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<td>ADDINGTON PLACE OF SHOAL CREEK</td>
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ASHBROOK - ASSISTED LIVING BY AMERICARE
500 ASHBROOK DR
FARMINGTON  MO 63640-9235
Mailing Address 500 ASHBROOK DR
FARMINGTON  MO 63640-9235
Telephone  (573) 756-5544  Alzheimer's Unit  No
Level of Care:  ALF**  Bed Capacity  72
County  SAINT FRANCOIS  DMH Licensed  No
Region  2  Facility Number  18138

ASHBURY HEIGHTS OF CHILLICOTHE
603 ST LOUIS ST
CHILLICOTHE  MO 64601-2438
Mailing Address  603 ST LOUIS ST
CHILLICOTHE  MO 64601-2438
Telephone  (660) 707-1270  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  LIVINGSTON  DMH Licensed  Yes
Region  4  Facility Number  23909

ASHBURY HEIGHTS OF FAYETTE
200 GROCE ST
FAYETTE  MO 65248-9813
Mailing Address  200 GROCE ST
FAYETTE  MO 65248-9813
Telephone  (660) 248-3603  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  HOWARD  DMH Licensed  No
Region  5  Facility Number  23894

ASHBURY HEIGHTS OF FULTON
704 WEST CHESTNUT
FULTON  MO 65251-1254
Mailing Address  704 WEST CHESTNUT
FULTON  MO 65251-1254
Telephone  (573) 642-2015  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  CALLAWAY  DMH Licensed  No
Region  6  Facility Number  23923

ASHBURY HEIGHTS OF JEFFERSON CITY
834 WEATHERED ROCK COURT
JEFFERSON CITY  MO 65101-1824
Mailing Address  834 WEATHERED ROCK CT
JEFFERSON CITY  MO 65101-1824
Telephone  (573) 634-7402  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  COLE  DMH Licensed  Yes
Region  6  Facility Number  23936

ASHBURY HEIGHTS OF LAURIE
299 HIGHWAY RA
LAURIE  MO 65038-6024
Mailing Address  299 HWY RA
LAURIE  MO 65038-6024
Telephone  (573) 374-0076  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  MORGAN  DMH Licensed  No
Region  6  Facility Number  23915

ASHBURY HEIGHTS OF MONTGOMERY CITY
625 WEST 2ND ST
MONTGOMERY CITY  MO 63361-1762
Mailing Address  625 WEST 2ND ST
MONTGOMERY CITY  MO 63361-1762
Telephone  (573) 564-3386  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  MONTGOMERY  DMH Licensed  No
Region  6  Facility Number  20160

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

ASHLAND HEALTHCARE
300 SOUTH HENRY CLAY BLVD
ASHLAND  MO 65010-9438
Mailing Address  300 S HENRY CLAY BLVD
ASHLAND  MO 65010-9438
Telephone  (573) 657-2877  Alzheimer's Unit  No
Level of Care:  SNF  Bed Capacity  60
County  BOONE  DMH Licensed  No
Region  6  Medicare/Medicaid  Facility Number  17908

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Wednesday, April 03, 2019
<table>
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<th>Facility Name</th>
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<th>County</th>
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<th>Alzheimer's Unit</th>
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<tr>
<td>ASHLAND VILLA - ASSISTED LIVING BY AMERICARE</td>
<td>301 SOUTH HENRY CLAY BLVD</td>
<td>ASHLAND</td>
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<td>ALF**</td>
<td>72</td>
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<td>ASHLEY MANOR CARE CENTER</td>
<td>1630 RADIO HILL RD</td>
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<td>1200 WEST COLLEGE ST</td>
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<td>ASSISTED LIVING AT CHARLESS VILLAGE</td>
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<td>AUBURN CREEK - ASSISTED LIVING BY AMERICARE</td>
<td>2910 BEAVER CREEK DR</td>
<td>CAPE GIRARDEAU</td>
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<td>AURORA NURSING CENTER</td>
<td>1700 SOUTH HUDSON AVE</td>
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<td>Yes</td>
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<td>Yes</td>
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</table>

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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>AUTUMN WOODS, INC</td>
<td>5500 NW HOUSTON LAKE DR</td>
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<td>4359 TAFT AVE</td>
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</table>

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Wednesday, April 03, 2019
### BAILEY STREET RESIDENTIAL CARE I

- **Address**: 102 BAILEY ST
- **City**: FARMINGTON
- **State**: MO
- **Zip Code**: 63640-1819
- **Telephone**: (573) 756-6374
- **Level of Care**: RCF
- **County**: SAINT FRANCOIS
- **Region**: 2
- **Bed Capacity**: 12
- **DMH Licensed**: Yes
- **Alzheimer's Unit**: No
- **Mailing Address**: 102 BAILEY ST

### BAISCH NURSING CENTER

- **Address**: 3260 BAISCH DR
- **City**: DE SOTO
- **State**: MO
- **Zip Code**: 63020-5046
- **Telephone**: (636) 586-2291
- **Level of Care**: RCF
- **County**: JEFFERSON
- **Region**: 2
- **Bed Capacity**: 18
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: 3260 BAISCH DR

### BAISCH NURSING CENTER

- **Address**: 3260 BAISCH DR
- **City**: DE SOTO
- **State**: MO
- **Zip Code**: 63020-5046
- **Telephone**: (636) 586-2291
- **Level of Care**: SNF
- **County**: JEFFERSON
- **Region**: 2
- **Bed Capacity**: 61
- **Alzheimer's Unit**: No
- **DMH Licensed**: Yes
- **Mailing Address**: 3260 BAISCH DR

### BALLWIN RIDGE HEALTH & REHABILITATION

- **Address**: 1441 CHARIC DR
- **City**: WILDWOOD
- **State**: MO
- **Zip Code**: 63021-2001
- **Telephone**: (636) 394-2522
- **Level of Care**: SNF
- **County**: SAINT LOUIS COUNTY
- **Region**: 7
- **Bed Capacity**: 66
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: 1441 CHARIC DR

### BAPTIST HOME, THE

- **Address**: 500 BAPTIST HOME LN
- **City**: CHILLICOTHE
- **State**: MO
- **Zip Code**: 64601-3973
- **Telephone**: (660) 646-6219
- **Level of Care**: ALF
- **County**: LIVINGSTON
- **Region**: 4
- **Bed Capacity**: 20
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: 500 BAPTIST HOME LN

### BAPTIST HOME, THE

- **Address**: 1625 WEST GARTON RD
- **City**: OZARK
- **State**: MO
- **Zip Code**: 65721-6637
- **Telephone**: (417) 581-2101
- **Level of Care**: ALF
- **County**: CHRISTIAN
- **Region**: 1
- **Bed Capacity**: 30
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: PO BOX 1040

### BAPTIST HOME, THE

- **Address**: 1625 WEST GARTON RD
- **City**: OZARK
- **State**: MO
- **Zip Code**: 65721-6637
- **Telephone**: (417) 581-2101
- **Level of Care**: ICF
- **County**: CHRISTIAN
- **Region**: 1
- **Bed Capacity**: 33
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: PO BOX 1040

### BAPTIST HOME, THE

- **Address**: 500 BAPTIST HOME LN
- **City**: CHILLICOTHE
- **State**: MO
- **Zip Code**: 64601-3973
- **Telephone**: (660) 646-6219
- **Level of Care**: ICF
- **County**: LIVINGSTON
- **Region**: 4
- **Bed Capacity**: 34
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: 500 BAPTIST HOME LN

### BAPTIST HOME, THE

- **Address**: 101 RIGGS-SCOTT LN
- **City**: Ironton
- **State**: MO
- **Zip Code**: 63650-4338
- **Telephone**: (573) 546-7429
- **Level of Care**: SNF
- **County**: Ironton
- **Region**: 2
- **Bed Capacity**: 3
- **Alzheimer's Unit**: No
- **DMH Licensed**: No
- **Mailing Address**: PO BOX 87

---

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<tr>
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<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<td>BARATHAVERN ALZHEIMER'S SPECIAL CARE CENTER</td>
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<td>66</td>
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<td>BARNES-JEWISH EXTENDED CARE</td>
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BEAUTIFUL SAVIOR HOME
1003 SOUTH CEDAR ST
BELTON  MO  64012-3703
Mailing Address 1003 S CEDAR ST
BELTON  MO  64012-3703
Telephone  (816) 331-0781  Alzheimer's Unit  No
Level of Care: ALF  Bed Capacity  55
County  CASS  DMH Licensed  No
Region  3  Facility Number  00342

BEAUTIFUL SAVIOR HOME
1003 SOUTH CEDAR ST
BELTON  MO  64012-3703
Mailing Address 1003 S CEDAR ST
BELTON  MO  64012-3703
Telephone  (816) 331-0781  Alzheimer's Unit  No
Level of Care: SNF  Bed Capacity  126
County  CASS  DMH Licensed  No
Region  3  Medicare/Medicaid  Facility Number  00342

BEVAUS MANOR HEALTHCARE & REHAB CENTER
3625 MAGNOLIA AVE
SAINT LOUIS  MO  63110-4048
Mailing Address 3625 MAGNOLIA AVE
SAINT LOUIS  MO  63110-4048
Telephone  (314) 771-2990  Alzheimer's Unit  Yes
Level of Care: SNF  Bed Capacity  184
County  SAINT LOUIS CITY  DMH Licensed  No
Region  7  Medicare/Medicaid  Facility Number  09528

BECKY'S PLACE RESIDENTIAL CARE, LLC
500 CULLER AVE
BUNKER  MO  63629-
Mailing Address PO BOX 95
BUNKER  MO  63629-0095
Telephone  (573) 689-1392  Alzheimer's Unit  No
Level of Care: RCF  Bed Capacity  12
County  REYNOLDS  DMH Licensed  Yes
Region  2  Medicare/Medicaid  Facility Number  16882

BELLEFONTAINE GARDENS NURSING & REHAB
9500 BELLEFONTAINE RD
SAINT LOUIS  MO  63137-1336
Mailing Address 9500 BELLEFONTAINE RD
SAINT LOUIS  MO  63137-1336
Telephone  (314) 388-0796  Alzheimer's Unit  No
Level of Care: SNF  Bed Capacity  96
County  SAINT LOUIS COUNTY  DMH Licensed  No
Region  7  Medicare/Medicaid  Facility Number  02598

