-2023	Region 7 Medicaid	Facility Number	07585
ST LOUIS HILLS ASSISTED LIVING AND MEMORY CARE			
6543 CHIPPEWA ST	Telephone (314) 647-6600	Alzheimer's Unit	Yes
SAINT LOUIS MO 63109-4100	Level of Care ALF**	Bed Capacity	181
Mailing Address 6543 CHIPPEWA ST	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63109-4100	Region 7	Facility Number	07594
	-		

SUPERIOR MANOR OF DOW	VNTOWN, LLC			
1501 CLINTON STREET		Telephone (314) 921-2625	Alzheimer's Unit	No
SAINT LOUIS	MO 63106-4100	Level of Care RCF	Bed Capacity	40
Mailing Address 1501 CLINTO	'N STREET	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63106-4100	Region 7	Facility Number	30136
UNION MANOR, LLC				
2711 NORTH UNION BLVD		Telephone (314) 383-7310	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-1003	Level of Care RCF*	Bed Capacity	50
Mailing Address 2711 NORTH	UNION BLVD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63113-1003	Region 7	Facility Number	11002
WEST PINE GROUP HOME				
4232 WEST PINE BLVD		Telephone (314) 531-9450	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2840	Level of Care RCF	Bed Capacity	9
Mailing Address 4232 WEST P	INE BLVD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2840	Region 7	Facility Number	05948
	SAINT	LOUIS COUNTY		

	Telephone	(314) 909-6000
MO 63122-5536	Level of Care	AI F**

KIRKWOOD Mailing Address 505 COUCH AVE KIRKWOOD	MO 63122-5536 MO 63122-5536	Level of Care ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number	36 No 27570
ABERDEEN HEIGHTS 505 COUCH AVE		Telephone (314) 909-6000	Alzheimer's Unit	Yes
KIRKWOOD	MO 63122-5536	Level of Care ICF	Bed Capacity	16
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ABERDEEN HEIGHTS 505 COUCH AVE KIRKWOOD Mailing Address 505 COUCH AVE KIRKWOOD	MO 63122-5536 MO 63122-5536	Telephone(314) 909-6000Level of CareSNFCountySAINT LOUIS COUNTYRegion7Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 38 No 27570
ACKERT PARK SKILLED NURSIN	G & REHABILITATION CENTER			
894 LELAND AVE		Telephone (314) 726-4767	Alzheimer's Unit	No
UNIVERSITY CITY	MO 63130-3239	Level of Care SNF	Bed Capacity	130

UNIVERSITY CITY MO 63130-3239 Level of Care SNF Bed Capacity 130 Mailing Address 894 LELAND AVE SAINT LOUIS COUNTY County DMH Licensed No UNIVERSITY CITY MO 63130-3239 **Facility Number** 02100 Region 7 Medicare/Medicaid **AEGIS HEALTH AND REHABILITATION** 1441 CHARIC DR Alzheimer's Unit Telephone (636) 394-2522 No WILDWOOD MO 63021-2001 Level of Care SNF **Bed Capacity** 66 Mailing Address 1441 CHARIC DR County SAINT LOUIS COUNTY **DMH Licensed** No WILDWOOD MO 63021-2001 **Facility Number** Region 7 17887 Medicare/Medicaid

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

ABERDEEN HEIGHTS 505 COUCH AVE

Alzheimer's Unit

No

ALLEGRO					
ALLEGRO 1055 BELLEVUE AVENUE		Telephone	(314) 332-8372	Alzheimer's Unit	Yes
	IO 63117-1827	Level of Care	(314) 332-8372 ALF**		88
				Bed Capacity	
Mailing Address 1055 BELLEVUE AVEN		•	NT LOUIS COUNTY	DMH Licensed	No
RICHMOND HEIGHTS M	10 63117-1827	Region 7		Facility Number	31437
AMBERWOOD ESTATES NURSING AN	ND REHABILITATION				
5303 BERMUDA DR		Telephone	(314) 385-0910	Alzheimer's Unit	NO
NORMANDY M	IO 63121-1407	Level of Care	SNF	Bed Capacity	115
Mailing Address 5303 BERMUDA DR			NT LOUIS COUNTY	DMH Licensed	No
_	IO 63121-1407	ĩ	Medicare/Medicaid	Facility Number	01238
APPLEGATE RH CNSL OPERATION L	LC				
1204 TELEGRAPH RD		Telephone	(314) 631-2003	Alzheimer's Unit	No
SAINT LOUIS M	IO 63125-2528	Level of Care	RCF*	Bed Capacity	38
Mailing Address 1204 TELEGRAPH RD			NT LOUIS COUNTY	DMH Licensed	Yes
•	IO 63125-2528	Region 7		Facility Number	14409
		Region			11102
ARBOR HILLS NURSING AND REHAB	BILITATION CENTER				
800 CHAMBERS RD		Telephone	(314) 524-1111	Alzheimer's Unit	No
FERGUSON M	IO 63135-2133	Level of Care	SNF	Bed Capacity	150
Mailing Address 800 CHAMBERS RD		County SAI	NT LOUIS COUNTY	DMH Licensed	No
FERGUSON M	10 63135-2133	Region 7 N	Medicare/Medicaid	Facility Number	01435
ARBOR HILLS NURSING AND REHAB	BILITATION CENTER				
800 CHAMBERS RD		Telephone	(314) 524-1111	Alzheimer's Unit	No
	IO 63135-2133	Level of Care	ALF**	Bed Capacity	28
Mailing Address 800 CHAMBERS RD	10 00100 2100		NT LOUIS COUNTY	DMH Licensed	No
	IO 63135-2133	Region 7		Facility Number	01435
ASCENSION LIVING SHERBROOKE V	ILLAGE				
4005 RIPA AVE		Telephone	(314) 544-1111	Alzheimer's Unit	Yes
SAINT LOUIS M	IO 63125-2378	Level of Care	SNF	Bed Capacity	149
Mailing Address 4005 RIPA AVE		County SAI	NT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS M	IO 63125-2378	Region 7 N	Medicare/Medicaid	Facility Number	15436
ASCENSION LIVING SHERBROOKE V	/ILLAGE				
4005 RIPA AVE		Telephone	(314) 544-1111	Alzheimer's Unit	YES
	IO 63125-2378	Level of Care	ALF**	Bed Capacity	88
Mailing Address 4005 RIPA AVE			NT LOUIS COUNTY	DMH Licensed	No
	IO 63125-2378	Region 7		Facility Number	15436
		AUGIUII /		r activy ramiber	15450
ASSISTED LIVING AT CHARLESS VIL	LAGE				
5943 TELEGRAPH RD		Telephone	(314) 846-2002	Alzheimer's Unit	No
SAINT LOUIS M	IO 63129-4715	Level of Care	ALF**	Bed Capacity	18
Mailing Address 5943 TELEGRAPH RD		County SAI	NT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS M	IO 63129-4715	Region 7		Facility Number	05586

 13995 CLAYTON RD
 MO
 63017-8400

 TOWN AND COUNTRY
 MO
 63017-8400

 TOWN AND COUNTRY
 MO
 63017-8400

ATRIUM PLACE HEALTH AND REHABILITATION

2600 REDMAN RD		
SAINT LOUIS	MO	63136-5863
Mailing Address 2600 REDMAN RD		
SAINT LOUIS	MO	63136-5863

AUTUMN VIEW GARDENS

16219 AUTUMN VIEW TERRACE DR		
ELLISVILLE	MO	63011-4743
Mailing Address 16219 AUTUMN VIEW	W TEI	RRACE DR
ELLISVILLE	MO	63011-4743

AUTUMN VIEW GARDENS AT SCHUETZ ROAD

11210 SCHUETZ RD		
SAINT LOUIS	MO	63146-4933
Mailing Address 11210 SCHUETZ RD		
SAINT LOUIS	MO	63146-4933

AVALON MEMORY CARE

5342 BUTLER HILL ROAD		
SAINT LOUIS	MO	63128-4152
Mailing Address 5342 BUTLER HILL F	ROAD	
SAINT LOUIS	MO	63128-4152

BARNES-JEWISH EXTENDED CARE

401 CORPORATE PARK DR		
SAINT LOUIS	MO	63105-4201
Mailing Address 401 CORPORATE PA	RK D	R
SAINT LOUIS	MO	63105-4201

BELLEFONTAINE GARDENS NURSING & REHAB

9500 BELLEFONTAINE RD SAINT LOUIS MO 63137-1336 **Mailing Address** 9500 BELLEFONTAINE K SAINT LOUIS MO 63137-1336

BENTLEYS EXTENDED CARE

3060 ASHBY ROAD		
OVERLAND	MO	63114-1342
Mailing Address 3060 ASHBY RD		
OVERLAND	MO	63114-1342

Telephone	(636) 227-5070	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	282
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	01508

Telephone	(314) 355-8585	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	120
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	Iedicare/Medicaid	Facility Number	18697

Telephone	(636) 458-5225	Alzheimer's Unit	Yes
Level of Care	ALF**	Bed Capacity	150
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	20751

Telephone (314) 993-98	88 Alzheimer's Unit Y	les
Level of Care ALF**	Bed Capacity 1	10
County SAINT LOUIS C	DUNTY DMH Licensed	No
Region 7	Facility Number229	09

Telephone (314) 849-2985	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	30
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	30425

Telephone	(314) 725-7447	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	120
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	Medicare/Medicaid	Facility Number	15878

TEMPORARY CLOSURE - STAFFING

Telephone	(314) 388-0796	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	96
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	02598

Telephone	(314) 426-0433	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	72
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	22613

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

BENTWOOD NURSING & REHAB

1501 CHARBONIER RDMO63031-5308FLORISSANTMO63031-5308FLORISSANTMO63031-5308

BETHESDA DILWORTH

9645 BIG BEND BLVD SAINT LOUIS MO 63122-6521 **Mailing Address** 9645 BIG BEND BLV SAINT LOUIS MO 63122-6521

BETHESDA HAWTHORNE PLACE 1111 SOUTH BERRY ROAD SAINT LOUIS MO 63122-6598 Mailing Address 1111 SOUTH BERRY ROAD SAINT LOUIS MO 63122-6598

BETHESDA MEADOW

322 OLD STATE ROAD			
ELLISVILLE	MO	63021-5917	
Mailing Address 322 OLD STATE ROAD			
ELLISVILLE	MO	63021-5917	

BETHESDA SOUTHGATE

5943 TELEGRAPH RD			
SAINT LOUIS	MO	63129-4715	
Mailing Address 5943 TELEGRAPH RD			
SAINT LOUIS	MO	63129-4715	

BIG BEND WOODS HEALTHCARE CENTER

110 HIGHLAND AVE		
VALLEY PARK	MO	63088-1422
Mailing Address 110 HIGHLAND AVE		
VALLEY PARK	MO	63088-1422

BOARDING INN, THE

9444 MIDLAND BLVD				
OVERLAND	MO	63114-3328		
Mailing Address 9444 MIDLAND BLVD				
OVERLAND	MO	63114-3328		

BRENTMOOR RETIREMENT COMMUNITY

8600 DELMAR BLVD				
SAINT LOUIS	MO	63124-1973		
Mailing Address 8600 DELMAR BLVD				
SAINT LOUIS	MO	63124-1973		

Telephone	(314) 921-2700	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	116
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	14817

Telephone	(314) 968-5460	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	400
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	ledicare/Medicaid	Facility Number	00508

Telephone (314) 942-5750	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	66
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	30509

Telephone	(636) 227-3431	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	210
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Medicare/Medicaid	Facility Number	15226

Telephone	(314) 846-2000	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	192
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	fedicare/Medicaid	Facility Number	05586

Telephone	(636) 529-8300	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	135
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	Aedicare/Medicaid	Facility Number	01170

Telephone	(314) 426-0091	Alzheimer's Unit	No
Level of Care	RCF	Bed Capacity	40
County SAI	NT LOUIS COUNTY	DMH Licensed	Yes
Region 7		Facility Number	00709

Telephone	(314) 995-3811	Alzheimer's Unit	No
Level of Care	ALF**	Bed Capacity	36
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	19968

BROOKDALE CREVE COEUR					
ONE NEW BALLAS PLACE		Telephone	(314) 432-5200	Alzheimer's Unit	No
CREVE COEUR	MO 63146-8700	Level of Care	ALF**	Bed Capacity	46
Mailing Address ONE NEW BALLAS	PLACE	County SA	INT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63146-8700	Region 7		Facility Number	26178
BROOKDALE WEST COUNTY					
785 HENRY AVE		Telephone	(636) 527-5700	Alzheimer's Unit	Yes
	10 (2011 272)		A T Think		00

