

**STATE OF NEW YORK**  
**PUBLIC HEALTH AND HEALTH PLANNING COUNCIL**

**COMMITTEE DAY**

**AGENDA**

*July 19, 2018*

*10:30 a.m.*

*Empire State Plaza, Concourse Level, Meeting Room 6, Albany*

**I. COMMITTEE ON ESTABLISHMENT AND PROJECT REVIEW**

Gary Kalkut, M.D., Vice Chair

**A. Applications for Construction of Health Care Facilities/Agencies**

**Ambulatory Surgery Centers - Construction**

**Exhibit # 1**

	<b><u>Number</u></b>	<b><u>Applicant/Facility</u></b>
1.	181206 C	OMNI Surgery Center (Oneida County)

**Hospice Services - Construction**

**Exhibit # 2**

	<b><u>Number</u></b>	<b><u>Applicant/Facility</u></b>
1.	181260 C	Hudson Valley Hospice (Dutchess County)

**Residential Health Care Facilities – Construction**

**Exhibit # 3**

	<b><u>Number</u></b>	<b><u>Applicant/Facility</u></b>
1.	181155 C	Oxford Nursing Home (Kings County)

**B. Applications for Establishment and Construction of Health Care Facilities/Agencies**

**Acute Care Services - Establish/Construct**

**Exhibit # 4**

	<b><u>Number</u></b>	<b><u>Applicant/Facility</u></b>
1.	181251 E	South Nassau Communities Hospital (Nassau County)

**Ambulatory Surgery Centers - Establish/Construct**

**Exhibit # 5**

	<b><u>Number</u></b>	<b><u>Applicant/Facility</u></b>
1.	172395 E	Queens Endoscopy ASC, LLC (Queens County)
2.	181152 E	Roosevelt Surgery Center, LLC d/b/a Manhattan Surgery Center (New York County)

**Residential Health Care Facilities - Establish/Construct**

**Exhibit # 6**

<u>Number</u>	<u>Applicant/Facility</u>
1. 172198 E	Leroy Operating LLC d/b/a Leroy Village Green Nursing and Rehabilitation Center (Genesee County)
2. 172313 E	Kingston NH Operation LLC d/b/a Ten Broeck Center for Rehabilitation & Healing (Ulster County)
3. 181046 E	Martine Center for Rehabilitation and Nursing (Westchester County)
4. 181112 E	Clinton Square Operations, LLC d/b/a Bishop Rehabilitation and Nursing Center (Onondaga County)
5. 181144 E	Park Terrace Care Center (Queens County)
6. 181165 E	Queens Nassau Rehabilitation and Nursing Center (Queens County)
7. 181182 E	MARNC Operating LLC d/b/a Massena Rehabilitation & Nursing Center (St. Lawrence County)

**Certified Home Health Agency - Establish/Construct**

**Exhibit #7**

<u>Number</u>	<u>Applicant/Facility</u>
1. 181084 E	Willcare (Erie County)

**C. Home Health Agency Licensures**

**Exhibit # 8**

**Affiliated with Assisted Living Programs (ALPs)**

<u>Number</u>	<u>Applicant/Facility</u>
161026 E	Foundation for the Elderly Inc d/b/a Atlantis Home Care (Queens County)
172165 E	Utica LHCSA, LLC d/b/a Oneida Home Care (Oneida County)

**Changes of Ownership with Consolidation**

<u>Number</u>	<u>Applicant/Facility</u>
181393 E	Community Care Companions, Inc. d/b/a Interim Healthcare of New York (Monroe County)

**D. Certificates**

**Exhibit # 9**

**Restated Certificate of Incorporation**

Applicant

The Frederick Ferris Thompson Hospital

**Certificate of Dissolution**

Applicant

Genesee Valley Group Health Association

Ruby Weston Manor

## OMNI Surgery Center - Financial Summary

	<b>Unaudited</b> <b><u>5/30/2018</u></b>	<b>Unaudited</b> <b><u>2017</u></b>	<b>Audited</b> <b><u>2016</u></b>
Current Assets	\$702,138	\$495,932	\$900,179
Non-Current Assets	<u>552,394</u>	<u>518,837</u>	<u>935,309</u>
Total Assets	\$1,254,532	\$1,014,769	\$1,835,488
Current Liabilities	144,042	104,021	1,732,266
Long Term Liabilities	<u>600,607</u>	<u>640,643</u>	<u>636,736</u>
Total Liabilities	744,649	744,664	2,369,002
Net Assets	\$509,883	\$270,105	(\$533,514)
Working Capital Position	\$558,096	\$391,911	(\$832,087)
Operating Revenues	\$1,963,469	\$3,980,388	\$2,547,329
Operating Expenses	<u>1,601,257</u>	<u>3,557,744</u>	<u>2,766,736</u>
Operating Net Income	\$362,212	\$422,644	(\$219,407)

5:56 PM  
06/08/18  
Cash Basis

Central New York ASC, LLC  
**Profit & Loss**  
January through May 2018

CON 181206  
BFA Attachment A (cont.)

	<u>Jan - May 18</u>
Ordinary Income/Expense	
Income	
Income	
Co-Pays & Patient Deductibles	82,763.91
Facility Fee Income	
Refund	-981.68
Facility Fee Income - Other	1,881,686.83
Total Facility Fee Income	<u>1,880,705.15</u>
Total Income	1,963,469.06
Total Income	<u>1,963,469.06</u>
Gross Profit	1,963,469.06
Expense	
Bank Service Charges	1,053.64
General & Administrative	
Collection Fees	1,227.14
Dues & Subscriptions	926.30
Exempt Meals	2,684.74
Floor Mats Service	709.00
Med Equip Maint/Inspection	2,593.69
Office Supplies	7,002.06
Postage & Delivery	1,309.66
Professional Development	2,276.37
Recruitment & Retention	468.43
Reference Materials	98.62
Telephone Expense	
Internet	4,666.22
Telephone	6,076.51
Total Telephone Expense	<u>10,742.73</u>
Uniform (Scrubs) Rentals	5,794.84
General & Administrative - Other	293.95
Total General & Administrative	36,127.53
Insurance Expense	
Liability	4,751.00
Malpractice	14,132.00
Short-Term Disability	830.41
Workers' Comp	2,082.00
Total Insurance Expense	<u>21,795.41</u>
Interest Expense	1,699.12
Licenses & Fees	2,315.90
Medical Supplies	364,973.21
NYS Income Tax	1,500.00
Payroll Expenses	
Health Insurance	
Company Paid - Health Insurance	6,009.34
Employee Paid - Dental	3,002.31
Employee Paid - Vision	337.58
Employee Paid (Colonial Life)	793.98
Health Insurance - Other	14,075.70
Total Health Insurance	<u>24,218.91</u>

Central New York ASC, LLC  
**Profit & Loss**  
January through May 2018

	<u>Jan - May 18</u>
<b>Salaries &amp; Wages</b>	
Salaries - Administration	133,742.76
Salaries - Clinical	158,222.48
Salaries - IT	5,296.17
Salaries - Maintenance	19,639.24
Salaries - Rdiology	34,323.43
Salaries - Reception/front Offi	21,560.77
<b>Total Salaries &amp; Wages</b>	<b>372,784.85</b>
<b>Taxes</b>	
Federal Unemployment	998.25
Fica - Medicare Employer	27,006.65
NY Unemployment	6,026.63
Taxes - Other	1,500.00
<b>Total Taxes</b>	<b>35,531.53</b>
<b>Payroll Expenses - Other</b>	<b>3,580.44</b>
<b>Total Payroll Expenses</b>	<b>436,115.73</b>
<b>Professional Fees</b>	
Amkai Service Contract	18,826.40
Anesthesia Services	18,000.00
Architectural Fees	5,000.00
Billing Service	292.07
Consulting Services	563.99
GE C-Arm Service Contract	13,274.85
HCRA Pool Goods Fee	297.00
Interpretation	516.75
Legal Fees	13,445.72
Medical Director Stipend	20,000.00
Mindray Service Contract	4,800.00
Payroll Processing Fees	762.12
Steris Service Contract	571.75
Professional Fees - Other	6,719.79
<b>Total Professional Fees</b>	<b>103,070.44</b>
<b>Rent Expense</b>	
Building	127,050.33
Equipment Rental related party	277,800.00
Rent Expense - Other	184,810.20
<b>Total Rent Expense</b>	<b>589,660.53</b>
<b>Repairs and Maintenance</b>	
Building Repairs	3,178.29
Equipment	2,916.00
Lawn Care	13,902.59
Security and Alarm Services	664.69
Repairs and Maintenance - Other	3,228.78
<b>Total Repairs and Maintenance</b>	<b>23,890.35</b>
<b>Travel Expense</b>	
Gasoline	368.01
Lodging	715.21
Travel Expense - Other	750.91
<b>Total Travel Expense</b>	<b>1,834.13</b>

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Central New York ASC, LLC

CON 181206

06/08/18

**Profit & Loss**

BFA Attachment A (cont.)

Cash Basis

January through May 2018

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	<u>Jan - May 18</u>
Utilities	
BioMedical Waste	225.48
Gas & Electric	12,862.02
Trash	1,522.48
Water-Utilities	<u>2,611.19</u>
<b>Total Utilities</b>	<u>17,221.17</u>
<b>Total Expense</b>	<u>1,601,257.16</u>
<b>Net Ordinary Income</b>	<u>362,211.90</u>
<b>Net Income</b>	<u><u>362,211.90</u></u>

11:20 AM  
05/23/18  
Cash Basis

Central New York ASC, LLC  
**Balance Sheet**  
As of December 31, 2017

CON 181206  
BFA Attachment A (cont.)

	<u>Dec 31, 17</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
ADK BNK Deposit Account	21,177.80
ADK BNK Operating Acct	84,379.21
<b>Total Checking/Savings</b>	105,557.01
<b>Accounts Receivable</b>	
Accounts Receivable	
Refund	309.02
Accounts Receivable - Other	366,066.00
<b>Total Accounts Receivable</b>	366,375.02
<b>Total Accounts Receivable</b>	366,375.02
<b>Other Current Assets</b>	
Subscriptions Receivable	24,000.00
<b>Total Other Current Assets</b>	24,000.00
<b>Total Current Assets</b>	495,932.03
<b>Fixed Assets</b>	
Accumulated Depreciation	-242,671.06
<b>Furniture and Equipment</b>	
Clear View Cabinet	1,402.71
Computers, Printers	46,703.03
Security System	5,652.83
Telephone System	25,077.48
Furniture and Equipment - Other	110,206.29
<b>Total Furniture and Equipment</b>	189,042.34
<b>Medical Equipment</b>	
Anesthesia Equipment	40,000.00
Barrier Technology	1,932.00
ConMed	648.15
Follett Ice Maker	5,187.47
Lead Apron	657.74
Medicapture	3,815.00
Mindray Health Monitors	83,036.29
Pulse Oximeter	369.50
Shelving Unit, Mobile 4shlf WR	820.81
Sink Pckages	11,500.00
STERIS OR LIGHTS	45,198.63
STERIS Sterilyzer	35,503.42
Stretchers (30)	88,092.60
Thyroid Collar	50.36
Medical Equipment - Other	155,788.07
<b>Total Medical Equipment</b>	472,600.04
<b>Total Fixed Assets</b>	418,971.32
<b>Other Assets</b>	
<b>License</b>	
Accumulated Amorit - License	-3,581.66
License - Other	10,747.00
<b>Total License</b>	7,165.34
<b>Loan Cost</b>	
Accum. Amorit. - Loan Costs	-165.11
Loan Cost - MORECO	3,346.33
Loan Cost - UIDC	4,578.83
<b>Total Loan Cost</b>	7,760.05



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05/23/18  
Cash Basis

Central New York ASC, LLC  
**Balance Sheet**  
As of December 31, 2017

CON 181206  
BFA Attachment A (cont.)

	<u>Dec 31, 17</u>
Start Up Fees	
Accumulated Amortization - Star	-29,486.68
Start Up Fees - Other	114,426.75
Total Start Up Fees	<u>84,940.07</u>
Total Other Assets	<u>99,865.46</u>
<b>TOTAL ASSETS</b>	<b><u>1,014,768.81</u></b>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
Accounts Payable	
Accounts Payable	14,753.54
Total Accounts Payable	<u>14,753.54</u>
<b>Credit Cards</b>	
American Express	107,176.50
Chase Ink Business Card	17,801.17
Credit Card at BOA - JP	500.15
Total Credit Cards	<u>125,477.82</u>
<b>Other Current Liabilities</b>	
Accrued Rents Payable	59,150.00
APMR Loan	43,726.75
<b>Payroll Liabilities</b>	
New York Withholding	-2.97
Paid Family Leave Act	341.95
Payroll Check	805.27
Total Payroll Liabilities	<u>1,144.25</u>
Total Other Current Liabilities	<u>104,021.00</u>
Total Current Liabilities	<u>244,252.36</u>
<b>Long Term Liabilities</b>	
Capital Lease Payable - Mindray	38,895.12
City of Utica 75K Loan	48,636.30
Loan Payable - Evergreen 521.18	19,783.62
Loan# 170030361	134,845.58
Loan# 170030823	289,577.34
MORECO 75K Loan	54,241.30
UIDC \$75K Loan	54,663.84
Total Long Term Liabilities	<u>640,643.10</u>
Total Liabilities	<u>884,895.46</u>
<b>Equity</b>	
Member 1 Equity - Nameer Haider	-70,117.14
Member 2 Equity - Zain Haider	1,100.00
Member 3; Robert Tiso, MD	12,000.00
Member 4 - Joseph Catania, MD	12,000.00
Retained Earnings	-248,801.37
Net Income	423,691.86
Total Equity	<u>129,873.35</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b><u>1,014,768.81</u></b>

Central New York ASC, LLC  
Balance Sheet as at December 31, 2016

CON 181206  
BFA Attachment A (cont.)

**Current Assets**

Cash In Banks	107,640	
Accounts Receivable - Trade	756,682	
Member Subscriptions Receivable	24,000	
Prepaid Expenses	<u>11,857</u>	
<b>Total Current Assets</b>		<b>900,179</b>

**Property and Equipment**

Furniture and Equipment	186,833	
Medical Equipment	<u>441,097</u>	
	<u>627,930</u>	
Less: Accumulated Depreciation	<u>168,934</u>	
<b>Total Property and Equipment</b>		<b>458,995</b>

**Other Assets**

Loan Receivable - Related Party	366,066	
Start Up Cost - Net of Amortization	93,468	
Accreditation - Net of Amortization	8,954	
Loan Costs - Net of Amortization	<u>7,826</u>	
<b>Total Other Assets</b>		<b><u>476,314</u></b>

<b>Total Assets</b>		<b>1,835,488</b>
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Central New York ASC, LLC  
Balance Sheet as at December 31, 2016

CON 181206  
BFA Attachment A (cont.)

**Current Liabilities**

Accounts Payable - Trade	206,221	
Accrued Payroll and Taxes	11,211	
Accrued Rental Expense	498,545	
Accrued Equipment Rental Payable	512,828	
Advances from Related Parties	309,957	
Current Portion of Long Term Debt	<u>193,504</u>	
<b>Total Current Liabilities</b>		<b>1,732,266</b>

**Long Term Liabilities**

Total Long Term	830,240	
Less: Current Portion of Long Term Debt	<u>193,504</u>	
<b>Total Long Term Liabilities</b>		<b><u>636,736</u></b>

**Total Liabilities** 2,369,002

**Members Equity**

Balance - December 31, 2016 (533,514)

**Total Liabilities and Member's Equity** 1,835,488

**Central New York ASC, LLC**  
**Statement of Income, Expense and Member Equity**  
**For the Period January 1, 2016 to December 31, 2016**

**CON 18 1206**  
**BFA Attachment A (cont.)**

Professional Income	2,547,329
Operating Expenses	<u>2,766,736</u>
Net Profit From Operations	(219,407)
Less: Other Expenses	
Amortization and Depreciation	140,259
Interest Expense	<u>41,854</u>
Total Other Expenses	182,113
Net Profit (Loss)	(401,520)
Add: Beginning Member EQUITY	(136,600)
Add: Member Contributions	<u>4,606</u>
<b>Member Equity December 31, 2016</b>	<b>(533,514)</b>

HUDSON VALLEY HOSPICE, INC.  
CONSOLIDATED BALANCE SHEETS  
December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
<b>ASSETS</b>		
Current assets:		
Cash and cash equivalents	\$ 439,672	\$ 496,523
Investments	950,000	1,900,000
Patient accounts receivable, less allowance for doubtful accounts of \$146,709 in 2016 and \$147,709 in 2015	1,493,380	1,295,078
Contributions receivable	2,071	9,767
Insurance recoverable	93,505	75,834
Prepaid expenses and other current assets	<u>74,118</u>	<u>90,307</u>
Total current assets	3,052,746	3,867,509
Other assets:		
Investments	3,801,321	2,339,932
Deposits	8,900	8,900
Property and equipment, net	<u>197,504</u>	<u>82,990</u>
Total assets	<u>\$ 7,060,471</u>	<u>\$ 6,299,331</u>
<b>LIABILITIES AND NET ASSETS</b>		
Current liabilities:		
Line of credit	\$ 950,000	\$ 1,900,000
Accounts payable	623,313	454,942
Accrued expenses	445,665	211,751
Capital lease obligation, current portion	15,996	-
Amounts payable for workers compensation and professional liability claims	93,505	75,834
Payable to workers compensation trust, current portion	<u>-</u>	<u>34,902</u>
Total current liabilities	2,128,479	2,677,429
Capital lease obligation, net of current portion	<u>41,505</u>	<u>-</u>
Total liabilities	2,169,984	2,677,429
Net assets:		
Unrestricted	4,726,097	3,472,225
Temporarily restricted	<u>164,390</u>	<u>149,677</u>
Total net assets	<u>4,890,487</u>	<u>3,621,902</u>
Total liabilities and net assets	<u>\$ 7,060,471</u>	<u>\$ 6,299,331</u>

HUDSON VALLEY HOSPICE, INC.  
CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS  
For the Years Ended December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
<b>Operating revenues</b>		
Net patient service revenues	\$ 11,395,088	\$ 8,722,546
Contributions	557,965	375,294
Investment income	113,232	116,707
Realized (losses) gains on sales of investments	(93,877)	13,387
Other income	13,482	11,767
Total revenues	<u>11,985,890</u>	<u>9,239,701</u>
<b>Expenses</b>		
Salaries	5,299,003	4,453,313
Non-salary patient care expenses	2,627,741	1,799,106
Employee benefits	1,463,344	1,229,066
General and administrative	946,602	819,077
Staff travel	239,595	206,986
Contract staff	208,298	170,129
Fundraising events	108,546	95,369
Other expenses	79,527	91,030
Depreciation and amortization	45,150	30,721
Provision for bad debts	(4,121)	271,954
Total expenses	<u>11,013,685</u>	<u>9,166,751</u>
Excess of revenues over expenses	972,205	72,950
<b>Other changes in unrestricted net assets</b>		
Change in unrealized gains on investments	281,667	(195,940)
Other transfers	-	(21,000)
Change in unrestricted net assets	<u>1,253,872</u>	<u>(143,990)</u>
<b>Temporarily restricted net assets</b>		
Bequests, contributions and pledges	<u>14,713</u>	<u>46,949</u>
Change in temporarily restricted net assets	<u>14,713</u>	<u>46,949</u>
Change in net assets	1,268,585	(97,041)
Net assets, beginning of year	<u>3,621,902</u>	<u>3,718,943</u>
Net assets, end of year	<u>\$ 4,890,487</u>	<u>\$ 3,621,902</u>

**HUDSON VALLEY HOSPICE**  
**Comparative Balance Sheet Year end to Current Month End**  
**As of 12/31/2017**

	12/31/2016	12/31/2017	Variance	Var %
<b><u>Assets</u></b>				
Cash	97,489.81	326,753.99	229,264.18	235.17%
Investments	4,334,246.29	4,874,710.48	540,464.19	12.47%
Receivables-Insurance	1,493,379.70	1,709,073.47	215,693.77	14.44%
Receivables-Other	0.00	608.46	608.46	0.00%
Receivables-Due from Subsidiaries	5,647.55	4,047.69	-1,599.86	-28.33%
Prepays	60,016.86	92,578.44	32,561.58	54.25%
Inventories	11,334.22	15,231.11	3,896.89	34.38%
Security Deposits	8,900.00	10,460.00	1,560.00	17.53%
Capital Assets	20,830.61	62,735.67	41,905.06	201.17%
Moveable Assets	175,855.92	279,942.00	104,087.00	59.19%
<b>Total Assets:</b>	<b>6,207,700.96</b>	<b>7,376,141.74</b>	<b>1,168,440.78</b>	<b>18.82%</b>
<b><u>Liabilities</u></b>				
Accounts Payable	1,589,575.66	1,353,785.45	-235,790.21	-14.83%
Long Term Liabilities	57,500.89	46,412.07	-11,088.82	-19.28%
Pass through Payables	9,298.46	11,465.57	2,167.11	23.31%
Supplemental Payables	-940.95	-2,277.88	-1,336.93	142.08%
Tax Payables	1,201.11	5,541.35	4,340.24	361.35%
Payroll Related Accruals	414,833.97	603,900.79	189,066.82	45.58%
<b>Total Liabilities:</b>	<b>2,071,469.14</b>	<b>2,018,827.35</b>	<b>-52,641.79</b>	<b>-2.54%</b>
<b><u>Equity</u></b>				
<b>Total Equity:</b>	<b>4,136,231.82</b>	<b>5,357,314.39</b>	<b>1,221,082.57</b>	<b>29.52%</b>
<b>Total Liabilities &amp; Equity:</b>	<b>6,207,700.96</b>	<b>7,376,141.74</b>	<b>1,168,440.78</b>	<b>18.82%</b>

**Hudson Valley Hospice**  
**Income Statement-Year To Date**  
**For Month End: December 31, 2017**

ADC:           224.4           167.0           57.4  
Patient Days   81,959           60,955           21,004

<b>HUDSON VALLEY HOSPICE</b>				
	<u>Actual</u>	<u>Budget</u>	<u>Variance from Budget</u>	
<b>Revenue</b>				
Routine Home Care	13,503,820	10,335,831	3,167,989	30.7%
Service Intensity Add-on/Continuous Care	177,761	399,966	(222,205)	-55.6%
General Inpatient Care	1,191,457	479,206	712,251	148.6%
Respite Care	11,545	1,479	10,066	680.6%
Charity Care/Patient Support	38,671	-	38,671	100.0%
Physician Charges	128,242	36,239	92,003	-100.0%
Nursing Home Room & Board	1,651,947	1,061,620	590,327	55.6%
Contributions & Special Events	5,255	-	-	0.0%
<b>Total Revenue</b>	<b>16,708,697</b>	<b>12,314,341</b>	<b>4,389,101</b>	<b>35.6%</b>
<b>Expenses</b>				
GIP Pass Thru Expense	736,109	359,405	(376,704)	-104.8%
Medicare Sequester 2%	277,630	205,492	(72,138)	-35.1%
Respite Pass Thru Repite Expense	11,915	1,481	(10,434)	-704.5%
Consult MD Pass Thru Expense	129,780	36,313	(93,467)	-257.4%
Room & Board Pass Thru Expense	1,290,449	853,644	(436,805)	-51.2%
<b>Subtotal Pass Thru Expenses</b>	<b>2,445,882</b>	<b>1,456,335</b>	<b>(989,547)</b>	<b>-67.9%</b>
Salaries & Wages	7,902,581	6,641,845	(1,260,736)	-19.0%
Salaries Funded by Foundation	(150,544)	(149,146)	1,398	-0.9%
Staff Expense - FICA	560,860	465,799	(95,061)	-20.4%
Staff Expense- Workers Comp	257,279	205,451	(51,828)	-25.2%
Staff Travel to Patients - Mileage	333,371	255,128	(78,243)	-30.7%
Staff Expense- MTA Mobility Tax	24,051	20,480	(3,571)	-17.4%
Staff Expense - Pre-employment Screening, Education/Training	114,767	89,030	(25,737)	-28.9%
Staff Benefits (Health Ins./dbi, 403B, etc)	1,069,176	783,980	(285,196)	-36.4%
Payroll Overhead Funded by Foundation	(33,780)	(33,780)	-	0.0%
Contract Staff (HHA's, Clerical, Medical Directors)	302,260	143,796	(158,464)	-110.2%
<b>Subtotal Personnel Cost</b>	<b>10,380,021</b>	<b>8,422,583</b>	<b>(1,957,438)</b>	<b>-23.2%</b>
Patient Direct Expense (Meds, DME, Supplies, etc.)	2,135,213	1,577,059	(558,154)	-35.4%
Office Operations (Rent, Maint., Phones, Supplies, etc.)	734,977	654,636	(80,341)	-12.3%
Capital Related (Depreciation, Software/Hardware Support)	253,638	193,120	(60,518)	-31.3%
Bad Debt & Recoveries	(21,212)	24,000	45,212	188.4%
Marketing	130,940	132,527	1,587	1.2%
Investment Fees/LOC Interest	58,427	52,294	(6,133)	-11.7%
Program Expenses - Music Therapy	31,613	29,679	(1,934)	-6.5%
Program Expenses - Bereavement	24,110	18,480	(5,630)	-30.5%
Program Expenses - Volunteer	30,693	41,468	10,775	26.0%
<b>Subtotal OTPS</b>	<b>3,378,121</b>	<b>2,723,263</b>	<b>(654,858)</b>	<b>-24.0%</b>
<b>Total Expenses</b>	<b>16,204,024</b>	<b>12,602,181</b>	<b>(3,601,843)</b>	<b>-28.6%</b>
<b>Surplus/(Deficit) from Operations</b>	<b>504,673</b>	<b>(287,840)</b>	<b>792,513</b>	
Investment Income/(Loss)	307,603	93,545	214,058	
<b>Surplus/(Deficit) after Investment Income/(Loss)</b>	<b>812,276</b>	<b>(194,295)</b>	<b>1,006,571</b>	



**HUDSON VALLEY HOSPICE**  
**Annual Occupancy Cost of Hyde Park Facility**  
**Application CON # 181260, Facility ID 3875**

<u>Own</u>		<u>Lease</u>	
Mortgage Interest	\$71,516	Rent	\$183,220
Depreciation	\$37,180	Depreciation	\$0
Real Estate Taxes	\$0	Real Estate Taxes	\$12,100
Landscape Maintenance	\$7,650	Landscape Maintenance	\$7,650
Building Maintenance	\$10,000	Building Maintenance	\$0
Water & Sewer	\$1,100	Water & Sewer	\$1,100
Gas & electric	<u>\$18,950</u>	Gas & electric	<u>\$18,950</u>
Total Occupancy Cost	<u>\$146,396</u>	Total Occupancy Cost	<u>\$223,020</u>

CON# 181155  
 Financial Summary- Oxford Nursing Home

	FISCAL PERIOD ENDED		
	<u>12/31/15</u>	<u>12/31/16</u>	Draft <u>12/31/17</u>
ASSETS - CURRENT	\$8,192,000	\$9,286,000	\$10,261,642
ASSETS - FIXED AND OTHER	4,749,000	6,817,000	7,503,195
LIABILITIES - CURRENT	653,000	1,009,000	1,415,671
LIABILITIES - LONG-TERM	<u>421,000</u>	<u>365,000</u>	<u>0</u>
EQUITY	\$11,867,000	\$14,729,000	\$16,349,166
<hr/>			
INCOME	\$23,532,000	\$26,309,000	\$28,142,302
EXPENSE	<u>18,822,000</u>	<u>19,934,000</u>	<u>21,657,338</u>
NET INCOME	<u>\$4,710,000</u>	<u>\$6,375,000</u>	<u>\$6,484,964</u>
<hr/>			
NUMBER OF BEDS	235	235	235
PERCENT OF OCCUPANCY (DAYS)	90.90%	91.00%	89.53%
<hr/>			
Medicaid	89.70%	86.50%	71.78%
Medicare	8.50%	13.00%	13.15%
Private Pay/Other	1.80%	0.50%	15.07%

**OXFORD NURSING HOME INC**  
**Balance Sheet**  
**As of December 31, 2017**

**Assets**

**Current Assets**

Cash Accounts	\$	3,132,822
Accounts Receivable		6,619,552
Other Receivables		40,499
Prepaid Expenses		<u>468,769</u>

**Total Current Assets** \$ 10,261,642

**Property and Equipment**

Leasehold	\$	2,595,739
Equipment		1,080,516
Less Accumulated Depreciation		<u>(1,996,197)</u>

**Net Property and Equipment** \$ 1,680,058

**Non Current Assets**

Loan Receivable-Conover King		5,807,137
Loans Receivable - Conover King/Linden		<u>16,000</u>

**Total Non Current Assets** 5,823,137

**Total Assets** 17,764,837

DRAFT

**OXFORD NURSING HOME INC**

**Balance Sheet  
As of December 31, 2017**

CON 1811 55  
BFA Attachment B (cont)

**Liabilities and Stockholders' Equity**

**Current Liabilities**

Accounts Payable	\$	193,959
Accrued Payroll		365,613
Accrued Expenses		25,775
Due To Patient Funds		465,740
Notes Payable		<u>364,584</u>

**Total Current Liabilities** \$ 1,415,671

**Long-Term Liabilities**

**Total Long-Term Liabilities** 0

**Total Liabilities** 1,415,671

**Stockholders' Equity**

Capital Stock	10,000
Retained Earnings	<u>16,339,166</u>

**Total Stockholders' Equity** 16,349,166

**Total Liabilities and Stockholders' Equity** 17,764,837

DRAFT

**PROPOSED STRUCTURE AFTER PURCHASE  
OF 2832 LINDEN BOULEVARD**

Owner of Property  
2832 Linden Boulevard  
Brooklyn, NY 11208

CONOVER KING REALTY, LLC  
45.01% Bruno Goldberg Trust  
45.01% Braunstein Family Trust  
9.98% Norman Motechin

Lease

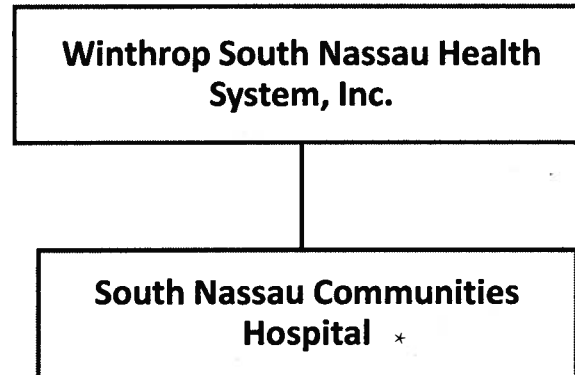
Operator

Oxford Nursing Home, Inc.  
Ownership  
25.15% Livia Goldberg  
9.93% Rochelle Braun  
9.93% Shuly Goldberg  
45.01% Barry Braunstein  
9.98% Norman Motechin

Conover King will apply for the mortgage as Borrower.

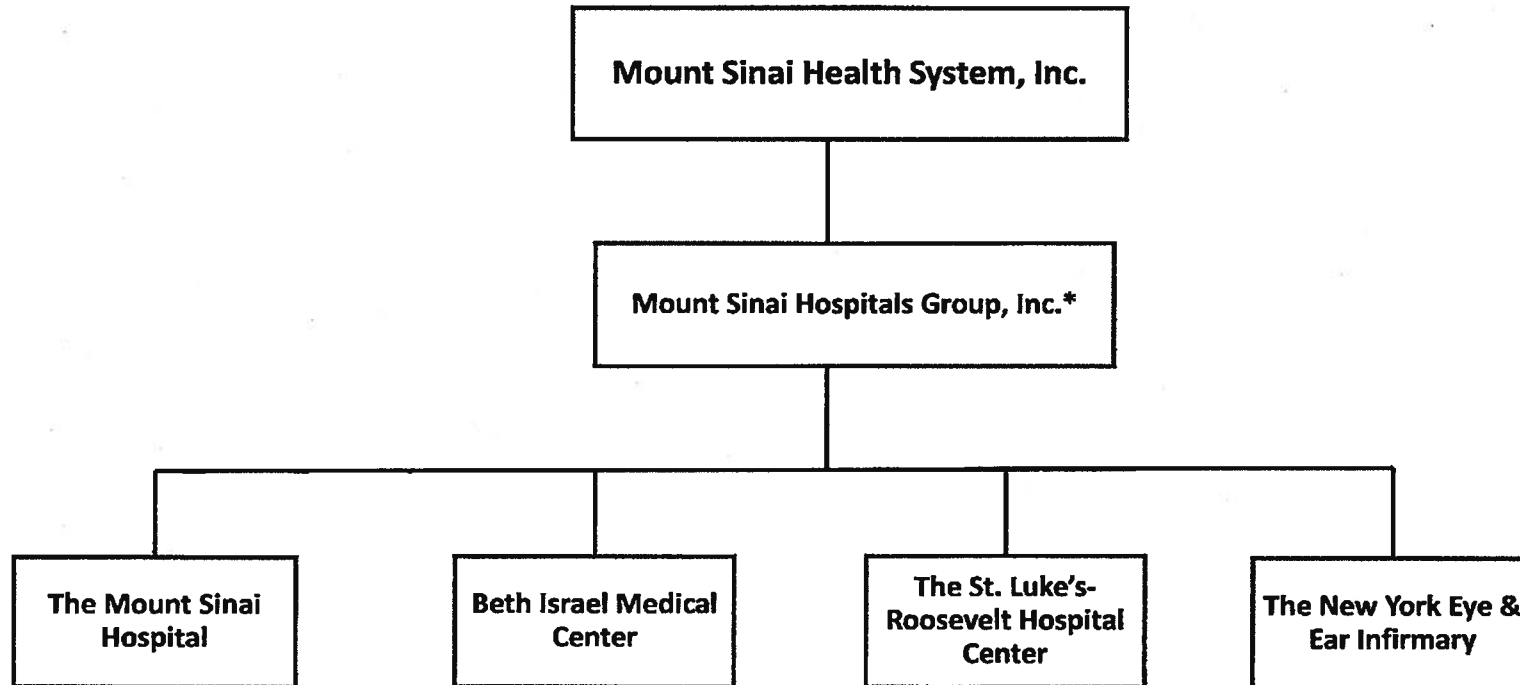
The rent will provide sufficient funds to meet debt service obligations.

## Pre-Transaction Organizational Chart



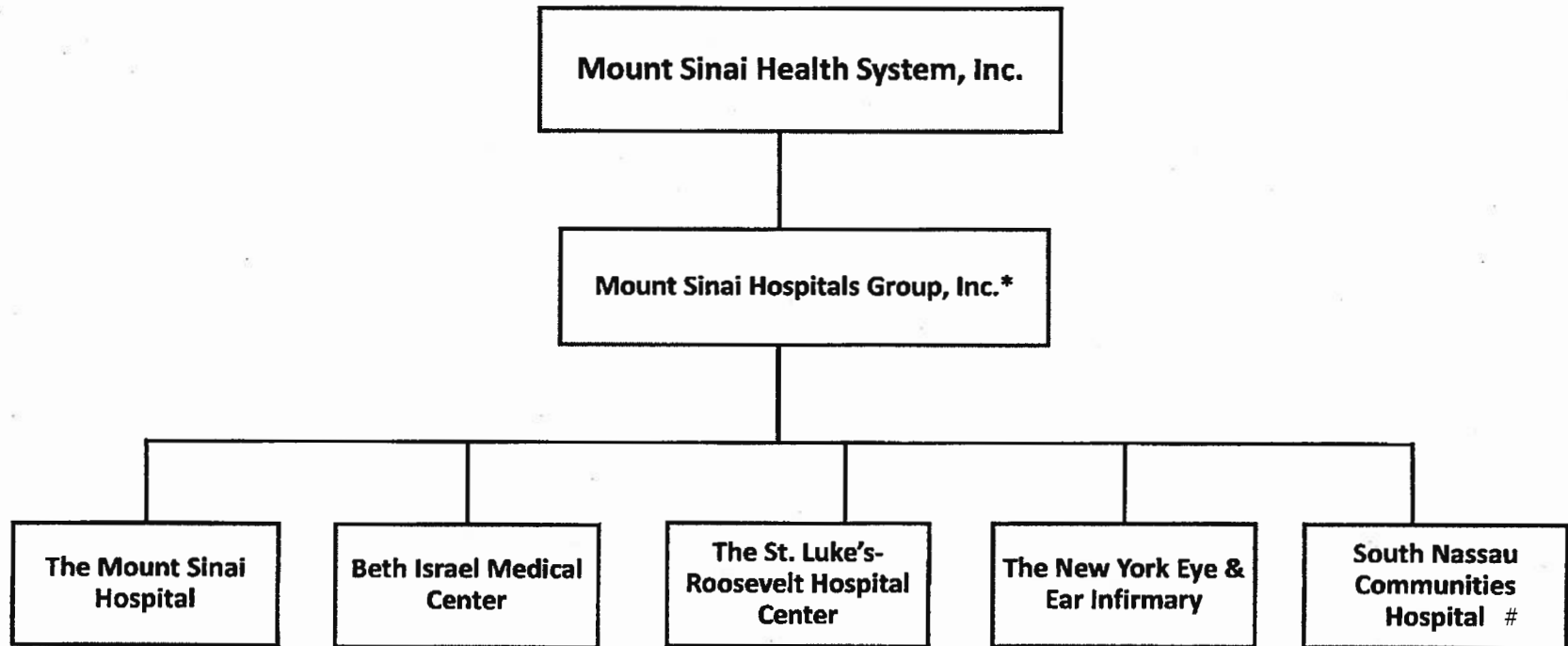
\* Operates Hospital based CHHA (Op Cert# 2950600) & LTHHCP ( Op Cert# 2950900L) under South Nassau Hospital

### Pre-Transaction Organizational Chart



\*Active parent of The Mount Sinai Hospital, Beth Israel Medical Center, The St. Luke's-Roosevelt Hospital Center and The New York Eye & Ear Infirmary

## Proposed Post-Transaction Organizational Chart



\*Active parent of The Mount Sinai Hospital, Beth Israel Medical Center, The St. Luke's-Roosevelt Hospital Center, The New York Eye & Ear Infirmary and South Nassau Communities Hospital

# Operates hospital based CHHA (Op Cert# 2950600) and LTHHCP (Op Cert# 2950900L) under South Nassau Hospital



The Mount Sinai Hospital

Consolidated Statements of Financial Position

	<b>December 31</b>	
	<b>2017</b>	<b>2016</b>
	<i>(In Thousands)</i>	
<b>Assets</b>		
<b>Current assets:</b>		
Cash and cash equivalents	\$ 681,241	\$ 263,652
Short-term investments	234,236	173,244
Total cash and cash equivalents and short-term investments	<u>915,477</u>	436,896
Patient accounts receivable, less allowance for doubtful accounts (2017 – \$28,772; 2016 – \$27,402)	314,869	299,391
Professional liabilities insurance recoveries receivable	39,685	37,083
Assets limited as to use, current portion	36,207	22,543
Due from related organizations, net, current portion	217,870	255,470
Inventories	36,092	35,324
Other current assets	44,290	48,442
Total current assets	<u>1,604,490</u>	1,135,149
Pooled investments	861,765	733,549
Other investments	218,541	193,260
Assets limited as to use, less current portion	39,818	76,456
Due from related organizations, less current portion	153,047	3,294
Other assets	39,427	36,701
Professional liabilities insurance recoveries receivable, less current portion	224,882	210,137
Property, plant, and equipment, net	950,670	942,495
Total assets	<u><u>\$ 4,092,640</u></u>	<u><u>\$ 3,331,041</u></u>

Mount Sinai

Project# 181251  
BFA Attachment-C cont

	<b>December 31</b>	
	<b>2017</b>	<b>2016</b>
	<i>(In Thousands)</i>	
<b>Liabilities and net assets</b>		
<b>Current liabilities:</b>		
Accounts payable and accrued expenses	\$ 185,931	\$ 171,193
Accrued salaries and related liabilities	122,250	129,508
Accrued interest payable	8,430	7,765
Accrued construction and capital asset liabilities	10,733	7,117
Current portion of long-term debt	32,370	32,671
Professional liabilities, current portion	39,685	37,083
Other current liabilities	139,166	71,949
<b>Total current liabilities</b>	<b>538,565</b>	<b>457,286</b>
Long-term debt, less current portion	875,899	567,230
Accrued postretirement benefits	16,602	16,085
Deferred gain on transfer of real estate	27,055	27,055
Professional liabilities, less estimated current portion	224,882	210,137
Other liabilities	392,036	400,766
<b>Total liabilities</b>	<b>2,075,039</b>	<b>1,678,559</b>
<b>Commitments and contingencies</b>		
<b>Net assets:</b>		
Unrestricted	1,829,431	1,488,878
Temporarily restricted	104,359	80,845
Permanently restricted	83,811	82,759
<b>Total net assets</b>	<b>2,017,601</b>	<b>1,652,482</b>
<b>Total liabilities and net assets</b>	<b>\$ 4,092,640</b>	<b>\$ 3,331,041</b>

The Mount Sinai Hospital

Consolidated Statements of Operations

	Year Ended December 31	
	2017	2016
	<i>(In Thousands)</i>	
<b>Operating revenue</b>		
Net patient service revenue	\$ 2,538,250	\$ 2,267,985
Provision for bad debts	(25,030)	(16,059)
Net patient service revenue, less provision for bad debts	2,513,220	2,251,926
Investment income and net realized gains on sales of securities	33,407	25,666
Contributions	716	245
Other revenue	82,958	65,110
Net assets released from restrictions for operations	28,899	25,310
Total operating revenue before other items	2,659,200	2,368,257
<b>Operating expenses</b>		
Salaries and wages	937,165	838,868
Employee benefits	251,916	225,882
Supplies and other	1,127,691	1,006,097
Depreciation	109,229	111,180
Interest and amortization	28,032	26,494
Total operating expenses before other items	2,454,033	2,208,521
Excess of operating revenue over operating expenses before other items	205,167	159,736

The Mount Sinai Hospital

Consolidated Statements of Operations (continued)

	<b>Year Ended December 31</b>	
	<b>2017</b>	<b>2016</b>
	<i>(In Thousands)</i>	
Excess of operating revenue over operating expenses before other items	\$ 205,167	\$ 159,736
<b>Other items</b>		
Net change in unrealized gains and losses on investments and change in value of alternative investments	51,441	14,543
Third-party reimbursement settlements and other provisions	66,548	65,705
Gain on sale of clinical outreach laboratory business	96,993	-
Net change in participation in captive insurance program	41,685	20,749
Excess of revenue over expenses	<u>461,834</u>	<u>260,733</u>
<b>Other changes in unrestricted net assets</b>		
Transfers to affiliates	(126,596)	(46,821)
Distribution from MSMC Residential Realty LLC	164	-
Equity in income from related party	474	647
Equity in income from related party and distributions transferred to the Icahn School of Medicine at Mount Sinai	(638)	(647)
Net assets released from restrictions for capital asset acquisitions	5,763	9,777
Change in postretirement liability to be recognized in future periods	(448)	822
Total other changes in unrestricted net assets	<u>(121,281)</u>	<u>(36,222)</u>
Net increase in unrestricted net assets	<u>\$ 340,553</u>	<u>\$ 224,511</u>

The Mount Sinai Hospital

Consolidated Statements of Cash Flows

	Year Ended December 31	
	2017	2016
	<i>(In Thousands)</i>	
<b>Operating activities</b>		
Change in net assets	\$ 365,119	\$ 233,882
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	109,229	111,180
Provision for bad debts	25,030	16,059
Amortization of deferred financing costs, bond premium, and discount	(354)	(545)
Net change in unrealized gains and losses on investments and change in value of alternative investments	(51,441)	(14,543)
Net donor-restricted contributions	(60,228)	(44,458)
Equity in income from related party	(474)	(647)
Transfers to affiliates	126,596	46,821
Gain on sale of clinical outreach laboratory business	(96,993)	-
Distribution from MSMC Residential Realty LLC	(164)	-
Changes in:		
Patient accounts receivable	(40,508)	(52,632)
Other operating assets	660	(21,824)
Due from related organizations	(111,679)	(55,581)
Accounts payable and accrued expenses	14,738	4,328
Accrued salaries and related liabilities	(7,258)	29,889
Accrued interest payable	665	(512)
Other operating liabilities	62,620	19,469
Net cash provided by operating activities	335,558	270,886
<b>Investing activities</b>		
Acquisitions of property, plant, and equipment, net	(117,404)	(128,482)
Increase in investments, net	(163,048)	(51,610)
Decrease (increase) in assets limited as to use	22,974	(29,899)
Transfers to affiliates	(126,596)	(46,821)
Proceeds from sale of clinical outreach laboratory business	96,993	-
Distribution from MSMC Residential Realty LLC	164	-
Net cash used in investing activities	(286,917)	(256,812)
<b>Financing activities</b>		
Proceeds from issuance of long term debt	382,000	-
Proceeds from loan	-	40,000
Payment of deferred financing costs	(3,241)	(57)
Principal payments on long-term debt	(70,039)	(29,727)
Net donor-restricted contributions	60,228	44,458
Net cash provided by financing activities	368,948	54,674
Net increase in cash and cash equivalents	417,589	68,748
Cash and cash equivalents at beginning of year	263,652	194,904
Cash and cash equivalents at end of year	\$ 681,241	\$ 263,652
<b>Non-cash investing and financing transaction</b>		
Assets acquired under capital leases	\$ -	\$ 9,751

See accompanying notes.