BELLEVIEW VALLEY NURSING HOME
23144 HIGHWAY 32
BELLEVIEW  MO  63623-6346
Mailing Address 23144 HIGHWAY 32
BELLEVIEW  MO  63623-6346
Telephone  (573) 697-5311  Alzheimer's Unit  No
Level of Care: SNF  Bed Capacity  122
County  IRON  DMH Licensed  No
Region  2  Medicare/Medicaid  Facility Number  00382

BENEDICT JOSEPH LABRE CENTER
3863 CLEVELAND
SAINT LOUIS  MO  63110-4009
Mailing Address 3863 CLEVELAND
SAINT LOUIS  MO  63110-4009
Telephone  (314) 664-3927  Alzheimer's Unit  No
Level of Care: RCF  Bed Capacity  15
County  SAINT LOUIS CITY  DMH Licensed  Yes
Region  7  Medicare/Medicaid  Facility Number  21163

BENTLEYS EXTENDED CARE
3060 ASHBY ROAD
OVERLAND  MO  63114-1342
Mailing Address 3060 ASHBY RD
OVERLAND  MO  63114-1342
Telephone  (314) 426-0433  Alzheimer's Unit  No
Level of Care: SNF  Bed Capacity  72
County  SAINT LOUIS COUNTY  DMH Licensed  No
Region  7  Medicare/Medicaid  Facility Number  22613

BENTON HOUSE OF BLUE SPRINGS
1701 NW JEFFERSON ST
BLUE SPRINGS  MO  64015-7229
Mailing Address 1701 NW JEFFERSON ST
BLUE SPRINGS  MO  64015-7229
Telephone  (816) 224-2727  Alzheimer's Unit  Yes
Level of Care: ALF**  Bed Capacity  95
County  JACKSON  DMH Licensed  No
Region  3  Medicare/Medicaid  Facility Number  29729

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Wednesday, April 03, 2019
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<td>2100 JOHNSTON DR</td>
<td>(816) 322-2111</td>
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<td>11071 N WOODLAND AVE</td>
<td>(816) 372-1888</td>
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<td>(816) 505-4555</td>
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<td>410 WEST BENTON ST</td>
<td>(417) 235-6031</td>
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<td>1501 CHARBONIER RD</td>
<td>(314) 921-2700</td>
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<td>4335 WEST PINE BLVD</td>
<td>(314) 371-0200</td>
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<td>BERTRAND NURSING AND REHAB CENTER</td>
<td>603 WEST HIGHWAY 62</td>
<td>(573) 683-4290</td>
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<td>BETH HAVEN NURSING HOME</td>
<td>2500 PLEASANT ST</td>
<td>(573) 221-6000</td>
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<td>BETHANY CARE CENTER</td>
<td>1305 S 7TH ST</td>
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<td>HARRISON</td>
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BETHESDA DILWORTH
9645 BIG BEND BLVD
SAINT LOUIS MO 63122-6521
Mailing Address 9645 BIG BEND BLVD
SAINT LOUIS MO 63122-6521
Telephone (314) 968-5460
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare/Medicaid
Bed Capacity 400
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 00508

BETHESDA HAWTHORNE PLACE
1111 SOUTH BERRY ROAD
SAINT LOUIS MO 63122-6598
Mailing Address 1111 SOUTH BERRY ROAD
SAINT LOUIS MO 63122-6598
Telephone (314) 942-5750
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Bed Capacity 60
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 30509

BETHESDA MEADOW
322 OLD STATE ROAD
ELLISVILLE MO 63021-5917
Mailing Address 322 OLD STATE RD
ELLISVILLE MO 63021-5917
Telephone (636) 227-3431
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare/Medicaid
Bed Capacity 210
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 15226

BETHESDA SOUTHGATE
5943 TELEGRAPH RD
SAINT LOUIS MO 63129-4715
Mailing Address 5943 TELEGRAPH RD
SAINT LOUIS MO 63129-4715
Telephone (314) 846-2000
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare/Medicaid
Bed Capacity 192
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 05586

BIG BEND RETREAT
620 NORTH EMMERSON
SLATER MO 65349-1157
Mailing Address 620 NORTH EMMERSON
SLATER MO 65349-1157
Telephone (660) 529-2237
Level of Care: RCF*
County SALINE
Region 5
Bed Capacity 10
Alzheimer's Unit No
DMH Licensed No
Facility Number 00546

BIG BEND RETREAT
620 NORTH EMMERSON
SLATER MO 65349-1157
Mailing Address 620 NORTH EMMERSON
SLATER MO 65349-1157
Telephone (660) 529-2237
Level of Care: ICF
County SALINE
Region 5
Bed Capacity 60
Alzheimer's Unit No
DMH Licensed No
Facility Number 00546

BIG BEND WOODS HEALTHCARE CENTER
110 HIGHLAND AVE
VALLEY PARK MO 63088-1422
Mailing Address 110 HIGHLAND AVE
VALLEY PARK MO 63088-1422
Telephone (636) 225-5144
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare/Medicaid
Bed Capacity 135
Alzheimer's Unit No
DMH Licensed No
Facility Number 01170

BIG RIVER NURSING & REHAB
6400 THE CEDARS COURT
CEDAR HILL MO 63016-2220
Mailing Address 6400 THE CEDARS CT
CEDAR HILL MO 63016-2220
Telephone (636) 274-1777
Level of Care: SNF
County JEFFERSON
Region 2 Medicare/Medicaid
Bed Capacity 150
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 12647

BIG SPRING CARE CENTER FOR REHAB AND HEALTHCARE
202 EAST MILL ST
HUMANSVILLE MO 65674-8507
Mailing Address 202 EAST MILL ST
HUMANSVILLE MO 65674-8507
Telephone (417) 754-8711
Level of Care: SNF
County POLK
Region 1 Medicare/Medicaid
Bed Capacity 60
Alzheimer's Unit No
DMH Licensed No
Facility Number 18672

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BIRCH POINTE HEALTH AND REHABILITATION
3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-
Mailing Address 3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-

BIRCH POINTE HEALTH AND REHABILITATION
3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-
Mailing Address 3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-

BIRCH VIEW NURSING CENTER
RR 2, BOX 2215
BIRCH TREE MO 65438-9215
Mailing Address RR 2, BOX 2215
BIRCH TREE MO 65438-9215

BIRCH VIEW NURSING CENTER
RR 2, BOX 2215
BIRCH TREE MO 65438-9215
Mailing Address RR 2, BOX 2215
BIRCH TREE MO 65438-9215

BISHOP SPENCER PLACE, INC, THE
4301 MADISON AVE
KANSAS CITY MO 64111-3491
Mailing Address 4301 MADISON AVE
KANSAS CITY MO 64111-3491

BISHOP SPENCER PLACE, INC, THE
4301 MADISON AVE
KANSAS CITY MO 64111-3491
Mailing Address 4301 MADISON AVE
KANSAS CITY MO 64111-3491

BLESSED HOMES
305 E 63RD ST
KANSAS CITY MO 64113-2225
Mailing Address 305 E 63RD ST
KANSAS CITY MO 64113-2225

BLESSED HOMES
305 E 63RD ST
KANSAS CITY MO 64113-2225
Mailing Address 305 E 63RD ST
KANSAS CITY MO 64113-2225

BLESSING CENTER, THE
302 NORTH MAIN
EDINA MO 63537-1353
Mailing Address 302 NORTH MAIN
EDINA MO 63537-1353

BLESSING CENTER, THE
302 NORTH MAIN
EDINA MO 63537-1353
Mailing Address 302 NORTH MAIN
EDINA MO 63537-1353

BLOOMFIELD LIVING CENTER
606 WEST MISSOURI ST
BLOOMFIELD MO 63825-9706
Mailing Address 606 WEST MISSOURI ST
BLOOMFIELD MO 63825-9706

BLOOMFIELD LIVING CENTER
606 WEST MISSOURI ST
BLOOMFIELD MO 63825-9706
Mailing Address 606 WEST MISSOURI ST
BLOOMFIELD MO 63825-9706

BLUE CASTLE OF THE OZARKS
1830 E LAVERNE ST
BOLIVAR MO 65613-1488
Mailing Address 1830 E LAVERNE ST
BOLIVAR MO 65613-1488

BLUE CASTLE OF THE OZARKS
1830 E LAVERNE ST
BOLIVAR MO 65613-1488
Mailing Address 1830 E LAVERNE ST
BOLIVAR MO 65613-1488

BLUE HILLS REST HOME, INC
2207 NORTH BLUE MILLS RD
INDEPENDENCE MO 64058-2022
Mailing Address 2207 N BLUE MILLS RD
INDEPENDENCE MO 64058-2022

BLUE HILLS REST HOME, INC
2207 NORTH BLUE MILLS RD
INDEPENDENCE MO 64058-2022
Mailing Address 2207 N BLUE MILLS RD
INDEPENDENCE MO 64058-2022