BALLWIN	MO 63011-2736
Mailing Address 785 HENRY AVE	
BALLWIN	MO 63011-2736

BROOKING PARK			
307 SOUTH WOODS MILL RD			
CHESTERFIELD	MO 63017-3418		
Mailing Address 307 SOUTH WOODS MILL RD			
CHESTERFIELD	MO 63017-3418		

BROOKING PARK 307 SOUTH WOODS MILL RD CHESTERFIELD MO 6 Mailing Address 307 SOUTH WOODS MILL R CHESTERFIELD MO 6

CAPE ALBEON				
3300 LAKE BEND DR		Telephone (636) 861-3200	Alzheimer's Unit	Y
VALLEY PARK	MO 63088-2524	Level of Care ALF**	Bed Capacity	1
Mailing Address 3300 LAKE H	BEND DR	County SAINT LOUIS COUNTY	DMH Licensed	
VALLEY PARK	MO 63088-2524	Region 7	Facility Number	228

CEDARHURST OF DES PERES 12826 DAYLIGHT CIRCLE SAINT LOUIS MO 6 Mailing Address 12826 DAYLIGHT CIRCLE SAINT LOUIS MO 63

CEDARHURST OF TESSON HEIGHTS

12335 WEST BEND DR SAINT LOUIS MO 63 Mailing Address 12335 WEST BEND DR SAINT LOUIS MO 6

CHESTERFIELD VILLAS

14901 N OUTER 40 RD				
CHESTERFIELD	MO	63017-6034		
Mailing Address 14901 N OUTER 40 RD				
CHESTERFIELD	MO	63017-6034		

63146-8700	Region 7	Facility Number	No 26178
	Telephone (636) 527-5700	Alzheimer's Unit	Yes
63011-2736	Level of Care ALF**	Bed Capacity	98
	County SAINT LOUIS COUNTY	DMH Licensed	No
63011-2736	Region 7	Facility Number	28149
	Talashana (214) 576 5545	A 1-b	V
63017-3418	Telephone (314) 576-5545 Level of Care ALF**	Alzheimer's Unit Bed Capacity	Yes 93
RD	County SAINT LOUIS COUNTY	DMH Licensed	95 No
63017-3418	Region 7	Facility Number	14661
	Telephone (314) 576-5545	Alzheimer's Unit	No
63017-3418	Level of Care SNF	Bed Capacity	97
RD	County SAINT LOUIS COUNTY	DMH Licensed	No
63017-3418	Region 7 Medicare/Medicaid	Facility Number	14661
	Telephone (636) 861-3200	Alzheimer's Unit	Yes
63088-2524	Level of Care ALF**	Bed Capacity	100
<2000.0524	County SAINT LOUIS COUNTY	DMH Licensed	No
63088-2524	Region 7	Facility Number	22838
	Telephone (314) 916-6614	Alzheimer's Unit	Yes
63131-1890	Level of Care ALF**	Bed Capacity	76
	County SAINT LOUIS COUNTY	DMH Licensed	No
63131-1890	Region 7	Facility Number	30351
	Telephone (314) 849-1366	Alzheimer's Unit	No
63128-2160	Level of Care ALF**	Bed Capacity	79
	County SAINT LOUIS COUNTY	DMH Licensed	No
63128-2160	Region 7	Facility Number	13663
	Talanhana (626) 522 0206	Alzheimer's Unit	No
63017-6034	Telephone (636) 532-9296 Level of Care ALF	Alzheimer's Unit Bed Capacity	No 54
03017-003 1	County SAINT LOUIS COUNTY	DMH Licensed	J4 No
63017-6034	Region 7	Facility Number	29067
	.0.	-	

CHESTNUT REHAB AND NURSING

10954 KENNERLY RD SAINT LOUIS MO 63128-2018 Mailing Address 10954 KENNERLY RD SAINT LOUIS MO 63128-2018

CHRISTIAN EXTENDED CARE & REHABILITATION

11160 VILLAGE NORTH DR SAINT LOUIS MO 63136-6159 Mailing Address 11160 VILLAGE NORTH DR SAINT LOUIS MO 63136-6159

CLARENDALE CLAYTON

7651 CLAYTON ROAD				
CLAYTON	MO	63117-1419		
Mailing Address 7651 CLAYTON ROAD				
CLAYTON	MO	63117-1419		

COMMUNITY CARE CENTER OF LEMAY, INC

9353 SOUTH BROADWAY		Telephone	(314) 631-0540	Alzheimer's Unit	N
SAINT LOUIS	MO 63125-1600	Level of Care	SNF	Bed Capacity	e
Mailing Address 9353 SOUTH BROAD	DWAY	County SAI	INT LOUIS COUNTY	DMH Licensed	Ν
SAINT LOUIS	MO 63125-1600	Region 7	Medicare/Medicaid	Facility Number	0173

CONVERSE HOME

17025 OLD JAMESTOWN RD		Telephone	(314) 355-8041	Alzheimer's Unit	No
FLORISSANT	MO 63034-1414	Level of Care	RCF	Bed Capacity	12
Mailing Address 17025 OLD JAMEST	'OWN RD	County SA	INT LOUIS COUNTY	DMH Licensed	Yes
FLORISSANT	MO 63034-1414	Region 7		Facility Number	01777

CRESTWOOD HEALTH CARE CENTER, LLC

11400 MEHL AVE		Telephone	(314) 741-3525	Alzheimer's Unit	No
FLORISSANT	MO 63033-7204	Level of Care	SNF	Bed Capacity	150
Mailing Address 11400 MEHL AVE		County SAIN	NT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-7204	Region 7 M	Iedicare/Medicaid	Facility Number	14296

CREVE COEUR ASSISTED LIVING AND MEMORY CARE

693 DECKER LN		Telephone	(314) 997-4532	Alzheimer's
CREVE COEUR	MO 63141-7127	Level of Care	ALF**	Bed Capacity
Mailing Address 693 DECKER LANE		County SA	INT LOUIS COUNTY	DMH Licens
CREVE COEUR	MO 63141-7127	Region 7		Facility Num
CREVE COEUR MANOR				
			(21.4) 42.4 92.61	
1127 TIMBER RUN DR		Telephone	(314) 434-8361	Alzheimer's

112/ HIVIDER KUN DR				
SAINT LOUIS	MO	63146-4482		
Mailing Address 1127 TIMBER RUN DR				
SAINT LOUIS	MO	63146-4482		

Telephone	(314) 843-4242	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	167
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	Aedicare/Medicaid	Facility Number	03182

Telephone	(314) 355-8010	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	60
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Aedicare/Medicaid	Facility Number	08300

Telephone (314) 390-9399	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	98
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	32528

(314) 631-0540	Alzheimer's Unit	No
SNF	Bed Capacity	60
NT LOUIS COUNTY	DMH Licensed	No
ledicare/Medicaid	Facility Number	01732
	· /	SNFBed CapacityNT LOUIS COUNTYDMH Licensed

Telephone	(314) 741-3525	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	150
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	ledicare/Medicaid	Facility Number	14296

Telephone (314) 997-4532	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	110
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	29440

Telephone	(314) 434-8361	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	149
County SAI	INT LOUIS COUNTY	DMH Licensed	No
Region 7	Medicare/Medicaid	Facility Number	02417

CRYSTAL CREEK HEALTH AND REHABILITATION CENTER

250 NEW FLORISSANT RD SOUTHFLORISSANTMO63031-6716Mailing Address250 NEW FLORISSANT RD SOUTHFLORISSANTMO63031-6716

DELMAR GARDENS NORTH

 4401 PARKER ROAD
 MO
 63033-4266

 BLACK JACK
 MO
 63033-4266

 BLACK JACK
 MO
 63033-4266

DELMAR GARDENS OF CHESTERFIELD

14855 NORTH OUTER 40 RD		
CHESTERFIELD	MO	63017-2026
Mailing Address 14855 NORTH OUTER 40 RD		
CHESTERFIELD	MO	63017-2026

DELMAR GARDENS OF CREVE COEUR

850 COUNTRY MANOR LN	
CREVE COEUR	MO 63141-6651
Mailing Address 850 COUNTRY MAN	OR LN
CREVE COEUR	MO 63141-6651

DELMAR GARDENS OF MERAMEC VALLEY

1 ARBOR TERRACE		
FENTON	MO	63026-3900
Mailing Address 1 ARBOR TERRACE		
FENTON	MO	63026-3900

DELMAR GARDENS ON THE GREEN

15197 CLAYTON RD		
CHESTERFIELD	MO	63017-7048
Mailing Address 15197 CLAYTON RD		
CHESTERFIELD	MO	63017-7048

DELMAR GARDENS SOUTH

5300 BUTLER HILL ROAD SAINT LOUIS MO 63128-4152 Mailing Address 5300 BUTLER HILL RD SAINT LOUIS MO 63128-4152

DELMAR GARDENS WEST

13550 SOUTH OUTER 40 RD		
TOWN AND COUNTRY	MO 63017-5812	
Mailing Address 13550 SOUTH OUTER 40 RD		
TOWN AND COUNTRY	MO 63017-5812	

Telephone	(314) 838-2211	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	158
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	05782

Telephone	(314) 355-1516	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	240
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	ledicare/Medicaid	Facility Number	14093

Telephone	(636) 532-0150	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	237
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Aedicare/Medicaid	Facility Number	02111

Telephone	(314) 434-5900	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	148
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Medicare/Medicaid	Facility Number	01830

Telephone	(636) 343-0016	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	190
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	ledicare/Medicaid	Facility Number	13468

Telephone	(636) 394-7515	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	180
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Aedicare/Medicaid	Facility Number	01515

Telephone	(314) 842-0588	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	250
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	ledicare/Medicaid	Facility Number	12909

Telephone	(314) 878-1330	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	321
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	Medicare/Medicaid	Facility Number	02120

DOLAN MEMORY CARE AT CALA	IS		
1225 TENNANT RD		Telephone (314) 993-9500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-5523	Level of Care ALF**	Bed Capacity 44
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-	Region 7	Facility Number 27755
		0	
DOLAN MEMORY CARE AT CONW	VAY		
12550 CONWAY RD		Telephone (314) 576-3998	Alzheimer's Unit Yes
CREVE COEUR	MO 63141-8613	Level of Care ALF**	Bed Capacity 9
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
ST LOUIS	MO 63146-	Region 7	Facility Number22648
DOLAN MEMORY CARE AT FRON	TIER		
11566 FRONTIER DR		Telephone (314) 995-5331	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-4873	Level of Care ALF**	Bed Capacity 20
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
ST LOUIS	MO 63146-	Region 7	Facility Number25162
DOLAN MEMORY CARE AT MASO	N MANOR		
12740 MASON MANOR		Telephone (314) 576-6200	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-7350	Level of Care ALF**	Bed Capacity 8
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-	Region 7	Facility Number 19861
DOLAN MEMORY CARE AT SCHU 1706 SCHUETZ RD SAINT LOUIS	ETZ MO 63146-4931	Telephone (314) 989-1782 Level of Care ALF**	Alzheimer's UnitYesBed Capacity10
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-	Region 7	Facility Number23805
DOLAN MEMORY CARE AT WATE	CRFORD CROSSING		
11350 DOLAN WAY		Telephone (314) 993-9500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-5533	Level of Care ALF**	Bed Capacity 88
Mailing Address 11300 DOLAN WAY		County SAINT LOUIS COUNTY	DMH Licensed No
ST LOUIS	MO 63006-	Region 7	Facility Number31366
DOUGHERTY FERRY ASSISTED LI 2929 DOUGHERTY FERRY RD	IVING & MEMORY CARE	Telephone (636) 825-6665	Alzheimer's Unit Yes
SAINT LOUIS	MO 63122-3368	Level of Care ALF**	Bed Capacity 110
Mailing Address 2929 DOUGHERTY F	FERRY RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63122-3368	Region 7	Facility Number30034
DUNN-DUNN HOUSE LLC			
2133 JANNETTE DR		Telephone (314) 869-2431	Alzheimer's Unit No
SAINT LOUIS	MO 63136-4020	Level of Care RCF	Bed Capacity 10
Mailing Address 2133 JANNETTE DR		County SAINT LOUIS COUNTY	DMH Licensed Yes
SAINT LOUIS	MO 63136-4020	Region 7	Facility Number 14694