The Mount Sinai Hospital

Consolidated Statements of Changes in Net Assets

	<b>Unrestricted</b>	<b>Temporarily Restricted</b>	<b>Permanently Restricted</b>	<b>Total</b>
	<i>(In Thousands)</i>			
Net assets at beginning of year				
January 1, 2016	\$ 1,264,367	\$ 76,942	\$ 77,291	\$ 1,418,600
Net increase in unrestricted net assets	224,511	-	-	224,511
Donor restricted contributions, net	-	38,990	5,468	44,458
Net assets released from restrictions for operations	-	(25,310)	-	(25,310)
Net assets released from restrictions for capital asset acquisitions	-	(9,777)	-	(9,777)
Total change in net assets	<u>224,511</u>	<u>3,903</u>	<u>5,468</u>	<u>233,882</u>
Net assets at end of year				
December 31, 2016	1,488,878	80,845	82,759	1,652,482
Net increase in unrestricted net assets	340,553	-	-	340,553
Donor restricted contributions, net	-	58,176	1,052	59,228
Net assets released from restrictions for operations	-	(28,899)	-	(28,899)
Net assets released from restrictions for capital asset acquisitions	-	(5,763)	-	(5,763)
Total change in net assets	<u>340,553</u>	<u>23,514</u>	<u>1,052</u>	<u>365,119</u>
Net assets at end of year				
December 31, 2017	<u>\$ 1,829,431</u>	<u>\$ 104,359</u>	<u>\$ 83,811</u>	<u>\$ 2,017,601</u>

South Nassau Communities Hospital  
and Subsidiaries

Consolidated Statements of Financial Position

	December 31	
	2017	2016
<b>Assets</b>		
Current assets:		
Cash and cash equivalents	\$ 20,104,751	\$ 9,779,507
Investments	160,930,067	139,135,491
Current portion of assets whose use is limited		
Patient receivables, less allowance for uncollectibles of \$40,132,000 in 2017 and \$36,147,000 in 2016	27,967,950	20,609,650
Other current assets	70,674,716	61,139,584
Total current assets	<u>294,133,383</u>	<u>242,674,102</u>
Assets whose use is limited	58,737,990	99,542,213
Long-term investments	6,119,775	3,815,354
Other long-term assets	1,135,531	1,135,531
Insurance claims receivable	1,820,816	1,435,605
Property, plant, and equipment, net	336,397,140	309,303,729
Total assets	<u>\$ 698,344,635</u>	<u>\$ 657,906,534</u>

	December 31	
	2017	2016
<b>Liabilities and net assets</b>		
<b>Current liabilities:</b>		
Amounts due under lines of credit	\$ 47,000,000	\$ 25,000,000
Accounts payable	21,350,305	21,072,408
Accrued expenses	45,804,305	38,997,470
Accrued payroll and vacation	30,571,041	27,114,757
Current portion of long-term debt and capital lease obligations	4,599,758	3,906,871
Current portion of accrued nonretirement benefits other than pension	208,000	166,000
Current portion of estimated professional and general liabilities	10,460,000	11,980,000
Deferred grant revenue	15,708,550	6,739,000
Estimated third-party payor liabilities	6,230,000	7,750,000
<b>Total current liabilities</b>	<b>181,931,959</b>	<b>142,726,506</b>
Long-term debt and capital lease obligations, net of current portion	84,370,700	86,964,900
Accrued pension payable	69,423,784	56,902,515
Accrued postretirement benefits other than pension, net of current portion	3,175,000	2,995,000
Estimated professional and general liabilities, net of current portion	30,070,000	34,820,030
Deferred grant revenue, net of current portion	52,454,501	64,722,183
Insurance claims payable	1,820,816	1,435,605
Other liabilities	2,232,406	2,412,685
<b>Total liabilities</b>	<b>425,479,166</b>	<b>392,979,424</b>
<b>Commitments and contingencies</b>		
<b>Net assets:</b>		
Unrestricted	266,745,693	261,111,756
Temporarily restricted	5,091,700	2,787,278
Permanently restricted	1,028,076	1,028,076
<b>Total net assets</b>	<b>272,865,469</b>	<b>264,927,110</b>
<b>Total liabilities and net assets</b>	<b>\$ 698,344,635</b>	<b>\$ 657,906,534</b>



South Nassau Communities Hospital  
and Subsidiaries

Consolidated Statements of Activities

	Year Ended December 31	
	2017	2016
Operating revenue:		
Net patient service revenue, net of contractual allowances and other discounts	\$ 522,422,432	\$ 500,861,944
Provision for bad debts	(17,944,338)	(12,662,626)
Net patient service revenue, less provision for bad debts	504,478,094	488,199,318
Other revenue	16,507,050	17,573,294
Total operating revenue	520,985,144	505,772,612
Operating expenses:		
Salaries and wages	259,737,887	244,082,802
Employee benefits	56,593,182	50,864,056
Supplies and other expenses	175,347,261	170,997,427
Interest expense	3,526,555	3,626,886
Provision for depreciation and amortization	28,365,233	29,106,312
Total operating expenses	523,570,118	498,677,483
Operating (loss) income	(2,584,974)	7,095,129
Nonoperating gains and losses:		
Net nonoperating investment gains	18,173,127	6,139,363
Unrestricted contributions, net of fund raising expenses of \$552,185 in 2017 and \$362,339 in 2016	96,733	4,917
Gain on sale of property	-	2,607,941
Gain related to Long Beach Medical Center transactions	-	2,216,258
Other nonoperating losses	(1,395,502)	(1,274,506)
Excess of revenue and gains over expenses	14,289,384	16,789,102
Net assets released from restrictions for capital asset acquisitions	4,613,983	5,662,463
Pension and postretirement liability adjustments	(13,269,430)	(5,253,183)
Increase in unrestricted net assets	\$ 5,633,937	\$ 17,198,382

South Nassau Communities Hospital  
and Subsidiaries

Consolidated Statements of Changes in Net Assets

Years Ended December 31, 2017 and 2016

	Unrestricted Net Assets	Temporarily Restricted Net Assets	Permanently Restricted Net Assets	Total Net Assets
Balance, January 1, 2016	\$ 243,913,374	\$ 746,621	\$ 1,028,076	\$ 245,688,071
Excess of revenue and gains over expenses	16,789,102	-	-	16,789,102
FEMA capital grant funds earned	-	5,577,482	-	5,577,482
Restricted contributions, net of fund raising expenses	-	2,161,697	-	2,161,697
Net assets released from restrictions for operations	-	(36,059)	-	(36,059)
Net assets released from restrictions for capital asset acquisitions	5,662,463	(5,662,463)	-	-
Pension and postretirement liability adjustments	(5,253,183)	-	-	(5,253,183)
Total changes in net assets	17,198,382	2,040,657	-	19,239,039
Balance, December 31, 2016	261,111,756	2,787,278	1,028,076	264,927,110
Excess of revenue and gains over expenses	14,289,384	-	-	14,289,384
FEMA capital grant funds earned	-	3,298,132	-	3,298,132
Restricted contributions, net of fund raising expenses	-	3,832,665	-	3,832,665
Net assets released from restrictions for operations	-	(212,392)	-	(212,392)
Net assets released from restrictions for capital asset acquisitions	4,613,983	(4,613,983)	-	-
Pension and postretirement liability adjustments	(13,269,430)	-	-	(13,269,430)
Total changes in net assets	5,633,937	2,304,422	-	7,938,359
Balance, December 31, 2017	<u>\$ 266,745,693</u>	<u>\$ 5,091,700</u>	<u>\$ 1,028,076</u>	<u>\$ 272,865,469</u>

See accompanying notes.

South Nassau Communities Hospital  
and Subsidiaries

Consolidated Statements of Cash Flows

	Year Ended December 31	
	2017	2016
<b>Operating activities</b>		
Changes in net assets	\$ 7,938,359	\$ 19,239,039
Adjustments to reconcile changes in net assets to net cash provided by operating activities:		
Amortization of deferred financing fees, bond premium, and discount	(598,296)	(626,786)
Provision for depreciation	28,252,609	28,839,984
Loss on disposal of assets and abandoned projects	662,194	266,328
Nonoperating net investment gain	(18,173,127)	(6,139,363)
Gain on sale of property	-	(2,607,941)
FEMA capital grant funds earned	(3,298,132)	(5,577,482)
Restricted contributions, net of fund raising expenses	(3,832,665)	(2,161,697)
Changes in operating assets and liabilities:		
Accounts receivable	(9,535,132)	(8,427,811)
Other assets (current and long-term)	(2,446,029)	4,034,791
Accounts payable and accrued expenses	7,084,732	9,489,901
Accrued payroll and vacation	3,456,284	2,617,337
Estimated third-party payor liabilities	(1,520,000)	(30,000)
Estimated professional and general liabilities	(6,270,030)	2,650,030
Accrued pension and postretirement benefits payable	12,743,269	1,057,708
Other liabilities	(180,279)	(381,914)
Net cash provided by operating activities	<u>14,283,757</u>	<u>42,242,124</u>
<b>Investing activities</b>		
Purchases of property, plant, and equipment	(53,225,955)	(52,773,080)
Proceeds from sale of property	-	6,323,784
Deposits in investments	(3,621,449)	(3,649,491)
Deposits in long-term investments	(3,404,239)	(2,957,019)
Withdrawals from long-term investments	1,099,818	916,362
Deposits in assets whose use is limited	(10,788,394)	(84,060,360)
Withdrawals and transfers from assets whose use is limited	44,234,317	11,391,037
Net cash used in investing activities	<u>(25,705,902)</u>	<u>(124,808,767)</u>

South Nassau Communities Hospital  
 and Subsidiaries

Consolidated Statements of Cash Flows (continued)

	<b>Year Ended December 31</b>	
	<b>2017</b>	<b>2016</b>
<b>Financing activities</b>		
Proceeds from line of credit	\$ 32,000,000	\$ 20,000,000
Payments on line of credit	(10,000,000)	(15,000,000)
Proceeds from issuance of long-term debt	-	8,480,000
Principal payments on long-term debt	(4,085,276)	(3,505,000)
Proceeds from FEMA capital grant	-	77,038,665
Proceeds from restricted contributions, net of fund raising expenses	3,832,665	2,161,697
Net cash provided by financing activities	<u>21,747,389</u>	<u>89,175,362</u>
Net increase in cash and cash equivalents	10,325,244	6,608,719
Cash and cash equivalents at beginning of year	9,779,507	3,170,788
Cash and cash equivalents at end of year	<u>\$ 20,104,751</u>	<u>\$ 9,779,507</u>
<b>Supplemental disclosure of cash flow information</b>		
Cash paid for interest	\$ 4,829,704	\$ 4,321,108
Assets acquired under capital lease obligations	<u>\$ 2,782,259</u>	<u>\$ -</u>

**Queens Endoscopy ASC, LLC**  
**Balance Sheets**  
**December 31, 2016 and 2015**

	2016	2015
<b>Assets</b>		
<b>Current assets</b>		
Cash	\$ 773,160	\$ 114,782
Accounts receivable, net	1,602,444	2,257,417
Prepaid expenses and other current assets	136,114	122,118
<b>Total current assets</b>	<b>2,511,718</b>	<b>2,494,317</b>
<b>Property and equipment, net</b>	<b>2,822,697</b>	<b><u>3,351,736</u></b>
<b>Other assets</b>		
Security deposits	69,167	69,167
Deferred leasing costs, net	18,888	20,555
<b>Total other assets</b>	<b>88,055</b>	<b>89,722</b>
<b>Total assets</b>	<b>\$ 5,422,470</b>	<b>\$ 5,935,775</b>
<b>Liabilities and Members' Equity</b>		
<b>Current liabilities</b>		
Bank line of credit	\$ 949,910	\$ 899,910
Term loans, current portion	892,686	848,572
Capital lease payable, current portion	127,263	124,606
Accounts payable and accrued expenses	656,152	702,390
Income tax payable	114,790	43,000
Deferred tax liabilities, current portion	40,000	66,000
<b>Total current liabilities</b>	<b>2,780,801</b>	<b>2,684,478</b>
<b>Long-term liabilities</b>		
Term loans, net of current portion	82,293	974,979
Capital lease payable, net of current portion	32,237	159,499
Deferred rent payable	247,622	215,131
Deferred lease incentives	264,277	287,944
Deferred tax liabilities, net of current portion	24,000	37,000
<b>Total long-term liabilities</b>	<b>650,429</b>	<b>1,674,553</b>
<b>Total liabilities</b>	<b>3,431,230</b>	<b>4,359,031</b>
<b>Members' equity</b>	<b>1,991,240</b>	<b>1,576,744</b>
<b>Total liabilities and members' equity</b>	<b>\$ 5,422,470</b>	<b>\$ 5,935,775</b>

**Queens Endoscopy ASC, LLC**  
**Statements of Income and Members' Equity**  
**For the Years Ended December 31, 2016 and 2015**

	2016	2015
<b>Revenues, net</b>		
Facility service revenue, net	\$ 10,953,545	\$ 10,195,770
Anesthesia revenue, net	3,812,375	3,800,101
<b>Net revenues</b>	<u>14,765,920</u>	<u>13,995,871</u>
<b>Operating expenses</b>		
Compensation and related costs	3,702,415	3,529,453
Medical supplies, waste and linens	932,589	851,703
Occupancy	662,624	681,765
Administrative	1,544,699	1,616,085
Financial	146,667	183,838
Depreciation and amortization	590,422	648,421
<b>Total operating expenses</b>	<u>7,579,416</u>	<u>7,511,265</u>
<b>Income from operations before provision for income taxes</b>	7,186,504	6,484,606
<b>Provision for income taxes</b>	272,000	246,000
<b>Net income</b>	6,914,504	6,238,606
<b>Members' equity - beginning</b>	1,576,744	1,137,890
<b>Receipt of subscription receivable from member</b>		348,240
<b>Members' distributions</b>	<u>(6,500,008)</u>	<u>(6,147,992)</u>
<b>Members' equity - ending</b>	<u>\$ 1,991,240</u>	<u>\$ 1,576,744</u>

**Queens Endoscopy ASC, LLC**  
**Balance Sheets**  
**December 31, 2017 and 2016**

	<b>2017</b>	<b>2016</b>
<b>Assets</b>		
<b>Current assets</b>		
Cash	\$ 539,238	\$ 773,160
Accounts receivable, net	1,094,526	1,602,444
Prepaid expenses and other current assets	100,889	136,114
<b>Total current assets</b>	<b>1,734,653</b>	<b>2,511,718</b>
<b>Property and equipment, net</b>	<b>2,294,327</b>	<b>2,822,697</b>
<b>Other assets</b>		
Security deposits	69,167	69,167
Deferred leasing costs, net	17,221	18,888
<b>Total other assets</b>	<b>86,388</b>	<b>88,055</b>
<b>Total assets</b>	<b>\$ 4,115,368</b>	<b>\$ 5,422,470</b>
<b>Liabilities and Members' Equity</b>		
<b>Current liabilities</b>		
Bank line of credit	\$	\$ 949,910
Term loans, current portion	82,293	892,686
Capital lease payable, current portion	32,237	127,263
Accounts payable and accrued expenses	484,226	656,152
Income tax payable	41,712	114,790
<b>Total current liabilities</b>	<b>640,468</b>	<b>2,740,801</b>
<b>Long-term liabilities</b>		
Bank line of credit	949,910	
Term loans, net of current portion		82,293
Capital lease payable, net of current portion		32,237
Deferred rent payable	280,114	247,622
Deferred lease incentives	240,611	264,277
Deferred tax liabilities	38,000	64,000
<b>Total long-term liabilities</b>	<b>1,508,635</b>	<b>690,429</b>
<b>Total liabilities</b>	<b>2,149,103</b>	<b>3,431,230</b>
<b>Members' equity</b>	<b>1,966,265</b>	<b>1,991,240</b>
<b>Total liabilities and members' equity</b>	<b>\$ 4,115,368</b>	<b>\$ 5,422,470</b>

**Queens Endoscopy ASC, LLC**  
**Statements of Income and Members' Equity**  
**For the Years Ended December 31, 2017 and 2016**

	2017	2016
<b>Revenues, net</b>		
Facility service revenue, net	\$ 10,829,880	\$ 10,953,545
Anesthesia revenue, net	3,557,015	3,812,375
<b>Net revenues</b>	14,386,895	14,765,920
<b>Operating expenses</b>		
Compensation and related costs	3,929,336	3,702,415
Medical supplies, waste and linens	971,606	932,589
Occupancy	614,774	662,624
Administrative	1,718,372	1,544,699
Financial	105,172	146,667
Depreciation and amortization	572,726	590,422
<b>Total operating expenses</b>	7,911,986	<u>7,579,416</u>
<b>Income from operations before provision for income taxes</b>	6,474,909	7,186,504
<b>Provision for income taxes</b>	<u>249,880</u>	272,000
<b>Net income</b>	6,225,029	6,914,504
<b>Members' equity - beginning</b>	1,991,240	1,576,744
<b>Members' distributions</b>	<u>(6,250,004)</u>	<u>(6,500,008)</u>
<b>Members' equity - ending</b>	\$ 1,966,265	\$ 1,991,240



**QEASC LLC**  
**Summary Balance Sheet**

As of April 30, 2018  
Apr 30, 18

**ASSETS**

Current Assets

Checking/Savings 614,093.02

Other Current Assets 74,933.17

Total Current Assets 689,026.19

Fixed Assets 1,116,892.41

Other Assets 639,130.26

**TOTAL ASSETS** 2,445,048.86

**LIABILITIES & EQUITY**

Liabilities

Current Liabilities

Accounts Payable -37,084.67

Credit Cards 3,527.09

Other Current Liabilities 56,541.30

Total Current Liabilities 22,983.72

Long Term Liabilities 947,675.51

Total Liabilities 970,659.23

Equity 1,474,389.63

**TOTAL LIABILITIES & EQUITY** 2,445,048.86

**QEASC LLC**  
**Profit & Loss**  
**January through April 2018**  
Jan - Apr 18

Ordinary Income/Expense	
Income	
500.00 · Revenue	4,286,032.31
Total Income	<u>4,286,032.31</u>
Gross Profit	4,286,032.31
Expense	
600.00 · Drugs & Medical Supplies	226,136.49
700.00 · Payroll and Benefits	703,089.26
705.00 · Anesthesiology Payroll Costs	495,096.10
710.00 · Occupancy	190,050.48
720.00 · Revenue Cycle Management	163,059.80
730.00 · General and Administrative	139,517.54
740.00 · Professional Fees	<u>138,606.66</u>
Total Expense	<u>2,055,556.33</u>
Net Ordinary Income	2,230,475.98
Other Income/Expense	
Other Expense	
732.15 · Taxes	113,712.00
900.00 · Equipmnt Rental/Maintenance Agr	39,071.62
910.00 · Interest Expense	<u>34,379.71</u>
Total Other Expense	<u>187,163.33</u>
Net Other Income	<u>-187,163.33</u>
Net Income	<u>2,043,312.65</u>

Project #181152  
BFA Attachment A

Roosevelt Surgery Center, LLC	Current	Establishment
	Percentage	Percentage
	Ownership	Ownership
	CON 181152	CON 101134
Brian G. Brazzo, M.D.	1.5064%	1.5385%
Eric J. Cohen, M.D.	1.5064%	1.5385%
Jeffrey V. Dennksian, M.D.	1.5064%	1.5385%
Alison Estabrook, M.D.	1.5064%	1.5385%
Douglas B. Friedrich, M.D.	1.5064%	1.5385%
Gatsby Sprockets, LLC	3.6153%	-----
Jeffrey Kaplan M.D. 50%		
Matthew Grimm M.D. 50%		
Peter Geller, M.D.	1.2051%	-----
David Gorman, M.D.	1.5064%	1.5385%
Paul Boulos-Elias Hobeika, M.D.	1.5064%	1.5385%
Jacqueline E. Jones, M.D.	1.5064%	1.5385%
Elias Kassapidis, M.D.	1.5064%	1.5385%
Maurice M. Khosh, M.D.	1.5064%	1.5385%
Kim Jaehon, M.D.	1.2051%	-----
Vandana Kumra, M.D.	1.5064%	1.5385%
Dalia S. Nagel, M.D.	1.5064%	1.5385%
Isaac Namdar, M.D.	1.5064%	1.5385%
Gregory J. Pamel, M.D.	1.5064%	1.5385%
Louis P. Re, M.D.	1.5064%	1.5385%
Sharon Rosenbaum Smith	1.5064%	-----
Benjamin E. Rosenstadt, M.D.	1.5064%	1.5385%
Michael A. Rothschild, M.D.	1.5064%	1.5385%
VWilliam Schell, M.D.	1.5064%	1.5385%
Andrew P. Schwartz, M.D.	1.5064%	1.5385%
Julius Shulman M.D.	1.5064%	1.5385%
Paul I. Tartter, M.D.	1.5064%	1.5385%
George J. Zambetti M.D.	1.5064%	1.5385%
Thomas J. Bombardier, M.D.	5.9328%	6.0000%
Brent W. Lambert, M.D.	5.9328%	6.0000%
Luke M. Lambert	1.9776%	2.0000%
George A. Violin, M.D.	5.9328%	6.0000%
Yosef Krespi, M.D.	-----	1.5385%
Jonathan Levin, M.D.	-----	1.5385%
Sharon Rosenbaum Smith, M.D.	-----	1.5385%
Raymond L. - T. Yung, M.D.	-----	1.5385%
Mount Sinai Ambulatory Ventures Inc. *	39.5518%	-----
Beth Israel Ambulatory Care Services Corp.	-----	40.0000%
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>

\* Formerly known as Beth Israel Ambulatory Care Services Corporation, Inc.

Roosevelt Surgery Center, LLC  
d/b/a Manhattan Surgery Center

Balance Sheet

December 31, 2016

Assets

Current:

Cash and cash equivalents	\$ 95,106
Net patient accounts receivable	1,904,327
Inventory	393,851

**Total Current Assets** 2,393,284

Other Assets 42,759

Security Deposits 299,743

**Fixed Assets, Net** 6,322,538

**Total Assets** \$9,058,324

Liabilities and Members' Equity

Current Liabilities:

Accounts payable and accrued expenses	\$1,323,044
Accrued salaries and benefits	87,354
Due to third parties	61,608
Current portion of long-term debt	1,477,770
Current portion of capital lease obligations	123,833
Current portion of redemption notes payable	20,875
Current portion of deferred lease incentive	43,874
Loans payable - related parties	180,967

**Total Current Liabilities** 3,319,325

Long-Term Liabilities:

Long-term debt, net of current portion and deferred issuance costs	2,039,667
Capital lease obligations, net of current portion	92,960
Redemption notes payable, net of current portion	25,845
Deferred lease incentive, net of current portion	636,170
Deferred rent	1,017,845

**Total Long-Term Liabilities** 3,812,487

**Total Liabilities** 7,131,812

Commitments and Contingencies

**Members' Equity** 1,926,512

**Total Liabilities and Members' Equity** \$9,058,324

See accompanying notes to financial statements.

**Roosevelt Surgery Center, LLC  
d/b/a Manhattan Surgery Center**

**Statement of Income and Members' Equity**

*Year ended December 31, 2016*

<b>Revenue:</b>	
Net patient service revenue	\$12,502,305
Femto laser revenue	392,865
<b>Total Revenue</b>	<b>12,895,170</b>
<b>Operating Expenses</b>	<b>12,140,404</b>
<b>Income From Operations</b>	<b>754,766</b>
<b>Other Expense:</b>	
Interest expense	324,245
<b>Net Income</b>	<b>430,521</b>
<b>Members' Equity Beginning of the Year</b>	<b>687,956</b>
<b>Members' Contributions</b>	<b>888,233</b>
<b>Members' Distributions</b>	<b>(80,198)</b>
<b>Members' Equity, End of Year</b>	<b>\$ 1,926,512</b>

**Balance Sheet**  
As of December 31, 2017

CON#181152  
BFA Attachment C

	Dec 31, 17	Dec 31, 16
<b>ASSETS</b>		
<b>Current Assets</b>		
Checking/Savings		
Chase - EFT	11,021.80	2.64
1001 - Chase - Checking	(10,408.99)	106,323.99
1000 - Cash - Checking	0.00	(11,228.55)
1010 - Cash - Money Market	0.00	6.25
<b>Total Checking/Savings</b>	812.81	95,106.33
Accounts Receivable		
1100 - Accounts Receivable	18,106,319.00	11,999,284.98
1120 - A/R Allowance	(15,838,112.99)	(10,094,958.07)
<b>Total Accounts Receivable</b>	2,268,206.01	1,904,326.91
Other Current Assets		
1180 - Inventory	357,350.91	393,850.91
<b>Total Other Current Assets</b>	357,350.91	393,850.91
<b>Total Current Assets</b>	2,626,169.73	2,393,284.13
<b>Fixed Assets</b>		
1520 - Equipment	3,577,616.87	3,517,677.27
1525 - Computers / Software	382,234.44	354,346.39
1530 - Furniture / Fixtures	116,056.62	110,164.80
1540 - Leasehold Improvements	5,846,804.71	5,846,804.71
1620 - Accum Deprec - Equipment	(2,408,744.18)	(1,885,874.30)
1625 - Accum Deprec - Computers / Soft	(278,563.61)	(225,942.74)
1630 - Accum Deprec - Furniture / Fixt	(76,258.98)	(59,878.45)
1640 - Accum Deprec - Leasehold Improv	(1,619,802.45)	(1,325,158.95)
<b>Total Fixed Assets</b>	5,543,343.52	6,322,537.73
<b>Other Assets</b>		
1725 - A/A Lease Costs	(10,088.00)	(8,088.00)
1716 - A/A Financing Fees	(31,930.00)	(25,208.00)
1810 - Lease Costs	50,828.85	50,828.65
1805 - Financing Costs	40,332.00	40,332.00
1800 - Security Deposits	299,743.00	299,743.00
<b>Total Other Assets</b>	348,866.65	357,825.65
<b>TOTAL ASSETS</b>	8,618,399.90	9,073,447.51
<b>LIABILITIES &amp; EQUITY</b>		
<b>Liabilities</b>		
<b>Current Liabilities</b>		
Accounts Payable		
2000 - Accounts Payable	957,830.35	1,132,440.90
<b>Total Accounts Payable</b>	957,830.35	1,132,440.90
Credit Cards		
1003 - Chase Credit Card	25,468.18	6,813.12
<b>Total Credit Cards</b>	25,468.18	6,813.12
Other Current Liabilities		
2330 - Accrued NYC Commercial Rent Tax	2,445.00	2,286.74
2606 - CP FEMTO Laser Payable	97,005.09	89,544.00
2356 - CP - Due to Members	0.00	14,434.16
2340 - Accrued Payroll	80,473.87	65,418.00
2601 - CP of Deferred Lease Incentive	43,874.00	43,874.00
2355 - Due to Members	0.00	15,507.88
2020 - Accrued Expenses	87,205.07	181,503.16
2350 - Accrued PTO Expense	28,292.58	21,936.27
2265 - Redemption Loan CP - Levin	3,265.97	3,323.08
2266 - Redemption Loan CP - Yung	3,723.07	3,118.00
2206 - CP of Siemens Equipment	478,615.00	458,592.00
2201 - CP of Siemens Construction	956,438.00	916,795.00
2031 - CP of de lage Landen	10,381.94	41,940.31

**Balance Sheet**  
As of December 31, 2017

	<u>Dec 31, 17</u>	<u>Dec 31, 16</u>
2115 - Loan Payable Partners	0.00	180,987.02
2080 - Refunds Payable	25,131.22	81,608.34
<b>Total Other Current Liabilities</b>	<u>1,814,849.81</u>	<u>2,097,847.94</u>
<b>Total Current Liabilities</b>	<b>2,798,148.34</b>	<b>3,237,101.96</b>
<b>Long Term Liabilities</b>		
2203 - Loan Pay - Siemens WC	0.00	105,383.27
2808 - Lease Payable - Femto Laser	0.00	79,133.62
2206 - Loan Pay - Siemens Equipment	336,032.68	852,686.51
2200 - Loan Pay - Siemens Construction	245,688.14	1,202,103.69
2030 - Lease Payable - de laga Landen	0.00	(4,467.12)
2068 - Redemption Loan LP - Levin	0.10	2,891.14
2066 - Redemption Loan LP - Yung	0.00	7,446.22
2800 - Deferred Lease Incentive	592,296.00	636,170.00
2600 - Deferred Rent	1,150,434.57	1,017,846.14
<b>Total Long Term Liabilities</b>	<u>2,323,431.48</u>	<u>3,899,192.47</u>
<b>Total Liabilities</b>	<b>5,121,579.83</b>	<b>7,136,294.43</b>
<b>Equity</b>		
3000 - Members Equity	1,462,079.03	1,510,864.81
3100 - Distributions to Members	(0.08)	(17,169.90)
3900 - Retained Earnings	443,658.17	2,500.46
Net Income	1,491,082.95	441,157.71
<b>Total Equity</b>	<u>3,396,820.07</u>	<u>1,937,153.08</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><b>8,518,399.90</b></u>	<u><b>9,073,447.51</b></u>

**Profit Loss**  
January through December 2017  
Jan - Dec 17

<b>Ordinary Income/Expense</b>	
<b>Income</b>	
4000 · Facility Fees	13,438,521.43
<b>Total Income</b>	<u>13,438,521.43</u>
<b>Gross Profit</b>	13,438,521.43
<b>Expense</b>	
6290 · Credentialing Expense	8,613.55
6241 · Employee Health Expense	0.00
6430 · Gifts	9,794.20
6875 · Technology Service Agreements	41,324.71
6885 · Staffing Expense	44,693.53
6850 · Subscriptions	944.12
5005 · Medical Supplies	
5006 · Drugs / Pharmaceuticals	419,091.13
5013 · Implants	285,805.55
5007 · IOLs	1,133,472.70
5008 · Instruments / Tools / Re-usable	15,212.75
5012 · Medical Gas	9,867.86
5005 · Medical Supplies - Other	<u>2,881,451.78</u>
<b>Total 5005 · Medical Supplies</b>	4,544,701.77
5020 · Patient Costs Other	31,165.29
6000 · Wages & Benefits	
6010 · Payroll - Medical Staff	3,708,197.94
6020 · Payroll - Business Office Staff	20,441.77
6050 · FICA & Medicare Expense	277,174.54
6080 · SUTA Expense	44,248.55
6070 · FUTA Expense	3,495.11
6240 · Contract Labor / Temp Agency	1,657.60
6320 · Employee Benefits	27,318.52
6460 · Insurance - Health	
Vision	1,175.54
Dental	11,434.19
6460 · Insurance - Health - Other	<u>241,481.91</u>
<b>Total 6460 · Insurance - Health</b>	254,091.64
6465 · 401K	
401k Administrative Fees	2,239.77
401K Loan	0.00
6465 · 401K - Other	<u>0.00</u>
<b>Total 6465 · 401K</b>	2,239.77
6470 · Insurance - Workers Comp	41,439.00



**Profit Loss**  
January through December 2017  
Jan - Dec 17

6700 · Payroll Processing	4,345.42
<b>Total 6000 · Wages &amp; Benefits</b>	<u>4,384,649.78</u>
6100 · Accounting	83,597.40
6120 · Advertising & Promotion	8,143.00
6140 · Bank Charges	2,025.63
6160 · Billing Charges	53,444.93
6200 · Cleaning / Janitorial Services	75,935.00
6220 · Consultants	
6221 Insurance Contracting	36,000.00
6220 · Consultants - Other	28,765.52
<b>Total 6220 · Consultants</b>	<u>64,765.52</u>
6280 · Credit Card Processing Expense	30,206.83
6300 · Education / Seminars	15,313.73
6340 · Entertainment / Meals	10,229.87
6380 · Equipment Rental	21,795.51
6400 · Equipment Maintenance / Repair	77,105.34
6420 · Building Maintenance / Repair	101,328.36
6450 · Insurance - Liability	
Executive Lines Insurance	9,012.00
Medical Professional Liability	33,700.00
6450 · Insurance - Liability - Other	23,048.41
<b>Total 6450 · Insurance - Liability</b>	<u>65,760.41</u>
6480 · Insurance - Other	
Disability	692.00
<b>Total 6480 · Insurance - Other</b>	<u>692.00</u>
6500 · Interest Expense	133,847.91
6580 · Legal & Professional	168,376.11
6600 · Licenses & Permits	7,423.00
6620 · Management Fee Expense	124,471.74
6640 · Miscellaneous Expense	4,526.42
6660 · Office Supply & Expense	61,902.44
6720 · Postage & Delivery	13,522.08
6760 · Rent - Real Estate	743,548.04
6800 · Security	601.00
6820 · Service / Maintenance Contracts	200,701.57
6860 · Taxes - Real Estate	
Commercial Rent Tax	28,323.99
6860 · Taxes - Real Estate - Other	60,576.82
<b>Total 6860 · Taxes - Real Estate</b>	<u>88,900.81</u>
6870 · Taxes - Other	

<u>Highfield Gardens</u>	<u>2018 as of 03/31/2018</u>	<u>2017</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
Current Assets	\$5,994,012	\$5,347,276	\$5,239,901	\$4,414,515	\$3,314,064
Non-Current Assets	\$3,018,968	\$2,977,044	\$2,949,509	2,580,272	2,780,130
Total Assets	\$9,012,980	\$8,324,320	\$8,189,410	\$6,994,787	\$6,094,194
Current Liabilities	\$3,097,430	\$2,896,850	\$3,399,090	3,075,695	2,653,933
Long Term Liabilities	\$394,222	\$432,989	\$505,823	320,761	403,381
Total Liabilities	3,491,652	3,329,839	3,904,913	3,396,456	3,057,314
Net Assets	\$5,521,328	\$4,994,481	\$4,284,497	\$3,598,331	\$3,036,880
Working Capital Position	\$2,896,582	\$2,450,426	\$1,840,811	\$1,338,820	\$660,131
Operating Revenues	\$6,654,844	\$28,652,214	\$28,865,179	\$26,233,017	\$26,180,719
Operating Expenses	\$6,127,997	\$24,097,230	\$24,526,963	22,764,211	22,914,103
Operating Net Income	\$526,847	\$4,554,984	\$4,338,216	\$3,468,806	\$3,266,616

<u>Westchester Center</u>	<u>2018 as of 03/31/2018</u>	<u>2017</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
Current Assets	\$6,510,308	\$6,398,382	\$4,828,138	\$3,852,181	\$4,223,211
Non-Current Assets	\$3,107,942	\$3,319,250	\$3,704,898	4,561,548	4,984,377
Total Assets	\$9,618,250	\$9,717,632	\$8,533,036	\$8,413,729	\$9,207,588
Current Liabilities	\$3,935,585	\$3,908,384	\$4,728,466	3,589,879	4,223,163
Long Term Liabilities	\$266,213	\$268,455	\$1,256,691	2,911,352	3,620,025
Total Liabilities	4,201,798	4,176,839	5,985,157	6,501,231	7,843,188
Net Assets	\$5,416,452	\$5,540,793	\$2,547,879	\$1,912,498	\$1,364,400
Working Capital Position	\$2,574,723	\$2,489,998	\$99,672	\$262,302	\$48
Operating Revenues	\$6,482,740	\$28,495,064	\$26,427,368	\$25,036,321	\$21,980,379
Operating Expenses	\$5,707,081	\$23,459,030	\$22,254,304	21,829,372	20,640,539
Operating Net Income	\$775,659	\$5,036,034	\$4,173,064	\$3,206,949	\$1,339,840

<u>Kaaterskil Operating, Inc.</u>	<u>2018 as of 03/31/2018</u>	<u>2017</u>	<u>2016</u>
Current Assets	\$3,391,268	\$3,473,895	\$3,447,946
Non-Current Assets	\$2,843,944	\$2,894,340	\$3,114,014
Total Assets	\$6,235,212	\$6,368,235	\$6,561,960
Current Liabilities	\$2,366,994	\$2,574,572	\$4,608,191
Long Term Liabilities	\$2,219,227	\$2,432,381	\$1,042,678
Total Liabilities	4,586,221	5,006,953	5,650,869
Net Assets	\$1,648,991	\$1,361,282	\$911,091
Working Capital Position	\$1,024,274	\$899,323	(\$1,160,245)
Operating Revenues	\$3,371,987	\$12,254,620	\$11,656,547
Operating Expenses	\$2,729,572	\$11,676,712	\$10,800,481
Operating Net Income	\$642,415	\$577,908	\$856,066

<u>Pine Haven Home</u>	<u>2018 as of 03/31/2018</u>	<u>2017</u>	<u>2016</u>
Current Assets	\$3,346,665	\$3,572,010	\$3,318,369
Non-Current Assets	\$2,096,371	\$2,185,539	\$116,529
Total Assets	\$5,443,036	\$5,757,549	\$3,434,898
Current Liabilities	\$2,768,383	\$3,542,337	\$997,904
Long Term Liabilities	\$1,013,933	\$1,017,243	\$1,545,385
Total Liabilities	3,782,316	4,559,580	2,543,289
Net Assets	\$1,660,720	\$1,197,969	\$891,609
Working Capital Position	\$578,282	\$29,673	\$2,320,465
Operating Revenues	\$3,229,937	\$12,255,043	\$6,089,186
Operating Expenses	\$2,515,411	\$11,917,551	\$5,723,940
Operating Net Income	\$714,526	\$337,492	\$365,246

<u>Premier Genesee Center for Nursing and Rehabilitation</u>	<u>2018 as of 03/31/2018</u>	<u>2017</u>
Current Assets	\$4,713,099	\$3,754,012
Non-Current Assets	\$315,520	\$694,544
Total Assets	\$5,028,619	\$4,448,556
Current Liabilities	\$4,850,309	\$3,979,763
Long Term Liabilities	\$95,065	\$422,790
Total Liabilities	4,945,374	4,402,553
Net Assets	\$83,245	\$46,003
Working Capital Position	(\$137,210)	(\$225,751)
Operating Revenues	\$3,783,871	\$14,331,825
Operating Expenses	\$3,394,626	\$14,326,024
Operating Net Income	\$389,245	\$5,801