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<td>BLUFF CREEK TERRACE - ASSISTED LIVING</td>
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<td>(573) 815-9111</td>
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<td>No</td>
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<td>Yes</td>
<td>(314) 426-0091</td>
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<td>(417) 326-7873</td>
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<td>(636) 757-5077</td>
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<th>Zip Code</th>
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<td>64730-2311</td>
<td>(660) 679-3661</td>
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<td>(573) 796-4342</td>
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<td>MONITEAU</td>
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<td>65020-6891</td>
<td>(573) 346-6800</td>
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<td>64429-1145</td>
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<td>64633-9348</td>
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<td>No</td>
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<td>64836-3350</td>
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<td>65240-1178</td>
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<td>64735-1768</td>
<td>(660) 885-8391</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
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Wednesday, April 03, 2019
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<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
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<table>
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<th>Facility Name</th>
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<td>Bristol Manor of Warrensburg</td>
<td>603 Creach</td>
<td>(660) 747-8319</td>
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<td>Bristol Manor of Webb City</td>
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<td>(417) 673-4231</td>
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<td>840 West Northview</td>
<td>(636) 639-6777</td>
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<td>(314) 432-5200</td>
<td>ALF**</td>
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<td>BROOKDALE WEST COUNTY</td>
<td>785 HENRY AVE BALLWIN, MO 63011-2736</td>
<td>(636) 527-5700</td>
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<td>BROOKDALE WORNALL PLACE</td>
<td>501 WEST 107TH ST KANSAS CITY, MO 64114-5919</td>
<td>(816) 941-7777</td>
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<tr>
<td>BROOKE HAVEN HEALTHCARE</td>
<td>1410 NORTH KENTUCKY AVE WEST PLAINS, MO 65775-1822</td>
<td>(417) 256-7975</td>
<td>SNF</td>
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<tr>
<td>BROOKHAVEN NURSING &amp; REHAB</td>
<td>3405 WEST MT VERNON SPRINGFIELD, MO 65802-5241</td>
<td>(417) 874-9600</td>
<td>SNF</td>
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<td>BROOKING PARK</td>
<td>307 SOUTH WOODS MILL RD CHESTERFIELD, MO 63017-3418</td>
<td>(314) 576-5545</td>
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<td>BROOKSIDE MANOR RESIDENTIAL CARE, LLC</td>
<td>2434 HIGHWAY H FARMINGTON, MO 63640-7033</td>
<td>(573) 756-6434</td>
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### BRUNSWICK NURSING & REHAB
721 W HARRISON ST  
MO 65236-1096  
Telephone: (660) 548-3182  
Level of Care: SNF  
Bed Capacity: 60  
County: CHARITON  
DMH Licensed: No  
Region: 5  
Medicare/Medicaid: Facility Number 03123  
Mailing Address: 721 W HARRISON ST  
BRUNSWICK  
MO 65236-1096  

### BUFFALO PRAIRIE CENTER FOR REHAB AND HEALTHCARE
631 WEST MAIN ST  
BUFFALO  
MO 65622-7496  
Telephone: (417) 345-5422  
Level of Care: SNF  
Bed Capacity: 60  
County: DALLAS  
DMH Licensed: No  
Region: 1  
Medicare/Medicaid: Facility Number 16700  
Mailing Address: 631 WEST MAIN ST  
BUFFALO  
MO 65622-7496  

### BUTLER CENTER FOR REHABILITATION AND HEALTHCARE
416 SOUTH HIGH ST  
BUTLER  
MO 64730-1827  
Telephone: (660) 679-6158  
Level of Care: SNF  
Bed Capacity: 50  
County: BATES  
DMH Licensed: No  
Region: 3  
Medicare/Medicaid: Facility Number 08627  
Mailing Address: 416 S HIGH ST  
BUTLER  
MO 64730-1827  

### BUTTERFIELD RESIDENTIAL CARE CENTER
1120 NORTH BUTTERFIELD RD  
BOLIVAR  
MO 65613-1000  
Telephone: (417) 326-5200  
Level of Care: RCF  
Bed Capacity: 66  
County: POLK  
DMH Licensed: No  
Region: 1  
Medicare/Medicaid: Facility Number 14436  
Mailing Address: 1120 N BUTTERFIELD RD  
BOLIVAR  
MO 65613-1000  

### CALIFORNIA CARE CENTER
1106 SOUTH OAK, ROUTE 3  
CALIFORNIA  
MO 65018-1462  
Telephone: (573) 796-3127  
Level of Care: SNF  
Bed Capacity: 60  
County: MONITEAU  
DMH Licensed: No  
Region: 6  
Medicare/Medicaid: Facility Number 10437  
Mailing Address: 1106 SOUTH OAK, ROUTE 3  
CALIFORNIA  
MO 65018-1462  

### CAMDENTON WINDSOR ESTATES
2042 N BUSINESS ROUTE 5  
CAMDENTON  
MO 65020-2611  
Telephone: (573) 346-5654  
Level of Care: SNF  
Bed Capacity: 82  
County: CAMDEN  
DMH Licensed: No  
Region: 6  
Medicare/Medicaid: Facility Number 08688  
Mailing Address: 2042 N BUSINESS ROUTE 5  
CAMDENTON  
MO 65020-2611  

### CAMELOT NURSING AND REHABILITATION CENTER
705 GRAND CANYON DR  
FARMINGTON  
MO 63640-2161  
Telephone: (573) 756-8911  
Level of Care: SNF  
Bed Capacity: 97  
County: SAINT FRANCOIS  
DMH Licensed: No  
Region: 2  
Medicare/Medicaid: Facility Number 00978  
Mailing Address: 705 GRAND CANYON DR  
FARMINGTON  
MO 63640-2161  

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Wednesday, April 03, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Bed Capacity</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>Cape Girardeau</td>
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<td>CAREGIVERS INN</td>
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<td>Carl Junction Residential Care</td>
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<tr>
<td>Carondelet Manor</td>
<td></td>
<td>3</td>
<td>No</td>
<td>25482</td>
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</table>
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<table>
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<tr>
<th>Facility Name</th>
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<td>CARONDELET RETIREMENT MANOR</td>
<td>6811 MICHIGAN</td>
<td>SAINT LOUIS</td>
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<td>Yes</td>
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<td>CARRIGE MANOR CARE CENTER</td>
<td>508 NORTH WASHINGTON ST</td>
<td>FARMINGTON</td>
<td>MO</td>
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<td>Yes</td>
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<tr>
<td>CARRIGE SQUARE LIVING &amp; REHAB CENTER</td>
<td>4009 GENE FIELD RD</td>
<td>SAINT JOSEPH</td>
<td>MO</td>
<td>01061</td>
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<td>CARRIGE DUMAS LONG TERM CARE FACILITY</td>
<td>2836 BENTON BLVD</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>18550</td>
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<tr>
<td>CARRIE ELLIGSON GIEUTNER HOME</td>
<td>5000 SOUTH BROADWAY</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>02877</td>
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<td>CARROLL HOUSE</td>
<td>307 GRAND</td>
<td>CARROLLTON</td>
<td>MO</td>
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<td>CARTHAGE HEALTH AND REHABILATION CENTER</td>
<td>1901 BUENA VISTA AVE</td>
<td>CARTHAGE</td>
<td>MO</td>
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<td>CASABLANCA CARE CENTER</td>
<td>524 SOUTH ALBANY</td>
<td>BOLIVAR</td>
<td>MO</td>
<td>21150</td>
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CASSVILLE HEALTH CENTER FOR REHAB AND HEALTHCARE
1300 COUNTY FARM RD
CASSVILLE   MO   65625-1726
Mailing Address 1300 COUNTY FARM RD
CASSVILLE   MO   65625-1726
Telephone   (417) 847-3386 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County   BARRY DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 01097

CASTLEPARKE #2
319 PIONEER TRAIL DR
JEFFERSON CITY   MO   65109-1508
Mailing Address 319 PIONEER TRAIL DR
JEFFERSON CITY   MO   65109-1508
Telephone   (573) 636-5300 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County   COLE DMH Licensed No
Region 6 Facility Number 25245

CASTLEPARKE #3
312 WILDERNESS COURT
JEFFERSON CITY   MO   65109-1514
Mailing Address 312 WILDERNESS CT
JEFFERSON CITY   MO   65109-1514
Telephone   (573) 636-5100 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County   COLE DMH Licensed No
Region 6 Facility Number 25921

CASTLEPARKE RETIREMENT CAMPUS #1
331 PIONEER TRAIL DR
JEFFERSON CITY   MO   65109-1508
Mailing Address 331 PIONEER TRAIL DR
JEFFERSON CITY   MO   65109-1508
Telephone   (573) 659-0001 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County   COLE DMH Licensed No
Region 6 Facility Number 24766

CASTLEWOOD SENIOR LIVING THE
1538 N OLD CASTLE ROAD
NIXA   MO   65714-
Mailing Address 1538 N OLD CASTLE ROAD
NIXA   MO   65714-
Telephone   (417) 724-8188 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 66
County   CHRISTIAN DMH Licensed No
Region 1 Facility Number 30722

CEDAR KNOLL
13635 STATE ROUTE V
SAINT JAMES   MO   65559-8331
Mailing Address 13635 STATE ROUTE V
SAINT JAMES   MO   65559-8331
Telephone   (573) 265-3658 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 32
County   PHELPS DMH Licensed Yes
Region 6 Facility Number 01142

CEDAR RIDGE CARE CENTER, LLC
71 YCUCAMORE
CASSVILLE   MO   65625-1755
Mailing Address PO BOX 633
CASSVILLE   MO   65625-0633
Telephone   (417) 847-5546 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 30
County   BARRY DMH Licensed Yes
Region 1 Facility Number 15295

CEDAR VALLEY BOARDING HOME
286 HIGHWAY VV
BROSELEY   MO   63932-9174
Mailing Address 286 HWY VV
BROSELEY   MO   63932-9174
Telephone   (573) 686-4877 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 10
County   BUTLER DMH Licensed No
Region 2 Facility Number 08923

CEDARCREST MANOR
324 WEST 5TH ST
WASHINGTON   MO   63090-2306
Mailing Address 324 WEST 5TH ST
WASHINGTON   MO   63090-2306
Telephone   (636) 239-7848 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 177
County   FRANKLIN DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 01160

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CEDARGATE HEALTHCARE
2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036
Mailing Address 2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036
Telephone (573) 785-0188
Level of Care: SNF
County BUTLER
Region 2 Medicare/Medicaid
Bed Capacity 108
DMH Licensed No
Alzheimer's Unit No
Facility Number 01182

CEDARGATE HEALTHCARE
2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036
Mailing Address 2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036
Telephone (573) 785-0188
Level of Care: ALF
County BUTLER
Region 2
Bed Capacity 16
DMH Licensed No
Alzheimer's Unit No
Facility Number 01182

CEDARHURST OF BLUE SPRINGS
20551 E TRINITY PLACE
BLUE SPRINGS MO 64015-9501
Mailing Address 20551 E TRINITY PLACE
BLUE SPRINGS MO 64015-9501
Telephone 816-203-1939
Level of Care: ALF**
County JACKSON
Region 3
Bed Capacity 89
DMH Licensed No
Alzheimer's Unit Yes
Facility Number 31581