ELIZABETH HOUSE		
12284 DE PAUL DR	Telephone (314) 209-8814	Alzheimer's Unit No
BRIDGETON MO 63044-2508	Level of Care SNF	Bed Capacity 36
Mailing Address 12284 DE PAUL DR	County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON MO 63044-2508	Region 7	Facility Number22316
ESTATES OF HIDDEN LAKE THE		
11728 HIDDEN LAKE DR	Telephone (314) 355-8833	Alzheimer's Unit No
SAINT LOUIS MO 63138-1757	Level of Care ALF**	Bed Capacity 38
Mailing Address 11728 HIDDEN LAKE DR	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS MO 63138-1757	Region 7	Facility Number18442
ESTATES OF HIDDEN LAKE THE		
11728 HIDDEN LAKE DR	Telephone (314) 355-8833	Alzheimer's Unit No
SAINT LOUIS MO 63138-1757	Level of Care SNF	Bed Capacity 67
Mailing Address 11728 HIDDEN LAKE DR	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS MO 63138-1757	Region 7 Medicare/Medicaid	Facility Number18442
ECTATES OF HIDDEN LAZE THE		
ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR	Telephone (314) 355-8833	Alzheimer's Unit No
SAINT LOUIS MO 63138-1757	Level of Care ALF	Bed Capacity 38
Mailing Address 11728 HIDDEN LAKE DR	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS MO 63138-1757	Region 7	Facility Number18442
SAINT LOOIS NO 03130-1737	Kegion /	Facinty Number 16442
ESTATES OF SPANISH LAKE, THE		
610 PRIGGE ROAD	Telephone (314) 741-9393	Alzheimer's Unit No
SAINT LOUIS MO 63138-3543	Level of Care SNF	Bed Capacity 150
Mailing Address 610 PRIGGE ROAD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS MO 63138-3543	Region 7 Medicare/Medicaid	Facility Number 15265
ESTATES OF ST LOUIS, LLC, THE		
2115 KAPPEL DR	Telephone (314) 867-7474	Alzheimer's Unit No
SAINT LOUIS MO 63136-4115	Level of Care SNF	Bed Capacity 94
Mailing Address 2115 KAPPEL DR	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS MO 63136-4115	Region 7 Medicare/Medicaid	Facility Number05340
FAIRMONT ON CLAYTON		
7920 CLAYTON ROAD	Telephone (314) 646-7600	Alzheimer's Unit Yes
RICHMOND HEIGHTS MO 63117-1327	Level of Care ICF	Bed Capacity 90
Mailing Address 7920 CLAYTON ROAD	County SAINT LOUIS COUNTY	DMH Licensed No
RICHMOND HEIGHTS MO 63117-1327	Region 7	Facility Number24149
MO 05117-1527	ACZIVII /	24149 24149
FAMILY PARTNERS MANCHESTER, LLC		
351 FOREST SUMMIT COURT	Telephone (314) 686-4468	Alzheimer's Unit Yes
MANCHESTER MO 63021-5509	Level of Care ALF**	Bed Capacity 42
Mailing Address 351 FOREST SUMMIT COURT	County SAINT LOUIS COUNTY	DMH Licensed No
MANCHESTER MO 63021-5509	Region 7	Facility Number32473

FIESER NURSING CENTER				
404 MAIN ST		Telephone (636) 343-4344	Alzheimer's Unit	No
FENTON	MO 63026-4107	Level of Care SNF	Bed Capacity	60
Mailing Address 404 MAIN ST		County SAINT LOUIS COUNTY	DMH Licensed	No
FENTON	MO 63026-4107	Region 7 Medicaid	Facility Number	02569
FLORISSANT VALLEY HEALTH &	& REHABILITATION CENTER			
1200 GRAHAM RD		Telephone (314) 838-6555	Alzheimer's Unit	No
FLORISSANT	MO 63031-8015	Level of Care SNF	Bed Capacity	98
Mailing Address 1200 GRAHAM RD		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63031-8015	Region 7 Medicare/Medicaid	Facility Number	00154
FOUNTAINS OF WEST COUNTY A	L, LLC THE			
15822 CLAYTON RD		Telephone (636) 220-1660	Alzheimer's Unit	Yes
ELLISVILLE	MO 63011-2240	Level of Care ALF**	Bed Capacity	80
Mailing Address 15822 CLAYTON RI		County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE	MO 63011-2240	Region 7	Facility Number	29435
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE			
15250 VILLAGE VIEW DRIVE		Telephone (636) 733-0199	Alzheimer's Unit	YES
CHESTERFIELD	MO 63017-1982	Level of Care ALF**	Bed Capacity	66
Mailing Address 15250 VILLAGE VIE	EW DRIVE	County SAINT LOUIS COUNTY	DMH Licensed	Yes
CHESTERFIELD	MO 63017-1982	Region 7	Facility Number	02715
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE			
12777 POINTE DR		Telephone (314) 270-7111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63127-1757	Level of Care ALF**	Bed Capacity	84
Mailing Address 12777 POINTE DR		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1757	Region 7	Facility Number	02703
FRIENDSHIP VILLAGE CHESTER 15250 VILLAGE VIEW DRIVE	FIELD	Talaphana (626) 722 0100	Alabaiman'a Unit	No
CHESTERFIELD	MO 63017-1982	Telephone(636) 733-0199Level of CareSNF	Alzheimer's Unit	No 90
*****			Bed Capacity	
Mailing Address 15250 VILLAGE VIE	MO 63017-1982	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 03017-1982	Region 7 Medicare/Medicaid	Facility Number	02715
FRIENDSHIP VILLAGE SUNSET H	IILLS			
12651 VILLAGE CIRCLE DR		Telephone (314) 270-7777	Alzheimer's Unit	No
SAINT LOUIS	MO 63127-1778	Level of Care SNF	Bed Capacity	144
Mailing Address 12651 VILLAGE CIR	RCLE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1778	Region 7 Medicare/Medicaid	Facility Number	02703
GABLES AT BRADY CIRCLE, LLC	СТНЕ			
11 BRADY CIRCLE		Telephone (314) 890-2230	Alzheimer's Unit	No
SAINT LOUIS	MO 63114-1110	Level of Care ALF**	Bed Capacity	32
Mailing Address 11 BRADY CIRCLE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63114-1110	Region 7	Facility Number	30048

GARDEN PLAZA OF FLORISSANT			
1101 GARDEN PLAZA DR	Telephone (314) 831-0988	Alzheimer's Unit Ye	es
FLORISSANT MO 63033-2269	Level of Care ALF**	Bed Capacity 10)2
Mailing Address 1101 GARDEN PLAZA DR	County SAINT LOUIS COUNTY	DMH Licensed N	lo
FLORISSANT MO 63033-2269	Region 7	Facility Number 2782	26
GARDEN VIEW CARE CENTER AT DOUGHERTY FERRY			
13612 BIG BEND RD	Telephone (636) 861-0500	Alzheimer's Unit Ye	es
VALLEY PARK MO 63088-1447	Level of Care SNF	Bed Capacity 12	20
Mailing Address 13612 BIG BEND RD	County SAINT LOUIS COUNTY	DMH Licensed N	lo
VALLEY PARK MO 63088-1447	Region 7 Medicare/Medicaid	Facility Number 2310)1
GARDEN VIEW CARE CENTER OF CHESTERFIELD			
1025 CHESTERFIELD POINTE PRKWY	Telephone (636) 537-3333	Alzheimer's Unit Ye	es
CHESTERFIELD MO 63017-1957	Level of Care SNF	Bed Capacity 13	30
Mailing Address 1025 CHESTERFIELD POINTE PRKWY	County SAINT LOUIS COUNTY	DMH Licensed N	lo
CHESTERFIELD MO 63017-1957	Region 7 Medicare/Medicaid	Facility Number 1640)9
GARDEN VILLAS			
13590 SOUTH OUTER 40 RD	Telephone (314) 434-2520	Alzheimer's Unit N	ю
TOWN AND COUNTRY MO 63017-5823	Level of Care ALF**	Bed Capacity 4	16
Mailing Address 13590 SOUTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed N	lo
TOWN AND COUNTRY MO 63017-5823	Region 7	Facility Number 2897	/8
GARDEN VILLAS NORTH4505 PARKER ROADBLACK JACKMO63033-4268Mailing Address 4505 PARKER RDBLACK JACKMO63033-4268	Telephone(314) 355-6100Level of CareALF**CountySAINT LOUIS COUNTYRegion7	1	90 Jo
GARDEN VILLAS SOUTH			
13457 TESSON FERRY RD	Telephone (314) 843-7788	Alzheimer's Unit N	lo
SAINT LOUIS MO 63128-4010	Level of Care ALF		33
Mailing Address 13457 TESSON FERRY RD	County SAINT LOUIS COUNTY		lo
SAINT LOUIS MO 63128-4010	Region 7	Facility Number 2896	
	0		
GRANDE AT CHESTERFIELD,THE 16300 JUSTUS POST ROAD	$T_{-1} = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =$	Al-baim and That Vo	•
	Telephone (636) 778-4800 Level of Care ALF**	Alzheimer's Unit Ye	es 95
		· · · · · · · · · · · · · · · · · · ·	
Mailing Address 16300 JUSTUS POST ROAD	County SAINT LOUIS COUNTY		NO 10
CHESTERFIELD MO 63017-4608	Region 7	Facility Number3084	•ð
GRANDE AT CREVE COEUR THE			
450 NORTH LINDBERGH BLVD	Telephone (314) 628-0004	Alzheimer's Unit Ye	
CREVE COEUR MO 63141-7814	Level of Care ALF**	1 5	58
Mailing Address 450 NORTH LINDBERGH BLVD	County SAINT LOUIS COUNTY		lo
CREVE COEUR MO 63141-7814	Region 7	Facility Number 3047	9

GRANDE AT LAUMEIER PARK THE

 12470 ROTT ROAD
 MO
 63127-1247

 SUNSET HILLS
 MO
 63127-1247

 SUNSET HILLS
 MO
 63127-1247

GREEN PARK SENIOR LIVIN	NG COMMUNITY
9350 GREEN PARK ROAD	
SAINT LOUIS	MO 63123-72

SAINT LOUISMO63123-7211Mailing Address9350 GREEN PARK RDSAINT LOUISMO63123-7211

HERITAGE CARE CENTER

4401 NORTH HANLEY RD			
SAINT LOUIS	MO	63134-2710	
Mailing Address 4401 NORTH HANLEY RD			
SAINT LOUIS	MO	63134-2710	

JANE HOWELL STUPP APARTMENTS

2443 PROUHET AVE				
OVERLAND	MO	63114-1946		
Mailing Address 2443 PROUHET AVE				
OVERLAND	MO	63114-1946		

KINGSLAND WALK SENIOR LIVING

868 KINGSLAND AVENUE			
UNIVERSITY CITY	MO	63130-3181	
Mailing Address 868 KINGSLAND AVENUE			
UNIVERSITY CITY	MO	63130-3181	

LACLEDE COMMONS

727 S LACLEDE STATION RD			
SAINT LOUIS	MO	63119-4911	
Mailing Address 727 S LACLEDE STATION RD			
SAINT LOUIS	MO	63119-4911	

LAKEVIEW POST ACUTE

1201 GARDEN PLAZA DR			
FLORISSANT	MO	63033-2230	
Mailing Address 1201 GARDEN PLAZA DR			
FLORISSANT	MO	63033-2230	

LIFE CARE CENTER OF BRIDGETON

12145 BRIDGETON SQUARE DR			
BRIDGETON	MO	63044-2616	
Mailing Address 12145 BRIDGETON SQUARE DR			
BRIDGETON	MO	63044-2616	

Telephone	(314) 462-0222	Alzheimer's Unit	Yes
Level of Care	ALF**	Bed Capacity	98
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	30466

Telephone	(314) 845-0900	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	188
County SA	AINT LOUIS COUNTY	DMH Licensed	No
Region 7	Medicare/Medicaid	Facility Number	17565

Telephone (314) 521-7471	Alzheimer's Unit	No
Level of Care SNF	Bed Capacity	120
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7 Medicare/Medicaid	Facility Number	00411

Telephone	(314) 890-7100	Alzheimer's Unit	No
Level of Care	RCF*	Bed Capacity	30
County SAI	NT LOUIS COUNTY	DMH Licensed	Yes
Region 7		Facility Number	18369