Schedule of Ownership

	<b>Highfield Gardens</b>	<b>Westchester Center</b>	<b>Kaaterskill Operating, Inc.</b>	<b>Pine Haven Home</b>	<b>Genessee Center, LLC</b>
<b>Jonathan Bleier</b>	16.00%	54.96%	23.50%	47.50%	50.00%
<b>Jacob Sod</b>	0.00%	0.00%	23.50%	47.50%	50.00%
<b>Joel Schwartz</b>	0.00%	0.00%	0.00%	0.00%	0.00%

## Financial Summary - Leroy Village Green Residential Health Care Facility, Inc.

	<u>2018 as of 03/31/2018</u>	<u>2017 as of 12/31/2017</u>	<u>2016 Audited</u>	<u>2015 Audited</u>
Current Assets	\$2,195,151	\$2,915,740	\$1,919,187	\$1,884,990
Non-Current Assets	<u>\$581,866</u>	<u>\$608,401</u>	<u>664,228</u>	<u>651,542</u>
Total Assets	\$2,777,017	\$3,524,141	\$2,583,415	\$2,536,532
Current Liabilities	\$2,521,001	\$3,023,040	1,316,107	1,019,155
Long Term Liabilities	<u>\$0</u>	<u>\$0</u>	<u>1,566,006</u>	<u>1,329,348</u>
Total Liabilities	2,521,001	3,023,040	2,882,113	2,348,503
Net Assets	\$741,100	\$741,100	(\$298,698)	\$188,029
Working Capital Position	(\$325,850)	(\$107,300)	\$603,080	\$865,835
Operating Revenues	\$2,893,178	\$11,971,671	\$10,375,493	\$11,361,300
Other Revenue	\$0	\$0	\$12,907	\$22,089
Operating Expenses	<u>\$2,746,865</u>	<u>\$10,141,108</u>	<u>10,672,125</u>	<u>10,864,244</u>
Operating Net Income	\$146,313	\$1,830,563	(\$283,725)	\$519,145
Number of Beds	140	140	140	140
Percent Occupancy	87%	87%	87%	89%
Medicare	4%	4%	5%	5%
Commercial	11%	11%	10%	10%
Medicaid	70%	70%	71%	71%
Private Pay / Other	15%	15%	14%	14%
Total Percentage	100%	100%	100%	100%

## LEROY OPERATING, LLC

## PROFORMA BALANCE SHEET

January 1, 2018

## ASSETS

	<u>Leroy Operating, LLC</u>
Current Assets	
Cash & Cash Equivalents	\$ 1,810,000
Account Receivable	
Prepaid Rent (First Month's Rent)	<u>21,050</u>
Total Current Assets	1,831,050
Non Current Assets	
Resident Funds	81,850
Other Assets (Goodwill)	2,198,950
Fixed Assets - Net	<u>580,000</u>
Total Non Current Assets	<u>2,860,800</u>
Total Assets	<u>\$ 4,691,850</u>

## LIABILITIES AND MEMBERS' EQUITY

Liabilities	
Long Term Debt, Current Portion	<u>\$ 159,539</u>
Total current liabilities	<u>159,539</u>
Long term Liabilities	
Resident Funds	81,850
Long Term Debt, Net of Current Portion	<u>742,811</u>
Total Long-term Liabilities	<u>824,661</u>
Total Liabilities	984,200
Members' Equity	<u>3,707,650</u>
Total Liabilities and Members' Equity	<u>\$ 4,691,850</u>

BFA Attachment-E  
CON# 172198

**Leroy Village Green Residential Health Care Facility, Inc.**

Budget Sensitivity

<u>Payor</u>	<u>Payor Mix as of 11/30/2017</u>	<u>Revised Budgeted Days</u>	<u>Per Diem</u>	<u>Revised Revenues</u>
Medicaid	69.3%	32,751	\$186.09	\$6,094,572
Medicare	4.9%	2,333	\$430.02	1,003,349
Private Pay	17.7%	8,336	\$359.98	3,000,955
Commercial	<u>8.1%</u>	3,812	\$400.02	1,524,725
	100.0%	47,232		
Total Revenues based on current utilization				\$11,623,601
Total Inpatient Revenues as budgeted for first year				<u>12,082,500</u>
Decrease in Budgeted Revenues				(\$458,899)

As of November 30, 2017, utilization is at 92.43% (43,222/46,760)

**140 beds x 365 days=51,100x 92.43=47,232**

Proposed Ownership of Kingston NH Operation LLC and Kingston NH Realty, LLC

Owners	<u>Operations</u>	<u>Realty</u>
	Kingston NH Operation LLC	Kingston NH Realty, LLC
Solomon Klein	10.00%	10.00%
Ernest Schlesinger	40.00%	40.00%
Esther Klein	30.00%	30.00%
Mordechai Getz	7.50%	7.50%
Avrom Gold	7.50%	7.50%
Eugene Mendlowits	5.00%	5.00%

Ten Broeck

	<u>2017</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
ASSETS - CURRENT	\$ 6,533,090	\$ 5,950,886	\$ 6,398,632	\$ 5,439,543
ASSETS - FIXED AND OTHER	\$ 6,782,643	\$ 7,062,607	\$ 7,612,651	\$ 8,345,989
TOTAL ASSETS	\$ 13,315,733	\$ 13,013,493	\$ 14,011,283	\$ 13,785,532
LIABILITIES - CURRENT	\$ 8,635,863	\$ 9,379,245	\$ 3,401,298	\$ 4,130,867
LIABILITIES - LONG-TERM	\$ 81,038	\$ 16,621	\$ 7,586,419	\$ 8,478,808
TOTAL LIABILITIES	\$ 8,716,901	\$ 9,395,866	\$ 10,987,717	\$ 12,609,675
WORKING CAPITAL	\$ (2,102,773)	\$ (3,428,359)	\$ 2,997,334	\$ 1,308,676
INCOME	\$ 26,675,791	\$ 26,259,461	\$ 26,036,327	\$ 24,013,126
EXPENSE	\$ 24,494,586	\$ 24,465,400	\$ 22,988,618	\$ 22,322,476
NET INCOME	\$ 2,181,205	\$ 1,794,061	\$ 3,047,709	\$ 1,690,650
NET ASSET POSITION	\$ 4,598,832	\$ 3,617,627	\$ 3,023,566	\$ 1,175,857



Kingston NH Operating, LLC  
PRO FORMA BALANCE SHEET

ASSETS

Cash	\$ 4,079,002
Total Current Assets	<u>\$ 4,079,002</u>
Non Current Assets	\$ -
Residents Funds	\$ 81,850
Fixed Assets-Net	<u>\$ 200,000</u>
Total Non Current Assets	<u>\$ 281,850</u>
Total Assets	\$ 4,360,852

Liabilities and Member Equity

LIABILITIES

Long Term Debt, Current portion	\$ 359,795
Total current liabilities	<u>\$ 359,795</u>

Long term Liabilities	
Resident Funds	\$ 81,850
Long Term Debt, Net of Current Portion	\$ 1,675,205
Total Long-Term Liabilities	<u>\$ 1,757,055</u>
Total Liabilities	\$ 2,116,850

MEMBER EQUITY	<u>\$ 2,244,002</u>
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TOTAL LIABILITIES AND MEMBER EQUITY	\$ 4,360,852
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Mr. Ernest Schlesinger's NYS owned Nursing Homes

Facility Name	Ownership Percentage	Ownership from
Dumont Center	2.50%	7/2010-current
Bell Haven	5.00%	3/2010-current
St. James	10.00%	8/2012-current
Grand Pavilion	5.00%	8/2012-current

St. James

	1/1/2017- 12/31/2017 <u>Internal</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
ASSETS - CURRENT	\$ 7,131,616	\$ 5,836,269	\$ 5,348,226	\$ 5,070,006
ASSETS - FIXED AND OTHER	\$ 6,138,718	\$ 7,003,047	\$ 5,063,930	\$ 4,194,123
TOTAL ASSETS	\$ 13,270,334	\$ 12,839,316	\$ 10,412,156	\$ 9,264,129
LIABILITIES - CURRENT	\$ 3,102,975	\$ 3,616,256	\$ 3,521,788	\$ 3,561,787
LIABILITIES - LONG-TERM	\$ 1,322,222	\$ 1,555,998	\$ 430,275	\$ 413,787
TOTAL LIABILITIES	\$ 4,425,197	\$ 5,172,254	\$ 3,952,063	\$ 3,975,574
WORKING CAPITAL	\$ 4,028,641	\$ 2,220,013	\$ 1,826,438	\$ 1,508,219
INCOME	\$ 36,299,757	\$ 33,489,127	\$ 31,758,596	\$ 30,114,396
EXPENSE	\$ 30,691,683	\$ 30,689,158	\$ 29,987,058	\$ 28,338,124
NET INCOME	\$ 5,608,074	\$ 2,799,969	\$ 1,771,538	\$ 1,776,272
NET ASSET POSITION	\$ 8,845,137	\$ 7,667,062	\$ 6,460,093	\$ 5,288,555

Dumont

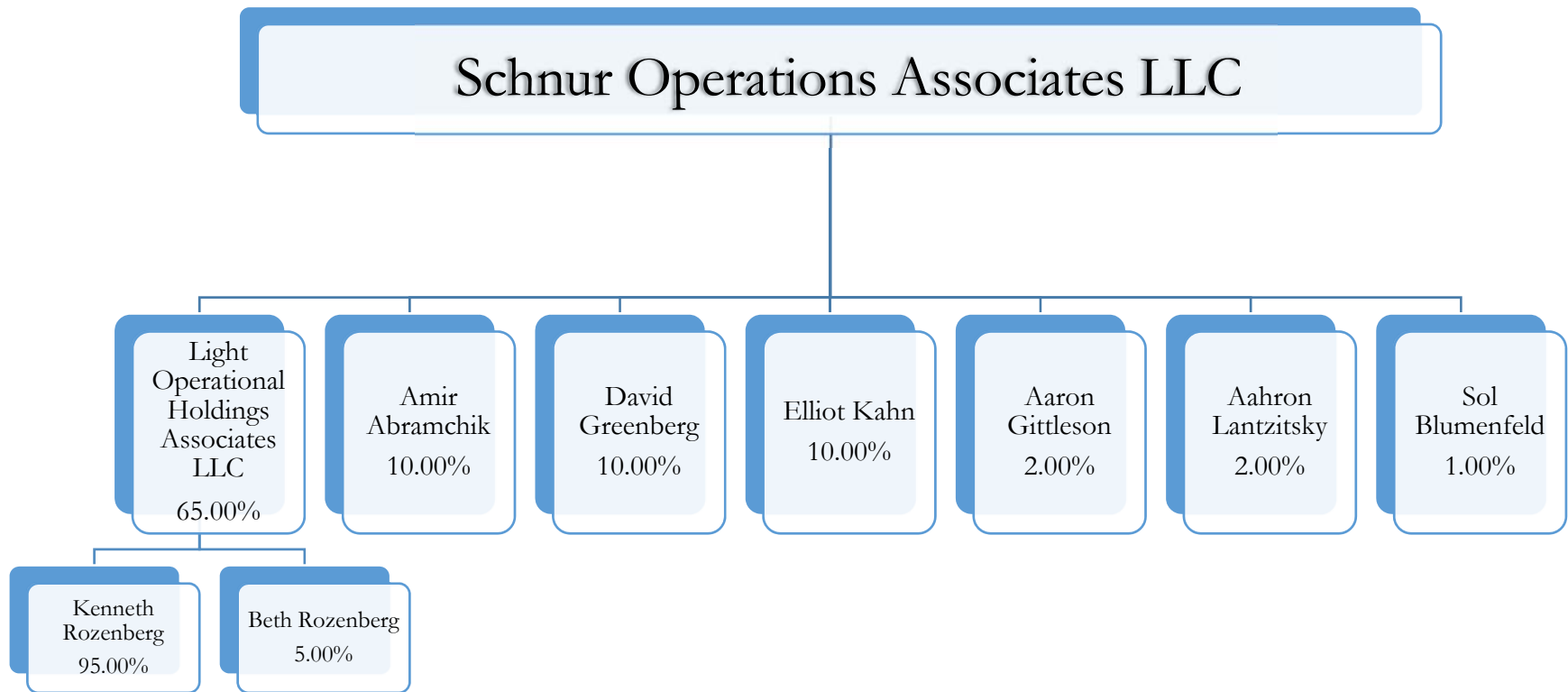
	1/1/2017- 12/31/2017 <u>Internal</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
ASSETS - CURRENT	\$ 5,359,488	\$ 4,379,890	\$ 4,803,325	\$ 4,374,303
ASSETS - FIXED AND OTHER	\$ 3,985,081	\$ 3,467,156	\$ 3,557,260	\$ 3,622,365
TOTAL ASSETS	\$ 9,344,569	\$ 7,847,046	\$ 8,360,585	\$ 7,996,668
LIABILITIES - CURRENT	\$ 4,089,082	\$ 4,047,023	\$ 4,174,732	\$ 5,310,330
LIABILITIES - LONG-TERM	\$ -	\$ 482,193	\$ 487,658	\$ 505,514
TOTAL LIABILITIES	\$ 4,089,082	\$ 4,529,216	\$ 4,662,390	\$ 5,815,844
WORKING CAPITAL	\$ 1,270,406	\$ 332,867	\$ 628,593	\$ (936,027)
INCOME	\$ 24,653,569	\$ 27,711,605	\$ 25,375,843	\$ 23,920,181
EXPENSE	\$ 20,091,684	\$ 24,441,880	\$ 23,153,472	\$ 21,868,761
NET INCOME	\$ 4,561,885	\$ 3,269,725	\$ 2,222,371	\$ 2,051,420
NET ASSET POSITION	\$ 5,255,487	\$ 3,317,830	\$ 3,698,195	\$ 2,180,824

Bellhaven

	1/1/2017- 12/31/2017 <u>Internal</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
ASSETS - CURRENT	\$ 4,744,093	\$ 5,067,162	\$ 2,962,248	\$ 3,522,425
ASSETS - FIXED AND OTHER	\$ 4,700,489	\$ 4,624,652	\$ 4,891,005	\$ 4,735,085
TOTAL ASSETS	\$ 9,444,582	\$ 9,691,814	\$ 7,853,253	\$ 8,257,510
LIABILITIES - CURRENT	\$ 5,036,083	\$ 4,417,612	\$ 2,920,139	\$ 3,075,974
LIABILITIES - LONG-TERM	\$ -	\$ 1,442,545	\$ 2,246,842	\$ 2,716,001
TOTAL LIABILITIES	\$ 5,036,083	\$ 5,860,157	\$ 5,166,981	\$ 5,791,975
WORKING CAPITAL	\$ (291,990)	\$ 649,550	\$ 42,109	\$ 446,451
INCOME	\$ 27,013,588	\$ 28,311,027	\$ 26,118,966	\$ 25,417,453
EXPENSE	\$ 23,289,114	\$ 25,566,642	\$ 24,298,229	\$ 23,436,173
NET INCOME	\$ 3,724,474	\$ 2,744,385	\$ 1,820,737	\$ 1,981,280
NET ASSET POSITION	\$ 4,408,499	\$ 3,831,657	\$ 2,686,272	\$ 2,465,535

Grand Pavilion

	1/1/2017- 12/31/2017 <u>Internal</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>
ASSETS - CURRENT	\$ 3,797,419	\$ 4,158,758	\$ 3,152,464	\$ 2,792,828
ASSETS - FIXED AND OTHER	\$ 11,715,449	\$ 12,009,737	\$ 10,998,700	\$ 10,392,638
TOTAL ASSETS	\$ 15,512,868	\$ 16,168,495	\$ 14,151,164	\$ 13,185,466
LIABILITIES - CURRENT	\$ 783,779	\$ 2,314,284	\$ 2,864,782	\$ 4,807,692
LIABILITIES - LONG-TERM	\$ 1,545,230	\$ 1,420,043	\$ 974,305	\$ 104,133
TOTAL LIABILITIES	\$ 2,329,009	\$ 3,734,327	\$ 3,839,087	\$ 4,911,825
WORKING CAPITAL	\$ 3,013,640	\$ 1,844,474	\$ 287,682	\$ (2,014,864)
INCOME	\$ 24,477,915	\$ 23,284,073	\$ 20,323,415	\$ 17,975,602
EXPENSE	\$ 20,353,223	\$ 20,086,984	\$ 19,717,747	\$ 18,507,527
NET INCOME	\$ 4,124,692	\$ 3,197,089	\$ 613,441	\$ (531,925)
NET ASSET POSITION	\$ 13,183,859	\$ 12,434,168	\$ 10,312,077	\$ 8,273,641



**Martine Center for Rehabilitation and Nursing  
(known as Schnurmacher Center for Rehabilitation and Nursing in 2016)**

	<u>12/31/17 Internal</u>	<u>2016*</u>	<u>2015</u>
Current Assets	\$5,801,652	\$9,889,129	\$13,191,590
Non-Current Assets	<u>12,853,474</u>	<u>12,184,452</u>	<u>12,028,066</u>
Total Assets	\$18,655,126	\$22,073,581	\$23,821,804
Current Liabilities	\$3,250,090	\$6,902,528	7,038,483
Long Term Liabilities	<u>12,765,027</u>	<u>620,095</u>	<u>1,970,345</u>
Total Liabilities	\$16,015,117	7,522,623	9,008,828
Net Assets	\$2,640,009	\$14,550,958	\$16,210,828
Working Capital Position	\$2,551,562	\$2,986,601	\$6,153,107
Operating Revenues	\$17,401,517	\$21,585,998	\$23,101,300
Operating Expenses	<u>17,197,877</u>	<u>23,488,021</u>	<u>21,325,668</u>
Operating Net Income	\$203,640	<b>(\$1,902,023)</b>	\$1,775,632
Non-Operating Revenue	\$34,155	\$208,156	
Net Income	\$237,795	<b>(\$1,693,867)</b>	

**Note: Schnur Operations Associates assumed operations 3/15/17**



CON 181046

**Affiliated RHCFs**

Corning Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$4,624,615	\$3,325,243	\$3,435,837
Non-Current Assets	<u>5,287,812</u>	<u>4,828,611</u>	<u>4,503,748</u>
Total Assets	\$9,912,427	\$8,153,854	\$7,939,585
Current Liabilities	3,888,342	1,716,185	1,583,099
Long Term Liabilities	<u>391,429</u>	<u>2,659,187</u>	<u>2,704,240</u>
Total Liabilities	4,279,771	4,375,372	4,287,339
Net Assets	\$5,632,656	\$3,778,482	\$3,652,246
Working Capital Position	\$736,273	\$1,609,058	\$1,852,738
Operating Revenues	\$12,894,237	\$11,406,869	\$11,597,355
Operating Expenses	<u>10,625,713</u>	<u>10,745,635</u>	<u>11,079,908</u>
Operating Net Income	\$2,268,524	\$661,234	\$517,447

*Amir Abramchik - 11% membership interest*

*David Greenberg - 5% membership interest*

Steuben Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$4,676,724	\$4,706,048	\$2,467,729
Non-Current Assets	<u>6,121,645</u>	<u>6,606,494</u>	<u>7,422,866</u>
Total Assets	\$10,798,369	\$11,312,542	\$9,890,595
Current Liabilities	1,556,156	3,313,566	1,423,150
Long Term Liabilities	<u>7,394,256</u>	<u>6,980,870</u>	<u>6,593,874</u>
Total Liabilities	8,950,412	10,294,436	8,017,024
Net Assets	\$1,847,957	\$1,018,106	\$1,873,571
Working Capital Position	\$3,120,568	\$1,392,482	\$1,044,579
Operating Revenues	\$12,706,679	\$12,690,099	\$12,747,752
Operating Expenses	<u>11,355,221</u>	<u>12,574,828</u>	<u>11,783,230</u>
Operating Net Income	\$1,351,458	\$115,271	\$964,522

*David Greenberg - 5% membership interest*

Brooklyn Center for Rehabilitation and Residential HC, LLC

	<u>2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$7,961,096	\$5,469,484	\$6,950,835
Non-Current Assets	<u>27,307,857</u>	<u>16,511,506</u>	<u>11,279,872</u>
Total Assets	\$35,268,953	\$21,980,990	\$18,230,707
Current Liabilities	6,733,025	9,445,983	6,521,833
Long Term Liabilities	<u>21,337,612</u>	<u>5,895,736</u>	<u>5,647,282</u>
Total Liabilities	\$28,070,637	\$15,341,719	\$12,169,115
Net Assets	\$7,198,316	\$6,639,271	\$6,061,592
Working Capital Position	\$1,228,071	(\$3,976,499)	\$429,002
Operating Revenues	\$27,977,586	\$26,734,031	\$26,511,733
Operating Expenses	<u>\$26,375,531</u>	<u>\$25,217,228</u>	<u>\$24,675,008</u>
Operating Net Income	\$1,602,055	\$1,516,803	\$1,836,725

*Sol Blumenfeld - 5% membership interest*

Carthage Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$1,594,064	
Non-Current Assets	<u>2,656,886</u>	
Total Assets	\$4,250,950	\$0
Current Liabilities	907,559	
Long Term Liabilities	<u>2,676,822</u>	<u>0</u>
Total Liabilities	\$3,584,381	\$0
Net Assets	\$666,569	
Working Capital Position	\$686,505	
Operating Revenues	\$2,350,499	
Operating Expenses	<u>\$2,211,313</u>	
Operating Net Income	\$139,186	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Fulton Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$7,141,248	\$5,791,622	\$2,984,647
Non-Current Assets	<u>5,064,485</u>	<u>5,394,222</u>	<u>5,201,309</u>
Total Assets	\$12,205,733	\$11,185,844	\$8,185,956
Current Liabilities	1,494,401	1,927,937	1,856,387
Long Term Liabilities	<u>8,008,145</u>	<u>7,828,345</u>	<u>5,255,210</u>
Total Liabilities	\$9,502,546	\$9,756,282	\$7,111,597
Net Assets	\$2,703,187	\$1,429,562	\$1,074,359
Working Capital Position	\$5,646,847	\$3,863,685	\$1,128,260
Operating Revenues	\$19,613,149	\$18,363,238	\$16,221,334
Operating Expenses	<u>\$17,409,548</u>	<u>\$17,429,333</u>	<u>\$15,539,592</u>
Operating Net Income	\$2,203,601	\$933,905	\$681,742

*Amir Abramchik - 10% ownership interest*

Richmond Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$10,534,671	\$11,474,923	\$9,672,514
Non-Current Assets	<u>22,324,839</u>	<u>23,259,782</u>	<u>22,879,393</u>
Total Assets	\$32,859,510	\$34,734,705	\$32,551,907
Current Liabilities	7,483,865	11,658,031	9,740,873
Long Term Liabilities	<u>21,581,271</u>	<u>19,532,067</u>	<u>19,097,075</u>
Total Liabilities	\$29,065,136	\$31,190,098	\$28,837,948
Net Assets	\$3,794,374	\$3,544,607	\$3,713,959
Working Capital Position	\$3,050,806	(\$183,108)	(\$68,359)
Operating Revenues	\$49,675,130	\$49,057,010	\$48,487,371
Operating Expenses	<u>\$47,774,355</u>	<u>\$47,229,362</u>	<u>\$46,528,657</u>
Operating Net Income	\$2,150,580	\$1,827,648	\$1,958,714

*Amir Abramchik - 2% ownership interest*

New Paltz Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016*</u>
Current Assets	\$2,035,413	
Non-Current Assets	<u>2,359,807</u>	
Total Assets	\$4,395,220	\$0
Current Liabilities	1,039,194	
Long Term Liabilities	<u>2,868,059</u>	
Total Liabilities	\$3,907,253	\$0
Net Assets	\$487,967	\$0
Working Capital Position	\$996,219	\$0
Operating Revenues	\$2,483,377	
Operating Expenses	<u>\$2,450,183</u>	
Operating Net Income	\$33,194	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Troy Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$1,648,227	
Non-Current Assets	<u>2,365,246</u>	
Total Assets	\$4,013,473	\$0
Current Liabilities	994,200	
Long Term Liabilities	<u>2,486,559</u>	
Total Liabilities	\$3,480,759	\$0
Net Assets	\$532,714	\$0
Working Capital Position	\$654,027	\$0
Operating Revenues	\$2,373,195	
Operating Expenses	<u>\$2,300,840</u>	
Operating Net Income	\$72,355	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Onondaga Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$1,692,182	
Non-Current Assets	<u>2,372,656</u>	
Total Assets	\$4,064,838	\$0
Current Liabilities	850,834	
Long Term Liabilities	<u>2,243,613</u>	
Total Liabilities	\$3,094,447	\$0
Net Assets	\$970,391	\$0
Working Capital Position	\$841,348	\$0
Operating Revenues	\$2,771,505	
Operating Expenses	<u>\$2,231,016</u>	
Operating Net Income	\$540,489	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Glens Falls Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$2,119,963	
Non-Current Assets	<u>3,513,180</u>	
Total Assets	\$5,633,143	\$0
Current Liabilities	1,320,483	
Long Term Liabilities	<u>3,522,860</u>	
Total Liabilities	\$4,843,343	\$0
Net Assets	\$789,800	\$0
Working Capital Position	\$799,480	\$0
Operating Revenues	\$3,195,500	
Operating Expenses	<u>\$3,041,536</u>	
Operating Net Income	\$153,964	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Slate Valley Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$1,473,074	
Non-Current Assets	<u>2,580,484</u>	
Total Assets	\$4,053,558	\$0
Current Liabilities	979,964	
Long Term Liabilities	<u>2,543,703</u>	
Total Liabilities	\$3,523,667	\$0
Net Assets	\$529,891	\$0
Working Capital Position	\$493,110	\$0
Operating Revenues	\$2,388,220	
Operating Expenses	<u>\$2,344,092</u>	
Operating Net Income	\$44,128	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Schenectady Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$5,052,901	
Non-Current Assets	<u>6,731,786</u>	
Total Assets	\$11,784,687	\$0
Current Liabilities	2,713,341	
Long Term Liabilities	<u>2,111,550</u>	
Total Liabilities	\$4,824,891	\$0
Net Assets	\$6,959,796	\$0
Working Capital Position	\$2,339,560	\$0
Operating Revenues	\$8,771,757	
Operating Expenses	<u>\$7,773,573</u>	
Operating Net Income	\$998,184	\$0

*Amir Abramchik - 50% ownership acquired September 2017*

Ontario Center for Rehab

	<u>12/31/2017</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$3,060,257	\$2,897,481	\$2,034,352
Non-Current Assets	<u>1,355,859</u>	<u>1,387,633</u>	<u>1,446,327</u>
Total Assets	\$4,416,116	\$4,285,114	\$3,480,679
Current Liabilities	967,019	2,459,528	1,592,717
Long Term Liabilities	<u>1,834,061</u>	<u>1,179,080</u>	<u>1,282,868</u>
Total Liabilities	\$2,801,080	\$3,638,608	\$2,875,585
Net Assets	\$1,615,036	\$646,506	\$605,094
Working Capital Position	\$2,093,238	\$437,953	\$441,635
Operating Revenues	\$10,914,344	\$10,042,770	\$8,586,508
Operating Expenses	<u>\$9,374,525</u>	<u>\$9,496,358</u>	<u>\$8,488,861</u>
Operating Net Income	\$1,539,819	\$546,412	\$97,647

*Amir Abramchik - 95% ownership interest*

Warren Center for Rehabilitation and Nursing

	<u>12/31/2017</u>	<u>2016</u>
Current Assets	\$1,756,086	\$1,381,381
Non-Current Assets	<u>2,072,275</u>	<u>2,557,603</u>
Total Assets	\$3,828,361	\$3,938,984
Current Liabilities	1,930,703	1,718,927
Long Term Liabilities	<u>1,414,186</u>	<u>1,569,732</u>
Total Liabilities	\$3,344,889	\$3,288,659
Net Assets	\$483,472	\$650,325
Working Capital Position	(\$174,617)	(\$337,546)
Operating Revenues	\$7,514,144	\$6,895,717
Operating Expenses	<u>\$7,482,993</u>	<u>\$6,971,762</u>
Operating Net Income	\$31,151	(\$76,045)
Non-Operating Income	<u>\$1,995</u>	<u>\$493,485</u>
Net Income	\$33,146	\$417,440

*David Greenberg - 95% ownership acquired 1/1/2016.*

Bishop Rehabilitation and Nursing Center		
	1/1/2017-7/31/2017 Internal	2016
ASSETS - CURRENT	\$7,187,471	\$7,367,403
ASSETS - FIXED AND OTHER	\$2,127,669	\$3,240,489
TOTAL ASSETS	\$9,315,140	\$10,607,892
LIABILITIES - CURRENT	\$13,745,538	\$11,121,593
LIABILITIES - LONG-TERM	\$648,498	\$336,935
TOTAL LIABILITIES	\$14,394,036	\$11,458,528
WORKING CAPITAL	(\$6,558,067)	(\$3,754,190)
INCOME	\$21,516,627	\$34,607,188
EXPENSE	\$23,761,653	\$36,132,262
NET INCOME	(\$2,245,026)	(\$1,525,074)
NET ASSET POSITION	(\$5,078,896)	(\$850,636)
NUMBER OF BEDS	440	440
PERCENT OCCUPANCY	88.36%	88.36%
MEDICAID	81.36%	81.36%
MEDICARE	11.95%	11.95%
PRIVATE PAY	6.69%	6.69%

\* 2016 data used for 2017

Park Terrace Care Center

	<b>03/31/2018</b>	<b>12/31/2017</b>		
	<b><u>Internals</u></b>	<b>Unaudited</b>	<b><u>2016</u></b>	<b><u>2015</u></b>
		<b><u>Internals</u></b>		
Current Assets	\$7,003,714	\$6,800,925	\$8,382,057	\$5,744,388
Non-Current Assets	<u>4,752,233</u>	<u>4,764,660</u>	<u>2,443,989</u>	<u>1,817,428</u>
Total Assets	\$11,755,947	\$11,565,585	\$10,826,046	\$7,561,816
Current Liabilities	4,535,059	4,950,338	4,598,149	3,620,211
Long Term Liabilities	<u>0</u>	<u>0</u>	<u>315,196</u>	<u>429,380</u>
Total Liabilities	4,535,059	4,950,338	4,913,345	4,049,591
Net Assets	\$7,220,888	\$6,615,247	\$5,912,701	\$3,512,225
Working Capital Position	\$2,468,655	\$1,850,587	\$3,783,908	\$2,124,177
Operating Revenues	\$4,785,322	\$19,920,379	\$27,292,848	\$26,897,481
Operating Expenses	<u>\$4,664,068</u>	<u>\$18,104,815</u>	<u>\$23,790,086</u>	<u>\$22,312,971</u>
Operating Net Income	\$121,254	\$1,815,564	\$3,502,762	\$4,584,510

Queens Nassau Nursing Home

	<u>12/31/2017</u>		
	<u>Unaudited</u>		
	<u>Internals</u>	<u>2016</u>	<u>2015</u>
Current Assets	\$6,318,473	\$6,430,456	\$4,218,429
Non-Current Assets	\$4,300,297	\$3,062,539	\$1,694,002
Total Assets	\$10,618,770	\$9,492,995	\$5,912,431
Current Liabilities	\$5,643,954	\$4,600,704	\$2,683,199
Long-Term Liabilities	\$0	\$148,219	\$165,132
Total Liabilities	\$5,643,954	\$4,748,923	\$2,848,331
Net Assets	\$4,974,816	\$4,744,072	\$3,064,100
Working Capital Position	\$674,519	\$1,829,752	\$1,535,230
Operating Revenues	\$19,771,304	\$24,145,861	\$23,084,447
Operating Expenses	\$19,540,560	\$22,465,889	\$21,689,832
Operating Net Income	\$230,744	\$1,679,972	\$1,394,615



St. Regis Nursing Home

	<u>2017</u>	<u>2016</u>	<u>2015</u>
CURRENT ASSETS	\$1,327,460	\$1,453,479	\$1,268,982
FIXED ASSETS	744,848	833,087	843,111
TOTAL ASSETS	\$2,072,308	\$2,286,566	\$2,112,093
CURRENT LIABILITIES	2,015,704	1,909,569	1,682,125
LONG TERM LIABILITIES	476,537	550,129	600,274
TOTAL LIABILITIES	\$2,492,241	\$2,459,698	\$2,282,399
WORKING CAPITAL POSITION	(\$688,244)	(\$456,090)	(\$413,143)
NET ASSET POSITION	(\$419,933)	(\$173,132)	(\$170,306)
REVENUES	\$10,832,722	\$11,114,147	\$11,355,414
EXPENSES	11,135,290	11,101,126	11,083,219
NET INCOME	(\$302,568)	\$13,021	\$272,195
NUMBER OF BEDS	160	160	160
OCCUPANCY	92.15%	93.86%	93.97%
MEDICAID	NA	78.35%	77.40%
MEDICARE	NA	6.72%	10.40%
PRIVATE PAY	NA	14.93%	12.20%

In 2017, the Seller reclassified how they report a long term care plan so Medicaid decreased significantly so 2017 numbers are not accurate.

Pro Forma Balance Sheet

ASSETS

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Cash	<u>\$1,922,598</u>
TOTAL ASSETS	\$1,922,598

LIABILITIES

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Working Capital Loan	<u>\$961,299</u>
TOTAL LIABILITIES	\$961,299

NET ASSETS	\$961,299
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<b><u>Highland Rehabilitation</u></b>	<b><u>2017</u></b>	<b><u>2016</u></b>	<b><u>2015</u></b>
Current Assets	\$3,213,524	\$2,714,182	\$2,678,955
Fixed Assets	7,173,074	1,434,179	1,168,555
Total Assets	\$10,386,598	\$4,148,361	\$3,847,510
Current Liabilities	2,423,298	2,310,363	2,262,237
Long Term Liabilities	5,194,322	883,864	745,508
Total Liabilities	\$7,617,620	\$3,194,227	\$3,007,745
Working Capital Position	\$790,226	\$403,819	\$416,718
Net Asset Position	\$2,768,978	\$954,134	\$839,765
Revenues	\$12,037,238	\$10,634,466	\$10,710,096
Expenses	9,350,740	10,690,159	9,640,682
Net Income	\$2,686,498	(\$55,693)	\$1,069,414

<b><u>Tarrytown Hall</u></b>	<b><u>2017</u></b>	<b><u>2016</u></b>	<b><u>2015</u></b>
Current Assets	\$2,964,630	\$2,384,634	\$2,240,170
Fixed Assets	1,923,538	1,803,467	1,955,244
Total Assets	\$4,888,168	\$4,188,101	\$4,195,414
Current Liabilities	1,957,491	2,146,111	2,469,417
Long Term Liabilities	473,886	157,930	236,649
Total Liabilities	\$2,431,377	\$2,304,041	\$2,706,066
Working Capital Position	\$1,007,139	\$238,523	(\$229,247)
Net Asset Position	\$2,456,791	\$1,884,060	\$1,489,348
Revenues	\$12,990,458	\$13,259,668	\$12,560,140
Expenses	11,434,682	12,914,373	12,431,407
Net Income	\$1,555,776	\$345,295	\$128,733

<b><u>Alpine Rehab</u></b>	<b><u>2017</u></b>	<b><u>2016</u></b>	<b><u>2015</u></b>
Current Assets	\$2,964,630	\$1,762,225	\$1,358,233
Fixed Assets	1,925,538	2,240,239	2,476,813
Total Assets	\$4,890,168	\$4,002,464	\$3,835,046
Current Liabilities	1,957,491	1,234,493	1,451,578
Long Term Liabilities	473,886	714,950	761,882
Total Liabilities	\$2,431,377	\$1,949,443	\$2,213,460
Working Capital Position	\$1,007,139	\$527,732	(\$93,345)
Net Asset Position	\$2,458,791	\$2,053,021	\$1,621,586
Revenues	\$12,990,458	\$6,713,434	\$6,949,349
Expenses	6,051,786	6,478,438	6,412,429
Net Income	\$6,938,672	\$234,996	\$536,920

<b><u>Norwich</u></b>	<b><u>2017</u></b>	<b><u>2016</u></b>	<b><u>2015</u></b>
Current Assets	\$6,482,925	\$2,041,268	\$1,588,707
Fixed Assets	3,195,701	1,070,207	772,166
Total Assets	\$9,678,626	\$3,111,475	\$2,360,873
Current Liabilities	876,841	1,268,308	1,239,366
Long Term Liabilities	7,202,712	782,239	487,864
Total Liabilities	\$8,079,553	\$2,050,547	\$1,727,230
Working Capital Position	\$5,606,084	\$772,960	\$349,341
Net Asset Position	\$1,599,073	\$1,060,928	\$633,643
Revenues	\$9,020,292	\$7,829,039	\$7,021,791
Expenses	6,299,234	7,641,894	7,029,404
Net Income	\$2,721,058	\$187,145	(\$7,613)

<b><u>Utica Rehabilitation</u></b>	<b><u>2017</u></b>	<b><u>2016</u></b>
Current Assets	\$2,204,131	\$1,939,683
Fixed Assets	4,452,375	681,105
Total Assets	\$6,656,506	\$2,620,788
Current Liabilities	2,041,401	1,687,193
Long Term Liabilities	3,857,190	100,474
Total Liabilities	\$5,898,591	\$1,787,667
Working Capital Position	\$162,730	\$252,490
Net Asset Position	\$757,915	\$833,121
Revenues	\$9,252,503	\$8,197,550
Expenses	8,120,655	7,832,994
Net Income	\$1,131,848	\$364,556

**ORGANIZATIONAL CHART**

**CON 181182 BFA  
Attachment E**

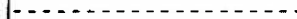
**MARNC OPERATING, LLC  
Doing Business As  
MASSENA REHABILITATION & NURSING CENTER**

<b><u>MARNC Operating, LLC</u></b>	
<b><u>Members:</u></b>	
Batia Zigelbaum	40.00%
Esther R. Barth	37.50%
Chaya S. Walden	15.00%
Yechiel Zigelbaum	3.75%
Yoel Zigelbaum	3.75%
Total	100.00%

**DOING BUSINESS AS  
MASSENA REHABILITATION & NURSING CENTER**

RHCF Administrator  
Director of Nursing  
Direct Care Staff  
Support Staff  
Clerical Staff

Lease



<b>MARNC Realty, LLC</b>	<b>(RHCF Real Estate)</b>
<b><u>Members:</u></b>	
Batia Zigelbaum	40.00%
Esther R. Barth	37.50%
Chaya S. Walden	15.00%
Yechiel Zigelbaum	3.75%
Yoel Zigelbaum	3.75%
Total	100.00%

**LHC GROUP, INC. AND SUBSIDIARIES**  
**CONSOLIDATED BALANCE SHEETS**

(Amounts in thousands, except share data)

	As of December 31,	
	2017	2016
<b>ASSETS</b>		
Current assets:		
Cash	\$ 2,849	\$ 3,264
Receivables:		
Patient accounts receivable, less allowance for uncollectible accounts of \$23,556 and \$29,036, respectively	161,898	124,803
Other receivables	3,163	5,115
Amounts due from governmental entities	830	942
Total receivables, net	165,891	130,860
Prepaid income taxes	7,006	—
Prepaid expenses	13,042	9,821
Other current assets	12,177	5,796
Total current assets	200,965	149,741
Property, building and equipment, net of accumulated depreciation of \$43,565 and \$35,226, respectively	46,453	43,251
Goodwill	392,601	307,317
Intangible assets, net of accumulated amortization of \$13,041 and \$10,968, respectively	134,610	102,006
Other assets	19,073	11,756
Total assets	\$ 793,702	\$ 614,071
<b>LIABILITIES AND STOCKHOLDERS' EQUITY</b>		
Current liabilities:		
Accounts payable and other accrued liabilities	\$ 39,750	\$ 26,805
Salaries, wages and benefits payable	44,747	34,265
Self insurance reserves	12,450	10,691
Current portion of long-term debt	286	252
Amounts due to governmental entities	5,019	4,955
Income tax payable	—	3,499
Total current liabilities	102,252	80,467
Deferred income taxes	27,466	31,941
Revolving credit facility	144,000	87,000
Long-term debt, less current portion	—	544
Total liabilities	273,718	199,952
Noncontrolling interest-redeemable	13,393	12,567
Stockholders' equity:		
LHC Group, Inc. stockholders' equity:		
Preferred stock – \$0.01 par value: 5,000,000 shares authorized; none issued or outstanding	—	—
Common stock – \$0.01 par value: 40,000,000 shares authorized; 22,640,046 and 22,429,041 shares issued in 2017 and 2016, respectively	226	224
Treasury stock – 4,890,504 and 4,828,679 shares at cost, respectively	(42,249)	(39,135)
Additional paid-in capital	126,490	119,748
Retained earnings	364,401	314,289

3/1/2018

Document

Total LHC Group, Inc. stockholders' equity	448,868	395,126
Noncontrolling interest -- non-redeemable	57,723	6,426
Total stockholders' equity	<u>506,591</u>	<u>401,552</u>
Total liabilities and stockholders' equity	<u>\$ 793,702</u>	<u>\$ 614,071</u>

**LHC GROUP, INC. AND SUBSIDIARIES**  
**CONSOLIDATED STATEMENTS OF INCOME**  
(Amounts in thousands, except share and per share data)

	For the year ended December 31,		
	2017	2016	2015
Net service revenue	\$ 1,072,086	\$ 914,823	\$ 816,366
Cost of service revenue	675,810	557,650	480,878
Gross margin	396,276	357,173	335,488
Provision for bad debts	9,484	14,790	19,243
General and administrative expenses	310,539	270,622	247,919
Impairment of intangibles and other	1,511	—	1,273
Loss on disposal of assets	60	1,199	710
Operating income	74,682	70,562	66,343
Interest expense	(3,876)	(2,936)	(2,302)
Non-operating income	524	492	457
Income before income taxes and noncontrolling interests	71,330	68,118	64,498
Income tax expense	10,944	22,176	22,848
Net income	60,386	45,942	41,650
Less net income attributable to noncontrolling interests	10,274	9,359	9,315
Net income attributable to LHC Group, Inc.'s common stockholders	\$ 50,112	\$ 36,583	\$ 32,335
Earnings per share - basic:			
Net income attributable to LHC Group, Inc.'s common stockholders	\$ 2.83	\$ 2.08	\$ 1.86
Earnings per share - diluted:			
Net income attributable to LHC Group, Inc.'s common stockholders	\$ 2.79	\$ 2.07	\$ 1.84
Weighted average shares outstanding:			
Basic	17,715,992	17,559,477	17,405,379
Diluted	17,961,018	17,682,820	17,547,531

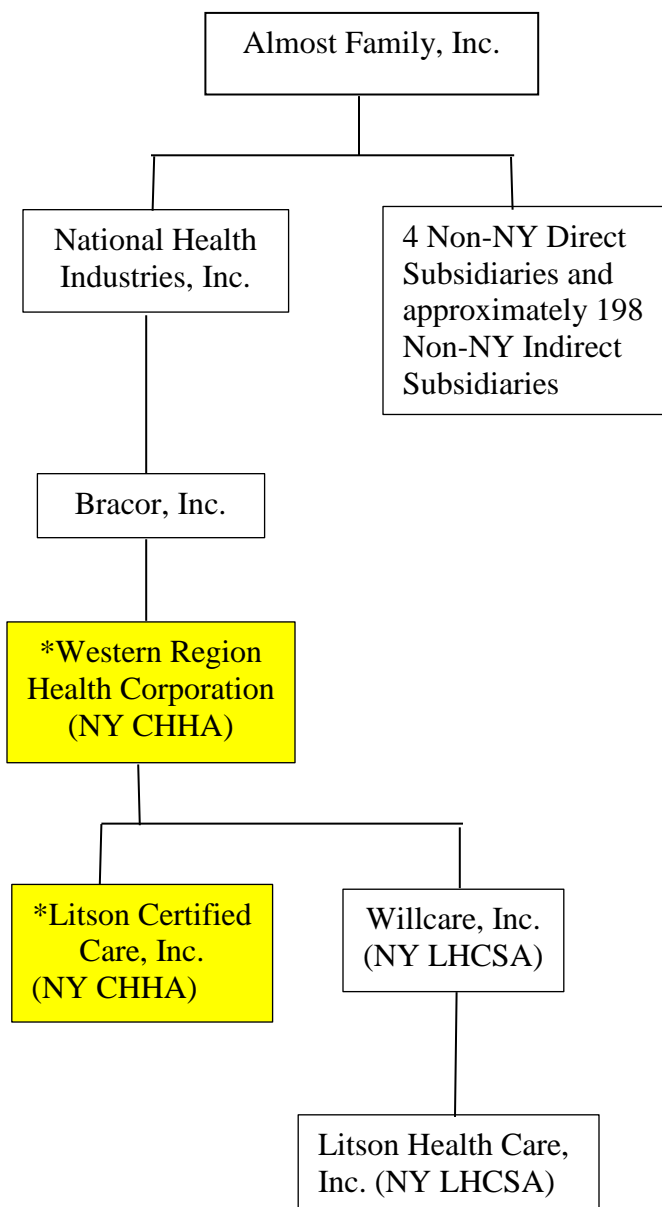


**APPLICATION OF LHC GROUP, INC.  
FOR DESIGNATION  
AS A "CONTROLLING PERSON"**

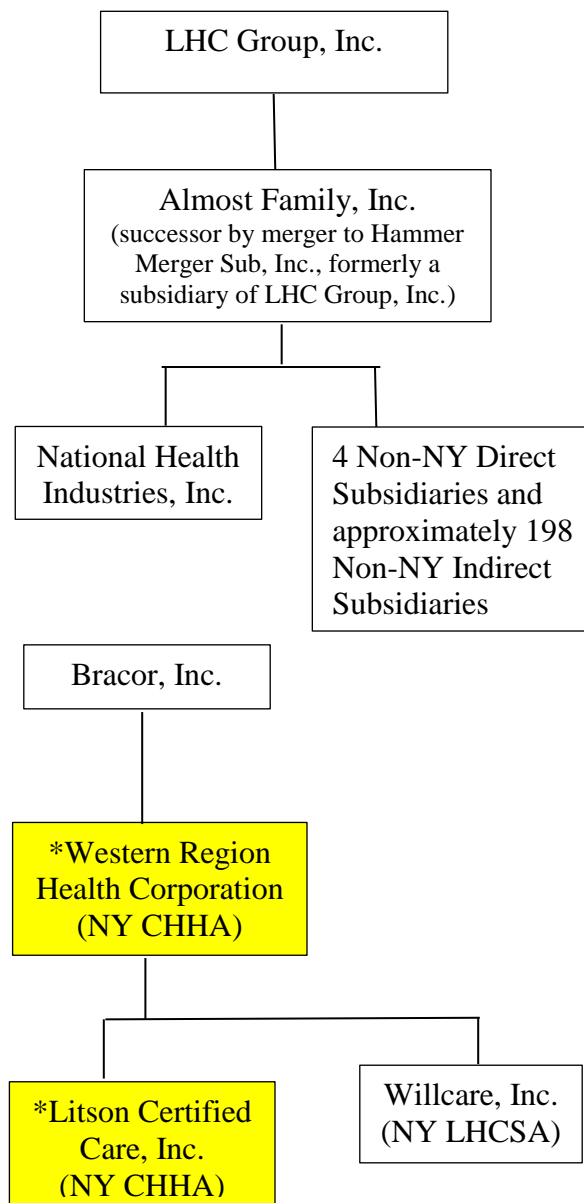
**ATTACHMENT 3**

Pre- and Post-Merger Corporate Organization Schematics

Before Transaction



After Transaction



\*Entries highlighted are NY Certified Home Health Agencies

SCHEDULE 2A.2, Section 5.c.