CEDARHURST OF COLUMBIA
2333 CHAPEL HILL RD
COLUMBIA MO 65203-1537
Mailing Address 2333 CHAPEL HILL RD
COLUMBIA MO 65203-1537
Telephone (573) 234-1091
Level of Care: ALF**
County BOONE
Region 6
Bed Capacity 127
DMH Licensed No
Alzheimer's Unit Yes
Facility Number 29874

CEDARHURST OF SEDALIA
3751 WEST 10TH ST
SEDALIA MO 65301-2411
Mailing Address 3751 WEST 10TH ST
SEDALIA MO 65301-2411
Telephone (660) 827-8900
Level of Care: ALF*
County PETTIS
Region 6
Bed Capacity 55
DMH Licensed No
Alzheimer's Unit No
Facility Number 25967

CEDARHURST OF SEDALIA
3761 WEST 10TH ST
SEDALIA MO 65301-2524
Mailing Address 3761 WEST 10TH ST
SEDALIA MO 65301-2524
Telephone (660) 827-8900
Level of Care: ALF**
County PETTIS
Region 6
Bed Capacity 35
DMH Licensed No
Alzheimer's Unit No
Facility Number 25967

CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY CARE
1800 FIRST CAPITOL DRIVE
SAINT CHARLES MO 63301-1646
Mailing Address 1800 FIRST CAPITOL DRIVE
SAINT CHARLES MO 63301-1646
Telephone (636) 442-4500
Level of Care: ALF**
County SAINT CHARLES
Region 5
Bed Capacity 114
DMH Licensed No
Alzheimer's Unit Yes
Facility Number 30676

CEDARS OF LIBERTY HEALTH CARE CENTER
200 WEST RUTH EWING RD
LIBERTY MO 64068-9496
Mailing Address 200 WEST RUTH EWING RD
LIBERTY MO 64068-9496
Telephone (816) 781-7600
Level of Care: RCF*
County CLAY
Region 4
Bed Capacity 206
DMH Licensed Yes
Alzheimer's Unit No
Facility Number 13854

CENTRAL GARDENS INC
302 NORTH ELM ST
DEXTER MO 63841-1773
Mailing Address 302 N ELM ST
DEXTER MO 63841-1773
Telephone (573) 624-0011
Level of Care: RCF*
County STODDARD
Region 2
Bed Capacity 83
DMH Licensed No
Alzheimer's Unit No
Facility Number 18858

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CENTRAL RESIDENCE, THE
5143 WATERMAN BLVD
SAINT LOUIS MO 63108-1103
Mailing Address 5143 WATERMAN BLVD
SAINT LOUIS MO 63108-1103
Telephone (314) 367-5620
Level of Care: RCF*
Alzheimer's Unit No
Bed Capacity 41
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7
Facility Number 02785

CENTURY PINES ASSISTED LIVING
709 EAST MCCRACKEN RD
OZARK MO 65721-9499
Mailing Address 709 EAST MCCRACKEN RD
OZARK MO 65721-9499
Telephone (417) 581-7278
Level of Care: ALF**
Alzheimer's Unit Yes
Bed Capacity 20
County CHRISTIAN
DMH Licensed No
Region 1
Facility Number 01200

CENTURY PINES ASSISTED LIVING
709 EAST MCCRACKEN RD
OZARK MO 65721-9499
Mailing Address 709 EAST MCCRACKEN RD
OZARK MO 65721-9499
Telephone (417) 581-7278
Level of Care: ALF
Alzheimer's Unit No
Bed Capacity 58
County CHRISTIAN
DMH Licensed Yes
Region 1
Facility Number 01200

CHAFFEE NURSING CENTER
12273 STATE HIGHWAY 77
CHAFFEE MO 63740-8219
Mailing Address 12273 STATE HIGHWAY 77
CHAFFEE MO 63740-8219
Telephone (573) 887-3615
Level of Care: SNF
Alzheimer's Unit No
Bed Capacity 71
County SCOTT
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 13652

CHARITON PARK HEALTH CARE CENTER
902 MANOR DR
SALISBURY MO 65281-1236
Mailing Address 902 MANOR DR
SALISBURY MO 65281-1236
Telephone (660) 388-6486
Level of Care: SNF
Alzheimer's Unit No
Bed Capacity 120
County CHARITON
DMH Licensed No
Region 5 Medicare/Medicaid
Facility Number 06469

CHARLESTON MANOR
1220 EAST MARSHALL
CHARLESTON MO 63834-1349
Mailing Address 1220 EAST MARSHALL
CHARLESTON MO 63834-1349
Telephone (573) 683-3721
Level of Care: SNF
Alzheimer's Unit Yes
Bed Capacity 120
County MISSISSIPPI
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 01251

CHARTER SENIOR LIVING AT ST LOUIS HILLS
6543 CHIPPEWA ST
SAINT LOUIS MO 63109-4100
Mailing Address 6543 CHIPPEWA ST
SAINT LOUIS MO 63109-4100
Telephone (314) 647-6600
Level of Care: ALF**
Alzheimer's Unit Yes
Bed Capacity 181
County SAINT LOUIS CITY
DMH Licensed No
Region 7
Facility Number 07594

CHATEAU ANN MARIE
7700 MINNESOTA AVE
SAINT LOUIS MO 63111-3336
Mailing Address 7700 MINNESOTA AVE
SAINT LOUIS MO 63111-3336
Telephone (314) 449-1497
Level of Care: ALF
Alzheimer's Unit No
Bed Capacity 22
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7
Facility Number 14711

CHATEAU GIRARDEAU
3120 INDEPENDENCE ST
CAPE GIRARDEAU MO 63703-5043
Mailing Address 3120 INDEPENDENCE ST
CAPE GIRARDEAU MO 63703-5043
Telephone (573) 335-1281
Level of Care: ALF
Alzheimer's Unit No
Bed Capacity 55
County CAPE GIRARDEAU
DMH Licensed No
Region 2
Facility Number 01386

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Wednesday, April 03, 2019
CHATEAU GIRARDEAU
3120 INDEPENDENCE ST
CAPE GIRARDEAU MO 63703-5043
Mailing Address 3120 INDEPENDENCE ST
CAPE GIRARDEAU MO 63703-5043
Telephone (573) 335-1281 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 75
County CAPE GIRARDEAU DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 01386

CHEROKEE RESIDENTIAL CARE ACQUISITION, LLC
3409 MISSOURI AVE
SAINT LOUIS MO 63118-3236
Mailing Address 3409 MISSOURI AVE
SAINT LOUIS MO 63118-3236
Telephone (314) 771-8360 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 30
County SAINT LOUIS CITY DMH Licensed Yes
Region 7 Facility Number 14047

CHESTERFIELD VILLAS
14901 N OUTER 40 RD
CHESTERFIELD MO 63017-6034
Mailing Address 14901 N OUTER 40 RD
CHESTERFIELD MO 63017-6034
Telephone (636) 532-9296 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 52
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 29067

CHESTNUT GLENN - ASSISTED LIVING BY AMERICARE
121 KLONDIKE CROSSING
SAINT PETERS MO 63376-5394
Mailing Address 121 KLONDIKE CROSSING
SAINT PETERS MO 63376-5394
Telephone (636) 928-4200 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 74
County SAINT CHARLES DMH Licensed No
Region 5 Facility Number 25446

CHRISTIAN EXTENDED CARE & REHABILITATION
11160 VILLAGE NORTH DR
SAINT LOUIS MO 63136-6159
Mailing Address 11160 VILLAGE NORTH DR
SAINT LOUIS MO 63136-6159
Telephone (314) 355-8010 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 08300

CHURCHILL TERRACE - ASSISTED LIVING BY AMERICARE
120 HOSPITAL DR
FULTON MO 65251-2511
Mailing Address 120 HOSPITAL DR
FULTON MO 65251-2511
Telephone (573) 642-5222 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 57
County CALLAWAY DMH Licensed No
Region 6 Facility Number 20783

CITIZENS MEMORIAL HEALTH CARE FACILITY
1218 W LOCUST ST
BOLIVAR MO 65613-1312
Mailing Address PO BOX 590
BOLIVAR MO 65613-0590
Telephone (417) 326-7648 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 111
County POLK DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 00710

CLARA MANOR NURSING HOME
3621 WARWICK BLVD
KANSAS CITY MO 64111-1403
Mailing Address 3621 WARWICK BLVD
KANSAS CITY MO 64111-1403
Telephone (816) 756-1593 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 90
County JACKSON DMH Licensed No
Region 3 Medicaid Facility Number 14102

CLARENCE CARE CENTER
111 EAST ST
CLARENCE MO 63437-1902
Mailing Address 111 EAST ST
CLARENCE MO 63437-1902
Telephone (660) 699-2118 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County SHELBY DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 01475

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| Facility Name                          | Address                  | City          | State | Zip Code | Telephone    | Level of Care | Bed Capacity | County     | DMH Licensed | Facility Number |
|---------------------------------------|--------------------------|---------------|-------|----------|--------------|---------------|--------------|------------|--------------|----------------|----------------|
| CLARK CARE CENTER - ONE               | 1505 EAST ASHLAND ST     | MO 64772-4025 | NEVADA| 64772-246| (417) 667-3900| RCF*          | 38           | VERNON     | Yes          | 20206          |
| CLARK COUNTY NURSING HOME            | 1260 N JOHNSON ST        | MO 63445-1100 | NEVADA| 64772-246| (660) 727-3303| SNF           | 103          | CLARK      | No           | 01480          |
| CLARK COUNTY NURSING HOME            | 1260 N JOHNSON ST        | MO 63445-1100 | NEVADA| 64772-246| (660) 727-3303| RCF*          | 22           | CLARK      | No           | 01480          |
| CLARK'S MOUNTAIN NURSING CENTER      | 2100 BARNES              | MO 63957-1008 | WAYNE | 63445-1100| (573) 223-4297| SNF           | 91           | WAYNE      | No           | 17527          |
| CLARU DEVILLE NURSING CENTER         | 105 SPRUCE ST            | MO 63645-1002 | MADISON| 63445-1100| (573) 783-3993| SNF           | 90           | MADISON    | No           | 19913          |
| CLEARVIEW NURSING CENTER             | 430 SALCEDO ROAD         | MO 63801-4802 | SCOTT | 63445-1100| (573) 471-2565| SNF           | 98           | SCOTT      | No           | 01318          |
| CLINTON HEALTHCARE AND REHABILITATION CENTER | 1009 EAST OHIO    | MO 64735-2455 | HENRY | 63445-1100| (660) 885-5571| SNF           | 120          | HENRY      | No           | 08220          |
| COATES STREET COMFORT HOUSE          | 612 WEST COATES ST       | MO 65270-1319 | RANDOLPH| 63445-1100| (660) 263-6759| RCF*          | 20           | RANDOLPH   | Yes          | 01591          |
| COLLIER CARE HOME, INC               | 3001 NW VESPER ST        | MO 64015-3104 | JACKSON| 63445-1100| (816) 229-6231| RCF*          | 15           | JACKSON    | Yes          |                |