Telephone (314) 955-6884	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	70
County SAINT LOUIS COUNT	Y DMH Licensed	No
Region 7	Facility Number	32203

Telephone	(314) 968-5570	Alzheimer's Unit	Yes
Level of Care	ALF**	Bed Capacity	242
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	17713

Telephone	(314) 831-3752	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	120
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	27146

Telephone	(314) 298-7444	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	91
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	12141

LUTHERAN CONVALESCENT HOME

723 SOUTH LACLEDE STATION RD		
WEBSTER GROVES	MO	63119-4911
Mailing Address 723 SOUTH LACLEDE STATION RD		
WEBSTER GROVES	MO	63119-4911

LUTHERAN SENIOR SERVICES AT MERAMEC BLUFFS

50 MERAMEC TRAIL DR		
BALLWIN	MO	63021-3303
Mailing Address 50 MERAMEC TRAIL	DR	
BALLWIN	MO	63021-3303

LUTHERAN SENIOR SERVICES AT MERAMEC BLUFFS

50 MERAMEC TRAIL DR		Telephone (63	536) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care SN	NF	Bed Capacity	128
Mailing Address 50 MERAMEC TRAIL	DR	County SAINT	LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7 Medi	licare/Medicaid	Facility Number	23643

Telephone

County

Region 7

Telephone

County

Level of Care

Level of Care

(314) 968-5570

SAINT LOUIS COUNTY

Medicare/Medicaid

(636) 861-0600

SAINT LOUIS COUNTY

ALF**

SNF

Alzheimer's Unit

Bed Capacity

DMH Licensed

Facility Number

Alzheimer's Unit

Bed Capacity

DMH Licensed

No

286

No

Yes

100

No

04695

MANCHESTER REHAB AND HEALTHCARE CENTER

312 SOLLEY DR		Te
BALLWIN	MO 63021-5248	Le
Mailing Address 312 SOLLEY DR		Co
BALLWIN	MO 63021-5248	Re

MANOR GROVE, INCORPORATED

711 SOUTH KIRKWOOD RD	
KIRKWOOD	MO 63122-5928
Mailing Address 711 SOUTH KIRKWO	OD RD
KIRKWOOD	MO 63122-5928

MARI DE VILLA RETIREMENT CENTER, INC

13900 CLAYTON RD		
TOWN AND COUNTRY	MO	63017-8406
Mailing Address 13900 CLAYTON RD		
TOWN AND COUNTRY	MO	63017-8406

MARK TWAIN MANOR

11988 MARK TWAIN LN		
BRIDGETON	MO	63044-2825
Mailing Address 11988 MARK TWAIN LN		
BRIDGETON	MO	63044-2825

MARY CULVER HOME, THE

221 WEST WASHINGTON AVE		
KIRKWOOD	MO 63122-3916	
Mailing Address 221 W WASHINGTON AVE		
KIRKWOOD	MO 63122-3916	

Region 7		Facility Number	23643
Telephone	(636) 861-0600	Alzheimer's Unit	Yes
Level of Care	SNF	Bed Capacity	128
County SA	AINT LOUIS COUNTY	DMH Licensed	No
Region 7	Medicare/Medicaid	Facility Number	23643
Telephone	(636) 391-0666	Alzheimer's Unit	NO
•	· · · ·		
Lovel of Core	SNE	Red Conseity	137

erephone	(000)0000		
Level of Care	SNF	Bed Capacity	137
County SA	INT LOUIS COUNTY	DMH Licensed	No
Region 7	Medicare/Medicaid	Facility Number	04970

Telephone	(314) 965-0864	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	117
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	fedicare/Medicaid	Facility Number	06038

Telephone	(636) 227-5347	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	224
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	05047

Telephone	(314) 291-8240	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	120
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	08188

Telephone	(314) 966-6034	Alzheimer's Unit	No
Level of Care	ICF	Bed Capacity	28
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	00592

MARY, QUEEN AND MOTHER CE	NTER			
7601 WATSON RD		Telephone (314) 961-8000	Alzheimer's Unit	NO
SHREWSBURY	MO 63119-5001	Level of Care SNF		230
Mailing Address 7601 WATSON RD		County SAINT LOUIS COUNTY	1 5	No
SHREWSBURY	MO 63119-5001	Region 7 Medicare/Medicaid		103
		Region · ficulture ficulture		100
MARYMOUNT MANOR				
313 AUGUSTINE RD		Telephone (636) 938-6770	Alzheimer's Unit	Yes
EUREKA	MO 63025-1935	Level of Care SNF	Bed Capacity	174
Mailing Address PO BOX 600		County SAINT LOUIS COUNTY		No
EUREKA	MO 63025-0600	Region 7 Medicare/Medicaid	Facility Number 05	117
MARYMOUNT MANOR				
313 AUGUSTINE RD		Telephone (636) 938-6770		No
EUREKA	MO 63025-1935	Level of Care RCF*	1 0	100
Mailing Address PO BOX 600		County SAINT LOUIS COUNTY	DMH Licensed	Yes
EUREKA	MO 63025-0600	Region 7	Facility Number 05	117
MASON POINTE CARE CENTER		T I I (214) 424 2200		NT
13190 SOUTH OUTER 40 RD	NO 62012 5012	Telephone (314) 434-3300		No
CHESTERFIELD	MO 63017-5917	Level of Care ALF**	Bed Capacity	62 N-
Mailing Address 13190 SOUTH OUTE		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5917	Region 7	Facility Number039	957
MASON POINTE CARE CENTER				
13190 SOUTH OUTER 40 RD		Telephone (314) 434-3300	Alzheimer's Unit	NO
CHESTERFIELD	MO 63017-5917	Level of Care SNF		200
Mailing Address 13190 SOUTH OUTE	ER 40 RD	County SAINT LOUIS COUNTY		No
CHESTERFIELD	MO 63017-5917	Region 7 Medicare/Medicaid	Facility Number 039	957
MATTIS POINTE - ASSISTED LIVE	NG BY AMERICARE			.,
4962 MATTIS ROAD		Telephone (314) 328-4084		Yes
SAINT LOUIS	MO 63128-2795	Level of Care ALF**	1 0	120
Mailing Address 4962 MATTIS ROAD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-2795	Region 7	Facility Number303	805
MCKNIGHT PLACE ASSISTED LIV	/ING AND MEMORY CARE			
THREE MCKNIGHT PLACE	-	Telephone (314) 993-3333	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63124-1900	Level of Care SNF	Bed Capacity	55
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23:	542
MCKNIGHT PLACE ASSISTED LIV	/ING AND MEMORY CARE			
THREE MCKNIGHT PL		Telephone (314) 997-5333		No
SAINT LOUIS	MO 63124-1900	Level of Care ALF**	1 0	120
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23:	542

MCKNIGHT PLACE EXTENDED CARE			
TWO MCKNIGHT PL	Telephone (314) 993-2221	Alzheimer's Unit	No
SAINT LOUIS MO 63124-1900	Level of Care SNF	Bed Capacity	70
Mailing Address TWO MCKNIGHT PL	County SAINT LOUIS COUNTY	DMH Licensed	No
	-		
SAINT LOUIS MO 63124-1900	Region 7 Medicare	Facility Number	18914
MOTHER OF GOOD COUNSEL HOME			
6825 NATURAL BRIDGE RD	Telephone (314) 383-4765	Alzheimer's Unit	No
SAINT LOUIS MO 63121-5314	Level of Care SNF	Bed Capacity	114
Mailing Address 6825 NATURAL BRIDGE RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63121-5314	Region 7	Facility Number	05568
MOTHER OF PERPETUAL HELP RESIDENCE, INC 7609 WATSON ROAD	Telephone (314) 918-2260	Alzheimer's Unit	Yes
SAINT LOUIS MO 63119-5001	Level of Care ALF**	Bed Capacity	160
Mailing Address 7609 WATSON ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63119-5001	Region 7	Facility Number	21111
NAZARETH LIVING CENTER2 NAZARETH LNSAINT LOUISMO 63129-7600Mailing Address 2 NAZARETH LNSAINT LOUISMO 63129-7600	Telephone(314) 487-3950Level of CareSNFCountySAINT LOUIS COUNTYRegion7Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 121 No 17458
NAZARETH LIVING CENTER			
2 NAZARETH LN	Telephone (314) 487-3950	Alzheimer's Unit	Yes
SAINT LOUIS MO 63129-7600	Level of Care ALF**	Bed Capacity	114
Mailing Address 2 NAZARETH LN	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63129-7600	Region 7	Facility Number	17458
NHC HEALTHCARE, MARYLAND HEIGHTS			
2920 FEE FEE RD	Telephone (314) 291-0121	Alzheimer's Unit	Yes
MARYLAND HEIGHTS MO 63043-1915	Level of Care SNF	Bed Capacity	220
Mailing Address 2920 FEE FEE RD	County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS MO 63043-1915	Region 7 Medicare/Medicaid	Facility Number	08272
NORMANDY NURSING CENTER	214 000 0000		N
7301 SAINT CHARLES ROCK RD	Telephone (314) 862-0555	Alzheimer's Unit	No
SAINT LOUIS MO 63133-1737	Level of Care SNF	Bed Capacity	116
Mailing Address 7301 SAINT CHARLES ROCK RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63133-1737	Region 7 Medicare/Medicaid	Facility Number	01118
OAK KNOLL SKILLED NURSING & REHABILITATION CENTER			
37 N CLARK AVE	Telephone (314) 521-7419	Alzheimer's Unit	No
FERGUSON MO 63135-2323	Level of Care SNF	Bed Capacity	72
Mailing Address 37 N CLARK AVE	County SAINT LOUIS COUNTY	DMH Licensed	No
FERGUSON MO 63135-2323	Region 7 Medicare/Medicaid	Facility Number	05864

PARC PROVENCE				
605 COEUR DE VILLE DR		Telephone (314) 542-2500	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63141-6603	Level of Care SNF	Bed Capacity	140
Mailing Address 605 COEUR	DE VILLE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63141-6603	Region 7	Facility Number	24122

PARKWOOD SKILLED NURSING AND REHABILITATION CENTER

3201 PARKWOOD LN		Telephone (314) 291-5911	Alzheimer's Unit	No
MARYLAND HEIGHTS	MO 63043-1334	Level of Care SNF	Bed Capacity	130
Mailing Address 3201 PARKWOOD LN	N	County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS	MO 63043-1334	Region 7 Medicare/Medicaid	Facility Number	02471

PEACE HAVEN ASSOCIATION				
12630 ROTT RD		Telephone (314) 965-3833	Alzheimer's Unit	No
SAINT LOUIS	MO 63127-1214	Level of Care ICF	Bed Capacity	42
Mailing Address 12630 ROTT RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1214	Region 7	Facility Number	06369

PILLARS OF NORTH COUNTY HI	EALTH & REHABILITATION CENTER	R, THE		
13700 OLD HALLS FERRY RD		Telephone (314) 355-0760	Alzheimer's Unit	No
FLORISSANT	MO 63033-4109	Level of Care SNF	Bed Capacity	120
Mailing Address 13700 OLD HALLS	FERRY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-4109	Region 7 Medicare/Medicaid	Facility Number	07440

IG,THE			
	Telephone	(636) 273-3900	Alzheimer's Unit
D 63040-1203	Level of Care	ALF**	Bed Capacity
	County SAI	NT LOUIS COUNTY	DMH Licensed
D 63040-1203	Region 7		Facility Number
	0 63040-1203	D 63040-1203 Telephone County SAI	Telephone (636) 273-3900 D 63040-1203 Level of Care ALF** County SAINT LOUIS COUNTY

PROMENADE SENIOR LIVING				
8825 EAGER ROAD		Telephone (314) 325-7699	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63144-1205	Level of Care ALF**	Bed Capacity	90
Mailing Address 8825 EAGER ROAD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63144-1205	Region 7	Facility Number	30363

Telephone

County

Region 7

Level of Care

(314) 821-2886

SAINT LOUIS COUNTY

Medicare/Medicaid

SNF

Alzheimer's Unit

Bed Capacity

DMH Licensed

Facility Number

QUARTERS AT DES PERES, THE

13230 MANCHESTER RD				
DES PERES	MO	63131-1706		
Mailing Address 13230 MANCHESTER RD				
DES PERES	MO	63131-1706		

RANCHO REHAB AND HEALTHCARE CENTER

615 RANCHO LN		Telephone	(314) 839-2150	Alzheimer's Unit	No
FLORISSANT	MO 63031-1717	Level of Care	SNF	Bed Capacity	120
Mailing Address 615 RANCHO LN		County SAIN	NT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63031-1717	Region 7 Me	ledicare/Medicaid	Facility Number	02585