Southwest Missouri HomeCare, LLC d/b/a Access Home Health Agency ("Agency"), a Medicare certified home health agency located in Missouri which is wholly owned by LHC Group, Inc., underwent a complaint survey on July 28, 2017 which resulted in findings which included condition level deficiencies and citations for immediate jeopardy. As a result, the Agency was subjected to the maximum allowable civil monetary penalties and CMS proposed to terminate its provider agreement effective August 20, 2017. During a subsequent repeat survey on August 17, 2017, the immediate jeopardy citations were cleared but condition level deficiencies remained in place, and CMS withdrew its proposed termination of the provider agreement. The Agency's civil monetary penalties were reduced as a result of clearing the immediate jeopardy citations, but continued in the medium range because of the condition level deficiencies. Another subsequent repeat survey concluded on November 3, 2017, and the Agency was advised verbally that there were at least two citations for immediate jeopardy, one condition level deficiency was cleared, the remaining condition level deficiencies were reaffirmed, and two additional condition level deficiencies were identified. On December 1, 2017 the Agency received written confirmation of the results of this repeat survey but CMS did not levy additional civil monetary penalties due to the Agency's voluntary termination of its participation in the Medicare program.

After careful consideration of the circumstances of the Agency, its clinical staff's performance, and its repeated failure to comply with the conditions of participation, management decided to voluntarily terminate the Agency's participation in the Medicare program and to surrender the Agency's home health agency license. On November 8, 2017, Management verbally notified the Bureau of Home Care and Rehabilitative Standards of the Missouri Department of Health and Senior Services of its intention to cease operations of the Agency, and by letter dated November 13, 2017 confirmed its voluntary termination of Medicare participation effective November 14, 2017. Also, by the letter dated November 13, 2017, the Agency surrendered its Missouri home health agency license. Agency staff proceeded to arrange the discharge or transfer, as appropriate, of all Agency patients and concluded that activity on November 24, 2017 at which time the Agency ceased all operations.

On December 1, 2017 (as amended on December 6, 2017), the Agency was notified by CMS that it had voluntarily terminated participation in the Medicare Program effective November 14, 2017. CMS further advised that it had imposed a total of \$670,733 in civil money penalties for the period July 28, 2017 through November 14, 2017. CMS also advised that the total civil money penalties would be discounted by 35% if the Agency waived all rights to a hearing on or before January 30, 2018. The Agency waived rights to a hearing and paid the discounted civil money penalties in full on December 14, 2017.

**Section 6 (3) Defendant in Civil Actions:**

On October 18, 2013, a derivative complaint was filed by a purported Company shareholder against certain of the Company's current and former executive officers, employees and members of its Board of Directors in the United States District Court for the Western District of Louisiana, styled Plummer v. Myers, et al., Case No. 6:13-cv-02899. The action was brought derivatively on behalf of the Company, which is also named as a nominal defendant. Plaintiff generally alleged that the individual defendants breached their fiduciary duties owed to the Company. The complaint also alleged claims for insider selling and unjust enrichment against the Company's Chairman and Chief Executive Officer and the Company's former President and Chief Operating Officer.

On December 30, 2013, a related derivative complaint was filed by a purported Company shareholder against certain of the Company's current and former executive officers, employees and members of its Board of Directors in the United States District Court of the Western District of Louisiana, styled McCormack v. Myers, et al., Case No. 6:13-cv-3301-JTT-CMH. The action was brought derivatively on the Company's behalf and the Company was also named as a nominal defendant. Plaintiff generally alleged that the individual defendants breached their fiduciary duties owed to the Company and wasted corporate assets. Plaintiff also alleged that the Company's Chairman and Chief Executive Officer caused false and misleading statements to be issued in violation of Section 10(b) of the Exchange Act and Rule 10b-5 promulgated thereunder and that the Company's Directors are control persons under Section 20(a) of the Exchange Act. The complaint also alleged claims for insider selling, misappropriation of information and unjust enrichment against the Company's Chairman and Chief Executive Officer and the Company's former President and Chief Operating Officer.

On March 25, 2014, the McCormack derivative action was consolidated with the Plummer derivative action described above and stayed. On October 7, 2015, the parties entered into a Stipulation of Settlement. On October 19, 2015, Plaintiffs filed an Unopposed Motion for Preliminary Approval of Proposed Derivative Settlement. On October 26, 2015, the District Court entered an Order Preliminarily Approving Settlement in the amount of \$0.6 million. On January 11, 2016, the District Court entered its Order and Final Judgment approving the settlement and dismissing the consolidated action with prejudice.

On June 13, 2012, a putative shareholder securities class action was filed against the Company and its Chairman and Chief Executive Officer in the United States District Court for the Western District of Louisiana, styled City of Omaha Police & Fire Retirement System v. LHC Group, Inc., et al., Case No. 6:12-cv-01609-JTI-CMH. The action was filed on behalf of LHC shareholders who purchased shares of the Company's common stock between July 30, 2008 and October 26, 2011. Plaintiff generally alleged that the defendants caused false and misleading statements to be issued in violation of Section 10(b) of the Securities Exchange Act of 1934, amended ("the Exchange Act") and Rule 10b-5 promulgated thereunder and that the Company's Chairman and Chief Executive Officer is a control person under Section 20(a) of the Exchange Act. On November 2, 2012, Lead Plaintiff City of Omaha Police & Fire Retirement System filed an Amended Complaint for Violations of the Fed.era] Securities Laws ("the Amended Complaint") on behalf of the same putative class of LHC shareholders as the original Complaint. In addition to claims under Sections 10(b) and 20(a) of the Exchange Act, the Amended Complaint added a claim against the Chairman and Chief Executive Officer for violation of Section 20A of the Exchange Act. On December 17, 2012, the Company and the Chairman and Chief Executive Officer filed a motion to dismiss the Amended Complaint, which was denied by Order dated March 15, 2013. On June 16, 2014, following mediation, the parties entered into a Stipulation of Settlement. On August 5, 2014, the District Court entered an Order Preliminarily Approving Settlement and Providing for Notice. On March 3, 2015, the District Court entered its Judgments adopting the Report and Recommendation previously issued and dismissing the action with prejudice. The Company's insurance carrier funded the entire \$7.9 million settlement amount.

**Section 6, (11) - Investigations:**

- On September 30, 2011, the Company announced that it had entered into a settlement agreement with the United States government to resolve an investigation the Company first announced on July 13, 2009. The investigation resulted from a qui tam complaint filed by a relator against the Company under the whistleblower provisions of the False Claims Act, 31 U.S.C. sections 3729-3733. Pursuant to the settlement agreement, the Company paid the United States \$65 million (“settlement amount”) in a single lump sum payment. In exchange for the payment of the settlement amount, the United States and the relator released the Company from any civil or administrative monetary claim under the False Claim Act for the covered conduct. The released covered conduct includes claims involving home health services rendered by the Company from 2006 to 2008 with regard to whether such home health services were either not medically necessary or were delivered to patients who were not homebound. The Office of Inspector General (the “OIG”) also agreed to release and refrain from instituting, directing or maintaining any administrative action seeking to exclude the Company from Medicare, Medicaid and other federal health care programs with respect to the covered conduct described above.

LHC Group’s Corporate Integrity Agreement included an annual review by an Independent Review Organization (IRO) to include a claims review of 30 records each from 10 randomly selected home health locations, and a site visit to 10 randomly selected locations to review their action plans and processes following internal compliance audits. The claims reviews for the first three years resulted in the following overall financial error rates for the 300 claims reviewed:

- 2012 -1.5% financial error rate
- 2013 -0.9% financial error rate
- 2014-0.1 % financial error rate

During the site visits made to the 10 randomly selected home health locations, the IRO consistently noted that all of the corrective actions identified had been, or were in the process of being implemented. After the IRO’s most recent site visits, they reported that “all facilities visited demonstrated a strong focus on compliance, a good understanding of the CIA, a proper respect for the audit process ... and a positive view of the compliance culture at LHC.”

Following these 3 years of reviews, the OIG released LHC Group from the claims review process and, in 2015, the 4th CIA reporting year, the OIG replaced the claims review process with an internal compliance audit review process. The IRO report to the OIG for the 4th CIA reporting year identified no instances where the IRO questioned the conclusions of the LHC Group audit process. This conclusion was based on their review of the medical records, the LHC review tool, the underlying audit work papers, and follow-up discussions with the LHC Group auditors. The IRO also identified no overpayments beyond those identified by the LHC Group audit process, and they confirmed LHC Group’s calculation of the identified overpayments; they also found that all claims were canceled and refunded immediately (i.e., well within the CIA’s 90-day requirement) following the conclusion of the audit. Finally, they did not identify any

gaps or unidentified issues. To the contrary, they found that the LHC Group auditors followed a rigorous and thorough process; evaluated each home health visit selected for sampling; and appropriately identified all, and only, the appropriate issues. In the 5th CIA reporting year, the IRO Work plan was updated to do away with the site visits and the IRO's sole focus of work will be a Compliance Risk Monitoring Review focused on LHC's compliance risk assessment process.

The Corporate Integrity Agreement expired on September 30, 2016 by its terms.

- On October 17, 2011, the Company received a subpoena from the OIG. The subpoena requested documents related to the Company's agencies in Oregon, Washington and Idaho. The Company produced the requested documents and cooperated fully with the OIG's review. The Company later learned that the OIG review resulted from a qui tam action filed by a relator under the whistleblower provisions of the federal False Claims Act. On March 7, 2014, the United States District Court for the Western District of Washington granted the government's motion to decline intervention in the relator's action, the relator's complaint was unsealed, and the relator voluntarily dismissed the complaint.
- On November 12, 2015, the Company received a subpoena from the OIG. The subpoena requested documents related to the Company's Somerset, Kentucky provider. The Company produced the requested documents and cooperated fully with the OIG's review. The Company later learned that the OIG review resulted from a qui tam action filed by a relator under the whistleblower provisions of the federal False Claims Act. On September 7, 2017, the court entered an order indicating that the government declined to intervene. On December 12, 2017, the relators served the underlying complaint on LHC Group.
- By letter dated December 9, 2016, the IRS notified LHC Group that the Company's 401(k) Plan ("Plan") had been selected for examination for the form 5500 annual report for the Plan years ended December 31, 2014 and December 31, 2015. The audit is ongoing, but is still at a document/information gathering and response phase. In connection with the audit, the Company has identified certain errors relative to non-discrimination testing during the applicable plan years, and has approximated and reserved for the repayment amounts, which total less than \$500,000 to date. To date, the IRS has not communicated what, if any, failures it might identify and assert that could give rise to any additional claim or assessment. Moreover, as with virtually all IRS qualified plan audits, even if such issues or failures were raised it is unlikely that the resolution of any such issues would result in an assessment against the Plan itself. Although subject to change, the IRS has estimated the initial closing date of the examination to be in or around April 2018.

# Almost Family, Inc.

## Seven Year Enforcement History against Home Health Agencies

Programmatic Attachment B

Page 1 of 2

Project #181084 Willcare

St	Document Type	Provider Name	Case Number	Date Rendered	Legal Entity	Almost Family Entity Since	Fine Amount	Reason for Fine
FL	Defaults and Dismissals	Almost Family	2014009314	10/13/2014	Almost Family PC of Fort Lauderdale, LLC	10/12/2007	\$5,000	Failure to submit quarterly report
FL	Defaults and Dismissals	Almost Family	2012002151	4/30/2012	Almost Family PC of SW FL, LLC	10/12/2007	\$5,000	Failure to ensure background screening
FL	Defaults and Dismissals	Apex Home Healthcare	2011004627	7/6/2011	Caretenders of Jacksonville, LLC	3/27/2008	\$5,000	Failure to submit quarterly report
FL	Defaults and Dismissals	Apex Companion Care	2013001010	3/22/2013	Caretenders of Jacksonville, LLC	3/27/2008	\$5,000	Failure to submit quarterly report
FL	Defaults and Dismissals	Mederi Caretenders	2013008474	10/15/2013	Caretenders Visiting Services of Gainesville, LLC	2/18/2005	\$3,400	Failure to submit quarterly report
FL	Settlement Agreements	Mederi Caretenders Health and Rehab	2014007165	10/6/2014	Caretenders Visiting Services of Gainesville, LLC	2/18/2005	\$500	Failure to furnish proof of financial ability to operate
FL	Defaults and Dismissals	Mederi Caretenders	2014008150	10/10/2014	Caretenders Visiting Services of Gainesville, LLC	2/18/2005	\$600	Failure to submit quarterly report
FL	Defaults and Dismissals	Mederi Caretenders	2014004810	7/3/2014	Caretenders Visiting Services of Hernando County, LLC	12/3/2006	\$1,400	Failure to submit quarterly report
FL	Defaults and Dismissals	Better @ Home	2014008164	10/13/2014	Caretenders Visiting Services of Ocala, LLC	3/17/2006	\$200	Failure to submit quarterly report
FL	Defaults and Dismissals	Mederi Caretenders	2011001114	3/11/2011	Caretenders Visiting Services of Pinellas County, LLC	12/3/2006	\$5,000	Failure to submit quarterly report
FL	Settlement Agreements	Mederi Caretenders	2014011539	4/15/2015	Caretenders Visiting Services of Pinellas County, LLC	12/3/2006	\$500	Failure to submit quarterly report
KY	Immediate Jeopardy Finding	Caretenders	NA	10/19/2016	Caretenders VS of Central, KY LLC	10/10/2007	TBD	Allegations of not training staff on patient abuse policies.

# Almost Family, Inc.

## Seven Year Enforcement History against Home Health Agencies

Programmatic Attachment B

Page 2 of 2

Project #181084 Willcare

St	Document Type	Provider Name	Case Number	Date Rendered	Legal Entity	Almost Family Entity Since	Fine Amount	Reason for Fine
FL	Settlement Agreements	Mederi Caretenders	2015002364	3/10/2015	Home Health Agency - Collier, LLC	12/7/2013	\$200	Hire Physical Therapist without background check.
FL	Defaults and Dismissals	Mederi Caretenders	2010011867	1/14/2011	Mederi Caretenders VS of Broward, LLC	12/3/2006	\$300	Late filing of license renewal application
FL	Defaults and Dismissals	Mederi Caretenders	2010011550	1/14/2011	Mederi Caretenders VS of Broward, LLC	12/3/2006	\$300	Late filing of license renewal application
FL	Defaults and Dismissals	Mederi Caretenders	2013008555	12/4/2013	Mederi Caretenders VS of Broward, LLC	12/3/2006	\$2,000	Failure to submit quarterly report
FL	Defaults and Dismissals	Mederi Caretenders	2011001111	2/23/2011	Mederi Caretenders VS of SW FL, LLC	12/3/2006	\$5,000	Failure to submit quarterly report
FL	Settlement Agreements	Suncrest Omni	2014008363	10/29/2014	OMNI Home Health - Hernando, LLC	12/7/2013	\$500	Failure to submit quarterly report
FL	Defaults and Dismissals	Suncrest Omni	2014005135	7/7/2014	OMNI Home Health District 2, LLC	12/7/2013	\$500	Late filing change of address
GA	Notice of Intent	Suncrest Home Health		9/4/2014	SunCrest Home Health of Georgia, Inc.	12/7/2013	\$450	Violations of Licensure Requirements

**Programmatic Attachment C: LHC Group, Inc. Facilities  
Project #181084 Willcare**

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**Division -  
Acadia  
Division  
Arkansas - Home  
Health**

**1. Arkansas Home Health  
Providers-III, LLC (337)**

**d/b/a Elite Home Health(481)**

Effective Date: 7/1/2016

Tax ID# 47-1716449

NPI # 1306247770

Medicare # 04-7122

Medicaid # 209640514

Medicaid # 205518738 (Private Duty  
Nursing)

318 S. Rhodes

West Memphis, AR 72301-4215

Tel: 870-732-7777

Fax: 870-733-3825

**Locations:**

**2. Arkansas Home Health  
Providers-IV, LLC (335)**

**d/b/a Elite Home Health(479)**

Effective Date: 7/1/2016

Tax ID# 47-1754828

NPI # 1265833636

Medicare # 04-7145

Medicaid # 209027514

Medicaid # 205519738 (Private  
Duty)

3024 Red Wolf Blvd, Suite 6

Jonesboro, AR 72401-7415

Tel: 870-520-6034

Fax: 870-520-6279

**Locations:**

**3. Arkansas HomeCare of  
Forrest City, LLC (1)**

**d/b/a Elite Home Health(6)**

Effective Date: 6/1/2006

Tax ID# 06-1778265

NPI # 1609821982

Medicare # 04-7128

Medicaid # 162947514

4200 N. Washington Street, Suite 1

Forrest City, AR 72335-7672

Tel: 870-261-0188

Fax: 870-261-0177

**Locations:**

**4. Arkansas HomeCare of  
Fulton, LLC (2)**

**d/b/a North Arkansas**

**HomeCare(8)**

Effective Date: 5/1/2007

Tax ID# 33-1154428

NPI # 1295852366

Medicare # 04-7115

Medicaid # 167312514

Medicaid # 215180738 (Private Duty  
Nursing)

Medicaid # 215322732 (Personal  
Care Services)

Medicaid # 216674797 (Attendant  
Care)

Medicaid # 216112757 (Respite)

111 N. Main St, Suite 1

Salem, AR 72576-9473

Tel: 870-895-2273

Fax: 870-895-5515

**Locations:**

**North Arkansas HomeCare (126)  
Branch**

Effective Date: 8/13/2007

Branch ID: 04Q7115001

501 Hospital Drive

Mountain Home, AR 72653-2912

Tel: 870-425-8844

Fax: 870-425-8848

**North Arkansas HomeCare (1040)  
Branch**

Effective Date: 10/1/2011

Branch ID: 04Q7115002

152 Dry Kiln Road

Batesville, AR 72501-8393

Tel: 870-698-1413

Fax: 870-793-5044

**5. Arkansas HomeCare of Hot  
Springs, LLC (3)**

**d/b/a Elite Home Health(36)**

Effective Date: 12/1/2005

Tax ID# 20-3552602

NPI # 1790724102

Medicare # 04-7151

Medicaid # 159879514

835 Central Ave, Suite 301

Hot Springs, AR 71901-5318

Tel: 501-627-0540

Fax: 501-627-0513

**Locations:**

**Elite Home Health (338)**

Branch

Effective Date: 1/11/2011

Branch ID: 04Q7151001

2101 Congo Rd, Suite 900

Benton, AR 72015-2663

Tel: 501-776-1814

Fax: 501-776-1891

**6. CMC Home Health and  
Hospice, LLC (4)**

**d/b/a North Arkansas**

**HomeCare(37)**

Effective Date: 6/1/2008

Tax ID# 26-2688869

NPI # 1255599189

Medicare # 04-7046

Medicaid # 173776514

54 Grasse St

Calico Rock, AR 72519-0438

Tel: 870-297-3738

Fax: 870-297-3739

**Locations:**

**7. Eureka Springs Hospital  
HomeCare, LLC (5)**

**d/b/a Elite Home Health(20)**

Effective Date: 4/16/2007

Tax ID# 72-1587844

NPI # 1427185149

Medicare # 04-7134

Medicaid # 167372514

146 Passion Play Rd, Suite B

Eureka Springs, AR 72632-9455

Tel: 479-253-5554

Fax: 479-253-7708

**Locations:**

**Elite Home Health (1043)**

Branch

Effective Date: 8/29/2011

Branch ID: 04Q7134002

**3/15/2018**

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115 W. Industrial Park Road, Suite 7

Harrison, AR 72601-2165

Tel: 870-391-3653

Fax: 870-391-3658

**8. Jefferson Regional  
HomeCare, LLC (6)**

**d/b/a Jefferson HomeCare(43)**

Effective Date: 6/1/2008

Tax ID# 26-1806757

NPI # 1891972642

Medicare # 04-7093

Medicaid # 173775514

Medicaid # 217241732 (Personal  
Care Services)

2720 West 28th Avenue

Pine Bluff, AR 71603-4919

Tel: 870-534-3420

Fax: 870-534-4843

**Locations:**

**9. LHCG XLII, LLC (275)**

**d/b/a Elite Home Health(366)**

Effective Date: 3/1/2013

Tax ID# 30-0760667

NPI # 1154668895

Medicare # 04-7339

Medicaid # 199113514

Medicaid # 201222738 (Private Duty  
Nursing)

Medicaid # 215966732 (Personal  
Care Services)

Medicaid # 216663797 (Attendant  
Care)

Medicaid # 216781757 (Respite)

4019 Massard Rd

Fort Smith, AR 72903-6221

Tel: 479-494-7273

Fax: 479-494-7387

**Locations:**

**10. LHCG XLII, LLC (275)**

**d/b/a Elite Home Health(367)**

Effective Date: 3/1/2013

Tax ID# 30-0760667

NPI # 1447597182

Medicare # 04-7028

Medicaid # 199129514

Medicaid # 216752732 (Personal  
Care)

Medicaid # 216780757 (Respite)



## Programmatic Attachment C: LHC Group, Inc. Facilities

### Project #181084 Willcare

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Medicaid # 216779738 (Private Duty)  
Medicaid # 216778797 (Attendant Care)  
Medicaid # 219917765 (Targeted Case Management)  
1515 Merrill Drive, Suite E-100  
Little Rock, AR 72211-1980  
Tel: 501-223-3333  
Fax: 501-228-0252

#### Locations:

**11.LHCG XLII, LLC (275)**  
**d/b/a Elite Home Health(368)**  
Effective Date: 3/1/2013  
Tax ID# 30-0760667  
NPI # 1043557788  
Medicare # 04-7346  
Medicaid # 199125514  
Medicaid # 201199738 (Private Duty Nursing)  
Medicaid # 217938732 (Personal Care)  
Medicaid # 219186765 (Targeted Case Management)  
Medicaid # 219153797 (Attendant Care)  
Medicaid # 219114757 (Respite Care)  
1048 South 48th Street, Suite A  
Springdale, AR 72762-6069  
Tel: 479-756-5002  
Fax: 479-756-5504

#### Locations:

**12.Mena Medical Center Home Health, LLC (7)**  
**d/b/a Elite Home Health(68)**  
Effective Date: 7/1/2005  
Tax ID# 47-0944781  
NPI # 1649354960  
Medicare # 04-7133  
Medicaid # 159676514  
1201 South Mena Street, Suite 2  
Mena, AR 71953-4280  
Tel: 479-394-1812  
Fax: 479-394-1929

#### Locations:

**13.Southwest Arkansas HomeCare, LLC (8)**  
**d/b/a Elite Home Health(84)**  
Effective Date: 10/1/2007  
Tax ID# 26-0274543  
NPI # 1881892404  
Medicare # 04-7138  
Medicaid # 168531514  
Medicaid # 210951732 (Personal Care)  
Medicaid # 212701797 (Attendant Care)  
Medicaid # 212724738 (Private Duty)  
Medicaid # 212702757 (Respite)  
132 Medical Circle, Suite 400  
Nashville, AR 71852-8610  
Tel: 870-845-8206  
Fax: 870-451-9741

#### Locations:

Elite Home Health (134)  
Branch  
Effective Date: 10/1/2014  
Branch ID: 04Q7138001  
1600 Arkansas Boulevard, Suite 106  
Texarkana, AR 71854-1681  
Tel: 870-774-5110  
Fax: 870-774-5303

### Arkansas - Management Location

#### 1.Board of Governors of Dallas County Medical Center (13)

**d/b/a Elite Home Health(15)**  
Effective Date: 9/1/2004  
Tax ID# 27-0029542  
NPI # 1952499840  
Medicare # 04-7169  
Medicaid # 148415514  
310 W. College Street  
Fordyce, AR 71742-2230  
Tel: 870-352-2603  
Fax: 870-352-2657

#### Locations:

### Illinois - Home Health 3/15/2018 2 of 45

**1.Illinois LIV, LLC (289)**  
**d/b/a Northwestern Illinois Home Health(393)**  
Effective Date: 4/1/2014  
Tax ID# 38-3925282  
NPI # 1477979078  
Medicare # 14-7619  
Medicaid # Pending  
151 Tenney Street  
Kewanee, IL 61443-3447  
Tel: 309-623-4022  
Fax: 309-792-7296

#### Locations:

**2.LHCG XXXVII, LLC (277)**  
**d/b/a LHC-Illinois Home Health Care(373)**  
Effective Date: 3/1/2013  
Tax ID# 30-0760684  
NPI # 1841537503  
Medicare # 14-7799  
Medicaid # 300760684001  
385 E. Ash Avenue, Suite A  
Decatur, IL 62526-6162  
Tel: 217-423-9860  
Fax: 217-876-0112

#### Locations:

LHC-Illinois Home Health Care (1128)  
Branch

Effective Date: 3/1/2013  
Branch ID: 14Q7799001  
2004 Fox Drive, Suite E  
Champaign, IL 61820-7357  
Tel: 217-352-4387  
Fax: 217-352-2505  
**3.LHCG XXXVII, LLC (277)**  
**d/b/a LHC-Illinois Home Health Care(374)**

Effective Date: 3/1/2013  
Tax ID# 30-0760684  
NPI # 1740527407  
Medicare # 14-7716  
Medicaid # 300760684002  
906 Skyline Dr, Suite 200  
Marion, IL 62959-4876  
Tel: 618-997-6565  
Fax: 618-997-2761

#### Locations:

LHC-Illinois Home Health Care (1129)  
Branch  
Effective Date: 3/1/2013  
Branch ID: 14Q7716001  
11 Cusumano Professional Plaza Drive  
Mt. Vernon, IL 62864-6736  
Tel: 618-244-0934  
Fax: 618-244-1418  
LHC-Illinois Home Health Care (1130)  
Branch

Effective Date: 3/1/2013  
Branch ID: 14Q7716002  
4509 N. Illinois St, Suite 2  
Swansea, IL 62226-1524  
Tel: 618-235-2308  
Fax: 618-235-2436

### 4.LHCG XXXVII, LLC (277)

#### d/b/a LHC-Illinois Home Health Care(375)

Effective Date: 3/1/2013  
Tax ID# 30-0760684  
NPI # 1801133533  
Medicare # 14-7683  
Medicaid # 300760684003  
20200 Governors Dr, Suite 301  
Olympia Fields, IL 60461-1032  
Tel: 708-283-4240  
Fax: 708-283-4241

#### Locations:

LHC-Illinois Home Health Care (1131)  
Branch  
Effective Date: 3/1/2013  
Branch ID: 14Q7683001  
4415 West Harrison St, Suite 410  
Hillside, IL 60162-1955  
Tel: 708-216-9803  
Fax: 708-216-9810  
LHC-Illinois Home Health Care (1132)  
Branch

Effective Date: 3/1/2013  
Branch ID: 14Q7683002  
9415 S. Western Ave, Suite 208  
Chicago, IL 60643-6700

**Programmatic Attachment C: LHC Group, Inc. Facilities  
Project #181084 Willcare**

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Tel: 773-298-0002  
Fax: 773-298-0004

**Louisiana - Home  
Health**

**1.AAA Home Health, Inc. (314)**

**d/b/a Nursing Care(444)**

Effective Date: 9/1/2015

Tax ID# 72-1187363

NPI # 1134126337

Medicare # 19-7403

Medicaid # 1402907

1102 N. Victor II Blvd

Morgan City, LA 70380-1331

Tel: 985-384-3478

Fax: 985-384-0560

**Locations:**

**2.Acadian Home Health Care**

**Services, LLC (15)**

**d/b/a Southern Home**

**Health(258)**

Effective Date: 1/1/2003

Tax ID# 71-0917929

NPI # 1326095209

Medicare # 19-7766

Medicaid # 1432695

3417 Patrick Street

Lake Charles, LA 70605-1715

Tel: 337-479-2233

Fax: 337-479-2244

**Locations:**

**Southern Home Health (49)**

Branch

Effective Date: 1/1/2003

Branch ID: 19Q7766001

810 East 4th Street

DeQuincy, LA 70633-3708

Tel: 337-786-8231

Fax: 337-786-8215

**3/15/2018**

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**3.Acadian HomeCare of New**

**Iberia, LLC (266)**

**d/b/a N/A(361)**

Effective Date: 11/1/2012

Tax ID# 46-3076268

NPI # 1306197538

Medicare # 19-7718

Medicaid # 1406261

124 E. Main St. Suite 210

New Iberia, LA 70560-3725

Tel: 337-367-1882

Fax: 337-367-5037

**Locations:**

**4.Acadian HomeCare, LLC (14)**

**d/b/a N/A(7)**

Effective Date: 1/1/2003

Tax ID# 71-0917930

NPI # 1275580151

Medicare # 19-7060

Medicaid # 1400602

458 Heymann Blvd, Bldg A

Lafayette, LA 70503-2627

Tel: 337-235-8185

Fax: 337-235-7903

**Locations:**

**Acadian HomeCare / Acadia**

**Parish (3)**

Branch

Effective Date: 1/1/2003

Branch ID: 19Q7060001

714 N Ave K

Crowley, LA 70526-3800

Tel: 337-785-8080

Fax: 337-785-2658

**Kaplan HomeCare (5)**

Branch

Effective Date: 1/1/2003

Branch ID: 19Q7060007

710 N. Foote Avenue

Kaplan, LA 70548-3030

Tel: 337-643-8207

Fax: 337-643-8210

**Ville Platte Home Health Agency**

**(9)**

Branch

Effective Date: 1/1/2003

Branch ID: 19Q7060009

735 W. Main Street

Ville Platte, LA 70586-4325

Tel: 337-363-9442

Fax: 337-363-3419

**5.Baton Rouge HomeCare,**

**LLC (230)**

**d/b/a Feliciana Home Health**

**South(13)**

Effective Date: 6/29/2001

Tax ID# 72-1506691

NPI # 1770530651

Medicare # 19-7102

Medicaid # 1401021

826 W. Highway 30, Suite C

Gonzales, LA 70737-4852

Tel: 225-450-3294

Fax: 225-450-3298

**Locations:**

**6.Beauregard Memorial**

**Hospital HomeCare, LLC (19)**

**d/b/a Beauregard Memorial**

**Hospital Home Health**

**Agency(140)**

Effective Date: 10/1/2008

Tax ID# 26-3410883

NPI # 1225288566

Medicare # 19-7183

Medicaid # 1401838

1808 Hwy 190 W, Suite G

DeRidder, LA 70634-6023

Tel: 337-462-7188

Fax: 337-462-7455

**Locations:**

**7.Hood Home Health Service,**

**LLC (24)**

**d/b/a Baton Rouge General**

**Home Health(31)**

Effective Date: 6/1/2004

Tax ID# 34-1994325

NPI # 1558318436

Medicare # 19-7163

Medicaid # 1401633

3401 N. Boulevard, Suite 360

Baton Rouge, LA 70806-3743

Tel: 225-376-6157

Fax: 225-332-0662

**Locations:**

**8.LHCG CVI, LLC (407)**

**d/b/a CHRISTUS Homecare St.**

**Patrick(569)**

Effective Date: 9/1/2017

Tax ID# 82-2020284

NPI # 1386165397

Medicare # 19-7015

Medicaid # Pending

4444 Lake Street

Lake Charles, LA 70605-4312

Tel: 337-395-5600

Fax: 337-395-5780

**Locations:**

**9.LHCG CVIII, LLC (405)**

**d/b/a CHRISTUS Homecare**

**Schumpert(567)**

Effective Date: 9/1/2017

Tax ID# 82-1666299

NPI # 1780105908

Medicare # 19-7074

Medicaid # Pending

1700 Buckner Street, Suite 200

Shreveport, LA 71101-4400

Tel: 318-681-7200

Fax: 318-681-6764

**Locations:**

**10.LHCG LXXII, LLC (328)**

**d/b/a Acadian HomeCare /**

**Abbeville(466)**

Effective Date: 1/1/2016

Tax ID# 47-5634097

NPI # 1801260476

Medicare # 19-7769

Medicaid # 1400408

302 North Hospital Drive

Abbeville, LA 70510-4041

Tel: 337-892-0805

Fax: 337-892-0909

**Locations:**

**3/15/2018**

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**11.LHCG LXXVIII, LLC (347)**

**d/b/a Jeff Davis MD**

**Homecare(500)**

Effective Date: 11/1/2016

Tax ID# 81-3720770

NPI # 1588112239

Medicare # 19-7039

Medicaid # 1400394

1322 Elton Road, Suite B

Jennings, LA 70546

Tel: 337-824-1188

Fax: 337-824-7007

**Locations:**

**12.LHCG V, LLC (23)**

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**d/b/a Glenwood Home Health Services(26)**

Effective Date: 8/1/2003  
Tax ID# 68-0538825  
NPI # 1659328532  
Medicare # 19-7084  
Medicaid # 1400840  
4624 Cypress St, Suite 4  
West Monroe, LA 71291-1348  
Tel: 318-396-0452  
Fax: 318-396-0351

**Locations:**

**13.LHCG VI, LLC (22)**

**d/b/a Franklin HomeCare(1)**

Effective Date: 8/8/2005  
Tax ID# 72-1568177  
NPI # 1184671059  
Medicare # 19-7606  
Medicaid # 1404659  
1820 Main Street  
Franklin, LA 70538-3110  
Tel: 337-828-2929  
Fax: 337-828-7088

**Locations:**

**14.LHCG VIII, LLC (20)**

**d/b/a Bunkie HomeCare(11)**

Effective Date: 3/1/2004  
Tax ID# 87-0713147  
NPI # 1306884606  
Medicare # 19-7114  
Medicaid # 1401145  
1123 Shirley Road  
Bunkie, LA 71322-1553  
Tel: 318-346-3312  
Fax: 318-346-3318

**Locations:**

**15.LHCG XIII, LLC (29)**

**d/b/a Lourdes Home Health(53)**

Effective Date: 2/1/2007  
Tax ID# 20-8068308  
NPI # 1598829129  
Medicare # 19-7057  
Medicaid # 1400572  
5000 Ambassador Caffery Pkwy,  
Suite  
102  
Lafayette, LA 70508-6984  
Tel: 337-406-2539  
Fax: 337-406-8414

**Locations:**

**16.LHCG XV, LLC (189)**

**d/b/a St. Landry HomeCare(188)**

Effective Date: 9/1/2009  
Tax ID# 27-0818309  
NPI # 1538392238  
Medicare # 19-7136  
Medicaid # 1401366  
426 Heather Drive  
Opelousas, LA 70570  
Tel: 337-948-8988  
Fax: 337-948-0177

**Locations:**

**17.LHCG XVI, LLC (186)**

**d/b/a Felician Home Health(186)**

Effective Date: 11/1/2009  
Tax ID# 27-1032201  
NPI # 1053645598  
Medicare # 19-7099  
Medicaid # 1400963  
9735 Grace Lane  
Clinton, LA 70722-4925  
Tel: 225-683-3347  
Fax: 225-683-1278

**Locations:**

**18.Louisiana Home Health of Felician, LLC (434)**

**d/b/a Ochsner Home Health of Baton Rouge(600)**

Effective Date: 10/1/2017  
Tax ID# 37-1863351  
NPI # 1659897759  
Medicare # 19-7192  
Medicaid # Pending  
2645 O'Neal Lane, Building C, Suite C  
Baton Rouge, LA 70816-3179  
Tel: 225-952-8400  
Fax: 225-952-8440

**Locations:**

**19.Louisiana Home Health of Hammond, LLC (187)**

**d/b/a Ochsner Home Health of Covington(187)**

Effective Date: 2/1/2009  
Tax ID# 26-4021300  
NPI # 1528205291  
Medicare # 19-7156  
Medicaid # 1401561  
100 Innwood Dr, Suite C  
Covington, LA 70433-9123  
Tel: 985-892-7627  
Fax: 985-892-7959