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address Details</th>
<th>Telephone</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>COLONIAL HOME, THE</td>
<td>102 SUMMIT ST DONIPHAN MO 63935-1328</td>
<td>(573) 996-4283</td>
<td>No</td>
<td>31</td>
<td>RIPLEY</td>
<td>2</td>
<td>No</td>
<td>01610</td>
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<tr>
<td>Mailing Address 102 SUMMIT ST DONIPHAN MO 63935-1328</td>
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<tr>
<td>COLONIAL HOUSE OF CRYSTAL CITY</td>
<td>26 MISSISSIPPI AVE CRYSTAL CITY MO 63019-1817</td>
<td>(636) 937-1000</td>
<td>No</td>
<td>52</td>
<td>JEFFERSON</td>
<td>2</td>
<td>Yes</td>
<td>22112</td>
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<tr>
<td>Mailing Address PO BOX 461 CRYSTAL CITY MO 63019-1817</td>
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<tr>
<td>COLONIAL HOUSE OF FESTUS I</td>
<td>500 SUNSHINE DR FESTUS MO 63028-1645</td>
<td>(636) 937-7140</td>
<td>No</td>
<td>30</td>
<td>JEFFERSON</td>
<td>2</td>
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<td>129 GRAY ST FESTUS MO 63028-1950</td>
<td>(636) 937-4050</td>
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<tr>
<td>COLONIAL MANOR, LLC</td>
<td>907 WEST MALONE ST SIKESTON MO 63801-2425</td>
<td>(573) 471-5541</td>
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<td>1162 CEDAR ST BISMARCK MO 63624-8920</td>
<td>(573) 734-2846</td>
<td>No</td>
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<tr>
<td>COLONIAL SPRINGS HEALTHCARE CENTER</td>
<td>750 W COOPER ST BUFFALO MO 65622-8662</td>
<td>(417) 345-2228</td>
<td>Yes</td>
<td>134</td>
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<td>1</td>
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<td>COLONY POINTE-ASSISTED LIVING BY AMERICARE</td>
<td>1510 CHAPEL HILL RD COLUMBIA MO 65203-5457</td>
<td>(573) 234-1193</td>
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<td>COLUMBIA MANOR CARE CENTER</td>
<td>2012 NIFONG BLVD COLUMBIA MO 65201-3874</td>
<td>(573) 449-1246</td>
<td>No</td>
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Wednesday, April 03, 2019
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<th>Facility Name</th>
<th>Address</th>
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<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<td>COLUMBIA STREET MANOR</td>
<td>208 WEST COLUMBIA ST</td>
<td>(573) 756-7481</td>
<td>RCF</td>
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<td>COMMUNITIES OF WILDWOOD RANCH</td>
<td>3222 SOUTH JOHN DUFFY DR</td>
<td>(417) 621-0175</td>
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<td>No</td>
<td>JASPER</td>
<td>No</td>
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<td>COMMUNITY CARE CENTER OF LEMAY, INC</td>
<td>9353 SOUTH BROADWAY</td>
<td>(314) 631-0540</td>
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<td>COMMUNITY MANOR</td>
<td>783 WEBER ROAD</td>
<td>(573) 756-8998</td>
<td>SNF</td>
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<td>SAINT FRANCOIS</td>
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<td>COMMUNITY OF AUTMEN COURT AT MT VERNON, THE</td>
<td>1421 S LANDRUM ST</td>
<td>(417) 466-3549</td>
<td>SNF</td>
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<td>No</td>
<td>LAWRENCE</td>
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<td>400 EAST HOSPITAL RD</td>
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<td>17025 OLD JAMESTOWN RD</td>
<td>(314) 355-8041</td>
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<td>COOPER HOUSE</td>
<td>4385 MARYLAND AVE</td>
<td>(314) 535-1919</td>
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<td>No</td>
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Wednesday, April 03, 2019
C O R I  M A N O R  H E A LT H C A R E  &  R E H A B I L I T A T I O N  C E N T E R
560  C O R I S A N D E  H I L L S  R D
FENTON  MO  63026-5613
Mailing  Address  560  CORISANDE  HILLS  RD
FENTON  MO  63026-5613

C O T T A G E  A T  C E N T U R Y  P I N E S ,  T H E
707  E A S T  M C C R A C K E N  R O A D
OZARK  MO  65721-9499
Mailing  Address  709  EAST  M C C R A C K E N  R O A D
OZARK  MO  65721-9499

C O T T A G E S  O F  L A K E  S T  L O U I S
2885  T E C H N O L O G Y  D R I V E
LAKE  SAINT  LOUIS  MO  63367-4123
Mailing  Address  2885  TECHNOLOGY  DRIVE
LAKE  SAINT  LOUIS  MO  63367-4123

C O T T O N  P O I N T  L I V I N G  C E N T E R
609  S O U T H  R A R R O A D  S T
MATTHEWS  MO  63867-9751
Mailing  Address  609  S  R A R R O A D  S T
MATTHEWS  MO  63867-9751

C O U N T R Y  A I R E  E S T A T E S ,  L L C
49303  R E N S S E L A E R  L N
HANNIBAL  MO  63401-7356
Mailing  Address  49303  RENSSELAER  LN
HANNIBAL  MO  63401-7356

C O U N T R Y  A I R E  R E T I R E M E N T  C E N T E R
18540  S T A T E  H A W N Y  1 6
LEWISTOWN  MO  63452-2111
Mailing  Address  18540  STATE  HWY  16
LEWISTOWN  MO  63452-2111

C O U N T R Y  A I R E  R E T I R E M E N T  C E N T E R
18540  S T A T E  H A W N Y  1 6
LEWISTOWN  MO  63452-2111
Mailing  Address  18540  STATE  HWY  16
LEWISTOWN  MO  63452-2111

C O U N T R Y  C L U B  C A R E  C E N T E R  O F  W A R R E N S B U R G
503  R E G E N T  D R
WARRENSBURG  MO  64093-3231
Mailing  Address  503  REGENT  DR
WARRENSBURG  MO  64093-3231

C O U N T R Y  C L U B  C A R E  C E N T E R  O F  W A R R E N S B U R G
503  R E G E N T  D R
WARRENSBURG  MO  64093-3231
Mailing  Address  503  REGENT  DR
WARRENSBURG  MO  64093-3231

Telephone  (636) 343-2282  Alzheimer's  Unit  No
Level  of  Care:  SNF  Bed  Capacity  144
County  JEFFERSON  DMH  Licensed  No
Region  2  Medicare/Medicaid  Facility  Number  01800

Telephone  (417) 485-4382  Alzheimer's  Unit  Yes
Level  of  Care:  ALF**  Bed  Capacity  12
County  CHRISTIAN  DMH  Licensed  No
Region  1  Facility  Number  30579

Telephone  636-614-3510  Alzheimer's  Unit  No
Level  of  Care:  SNF  Bed  Capacity  60
County  SAINT  CHARLES  DMH  Licensed  No
Region  5  Facility  Number  07057

Telephone  (573) 221-5400  Alzheimer's  Unit  No
Level  of  Care:  RCF*  Bed  Capacity  16
County  RALLS  DMH  Licensed  Yes
Region  5  Facility  Number  14270

Telephone  (573) 215-2216  Alzheimer's  Unit  No
Level  of  Care:  RCF*  Bed  Capacity  16
County  LEWIS  DMH  Licensed  No
Region  5  Facility  Number  16896

Telephone  (573) 215-2216  Alzheimer's  Unit  No
Level  of  Care:  SNF  Bed  Capacity  60
County  LEWIS  DMH  Licensed  No
Region  5  Facility  Number  16896

Telephone  (660) 429-4444  Alzheimer's  Unit  No
Level  of  Care:  RCF*  Bed  Capacity  40
County  JOHNSON  DMH  Licensed  No
Region  3  Facility  Number  20892

Telephone  (660) 429-4444  Alzheimer's  Unit  No
Level  of  Care:  SNF  Bed  Capacity  73
County  JOHNSON  DMH  Licensed  No
Region  3  Facility  Number  20892

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Wednesday,  April  03,  2019  Page 33 of 133
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<td>2820 NORTH MAIN ST</td>
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<td>2820 NORTH MAIN ST</td>
<td>(417) 926-1955</td>
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<td>(573) 431-2889</td>
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<td>GRAIN VALLEY</td>
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<td>(816) 224-2700</td>
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<td>(573) 264-1555</td>
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<td>SAINT JAMES</td>
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<td>(573) 265-8250</td>
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<td>COUNTRY VIEW NURSING FACILITY, INC</td>
<td>2106 WEST MAIN ST</td>
<td>BOWLING GREEN</td>
<td>63334-1049</td>
<td>BOWLING GREEN</td>
<td>(573) 324-2216</td>
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<td>MO</td>
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COUNTRYSIDE CARE CENTER, LLC
385 SOUTH EISENHOWER
MONETT MO 65708-8266
Mailing Address PO BOX 434
MONETT MO 65708-0434
Telephone (417) 235-4040 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 33
County BARRY DMH Licensed Yes
Region 1 Facility Number 12737

COUNTRYSIDE ESTATES
500 NORTH OHIO
APPLETON CITY MO 64724-1625
Mailing Address PO BOX 98
APPLETON CITY MO 64724-0098
Telephone (660) 476-2128 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 24
County SAINT CLAIR DMH Licensed No
Region 1 Facility Number 15005

COUNTRYSIDE HOME, LLC
24499 PARK DR
LEBANON MO 65536-5843
Mailing Address 24499 PARK DR
LEBANON MO 65536-5843
Telephone (417) 532-7418 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 20
County LACLEDE DMH Licensed Yes
Region 1 Facility Number 15052