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

Yes 94

No

No

147

No

26726

31049

RICHMOND TERRACE ASSISTED LIVING

1633 LACLEDE STATION RD				
SAINT LOUIS	MO 63117-2038			
Mailing Address 1633 LACLEDE STATION RD				
SAINT LOUIS	MO 63117-2038			

RIVER CROSSING REHAB AND HEALTHCARE CENTER

11278 SCHUETZ RD		Telephone (314) 991-400	66 Alzheimer's Unit No
SAINT LOUIS	MO 63146-4957	Level of Care SNF	Bed Capacity 120
Mailing Address 11278 SCHUETZ RD		County SAINT LOUIS CO	DUNTY DMH Licensed No
SAINT LOUIS	MO 63146-4957	Region 7 Medicare/Medi	caid Facility Number 16378

SOUTHVIEW ASSISTED LIVING

9916 REAVIS ROAD		Telephone	(314) 544-4440	Alzheimer's Unit	Yes
AFFTON	MO 63123-5314	Level of Care	ALF**	Bed Capacity	116
Mailing Address 9916 REAVIS RD		County SA	INT LOUIS COUNTY	DMH Licensed	No
AFFTON	MO 63123-5314	Region 7		Facility Number	28446

ST AGNES HOME

10341 MANCHESTER RD		Telephone	(314) 965-7616	Alzheimer's Unit	No
KIRKWOOD MO	63122-1520	Level of Care	ICF	Bed Capacity	150
Mailing Address 10341 MANCHESTER RD		County SAI	INT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO	63122-1520	Region 7		Facility Number	07481

ST ANDREW'S ASSISTED LIVING OF BRIDGETON

11325 ST CHARLES ROCK RD		
BRIDGETON	MO	63044-2722
Mailing Address 11325 ST CHARLES	ROCK	RD
BRIDGETON	MO	63044-2722

ST ANDREW'S AT FRANCIS PLACE

400 SUMMERVILLE BLVD	
EUREKA	MO 63025-2316
Mailing Address 400 SUMMER	VILLE BLVD
EUREKA	MO 63025-2316

ST ANN ALF CNSL OPERATION LLC

10441 INTERNATIONAL PLAZA DR SAINT ANN MO 63074-1805 Mailing Address 10441 INTERNATIONAL PLAZA DR SAINT ANN MO 63074-1805

ST JOHNS PLACE

3333 BROWN ROAD		
SAINT LOUIS	MO	63114-4327
Mailing Address 3333 BROWN RD		
SAINT LOUIS	MO	63114-4327

Telephone	(314) 646-8000	Alzheimer's Unit	No
Level of Care	ALF**	Bed Capacity	99
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	22269

Telephone	(314) 544-4440	Alzheimer's Unit	Yes
Level of Care	ALF**	Bed Capacity	116
County SAIN	T LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	28446

Telephone	(314) 965-7616	Alzheimer's Unit	No
Level of Care	ICF	Bed Capacity	150
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	07481

Telephone (314) 209-1177	Alzheimer's Unit	No
Level of Care ALF**	Bed Capacity	35
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	22810

Telephone	(636) 938-5151	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	106
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	06430

Telephone	(314) 423-1254	Alzheimer's Unit	No
Level of Care	ALF	Bed Capacity	40
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	21994

Telephone	(314) 426-2211	Alzheimer's Unit	No
Level of Car	e SNF	Bed Capacity	94
County	SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Medicare/Medicaid	Facility Number	18454

ST SOPHIA HEALTH & REHABILITATION CEN	NTER
---------------------------------------	-------------

936 CHARBONIER RD MO 63031-5220 FLORISSANT MO 63031-5220 FLORISSANT MO 63031-5220

CHESTERFIELD

6768 NORTH HIGHWAY 67 FLORISSANT MO 63034-2742 Mailing Address 6768 NORTH HWY 67 FLORISSANT MO 63034-2742

STONEBRIDGE MARYLAND HEIGHTS2963 DODDRIDGE AVEMARYLAND HEIGHTSMOMailing Address 2963 DODDRIDGE AVEMARYLAND HEIGHTSMO63043-1736

SUNRISE OF CHESTERFIELD1880 CLARKSON RDCHESTERFIELDMO63017-5000Mailing Address1880 CLARKSON RD

SUNRISE OF CHESTERFIELD 1880 CLARKSON RD CHESTERFIELD MO 63017-5000

MO 63017-5000

Mailing Address1880 CLARKSON RDCHESTERFIELDMO63017-5000

SUNRISE OF DES PERES 13460 MANCHESTER RD DES PERES MO 63131-1734 Mailing Address 13460 MANCHESTER RD DES PERES MO 63131-1734

 SUNRISE OF WEBSTER GROVES
 45

 45 EAST LOCKWOOD
 MO
 63119-3050

 SAINT LOUIS
 MO
 63119-3050

 SAINT LOUIS
 MO
 63119-3050

SURREY PLACE ST LUKE'S HOSPITAL SKILLED NURSING 14701 OLIVE BLVD

CHESTERFIELDMO63017-2221Mailing Address14701 OLIVE BLVDCHESTERFIELDMO63017-2221

Telephone	(314) 831-4800	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	240
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 M	/ledicare/Medicaid	Facility Number	07631

Telephone	(314) 741-9101	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	120
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Medicare/Medicaid	Facility Number	14200

Telephone	(314) 291-4557	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	223
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	Aedicare/Medicaid	Facility Number	00855

Telephone	(636) 536-3800	Alzheimer's Unit	Yes
Level of Care	ICF	Bed Capacity	95
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	23767

Telephone	(636) 536-3800	Alzheimer's Unit	No
Level of Care	ALF**	Bed Capacity	3
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	23767

Telephone	(314) 965-3800	Alzheimer's Unit	Yes
Level of Care	ICF	Bed Capacity	102
County SAI	INT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	24242

Telephone	(314) 918-7300	Alzheimer's Unit	Yes
Level of Care	ALF**	Bed Capacity	90
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7		Facility Number	28242

Telephone	(314) 542-3300	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	130
County SAI	NT LOUIS COUNTY	DMH Licensed	No
Region 7 N	/ledicare/Medicaid	Facility Number	15467

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

Telephone (314) 892-2212 Level of Care RCF	Alzheimer's Unit	No
Level of Care RCF	D 10	
	Bed Capacity	40
County SAINT LOUIS COUNTY	DMH Licensed	Yes
Region 7	Facility Number	15078
Telephone (636) 527-4444	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	95
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	30612
Telephone (314) 862-5556	Alzheimer's Unit	No
Level of Care SNF		120
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7 Medicare/Medicaid	Facility Number	15454
0		
Telephone (314) 209-8814	Alzheimer's Unit	No
Level of Care ALF**	Bed Capacity	100
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	22460
Telephone (314) 469-1200	Alzheimer's Unit	No
Level of Care SNF	Bed Capacity	159
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7 Medicare/Medicaid	Facility Number	08474
Telephone (636) 527-5554	Alzheimer's Unit	Yes
Level of Care ALF**	Bed Capacity	99
County SAINT LOUIS COUNTY	DMH Licensed	No
Region 7	Facility Number	28184
	Telephone (636) 527-4444 Level of Care ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 862-5556 Level of Care SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 209-8814 Level of Care ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 469-1200 Level of Care SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid 1 Telephone (314) 469-1200 Level of Care SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid 1 Telephone (636) 527-5554 Level of Care ALF** County SAINT LOUIS COUNTY	SATelephone(636) 527-4444Alzheimer's UnitLevel of CareALF**Bed CapacityCountySAINT LOUIS COUNTYDMH LicensedRegion 7Facility NumberTelephone(314) 862-5556Alzheimer's UnitLevel of CareSNFBed CapacityCountySAINT LOUIS COUNTYDMH LicensedRegion 7Medicare/MedicaidFacility NumberTelephone(314) 209-8814Alzheimer's UnitLevel of CareALF**Bed CapacityCountySAINT LOUIS COUNTYDMH LicensedFacilitySAINT LOUIS COUNTYDMH LicensedFacilitySAINT LOUIS COUNTYDMH LicensedFacilityNumberFacility NumberTelephone(314) 469-1200Alzheimer's UnitLevel of CareSNFBed CapacityCountySAINT LOUIS COUNTYDMH LicensedFacilityNumberFacility NumberTelephone(636) 527-5554Alzheimer's UnitLevel of CareALF**Bed CapacityCountySAINT LOUIS COUNTYDMH LicensedFacility NumberFacility NumberMH LicensedTelephone(636) 527-5554Alzheimer's UnitLevel of CareALF**Bed CapacityCountySAINT LOUIS COUNTYDMH Licensed

SAINTE GENEVIEVE

HIDDEN ACRES ASSISTED LI 19235 STATE ROUTE EE SAINTE GENEVIEVE Mailing Address 19235 STATE F SAINTE GENEVIEVE	MO 63670-8213	Telephone(573) 756-8141Level of CareALFCountySAINTE GENEVIEVERegion2	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18 Yes 19721
HIDDEN ACRES ASSISTED LI	VING II LLC	8		
19235 STATE ROUTE EE SAINTE GENEVIEVE Mailing Address 19235 STATE F SAINTE GENEVIEVE	MO 63670-8213 ROUTE EE	Telephone(573) 756-8141Level of CareALFCountySAINTE GENEVIEVEDerice2	Alzheimer's Unit Bed Capacity DMH Licensed	No 18 Yes
SAINTE GENEVIEVE	MO 63670-8213	Region 2	Facility Number	11134

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

MARIAN CLIFF RESIDENTIAL CARE CENTER LLC			
381 ELM ST	Telephone (573) 543-2218	Alzheimer's Unit	No
SAINT MARY MO 63673-9330	Level of Care RCF*	Bed Capacity	66
Mailing Address PO BOX 272	County SAINTE GENEVIEVE	DMH Licensed	Yes
FARMINGTON MO 63640-0272	Region 2	Facility Number	05058
	ingion 2		05050
PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE			
805 PARKWOOD DR	Telephone (573) 883-3883	Alzheimer's Unit	Yes
SAINTE GENEVIEVE MO 63670-1858	Level of Care ALF**	Bed Capacity	66
Mailing Address 805 PARKWOOD DR	County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE MO 63670-1858	Region 2	Facility Number	23234
	_		
RIVERVIEW AT THE PARK CARE AND REHABILITATION CENTE			•••
1100 PROGRESS PARKWAY	Telephone (573) 883-3454	Alzheimer's Unit	Yes
SAINTE GENEVIEVE MO 63670-9232	Level of Care SNF	Bed Capacity	120
Mailing Address 1100 PROGRESS PARKWAY	County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE MO 63670-9232	Region 2 Medicare/Medicaid	Facility Number	06729
ST GENEVIEVE NURSING			
1010 STE GENEVIEVE DR	Telephone (573) 883-5725	Alzheimer's Unit	No
SAINTE GENEVIEVE MO 63670-1447	Level of Care SNF	Bed Capacity	90
Mailing Address PO BOX 426	County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE MO 63670-0426	Region 2 Medicare/Medicaid	Facility Number	03254
		·	
	TINE		
SA	LINE		
	ALINE		
BIG BEND RETREAT		Alzheimen's Unit	No
BIG BEND RETREAT 620 NORTH EMMERSON	Telephone (660) 529-2237	Alzheimer's Unit	No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone (660) 529-2237 Level of Care ICF	Bed Capacity	60
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON	Telephone(660) 529-2237Level of CareICFCountySALINE	Bed Capacity DMH Licensed	60 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone (660) 529-2237 Level of Care ICF	Bed Capacity	60
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON	Telephone(660) 529-2237Level of CareICFCountySALINE	Bed Capacity DMH Licensed	60 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone(660) 529-2237Level of CareICFCountySALINE	Bed Capacity DMH Licensed	60 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT	Telephone (660) 529-2237 Level of Care ICF County SALINE Region 5	Bed Capacity DMH Licensed Facility Number	60 No 00546
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	60 No 00546 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone (660) 529-2237 Level of Care ICF County SALINE Region 5 Telephone (660) 529-2237 Level of Care RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 00546 No 10
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone (660) 529-2237 Level of Care ICF County SALINE Region 5 Telephone (660) 529-2237 Level of Care RCF* County SALINE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00546 No 10 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 00546 No 10 No 00546
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 SLATER MO 65349-1157 SLATER MO 65349-1157	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 00546 No 10 No 00546 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 SLATER MO 65349-1157 JUNE PORTION OF THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 00546 No 00546 No 11
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 Mailing Address 1210 EAST EASTWOOD ST	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00546 No 00546 No 11 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 SLATER MO 65349-1157 JUNE PORTION OF THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	60 No 00546 No 00546 No 11
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 Mailing Address 1210 EAST EASTWOOD ST	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00546 No 00546 No 11 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 Mailing Address 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	60 No 00546 No 00546 No 11 No
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 MarSHALL MO 65340-1510 SLATER MO 65340-1510	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 00546 No 00546 No 11 No 00633
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 MARSHALL MO 65340-1510 GOLDEN OAKS ASSISTED LIVING I LLC 27882 HIGHWAY H	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-6172	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 00546 No 00546 No 11 No 00633
BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 BIG BEND RETREAT 620 NORTH EMMERSON SLATER MO 65349-1157 Mailing Address 620 NORTH EMMERSON SLATER MO 65349-1157 MARSHALL MO 65349-1157 GEORGIA BROWN BLOSSER HOME FOR THE AGED 1210 EAST EASTWOOD ST MARSHALL MO 65340-1510 MARSHALL MO 65340-1510	Telephone(660) 529-2237Level of CareICFCountySALINERegion5Telephone(660) 529-2237Level of CareRCF*CountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-5022Level of CareRCFCountySALINERegion5Telephone(660) 886-6172Level of CareALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 00546 No 00546 No 11 No 00633 No 67