**Locations:**

**20.Louisiana Home Health of Houma, LLC (28)**

**d/b/a Ochsner Home Health - West Bank(35)**

Effective Date: 2/1/2009  
Tax ID# 26-4021213  
NPI # 1972740645  
Medicare # 19-7112  
Medicaid # 1401102  
2439 Manhattan Blvd, Suite 400  
Harvey, LA 70058-5360  
Tel: 504-227-9991  
Fax: 504-367-0597

**Locations:**

**3/15/2018**

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**21.Louisiana HomeCare of Delhi, LLC (21)**

**d/b/a Delhi HomeCare(16)**  
Effective Date: 8/1/2001

Tax ID# 72-1510211  
NPI # 1124075098  
Medicare # 19-7089  
Medicaid # 1400891  
509 Cincinnati Street  
Delhi, LA 71232-3009  
Tel: 318-878-5152  
Fax: 318-878-9671

**Locations:**

**22.Louisiana HomeCare of Kenner, LLC (123)**

**d/b/a Ochsner Home Health of Kenner(156)**

Effective Date: 2/1/2009  
Tax ID# 26-4020996  
NPI # 1801033576  
Medicare # 19-7203  
Medicaid # 1401765  
200 W Esplanade Ave., Suite 601  
Kenner, LA 70065-2475  
Tel: 504-842-5585  
Fax: 504-842-5563

**Locations:**

**23.Louisiana HomeCare of Minden, LLC (30)**

**d/b/a Louisiana HomeCare(55)**

Effective Date: 8/7/2002  
Tax ID# 72-1518559  
NPI # 1225085111  
Medicare # 19-7776  
Medicaid # 1406716  
926 Homer Road  
Minden, LA 71055-3086  
Tel: 318-377-0800  
Fax: 318-377-0841

**Locations:**

**Louisiana HomeCare (25)**

**Branch**

Effective Date: 9/1/2004  
Branch ID: 19Q7776001  
1112 Doctors Drive  
Springhill, LA 71075-4528  
Tel: 318-539-5980  
Fax: 318-539-5982

**24.Louisiana HomeCare of Miss-Lou, LLC (31)**

**d/b/a N/A(54)**

Effective Date: 1/1/2003  
Tax ID# 47-0902218  
NPI # 1922046226  
Medicare # 19-7063  
Medicaid # 1400637  
4951 Highway 84 W  
Vidalia, LA 71373-3579  
Tel: 318-336-2323  
Fax: 318-336-2631

**Locations:**

**25.Louisiana HomeCare of Monroe, LLC (32)**

**d/b/a St. Francis Medical Center Home Health(77)**

Effective Date: 9/1/2001  
Tax ID# 72-1508052  
NPI # 1295782183

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Medicare # 19-7091  
Medicaid # 1400912  
1107 Hudson Lane, Suite A  
Monroe, LA 71201-6034  
Tel: 318-327-4500  
Fax: 318-410-8879

#### Locations:

**26.Louisiana HomeCare of North Louisiana, LLC (26) d/b/a Louisiana HomeCare of Alexandria(76)**

Effective Date: 1/8/2002  
Tax ID# 04-3684185  
NPI # 1831137132  
Medicare # 19-7159  
Medicaid # 1401595  
6501 Coliseum Blvd, Suite 700D  
Alexandria, LA 71303-3977  
Tel: 318-427-7756  
Fax: 318-427-7759

#### Locations:

**27.Louisiana HomeCare of Northwest Louisiana, LLC (25)**

**d/b/a Louisiana HomeCare(18)**  
Effective Date: 9/1/2001  
Tax ID# 72-1510431  
NPI # 1285681171  
Medicare # 19-7052  
Medicaid # 1400521  
301 Jefferson Street  
Mansfield, LA 71052-3201  
Tel: 318-872-0821  
Fax: 318-871-1884

#### Locations:

**Louisiana HomeCare / Shreveport (53)**

##### Branch

Effective Date: 10/1/2001  
Branch ID: 19Q7052001  
6425 Youree Dr, Suite 290  
One Bellemead Center  
Shreveport, LA 71105-4634  
Tel: 318-219-9549  
Fax: 318-219-3211

**Louisiana HomeCare / Zwolle (54)**

##### Branch

Effective Date: 5/7/2004  
Branch ID: 19Q7052002  
2523 Obrie Street  
Zwolle, LA 71486-3283  
Tel: 318-645-7022  
Fax: 318-645-7025

**28.Louisiana HomeCare of Raceland, LLC (124) d/b/a Ochsner Home Health of Raceland(157)**

Effective Date: 2/1/2009  
Tax ID# 26-4020922  
NPI # 1356588024  
Medicare # 19-7119  
Medicaid # 1401196  
4608 Highway 1  
Raceland, LA 70394-2623  
Tel: 985-537-8362

Fax: 985-537-8361

#### Locations:

**3/15/2018**

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**29.Louisiana HomeCare of Slidell, LLC (33) d/b/a Slidell Memorial Hospital Home Health(78)**

Effective Date: 1/1/2003  
Tax ID# 41-2071626  
NPI # 1760439657  
Medicare # 19-7104  
Medicaid # 1401048  
2990 Gause Blvd E, Suite B  
Slidell, LA 70461-4248  
Tel: 985-649-4990  
Fax: 985-649-3507

#### Locations:

**30.Louisiana In-Home Partner- I, LLC (361)**

**d/b/a Minden Medical Center Home Health Agency(516)**

Effective Date: 1/1/2017  
Tax ID# 81-4832564  
NPI # 1275079568  
Medicare # 19-7193  
Medicaid # 1401935  
346 Homer Road  
Minden, LA 71055-2834  
Tel: 318-377-4663  
Fax: 318-377-4699

#### Locations:

**31.River West Home Care, LLC (35)**

**d/b/a Felician Home Health West(46)**

Effective Date: 5/1/2008  
Tax ID# 26-0802303  
NPI # 1760678528  
Medicare # 19-7181  
Medicaid # 1401811  
58017 Plaquemine St  
Plaquemine, LA 70764-2521  
Tel: 225-687-0820  
Fax: 225-687-1920

#### Locations:

**32.Tri-Parish Community HomeCare, LLC (37)**

**d/b/a Eunice Community Home Health(86)**

Effective Date: 1/1/2003  
Tax ID# 71-0917928  
NPI # 1558318451  
Medicare # 19-7462  
Medicaid # 1403563  
3581 Highway 190  
Eunice, LA 70535-5129  
Tel: 337-550-0002  
Fax: 337-550-0004

#### Locations:

## Missouri - Home Health

**1.LHCG LXV, LLC (311) d/b/a Missouri Defn Home Health(429)**

Effective Date: 3/1/2015  
Tax ID# 47-2557600  
NPI # 1821486267  
Medicare # 26-7499  
Medicaid # 1821486267  
1226 Linn Street, Suite F  
Sikeston, MO 63801-5202  
Tel: 573-472-2234  
Fax: 573-472-5918

#### Locations:

## Texas - Home Health

**1.GSHS Home Health, LLC (52) d/b/a CHRISTUS Good Shepherd(28)**

Effective Date: 8/8/2006  
Tax ID# 16-1727633  
NPI # 1023128220  
Medicare # 45-7691  
Medicaid # 176556201  
103 W. Loop 281, Unit 480  
Longview, TX 75605-4653  
Tel: 903-315-5525  
Fax: 903-315-2650

#### Locations:

**2.In-Home Partner of Texas-I, LLC (368)**

**d/b/a Palestine Regional Home Health(523)**

Effective Date: 1/1/2017  
Tax ID# 35-2582227  
NPI # 1306384797  
Medicare # 74-7665  
Medicaid # Pending  
4002 South Loop 256, Suite M  
Palestine, TX 75801-8496  
Tel: 903-723-5037  
Fax: 903-723-5474

#### Locations:

**3.LHCG CXI, LLC (415) d/b/a CHRISTUS St. Michael Home Health**

**Atlanta(577)**  
Effective Date: 9/1/2017  
Tax ID# 82-2140184  
NPI # 1922520576  
Medicare # 45-7736  
Medicaid # Pending  
1007 South William Street  
Atlanta, TX 75551-3245  
Tel: 903-799-3100  
Fax: 903-796-1160

#### Locations:

**4.LHCG CXII, LLC (412)**

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**d/b/a CHRISTUS**

**Homecare(574)**

**Effective Date: 9/1/2017**

**Tax ID# 82-2146037**

**NPI # 1669994471**

**Medicare # 74-3197**

**Medicaid # Pending**

**821 E. Southeast Loop 323, Suite 560**

**Tyler, TX 75701-9667**

**Tel: 903-534-6267**

**Fax: 903-534-6296**

**Locations:**

**5.LHCG CXIII, LLC (413)**

**d/b/a CHRISTUS Homecare**

**SPOHN(575)**

**Effective Date: 9/1/2017**

**Tax ID# 82-2159030**

**3/15/2018**

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**NPI # 1548785843**

**Medicare # 67-7814**

**Medicaid # Pending**

**6200 Saratoga Blvd, Suite 104**

**Corpus Christi, TX 78414-3478**

**Tel: 361-994-3400**

**Fax: 361-994-3498**

**Locations:**

**6.LHCG CXV, LLC (411)**

**d/b/a CHRISTUS**

**HomeCare(573)**

**Effective Date: 9/1/2017**

**Tax ID# 82-2187727**

**NPI # 1588187082**

**Medicare # 67-7544**

**Medicaid # Pending**

**750 Landa Street, Suite B**

**New Braunfels, TX 78130-6114**

**Tel: 830-629-7568**

**Fax: 830-629-0615**

**Locations:**

**7.LHCG CXVI, LLC (416)**

**d/b/a CHRISTUS VNA**

**Homecare San Antonio(578)**

**Effective Date: 9/1/2017**

**Tax ID# 82-2206275**

**NPI # 1962926642**

**Medicare # 45-7777**

**Medicaid # Pending**

**4241 Woodcock Drive, Suite A-100**

**San Antonio, TX 78228-1328**

**Tel: 210-785-5200**

**Fax: 210-785-5490**

**Locations:**

**8.LHCG CXXXVII, LLC (630)**

**d/b/a DFW Home Health(882)**

**Effective Date: 2/1/2018**

**Tax ID# 38-4052246**

**NPI # 1962917070**

**Medicare # 67-9657**

**1205 Bent Oaks Ct, Suite 100**

**Denton, TX 76210-8080**

**Tel: 940-387-4594**

**Fax: 940-387-4915**

**Locations:**

**9.LHCG XXXIII, LLC (265)**

**d/b/a DFW Home Health(359)**

**Effective Date: 7/1/2012**

**Tax ID# 45-4894023**

**NPI # 1043576911**

**Medicare # 45-8444**

**Medicaid # 326496201**

**8440 Walnut Hill Lane, Suite 840**

**Dallas, TX 75231-3833**

**Tel: 214-891-8700**

**Fax: 214-891-8799**

**Locations:**

**10.LHCG XXXIII, LLC (265)**

**d/b/a DFW Home Health(360)**

**Effective Date: 7/1/2012**

**Tax ID# 45-4894023**

**NPI # 1619237310**

**Medicare # 45-7575**

**Medicaid # 326989601**

**1307 8th Ave, Suite 305**

**Ft. Worth, TX 76104-4140**

**Tel: 817-529-7555**

**Fax: 817-529-7560**

**Locations:**

**11.Marshall HomeCare, LLC**

**(54)**

**d/b/a CHRISTUS Good**

**Shepherd(64)**

**Effective Date: 5/1/2005**

**Tax ID# 02-0732705**

**NPI # 1235241639**

**Medicare # 45-8244**

**Medicaid # 176628901**

**401 South Bolivar Street**

**Marshall, TX 75670-4109**

**Tel: 903-927-1144**

**Fax: 903-927-1181**

**Locations:**

**12.Red River HomeCare, LLC**

**(55)**

**d/b/a N/A(73)**

**Effective Date: 8/30/2004**

**Tax ID# 81-0627339**

**NPI # 1740392141**

**Medicare # 45-3151**

**Medicaid # 168196701**

**3185 Lamar Avenue**

**Paris, TX 75460-5019**

**Tel: 903-739-9483**

**Fax: 903-739-8850**

**Locations:**

**13.Rivercrest Home Health**

**Care, Inc. (56)**

**d/b/a Home Care**

**Connections(113)**

**Effective Date: 4/1/2008**

**Tax ID# 46-0504059**

**NPI # 1073671657**

**Medicare # 67-9259**

**Medicaid # 158821201**

**3131 Bell St, Suite 211**

**Amarillo, TX 79106-5030**

**Tel: 806-356-8911**

**Fax: 806-356-8922**

**Locations:**

**14.Texas Health Care Group of**

**Texarkana, LLC (59)**

**d/b/a CHRISTUS HomeCare -**

**St. Michael(345)**

**Effective Date: 10/10/2003**

**Tax ID# 41-2076211**

**NPI # 1437269651**

**Medicare # 67-9372**

**Medicaid # 170722601**

**5604 Summerhill Rd, Suite 5**

**Texarkana, TX 75503-4652**

**Tel: 903-255-5100**

**Fax: 903-255-5190**

**Locations:**

**15.Texas Health Care Group of**

**The Golden Triangle,**

**LLC (57)**

**d/b/a Southern Home**

**Health(23)**

**Effective Date: 2/20/2004**

**Tax ID# 27-0075424**

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**NPI # 1578673786**

**Medicare # 67-9237**

**Medicaid # 175881501**

**2348 Highway 69 N**

**Nederland, TX 77627-8874**

**Tel: 409-721-9075**

**Fax: 409-721-6206**

**Locations:**

**Wisconsin - Home**

**Health**

**1.LHCG XLVII, LLC (284)**

**d/b/a Wisconsin Home**

**Health(384)**

**Effective Date: 7/1/2013**

**Tax ID# 32-0408265**

**NPI # 1336584275**

**Medicare # 52-7282**

**Medicaid # 1336584275**

**2775 S. Moorland Rd, Suite 203**

**New Berlin, WI 53151-3718**

**Tel: 262-641-0459**

**Fax: 262-641-0999**

**Locations:**

**Division -**

**Beltway**

**Division**

**Maryland - Home**

**Health**

**1.HomeCall, Inc. (205)**

**d/b/a HomeCall(148)**

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Effective Date: 12/1/2008  
Tax ID# 52-0998217  
NPI # 1295820439  
Medicare # 21-7123A  
Medicaid # 1916335000  
4701 Mount Hope Drive, Suite A  
Baltimore, MD 21215-3246  
Tel: 410-644-0105  
Fax: 410-368-3681

**Locations:**

**2.HomeCall, Inc. (205)**

**d/b/a HomeCall(149)**

Effective Date: 12/1/2008  
Tax ID# 52-0998217  
NPI # 1790870350  
Medicare # 21-7040  
Medicaid # 776313100  
5301 Buckeystown Pike, Suite 490  
Frederick, MD 21704-8370  
Tel: 240-215-4668  
Fax: 301-698-8191

**Locations:**

**HomeCall (331)**

Branch

Effective Date: 12/1/2008  
Branch ID: 21Q7040001  
2301 Research Blvd, Suite 303  
Rockville, MD 20850-6265  
Tel: 301-417-2172  
Fax: 301-330-0687

**HomeCall (330)**

Branch

Effective Date: 12/1/2008  
Branch ID: 21Q7040002  
1101 Opal Court, Suite 301  
Hagerstown, MD 21740-5947  
Tel: 240-329-9033  
Fax: 301-766-4825

**3.HomeCall, Inc. (205)**

**d/b/a HomeCall(150)**

Effective Date: 12/1/2008  
Tax ID# 52-0998217  
NPI # 1700971843  
Medicare # 21-7066B  
Medicaid # 185623500  
29509 Canvasback Dr, Suite 204  
Easton, MD 21601-7164  
Tel: 410-822-4020  
Fax: 410-763-9082

**Locations:**

**HomeCall (333)**

Branch

Effective Date: 12/1/2008  
Branch ID: 21Q7066003  
50 Post Office Road, Suite 104  
Waldorf, MD 20602-3702  
Tel: 301-632-6260  
Fax: 301-396-5872

**HomeCall (335)**

Branch

Effective Date: 12/1/2008  
Branch ID: 21Q7066006  
180 Admiral Cochrane Dr, Suite 320  
Annapolis, MD 21401-7356  
Tel: 443-716-1150  
Fax: 410-224-6944

**HomeCall (1093)**

Branch

Effective Date: 6/1/2014  
Branch ID: 21Q7066007  
118 West Main Street, Suite 201  
Salisbury, MD 21801-5003  
Tel: 410-219-3496  
Fax: 410-219-3069

**4.HomeCall, Inc. (205)**

**d/b/a HomeCall(151)**

Effective Date: 12/1/2008  
Tax ID# 52-0998217  
NPI # 1053406181  
Medicare # 21-7115  
Medicaid # 471633700  
844 Washington Road, Suite 301  
Westminster, MD 21157-6664  
Tel: 410-848-5379  
Fax: 410-386-1164

**Locations:**

**HomeCall (1713)**

Branch

Effective Date: 6/1/2017  
Branch ID: 21Q7115002  
9114 Philadelphia Road, Suite 106  
Rosedale, MD 21237-4346  
Tel: 443-231-4006  
Fax: 443-231-4155

**Ohio - Home Health**

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**1.LHCG XCI, LLC (393)**

**d/b/a Pleasant Valley Home Health(552)**

Effective Date: 4/1/2017  
Tax ID# 81-5322329  
NPI # 1689113300  
Medicare # 36-8353  
392 Silver Bridge Plaza, Suite A  
Gallipolis, OH 45631-1833  
Tel: 740-208-5599  
Fax: 740-957-9293

**Locations:**

**2.Ohio HomeCare, LLC (67)**

**d/b/a Housecalls Home Health(109)**

Effective Date: 10/9/2009  
Tax ID# 26-3086449  
NPI # 1811153646  
Medicare # 36-8268  
Medicaid # 0054860  
606 Washington Blvd  
Belpre, OH 45714-2465  
Tel: 740-423-5901  
Fax: 740-423-5905

**Locations:**

**3.St. Mary's Medical Center Home Health Services, LLC (88)**

**d/b/a St. Mary's Home Health Service(80)**

Effective Date: 10/9/2009  
Tax ID# 26-0730248  
NPI # 1013109560

Medicare # 36-8269  
Medicaid # 0054890  
168 County Road 775, Suite B  
Proctorville, OH 45669-8839  
Tel: 740-886-7505  
Fax: 740-886-7074

**Locations:**

**Rhode Island - Home Health**

**1.LHCG LIX, LLC (305)**

**d/b/a Life Care at Home(421)**

Effective Date: 11/1/2014  
Tax ID# 47-1144980  
NPI # 1447664172  
Medicare # 41-7058  
Medicaid # 1447664172  
63 Sockanosset Crossroad, Suite 1-C

Cranston, RI 02920-5557

Tel: 401-383-2250

Fax: 401-383-2260

**Locations:**

**Tennessee - Home Health**

**1.Cedar Creek Home Health Care Agency, LLC (300)**

**d/b/a Deaconess HomeCare(407)**

Effective Date: 4/1/2014

Tax ID# 62-1358032  
NPI # 1902897432  
Medicare # 44-7138  
Medicaid # 0447138  
6978 Lebanon Rd, Suite B  
Mt. Juliet, TN 37122-7201  
Tel: 615-453-8550  
Fax: 615-453-8584

**Locations:**

**Deaconess HomeCare (1219)**

Branch

Effective Date: 4/1/2014  
Branch ID: 44Q7138001  
2527 Highway 111 North, Suite A  
Cookeville, TN 38506-8985  
Tel: 931-520-0090  
Fax: 931-520-0101

**2.Gericare, LLC (299)**

**d/b/a Deaconess HomeCare(406)**

Effective Date: 4/1/2014

Tax ID# 62-1160679  
NPI # 1245221795  
Medicare # 44-7201  
Medicaid # 0447201  
123 Pickwick Street  
Savannah, TN 38372-1953  
Tel: 731-925-6626  
Fax: 731-925-7330

**Locations:**

**Deaconess HomeCare (1216)**  
Branch

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**Effective Date: 4/1/2014**

**Branch ID: 44Q7201002**

150 South Y Square

Selmer, TN 38375-1755

Tel: 731-645-8088

Fax: 731-645-8086

**Deaconess HomeCare (1217)**

Branch

**Effective Date: 4/1/2014**

**Branch ID: 44Q7201003**

211 Dexter L. Woods Memorial Blvd

Suite B

Waynesboro, TN 38485-2460

Tel: 931-722-3624

Fax: 931-722-7113

**3.HMC Home Health, LLC (184)**

**d/b/a N/A(184)**

**Effective Date: 2/1/2010**

Tax ID# 27-1362827

NPI # 1255669636

Medicare # 44-7264

Medicaid # 0447264

115 Patterson Road

Savannah, TN 38372-2199

Tel: 731-925-0276

Fax: 731-926-8549

**Locations:**

**4.LHC HomeCare of**

**Tennessee, LLC (69)**

**d/b/a Home Care**

**Solutions(110)**

**Effective Date: 6/1/2008**

Tax ID# 26-2678253

NPI # 1013175215

Medicare # 44-7513

Medicaid # 00447513

2525 Perimeter Place Dr., Suite 117

Nashville, TN 37214-3674

Tel: 615-365-0300

Fax: 615-365-0390

**3/15/2018**

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**Locations:**

**Home Care Solutions (300)**

Branch

**Effective Date: 6/1/2008**

**Branch ID: 44Q7513001**

762 Highway 46 S

Dickson, TN 37055-2556

Tel: 615-441-0009

Fax: 615-446-7206

**Home Care Solutions (303)**

Branch

**Effective Date: 6/1/2008**

**Branch ID: 44Q7513007**

730 Highway 321 North, Suite 103

Lenoir City, TN 37771-5000

Tel: 865-271-1079

Fax: 865-271-1080

**5.LHC HomeCare of**

**Tennessee, LLC (69)**

**d/b/a Home Care**

**Solutions(111)**

**Effective Date: 6/1/2008**

Tax ID# 26-2678253

NPI # 1477711679

Medicare # 44-7551

Medicaid # 00447551

9420 Ooltewah Industrial Dr

Ooltewah, TN 37363-7830

Tel: 423-238-7878

Fax: 423-238-7897

**Locations:**

**6.LHCG CXXXV, LLC (439)**

**d/b/a Erlanger Continucare**

**Home Health(609)**

**Effective Date: 12/1/2017**

Tax ID# 38-4049207

NPI # 1023520343

Medicare # 44-7471

Medicaid # Pending

1501 Riverside Drive, Suite 343

Chattanooga, TN 37406-4329

Tel: 423-386-1152

Fax: 423-624-0309

**Locations:**

**7.LHCG CXXXVI, LLC (440)**

**d/b/a Erlanger Continucare**

**Home Health(610)**

**Effective Date: 12/1/2017**

Tax ID# 38-4049205

NPI # 1578075891

Medicare # 44-7080

Medicaid # Pending

1501 Riverside Drive, Suite 345

Chattanooga, TN 37406-4329

Tel: 423-386-1061

Fax: 423-485-6363

**Locations:**

**8.LHCG LXII, LLC (307)**

**d/b/a Tennessee Home**

**Health(423)**

**Effective Date: 9/1/2014**

Tax ID# 32-0442009

NPI # 1487068128

Medicare # 44-7552

Medicaid # 0447552

7625 Hamilton Park Drive, Suite 16

Chattanooga, TN 37421-1188

Tel: 423-510-1500

Fax: 423-510-1560

**Locations:**

**Tennessee Home Health (1262)**

Branch

**Effective Date: 9/1/2014**

**Branch ID: 44Q7552002**

2650 Executive Park NW, Suite 3

Cleveland, TN 37312-2746

Tel: 423-478-8023

Fax: 423-478-8870

**9.LHCG XCIII, LLC (399)**

**d/b/a Baptist Trinity Home**

**Care & Hospice(558)**

**Effective Date: 6/1/2017**

Tax ID# 81-5266120

NPI # 1235664921

Medicare # 44-7407

Medicaid # Q034278

6141 Walnut Grove Road

Memphis, TN 38120-2179

Tel: 901-767-6767

Fax: 901-415-3410

**Locations:**

**10.LHCG XCIV, LLC (401)**

**d/b/a Baptist Memorial Home**

**Care & Hospice(560)**

**Effective Date: 6/1/2017**

Tax ID# 81-5274714

NPI # 1568997252

Medicare # 44-7444

Medicaid # Pending

631 R.B. Wilson Drive

Huntingdon, TN 38344-1727

Tel: 731-986-3220

Fax: 731-986-2134

**Locations:**

**11.Lifeline Home Health Care**

**of Springfield, LLC (70)**

**d/b/a Lifeline Home Health**

**Care(51)**

**Effective Date: 5/1/2007**

Tax ID# 20-8826801

NPI # 1659596708

Medicare # 44-7466

Medicaid # 0447466

2109 Park Plaza, Suite 200

Springfield, TN 37172-4073

Tel: 615-384-4644

Fax: 615-384-4799

**Locations:**

**12.Lifeline Home Health Care**

**of Union City, LLC (71)**

**d/b/a Extencicare Home**

**Health of Western**

**Tennessee(63)**

**Effective Date: 11/1/2005**

Tax ID# 06-1793261

NPI # 1215036702

Medicare # 44-7434

Medicaid # 0447434

1720 East Reelfoot Avenue, Suite 203

Union City, TN 38261-6049

Tel: 731-885-0866

Fax: 731-885-0327

**Locations:**

**3/15/2018**

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**13.Lifeline of West Tennessee,**

**LLC (72)**

**d/b/a Extencicare Home**

**Health of West**

**Tennessee(21)**

**Effective Date: 9/1/2007**

Tax ID# 26-0609961

NPI # 1821288572

Medicare # 44-7284

Medicaid # 0447284

250 N. Parkway, Suite 30

Jackson, TN 38305-2754

Tel: 731-668-1372

Fax: 731-664-9919

**Locations:**

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**Extencicare Home Health of West Tennessee (179)**

Branch

**Effective Date: 9/1/2007**

**Branch ID: 44Q7284002**

1375 Flowering Dogwood Lane,

Suite B

Dyersburg, TN 38024-2948

Tel: 731-285-5121

Fax: 731-285-5122

**Extencicare Home Health of West Tennessee (181)**

Branch

**Effective Date: 9/1/2007**

**Branch ID: 44Q7284004**

202 North Brewer Street, Suite E

Paris, TN 38242-4028

Tel: 731-644-9925

Fax: 731-644-0471

**Extencicare Home Health of West Tennessee (802)**

Branch

**Effective Date: 2/1/2011**

**Branch ID: 44Q7284005**

8066 Walnut Run Road, Suite 201

Cordova, TN 38018-2265

Tel: 901-754-5351

Fax: 901-754-9068

**14. Medical Center Home Health, LLC (73)**

**d/b/a N/A(142)**

**Effective Date: 10/1/2008**

Tax ID# 26-2947990

NPI # 1932355997

Medicare # 44-7101

Medicaid # 0447101

33 Directors Row

Jackson, TN 38305-2316

Tel: 731 984-2000

Fax: 731 984-2079

**Locations:**

**Medical Center Home Health (443)**

Branch

**Effective Date: 10/1/2008**

**Branch ID: 44Q7101001**

4039 Highland St, Suite 2

Milan, TN 38358-3416

Tel: 731-686-8061

Fax: 731-686-9876

**Medical Center Home Health (442)**

Branch

**Effective Date: 10/1/2008**

**Branch ID: 44Q7101002**

650 Nuckolls Rd

Bolivar, TN 38008-1532

Tel: 731-658-9090

Fax: 731-659-0280

**15. Morristown-Hamblen**

**HomeCare and Hospice, LLC (74)**

**d/b/a University of TN Medical Center Home Health Services(67)**

**Effective Date: 7/31/2008**

Tax ID# 26-2792774

NPI # 1174783112

Medicare # 44-7500

Medicaid # 0447500

3301 West Andrew Johnson

Highway,

Suite 102

Morristown, TN 37814-3605

Tel: 423-586-9291

Fax: 423-586-1463

**Locations:**

**University of TN Medical Center**

**Home Health Services**

**(432)**

Branch

**Effective Date: 12/31/2008**

**Branch ID: 44Q7500003**

413 West Broadway

Newport, TN 37821-2219

Tel: 423-623-4100

Fax: 423-623-4188

**University of TN Medical Center**

**Home Health Services**

**(515)**

Branch

**Effective Date: 5/22/2009**

**Branch ID: 44Q7500004**

1123 N. Chucky Pike

Jefferson City, TN 37760-4851

Tel: 865-475-6930

Fax: 865-475-5620

**16. Tennessee In-Home**

**Partner-I, LLC (366)**

**d/b/a HighPoint**

**Homecare(521)**

**Effective Date: 1/1/2017**

Tax ID# 81-4903487

NPI # 1013453844

Medicare # 44-7487

Medicaid # Q033681

Sumner Medical Plaza, 300 Steam

Plant Road

Suite 220

Gallatin, TN 37066-3052

Tel: 615-328-5515

Fax: 615-328-3892

**Locations:**

**17. Tennessee In-Home**

**Partner-III, LLC (694)**

**d/b/a Deaconess**

**HomeCare(960)**

**Effective Date: 3/1/2018**

Tax ID# 82-3982817

NPI # 1639677610

Medicare # 44-7109

1816 Huntsville Highway, Suite A

Fayetteville, TN 37334-3791

Tel: 931-433-7026

Fax: 931-433-0341

**Locations:**

**3/15/2018**

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**18. University of TN Medical**

**Center Home Care**

**Services, LLC (75)**

**d/b/a University of TN Medical Center Home Care**

**Services - Home Health(88)**

**Effective Date: 7/1/2007**

Tax ID# 20-8912707

NPI # 1346460953

Medicare # 44-7230

Medicaid # 0447230

4435 Valley View Drive, Suite 101

Knoxville, TN 37917-130

Tel: 865-544-6200

Fax: 865-544-6240

**Locations:**

**University of TN Medical Center**

**Home Care Services -**

**Home Health (187)**

Branch

**Effective Date: 3/7/2008**

**Branch ID: 44Q7230002**

629 Smithview Dr

Maryville, TN 37803-6100

Tel: 865-984-8484

Fax: 865-984-8485

**University of TN Medical Center**

**Home Care Services -**

**Home Health (189)**

Branch

**Effective Date: 5/2/2008**

**Branch ID: 44Q7230003**

1101 Fox Meadows Blvd., Suite 104

Sevierville, TN 37862-6937

Tel: 865-908-4982

Fax: 865-908-8802

**Virginia - Home Health**

**1. Virginia HomeCare, LLC (78)**

**d/b/a Advanced Health**

**Services(114)**

**Effective Date: 6/1/2008**

Tax ID# 06-1762015

NPI # 1427216704

Medicare # 49-7546

Medicaid # 1427216704

65 East Main St, Suite D

Pulaski, VA 24301-5058

Tel: 540-994-9811

Fax: 540-994-9760

**Locations:**

**Advanced Health Services (476)**

Branch

**Effective Date: 6/1/2009**

**Branch ID: 49Q7546002**

3800 Electric Rd, Suite 202

Roanoke, VA 24018-4568

Tel: 540-278-2890

Fax: 540-278-2891

**Advanced Health Services (477)**

Branch

**Effective Date: 6/15/2009**

**Branch ID: 49Q7546003**

710 West Ridge Rd, Suite B

Wytheville, VA 24382-1061

Tel: 276-227-0532

Fax: 276-227-0535



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**2.Virginia In-Home Partner-I,  
LLC (369)**

**d/b/a Wythe Circle Home  
Care(524)**

Effective Date: 1/1/2017

Tax ID# 81-4811317

NPI # 1760927628

Medicare # 49-7094

Medicaid # 1760927628

1155 North 4th Street

Wytheville, VA 24382-1096

Tel: 276-228-2051

Fax: 276-228-5542

**Locations:**

**3.Virginia In-Home Partner-III,  
LLC (371)**

**d/b/a Sovah Home Health of  
Danville(526)**

Effective Date: 1/1/2017

Tax ID# 81-4888094

NPI # 1053857599

Medicare # 49-7061

Medicaid # 1053857599

142 South Main Street

Danville, VA 24541-2922

Tel: 434-799-2382

Fax: 434-799-3816

**Locations:**

**4.Virginia In-Home Partner-V,  
LLC (373)**

**d/b/a Fauquier Health Home  
Care Services(528)**

Effective Date: 1/1/2017

Tax ID# 81-4737123

NPI # 1831634328

Medicare # 49-7299

Medicaid # 1831634328

5 Rock Pointe Lane, Suite 200

Warrenton, VA 20186-2633

Tel: 540-316-2700

Fax: 540-316-2701

**Locations:**

**5.Virginia In-Home Partner-VI,  
LLC (374)**

**d/b/a Sovah Home Health of  
Martinsville(529)**

Effective Date: 1/1/2017

Tax ID# 81-4737281

NPI # 1346785334

Medicare # 49-7497

Medicaid # 1346785334

706 E. Church Street, Suite A

Martinsville, VA 24112-1900

Tel: 276-634-1950

Fax: 276-670-7110

**Locations:**

**6.Virginia In-Home Partner-VII,  
LLC (375)**

**d/b/a Preferred Home Health  
Services(530)**

Effective Date: 1/1/2017

Tax ID# 81-4888210

NPI # 1225574049

Medicare # 49-7560

Medicaid # 1225574049

2011 Second Street

Richlands, VA 24641-2305

Tel: 276-963-9577

Fax: 276-963-4747

**Locations:**

**3/15/2018**

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**7.Virginia In-Home Partner-  
VIII, LLC (388)**

**d/b/a Twin County Regional  
Home Health(544)**

Effective Date: 4/1/2017

Tax ID# 81-5294131

NPI # 1770022584

Medicare # 49-7040

Medicaid # 1770022584

818 Glendale Road, Suite 1

Galax, VA 24333-2311

Tel: 276-236-7935

Fax: 276-238-1815

**Locations:**

**West Virginia -  
Home Health**

**1.Boone Memorial HomeCare,  
LLC (79)**

**d/b/a Boone Memorial  
HomeCare(10)**

Effective Date: 8/1/2007

Tax ID# 20-8826558

NPI # 1184848970

Medicare # 51-7097

Medicaid # 3810010764

260 Mail Rd, #0809

Danville, WV 25053-0809

Tel: 304-369-1385

Fax: 304-369-9684

**Locations:**

**2.Grant Memorial HomeCare  
and Hospice, LLC (83)**

**d/b/a Grant Memorial  
HomeCare(27)**

Effective Date: 7/1/2008

Tax ID# 26-2578433

NPI # 1104084151

Medicare # 51-7071

Medicaid # 3810013956

10 Valley View St.

Petersburg, WV 26847-9543

Tel: 304-257-1015

Fax: 304-257-1129

**Locations:**

**3.Home Care Plus, Inc (81)  
d/b/a N/A(30)**

Effective Date: 10/17/2005

Tax ID# 55-0668235

NPI # 1457343451

Medicare # 51-7051

Medicaid # 0005031000 (HH)

Medicaid # 8550022000 (IV)

Medicaid # 0031135000 (Waiver)

Medicaid # 3810006123 (Group)

Medicaid # 73028 (HMO)

10434 Seneca Trail S

Lewisburg, WV 24901-1586

Tel: 304-645-1706

Fax: 304-645-4085

**Locations:**

**4.Housecalls Home Health and  
Hospice, LLC (90)**

**d/b/a Housecalls Home  
Health(34)**

Effective Date: 1/1/2007

Tax ID# 37-1533130

NPI # 1992864912

NPI # 1982065231 (Harrisville

branch only)

Medicare # 51-7114

Medicaid # 3810010665 (WV)

Medicaid # 1982065231001

(Harrisville branch only)

417 Grand Park Drive, Suite 203

Parkersburg, WV 26105-4049

Tel: 304-422-9293

Fax: 304-422-9294

**Locations:**

**Housecalls Home Health (124)**

Branch

Effective Date: 11/15/2007

Branch ID: 51Q7114001

888 East Main Street

Harrisville, WV 26362-1300

Tel: 304-643-5557

Fax: 304-643-5560

**5.Jackson County Home  
Health, LLC (84)**

**d/b/a Jackson Home  
Health(42)**

Effective Date: 9/1/2008

Tax ID# 26-3042590

NPI # 1871759225

Medicare # 51-7805

Medicaid # 3810013974

105 North Court Street, Suite 2

Ripley, WV 25271-1207

Tel: 304-372-5913

Fax: 304-372-8039

**Locations:**

**6.LHCG LII, LLC (288)**

**d/b/a West Virginia Home  
Health(391)**

Effective Date: 4/1/2014

Tax ID# 46-4704340

NPI # 1184048241

Medicare # 51-7031

Medicaid # 1184048241

12 Hartman Plaza

Buckhannon, WV 26201-2230

Tel: 304-473-8802

Fax: 304-460-0708

**Locations:**

**7.LHCG LXXXIX, LLC (391)**

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**d/b/a Pleasant Valley Home Health(550)**

Effective Date: 4/1/2017

Tax ID# 81-5300843

NPI # 1922547363

Medicare # 51-7041

1011 Viand Street

Point Pleasant, WV 25550-0006

Tel: 304-675-2422

Fax: 304-675-7401

**Locations:**

**8.Mountaineer HomeCare, LLC (85)**

**d/b/a Mountaineer**

**HomeCare(66)**

Effective Date: 9/1/2008

Tax ID# 26-3042733

NPI # 1710143375

Medicare # 51-7092

Medicaid # 3810013957

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400 Tracy Way, Suite 100

Charleston, WV 25311-1280

Tel: 304-720-0205

Fax: 304-720-0262

**Locations:**

**9.Preston Memorial**

**HomeCare, LLC (192)**

**d/b/a Preston Memorial**

**HomeCare(189)**

Effective Date: 1/1/2010

Tax ID# 27-1446056

NPI # 1659600310

Medicare # 51-7037B

Medicaid # 3810018741

410 East Main St.

Kingwood, WV 26537-1723

Tel: 304-329-3565

Fax: 304-329-4709

**Locations:**

**10.Princeton Community**

**HomeCare, LLC (86)**

**d/b/a PCH Home Health(72)**

Effective Date: 5/1/2007

Tax ID# 83-0474005

NPI # 1861527715

NPI # 1770971004 (Beckley branch only)

Medicare # 51-7081A

Medicaid # 3810009577

Medicaid # 1770971004 (Beckley branch only)

261 Mercer Mall Rd, Suite 500

Bluefield, WV 24701-9098

Tel: 304-323-3069

Fax: 304-324-7946

**Locations:**

**PCH Home Health - Beckley (129) Branch**

Effective Date: 5/1/2008

Branch ID: 51Q7081001

314 George Street, Suite 314

Beckley, WV 25801-2653

Tel: 304-252-8070

Fax: 304-252-8073

**11.Roane HomeCare, LLC (87)**

**d/b/a Roane HomeCare(74)**

Effective Date: 5/16/2007

Tax ID# 41-2219637

NPI # 1205900271

Medicare # 51-7133

Medicaid # 3810009579

20 Williams Dr, Suite 1

Spencer, WV 25276-1800

Tel: 304-927-6091

Fax: 304-927-6094

**Locations:**

**12.St. Mary's Medical Center**

**Home Health Services,**

**LLC (88)**

**d/b/a St. Mary's Home Health**

**Service(79)**

Effective Date: 12/1/2007

Tax ID# 26-0730248

NPI # 1073705539

Medicare # 51-7055

Medicaid # 3810011273

5187 U.S. Route 60, Suite 13

Huntington, WV 25705-2076

Tel: 304-733-5010

Fax: 304-733-5024

**Locations:**

**13.West Virginia HomeCare,**

**LLC (80)**

**d/b/a Care Partners Home**

**Health(143)**

Effective Date: 11/1/2008

Tax ID# 26-3043290

NPI # 1497907281

Medicare # 51-7100A

Medicaid # 3810014695

511 Burroughs Street, Suite 102

Morgantown, WV 26505-3389

Tel: 304-285-5500

Fax: 304-285-2787

**Locations:**

**14.Wetzel County HomeCare,**

**L.L.C (89)**

**d/b/a Wetzel County**

**HomeCare(89)**

Effective Date: 7/1/2007

Tax ID# 26-0274385

NPI # 1497959944

Medicare # 51-7086

Medicaid # 3810010457

411 North State, Route 2

New Martinsville, WV 26155-2711

Tel: 304-455-5515

Fax: 304-455-4796

**Locations:**

**West Virginia -**

**DME**

**1.Home Care Plus, Inc (81)**

**d/b/a N/A(144)**

Effective Date: 10/17/2005

Tax ID# 55-0668235

NPI # 1851332878

Medicare # 0333140001 (DME)

Medicaid # 9100032000 (DME)

10434 Seneca Trail S

Lewisburg, WV 24901-1586

Tel: 304-645-1706

Fax: 304-645-4085

**Locations:**

**Division -**

**Coastal**

**Division**

**Alabama - Home**

**Health**

**1.Able Home Health, Inc. (93)**

**d/b/a Alabama HomeCare(2)**

Effective Date: 10/6/2005

Tax ID# 64-0917741

NPI # 1144277013

Medicare # 01-7041

Medicaid # ABL 7041A

100 Centerview Dr, Suite 260

Vestavia Hills, AL 35216-7723

Tel: 205-979-3180

Fax: 205-979-3183

**Locations:**

**3/15/2018**

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**2.Athens-Limestone**

**HomeCare, LLC (94)**

**d/b/a Athens-Limestone**

**HomeCare(9)**

Effective Date: 6/1/2006

Tax ID# 16-1761067

NPI # 1730136698

Medicare # 01-7095

Medicaid # ATH7095A

725 West Market St, Suite A

Athens, AL 35611-2456

Tel: 256-233-9533

Fax: 256-233-9535

**Locations:**

**3.Baptist Home Health, LLC**

**(219)**

**d/b/a Baptist Home**

**Health(208)**

Effective Date: 7/1/2010

Tax ID# 27-2755453

NPI # 1972823920

Medicare # 01-7037

Medicaid # 1972823920 (ID # 126695)

451 Saint Lukes Drive, Suite 451

Montgomery, AL 36117-7107

Tel: 334-395-5100

Fax: 334-395-5120

**Locations:**

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**4. Camden HomeCare, LLC  
(167)**

**d/b/a Alabama HomeCare(173)**

Effective Date: 10/1/2009

Tax ID# 27-0944633

NPI # 1659604924

Medicare # 01-7086

Medicaid # 1659604924 (ID#  
120225)

319A McWilliams Ave.