COUNTRYSIDE MANOR, LLC
1415 E US HIGHWAY 54
VANDALIA MO 63382-2908
Mailing Address 1415 E US HIGHWAY 54
VANDALIA MO 63382-2908
Telephone (573) 594-6215 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 18
County AUDRAIN DMH Licensed Yes
Region 5 Facility Number 11483

CRAB APPLE VILLAGE SENIOR ESTATES
214 HARTMAN PL, SUITE 100
SAINT CLAIR MO 63077-2458
Mailing Address 214 HARTMAN PL, SUITE 100
SAINT CLAIR MO 63077-2458
Telephone (636) 629-6161 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 65
County FRANKLIN DMH Licensed No
Region 6 Facility Number 24395

CRANE RESIDENTIAL CARE HOME
102 LILLIAN
CRANE MO 65633-9103
Mailing Address 102 LILLIAN
CRANE MO 65633-9103
Telephone (417) 723-5900 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 33
County STONE DMH Licensed Yes
Region 1 Facility Number 01898

CRAWFORD RANCH BOARDING HOME, LLC
2200 VARVERA RD
DOE RUN MO 63637-3121
Mailing Address 2200 VARVERA RD
DOE RUN MO 63637-3121
Telephone (573) 756-4656 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 32
County SAINT FRANCOIS DMH Licensed Yes
Region 2 Facility Number 13193

CRESTVIEW HOME
1313 SOUTH 25TH ST
BETHANY MO 64424-2634
Mailing Address PO BOX 430
BETHANY MO 64424-0430
Telephone (660) 425-3128 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 92
County HARRISON DMH Licensed No
Region 4 Facility Number 01936

CRESTVIEW HOME
1313 SOUTH 25TH ST
BETHANY MO 64424-2634
Mailing Address PO BOX 430
BETHANY MO 64424-0430
Telephone (660) 425-3128 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 24
County HARRISON DMH Licensed No
Region 4 Facility Number 01936

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CRESTWOOD HEALTH CARE CENTER, LLC
11400 MEHL AVE
FLORISSANT MO 63033-7204
Mailing Address 11400 MEHL AVE
FLORISSANT MO 63033-7204
Telephone (314) 741-3525
Level of Care: SNF
Alzheimer's Unit No
Bed Capacity 150
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 14296

CREVE COEUR ASSISTED LIVING AND MEMORY CARE
693 DECKER LN
CREVE COEUR MO 63141-7127
Mailing Address 693 DECKER LANE
CREVE COEUR MO 63141-7127
Telephone (314)997-4532
Level of Care: ALF**
Alzheimer's Unit Yes
Bed Capacity 110
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Facility Number 29440

CREVE COEUR MANOR
1127 TIMBER RUN DR
SAINT LOUIS MO 63146-4482
Mailing Address 1127 TIMBER RUN DR
SAINT LOUIS MO 63146-4482
Telephone (314) 434-8361
Level of Care: SNF
Bed Capacity 149
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 02417

CROSS CREEK AT LEE'S SUMMIT
3320 NE WILSHIRE DR
LEE'S SUMMIT MO 64064-2077
Mailing Address 3320 NE WILSHIRE DR
LEE'S SUMMIT MO 64064-2077
Telephone (816) 607-5700
Level of Care: ALF**
Bed Capacity 55
County JACKSON
DMH Licensed No
Region 3 Facility Number 30996

CROWLEY RIDGE CARE CENTER
1204 NORTH OUTER RD
DEXTER MO 63841-8684
Mailing Address PO BOX 668
DEXTER MO 63841-0668
Telephone (573) 624-5557
Level of Care: SNF
Bed Capacity 90
County STODDARD
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 12667

CROWN CARE CENTER
3001 EAST ELM
HARRISONVILLE MO 64701-1196
Mailing Address 3001 EAST ELM
HARRISONVILLE MO 64701-1196
Telephone (816) 380-6525
Level of Care: SNF
Bed Capacity 118
County CASS
DMH Licensed No
Region 3 Medicare/Medicaid
Facility Number 21031

CRYSTAL CREEK HEALTH AND REHABILITATION CENTER
250 NEW FLORISSANT RD SOUTH
FLORISSANT MO 63031-6716
Mailing Address 250 NEW FLORISSANT RD SOUTH
FLORISSANT MO 63031-6716
Telephone (314) 838-2211
Level of Care: SNF
Bed Capacity 158
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 05782

CRYSTAL MANOR
409 W FIRST ST
ADRIAN MO 64720-9277
Mailing Address 409 W FIRST ST
ADRIAN MO 64720-9277
Telephone (816) 297-8832
Level of Care: RCF
Bed Capacity 12
County BATES
DMH Licensed No
Region 3 Facility Number 21070

CRYSTAL OAKS
1500 CALVARY CHURCH RD
FESTUS MO 63028-4125
Mailing Address PO BOX 680
CRYSTAL CITY MO 63019-0680
Telephone (636) 933-1818
Level of Care: ALF**
Bed Capacity 60
County JEFFERSON
DMH Licensed No
Region 2 Facility Number 99932

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Wednesday, April 03, 2019
CRYSTAL OAKS
1500 CALVARY CHURCH RD
FESTUS MO 63028-4125
Mailing Address PO BOX 680
CRYSTAL CITY MO 63019-0680
Telephone (636) 933-1818 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 131
County JEFFERSON DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 99932

CUBA MANOR, INC
210 ELDON DR
CUBA MO 65453-1642
Mailing Address 210 ELDON DR
CUBA MO 65453-1642
Telephone (573) 885-4500 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 90
County CRAWFORD DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 21149

CURRENT RIVER NURSING CENTER, INC
1015 NORTH GRAND AVE
DONIPHAN MO 63935-1779
Mailing Address 1015 N GRAND AVE
DONIPHAN MO 63935-1779
Telephone (573) 996-4239 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County RIPLEY DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 17125

CYPRESS POINT - SKILLED NURSING BY AMERICARE
801 BAILIFF DR
DEXTER MO 63841-9500
Mailing Address 801 BAILIFF DR
DEXTER MO 63841-9500
Telephone (573) 624-8908 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 79
County STODDARD DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 08315

DADE COUNTY NURSING HOME DISTRICT
400 BROAD ST
GREENFIELD MO 65661-1405
Mailing Address 400 BROAD ST
GREENFIELD MO 65661-1405
Telephone (417) 637-5315 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 114
County DADE DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 02006

DADE COUNTY RESIDENTIAL CARE FACILITY
400 BROAD ST
GREENFIELD MO 65661-1405
Mailing Address 400 BROAD ST
GREENFIELD MO 65661-1405
Telephone (417) 637-5315 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 24
County DADE DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 02006

DAVIESS COUNTY NURSING AND REHABILITATION
1337 WEST GRAND
GALLATIN MO 64640-8320
Mailing Address 1337 WEST GRAND
GALLATIN MO 64640-8320
Telephone (660) 663-2197 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 97
County DAVIESS DMH Licensed No
Region 4 Medicare/Medicaid Facility Number 02032

DELHAVEN MANOR
5460 DELMAR BLVD
SAINT LOUIS MO 63112-3104
Mailing Address 5460 DELMAR BLVD
SAINT LOUIS MO 63112-3104
Telephone (314) 361-2902 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 156
County SAINT LOUIS CITY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 02089

DELMAR GARDENS NORTH
4401 PARKER ROAD
BLACK JACK MO 63033-4266
Mailing Address 4401 PARKER RD
BLACK JACK MO 63033-4266
Telephone (314) 355-1516 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 240
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 14093

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<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Medicare/Medicaid</th>
<th>Alzheimer's Unit</th>
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<thead>
<tr>
<th>Facility Name</th>
<th>Region</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
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</tbody>
</table>

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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<th>Facility Number</th>
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<td>DOLAN MEMORY CARE AT FRONTIER</td>
<td>11566 FRONTIER DR</td>
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<tr>
<td>Mailing Address: PO BOX 4082</td>
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<td>MO</td>
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<td>Yes</td>
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<td>314-576-6200</td>
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<td>Mailing Address: 12740 MASON MANOR</td>
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<td>DOLAN MEMORY CARE AT SCHUETZ</td>
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<td>DOUGHERTY FERRY ASSISTED LIVING &amp; MEMORY CARE</td>
<td>2929 DOUGHERTY FERRY RD</td>
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<td>Yes</td>
<td>No</td>
<td>(636) 825-6665</td>
<td>30034</td>
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<tr>
<td>Mailing Address: 2929 DOUGHERTY FERRY RD</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>63122-3368</td>
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<td>DUNSDOWN HOUSE LLC</td>
<td>5890 EICHELBERGER ST</td>
<td>SAINT LOUIS</td>
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<td>No</td>
<td>Yes</td>
<td>314-752-1901</td>
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<td>Mailing Address: 5890 EICHELBERGER ST</td>
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<td>Yes</td>
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<thead>
<tr>
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<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Region</th>
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<td>No</td>
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* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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Wednesday, April 03, 2019
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FOUNTAIN VIEW AT FRIENDSHIP VILLAGE SUNSET HILLS
12777 POINTE DR
SAINT LOUIS MO 63127-1757
Mailing Address 12777 POINTE DR
SAINT LOUIS MO 63127-1757
Telephone (314) 270-7111
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit Yes
Bed Capacity 78
DMH Licensed No
Facility Number 02703

FOUNTAINBLEAU LODGE
2001 NORTH KINGSHIGHWAY
CAPE GIRARDEAU MO 63701-2127
Mailing Address 2001 NORTH KINGSHIGHWAY
CAPE GIRARDEAU MO 63701-2127
Telephone (573) 335-1999
Level of Care: ALF
County CAPE GIRARDEAU
Region 2
Alzheimer's Unit No
Bed Capacity 56
DMH Licensed No
Facility Number 12751

FOUNTAINBLEAU LODGE
2001 NORTH KINGSHIGHWAY
CAPE GIRARDEAU MO 63701-2127
Mailing Address 2001 NORTH KINGSHIGHWAY
CAPE GIRARDEAU MO 63701-2127
Telephone (573) 335-1999
Level of Care: SNF
County CAPE GIRARDEAU
Region 2
Alzheimer's Unit No
Bed Capacity 33
DMH Licensed No
Facility Number 12751