HARTLAND RESIDENTIAL CARE CENTER				
23435 LADDER DR	Telephone	(660) 886-7093	Alzheimer's Unit	No
MARSHALL MO 65340	-4662 Level of Care	RCF	Bed Capacity	12
Mailing Address 23435 LADDER DR	County SA	LINE	DMH Licensed	No
MARSHALL MO 65340	Region 5		Facility Number	15163
L.Y.B.L. LLC				
1325 SOUTH HIGHLAND COURT	Telephone	(660) 530-7081	Alzheimer's Unit	No
MARSHALL MO 65340	-3058 Level of Care	RCF	Bed Capacity	11
Mailing Address 1325 SOUTH HIGHLAND COUR	Γ County SA	LINE	DMH Licensed	No
MARSHALL MO 65340	0-3058 Region 5		Facility Number	03558
LEGENDARY NURSING & REHABILITATION	LLC			
809 EAST GORDON ST	Telephone	(660) 886-2247	Alzheimer's Unit	No
MARSHALL MO 65340	-	SNF	Bed Capacity	92
Mailing Address 809 EAST GORDON ST		LINE	DMH Licensed	No
MARSHALL MO 6534	-	Medicare/Medicaid	Facility Number	04895
		incureur el micureure		01055
LIVING CENTER, THE				
2506 LINDEN TREE PARKWAY	Telephone	(660) 886-9676	Alzheimer's Unit	Yes
MARSHALL MO 65340	0-0017 Level of Care	SNF	Bed Capacity	99
Mailing Address PO BOX 370	County SA	LINE	DMH Licensed	No
MARSHALL MO 65340	D-0370 Region 5	Medicare/Medicaid	Facility Number	21791
ROYAL OAKS CARE CENTER LLC				
507 EAST MARSHALL	Telephone	(660) 530-3168	Alzheimer's Unit	No
SWEET SPRINGS MO 6535	•	ALF	Bed Capacity	51
Mailing Address PO BOX 204	County SA	LINE	DMH Licensed	Yes
SWEET SPRINGS MO 6535	1-0204 Region 5		Facility Number	14953
SWEET SPRINGS VILLA				
518 E MARSHALL	Telephone	(660) 335-6391	Alzheimer's Unit	No
SWEET SPRINGS MO 6535		SNF	Bed Capacity	120
Mailing Address 518 E MARSHALL	2	LINE	DMH Licensed	No
SWEET SPRINGS MO 6535	I-9756 Region 5	Medicare/Medicaid	Facility Number	05378
WESTPORT ESTATES - ASSISTED LIVING BY	AMERICARE			
904 APACHE DR	Telephone	(660) 886-5500	Alzheimer's Unit	Yes
MARSHALL MO 65340	-	ALF**	Bed Capacity	62
Mailing Address 904 APACHE DR	County SA	LINE	DMH Licensed	No
MARSHALL MO 65340	•		Facility Number	16202
	SCHUYLER			

SCHUYLER COUNTY NURSING HOME

1306 US HIGHWAY 63		Telephone (660) 766-2	2291
QUEEN CITY	MO 63561-2251	Level of Care SNF	
Mailing Address 1306 US HIG	GHWAY 63	County SCHUYLER	
QUEEN CITY	MO 63561-2251	Region 5 Medicare/Me	edicaid

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6

RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

No

60

No

07004

Alzheimer's Unit

Bed Capacity

DMH Licensed

Facility Number

	SCOTT			
ARBORS AT WESTRIDGE PLACE - MEMOR	Y CARE BY AMERICARE, THE			
539 NORTH WEST ST	Telephone	e (573) 471-6484	Alzheimer's Unit	Yes
SIKESTON MO 638	301-5443 Level of C	Care ALF**	Bed Capacity	28
Mailing Address 539 NORTH WEST ST	County	SCOTT	DMH Licensed	No
SIKESTON MO 638	801-5443 Region 2		Facility Number	12693
			·	
CHAFFEE NURSING CENTER				
12273 STATE HIGHWAY 77	Telephone		Alzheimer's Unit	No
CHAFFEE MO 637			Bed Capacity	71
Mailing Address 12273 STATE HIGHWAY 77	County	SCOTT	DMH Licensed	No
CHAFFEE MO 637	740-8219 Region 2	Medicare/Medicaid	Facility Number	13652
CLEARVIEW NURSING CENTER				
430 SALCEDO ROAD	Telephone	e (573) 471-2565	Alzheimer's Unit	No
SIKESTON MO 638	301-4802 Level of C	Care SNF	Bed Capacity	98
Mailing Address PO BOX 707	County	SCOTT	DMH Licensed	No
SIKESTON MO 638	801-0707 Region 2	Medicare/Medicaid	Facility Number	19913
COLONIAL MANOR, LLC				
907 WEST MALONE ST	Telephon	e (573) 471-5541	Alzheimer's Unit	No
SIKESTON MO 638	•		Bed Capacity	20
Mailing Address 907 WEST MALONE ST	County	SCOTT	DMH Licensed	Yes
SIKESTON MO 638	•		Facility Number	13255
	Kigion 2		Tuenity Humber	15255
COUNTRY PLACE		(572) 264 1555	AT T	N
28601 US HIGHWAY 61	Telephone	· · · ·	Alzheimer's Unit	No
SCOTT CITY MO 637			Bed Capacity	24
Mailing Address 28601 US HIGHWAY 61 SCOTT CITY MO 637		SCOTT	DMH Licensed	No
SCOTTCITY MO 657	780-9143 Region 2		Facility Number	25934
DAYBREAK NURSING CENTER				
410 H ROAD	Telephone		Alzheimer's Unit	No
SIKESTON MO 638			Bed Capacity	70
Mailing Address 410 H ROAD	County	SCOTT	DMH Licensed	No
SIKESTON MO 638	Region 2	Medicare/Medicaid	Facility Number	11496
HUNTER ACRES CARING CENTER				
628 NORTH WEST ST	Telephon	e (573) 471-7130	Alzheimer's Unit	Yes
SIKESTON MO 638	301-4738 Level of C	Care SNF	Bed Capacity	120
Mailing Address 628 NORTH WEST ST	County	SCOTT	DMH Licensed	No
SIKESTON MO 638	801-4738 Region 2	Medicare/Medicaid	Facility Number	07345
LA BONNE MAISON-ASSISTED LIVING BY A	AMERICARE			
226 PLAZA DR	Telephone	e (573) 472-2546	Alzheimer's Unit	No
SIKESTON MO 638	801-5105 Level of C	Care ALF**	Bed Capacity	30
Mailing Address 226 PLAZA DR	County	SCOTT	DMH Licensed	No
SIKESTON MO 638	801-5105 Region 2	,	Facility Number	28804

SCOTT

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

SIKESTON CONVALESCENT CEN	TER			
103 KENNEDY DR SIKESTON	MO 63801-5126	Telephone (573) 471-6900 Level of Care SNF	Alzheimer's Unit Bed Capacity	Yes 120
Mailing Address 103 KENNEDY DR		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-5126	Region 2 Medicare/Medicaid	Facility Number	07331
			·	
SUNSHINE VILLA				
2520 JAMES ST		Telephone (573) 264-2424	Alzheimer's Unit	No
SCOTT CITY	MO 63780-1219	Level of Care ALF	Bed Capacity	26
Mailing Address 2520 JAMES ST		County SCOTT	DMH Licensed	Yes
SCOTT CITY	MO 63780-1219	Region 2	Facility Number	07039
	a a a a a a a a a a a a a a a a a a a			
		HANNON		
HILLTOP HAVEN RESIDENTIAL	CARE FACILITY			
18941 CR 305A		Telephone (573) 226-5426	Alzheimer's Unit	No
EMINENCE	MO 65466-9702	Level of Care RCF	Bed Capacity	20
Mailing Address 18941 CR 305A	MO 65466-9702	County SHANNON	DMH Licensed	Yes
EMINENCE	MO 65466-9702	Region 2	Facility Number	03615
ROCK POINT NURSING CENTER				
8477 NORTH STREET		Telephone (573) 292-3212	Alzheimer's Unit	Yes
BIRCH TREE	MO 65438-8887	Level of Care SNF	Bed Capacity	86
Mailing Address 8477 NORTH STRE		County SHANNON	DMH Licensed	No
BIRCH TREE	MO 65438-8887	Region 2 Medicare/Medicaid	Facility Number	00560
			·	
	5	SHELBY		
CLARENCE CARE CENTER				
111 EAST ST		Telephone (660) 699-2118	Alzheimer's Unit	No
CLARENCE	MO 63437-1902	Level of Care SNF	Bed Capacity	60
Mailing Address 111 EAST ST		County SHELBY	DMH Licensed	No
CLARENCE	MO 63437-1902	Region 5 Medicare/Medicaid	Facility Number	01475
SALT RIVER COMMUNITY CARE				
142 SHELBY PLAZA RD		Telephone (573) 588-4175	Alzheimer's Unit	Yes
SHELBINA	MO 63468-1065	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 529		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-0529	Region 5 Medicare/Medicaid	Facility Number	06934
SHELBINA VILLA LIFECARE				
218 EAST SHELBINA AVE		Telephone (573) 588-4115	Alzheimer's Unit	No
SHELBINA	MO 63468-4328	Level of Care ALF**	Bed Capacity	68
Mailing Address 218 EAST SHELBIN		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-4328	Region 5	Facility Number	18584
				1000
	ST	TODDARD		
ADVANCE ASSISTED LIVING				
252 PAYTON PLACE		Telephone (573) 722-5200	Alzheimer's Unit	No
ADVANCE	MO 63730-7251	Level of Care ALF	Bed Capacity	44
Mailing Address PO BOX 790		County STODDARD	DMH Licensed	No
ADVANCE	MO 63730-0790	Region 2	Facility Number	28426