Camden, AL 36726-1610

Tel: 334-682-9050

Fax: 334-682-9601

**Locations:**

**5. Clay County Hospital Home  
Care, LLC (95)**

**d/b/a N/A(14)**

Effective Date: 11/1/2004

Tax ID# 11-3729602

NPI # 1861575334

Medicare # 01-7097

Medicaid # CLA 7097A

83825 Highway 9

Ashland, AL 36251-7981

Tel: 256-354-0077

Fax: 256-354-0081

**Locations:**

**6. Coosa Valley HomeCare,  
LLC (168)**

**d/b/a Coosa Valley**

**HomeCare(174)**

Effective Date: 8/1/2009

Tax ID# 27-0533277

NPI # 1871723841

Medicare # 01-7085

Medicaid # 1871723841 (ID#  
115400)

209 West Spring Street, Suite 305

Sylacauga, AL 35150-2976

Tel: 256-208-0087

Fax: 256-208-0301

**Locations:**

**7. East Alabama Medical**

**Center HomeCare, LLC (169)**

**d/b/a HomeCare of East**

**Alabama Medical**

**Center(175)**

Effective Date: 6/1/2009

Tax ID# 26-4812422

NPI # 1770717738

Medicare # 01-7129

Medicaid # 1770717738 (ID#  
114584)

665 Opelika Road, Suite 300

Auburn, AL 36830-4013

Tel: 334-826-3131

Fax: 334-821-8894

**Locations:**

**8. Fayette Medical Center**

**HomeCare, LLC (96)**

**d/b/a Fayette Medical Center**

**HomeCare(145)**

Effective Date: 11/1/2008

Tax ID# 26-3598263

NPI # 1821241613

Medicare # 01-7088

Medicaid # 1821241613 (ID#  
115614)

102 2nd Avenue, SE

Fayette, AL 35555-2717

Tel: 205-932-5961

Fax: 205-932-8054

**Locations:**

**9. Gulf Homecare, Inc. (97)**

**d/b/a Infirmiry HomeCare(39)**

Effective Date: 2/1/2006

Tax ID# 20-4276139

NPI # 1982642286

Medicare # 01-7130

Medicaid # INF7130A

800 College Avenue

Jackson, AL 36545-2533

Tel: 251-262-6477

Fax: 251-247-1080

**Locations:**

**10. HGA HomeCare, L.L.C (119)**

**d/b/a Decatur Morgan**

**HomeCare(32)**

Effective Date: 11/1/2007

Tax ID# 26-1309422

NPI # 1144409004

Medicare # 01-7027

Medicaid # 1144409004 (ID  
#104840)

2708 Hwy 31 South, Suite B

Decatur, AL 35603-1508

Tel: 256-350-4182

Fax: 256-309-5908

**Locations:**

**Alabama HomeCare of Cullman  
(517)**

Branch

Effective Date: 6/5/2010

Branch ID: 01Q7027001

420 2nd Avenue SW, Suite 202

Cullman, AL 35055-4107

Tel: 256-775-7911

Fax: 256-775-7926

**11. HGA HomeCare, LLC (119)**

**d/b/a Huntsville Hospital  
HomeCare(33)**

Effective Date: 11/1/2007

Tax ID# 26-1309422

**3/15/2018**

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NPI # 1427237387

Medicare # 01-7119

Medicaid # 1427237387 (ID #  
104405)

500 Boulevard South SW, Suite 203

Huntsville, AL 35802-2103

Tel: 256-922-6650

Fax: 256-922-6651

**Locations:**

**Huntsville Hospital HomeCare -  
Madison (1177)**

Branch

Effective Date: 10/1/2013

Branch ID: 01Q7119001

3825 Sullivan St, Suite 1

Madison, AL 35758-3147

Tel: 256-772-3080

Fax: 256-772-5080

**12. Infirmiry Home Health**

**Agency, Inc. (170)**

**d/b/a Infirmiry HomeCare(259)**

Effective Date: 2/1/2006

Tax ID# 63-1112659

NPI # 1710929294

Medicare # 01-7035

Medicaid # INF7035A

1142-A Montlimar Drive

Mobile, AL 36609-1709

Tel: 251-450-3300

Fax: 251-450-3307

**Locations:**

**13. LHCG LI, LLC (286)**

**d/b/a EAMC - Lanier Home**

**Health(387)**

Effective Date: 2/1/2014

Tax ID# 46-4444376

NPI # 1134541360

Medicare # 01-7123

Medicaid # 1134541360 ID#162567

1806 44th Street

Valley, AL 36854-3441

Tel: 334-756-1950

Fax: 334-756-1970

**Locations:**

**14. LHCG LXIV, LLC (310)**

**d/b/a Troy Regional Medical**

**Center Home**

**Health(426)**

Effective Date: 11/1/2014

Tax ID# 47-1817080

NPI # 1700287497

Medicare # 01-7096

Medicaid # 1700287497 ID#171231

798 Highway 231 South

Troy, AL 36081-3101

Tel: 334-403-4520

Fax: 334-403-4519

**Locations:**

**15. LHCG LXXXIV, LLC (344)**

**d/b/a D.W. McMillan Home**

**Health(496)**

Effective Date: 10/1/2016

Tax ID# 81-3242471

NPI # 1083067904

Medicare # 01-7143

Medicaid # 1083067904

114 W. Jackson Street

Brewton, AL 36426-1516

Tel: 251-867-5054

Fax: 251-867-5135

**Locations:**

**16. LHCG XXIX, LLC (260)**

**d/b/a Keller Home Care(341)**

Effective Date: 4/5/2011

Tax ID# 27-5200416

NPI # 1366740656

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Medicare # 01-7125  
Medicaid # 1366740656 ID#132238  
116 4th Avenue SE  
Red Bay, AL 35582-4191  
Tel: 256-356-8160  
Fax: 256-356-6861

**Locations:**

**Keller Home Care (810)**  
Branch

**Effective Date: 4/5/2011**  
**Branch ID: 01Q7125001**  
1404 East Avalon Avenue, Suite D  
Tusculumbia, AL 35674-1771  
Tel: 256-314-1201  
Fax: 256-314-1205

**17. Marion Regional**

**HomeCare, LLC (139)**

**d/b/a Marion Regional**

**HomeCare(159)**

**Effective Date: 4/1/2009**

Tax ID# 26-4429914  
NPI # 1649411299  
Medicare # 01-7100  
Medicaid # 1649411299 (ID #114199)  
234 1st Avenue SW, Suite 2  
Hamilton, AL 35570-5580  
Tel: 205-921-0391  
Fax: 205-921-1594

**Locations:**

**18. Medical Centers HomeCare, LLC (100)**

**d/b/a Medical Centers HomeCare(65)**

**Effective Date: 1/1/2008**  
Tax ID# 26-1541198  
NPI # 1568645836  
Medicare # 01-7128  
Medicaid # 1568645836 (ID # 104676)  
11687 US Hwy 431  
Guntersville, AL 35976-5667  
Tel: 256-878-5811  
Fax: 256-878-5808

**Locations:**

**19. Mizell Memorial Hospital**

**HomeCare, LLC (101)**

**d/b/a LHC HomeCare of South Alabama(71)**

**Effective Date: 1/17/2005**  
Tax ID# 87-0737157  
NPI # 1033293352  
Medicare # 01-7134  
Medicaid # LHC 7134A  
1802 U.S. Highway 84 West, Suite A  
Opp, AL 36467-3520  
Tel: 334-493-2087  
Fax: 334-493-7285

**Locations:**

**3/15/2018**

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**LHC HomeCare of South Alabama - Andalusia (452)**  
Branch

**Effective Date: 1/29/2009**  
**Branch ID: 01Q7134001**  
603A West Bypass  
Andalusia, AL 36420-4732  
Tel: 334-222-2410  
Fax: 334-222-2470

**20. Southeast Alabama**

**HomeCare, LLC (203)**

**d/b/a Southeast Alabama HomeCare(161)**

**Effective Date: 12/31/2008**

Tax ID# 26-3696767  
NPI # 1902041247  
Medicare # 01-7024  
Medicaid # 1902041247 (ID #113803)  
1435 Ross Clark Circle, Suite 2  
Dothan, AL 36301-4746  
Tel: 334-794-0591  
Fax: 334-793-6073

**Locations:**

**Southeast Alabama HomeCare of Eufaula (518)**

Branch

**Effective Date: 6/1/2010**  
**Branch ID: 01Q7024001**  
335 Macon Street, Suite B  
Eufaula, AL 36027-1898  
Tel: 334-687-6476  
Fax: 334-687-2356

**21. Southeast Alabama**

**HomeCare, LLC (203)**

**d/b/a Southeast Alabama HomeCare(160)**

**Effective Date: 12/31/2008**  
Tax ID# 26-3696767  
NPI # 1518102938  
Medicare # 01-7016  
Medicaid # 1518102938 (ID #114029)  
804 Glover Ave  
Enterprise, AL 36330-2018  
Tel: 334-347-4800  
Fax: 334-347-4827

**Locations:**

**22. Thomas Home Health, LLC (102)**

**d/b/a Thomas Home Health(85)**

**Effective Date: 6/1/2007**  
Tax ID# 20-8862235  
NPI # 1790902435  
Medicare # 01-7148  
Medicaid # THO7148A  
7530 Parker Rd, Suite 200  
Fairhope, AL 36532-3462  
Tel: 251-990-9200  
Fax: 251-928-0703

**Locations:**

**Florida - Home**

**Health**

**1. LHC LXXXII, LLC (345)**

**d/b/a Parrish Home Health(497)**

**Effective Date: 9/1/2016**

Tax ID# 61-1788793  
NPI # 1306292370  
Medicare # 10-7488  
830 Century Medical Drive, Suite A  
Titusville, FL 32796-2149  
Tel: 321-383-5422  
Fax: 321-383-5423

**Locations:**

**Parrish Home Health (1431)**  
Branch

**Effective Date: 9/1/2016**  
**Branch ID: 10Q7488001**  
7075 US Highway 1, Suite 200  
Cocoa, FL 32927-5216  
Tel: 321-433-8236  
Fax: 321-433-8237

**2. LHCG XIX, LLC (250)**

**d/b/a Baptist Home Health Care(264)**

**Effective Date: 2/1/2011**

Tax ID# 27-3529253  
NPI # 1124337894  
Medicare # 10-7006  
Medicaid # N/A  
401 East Chase St, Suite 200  
Pensacola, FL 32502-6160  
Tel: 850-476-0628  
Fax: 850-475-1313

**Locations:**

**3. Munroe Regional HomeCare, LLC (108)**

**d/b/a Munroe Regional**

**HomeCare(69)**

**Effective Date: 5/1/2007**

Tax ID# 77-0670885  
NPI # 1316072887  
Medicare # 10-7009  
Medicaid # N/A  
2201 SE 30th Avenue, Suite 301  
Ocala, FL 34471-7500  
Tel: 352-351-7222  
Fax: 352-402-5210

**Locations:**

**Georgia - Home**

**Health**

**1. Floyd HomeCare, LLC (109)**

**d/b/a Floyd HomeCare(22)**

**Effective Date: 1/1/2007**

Tax ID# 37-1533134  
NPI # 1417016452  
Medicare # 11-7010  
Medicaid # 000041302A  
1611 Martha Berry Boulevard NW,  
Suite 1611  
Rome, GA 30165-1621  
Tel: 706-802-4600  
Fax: 706-802-4604

**Locations:**

**Floyd HomeCare of Cedartown (182)**

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Branch

**Effective Date: 9/17/2007**

**Branch ID: 11Q7010001**

117 John Phillips Road  
Cedartown, GA 30125-2353

Tel: 770-749-1662

Fax: 770-749-1511

**Floyd HomeCare of Summerville  
(184)**

Branch

**Effective Date: 10/10/2007**

**Branch ID: 11Q7010002**

**3/15/2018**

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10891 Commerce St, Suite A  
Summerville, GA 30747-1422

Tel: 706-857-2520

Fax: 706-857-2510

**Floyd HomeCare of Cartersville  
(186)**

Branch

**Effective Date: 3/5/2008**

**Branch ID: 11Q7010003**

775 West Avenue, Suite B  
Cartersville, GA 30120-3482

Tel: 770-387-1471

Fax: 770-387-1474

**2.Georgia HomeCare of Harris,  
LLC (110)**

**d/b/a Georgia Home Health(24)**

**Effective Date: 2/1/2007**

**Tax ID# 38-3749123**

**NPI # 1245389824**

**Medicare # 11-7318**

**Medicaid # 065956260A**

1000 Brookstone Centre Parkway,  
Suite 2

Columbus, GA 31904-4675

Tel: 706-324-7498

Fax: 706-324-7956

**Locations:**

**Georgia HomeCare (665)**

Branch

**Effective Date: 1/17/2011**

**Branch ID: 11Q7318002**

300 West Broome Street, Suite 108

Lagrange, GA 30240-3177

Tel: 706-884-5292

Fax: 706-884-5229

**3.LHCG XL, LLC (281)**

**d/b/a Georgia Home  
Health(381)**

**Effective Date: 7/1/2013**

**Tax ID# 46-2509518**

**NPI # 1962847053**

**Medicare # 11-7096**

**Medicaid # 000814261B**

2000 Riveredge Parkway, Suite 925

Atlanta, GA 30328-4673

Tel: 770-688-1000

Fax: 770-698-9677

**Locations:**

**4.Northwest Georgia Home  
Health, LLC (200)**

**d/b/a Home Care  
Solutions(195)**

**Effective Date: 3/1/2010**

**Tax ID# 27-1803583**

**NPI # 1437481405**

**Medicare # 11-7308**

**Medicaid # 000185523A**

136 Remco Shops Lane

Ringgold, GA 30736-2789

Tel: 706-866-8881

Fax: 706-866-8904

**Locations:**

**Kentucky - Home  
Health**

**1.Kentucky HomeCare of  
Henderson, LLC (158)**

**d/b/a Methodist Hospital  
HomeCare(167)**

**Effective Date: 6/1/2009**

**Tax ID# 26-4812417**

**NPI # 1891929840**

**Medicare # 18-7136**

**Medicaid # 7100126460**

**Medicaid # 7100126490 (HCB  
Waiver)**

**Medicaid # 7100126510 (EPSDT)**

**Medicaid # 7100341840 (Private  
Duty Nursing)**

505 Klutey Park Plaza Dr, Suite A

Henderson, KY 42420-5224

Tel: 270-869-1997

Fax: 270-869-1884

**Locations:**

**2.Kentucky In-Home Partner-I,  
LLC (404)**

**d/b/a Home Health Plus of  
Kentucky(565)**

**Effective Date: 7/1/2017**

**Tax ID# 35-2592972**

**NPI # 1508394594**

**Medicare # 18-7182**

**Medicaid # Pending**

1900 North 12th Street, Suite G

Murray, KY 42071-9878

Tel: 270-753-5656

Fax: 270-753-4181

**Locations:**

**3.Kentucky In-Home Partner-II,  
LLC (692)**

**d/b/a Lifeline Health Care of  
Logan(958)**

**Effective Date: 3/1/2018**

**Tax ID# 82-3982951**

**NPI # 1093213076**

**Medicare # 18-7128**

1527 Nashville Street

Russellville, KY 42276-8851

Tel: 270-726-2408

Fax: 270-726-7213

**Locations:**

**4.Kentucky LV, LLC (290)**

**d/b/a Deaconess-Lifeline  
Home Health(394)**

**Effective Date: 4/1/2014**

**Tax ID# 46-4923653**

**NPI # 1972929321**

**Medicare # 18-7174**

**Medicaid # 7100308140**

**Medicaid # 7100344570 (HCB  
Waiver)**

1056 Wellington Way, Suite 160

Lexington, KY 40513-2002

Tel: 859-977-8000

Fax: 859-977-7080

**Locations:**

**5.LHCG LXX, LLC (324)**

**d/b/a Commonwealth Home  
Health(456)**

**Effective Date: 11/11/2015**

**Tax ID# 47-5067719**

**NPI # 1336510080**

**Medicare # 18-7109**

**Medicaid # 7100401380**

**Medicaid # 7100401400 (HCB  
Waiver)**

**Medicaid # 7100401440 (Model  
Walver II)**

**Medicaid # 7100404520 (EPSDT)**

**Medicaid # 7100404510 (PD)**

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1056 Wellington Way, Suite 130

Lexington, KY 40513-2002

Tel: 859-255-4411

Fax: 859-253-6614

**Locations:**

**Commonwealth Home Health  
(1351)**

Branch

**Effective Date: 11/11/2015**

**Branch ID: 18Q7109004**

2007 Corporate Drive, Suite 2007

Richmond, KY 40475-8884

Tel: 859-623-1075

Fax: 859-623-4801

**Commonwealth Home Health  
(1349)**

Branch

**Effective Date: 11/11/2015**

**Branch ID: 18Q7109005**

695 Bullion Blvd, Suite 200

Winchester, KY 40391-2952

Tel: 859-744-5236

Fax: 859-744-7591

**6.LHCG LXXI, LLC (327)**

**d/b/a Lifeline Home Health of  
Northern**

**Kentucky(465)**

**Effective Date: 12/1/2015**

**Tax ID# 47-5393382**

**NPI # 1013389576**

**Medicare # 18-7180**

**Medicaid # 7100401320**

2120 Chamber Center Dr, Suite

2120

Lakeside Park, KY 41017-1669

Tel: 859-261-3515

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Fax: 859-261-3685

**Locations:**

**7.LHCG XLVI, LLC (285)**

**d/b/a Lifeline Home Health(385)**

Effective Date: 2/1/2014

Tax ID# 46-2509580

NPI # 1972933323

Medicare # 18-7130

Medicaid # 7100330380

Medicaid # 7100330400 (HCB Waiver)

Medicaid # 7100401280 (Private Duty Nursing)

710 North Main Street

Tompkinsville, KY 42167-1130

Tel: 270-487-5905

Fax: 270-487-6369

**Locations:**

**8.LHCG XXIII, LLC (211)**

**d/b/a Marshall County Hospital Home Health(238)**

Effective Date: 1/1/2011

Tax ID# 27-4100261

NPI # 1376845834

Medicare # 18-7161

Medicaid # 7100198930

Medicaid # 7100198940 (HCB Waiver)

805 Main Street

Benton, KY 42025-1240

Tel: 270-527-8084

Fax: 270-527-9474

**Locations:**

**9.Lifeline Home Health Care of Bowling Green, LLC (60)**

**d/b/a Lifeline Health Care of Warren(44)**

Effective Date: 8/1/2006

Tax ID# 51-0588592

NPI # 1205860087

Medicare # 18-7080

Medicaid # 7100000480

Medicaid # 41000100 (Model Waiver II)

Medicaid # 42000190 (HCB Waiver)

Medicaid # 45004447 (EPSDT)

Medicaid # 7100339500 (Private Duty Nursing)

165 Natchez Trace Ave. Suite 206

Bowling Green, KY 42103-7947

Tel: 270-781-0702

Fax: 270-781-8489

**Locations:**

**Lifeline Health Care of Hart (110)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7080001

200 Interstate Plaza

Munfordville, KY 42765

Tel: 270-524-0744

Fax: 270-524-1183

**Lifeline Health Care of Hardin (430)**

Branch

Effective Date: 12/29/2008

Branch ID: 18Q7080007

4000 N. Dixie Hwy, Suite 1

Elizabethtown, KY 42701-4650

Tel: 270-766-1353

Fax: 270-766-1373

**Lifeline Health Care of Simpson (1655)**

Branch

Effective Date: 2/1/2017

Branch ID: 18Q7080008

1112 South Main Street, Suite 10

Franklin, KY 42134-2371

Tel: 270-586-0141

Fax: 270-586-6526

**10.Lifeline Home Health Care of Fulton, LLC (64)**

**d/b/a Lifeline Health Care of Fulton(48)**

Effective Date: 2/15/2008

Tax ID# 20-8826388

NPI # 1740404540

Medicare # 18-7181

Medicaid # 7100060850

424 Lake St.

Fulton, KY 42041-1531

Tel: 270-472-2294

Fax: 270-472-2312

**Locations:**

**11.Lifeline Home Health Care of Lexington, LLC (63)**

**d/b/a Lifeline Health Care of Fayette(52)**

Effective Date: 8/1/2006

Tax ID# 51-0588599

NPI # 1558395335

Medicare # 18-7018

Medicaid # 34000315

Medicaid # 42000182 (HCB Waiver)

Medicaid # 45004173 (EPSDT)

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1056 Wellington Way, Suite 190

Lexington, KY 40513-2000

Tel: 859-887-5433

Fax: 859-887-5595

**Locations:**

**12.Lifeline Home Health Care of Somerset, LLC (61)**

**d/b/a Lifeline Health Care of Pulaski(62)**

Effective Date: 8/1/2008

Tax ID# 51-0588594

NPI # 1114951993

Medicare # 18-7099

Medicaid # 7100003460

Medicaid # 7100003480 (Model Waiver II )

Medicaid # 7100003470 (HCB Waiver)

Medicaid # 7100005740 (EPSDT)

Medicaid # 7100341830 (Private Duty Nursing)

600 1/2 Clifty Street, Suite 2 & 3

Somerset, KY 42503-1733

Tel: 606-679-9245

Fax: 606-678-9273

**Locations:**

**Lifeline Health Care of Wayne (142)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099001

One Southcreek Drive, Suite 118

Monticello, KY 42633-9472

Tel: 606-348-6000

Fax: 606-348-7270

**Lifeline Health Care of Russell (140)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099002

124 Dowell Road

Medical Arts Bldg, Ste 105

Russell Springs, KY 42642-4280

Tel: 270-866-4100

Fax: 270-866-4104

**Lifeline Health Care of Lincoln (150)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099003

132 Frontier Blvd, Suite 103

Stanford, KY 40484-8513

Tel: 606-365-9223

Fax: 606-365-9313

**Lifeline Health Care of Taylor (146)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099004

200 Nancy Cox Drive

Campbellsville, KY 42718-8842

Tel: 270-465-2266

Fax: 270-789-0455

**Lifeline Health Care of Clinton (148)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099005

96 Foothills Ave.

Albany, KY 42602-1091

Tel: 606-387-8131

Fax: 606-387-9089

**Lifeline Health Care of Cumberland (147)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099006

379 Keen Street

Burkesville, KY 42717

Tel: 270-864-3348

Fax: 270-864-3455

**Lifeline Health Care of McCreary (137)**

Branch

Effective Date: 8/1/2006

Branch ID: 18Q7099007

56 Medical Lane

Whitley City, KY 42653-4216

Tel: 606-376-5400

Fax: 606-376-5438

**Lifeline Health Care of Green (145)**

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Branch  
**Effective Date: 8/1/2006**  
**Branch ID: 18Q7099008**  
212 Industrial Drive, Suite A  
Greensburg, KY 42743-1128  
Tel: 270-932-7813  
Fax: 270-932-2583  
**Lifeline Health Care of Casey (162)**

Branch  
**Effective Date: 4/12/2007**  
**Branch ID: 18Q7099009**  
394 North Wallace Wilkinson Blvd  
Liberty, KY 42539-3016  
Tel: 606-787-0007  
Fax: 606-787-0349

**13. Lifeline Rockcastle Home Health, LLC (225)**

**d/b/a Lifeline Rockcastle Home Health(214)**  
**Effective Date: 11/1/2010**  
Tax ID# 27-3468870  
NPI # 1588972996  
Medicare # 18-7172  
Medicaid # 7100197050  
Medicaid # 7100197310 (HCB Waiver)  
Medicaid # 7100197320 (EPSDT)  
145 Lewis St  
Mt. Vernon, KY 40456-0000  
Tel: 606-256-1808  
Fax: 606-256-3808

**Locations:**  
**14. Twin Lakes Home Health Agency, LLC (204)**

**d/b/a Twin Lakes Home Health(168)**  
**Effective Date: 11/1/2009**  
Tax ID# 27-1000828  
NPI # 1902130446  
Medicare # 18-7108  
Medicaid # 7100139140  
810 Wallace Avenue  
Leitchfield, KY 42754-1449  
Tel: 270-230-0272  
Fax: 270-230-0282

**Locations:**  
**Kentucky - Management Location**

**1. Gamma Acquisition Inc. (66)**  
**d/b/a Lifeline Health Care of Lincare(57)**  
**Effective Date: 8/1/2006**  
Tax ID# 20-0146314

**3/15/2018**  
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NPI # 1851324297  
Medicare # 18-7300  
Medicaid # 45002433 (EPSDT)  
Medicaid # 34000190  
Medicaid # 42000141 (HCB Waiver)

Medicaid # 41000092 (Model Waiver)  
Medicaid # 7110341760 (Private Duty)  
210 Burley Ave, Suite A  
Hopkinsville, KY 42240-8725  
Tel: 270-885-6353  
Fax: 270-885-2410

**Locations:**  
**Michigan - Home Health**

**1. Michigan In-Home Partner-I, LLC (380)**  
**d/b/a UP Health System Home Care & Hospice(536)**  
**Effective Date: 4/1/2017**

Tax ID# 81-5275489  
NPI # 1457899668  
Medicare # 23-7093  
580 W. College Ave  
Marquette, MI 49855-2736  
Tel: 906-228-4325  
Fax: 906-225-4889

**Locations:**  
**UP Health System Home Care & Hospice (1527)**

Branch  
**Effective Date: 4/1/2017**  
**Branch ID: 23Q7093001**  
2420 1st Avenue South, Suite 102  
Escanaba, MI 49829-1309  
Tel: 906-789-1305  
Fax: 906-789-9144

**UP Health System Home Care & Hospice (1526)**

Branch  
**Effective Date: 4/1/2017**  
**Branch ID: 23Q7093003**  
1110 10th Ave, Suite 2  
Menominee, MI 49858-3058  
Tel: 906-863-7877  
Fax: 906-863-8050

**2. Michigan In-Home Partner-II, LLC (383)**  
**d/b/a UP Health System Home Care & Hospice Portage(539)**  
**Effective Date: 4/1/2017**

Tax ID# 81-5278498  
NPI # 1942749726  
Medicare # 23-7262  
821 W. Water Street  
Hancock, MI 49930-1953  
Tel: 906-483-1160  
Fax: 906-483-1167

**Locations:**  
**Mississippi - Home Health**

**1. Able Home Health, Inc. (113)**  
**d/b/a Mississippi HomeCare of Eupora(3)**

**Effective Date: 10/6/2005**  
Tax ID# 64-0917990  
NPI # 1659483196  
Medicare # 25-7122  
Medicaid # 00770349  
Medicaid # 00770415 (Respite)  
1700 Veterans Memorial Blvd, Suite B  
Eupora, MS 39744-2023  
Tel: 662-258-4339  
Fax: 662-258-4340

**Locations:**  
**Mississippi HomeCare of Starkville (69)**

Branch  
**Effective Date: 10/6/2005**  
**Branch ID: 25Q7122001**  
322 University Dr  
Starkville, MS 39759-2955  
Tel: 662-323-2989  
Fax: 662-323-2957

**Mississippi HomeCare of Bruce (63)**  
Branch  
**Effective Date: 10/6/2005**  
**Branch ID: 25Q7122002**  
105 East Calhoun Street, Unit 2  
Bruce, MS 38915-9672  
Tel: 662-983-7575  
Fax: 662-983-7578  
**Mississippi HomeCare of Grenada (66)**

Branch  
**Effective Date: 10/6/2005**  
**Branch ID: 25Q7122003**  
2340 Sunset Dr, Suite A  
Grenada, MS 38901-2827  
Tel: 662-227-5553  
Fax: 662-227-5530

**Mississippi HomeCare of Columbus (64)**

Branch  
**Effective Date: 10/6/2005**  
**Branch ID: 25Q7122004**  
2309 Bluecutt Road,  
Suite A  
Columbus, MS 39705-1305  
Tel: 662-327-5556  
Fax: 662-327-5834  
**Mississippi HomeCare of Philadelphia (203)**

Branch  
**Effective Date: 2/15/2006**  
**Branch ID: 25Q7122005**  
1012 East Main Street  
Philadelphia, MS 39350-2308  
Tel: 601-267-5446  
Fax: 601-267-5449  
**Mississippi HomeCare of Kosciusko (87)**

Branch  
**Effective Date: 8/21/2006**  
**Branch ID: 25Q7122006**  
338 Highway 12 West, Suite D  
Kosciusko, MS 39090-3209  
Tel: 662-289-0311  
Fax: 662-289-0388

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**2. Leaf River Home Health**

**Care, LLC (112)**

**d/b/a Mississippi HomeCare of Richton(61)**

**Effective Date: 10/1/2004**

**Tax ID# 20-1257620**

**NPI # 1770521072**

**Medicare # 25-7120**

**Medicaid # 0070626**

**205 Elm Avenue E**

**Richton, MS 39476-0000**

**Tel: 601-788-2912**

**Fax: 601-788-6763**

**Locations:**

**3/15/2018**

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**Mississippi HomeCare / Hattiesburg (58)**

**Branch**

**Effective Date: 7/7/2005**

**Branch ID: 25Q7120001**

**710 South 28th Ave, Suite A**

**Hattiesburg, MS 39402-2585**

**Tel: 601-296-7653**

**Fax: 601-296-7652**

**Mississippi HomeCare / Laurel (91)**

**Branch**

**Effective Date: 7/1/2006**

**Branch ID: 25Q7120002**

**3125 Highway 15 North, Suite A**

**Laurel, MS 39440-1930**

**Tel: 601-428-5482**

**Fax: 601-428-5797**

**3.LHCG XCVIII, LLC (396)**

**d/b/a Baptist Home Care & Hospice - North**

**Mississippi(555)**

**Effective Date: 6/1/2017**

**Tax ID# 81-5345526**

**NPI # 1275068959**

**Medicare # 25-7114**

**Medicaid # Pending**

**548 Highway 6 East**

**Batesville, MS 38606-3002**

**Tel: 662-578-8402**

**Fax: 662-578-8410**

**Locations:**

**4.Mississippi HomeCare of**

**Jackson II, LLC (206)**

**d/b/a Mississippi HomeCare / Jackson(40)**

**Effective Date: 10/1/2007**

**Tax ID# 26-0784038**

**NPI # 1730373275**

**Medicare # 25-7082**

**Medicaid # 00770125**

**Medicaid # 00770467 (Homemaker)**

**1200 N State St, Suite 200**

**Jackson, MS 39202-2001**

**Tel: 601-352-5063**

**Fax: 601-352-7098**

**Locations:**

**Mississippi HomeCare/Flowood (41)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082001**

**643 Lakeland East Dr, Suite A**

**Flowood, MS 39232-9099**

**Tel: 601-824-7020**

**Fax: 601-824-7026**

**Mississippi HomeCare / Yazoo City (43)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082002**

**732 East Fifteenth St**

**Yazoo City, MS 39194-2706**

**Tel: 662-746-1232**

**Fax: 662-746-5197**

**Mississippi HomeCare of Crystal Springs (42)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082003**

**103 East Georgetown St**

**Crystal Springs, MS 39059-2777**

**Tel: 601-892-4087**

**Fax: 601-892-8961**

**Mississippi HomeCare / Madison (70)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082004**

**401 Baptist Drive, Suite 401**

**Madison, MS 39110-2012**

**Tel: 601-853-0782**

**Fax: 601-853-7454**

**Mississippi HomeCare / Clinton (89)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082005**

**729-A Clinton Parkway**

**Clinton, MS 39056-5245**

**Tel: 601-925-6144**

**Fax: 601-925-5712**

**Mississippi HomeCare / Magee (104)**

**Branch**

**Effective Date: 10/1/2007**

**Branch ID: 25Q7082006**

**610 SW 3rd Street**

**Magee, MS 39111-3994**

**Tel: 601-849-5331**

**Fax: 601-849-5509**

**Mississippi HomeCare of Forest (457)**

**Branch**

**Effective Date: 10/15/2008**

**Branch ID: 25Q7082007**

**526 Deerfield Drive Suite C**

**Forest, MS 39074-6005**

**Tel: 601-469-0913**

**Fax: 601-469-0916**

**Mississippi HomeCare of Carthage (1590)**

**Branch**

**Effective Date: 1/26/2017**

**Branch ID: 25Q7082008**

**111 South Pearl Street**

**Carthage, MS 39051-4131**

**Tel: 601-741-5002**

**Fax: 601-741-5015**

**5.Mississippi HomeCare, LLC (115)**

**d/b/a Mississippi HomeCare / Vicksburg(70)**

**Effective Date: 1/8/2002**

**Tax ID# 01-0689757**

**NPI # 1497867857**

**Medicare # 25-7107**

**Medicaid # 0770602**

**2080 South Frontage Road, Suite 107**

**Vicksburg, MS 39180-5882**

**Tel: 601-629-0015**

**Fax: 601-629-0046**

**Locations:**

**Mississippi HomeCare / Port Gibson (13)**

**Branch**

**Effective Date: 1/8/2002**

**Branch ID: 25Q7107002**

**615 Market Street**

**Port Gibson, MS 39150-2361**

**Tel: 601-437-8201**

**Fax: 601-437-8007**

**Mississippi HomeCare / Rolling Fork (12)**

**Branch**

**Effective Date: 1/8/2002**

**Branch ID: 25Q7107003**

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**50 Frontage Road, Suite B**

**Rolling Fork, MS 39159-2815**

**Tel: 662-873-4341**

**Fax: 662-873-9333**

**6.Picayune HomeCare, LLC (111)**

**d/b/a Mississippi HomeCare of Picayune(25)**

**Effective Date: 8/1/2006**

**Tax ID# 64-0938601**

**NPI # 1548293582**

**Medicare # 25-7141**

**Medicaid # 0770551**

**1701 Highway 43 North, Suite 6**

**Picayune, MS 39466-2844**

**Tel: 601-749-9101**

**Fax: 601-749-8970**

**Locations:**

**Mississippi HomeCare of Gulfport (29)**

**Branch**

**Effective Date: 8/1/2006**

**Branch ID: 25Q7141001**

**14094 Customs Boulevard, Suite 200**

**Gulfport, MS 39503-4774**

**Tel: 228-539-4069**

**Fax: 228-539-4072**

**Mississippi HomeCare / Wiggins (30)**

**Branch**



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Effective Date: 8/1/2006  
Branch ID: 25Q7141002  
1111 East Frontage Dr  
Wiggins, MS 39577-8169  
Tel: 601-528-8615  
Fax: 601-528-8617  
Mississippi HomeCare of Bay St.  
Louis (117)  
Branch

Effective Date: 5/28/2007  
Branch ID: 25Q7141004  
12083 Highway 603  
Bay St. Louis, MS 39520-8743  
Tel: 228-466-5870  
Fax: 228-466-6691

**7.South Mississippi Home  
Health, Inc. - Region I (291)  
d/b/a Deaconess**

**HomeCare(395)**  
Effective Date: 4/1/2014  
Tax ID# 64-0736425  
NPI # 1326039470  
Medicare # 25-7085  
Medicaid # 00770064  
128 South 11th Avenue  
Laurel, MS 39440-4313  
Tel: 601-649-2231  
Fax: 601-425-1967

**Locations:**  
**Deaconess HomeCare (1192)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085001  
2556 Marcia Court, Suite 102  
Biloxi, MS 39531-2352  
Tel: 228-388-7707  
Fax: 228-388-7609

**Deaconess HomeCare (1193)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085002  
418 Sumrail Rd, Suite 6  
Columbia, MS 39429-9573  
Tel: 601-736-8431

Fax: 601-736-8227  
**Deaconess HomeCare (1194)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085003  
12261 Highway 49, Suite 14  
Gulfport, MS 39503-2976  
Tel: 228-539-3636

Fax: 228-539-3658  
**Deaconess HomeCare (1196)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085005  
52 Plaza Dr  
Lucedale, MS 39452-6180  
Tel: 601-947-4252  
Fax: 601-947-2892

**Deaconess HomeCare (1199)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085007  
6300 East Lake Boulevard, Suite  
202

Vancleave, MS 39565-6771  
Tel: 228-769-1683  
Fax: 228-769-1296  
**Deaconess HomeCare (1198)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7085011  
1203 24th Avenue  
Meridian, MS 39301-3926  
Tel: 601-581-5066  
Fax: 601-581-5074

**8.South Mississippi Home  
Health, Inc. - Region II (292)  
d/b/a Deaconess**

**HomeCare(396)**  
Effective Date: 4/1/2014

Tax ID# 64-0736424  
NPI # 1376533778  
Medicare # 25-7135  
Medicaid # 00770063  
105 Whitebrook Dr  
Brookhaven, MS 39601-3367  
Tel: 601-835-1145  
Fax: 601-833-6273

**Locations:**  
**Deaconess HomeCare (1204)**  
Branch

Effective Date: 4/1/2014  
Branch ID: 25Q7135003  
46 Seargent Prentiss Dr, Suite 302  
Natchez, MS 39120-0000  
Tel: 601-442-8311  
Fax: 601-445-9305

**9.South Mississippi Home  
Health, Inc. - Region III  
(295)**

**d/b/a Deaconess  
HomeCare(399)**  
Effective Date: 4/1/2014  
Tax ID# 64-0935599

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105 Whitebrook Dr  
Brookhaven, MS 39601-3367  
Tel: 601-835-1145  
Fax: 601-833-6273

**Locations:**

**North Carolina -  
Home  
Health**

**1.Cape Fear Valley HomeCare  
and Hospice, LLC (116)  
d/b/a Cape Fear Valley Home  
Health(146)**

Effective Date: 10/1/2008  
Tax ID# 26-3385545  
NPI # 1336399906  
Medicare # 34-7127  
Medicaid # 3417127  
3400 Walsh Parkway, Suite 100  
Fayetteville, NC 28311-1642

Tel: 910-609-6740  
Fax: 910-609-6573

**Locations:**

**2.LHCG L, LLC (301)  
d/b/a North Carolina Home  
Health(410)**

Effective Date: 5/1/2014  
Tax ID# 35-2503790  
NPI # 1467871210  
Medicare # 34-7219  
Medicaid # 1467871210  
1027 US 70 Highway West, Suite  
109

Garner, NC 27529-2501  
Tel: 919-662-1635  
Fax: 919-662-1551

**Locations:**

**3.North Carolina In-Home  
Partner-I, LLC (431)**

**d/b/a Harris Home Health(597)**

Effective Date: 9/1/2017  
Tax ID# 30-0996614  
NPI # 1912421603  
Medicare # 34-7029  
Medicaid # Pending  
26 Westcare Drive, Suite 303  
Sylva, NC 28779-5278  
Tel: 828-586-7000  
Fax: 828-586-7467

**Locations:**

**4.North Carolina In-Home  
Partner-III, LLC (432)**

**d/b/a Home Care Services of  
Haywood Regional  
Medical Center(598)**

Effective Date: 9/1/2017  
Tax ID# 30-0996677  
NPI # 1811411507  
Medicare # 34-7035  
Medicaid # Pending  
18B Bowman Drive, Suite 2  
Waynesville, NC 28785-6115  
Tel: 828-452-8292  
Fax: 828-452-8593

**Locations:**

**5.North Carolina In-Home  
Partner-V, LLC (385)**

**d/b/a Carolina Home Care(541)**

Effective Date: 4/1/2017  
Tax ID# 81-5292449  
NPI # 1518406313  
Medicare # 34-7169  
Medicaid # 1518406313  
2270 US Hwy 74A Bypass, Suite  
345  
Forest City, NC 28043-2453  
Tel: 828-245-3575  
Fax: 828-245-5426

**Locations:**

**6.North Carolina In-Home  
Partner-VI, LLC (386)**

**d/b/a Maria Parham Regional  
Home Health(542)**

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Effective Date: 4/1/2017  
Tax ID# 81-5476171  
NPI # 1114467008  
Medicare # 34-7222  
566 Ruin Creek Road  
Henderson, NC 27536-2927  
Tel: 252-431-3708  
Fax: 252-431-3734  
**Locations:**

**Pennsylvania -  
Home Health**

**1.Pennsylvania In-Home  
Partner-I, LLC (429)  
d/b/a Conemaugh Home  
Health(591)**

Effective Date: 9/2/2017  
Tax ID# 82-2091703  
NPI # 1831613520  
Medicare # 39-7406  
Medicaid # Pending  
315 Locust Street 1st Floor Suite  
Johnstown, PA 15901-1651  
Tel: 814-534-7500  
Fax: 814-534-7501

**Locations:  
Conemaugh Home Health (1659)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406002  
881 Hills Plaza Drive, Suite 550  
Ebensburg, PA 15931-4213  
Tel: 814-472-4521  
Fax: 814-472-6511

**Conemaugh Home Health (1660)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406003  
210 Ohio Street  
Boswell, PA 15531-1245  
Tel: 814-629-5653  
Fax: 814-629-7265