FOUNTAINBLEAU NURSING CENTER
1349 HIGHWAY 61
FESTUS MO 63028-4107
Mailing Address PO BOX 700
FESTUS MO 63028-0700
Telephone (636) 937-3500
Level of Care: SNF
County JEFFERSON
Region 2
Alzheimer's Unit No
Bed Capacity 106
DMH Licensed No
Facility Number 17080

FOUNTAINS OF WEST COUNTY AL, LLC THE
15822 CLAYTON RD
ELLISVILLE MO 63011-2240
Mailing Address 15822 CLAYTON RD
ELLISVILLE MO 63011-2240
Telephone (636) 220-1660
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit Yes
Bed Capacity 80
DMH Licensed No
Facility Number 29435

FOUR SEASONS ASSISTED LIVING
230 RAILROAD ST
MOSCOW MILLS MO 63362-1600
Mailing Address 230 RAILROAD ST
MOSCOW MILLS MO 63362-1600
Telephone (636) 366-4231
Level of Care: ALF
County LINCOLN
Region 5
Alzheimer's Unit No
Bed Capacity 30
DMH Licensed Yes
Facility Number 02624

FOUR SEASONS LIVING CENTER
2800 HIGHWAY TT
SEDALIA MO 65301-1410
Mailing Address 2800 HIGHWAY TT
SEDALIA MO 65301-1410
Telephone (660) 826-8803
Level of Care: SNF
County PETTIS
Region 6
Alzheimer's Unit Yes
Bed Capacity 239
DMH Licensed No
Facility Number 00836

FOUR SEASONS RCF I
220 RAILROAD ST
MOSCOW MILLS MO 63362-1600
Mailing Address 230 RAILROAD ST
MOSCOW MILLS MO 63362-1600
Telephone (636) 366-4231
Level of Care: RCF
County LINCOLN
Region 5
Alzheimer's Unit No
Bed Capacity 23
DMH Licensed Yes
Facility Number 02624

FOXBERRY TERRACE - ASSISTED LIVING BY AMERICARE
4316 N ST LOUIS AVE
WEBB CITY MO 64870-9550
Mailing Address 4316 NORTH ST LOUIS AVE
WEBB CITY MO 64870-9550
Telephone (417) 625-1000
Level of Care: ALF**
County JASPER
Region 1
Alzheimer's Unit No
Bed Capacity 46
DMH Licensed No
Facility Number 25428

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FRIENDSHIP VILLAGE SUNSET HILLS
12509 VILLAGE CIRCLE DR
SAINT LOUIS MO 63127-1701
Mailing Address 12509 VILLAGE CIRCLE DR
SAINT LOUIS MO 63127-1701
Telephone (314) 842-6840 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 118
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 02703

FRONTIER HEALTH & REHABILITATION
2840 WEST CLAY ST
SAINT CHARLES MO 63301-2536
Mailing Address 2840 WEST CLAY ST
SAINT CHARLES MO 63301-2536
Telephone (636) 946-6100 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 180
County SAINT CHARLES DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 01521

FULTON MANOR CARE CENTER
520 MANOR DR
FULTON MO 65251-2429
Mailing Address 520 MANOR DR
FULTON MO 65251-2429
Telephone (573) 642-6834 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 52
County CALLAWAY DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 02725

FULTON NURSING & REHAB
1510 BLUFF ST
FULTON MO 65251-2345
Mailing Address 1510 BLUFF ST
FULTON MO 65251-2345
Telephone (573) 642-0202 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 100
County CALLAWAY DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 03492

FULTON PRESBYTERIAN MANOR
811 CENTER ST
FULTON MO 65251-1922
Mailing Address 811 CENTER ST
FULTON MO 65251-1922
Telephone (573) 642-6646 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 36
County CALLAWAY DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 18735

FULTON PRESBYTERIAN MANOR
811 CENTER ST
FULTON MO 65251-1922
Mailing Address 811 CENTER ST
FULTON MO 65251-1922
Telephone (573) 642-6646 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 41
County CALLAWAY DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 18735

GABLES AT BRADY CIRCLE, LLC THE
11 BRADY CIRCLE
SAINT LOUIS MO 63114-1110
Mailing Address 11 BRADY CIRCLE
SAINT LOUIS MO 63114-1110
Telephone (314) 890-2230 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 24
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 30048

GAINESVILLE HEALTH CARE CENTER
77 MEDICAL DR
GAINESVILLE MO 65655-0628
Mailing Address PO BOX 628
GAINESVILLE MO 65655-0628
Telephone (417) 679-4921 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 99
County OZARK DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 12868

GAMMA ROAD LODGE
250 E LOCUST
WELLSVILLE MO 63384-1422
Mailing Address 250 E LOCUST
WELLSVILLE MO 63384-1422
Telephone (573) 684-2002 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 112
County MONTGOMERY DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 02740

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Wednesday, April 03, 2019
**PLATTE County**  
*Bed Capacity: 100*  
*DMH Licensed: No*  
*Facility Number: 23774*

**GREENE County**  
*Bed Capacity: 148*  
*DMH Licensed: No*  
*Facility Number: 20288*

**SAINT LOUIS City**  
*Bed Capacity: 19*  
*DMH Licensed: Yes*  
*Facility Number: 14143*

**LEBANON**  
*Bed Capacity: 80*  
*DMH Licensed: Yes*  
*Facility Number: 08791*

**MARSHALL**  
*Bed Capacity: 11*  
*DMH Licensed: No*  
*Facility Number: 00633*

**POTOSI**  
*Bed Capacity: 120*  
*DMH Licensed: No*  
*Facility Number: 02830*

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<th>Facility Name</th>
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<th>Telephone</th>
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<tr>
<td>GERALD NURSING &amp; REHAB</td>
<td>533 CANAAN ROAD</td>
<td>GERALD, MO 63037-2515</td>
<td>(573) 764-2135</td>
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<td>GIDEON CARE CENTER</td>
<td>300 LUNBECK</td>
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<td>(573) 448-3505</td>
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<td>GLASGOW GARDENS</td>
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<td>(417) 889-9955</td>
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<td>(636) 447-4449</td>
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Wednesday, April 03, 2019
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<td>65340-5303</td>
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GRANBY HOUSE
301 SOUTH MAIN
GRANBY MO 64844-8336
Mailing Address 301 SOUTH MAIN
GRANBY MO 64844-8336
Telephone (417) 472-6271
Level of Care: SNF
County NEWTON
Region 1 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 16481

GRAND MANOR NURSING & REHABILITATION CENTER
3645 COOK AVE
SAINT LOUIS MO 63113-3801
Mailing Address 3645 COOK AVE
SAINT LOUIS MO 63113-3801
Telephone (314) 531-2352
Level of Care: SNF
County SAINT LOUIS CITY
Region 7 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 120
DMH Licensed No
Facility Number 13324

GRAND PAVILION HEALTH AND REHAB, THE
4330 WASHINGTON
KANSAS CITY MO 64111-3340
Mailing Address 4330 WASHINGTON
KANSAS CITY MO 64111-3340
Telephone (816) 753-6800
Level of Care: SNF
County JACKSON
Region 3 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 154
DMH Licensed No
Facility Number 05989

GRAND RIVER HEALTH CARE
118 TRENTON RD
CHILlicothe MO 64601-4002
Mailing Address 118 TRENTON RD
CHILlicothe MO 64601-4002
Telephone (660) 646-0353
Level of Care: SNF
County LIVINGSTON
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 16939

GRANDVIEW HEALTHCARE CENTER
201 GRAND AVE
WASHINGTON MO 63090-1209
Mailing Address 201 GRAND AVE
WASHINGTON MO 63090-1209
Telephone (636) 239-9190
Level of Care: SNF
County FRANKLIN
Region 6 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 102
DMH Licensed No
Facility Number 15045

GRANITE HOUSE RCF
321 SOUTH MAIN ST
IRONTON MO 63650-1406
Mailing Address PO BOX 66
IRONTON MO 63650-0066
Telephone (573) 546-7283
Level of Care: RCF
County IRON
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed Yes
Facility Number 04628

GREATER HEIGHTS RCF, LLC
600 NORTH FRONT ST
PARK HILLS MO 63601-3804
Mailing Address PO BOX 603
PARK HILLS MO 63601-0603
Telephone (573) 431-0344
Level of Care: RCF
County SAINT FRANCOIS
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 40
DMH Licensed Yes
Facility Number 07181

GREEN ACRES RESIDENTIAL CARE FACILITY, LLC
3688 SAND CREEK ROAD
FARMINGTON MO 63640-7350
Mailing Address 3688 SAND CREEK RD
FARMINGTON MO 63640-7350
Telephone (573) 756-2917
Level of Care: RCF
County SAINT FRANCOIS
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 12
DMH Licensed Yes
Facility Number 17289

GREEN MEADOWS RETIREMENT HOME
411 NORTH KINGSHIGHWAY
SIKESTON MO 63676-3014
Mailing Address PO BOX 909
SIKESTON MO 63681-0909
Telephone (573) 471-5503
Level of Care: ALF
County SCOTT
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 66
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<tr>
<td>GREEN PARK SENIOR LIVING COMMUNITY</td>
<td>(314) 845-0900</td>
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<td>7</td>
<td>17565</td>
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<tr>
<td>GREENVILLE HEALTH CARE CENTER</td>
<td>(573) 224-3298</td>
<td>SNF</td>
<td>60</td>
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<td>GREGORY RIDGE HEALTH CARE CENTER</td>
<td>(816) 333-0700</td>
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<td>HAMPTON HOUSE OF MALDEN, INC</td>
<td>(573) 276-6054</td>
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<tr>
<td>HARAMBEE HOUSE, INC</td>
<td>(573) 443-6972</td>
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<td>HARBOR PLACE - LINN</td>
<td>573-897-2100</td>
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<td>24</td>
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<tr>
<td>HARBOR PLACE ESTATES, LLC</td>
<td>(636) 377-4444</td>
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<td>HARMONY GARDENS - ASSISTED LIVING BY AMERICARE</td>
<td>(660) 747-5411</td>
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<td>HAROLD AND LOUISE ASSISTED LIVING</td>
<td>(573) 221-1189</td>
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<td>47</td>
<td>Yes</td>
<td>No</td>
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</table>