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

ASPIRE SENIOR LIVING ADVANCE			
315 SOUTH TILLEY ST		Telephone (573) 722-3440	Alzheimer's Unit No
ADVANCE MO	63730-7230	Level of Care SNF	Bed Capacity 70
Mailing Address 315 S TILLEY ST		County STODDARD	DMH Licensed No
ADVANCE MO	63730-7230	Region 2 Medicare/Medicaid	Facility Number 11722
		-	
CENTRAL GARDENS INC			
302 NORTH ELM ST		Telephone (573) 624-0011	Alzheimer's Unit No
DEXTER MO	63841-1773	Level of Care RCF*	Bed Capacity 83
Mailing Address 302 NORTH ELM ST		County STODDARD	DMH Licensed No
DEXTER MO	63841-1773	Region 2	Facility Number18858
CROWLEY RIDGE CARE CENTER			
1204 NORTH OUTER RD		Telephone (573) 624-5557	Alzheimer's Unit Yes
	63841-8684	Level of Care SNF	Bed Capacity 90
Mailing Address PO BOX 668		County STODDARD	DMH Licensed No
DEXTER MO	63841-0668	Region 2 Medicare/Medicaid	Facility Number 12667
CYPRESS POINT - SKILLED NURSING B	IV AMEDICADE		
801 BAILIFF DR	1 AMERICARE	Telephone (573) 624-8908	Alzheimer's Unit No
	63841-9500	Level of Care SNF	Bed Capacity 79
Mailing Address 801 BAILIFF DR	05041 7500	County STODDARD	DMH Licensed No
-	63841-9500	Region ² Medicare/Medicaid	Facility Number 08315
	05011 7500	Region 2 Metucale/Metucalu	
MEMORY LANE OF DEXTER			
415 S CATALPA STREET		Telephone (573) 624-7491	Alzheimer's Unit Yes
DEXTER MO	63841-2017	Level of Care SNF	Bed Capacity 73
Mailing Address 415 S CATALPA STREET		County STODDARD	DMH Licensed No
DEXTER MO	63841-2017	Region 2 Medicare/Medicaid	Facility Number 02156
MINGO RESIDENTIAL CARE FACILITY		T L L (572) 202 2087	
24080 STATE HWY 51	<20<0.0114	Telephone (573) 222-3086 L L CE*	Alzheimer's Unit No
	63960-8114	Level of Care RCF*	Bed Capacity 36
Mailing Address 24080 STATE HWY 51	<20<0.0114	County STODDARD	DMH Licensed Yes
PUXICO MO	63960-8114	Region 2	Facility Number24959
PRAIRIE VIEW SKILLED NURSING			
606 WEST MISSOURI ST		Telephone (573) 568-2137	Alzheimer's Unit No
BLOOMFIELD MO	63825-9706	Level of Care SNF	Bed Capacity 60
Mailing Address 606 WEST MISSOURI ST		County STODDARD	DMH Licensed No
BLOOMFIELD MO	63825-9706	Region 2 Medicare/Medicaid	Facility Number 00629
PUXICO NURSING & REHABILIATION	UENTER	T-l	
540 NORTH HIGHWAY 51	(20(0.0117	Telephone (573) 222-3125 Least of Come SNE	Alzheimer's Unit No
	63960-9117	Level of Care SNF	Bed Capacity 60
Mailing Address 540 NORTH HWY 51	(20(0.0117	County STODDARD	DMH Licensed No
PUXICO MO	63960-9117	Region 2Medicare/Medicaid	Facility Number03163

RIDGEVIEW ASSISTED LIVING CENTER			
13134 STATE HIGHWAY 25	Telephone (573) 624-4433	Alzheimer's Unit	No
DEXTER MO 63841-9740	Level of Care ALF**	Bed Capacity	26
Mailing Address 13134 STATE HIGHWAY 25	County STODDARD	DMH Licensed	No
DEXTER MO 63841-9740	Region 2	Facility Number	10128
WINCHESTER NURSING CENTER, INC			
400 WINCHESTER DRIVE	Telephone (573) 293-6702	Alzheimer's Unit	No
BERNIE MO 63822-7500	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 760	County STODDARD	DMH Licensed	No
BERNIE MO 63822-0760	Region 2 Medicare/Medicaid	Facility Number	31391
WINCHESTER PLACE ASSISTED LIVING, LLC			
404 WINCHESTER ROAD	Telephone (573) 293-6705	Alzheimer's Unit	NO
BERNIE MO 63822-7500	Level of Care ALF**	Bed Capacity	38
Mailing Address 404 WINCHESTER ROAD	County STODDARD	DMH Licensed	No
BERNIE MO 63822-7500	Region 2	Facility Number	31391
	STONE		
	SIONE		
CRANE RESIDENTIAL CARE HOME	Telephone (417) 722 5000	Alzhoimert-Tirt	NT -
102 LILLIAN	Telephone (417) 723-5900	Alzheimer's Unit	No 36
CRANE MO 65633-9103	Level of Care RCF County STONE	Bed Capacity DMH Licensed	30 Yes
Mailing Address 102 LILLIAN CRANE MO 65633-9103	i		
CRANE MO 65633-9103	Region 1	Facility Number	01898
WEDGEWOOD GARDENS			
17996 BUSINESS 13	Telephone (417) 272-6666	Alzheimer's Unit	Yes
REEDS SPRING MO 65737-9663	Level of Care ALF**	Bed Capacity	46
Mailing Address 17996 BUSINESS 13	County STONE	DMH Licensed	No
REEDS SPRING MO 65737-9663	Region 1	Facility Number	20615
S	ULLIVAN		
MILAN HEALTH CARE CENTER			
52435 INFIRMARY RD	Telephone (660) 265-4032	Alzheimer's Unit	No
MILAN MO 63556-2874	Level of Care SNF	Bed Capacity	100
Mailing Address 52435 INFIRMARY RD	County SULLIVAN	DMH Licensed	No
MILAN MO 63556-2874	Region 5 Medicare/Medicaid	Facility Number	05418
	9	·	
STOVER'S RESIDENTIAL CARE FACILITY			
520 EAST 5TH ST	Telephone (660) 265-2079	Alzheimer's Unit	No
MILAN MO 63556-1222	Level of Care RCF	Bed Capacity	20
Mailing Address 520 EAST 5TH ST	County SULLIVAN	DMH Licensed	Yes
MILAN MO 63556-1222	Region 5	Facility Number	07709
TESSLAND RESIDENTIAL CARE FACILITY LLC			
24583 HIGHWAY 5	Telephone (660) 265-4391	Alzheimer's Unit	No
MILAN MO 63556-2809	Level of Care RCF	Bed Capacity	9
Mailing Address 24583 HWY 5	County SULLIVAN	DMH Licensed	Yes
MILAN MO 63556-2809	Region 5	Facility Number	19990

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

		TANEY		
BUNGALOWS AT BRANSON MEAI	DOWS, THE			
5351 GRETNA ROAD	,	Telephone (417) 334-3336	Alzheimer's Unit	No
BRANSON	MO 65616-7298	Level of Care RCF	Bed Capacity	104
Mailing Address 5351 GRETNA RD		County TANEY	DMH Licensed	No
BRANSON	MO 65616-7298	Region 1	Facility Number	23683
FORSYTH CARE CENTER				
477 COY BLVD		Telephone (417) 546-6337	Alzheimer's Unit	No
FORSYTH	MO 65653-5132	Level of Care SNF	Bed Capacity	120
Mailing Address PO BOX 640	MO (5(52.0(40	County TANEY	DMH Licensed	No
FORSYTH	MO 65653-0640	Region ¹ Medicare/Medicaid	Facility Number	18870
LAKESIDE MOUNTAIN MANOR				
238 HARMONY HEIGHTS		Telephone (417) 546-5595	Alzheimer's Unit	No
FORSYTH	MO 65653-5533	Level of Care RCF	Bed Capacity	40
Mailing Address 238 HARMONY HEI	IGHTS	County TANEY	DMH Licensed	Yes
FORSYTH	MO 65653-5533	Region ¹	Facility Number	06232
OAKS RETIREMENT COMMUNIT	Y,THE			
127 HAMLET ROAD		Telephone (417) 239-1112	Alzheimer's Unit	No
BRANSON	MO 65616-7746	Level of Care ALF**	Bed Capacity	30
Mailing Address 127 HAMLET ROAD)	County TANEY	DMH Licensed	No
BRANSON	MO 65616-7746	Region 1	Facility Number	27358
POINT LOOKOUT NURSING & RE	НАВ			
11103 HISTORIC HIGHWAY 165		Telephone (417) 334-4105	Alzheimer's Unit	Yes
HOLLISTER	MO 65672-6239	Level of Care SNF	Bed Capacity	130
Mailing Address 11103 HISTORIC HI		County TANEY	DMH Licensed	No
HOLLISTER	MO 65672-6239	Region ¹ Medicare/Medicaid	Facility Number	12716
SHEPHERD OF THE HILLS LIVIN	G CENTER			
996 STATE HIGHWAY 248		Telephone (417) 334-6431	Alzheimer's Unit	No
BRANSON	MO 65616-8154	Level of Care SNF	Bed Capacity	100
Mailing Address 996 STATE HWY 24		County TANEY	DMH Licensed	No
BRANSON	MO 65616-8154	Region ¹ Medicare/Medicaid	Facility Number	06810
		TEXAS		
HICKORY MANOR				
209 HICKORY ST		Telephone (573) 674-2111	Alzheimer's Unit	No
LICKING	MO 65542-9847	Level of Care SNF	Bed Capacity	60
Mailing Address 209 HICKORY ST	10 (5540.0047	County TEXAS	DMH Licensed	No
LICKING	MO 65542-9847	Region 2 Medicare/Medicaid	Facility Number	07929
HOUSTON HOUSE				
1000 NORTH INDUSTRIAL DR		Telephone (417) 967-2527	Alzheimer's Unit	No
HOUSTON	MO 65483-9400	Level of Care SNF	Bed Capacity	96
Mailing Address PO BOX 199		County TEXAS	DMH Licensed	No
HOUSTON	MO 65483-0199	Region 2 Medicare/Medicaid	Facility Number	10626

TANEY

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

KABUL NURSING HOMES, INC				
1000 MAIN ST		Telephone (417) 962-3713	Alzheimer's Unit	No
CABOOL	MO 65689-9125	Level of Care SNF	Bed Capacity	99
Mailing Address 1000 MAIN ST		County TEXAS	DMH Licensed	No
CABOOL	MO 65689-9125	Region 2 Medicare/Medicaid	Facility Number	04085
		0	-	
LANDMARK VILLA ALF				
1101 OZARK AVE		Telephone (417) 962-3700	Alzheimer's Unit	No
CABOOL	MO 65689-7362	Level of Care ALF	Bed Capacity	44
Mailing Address 1101 OZARK AVE		County TEXAS	DMH Licensed	Yes
CABOOL	MO 65689-7362	Region 2	Facility Number	04085
LICKING RESIDENTIAL CARE				
225 WEST HIGHWAY 32		Telephone (573) 674-2207	Alzheimer's Unit	No
LICKING	MO 65542-9832	Level of Care RCF*	Bed Capacity	34
Mailing Address 225 WEST HIGHWA	Y 32	County TEXAS	DMH Licensed	No
LICKING	MO 65542-9832	Region 2	Facility Number	24302
	VER	NON		
BRISTOL MANOR OF NEVADA				
401 EAST WALNUT		Telephone (417) 667-5700	Alzheimer's Unit	No
NEVADA	MO 64772-2457	Level of Care RCF	Bed Capacity	12
Mailing Address 401 EAST WALNUT	110 011/2 2107	County VERNON	DMH Licensed	Yes
NEVADA	MO 64772-2457	Region 1	Facility Number	18471
		Acgion -		101/1
BUNGALOWS AT NEVADA , THE				
640 EAST HIGHLAND		Telephone (417) 667-3883	Alzheimer's Unit	No
NEVADA	MO 64772-1091	Level of Care RCF	Bed Capacity	37
Mailing Address 640 EAST HIGHLAN	D	County VERNON	DMH Licensed	No
NEVADA	MO 64772-1091	Region 1	Facility Number	23732
CLARK CARE CENTER - ONE				
1505 EAST ASHLAND ST		Telephone (417) 667-3900	Alzheimer's Unit	No
NEVADA	MO 64772-4025	Level of Care RCF*	Bed Capacity	38
Mailing Address PO BOX 246		County VERNON	DMH Licensed	Yes
NEVADA	MO 64772-0246	Region 1	Facility Number	20206
		0		
JOE CLARK RESIDENTIAL CARE	HOME			
1495 EAST ASHLAND ST		Telephone (417) 667-5000	Alzheimer's Unit	No
NEVADA	MO 64772-4016	Level of Care ALF**	Bed Capacity	34
Mailing Address PO BOX 246		County VERNON	DMH Licensed	No
NEVADA	MO 64772-0246	Region 1	Facility Number	23419
MEDICALODGES NEVADA				
1210 W ASHLAND ST		Telephone (417) 667-5064	Alzheimer's Unit	No
NEVADA	MO 64772-1906	Level of Care SNF	Bed Capacity	100
Mailing Address 1210 W ASHLAND S	Т	County VERNON	DMH Licensed	No
NEVADA	MO 64772-1906	Region 1 Medicare/Medicaid	Facility Number	05717