**Conemaugh Home Health (1661)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406004  
145 Clark Building Road, Suite 8  
Bedford, PA 15522-9768  
Tel: 814-623-2820  
Fax: 814-623-2822

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**Conemaugh Home Health (1662)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406005  
506 Beachley Street  
Meyersdale, PA 15552-1226  
Tel: 814-634-5400  
Fax: 814-634-5316

**Conemaugh Home Health (1663)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406008  
813 Jefferson Avenue

Portage, PA 15946-1706  
Tel: 814-736-4260  
Fax: 814-736-4379  
**Conemaugh Home Health (1664)  
Branch**

Effective Date: 9/2/2017  
Branch ID: 39Q7406010  
1216 Walton Street  
Philipsburg, PA 16866-2750  
Tel: 814-342-6670  
Fax: 814-342-1721

**2.Pennsylvania In-Home  
Partner-III, LLC (631)  
d/b/a Nason Hospital Home  
Health Agency(883)**

Effective Date: 2/2/2018  
Tax ID# 82-3662886  
NPI # 1699280701  
Medicare # 39-7292  
108 Nason Drive  
Roaring Spring, PA 16673-1202  
Tel: 814-224-6218  
Fax: 814-224-6248

**Locations:**

**South Carolina -  
Home  
Health**

**1.South Carolina In-Home  
Partner-I, LLC (693)  
d/b/a Providence Home  
Health(959)**

Effective Date: 3/1/2018  
Tax ID# 82-4146393  
NPI # 1972001956  
Medicare # 42-7109  
140 Stoneridge Dr, Suite 620  
Columbia, SC 29210-8258  
Tel: 803-343-5100  
Fax: 803-758-4001

**Locations:**

**Division -  
Gateway  
Division  
Arizona - Home  
Health**

**1.Arizona In-Home Partner-I,  
LLC (351)  
d/b/a Havasu Regional Medical  
Center Home  
Health(506)**

Effective Date: 1/1/2017  
Tax ID# 38-4023101  
NPI # 1487190658  
Medicare # 03-7057  
Medicaid # 343245

1795 Civic Center Blvd, Suite 104  
Lake Havasu City, AZ 86403-5673  
Tel: 928-680-1209  
Fax: 928-680-7914

**Locations:**

**2.Arizona In-Home Partner-II,  
LLC (359)**

**d/b/a Valley View Home  
Health(514)**

Effective Date: 1/1/2017  
Tax ID# 81-5027397  
NPI # 1265979033  
Medicare # 03-7412  
Medicaid # 340138  
1520 E. Hammer Lane, Suite 102  
Fort Mohave, AZ 86426-6665  
Tel: 928-788-4140  
Fax: 928-788-4148

**Locations:**

**3.LHCG LVI, LLC (302)**

**d/b/a At Home Healthcare(416)**

Effective Date: 9/1/2014

Tax ID# 47-1246146  
NPI # 1992111645  
Medicare # 03-7215  
Medicaid # 960348  
1550 East Missouri Ave, Suite 102  
Phoenix, AZ 85014-2455  
Tel: 480-991-3303  
Fax: 480-922-4944

**Locations:**

**4.LHCG LVI, LLC (302)**

**d/b/a At Home Healthcare(417)**

Effective Date: 9/1/2014

Tax ID# 47-1246146  
NPI # 1619383361  
Medicare # 03-7221  
Medicaid # 960369  
2980 North Campbell Avenue, Suite  
170  
Tucson, AZ 85719-7401  
Tel: 520-498-2288  
Fax: 520-498-4693

**Locations:**

**5.LHCG LXXVII, LLC (334)**

**d/b/a Northern Arizona Home  
Health(475)**

Effective Date: 4/1/2016

Tax ID# 35-2553180  
NPI # 1174983621  
Medicare # 03-7047  
Medicaid # 173828 (NPI  
1174983621)  
1501 S. Yale Street, Suite 101  
Flagstaff, AZ 86001-7314  
Tel: 928-773-2238  
Fax: 928-773-2078

**Locations:**

**6.LHCG LXXVII, LLC (334)**

**d/b/a Northern Arizona Home  
Health(476)**

Effective Date: 4/1/2016

Tax ID# 35-2553180  
NPI # 1164882619

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Medicare # 03-7042  
Medicaid # 188302 (NPI  
1164882619)

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203 South Candy Lane, Suite 5A  
Cottonwood, AZ 86326-8111  
Tel: 928-639-6674  
Fax: 928-639-6403

**Locations:**

**California - Home Health**

**1.LHCG XXXVIII, LLC (276)  
d/b/a Addus HealthCare(369)  
Effective Date: 3/1/2013**

Tax ID# 46-1994514  
NPI # 1417297276  
Medicare # 55-7272  
Medicaid # 1417297276  
3507 Tully Road, Suite 20  
Modesto, CA 95356-1000  
Tel: 209-578-3231  
Fax: 209-574-6118

**Locations:**

**2.LHCG XXXVIII, LLC (276)  
d/b/a Addus HealthCare(370)**

Effective Date: 3/1/2013  
Tax ID# 46-1994514  
NPI # 1801136213  
Medicare # 05-8117  
Medicaid # 1801136213  
196 Cohasset Road, Suite 200  
Chico, CA 95926-2287  
Tel: 530-342-7248  
Fax: 530-342-7251

**Locations:**

**Addus HealthCare (1109)**

Branch

Effective Date: 3/1/2013  
Branch ID: 05Q8117001  
2851 Park Marina Drive, Suite 150  
Redding, CA 96001-2813  
Tel: 530-247-0858  
Fax: 530-243-5942

**Colorado - Home Health**

**1.Colorado In-Home Partner-I,  
LLC (360)**

**d/b/a Colorado Plains Medical  
Center Home  
Care(515)**

Effective Date: 1/1/2017

Tax ID# 61-1813323  
NPI # 1417494360  
Medicare # 06-7204  
Medicaid # 1417494360  
515 E. Riverview Ave  
Fort Morgan, CO 80701-3262  
Tel: 970-867-3013  
Fax: 970-867-5951

**Locations:**

**2.LHCG LVII, LLC (303)  
d/b/a At Home Healthcare(418)**

Effective Date: 9/1/2014  
Tax ID# 47-1247286  
NPI # 1235545997  
Medicare # 06-7248  
Medicaid # 37558552  
177 Craft Drive, Suite 100  
Alamosa, CO 81101-2261  
Tel: 719-589-6425  
Fax: 719-589-1021

**Locations:**

**3.LHCG LVII, LLC (303)  
d/b/a At Home Healthcare(419)**

Effective Date: 9/1/2014  
Tax ID# 47-1247286  
NPI # 1730595307  
Medicare # 06-7255  
Medicaid # 74272870  
2121 S. Blackhawk Street, Suite 110  
Aurora, CO 80014-1488  
Tel: 303-369-7063  
Fax: 303-751-5401

**Locations:**

**At Home Healthcare (1256)**

Branch

Effective Date: 9/1/2014  
Branch ID: 06Q7255001  
1365 Forest Park Circle, Suite 203  
Lafayette, CO 80026-3195  
Tel: 303-666-7712  
Fax: 303-666-7713

**At Home Healthcare (1255)**

Branch

Effective Date: 9/1/2014  
Branch ID: 06Q7255002  
75 Printers Parkway, Suite 105  
Colorado Springs, CO 80910-3151  
Tel: 719-227-8624  
Fax: 719-227-8753

**Idaho - Home Health**

**1.LHCG XVII, LLC (199)  
d/b/a Idaho Home Health &  
Hospice(193)**

Effective Date: 7/1/2010  
Tax ID# 27-2544802  
NPI # 1356669675  
Medicare # 13-7014  
Medicaid # 1356669675  
222 Shoshone Street East  
Twin Falls, ID 83301-6105  
Tel: 208-734-4061  
Fax: 208-734-3471

**Locations:**

**Idaho Home Health & Hospice  
(537)**

Branch

Effective Date: 7/1/2010  
Branch ID: 13Q7014009  
329 Washington St  
Gooding, ID 83330-1343

Tel: 208-934-4842  
Fax: 208-934-4846  
Idaho Home Health & Hospice  
(685)

Branch

Effective Date: 7/1/2010  
Branch ID: 13Q7014010  
3356 E. Goldstone Way, Suite 3360  
Meridian, ID 83642-1026  
Tel: 208-887-6633  
Fax: 208-887-7824

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**2.LHCG XXI, LLC (226)  
d/b/a North Idaho Home  
Health(215)**

Effective Date: 11/1/2010  
Tax ID# 27-3529180  
NPI # 1053620799  
Medicare # 13-7019  
Medicaid # 1053620799  
850 W. Kathleen Avenue  
Coeur D'Alene, ID 83815-9405  
Tel: 208-667-7494  
Fax: 208-765-2236

**Locations:**

**Oregon - Home Health**

**1.Salem Home Care, LLC (194)**

**d/b/a N/A(180)**

Effective Date: 4/1/2010  
Tax ID# 27-1976968  
NPI # 1730401217  
Medicare # 38-7093  
Medicaid # 500621623  
925 Commercial Street SE, Suite  
310  
Salem, OR 97302-4175  
Tel: 503-561-5999  
Fax: 503-561-4905

**Locations:**

**Assured Home Health (803)**

Branch

Effective Date: 6/7/2011  
Branch ID: 38Q7093001  
6420 SW Macadam Avenue, Suite  
380  
Portland, OR 97239-3519  
Tel: 503-244-4621  
Fax: 503-244-4631

**2.Three Rivers HomeCare,  
LLC (163)**

**d/b/a Three Rivers**

**HomeCare(169)**

Effective Date: 9/1/2009  
Tax ID# 27-0705907  
NPI # 1396977393  
Medicare # 38-7076  
Medicaid # 500618136  
1830 NE 7th St, Suite 101  
Grants Pass, OR 97526-3489  
Tel: 541-476-6224  
Fax: 541-476-2823

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**Locations:**

**Southern Oregon Home Health (1165)**

Branch

Effective Date: 1/8/2013

Branch ID: 38Q7076001

1390 Biddle Road, Suite 105

Medford, OR 97504-4169

Tel: 541-773-1477

Fax: 541-773-1559

**Washington -**

**Home Health**

**1.LHCG LXIII, LLC (309)**

**d/b/a Assured Home**

**Health(425)**

Effective Date: 9/1/2014

Tax ID# 61-1739528

NPI # 1770998528

Medicare # 50-7099

Medicaid # 2043363

13000 Linden Avenue North, Suite 112

Seattle, WA 98133-7469

Tel: 206-364-1484

Fax: 206-364-1286

**Locations:**

**Assured Home Health (1265)**

Branch

Effective Date: 9/1/2014

Branch ID: 50Q7099001

16710 Smokey Point Blvd, Suite 201

Arlington, WA 98223-8435

Tel: 360-659-1487

Fax: 360-659-0726

**Assured Home Health (1392)**

Branch

Effective Date: 1/1/2016

Branch ID: 50Q7099002

33600 6th Avenue South, Suite 200

Federal Way, WA 98003-6743

Tel: 253-838-7916

Fax: 253-838-7094

**2.Northeast Washington Home**

**Health, Inc. (195)**

**d/b/a Assured Home**

**Health(181)**

Effective Date: 8/1/2009

Tax ID# 27-0555075

NPI # 1336379015

Medicare # 50-7044

Medicaid # 1336379015

111 West N. River Dr, Suite 204

Spokane, WA 99201-3204

Tel: 509-747-2462

Fax: 509-747-2173

**Locations:**

**3.Northwest Healthcare**

**Alliance, Inc. (249)**

**d/b/a Assured Home Health &**

**Hospice(163)**

Effective Date: 12/31/2008

Tax ID# 91-1738970

NPI # 1154397305

Medicare # 50-7042

Medicaid # 9048166

2120 Northpark Street, Suite B

Centralia, WA 98531-9098

Tel: 360-330-2640

Fax: 360-807-0859

**Locations:**

**Assured Home Health, Hospice &**

**Home Care (696)**

Branch

Effective Date: 12/31/2008

Branch ID: 50Q7042002

2102 Carriage St. SW, Suite D

Olympia, WA 98502-1049

Tel: 360-236-9204

Fax: 360-236-9389

**Assured Home Health, Hospice &**

**Home Care (698)**

Branch

Effective Date: 12/31/2008

Branch ID: 50Q7042003

5617 Olympic Hwy, Suite 5617

Aberdeen, WA 98520-8866

Tel: 360-537-2743

Fax: 360-537-6812

**3/15/2018**

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**Assured Home Health, Hospice &**

**Home Care (697)**

Branch

Effective Date: 12/31/2008

Branch ID: 50Q7042004

1338 Commerce Ave, Suite 205

Longview, WA 98632-3743

Tel: 360-578-5946

Fax: 360-577-5268

**4.Washington HomeCare and**

**Hospice of Central**

**Basin, LLC (149)**

**d/b/a Assured Home**

**Health(164)**

Effective Date: 5/1/2009

Tax ID# 26-4568497

NPI # 1720220908

Medicare # 50-7048

Medicaid # 1720220908

1417 South Pioneer Way

Moses Lake, WA 98837-2458

Tel: 509-765-1856

Fax: 509-766-5865

**Locations:**

**Division -**

**Physician**

**Services**

**Physician Svcs AR -**

**Physician**

**Services**

**1.LHCG LXXXV, LLC (350)**

**d/b/a UR Care(503)**

Effective Date: 11/1/2016

Tax ID# 36-4847404

NPI # 1700335031

Medicare # 543233 (Part B)

Medicaid # Pending

3024 Red Wolf Blvd

Jonesboro, AR 72401-7415

Tel: 870-333-5355

Fax: 870-333-5369

**Locations:**

**Physician Svcs KY -**

**Physician**

**Services**

**1.LHC Physician Services of**

**West Virginia, LLC (325)**

**d/b/a Primary Care at Home of**

**Kentucky(463)**

Effective Date: 10/15/2015

Tax ID# 47-5307153

NPI # 1629441431

Medicare # K126680 (Part B)

Medicaid # 7100398120

100 John Sutherland Dr, Suite 1

Nicholasville, KY 40356-2424

Tel: 859-887-5433

Fax: 859-887-5595

**Locations:**

**Physician Svcs LA -**

**Physician**

**Services**

**1.LHC Physician Services,**

**LLC (326)**

**d/b/a Acadian Physician**

**Services(464)**

Effective Date: 10/12/2015

Tax ID# 47-5289323

NPI # 1861863136

Medicare # 459330 (Part B)

Medicaid # 2411306

901 Hugh Wallis Road South

Lafayette, LA 70508-2511

Tel: 337-233-1307

Fax: 337-233-5764

**Locations:**

**2.Primary Care at Home of**

**Louisiana II, LLC (395)**

**d/b/a Primary Care at Home of**

**Louisiana(554)**

Effective Date: 6/5/2017

Tax ID# 82-1032626

NPI # 1760914238

Medicare # 582802 (Part B)

1107 Hudson Lane

Monroe, LA 71201-6034

Tel: 318-732-3337

Fax: 318-383-6656

**Locations:**

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**3.Primary Care at Home of Louisiana, III, LLC (436)  
d/b/a Primary Care at Home of Baton Rouge(606)  
Effective Date: 8/14/2017  
Tax ID# 82-2405320  
NPI # 1821514852  
Medicare # Pending (Part B)  
2645 O'Neal Lane, Building C, Suite C  
Baton Rouge, LA 70816-3179  
Tel: 225-952-8400  
Fax: 225-952-8440**

**Locations:  
4.Primary Care at Home of Louisiana, LLC (346)  
d/b/a N/A(498)  
Effective Date: 12/1/2016  
Tax ID# 81-3720899  
NPI # 1023565298  
Medicare # 552607  
6425 Youree Drive, Suite 290  
One Bellemead Center  
Shreveport, LA 71105-4634  
Tel: Pending  
Fax: Pending  
Locations:**

**Physician Svcs MD -  
Physician  
Services**

**1.Primary Care at Home of Maryland, LLC (340)  
d/b/a N/A(484)  
Effective Date: 11/6/2016  
Tax ID# 81-2855404  
NPI # 1326497421  
Medicare # 537638 (Part B)  
4701 Mount Hope Drive, Suite A  
Baltimore, MD 21215-3246  
Tel: 443-563-1594  
Fax: 410-318-6430  
Locations:  
3/15/2018  
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**Physician Svcs WV -  
Physician Services**

**1.LHC Physician Services of West Virginia, LLC (325)  
d/b/a Primary Care at Home of West Virginia(462)  
Effective Date: 10/15/2015  
Tax ID# 47-5307153  
NPI # 1063883213  
Medicare # F280 (Part B)  
5187 US Route 60, Suite 13  
Huntington, WV 25705-2076  
Tel: 681-203-5614  
Fax: 304-736-8131**

**Locations:  
2.Primary Care at Home of West Virginia, LLC (435)  
d/b/a Primary Care at Home of Charleston(601)  
Effective Date: 8/28/2017  
Tax ID# 82-2421087  
NPI # 1386163392  
Medicare # H280 (Part B)  
400 Tracy Way, Suite 100  
Charleston, WV 25311-1280  
Tel: 304-356-1356  
Fax: 304-885-7475**

**Locations:  
Division -  
Journey  
Division  
Hospice-Alabama -  
Hospice**

**1.LHCG LXXIX, LLC (332)  
d/b/a Heartlite Hospice(472)  
Effective Date: 3/1/2016  
Tax ID# 81-1236953  
NPI # 1831556372  
Medicare # 01-1634  
Medicaid # 1831556372 (ID # P1C1634E)  
111 East Laurel Street  
Scottsboro, AL 35768-1801  
Tel: 256-259-1754  
Fax: 256-259-1790**

**Locations:  
2.LHCG XXII, LLC (212)  
d/b/a Alabama Hospice Care of Jasper(240)  
Effective Date: 1/1/2011  
Tax ID# 27-3993048  
NPI # 1346542610  
Medicare # 01-1662  
Medicaid # 1346542610 ID 131010  
1458 Jones Dairy Rd. Suite 200  
Jasper, AL 35501-6111  
Tel: 205-385-0200  
Fax: 205-385-0198**

**Locations:  
3.LHCG XXII, LLC (212)  
d/b/a Alabama Hospice Care of Tuscaloosa(242)  
Effective Date: 1/1/2011  
Tax ID# 27-3993048  
NPI # 1518269885  
Medicare # 01-1677  
Medicaid # 1518269885 ID 130430  
3064 Palisades Court  
Tuscaloosa, AL 35405-3446  
Tel: 205-633-3705  
Fax: 205-633-3755  
Locations:**

**4.LHCG XXII, LLC (212)  
d/b/a Alabama Hospice Care of Birmingham(241)  
Effective Date: 1/1/2011  
Tax ID# 27-3993048  
NPI # 1609178979  
Medicare # 01-1657  
Medicaid # 1609178979 ID 130604  
5243 Old Springville Rd, Suite 101  
Pinson, AL 35126-3674  
Tel: 205-228-0600  
Fax: 205-228-0601**

**Locations:  
5.LHCG XXII, LLC (212)  
d/b/a Alabama Hospice Care of Oxford(239)  
Effective Date: 1/1/2011  
Tax ID# 27-3993048  
NPI # 1497057756  
Medicare # 01-1671  
Medicaid # 1497057756 ID 132683  
1631 E Hamric Dr  
Oxford, AL 36203-2035  
Tel: 256-831-2031  
Fax: 256-831-6500**

**Locations:  
6.LHCG XXIX, LLC (260)  
d/b/a Keller Hospice(342)  
Effective Date: 4/5/2011  
Tax ID# 27-5200416  
NPI # 1629376918  
Medicare # 01-1632  
Medicaid # 1629376918 ID 129891  
1404 East Avalon Avenue, Suite C  
Tuscumbia, AL 35674-1771  
Tel: 256-314-1204  
Fax: 256-314-1206**

**Locations:  
7.LHCG XXXIV, LLC (280)  
d/b/a Alabama Hospice Care of Mobile(380)  
Effective Date: 4/1/2013  
Tax ID# 46-0756410  
NPI # 1720335680  
Medicare # 01-1558  
Medicaid # 1720335680 ID 149726  
4318 Downtowner Loop North, Suite R  
Mobile, AL 36609-5508  
Tel: 251-345-1023  
Fax: 251-345-1825**

**Locations:  
Hospice-Arizona -  
Hospice**

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1.LHCG LXXVII, LLC (334)  
d/b/a Northern Arizona Hospice(477)  
Effective Date: 4/1/2016  
Tax ID# 35-2553180**

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NPI # 1356702104  
Medicare # 03-1502  
Medicaid # 181969  
203 South Candy Lane, Suite 10A  
Cottonwood, AZ 86326-8116  
Tel: 928-639-6676  
Fax: 928-639-6078

#### Locations:

### Hospice-Georgia - Hospice

#### 1. Altus Hospice of Georgia, LLC (320)

##### d/b/a Halcyon Hospice(451)

Effective Date: 10/1/2015

Tax ID# 45-3437288

NPI # 1972880896

Medicare # 11-1624

Medicaid # 777588136A

5411 Northland Drive, 2nd Floor  
Atlanta, GA 30342-2061

Tel: 770-730-8405

Fax: 770-730-8408

#### Locations:

Halcyon Hospice (1330)

IPU

Effective Date: 10/1/2015

Branch ID: N/A

5411 Northland Drive

Atlanta, GA 30342-2061

Tel: 404-252-8277

Fax: 404-531-6639

#### 2. Altus Hospice of Georgia, LLC (320)

##### d/b/a Halcyon Hospice(454)

Effective Date: 10/1/2015

Tax ID# 45-3437288

NPI # 1609115567

Medicare # 11-1700

Medicaid # 003170151A

327 Westview Drive

Villa Rica, GA 30180-1825

Tel: 770-456-4643

Fax: 770-456-4085

#### Locations:

#### 3. Compassionate Healthcare Management Group, Inc. (321)

##### d/b/a Halcyon Hospice(452)

Effective Date: 10/1/2015

Tax ID# 20-4591877

NPI # 1497713754

Medicare # 11-1634

Medicaid # 957163126A

102 Mary Alice Park Road, Suite 101

Cumming, GA 30040-2666

Tel: 678-717-0969

Fax: 678-717-0964

#### Locations:

Halcyon Hospice (1332)

Multi-Site

Effective Date: 10/1/2015

Branch ID: N/A

1071 Founders Blvd, Suite D

Athens, GA 30606-6176

Tel: 706-316-2214

Fax: 706-316-2216

Halcyon Hospice (1333)

Multi-Site

Effective Date: 10/1/2015

Branch ID: N/A

731 Queen City Parkway, Suite 204

Gainesville, GA 30501-4357

Tel: 470-248-4120

Fax: 678-696-8219

Halcyon Hospice (1334)

Multi-Site

Effective Date: 10/1/2015

Branch ID: N/A

2295 Parklake Dr NE, Suite 190

Atlanta, GA 30345-2844

Tel: 678-651-1440

Fax: 678-651-1470

Halcyon Hospice (1589)

Multi-Site

Effective Date: 3/10/2017

Branch ID: N/A

175 Langley Drive, Suite A-3

Lawrenceville, GA 30046-6952

Tel: 678-442-8626

Fax: 678-442-8629

#### 4. Grace Hospice, LLC (322)

##### d/b/a Halcyon Hospice(453)

Effective Date: 10/1/2015

Tax ID# 20-3301932

NPI # 1598838468

Medicare # 11-1632

Medicaid # 819131826A

101 E. Northside Drive, Building E

Valdosta, GA 31602-1724

Tel: 229-333-5005

Fax: 229-333-5007

#### Locations:

#### 5. LHCG LXXIV, LLC (333)

##### d/b/a Heartlite Hospice(473)

Effective Date: 3/1/2016

Tax ID# 81-1105754

NPI # 1649637984

Medicare # 11-1652

Medicaid # 047897149A

1008 Professional Boulevard, Suite 4

Dalton, GA 30720-2554

Tel: 706-272-1035

Fax: 706-272-1036

#### Locations:

#### 6. LHCG LXXIV, LLC (333)

##### d/b/a Heartlite Hospice(474)

Effective Date: 3/1/2016

Tax ID# 81-1105754

NPI # 1508223843

Medicare # 11-1703

Medicaid # 003176720A

772 Maddox Drive, Suite 112

East Ellijay, GA 30540-8197

Tel: 706-635-7001

Fax: 706-635-7003

#### Locations:

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### Hospice-Idaho - Hospice

#### 1. LHCG XVII, LLC (199) d/b/a Idaho Home Health & Hospice(194)

Effective Date: 7/1/2010

Tax ID# 27-2544802

NPI # 1730407701

Medicare # 13-1501

Medicaid # 1730407701

222 Shoshone Street East

Twin Falls, ID 83301-6105

Tel: 208-734-4064

Fax: 208-733-5980

#### Locations:

Idaho Home Health & Hospice  
(488)

Multi-Site

Effective Date: 7/1/2010

Branch ID: Medicare Approv

3356 E. Goldstone Way, Suite 3356

Meridian, ID 83642-1026

Tel: 208-887-6633

Fax: 208-887-9283

### Hospice-Michigan - Hospice

#### 1. Michigan In-Home Partner-II, LLC (381)

##### d/b/a UP Health System Home Care & Hospice(537)

Effective Date: 4/1/2017

Tax ID# 30-0967541

NPI # 1447799648

Medicare # 23-1571

2420 1st Avenue South, Suite 102

Escanaba, MI 49829-1309

Tel: 906-789-1305

Fax: 906-789-9144

#### Locations:

UP Health System Home Care &  
Hospice (1544)

Multi-Site

Effective Date: 4/1/2017

Branch ID:

1110 10th Avenue, Suite 2

Menominee, MI 49858-3058

Tel: 906-863-7877

Fax: 906-863-8050

#### 2. Michigan In-Home Partner- IV, LLC (384)

##### d/b/a UP Health System Home Care & Hospice

Portage(540)

Effective Date: 4/1/2017

Tax ID# 81-5278983

NPI # 1306387428

Medicare # 23-1602

821 W. Water Street

Hancock, MI 49930-1953

Tel: 906-483-1160

Fax: 906-483-1167

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**Locations:**

**Hospice-Mississippi**

**- Hospice**

**1.Community Hospice, LLC (317)**

**d/b/a Halcyon Hospice - Batesville(447)**

**Effective Date: 10/1/2015**

**Tax ID# 20-0896023  
NPI # 1619933819  
Medicare # 25-1595  
Medicaid # 09236855**

**270 Power Drive  
Batesville, MS 38606-3010  
Tel: 662-561-0902  
Fax: 662-561-0903**

**Locations:**

**Halcyon Hospice - Belden (1314)  
Multi-Site**

**Effective Date: 10/1/2015**

**Branch ID: N/A**

**3289 McCullough Boulevard  
Belden, MS 38826-9402  
Tel: 662-823-9850  
Fax: 662-823-9851**

**2.Community Hospice, LLC (317)**

**d/b/a Halcyon Hospice - Hattiesburg(448)**

**Effective Date: 10/1/2015**

**Tax ID# 20-0896023  
NPI # 1336372127  
Medicare # 25-1661  
Medicaid # 08436766**

**710 South 28th Avenue, Suite C  
Hattiesburg, MS 39402-2585  
Tel: 601-336-5832  
Fax: 601-255-5095**

**Locations:**

**3.Cornerstone Palliative and Hospice, LLC (318)**

**d/b/a Baptist Hospice(449)**

**Effective Date: 10/1/2015**

**Tax ID# 45-4845966  
NPI # 1326397241  
Medicare # 25-1676  
Medicaid # 00450571**

**732 East Fifteenth Street  
Yazoo City, MS 39194-2706  
Tel: 662-746-5153  
Fax: 662-746-5154**

**Locations:**

**Baptist Hospice (1318)**

**Multi-Site**

**Effective Date: 10/1/2015**

**Branch ID: N/A**

**1200 North State Street, Suite 480  
Jackson, MS 39202-2080  
Tel: 601-933-0053  
Fax: 601-933-0463**

**4.Covenant Palliative and Hospice, LLC (319)**

**d/b/a Halcyon Hospice - Philadelphia(450)**

**Effective Date: 10/1/2015**

**Tax ID# 45-4845621  
NPI # 1083963979  
Medicare # 25-1677  
Medicaid # 02280076  
1012 E. Main Street  
Philadelphia, MS 39350-2308  
Tel: 601-656-7411  
Fax: 601-656-7931**

**Locations:**

**3/15/2018**

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**5.LHCG C, LLC (398)**

**d/b/a Baptist Hospice - Golden Triangle(557)**

**Effective Date: 6/1/2017**

**Tax ID# 82-1229536  
NPI # 1508393646  
Medicare # 25-1504  
Medicaid # Pending  
2623 5th Street North  
Columbus, MS 39705-2009  
Tel: 662-243-1173  
Fax: 662-243-2094**

**Locations:**

**6.LHCG XCIX, LLC (397)**

**d/b/a Baptist Home Care & Hospice - North**

**Mississippi(556)**

**Effective Date: 6/1/2017**

**Tax ID# 81-5377954  
NPI # 1932635141  
Medicare # 25-1523  
Medicaid # Pending  
548 Highway 6 East  
Batesville, MS 38606-3002  
Tel: 662-578-8402  
Fax: 662-578-8410**

**Locations:**

**7.South Mississippi Home Health, Inc. (296)**

**d/b/a Deaconess Hospice(402)**

**Effective Date: 4/1/2014**

**Tax ID# 64-0736426  
NPI # 1518957083  
Medicare # 25-1535  
Medicaid # 00770191  
128 South 11th Avenue  
Laurel, MS 39440-4313  
Tel: 601-261-4010  
Fax: 601-261-4018**

**Locations:**

**Deaconess Hospice (1208)**

**Multi-Site**

**Effective Date: 4/1/2014**

**Branch ID: N/A**

**105 Whitebrook Drive  
Brookhaven, MS 39601-3367  
Tel: 601-823-5990  
Fax: 601-823-5992**

**8.South Mississippi Home Health, Inc. (296)**

**d/b/a Deaconess Hospice(470)**

**Effective Date: 12/7/2015**

**Tax ID# 64-0736426  
NPI # 1477935013  
Medicare # 25-1696  
Medicaid # 06705248  
2556 Marcia Court, Suite 101  
Biloxi, MS 39531-2352  
Tel: 228-435-2265  
Fax: 228-435-3379**

**Locations:**

**Hospice-**

**Pennsylvania -**

**Hospice**

**1.Pennsylvania In-Home**

**Partner-II, LLC (364)**

**d/b/a Conemaugh Regional Hospice(519)**

**Effective Date: 1/1/2017**

**Tax ID# 81-4811929  
NPI # 1396281663  
Medicare # 39-1565  
Medicaid # 103326458  
315 Locust Street, Suite 5E  
Johnstown, PA 15901-1651  
Tel: 814-534-6100  
Fax: 814-534-6105**

**Locations:**

**Hospice-South**

**Carolina -**

**Hospice**

**1.Halcyon Hospice of Aiken, LLC (323)**

**d/b/a Halcyon Hospice of Aiken(455)**

**Effective Date: 10/1/2015**

**Tax ID# 27-0380864  
NPI # 1275763476  
Medicare # 42-1597  
Medicaid # HSP114  
225 Barnwell Ave NW  
Aiken, SC 29801-3903  
Tel: 803-226-0387  
Fax: 803-226-0389**

**Locations:**

**2.LHCG XLI, LLC (279)**

**d/b/a Halcyon Hospice(378)**

**Effective Date: 3/1/2013**

**Tax ID# 32-0398996  
NPI # 1659618387  
Medicare # 42-1596  
Medicaid # 1659618387 (Id # HSP145)  
140 Stoneridge Dr, Suite 630  
Columbia, SC 29210-8258**

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Tel: 803-758-4099  
Fax: 803-771-7962

**Locations:**

**Halcyon Hospice (1308)**  
Multi-Site

**Effective Date: 8/1/2015**

**Branch ID: N/A**

665 N. Academy Street  
Greenville, SC 29601-2245

Tel: 864-451-7603

Fax: 864-451-7607

**Halcyon Hospice (1309)**

Multi-Site

**Effective Date: 8/1/2015**

**Branch ID: N/A**

300 East Henry Street, Suite A  
Spartanburg, SC 29302-2615

Tel: 864-582-8844

Fax: 864-583-3737

**Hospice-Virginia -  
Hospice**

**1. Virginia In-Home Partner-II,  
LLC (370)**

**d/b/a Wythe Hospice of  
Southwest Virginia(525)**

**Effective Date: 1/1/2017**

**Tax ID# 81-4811408**

**3/15/2018**

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**NPI # 1023553989**

**Medicare # 49-1521**

**Medicaid # 1023553989**

1155 North 4th Street  
Wytheville, VA 24382-1096

Tel: 276-228-1710

Fax: 276-228-1719

**Locations:**

**2. Virginia In-Home Partner-IV,  
LLC (372)**

**d/b/a Sovah Hospice(527)**

**Effective Date: 1/1/2017**

**Tax ID# 32-0516324**

**NPI # 1841737707**

**Medicare # 49-1605**

**Medicaid # 1841737707**

142 South Main Street  
Danville, VA 24541-2922

Tel: 434-799-5313

Fax: 434-799-5317

**Locations:**

**Sovah Hospice (1487)**

Multi-Site

**Effective Date: 1/1/2017**

**Branch ID: N/A**

706 E. Church Street, Suite B  
Martinsville, VA 24112-1900

Tel: 276-666-7469

Fax: 276-670-7111

**3. Virginia In-Home Partner-IX,  
LLC (389)**

**d/b/a Twin County**

**Hospice(545)**

**Effective Date: 4/1/2017**

**Tax ID# 81-5294732**

**NPI # 1073052759**

**Medicare # 49-1531**

**Medicaid # 1073052759**

818 Glendale Road, Suite 2  
Galax, VA 24333-2311

Tel: 276-236-0973

Fax: 276-236-6455

**Locations:**

**Hospice-  
Washington -  
Hospice**

**1. Northwest Healthcare**

**Alliance, Inc. (249)**

**d/b/a Assured Home Health &  
Hospice(165)**

**Effective Date: 12/31/2008**

**Tax ID# 91-1738970**

**NPI # 1154426815**

**Medicare # 50-1512**

**Medicaid # 3990512**

2120 Northpark Street, Suite A  
Centralia, WA 98531-9098

Tel: 360-807-7776

Fax: 360-807-7790

**Locations:**

**Assured Home Health, Hospice &  
Home Care (468)**

Multi-Site

**Effective Date: 12/31/2008**

**Branch ID: Medicare Approv**

2102 Carriage St SW, Suite H  
Olympia, WA 98502-1049

Tel: 360-352-0711

Fax: 360-705-5048

**Assured Home Health, Hospice &  
Home Care (469)**

Multi-Site

**Effective Date: 12/31/2008**

**Branch ID: Medicare Approv**

1102 E. 1st Street  
Port Angeles, WA 98362-4317

Tel: 360-582-3796

Fax: 360-582-0592

**2. Washington HomeCare and  
Hospice of Central  
Basin, LLC (149)**

**d/b/a Assured Hospice(166)**

**Effective Date: 5/1/2009**

**Tax ID# 26-4568497**

**NPI # 1417199696**

**Medicare # 50-1528**

**Medicaid # 1417199696**

1417 South Pioneer Way  
Moses Lake, WA 98837-2458

Tel: 509-766-2580

Fax: 509-765-3323

**Locations:**

**Division -  
Legacy  
Division  
Hospice-Arkansas -  
Hospice**

**1. Arkansas Home Hospice,  
LLC (336)**

**d/b/a Arkansas Home Hospice  
Providers(480)**

**Effective Date: 7/1/2016**

**Tax ID# 47-1783912**

**NPI # 1346643988**

**Medicare # 04-1521**

**Medicaid # 209890747**

3024 Red Wolf Blvd  
Jonesboro, AR 72401-7415

Tel: 870-277-4029

Fax: 870-277-4032

**Locations:**

**2. CMC Home Health and  
Hospice, LLC (4)**

**d/b/a Hospice of North  
Arkansas(94)**

**Effective Date: 6/1/2008**

**Tax ID# 26-2688869**

**NPI # 1497913339**

**Medicare # 04-1552**

**Medicaid # 173773747**

330 Highway 5 North, Suite 20  
Mountain Home, AR 72653-3039

Tel: 870-424-4000

Fax: 870-424-4072

**Locations:**

**3. Eureka Springs Hospital  
Hospice, LLC (11)**

**d/b/a Hospice of North  
Arkansas(90)**

**Effective Date: 4/16/2007**

**Tax ID# 72-1587845**

**NPI # 1417084765**

**Medicare # 04-1538**

**Medicaid # 167373747**

3277 West Sunset Ave, Suite D  
Springdale, AR 72762-4980

Tel: 479-751-3019

Fax: 479-750-2710

**Locations:**

**3/15/2018**

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**4. Hospice of Central**

**Arkansas, LLC (122)**

**d/b/a Hospice of Central  
Arkansas(155)**

**Effective Date: 4/1/2009**

**Tax ID# 26-4310419**

**NPI # 1124268719**

**Medicare # 04-1511**



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Medicaid # 178936747  
835 Central Ave, Suite 301  
Hot Springs, AR 71901-5318  
Tel: 501-623-2076  
Fax: 501-627-0590

**Locations:**

**5.LHCG LXXXIII, LLC (339)  
d/b/a Summit Hospice  
Providers(483)**

Effective Date: 7/1/2016  
Tax ID# 81-2227463  
NPI # 1578917761  
Medicare # 04-1580  
Medicaid # 219750747  
403 S. Poplar Street, Suite F  
Searcy, AR 72143-6000  
Tel: 501-279-7955  
Fax: 501-279-2048

**Locations:**

**6.Mena Medical Center  
Hospice, LLC (12)  
d/b/a Ouachita Regional  
Hospice(98)**

Effective Date: 7/1/2005  
Tax ID# 72-1586356  
NPI # 1265516587  
Medicare # 04-1559  
Medicaid # 159675747  
602 DeQueen Street  
Mena, AR 71953-3218  
Tel: 479-394-1134  
Fax: 479-394-2056

**Locations:**

**7.Patient's Choice Hospice,  
LLC (10)  
d/b/a Patient's Choice  
Hospice(92)**

Effective Date: 6/1/2006  
Tax ID# 06-1778268  
NPI # 1134174139  
Medicare # 04-1507  
Medicaid # 162950747  
4200 N. Washington Street, Suite 2  
Forrest City, AR 72335-7672  
Tel: 870-633-4613  
Fax: 870-633-0352

**Locations:**

**Hospice-Louisiana -  
Hospice**

**1.LHCG CIX, LLC (406)  
d/b/a CHRISTUS Hospice &  
Palliative Care  
Schumpert(568)**

Effective Date: 9/1/2017  
Tax ID# 82-2084222  
NPI # 1013439447  
Medicare # 19-1504  
Medicaid # Pending  
1700 Buckner Street, Suite 200  
Shreveport, LA 71101-4400  
Tel: 318-681-4605  
Fax: 318-681-7828

**Locations:**

**2.LHCG CVII, LLC (408)  
d/b/a CHRISTUS Hospice and  
Palliative Care St.  
Patrick(570)**

Effective Date: 9/1/2017  
Tax ID# 82-2044952  
NPI # 1538680236  
Medicare # 19-1604  
Medicaid # Pending  
4444 Lake Street  
Lake Charles, LA 70605-4312  
Tel: 337-395-5650  
Fax: 337-395-5782

**Locations:**

**3.LHCG CX, LLC (410)  
d/b/a CHRISTUS Hospice &  
Palliative Care St.  
Frances Cabrini(572)**

Effective Date: 9/1/2017  
Tax ID# 82-2098229  
NPI # 1457873762  
Medicare # 19-1519  
Medicaid # Pending  
4801 Jackson Street Extension,  
Suite  
B  
Alexandria, LA 71303-2508  
Tel: 318-448-6764  
Fax: 318-449-2568

**Locations:**

**4.LHCG LXVII, LLC (313)  
d/b/a Lourdes Hospice(442)**

Effective Date: 9/1/2015  
Tax ID# 47-4283509  
NPI # 1659753051  
Medicare # 19-1669  
Medicaid # 2126946  
101 La Rue France, Suite 301  
Lafayette, LA 70508-3138  
Tel: 337-264-1650  
Fax: 337-264-1649

**Locations:**

**5.LHCG XIV, LLC (48)  
d/b/a Acadian Hospice and  
Palliative Care(96)**

Effective Date: 2/1/2007  
Tax ID# 20-8072593  
NPI # 1215091871  
Medicare # 19-1520  
Medicaid # 1580643  
458 Heymann Blvd, Building A  
Lafayette, LA 70503-2627  
Tel: 337-500-1763  
Fax: 337-266-4620

**Locations:**

**6.LHCG XLIII, LLC (287)  
d/b/a Louisiana Hospice &  
Palliative Care of New  
Orleans(388)**

Effective Date: 3/1/2014  
Tax ID# 46-2588378  
**3/15/2018**

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NPI # 1457773848  
Medicare # 19-1631  
Medicaid # 1583901  
2400 Veterans Memorial Blvd, Suite  
510  
Kenner, LA 70062-4729  
Tel: 504-483-9792  
Fax: 504-483-9793

**Locations:**

**7.Louisiana Hospice and  
Palliative Care, LLC (46)  
d/b/a Louisiana Hospice and  
Palliative Care(100)**

Effective Date: 1/1/2003  
Tax ID# 71-0918184  
NPI # 1275563959  
Medicare # 19-1542  
Medicaid # 1580988  
426 Heather Drive  
Opelousas, LA 70570-8620  
Tel: 337-948-8835  
Fax: 337-942-7225