MOORE-FEW CARE CENTER

 901 SOUTH ADAMS
 MO
 64772-3209

 Mailing Address 901 SOUTH ADAMS
 V
 64772-3209

 NEVADA
 MO
 64772-3209

NATHAN RICHARD HEALTH CARE CENTER

 700 EAST HIGHLAND AVE

 NEVADA
 MO
 64772-1025

 Mailing Address 700 EAST HIGHLAND AVE

 NEVADA
 MO
 64772-1025

PAUL L & MARTHA BARONE CARE CENTER

 2101 NORTH ASH ST
 MO
 64772-1082

 Mailing Address 2101 NORTH ASH ST
 VEVADA
 MO
 64772-1082

Telephone (417) 448-3841	Alzheimer's Unit	No
Level of Care SNF	Bed Capacity	108
County VERNON	DMH Licensed	No
Region 1 Medicare/Medicaid	Facility Number	05703

Telephone	(417) 667-8889	Alzheimer's Unit	No
Level of Care	SNF	Bed Capacity	68
County VEI	RNON	DMH Licensed	No
Region 1 N	/ledicare/Medicaid	Facility Number	18210

TEMPORARY CLOSURE - STAFFING

Telephone (417) 448-3841	Alzheimer's Unit	Yes
Level of Care SNF	Bed Capacity	40
County VERNON	DMH Licensed	No
Region ¹ Medicaid	Facility Number	16917

WARREN

BRISTOL MANOR OF WARRENTO	ON			
815 WOOLF ROAD		Telephone (636) 456-1437	Alzheimer's Unit	No
WARRENTON	MO 63383-6184	Level of Care RCF	Bed Capacity	12
Mailing Address 815 WOOLF RD		County WARREN	DMH Licensed	No
WARRENTON	MO 63383-6184	Region 6	Facility Number19	9954
HARTON SENIOR LIVING				
1054 SOUTH HWY 47		Telephone (636) 377-4444	Alzheimer's Unit	No
WARRENTON	MO 63383-2625	Level of Care RCF	Bed Capacity	36
Mailing Address 1054 SOUTH HWY	47	County WARREN	DMH Licensed	No
WARRENTON	MO 63383-2625	Region 6	Facility Number 30	0144
OAK POINTE OF WARRENTON				
700 FORREST AVE		Telephone (636) 456-6464	Alzheimer's Unit	Yes
WARRENTON	MO 63383-7040	Level of Care ALF**	Bed Capacity	71
Mailing Address 700 FORREST AVE		County WARREN	DMH Licensed	No
WARRENTON	MO 63383-7040	Region 6	Facility Number25	5045
WARRENTON MANOR				
65 STATE HIGHWAY AA		Telephone (636) 456-8700	Alzheimer's Unit	Yes
WRIGHT CITY	MO 63383-3301	Level of Care SNF	Bed Capacity	120
Mailing Address 65 STATE HIGHWA	AY AA	County WARREN	DMH Licensed	No

WASHINGTON

Region 6

Medicare/Medicaid

Facility Number

MO 63390-3301

GEORGIAN GARDENS CENTER F	OR REHAB AND HEALTHCARE				
1 GEORGIAN GARDENS DR		Telephone	(573) 438-6261	Alzheimer's Unit	Yes
POTOSI	MO 63664-1436	Level of Care	SNF	Bed Capacity	120
Mailing Address 1 GEORGIAN GARD	DENS DR	County WA	ASHINGTON	DMH Licensed	No
POTOSI	MO 63664-1436	Region 2	Medicare/Medicaid	Facility Number	02830

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

Thursday, April 4, 2024

WRIGHT CITY

02505

HILLSIDE LIVING CENTER				
10160 RESTORATION CIRCLE ROA	D	Telephone (573) 562-0303	Alzheimer's Unit	No
MINERAL POINT	MO 63660-8538	Level of Care ALF**	Bed Capacity	60
Mailing Address PO BOX 534		County WASHINGTON	DMH Licensed	Yes
PARK HILLS	MO 63601-0534	Region 2	Facility Number	09270
POTOSI MANOR				
307 SOUTH HIGHWAY 21		Telephone (573) 438-3225	Alzheimer's Unit	No
POTOSI	MO 63664-9317	Level of Care SNF	Bed Capacity	90
Mailing Address 307 SOUTH HIGHW	VAY 21	County WASHINGTON	DMH Licensed	No
POTOSI	MO 63664-9317	Region 2 Medicare/Medicaid	Facility Number	21648
SOUTH HAVEN RESIDENTIAL CA	ADE CENTED IIC			
10462 AIRPORT RD	ARE CENTER, LEC	Telephone (573) 438-4150	Alzheimer's Unit	No
MINERAL POINT	MO 63660-9325	Level of Care RCF*	Bed Capacity	20
Mailing Address 10462 AIRPORT RI		County WASHINGTON	DMH Licensed	Yes
MINERAL POINT	MO 63660-9325	Region 2	Facility Number	10529
MINERAL I OINT	WO 03000-9323	Region 2	Facility Number	10329
	W	AYNE		
CLARK'S MOUNTAIN NURSING (CENTER			
2100 BARNES		Telephone (573) 223-4297	Alzheimer's Unit	No
PIEDMONT	MO 63957-1008	Level of Care SNF	Bed Capacity	91
Mailing Address 2100 BARNES		County WAYNE	DMH Licensed	No
PIEDMONT	MO 63957-1008	Region 2 Medicare/Medicaid	Facility Number	01496
FAMILY COUNSELING CENTER	INC			
18408 WAYNE ROUTE D		Telephone (573) 222-8676	Alzheimer's Unit	No
WAPPAPELLO	MO 63966-	Level of Care RCF*	Bed Capacity	27
Mailing Address 18408 WAYNE RO	UTE D	County WAYNE	DMH Licensed	Yes
WAPPAPELLO	MO 63966-	Region 2	Facility Number	23584
GREENVILLE HEALTH CARE CE	NTER			
117 SYCAMORE ST		Telephone (573) 224-3298	Alzheimer's Unit	No
GREENVILLE	MO 63944-0000	Level of Care SNF	Bed Capacity	60
Mailing Address PO BOX 108		County WAYNE	DMH Licensed	No
GREENVILLE	MO 63944-0108	Region 2 Medicare/Medicaid	Facility Number	15550
	WE	BSTER		
ANNA'S HOUSE RESIDENTIAL CA				
194 STATE HIGHWAY MM		Telephone (417) 473-6000	Alzheimer's Unit	No
NIANGUA	MO 65713-8411	Level of Care RCF	Bed Capacity	11
Mailing Address 194 STATE HWY M	1M	County WEBSTER	DMH Licensed	No
NIANGUA	MO 65713-8411	Region ¹	Facility Number	13487
COPPER ROCK HEALTHCARE				
712 COPPER ROCK DRIVE		Telephone (417) 202-4606	Alzheimer's Unit	No
ROGERSVILLE	MO 65742-8970	Level of Care SNF	Bed Capacity	90
Mailing Address PO BOX 560		County WEBSTER	DMH Licensed	No
ROGERSVILLE	MO 65742-8970	Region 1 Medicare/Medicaid	Facility Number	31851

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

GLENWOOD HEALTHCARE				
851 THOROUGHFARE		Telephone (417) 935-2992	Alzheimer's Unit	Yes
SEYMOUR	MO 65746-8767	Level of Care SNF	Bed Capacity	60
Mailing Address 851 THOROUGHF		County WEBSTER	DMH Licensed	No
SEYMOUR	MO 65746-8767	Region ¹ Medicare/Medicaid	Facility Number	16944
MARSHFIELD CARE CENTER F	OR REHAB AND HEALTHCAR	E		
800 SOUTH WHITE OAK		Telephone (417) 859-3701	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2231	Level of Care SNF	Bed Capacity	74
Mailing Address 800 SOUTH WHIT	EOAK	County WEBSTER	DMH Licensed	No
MARSHFIELD	MO 65706-2231	Region 1 Medicare/Medicaid	Facility Number	18481
MARSHFIELD PLACE				
820 SOUTH WHITE OAK STREET		Telephone (417) 859-6133	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2231	Level of Care RCF*	Bed Capacity	40
Mailing Address 820 SOUTH WHIT	E OAK STREET	County WEBSTER	DMH Licensed	Yes
MARSHFIELD	MO 65706-2231	Region 1	Facility Number	20500
WEBCO MANOR				
1687 W WASHINGTON ST		Telephone (417) 859-5144	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2325	Level of Care SNF	Bed Capacity	90
Mailing Address 1687 W WASHING		County WEBSTER	DMH Licensed	No
MARSHFIELD	MO 65706-2325	Region ¹ Medicare/Medicaid	Facility Number	08405
			Tuching Tulinoci	00405
		WORTH		
ORILLA'S WAY 1209 SOUTH HIGH ST		$T_{alaphana}$ (660) 564 2204	Algheimen's Unit	No
GRANT CITY	MO 64456-0056	Telephone (660) 564-2204 Level of Care ALF**	Alzheimer's Unit	No 27
	MO 64456-0056		Bed Capacity DMH Licensed	37 No
Mailing Address PO BOX 56 GRANT CITY	MO 64456-0056	•		
ORANI CILI	MO 04430-0030	Region 4	Facility Number	08591
WORTH COUNTY CONVALESCE	ENT CENTER			
503 E 4TH ST		Telephone (660) 564-3304	Alzheimer's Unit	No
GRANT CITY	MO 64456-8363	Level of Care SNF	Bed Capacity	50
Mailing Address 503 E 4TH ST		County WORTH	DMH Licensed	No
	MO 64456-8363	Region 4 Medicare/Medicaid	Facility Number	08779
GRANT CITY	WIO 04450-8505	Region · Medical e Medicalu		00///
GRANT CITY	MO 04450-8505	WRIGHT		
AUTUMN OAKS CARING CENTE		WRIGHT		
AUTUMN OAKS CARING CENTE 1310 HOVIS ST	ËR	WRIGHT Telephone (417) 926-5128	Alzheimer's Unit	Yes
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE		WRIGHT Telephone (417) 926-5128 Level of Care SNF	Alzheimer's Unit Bed Capacity	Yes 120
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE Mailing Address 1310 HOVIS ST	E R MO 65711-1219	WRIGHT Telephone (417) 926-5128 Level of Care SNF County WRIGHT	Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE	ËR	WRIGHT Telephone (417) 926-5128 Level of Care SNF	Alzheimer's Unit Bed Capacity	Yes 120
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE Mailing Address 1310 HOVIS ST	Е R MO 65711-1219 MO 65711-1219	WRIGHT Telephone (417) 926-5128 Level of Care SNF County WRIGHT	Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE Mailing Address 1310 HOVIS ST MOUNTAIN GROVE	Е R MO 65711-1219 MO 65711-1219	WRIGHT Telephone (417) 926-5128 Level of Care SNF County WRIGHT	Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120 No
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE Mailing Address 1310 HOVIS ST MOUNTAIN GROVE COUNTRY LIVING ASSISTED LI	Е R MO 65711-1219 MO 65711-1219	WRIGHT Telephone (417) 926-5128 Level of Care SNF County WRIGHT Region 1 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 07970
AUTUMN OAKS CARING CENTE 1310 HOVIS ST MOUNTAIN GROVE Mailing Address 1310 HOVIS ST MOUNTAIN GROVE COUNTRY LIVING ASSISTED LI 2820 NORTH MAIN ST	ER MO 65711-1219 MO 65711-1219 VING MO 65711-1403	WRIGHT Telephone (417) 926-5128 Level of Care SNF County WRIGHT Region 1 Medicare/Medicaid Telephone (417) 926-1955	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	Yes 120 No 07970 No

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006

for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)). ** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

649 WEST ROLLA ST HARTVILLE Mailing Address 649 WEST ROLLA S	MO 65667-8221 T	Telephone(417) 741-6192Level of CareSNFCountyWRIGHT	Alzheimer's Unit Bed Capacity DMH Licensed	No 60 No
HARTVILLE	MO 65667-8221	Region 1 Medicare/Medicaid	Facility Number	17946
ROCKY RIDGE MANOR				
3111 HIGHWAY A		Telephone (417) 924-8116	Alzheimer's Unit	No
MANSFIELD	MO 65704-8105	Level of Care SNF	Bed Capacity	65
Mailing Address 3111 HWY A		County WRIGHT	DMH Licensed	No
MANSFIELD	MO 65704-8105	Region 1 Medicare/Medicaid	Facility Number	04996

HARTVILLE CARE CENTER