**Locations:**

**8.Oak Shadows of Jennings,  
LLC (47)  
d/b/a Louisiana Hospice and  
Palliative Care(95)**

Effective Date: 3/26/2004  
Tax ID# 48-1300301  
NPI # 1750399382  
Medicare # 19-1586  
Medicaid # 1580961  
1322 Elton Road, Suite G  
Jennings, LA 70546-4100  
Tel: 337-616-3482  
Fax: 337-616-9399

**Locations:**

**9.Patient's Choice Hospice  
and Palliative Care of  
Louisiana, LLC (49)  
d/b/a Louisiana Hospice and  
Palliative Care(99)**

Effective Date: 1/24/2002  
Tax ID# 72-1513421  
NPI # 1821002122  
Medicare # 19-1565  
Medicaid # 1580597  
1101 Hudson Lane, Suite D  
Monroe, LA 71201-6049  
Tel: 318-322-2235  
Fax: 318-410-1513

**Locations:**

**10.Vital Hospice, Inc. (210)  
d/b/a Louisiana Hospice and  
Palliative Care(237)**

Effective Date: 1/1/2011  
Tax ID# 20-5232641  
NPI # 1043310444  
Medicare # 19-1632  
Medicaid # 1459291  
2645 O'Neal Lane, Building B, Suite  
C

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Baton Rouge, LA 70816-3179

Tel: 985-340-3184

Fax: 985-340-3966

**Locations:**

**Hospice-Missouri -  
Hospice**

**1. Access Hospice, LLC (193)  
d/b/a Access Hospice  
Care(190)**

Effective Date: 1/1/2010

Tax ID# 27-1366872

NPI # 1750619060

Medicare # 26-1611

Medicaid # 1750619060

1403 W. State Highway J

Ozark, MO 65721-7473

Tel: 417-332-3510

Fax: 417-332-3512

**Locations:**

**2. LHCG LXIX, LLC (329)  
d/b/a Missouri Delta  
Hospice(468)**

Effective Date: 1/1/2016

Tax ID# 47-5422639

NPI # 1750753943

Medicare # 26-1636

Medicaid # Pending

1226 Linn Street, Suite G

Sikeston, MO 63801-5202

Tel: 573-472-6163

Fax: 573-472-6180

**Locations:**

**Missouri Delta Hospice (1371)  
Multi-Site**

Effective Date: 1/1/2016

Branch ID: N/A

2725 North Westwood Blvd.

Poplar Bluff, MO 63901-2346

Tel: 573-776-1182

Fax: 573-776-1184

**3. LHCG XXV, LLC (261)  
d/b/a Community Loving Care  
Hospice(343)**

Effective Date: 4/1/2011

Tax ID# 27-4604406

NPI # 1417252529

Medicare # 26-1594

Medicaid # 1417252529

251 East Pearce Blvd

Wentzville, MO 63385-1529

Tel: 636-639-6280

Fax: 636-639-6317

**Locations:**

**Community Loving Care Hospice  
(814)**

Multi-Site

Effective Date: 4/1/2011

Branch ID: N/A

914 West Main St

Bowling Green, MO 63334-1249

Tel: 573-324-9828

Fax: 573-324-3026

**Hospice-North  
Carolina -**

**Hospice**

**1. Cape Fear Valley HomeCare  
and Hospice, LLC (116)  
d/b/a Cape Fear Valley  
Hospice and Palliative  
Care(147)**

Effective Date: 10/1/2008

Tax ID# 26-3385545

**3/15/2018**

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NPI # 1033369616

Medicare # 34-1562

Medicaid # 3411562

3400 Walsh Parkway, Suite 100

Fayetteville, NC 28311-1642

Tel: 910-609-6710

Fax: 910-609-5079

**Locations:**

**2. North Carolina In-Home  
Partner-II, LLC (362)  
d/b/a Harris Palliative Care  
and Hospice(517)**

Effective Date: 1/1/2017

Tax ID# 81-4811792

NPI # 1043755903

Medicare # 34-1549

Medicaid # 1043755903

81 Medical Park Loop, Suite 204

Sylva, NC 28779-5280

Tel: 828-631-1702

Fax: 828-586-7866

**Locations:**

**3. North Carolina In-Home  
Partner-IV, LLC (363)  
d/b/a Haywood Hospice &  
Palliative Care(518)**

Effective Date: 1/1/2017

Tax ID# 81-4914018

NPI # 1841736295

Medicare # 34-1550

Medicaid # Pending

127 Sunset Ridge Road

Clyde, NC 28721-8597

Tel: 828-452-5039

Fax: 828-456-8276

**Locations:**

**Haywood Hospice & Palliative  
Care (1477)**

IPU

Effective Date: 1/1/2017

Branch ID: N/A

127 Sunset Ridge Road

Clyde, NC 28721-8597

Tel: 828-452-5039

Fax: 828-456-8276

**4. North Carolina In-Home  
Partner-VII, LLC (387)**

**d/b/a Hospice of Wilson  
Medical Center(543)**

Effective Date: 4/1/2017

Tax ID# 81-5293415

NPI # 1972042786

Medicare # 34-1532

1705 South Tarboro Street SW

Wilson, NC 27893-3428

Tel: 252-399-8924

Fax: 252-399-7369

**Locations:**

**Hospice-Ohio -  
Hospice**

**1. LHCG XCII, LLC (394)  
d/b/a Pleasant Valley  
Hospice(553)**

Effective Date: 4/1/2017

Tax ID# 81-5344998

NPI # 1821537564

Medicare # 36-1637

Medicaid # 0249948

392 Silver Bridge Plaza, Suite B

Gallipolis, OH 45631-1833

Tel: 740-208-5582

Fax: 740-957-9294

**Locations:**

**Hospice-Tennessee  
- Hospice**

**1. LHCG XCV, LLC (400)  
d/b/a Baptist Trinity Home  
Care & Hospice(559)**

Effective Date: 6/1/2017

Tax ID# 81-5297025

NPI # 1659807865

Medicare # 44-1536

Medicaid # Pending

6141 Walnut Grove Road

Memphis, TN 38120-2179

Tel: 901-767-6767

Fax: 901-415-3510

**Locations:**

**Baptist Reynolds Hospice House  
(1568)**

IPU

Effective Date: 6/1/2017

Branch ID:

1520 West Poplar Avenue

Collierville, TN 38017-0601

Tel: 901-861-5700

Fax: 901-861-5673

**2. LHCG XCVI, LLC (402)  
d/b/a Baptist Memorial Home  
Care & Hospice(561)**

Effective Date: 6/1/2017

Tax ID# 81-5306890

NPI # 1659807873

Medicare # 44-1575

Medicaid # Q033648

631 R.B. Wilson Drive

Huntingdon, TN 38344-1727

Tel: 731-986-3220

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Fax: 731-986-2134

**Locations:**

**3.LHCG XCVII, LLC (403)**

**d/b/a Baptist Hospice Union City(562)**

Effective Date: 6/1/2017

Tax ID# 81-5322529

NPI # 1477088177

Medicare # 44-1577

Medicaid # Q034320

1201 Bishop Street

Union City, TN 38261-5403

Tel: 731-884-8617

Fax: 731-884-8626

**Locations:**

**4.Morristown-Hamblen**

**HomeCare and Hospice, LLC (74)**

**d/b/a University of TN Medical Center Hospice**

**Services(97)**

Effective Date: 7/31/2008

Tax ID# 26-2792774

NPI # 1417117300

Medicare # 44-1578

Medicare # 103G702111 (Part B)

Medicaid # 0441578

**3/15/2018**

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3301 West Andrew Johnson Highway,  
Suite 102

Morristown, TN 37814-3605

Tel: 423-586-7858

Fax: 423-586-7861

**Locations:**

**5.Tennessee In-Home Partner-  
II, LLC (367)**

**d/b/a HighPoint Hospice(522)**

Effective Date: 1/1/2017

Tax ID# 81-4736011

NPI # 1073058111

Medicare # 44-1513

Medicaid # Q033682

Sumner Medical Plaza, 300 Steam

Plant Road

Suite 220

Gallatin, TN 37066-3032

Tel: 615-328-6690

Fax: 615-328-3892

**Locations:**

**6.University of TN Medical Center Home Care Services, LLC (75)**

**d/b/a University of TN Medical Center Home Care**

**Services - Hospice(101)**

Effective Date: 7/1/2007

Tax ID# 20-8912707

NPI # 1619197365

Medicare # 44-1547

Medicare # 103G702110 (Part B)

Medicaid # 0441547

4435 Valley View Drive, Suite 104

Knoxville, TN 37917-1300

Tel: 865-544-6222

Fax: 865-544-6223

**Locations:**

**Hospice-Texas -  
Hospice**

**1.LHCG CXIV, LLC (414)**

**d/b/a CHRISTUS Hospice and Palliative Care**

**SPOHN(576)**

Effective Date: 9/1/2017

Tax ID# 82-2174970

NPI # 1275055774

Medicare # 45-1502

Medicaid # Pending

6200 Saratoga Blvd, Suite 104

Corpus Christi, TX 78414-3478

Tel: 361-994-3450

Fax: 361-994-3495

**Locations:**

**2.LHCG CXVII, LLC (417)**

**d/b/a CHRISTUS VNA Hospice and Palliative Care**

**San Antonio(579)**

Effective Date: 9/1/2017

Tax ID# 82-2217874

NPI # 1518482181

Medicare # 45-1514

Medicaid # Pending

4241 Woodcock Drive, Suite A-100

San Antonio, TX 78228-1328

Tel: 210-785-5255

Fax: 210-785-5389

**Locations:**

**CHRISTUS Sister Mary Hospice Center (1603)**

Multi-Site

Effective Date: 9/1/2017

Branch ID:

5131 Medical Drive, Suite 310

San Antonio, TX 78229-5063

Tel: 210-558-6300

Fax: 210-785-5389

**Hospice-West  
Virginia -**

**Hospice**

**1.Grant Memorial HomeCare and Hospice, LLC (83)**

**d/b/a Grant Memorial Hospice(91)**

Effective Date: 7/1/2008

Tax ID# 26-2578433

NPI # 1053579102

Medicare # 51-1519

Medicaid # 3810019184

100 Hospital Dr, Suite 2

Petersburg, WV 26847-9409

Tel: 304-257-2005

Fax: 304-257-2093

**Locations:**

**2.Housecalls Home Health and Hospice, LLC (90)**

**d/b/a Housecalls Hospice(93)**

Effective Date: 1/1/2007

Tax ID# 37-1533130

NPI # 1376603761

Medicare # 51-1509A

Medicaid # 3810019185

417 Grand Park Drive, Suite 204

Parkersburg, WV 26105-4049

Tel: 304-424-3901

Fax: 304-424-7004

**Locations:**

**3.LHCG LI, LLC (288)**

**d/b/a West Virginia**

**Hospice(392)**

Effective Date: 4/1/2014

Tax ID# 46-4704340

NPI # 1205250032

Medicare # 51-1516

Medicaid # 3910006464

6 Hartman Plaza

Buckhannon, WV 26201-2230

Tel: 304-473-6800

Fax: 304-473-6815

**Locations:**

**4.LHCG XC, LLC (392)**

**d/b/a Pleasant Valley**

**Hospice(551)**

Effective Date: 4/1/2017

Tax ID# 81-5306967

NPI # 1881133502

Medicare # 51-1522

1011 Viand Street

Point Pleasant, WV 25550-0006

Tel: 304-675-7400

Fax: 304-857-6525

**Locations:**

**3/15/2018**

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**Division -**

**Palliative Care**

**Palliative-Louisiana**

-

**Hospice**

**1.LHCG CXXVI, LLC (427)**

**d/b/a Palliative Care of New Orleans(589)**

Effective Date: 6/1/2017

Tax ID# 32-0533814

NPI # 1568992451

Medicare # 580811 (Part B)

2400 Veterans Memorial Blvd, Suite 510

Kenner, LA 70062-2475

Tel: 504-483-9792

Fax: 504-483-9793

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**Locations:**

**Palliative-  
Tennessee -**

**Hospice**

**1.LHCG CXXXII, LLC (443)  
d/b/a University of TN Medical  
Center Palliative Care**

**Services(615)**

**Effective Date: 12/1/2017**

**Tax ID# 37-1866838**

**Medicare # Pending (Part B)**

**4435 Valley View Drive, Suite 103  
Knoxville, TN 37917-1300**

**Tel: 865-338-5901**

**Fax: 865-978-6875**

**Locations:**

**2.LHCG CXXXIII, LLC (444)  
d/b/a University of TN Medical  
Center Palliative Care**

**Services(616)**

**Effective Date: 12/1/2017**

**Tax ID# 32-0540219**

**Medicare # Pending (Part B)**

**3301 West Andrew Johnson**

**Highway,**

**Suite 102**

**Morristown, TN 37814-3605**

**Tel: 423-438-0401**

**Fax: 423-485-6460**

**Locations:**

**Palliative-Virginia -  
Hospice**

**1.LHCG CXXVII, LLC (441)**

**d/b/a Wythe Palliative  
Care(611)**

**Effective Date: 7/8/2017**

**Tax ID# 30-0993916**

**NPI # 1639693567**

**Medicare # H166 (Part B)**

**1155 N. 4th Street**

**Wytheville, VA 24382-1096**

**Tel: 276-228-0840**

**Fax: 276-226-9167**

**Locations:**

**Division -  
Community  
Based  
Services**

**CBS-Arkansas -**

**Private Duty**

**1.Arkansas Extended Care,  
LLC (338)**

**d/b/a Arkansas Community-  
Based Services(482)**

**Effective Date: 7/1/2016**

**Tax ID# 47-1770024**

**NPI # 1750782744**

**Medicaid # 216672757 (Respite  
Care)**

**Medicaid # 216679738 (Private Duty  
Nursing)**

**Medicaid # 216671797 (Attendant  
Care)**

**Medicaid # 217233732 (Personal  
Care)**

**Medicaid # 220229765 (Targeted  
Case Management)**

**316 S. Rhodes**

**West Memphis, AR 72301-4215**

**Tel: 870-732-3353**

**Fax: 870-732-9382**

**Locations:**

**2.LHCG CII, LLC (686)  
d/b/a Elite Community-Based  
Services(938)**

**Effective Date: 1/8/2018**

**Tax ID# 82-1487800**

**NPI # 1518472885**

**Medicaid # 223860797 (Attendant  
Care)**

**Medicaid # 223862757 (Respite)**

**Medicaid # 223905765 (Targeted  
Case)**

**Medicaid # 224674732 (Personal  
Care)**

**1048 South 48th Street, Suite A**

**Springdale, AR 72762-6069**

**Tel: 479-756-5002**

**Fax: 479-756-5504**

**Locations:**

**3.LHCG CIV, LLC (689)  
d/b/a Elite Community-Based  
Services(950)**

**Effective Date: 1/9/2018**

**Tax ID# 82-1639945**

**NPI # 1265947535**

**Medicaid # 224057797 (Attendant  
Care)**

**Medicaid # 223863757 (Respite)**

**Medicaid # 223907765 (Targeted  
Case)**

**Medicaid # 224675732 (Personal  
Care)**

**4019 Massard Road**

**Fort Smith, AR 72903-6221**

**Tel: 479-494-7273**

**Fax: 479-494-7387**

**Locations:**

**4.LHCG CV, LLC (695)  
d/b/a North Arkansas  
Community-Based  
Services(966)**

**Effective Date: 2/26/2018**

**Tax ID# 82-1661632**

**NPI # 1255846523**

**Medicaid # 224691797 (Attendant  
Care)**

**Medicaid # 224679732 (Personal  
Care)**

**Medicaid # 224695757 (Respite)**

**111 N. Main Street, Suite 1**

**Salem, AR 72576-9473**

**Tel: 870-895-2273**

**Fax: 870-895-5515**

**Locations:**

**3/15/2018**

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**5.LHCG CXXV, LLC (687)  
d/b/a Elite Community-Based  
Services(941)**

**Effective Date: 1/9/2018**

**Tax ID# 82-2441720**

**NPI # 1528573896**

**Medicaid # 224013757 (Respite)**

**Medicaid # 224012765 (Targeted  
Case)**

**Medicaid # 224672732 (Personal  
Care)**

**132 Medical Circle, Suite 400**

**Nashville, AR 71852-8610**

**Tel: 870-845-8206**

**Fax: 870-451-9741**

**Locations:**

**CBS-Kentucky -**

**Private Duty**

**1.Lifeline Private Duty  
Services of Kentucky, LLC  
(65)**

**d/b/a Lifeline Community-  
Based Services(60)**

**Effective Date: 8/1/2006**

**Tax ID# 51-0588602**

**NPI # 1821529694**

**Medicare # N/A**

**Medicaid # N/A**

**30 MedPark Square Drive, Suite 2**

**Somerset, KY 42503-1709**

**Tel: 606-676-0045**

**Fax: 606-451-8371**

**Locations:**

**Lifeline Community-Based  
Services (1543)**

**Branch**

**Effective Date: 3/13/2017**

**Branch ID:**

**1056 Wellington Way, Suite 130**

**Lexington, KY 40513-2002**

**Tel: 859-255-4411**

**Fax: 859-253-6614**

**CBS-Maryland -**

**Private Duty**

**1.FirstCall Health Services,  
Inc. (138)**

**d/b/a FirstCall(158)**

**Effective Date: 12/1/2008**

**Tax ID# 52-1456623**

**NPI # N/A**

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Medicare # N/A  
Medicaid # N/A  
5301 Buckeystown Pike, Suite 490  
Frederick, MD 21704-8370  
Tel: 240-215-4668  
Fax: 301-698-8191  
**Locations:**

**CBS-Missouri -**

**Private Duty**

**1.LHCG LXV, LLC (311)**

**d/b/a Missouri Delta  
Community-Based  
Services(430)**

**Effective Date: 3/1/2015**

Tax ID# 47-2557600  
NPI # 1093103434 (Homemaker)  
NPI # 1114316080 (PC)  
Medicaid # 0004837  
1226 Linn Street, Suite D  
Sikeston, MO 63801-5202  
Tel: 573-471-1438  
Fax: 573-471-4804

**Locations:**

**2.Southwest Missouri**

**HomeCare, LLC (118)  
d/b/a Access Community-  
Based Services(4)**

**Effective Date: 6/1/2008**

Tax ID# 26-1496237  
NPI # 1124203278 (Chore and  
Respite )  
NPI # 1497930549 (Personal Care)  
Medicaid # 0003196 (HCB Care)  
Medicaid # 26-8889508 (Personal  
Care)  
Medicaid # 28-8889504 (Chore and  
Respite)  
1240 E. Independence St., Suite 100  
Springfield, MO 65804-4201  
Tel: 417-882-7704  
Fax: 417-864-5930

**Locations:**

**CBS-North Carolina**

**- Private**

**Duty**

**1.LHCG L, LLC (301)**

**d/b/a Access Community-  
Based Services(412)**

**Effective Date: 5/1/2014**

Tax ID# 35-2503790  
NPI # 1952720591  
Medicaid # 1952720591  
147 NC Highway 24, Suite 202  
Morehead City, NC 28557-8982  
Tel: 252-247-6911  
Fax: 252-247-1034

**Locations:**

**2.LHCG L, LLC (301)**

**d/b/a Access Community-  
Based Services(413)**

**Effective Date: 5/1/2014**

Tax ID# 35-2503790  
NPI # 1437578150  
Medicaid # 1437578150  
1899 North Marine Blvd, Suite 300  
Jacksonville, NC 28546-6555  
Tel: 910-346-2311  
Fax: 910-346-1976

**Locations:**

**3.LHCG L, LLC (301)**

**d/b/a Access Community-  
Based Services(414)**

**Effective Date: 5/1/2014**

Tax ID# 35-2503790  
NPI # 1235558966  
Medicaid # 1235558966  
1027 US 70 Highway West, Suite  
219  
Garner, NC 27529-2501  
Tel: 919-977-1186  
Fax: 919-977-5110

**Locations:**

**CBS-Tennessee -**

**Private**

**Duty**

**1.Elk Valley Health Services,  
LLC (297)**

**d/b/a N/A(403)**

**Effective Date: 4/1/2014**

Tax ID# 62-1204869

**3/15/2018**

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NPI # 1972698025  
Medicaid # 0445965  
5249 Harding Place  
Nashville, TN 37217-2901  
Tel: 615-360-1116  
Fax: 615-360-7895

**Locations:**

**CBS-Texas - Private**

**Duty**

**1.LHCG CXXIV, LLC (428)**

**d/b/a CHRISTUS VNA  
Community Care San  
Antonio(590)**

**Effective Date: 9/1/2017**

Tax ID# 82-2261569  
NPI # 1144744244  
Medicaid # Pending  
4241 Woodcock Drive, Suite A-100  
San Antonio, TX 78228-5063  
Tel: 210-785-5800  
Fax: 210-785-5803

**Locations:**

**Division -**

**Clinics**

**Clinics - Fitness**

**Center**

**1.Louisiana Physical Therapy,  
LLC (229)**

**d/b/a Louisiana Family Fitness  
Center(141)**

**Effective Date: 6/1/2003**

Tax ID# 71-0917927  
336 Heather Drive  
Opelousas, LA 70570-8631  
Tel: 337-942-1326  
Fax: 337-942-1355

**Locations:**

**Division -**

**LTACH**

**LTACH-Louisiana -**

**Hospitals**

**Inpatient/Outpatie**

**nt**

**1.LHCG X, LLC (40)**

**d/b/a Louisiana Extended Care  
Hospital of West  
Monroe(125)**

**Effective Date: 5/31/2006**

Tax ID# 20-3122072  
NPI # 1497793418  
Medicare # 19-2055  
Medicare # 5DN91 (Part B)  
Medicaid # 1702099  
503 McMillian Road, 3rd Floor  
West Monroe, LA 71291-5327  
Tel: 318-329-4300  
Fax: 318-329-4339

**Locations:**

**2.LHCG XII, LLC (171)**

**d/b/a Louisiana Extended Care  
Hospital of**

**Lafayette(123)**

**Effective Date: 9/29/2006**

Tax ID# 20-3373056  
NPI # 1548360696  
Medicare # 19-2032  
Medicare # 372288 (Part B)  
Medicaid # 1700665  
1214 Coolidge Blvd, 9th Floor  
Lafayette, LA 70503-2621  
Tel: 337-289-8180  
Fax: 337-289-8181

**Locations:**

**Iberia Extended Care Hospital  
(225)**

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Campus

**Effective Date: 9/29/2006**

**Branch ID: Medicare Approv**

2315 East Main Street,

3rd Floor

New Iberia, LA 70560-4031

Tel: 337-369-1100

Fax: 337-369-1122

**Eunice Extended Care Hospital (226)**

Campus

**Effective Date: 9/29/2006**

**Branch ID: Medicare Approv**

3879 Highway 190

Eunice, LA 70535-7900

Tel: 337-546-0024

Fax: 337-546-0703

**3.LLC-I, LLC (39)**

**d/b/a Louisiana Extended Care Hospital of**

**Natchitoches(124)**

**Effective Date: 9/29/2006**

Tax ID# 20-3171304

NPI # 1083715841

Medicare # 19-2035

Medicaid # 1700398

501 Keyser Avenue

4th Floor

Natchitoches, LA 71457-6018

Tel: 318-354-2044

Fax: 318-354-2041

**Locations:**

**4.LLC-II, LLC (41)**

**d/b/a St. Landry Extended Care Hospital(139)**

**Effective Date: 9/29/2006**

Tax ID# 20-3171358

NPI # 1033217484

Medicare # 19-2034

Medicaid # 1700461

539 E. Prudhomme Street, 6th Floor

Opelousas, LA 70570-6499

Tel: 337-948-5184

Fax: 337-948-3294

**Locations:**

**5.Louisiana Extended Care Hospital of Kenner, LLC (222)**

**d/b/a Ochsner Extended Care Hospital of**

**Kenner(221)**

**Effective Date: 5/1/2009**

Tax ID# 26-4691864

NPI # 1871736082

Medicare # 19-2015

Medicaid # 1702293

180 W. Esplanade Ave., 5th Floor

Kenner, LA 70065-2467

Tel: 504-464-8590

Fax: 504-464-8550

**3/15/2018**

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**Locations:**

**6.Specialty Extended Care Hospital of Monroe, LLC (201)**

**d/b/a Specialty Hospital(196)**

**Effective Date: 6/26/2010**

Tax ID# 27-0237126

NPI # 1528385382

Medicare # 19-2016

Medicare # 5DP66 (Part B)

Medicaid # 1765708

309 Jackson St., 7th Floor

Monroe, LA 71201-7407

Tel: 318-966-4126

Fax: 318-966-7031

**Locations:**

**Division -**

**LTACH -**

**Christus**

**LTACH - Christus -**

**Louisiana**

**- Hospitals -**

**Inpatient/Outpatient**

**1.LHCG CXX, LLC (420)**

**d/b/a CHRISTUS Dubuis**

**Hospital of Alexandria(582)**

**Effective Date: 9/1/2017**

Tax ID# 82-2117095

NPI # 1962924001

Medicare # 19-2012

Medicaid # Pending

3330 Masonic Drive, 4th Floor

Alexandria, LA 71301-3841

Tel: 318-448-4938

Fax: 318-483-4033

**Locations:**

**LTACH- Christus -**

**Arkansas -**

**Hospitals -**

**Inpatient/Outpatient**

**1.LHCG CXIX, LLC (418)**

**d/b/a CHRISTUS Dubuis**

**Hospital of Hot**

**Springs(580)**

**Effective Date: 9/1/2017**

Tax ID# 82-1978232

NPI # 1851812176

Medicare # 04-2004

Medicaid # Pending

300 Werner Street, 3rd Floor

Hot Springs, AR 71913-6406

Tel: 501-609-4300

Fax: 501-609-4335

**Locations:**

**2.LHCG CXVIII, LLC (419)**

**d/b/a CHRISTUS Dubuis**

**Hospital of Fort Smith(581)**

**Effective Date: 9/1/2017**

Tax ID# 82-1999959

NPI # 1790206910

Medicare # 04-2008

Medicaid # Pending

7301 Rogers Avenue, 4th Floor

Fort Smith, AR 72903-4100

Tel: 479-314-4900

Fax: 479-314-4991

**Locations:**

**LTACH- Christus -**

**Texas -**

**Hospitals -**

**Inpatient/Outpatient**

**1.LHCG CXXI, LLC (421)**

**d/b/a CHRISTUS Dubuis**

**Hospital of Beaumont(583)**

**Effective Date: 9/1/2017**

Tax ID# 82-2231824

NPI # 1922522606

Medicare # 45-2042

Medicaid # Pending

2830 Calder Street, 4th Floor

Beaumont, TX 77702-1809

Tel: 409-899-8156

Fax: 409-899-8158

**Locations:**

**2.LHCG CXXII, LLC (422)**

**d/b/a Dubuis Hospital of**

**Paris(584)**

**Effective Date: 9/1/2017**

Tax ID# 82-2244399

NPI # 1285158964

Medicare # 45-2082

Medicaid # Pending

820 Clarksville Street, 6th Floor

Paris, TX 75460-6027

Tel: 903-737-3600

Fax: 903-737-3633

**Locations:**

**Division -**

**LTACH -**

**Management**

**LTACH -**

**Management -**

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**Georgia -  
Management  
Location**

1.Southern Crescent Hospital  
for Specialty Care, Inc.  
(425)

d/b/a Southern Crescent  
Hospital for Specialty  
Care(587)

Effective Date: 9/1/2017

Tax ID# 32-0090450

NPI # 1235227737

Medicare # 11-2015

Medicaid # 003109426A

11 Upper Riverdale Road SW, 6th  
Floor

Riverdale, GA 30274-2615

Tel: 770-897-7600

Fax: 770-897-7606

Locations:

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**Division - LHC  
Group  
Pharmacy  
LHC Group  
Pharmacy -  
Pharmacy**

1.LHC Group Pharmaceutical  
Services III, LLC (382)

d/b/a St. Landry  
Pharmacy(538)

Effective Date: 3/1/2017

Tax ID# 81-5023883

NPI # 1588101349

Medicaid # 2205455

6637 Highway 10

Washington, LA 70589-4313

Tel: 337-623-9992

Fax: 337-623-9964

Locations:

2.LHC Group Pharmaceutical  
Services, LLC (188)

d/b/a N/A(132)

Effective Date: 11/16/2004

Tax ID# 83-0375302

NPI # 1790732220

Medicaid # N/A

420 W. Pinhook Rd, Suite A

Lafayette, LA 70503-2131

Tel: 337-233-4656

Fax: 337-233-6449

Locations:

**Division -  
Rural Health  
Clinics**

**RHC - Louisiana -  
RHC**

1.St. Landry Family  
Healthcare, LLC (316)

d/b/a N/A(446)

Effective Date: 11/16/2015

Tax ID# 47-4955642

NPI # 1376911735

Medicare # 19-3923 (Part A)

Medicare # 477856 (Part B)

Medicaid # 2407121 (NP Provider  
Number)

Medicaid # 2450981 (Rural Health  
Clinic)

6633 Highway 10

Washington, LA 70589-4313

Tel: 337-826-7702

Fax: 337-623-5788

Locations:

**Division -  
Physical  
Therapy  
Services**

**Physical Therapy-  
Arkansas -**

**Physical Therapy  
Services**

1.Elite Physical Therapy  
Services, LLC (438)

d/b/a Elite Physical Therapy  
Services(608)

Effective Date: 11/26/2017

Tax ID# 82-2363578

NPI # 1386168052

Medicare # 630543

540 Ponce De Leon, Suite 226

Hot Springs Village, AR 71909-7349

Tel: 501-915-0518

Fax: 501-915-0521

Locations:

2.LHCG LXXXVI, LLC (349)

d/b/a Connex(502)

Effective Date: 11/1/2016

Tax ID# 36-4847423

NPI # 1750830048

Medicare # 544322 (Part B)

Medicaid # Pending

3024 Red Wolf Blvd

Jonesboro, AR 72401-7415

Tel: 870-203-9988

Fax: 870-203-9986

Locations:

**Physical Therapy-  
Louisiana -  
Physical Therapy  
Services**

1.Acadian Physical Therapy  
Services, LLC (331)

d/b/a N/A(471)

Effective Date: 7/15/2016

Tax ID# 81-0789869

NPI # 1043676554

Medicare # 511778 (Part B)

400 Polly Lane, Suite 160

Lafayette, LA 70508-4965

Tel: 337-500-1300

Fax: 337-406-8042

Locations:

2.Feliciana Physical Therapy  
Services, LLC (442)

d/b/a Felician Physical  
Therapy Services(614)

Effective Date: 10/1/2017

Tax ID# 82-2392933

NPI # 1386154284

Medicare # 622573 (Part B)

9511 Creekview Drive, Suite A1

Baton Rouge, LA 70836-6456

Tel: 225-412-9019

Fax: 225-754-9117

Programmatic Attachment D: Surgery Partners Healthcare  
Facilities Project #181084, Willcare

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<b>SURGERY PARTNERS FACILITIES AS OF 03/31/2018</b>				
<b>ST</b>	<b>CITY</b>	<b>FACILITY</b>	<b>ADDRESS</b>	<b>ZIP</b>
AL	Birmingham	Birmingham Surgery Center	2621 19th Street South	35209
AZ	Phoenix	Canyon Ambulatory Surgery Center	6036 N 19th Avenue, Suite 100	85015
AR	Jonesboro	Novamed Surgery Center of Jonesboro	601 East Matthews Avenue	72401
CA	Beverly Hills	SSC of Beverly Hills - 9001 Wilshire (Eye)	9001 Wilshire Boulevard, Suite 100	90211
CA	Beverly Hills	SSC of Beverly Hills - Wilshire (Multi-Specialty)	8670 Wilshire Boulevard, Suite 300	90211
CA	Brentwood	Brentwood Surgery Center	2400 Balfour Road, Suite 320	64513
CA	Chico	Skyway Surgery Center	121 Raley Boulevard	95928
CA	Encino	SSC of Encino	16501 Ventura Boulevard, Suite 103	91436
CA	Irvine	SSC of Irvine	15825 Laguna Canyon Road, Suite 200	92618
CA	Irvine	Spinalcare Surgicenter	35 Creek Road	92604
CA	Mission Viejo	Mission Hills Surgicenter	25982 Pala, Suite 280	92691
CA	Walnut Creek	Sequoia Surgical Pavilion	2405 Shadelands Drive, Suite 200	94598
CA	Walnut Creek	Aspen Surgery Center	133 LaCasa Via, Suite 150	94598
CA	Westlake Village	SSC of Westlake Village	696 Hampshire Road, Suite 100	91361
CA	Whittier	Center for Outpatient Surgery	15141 East Whittier Boulevard, Suite 130	90603
CO	Colorado Springs	Premier Surgery Center	3920 North Union Boulevard, Suite 240	80907
CO	Englewood	Cherry Hills Surgery Center	3535 South Lafayette Street, Suite 200	80113
CO	Lafayette	Minimally Invasive Spine Institute	300 Exempla Circle, Suite 130	80026
CT	Fairfield	Fairfield Surgery Center	305 Black Rock Turnpike	06825
DE	Newark	Delaware Outpatient Center for Surgery (DOCS)	774 Christiana Road, Suite 2	19713
FL	Cape Coral	Cape Coral Surgery Center	2721 Del Prado Boulevard South	33904
FL	Fort Myers	Lee Island Coast Surgery Center	4035 Evans Avenue	33901
FL	Gainesville	Laser & Outpatient Surgery Center	6925 Northwest 11th Place	32605
FL	Jacksonville	Riverside Surgical Center	7207 Golden Wings Road, Suite 200	32244
FL	Jacksonville Beach	Jacksonville Beach Surgery Center	3316 3rd Street South, Suite 200	32250
FL	Lake Mary	Lake Mary Surgery Center	460 Saint Charles Court	32746



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FL	Lake Worth	Lake Worth Surgical Center	7408 Lake Worth Road, Suite 900	33467
FL	Largo	Tampa Bay Regional Surgery Center	7300 Bryan Dairy Road, Suite 495	33777
FL	Largo	West Bay Surgery Center	1401 West Bay Drive North	33770
FL	Maitland	Park Place Surgery Center	2450 Maitland Center Parkway, Suite 100	32751
FL	Merritt Island	Space Coast Surgery Center	595 North Courtenay Parkway, Suite 103	32953
FL	Miami	Miami Surgical Center	7600 Southwest 87th Avenue	33173
FL	Miami	The Gables Surgical Center	401 Southwest 42nd Avenue, Suite 201	33134
FL	New Port Richey	Suncoast Surgery Center	4519 US Highway 19	34652
FL	Ocala	Surgery Center of Ocala	3241 Southwest 34th Street	34474
FL	Orange City	Orange City Surgery Center	975 Town Center Drive	32763
FL	Orlando	Downtown Surgery Center	801 North Orange Avenue, Suite 630	32081
FL	Orlando	Millenia Surgery Center	4901 South Vineland Road, Suite 150	32811
FL	Sarasota	Sarasota Ambulatory Surgical Center	2821 Proctor Road	34231
FL	Tampa	Armenia Surgery Center	4703 North Armenia Avenue	33603
FL	Tampa	The Surgery Center at TGH Brandon Healthplex	10740 Palm River Road, Suite 210	33619
FL	Tampa	Westchase Surgery Center	10901 Sheldon Road	33626
FL	Wesley Chapel	New Tampa Surgery Center	2407 Cypress Ridge Boulevard	33544
GA	Atlanta	Atlanta Eye Surgery Center	3200 Downwood Circle, Suite 200	30327
GA	Brunswick	Coastal Pain Center	3221 Glynn Avenue	31520
GA	Brunswick	Premier Surgery Center	3215 Shrine Road, Suite 8	31520
GA	Columbus	The Surgery Center	2548 Weems Road	31909
GA	Savannah	Optim Surgery Center	210 East DeRenee Avenue	31405
GA	Vidalia	Coastal Pain Center	303 Harris Industrial Boulevard	30474
HI	Honolulu	Honolulu Spine Center	500 Ala Moana Boulevard, Bldg. 1, Suite 301	96813
IL	Chicago	Novamed Eye Surgery Center - Northshore	3034 West Peterson Avenue	60659
IL	Maryville	Eyes of Illinois Surgery Center	12 Professional Park Drive	62062
IL	Oak Lawn	Center for Reconstructive Surgery	6311 West 95th Street	60453
IL	St. Charles	Valley Ambulatory Surgery Center	2210 Dean Street	60175

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IN	New Albany	Surgical Center of New Albany	2201 Green Valley Road	47150
IN	New Albany	Novamed Eye Surgery Center of New Albany	520 West 1st Street	47150
KS	Overland Park	Overland Park Eye Surgery Center	5520 College Boulevard, Suite 200	66211
KS	Wichita	Cypress Surgery Center	9300 East 29th Street North, Suite 100	67226
KY	Louisville	Dupont Surgery Center	4004 Dupont Circle	40207
LA	Baton Rouge	Novamed Surgery Center of Baton Rouge Interventional Pain Management Center	8748 Bluebonnet Boulevard	70810
LA	Hammond	Advanced Pain Institute Treatment Center	42131 Veterans Avenue, Suite 200	70403
LA	Houma	Gulf Coast Surgical Center	402 Dunn Street	70360
MI	West Bloomfield	Lakes Surgery Center	2300 Haggerty Road, Suite 1000	48323
MI	Portage	Surgery Center of Kalamazoo	3200 West Centre Avenue, Suite 101	49024
MS	Oxford	Oxford Surgery Center (Managed Only)	499 Azalea Drive	38655
MS	Southaven	Desoto Surgery Center (Managed Only)	391 Southcrest Circle, Suite 100	38671
MO	Ballwin	St. Louis Multispecialty Surgery Center	884 Woods Mill Road, Suite 100	63011
MO	Chesterfield	Timberlake Surgery Center Orthopedic Ambulatory Surgery Center of Chesterfield	14825 North Outer Forty Road, Suite 100	63017
MO	Jefferson City	CMMP Surgery Center	1705 Christy Drive, Suite 100	65101
MO	Kansas City	Blue Ridge Surgical Center	4240 Blue Ridge Boulevard, Suite 950	64133
MO	St. Louis	Woodcrest Surgery Center	12101 Woodcrest Executive Drive, Suite 101	63141
MO	St. Peters	St. Peters Ambulatory Surgery Center	114 Piper Hill Drive, Suite 101	63376
MO	Town & Country	St. Louis Spine & Orthopedic Surgery Center	1130 Town and Country Commons	63017
MO	Warrensburg	Eye Surgery Center of Warrensburg	506 Burkarth Road, Suite B	64093
MT	Great Falls	Great Falls Clinic Surgery Center	1509 29th Street South	59405
NE	Fremont	Surgery Center of Fremont	2727 North Clarkson Street	68025
NE	Omaha	Advanced Surgery Center	111 South 10th Street	68102
NH	Nashua	Nashua Eye Surgery Center	5 Coliseum Avenue	03063
NC	Asheville	Orthopaedic Surgery Center of Asheville	34 Granby Street	28801
NC	Wilmington	Wilmington Surgcare	1801 South 17th Street	28401
ND	Grand Forks	North Dakota Surgery Center	3035 Demers Avenue	58201

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OH	Sandusky	Novamed Surgery Center of Sandusky	2616 Hayes Avenue	44870
OH	Steubenville	Valley Surgery Center	2323 Sunset Boulevard	43952
PA	Bethlehem	Center for Specialized Surgery	2851 Baglyos Circle, Suite 100	18020
PA	Erie	Village SurgiCenter of Erie	5473 Village Common Drive, Suite 100	16506
PA	Havertown	Crozer-Keystone Surgery Center at Haverford (Managed Only)	2010 West Chester Pike, Suite 212	19083
PA	Lebanon	Physicians Surgical Center of Lebanon	1840 Quentin Road	17042
RI	East Greenwich	East Greenwich Endoscopy Center	1407 South County Trail, Suite 411	02818
RI	Portsmouth	East Bay Endoscopy Center	109 Clock Tower Square, Suite 110	02871
RI	Providence	Bayside Endoscopy Center	33 Staniford Street	02905
RI	Providence	Ocean State Endoscopy Center	148 West River Street, Suite 3	02904
TN	Bristol	Renaissance Surgery Center	320 Bristol West Boulevard, Suite 1A	37620
TN	Chattanooga	Novamed Surgery Center of Chattanooga	7305 Jamigan Road, Suite 200	37421
TN	Cleveland	Novamed Surgery Center of Cleveland	137 25th Street	37311
TN	Franklin	Cool Springs Surgery Center	2009 Mallory Lane, Suite 100	37067
TN	Germantown	Germantown Surgery Center (Managed Only)	2100 Exeter Road, Suite 101	38138
TN	Jackson	Physicians Surgery Center	207 Stonebridge Boulevard	38305
TN	Memphis	East Memphis Surgery Center (Managed Only)	80 Humphreys Center Drive, Suite 101	38120
TN	Memphis	UroCenter (Managed Only)	80 Humphreys Center, Suite 310	38120
TX	Houston	Medical Center Endoscopy	6560 Fannin Street, Suite 600	77030
TX	Lubbock	NorthStar Surgical Center	4640 North Loop 289	79416
TX	San Antonio	American Surgery Center of South Texas	7810 Louis Pastuer Drive, Suite 100	78229
TX	Texarkana	Texarkana Surgery Center	5404 Summerhill Road	75503
TX	Tyler	Cataract Center of East Texas	802 Turtle Creek Drive	75701
WA	Bellingham	Bellingham Ambulatory Surgery Center	2075 Barkley Boulevard, Suite 101	98226
WA	Puyallup	Microsurgical Spine Center	1519 3rd Street Southeast, Suite 102	98372
WI	Madison	Novamed Eye Surgery Center of Madison	1200 John Q. Hammons Drive, Suite 102	53717