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**HARRIS HOUSE RESIDENTIAL CARE FACILITY, THE**  
3859 EAST 59TH TERRACE  
KANSAS CITY  
MO 64130-4410  
Mailing Address: 3859 EAST 59TH TERRACE  
KANSAS CITY  
MO 64130-4410  
Telephone: (816) 349-3530  
Level of Care: RCF  
County: JACKSON  
Bed Capacity: 7  
DMH Licensed: No  
Facility Number: 16225  
Region: 3

**HARRIS MANOR CARE CENTER**  
401 SOUTH HENRY  
FARMINGTON  
MO 63640-1823  
Mailing Address: PO BOX 675  
FARMINGTON  
MO 63640-0675  
Telephone: (573) 756-5376  
Level of Care: RCF*  
County: SAINT FRANCOIS  
Bed Capacity: 37  
DMH Licensed: Yes  
Facility Number: 02256  
Region: 2

**HARTLAND RESIDENTIAL CARE CENTER**  
23435 LADDER DR  
MARSHALL  
MO 65340-4662  
Mailing Address: 23435 LADDER DR  
MARSHALL  
MO 65340-4662  
Telephone: (660) 886-7093  
Level of Care: RCF  
County: SALINE  
Bed Capacity: 12  
DMH Licensed: No  
Facility Number: 15163  
Region: 5

**HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE**  
615 RANKIN MILL LN  
BOONVILLE  
MO 65233-2873  
Mailing Address: 615 RANKIN MILL LN  
BOONVILLE  
MO 65233-2873  
Telephone: (660) 882-9933  
Level of Care: ALF**  
County: COOPER  
Bed Capacity: 42  
DMH Licensed: No  
Facility Number: 26026  
Region: 6

**HARTVILLE CARE CENTER**  
649 WEST ROLLA ST  
HARTVILLE  
MO 65667-8221  
Mailing Address: 649 WEST ROLLA ST  
HARTVILLE  
MO 65667-8221  
Telephone: (417) 741-6192  
Level of Care: SNF  
County: WRIGHT  
Bed Capacity: 60  
DMH Licensed: No  
Facility Number: 17946  
Region: 1

**HARVESTER RESIDENTIAL CARE**  
35 LILLIAN DR  
SAINT CHARLES  
MO 63304-7032  
Mailing Address: 35 LILLIAN DR  
SAINT CHARLES  
MO 63304-7032  
Telephone: (636) 939-3833  
Level of Care: RCF*  
County: SAINT CHARLES  
Bed Capacity: 38  
DMH Licensed: Yes  
Facility Number: 03411  
Region: 5

**HAVEN, THE**  
614 SOUTH BY-PASS  
KENNETT  
MO 63857-3240  
Mailing Address: 614 SOUTH BY-PASS  
KENNETT  
MO 63857-3240  
Telephone: (573) 888-1201  
Level of Care: RCF*  
County: DUNKLIN  
Bed Capacity: 64  
DMH Licensed: Yes  
Facility Number: 27620  
Region: 2

**HEART OF THE OZARKS HEALTHCARE CENTER**  
2004 CRESTVIEW ST  
AVA  
MO 65608-8903  
Mailing Address: PO BOX 727  
AVA  
MO 65608-0727  
Telephone: (417) 683-4129  
Level of Care: SNF  
County: DOUGLAS  
Bed Capacity: 120  
DMH Licensed: No  
Facility Number: 01290  
Region: 1

**HEARTLAND CARE AND REHABILITATION CENTER**  
2525 BOUTIN DR  
CAPE GIRARDEAU  
MO 63701-8551  
Mailing Address: 2525 BOUTIN DR  
CAPE GIRARDEAU  
MO 63701-8551  
Telephone: (573) 334-5225  
Level of Care: SNF  
County: CAPE GIRARDEAU  
Bed Capacity: 102  
DMH Licensed: No  
Facility Number: 01023  
Region: 2

---

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Wednesday, April 03, 2019
<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City, State</th>
<th>Phone</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>HEARTLAND II RCF</td>
<td>117 SOUTH 15TH ST</td>
<td>SAINT JOSEPH, MO</td>
<td>(816) 676-1505</td>
<td>RCF*</td>
<td>52</td>
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<td>Yes</td>
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</tr>
<tr>
<td>HEARTLAND RESIDENTIAL CARE FACILITY, INC</td>
<td>1311 FRANCIS ST</td>
<td>SAINT JOSEPH, MO</td>
<td>(816) 233-5779</td>
<td>RCF</td>
<td>20</td>
<td>BUCHANAN</td>
<td>Yes</td>
<td>02491</td>
</tr>
<tr>
<td>HEISINGER LUTHERAN HOME</td>
<td>1002 WEST MAIN ST</td>
<td>JEFFERSON CITY, MO</td>
<td>(573) 636-6288</td>
<td>SNF</td>
<td>60</td>
<td>COLE</td>
<td>No</td>
<td>03479</td>
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<tr>
<td>HEISINGER LUTHERAN HOME</td>
<td>1002 WEST MAIN ST</td>
<td>JEFFERSON CITY, MO</td>
<td>(573) 636-6288</td>
<td>ALF**</td>
<td>111</td>
<td>COLE</td>
<td>No</td>
<td>03479</td>
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<tr>
<td>HERITAGE AVONLEA OF GLADSTONE, LLC</td>
<td>2801 NE 60TH ST</td>
<td>GLADSTONE, MO</td>
<td>(816) 454-7755</td>
<td>RCF</td>
<td>120</td>
<td>CLAY</td>
<td>No</td>
<td>00411</td>
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<tr>
<td>HERITAGE CARE CENTER</td>
<td>4401 NORTH HANLEY RD</td>
<td>SAINT LOUIS, MO</td>
<td>(314) 521-7471</td>
<td>SNF</td>
<td>60</td>
<td>SAINT LOUIS COUNTY</td>
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<td>03069</td>
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<tr>
<td>HERITAGE HALL NURSING CENTER</td>
<td>750 EAST HIGHWAY 22</td>
<td>CENTRALIA, MO</td>
<td>(573) 682-5551</td>
<td>SNF</td>
<td>60</td>
<td>BOONE</td>
<td>No</td>
<td>03069</td>
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<tr>
<td>HERITAGE HILLS ASSISTED LIVING FACILITY</td>
<td>ROUTE 5, BOX 68</td>
<td>PATTON, MO</td>
<td>(573) 866-2003</td>
<td>ALF</td>
<td>24</td>
<td>BOLLINGER</td>
<td>Yes</td>
<td>18783</td>
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<tr>
<td>HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICARE</td>
<td>1802 SAINT FRANCIS ST</td>
<td>KENNETT, MO</td>
<td>(573) 888-1044</td>
<td>SNF</td>
<td>72</td>
<td>DUNKLIN</td>
<td>No</td>
<td>17533</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Phone Number</th>
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<th>Bed Capacity</th>
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<th>Facility Number</th>
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<tr>
<td>Heritage Village of Gladstone</td>
<td>3000 North East 64th St</td>
<td>Gladstone</td>
<td>MO</td>
<td>64119-1569</td>
<td>(816) 454-5130</td>
<td>RCF*</td>
<td>60</td>
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<tr>
<td>Heritage Village of Platte City</td>
<td>15 Wallingford Dr</td>
<td>Platte City</td>
<td>MO</td>
<td>64079-9604</td>
<td>(816) 858-2182</td>
<td>RCF*</td>
<td>30</td>
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<tr>
<td>Heritage Nursing &amp; Rehab</td>
<td>18599 First Street</td>
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<td>MO</td>
<td>65668-9129</td>
<td>(417) 745-2111</td>
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<td>Hickory Manor</td>
<td>209 Hickory St</td>
<td>Licking</td>
<td>MO</td>
<td>65542-9847</td>
<td>(573) 674-2111</td>
<td>SNF</td>
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<td>07929</td>
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<tr>
<td>Hidden Lake Care Center</td>
<td>11400 Hidden Lake Dr</td>
<td>Raytown</td>
<td>MO</td>
<td>64133-7409</td>
<td>(816) 737-1010</td>
<td>RCF*</td>
<td>48</td>
<td>No</td>
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<tr>
<td>Hidden Lake Care Center</td>
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<td>MO</td>
<td>64133-7409</td>
<td>(816) 737-1010</td>
<td>SNF</td>
<td>112</td>
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<tr>
<td>Highland Crest - Assisted Living by Americare</td>
<td>2204 S Halliburton St</td>
<td>Kirksville</td>
<td>MO</td>
<td>63501-4651</td>
<td>(660) 627-8004</td>
<td>ALF**</td>
<td>42</td>
<td>No</td>
<td>16785</td>
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<tr>
<td>Highland Home</td>
<td>1325 South Highland Court</td>
<td>Marshall</td>
<td>MO</td>
<td>65340-3058</td>
<td>(660) 886-8675</td>
<td>RCF</td>
<td>18</td>
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<tr>
<td>Highland Rehabilitation &amp; Health Care Center</td>
<td>904 East 68th St</td>
<td>Kansas City</td>
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<td>64131-1305</td>
<td>(816) 333-5485</td>
<td>SNF</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
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<th>County</th>
<th>Bed Capacity</th>
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<tr>
<td>HILDA FUWELL'S RESIDENTIAL CARE FACILITY</td>
<td>17382 STATE HWY 25, DEXTER, MO 63841-9710</td>
<td>(573) 568-2056</td>
<td>RCF</td>
<td>STODDARD</td>
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<td>07863</td>
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<tr>
<td>HILL CREST MANOR</td>
<td>801 SOUTH COLBY, HAMILTON, MO 64644-8287</td>
<td>(816) 583-2119</td>
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<td>HILL CREST MANOR</td>
<td>801 SOUTH COLBY, HAMILTON, MO 64644-8287</td>
<td>(636) 586-3022</td>
<td>SNF</td>
<td>JEFFERSON</td>
<td>120</td>
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<tr>
<td>HILL CREST RESIDENTIAL CARE, INC</td>
<td>9415 NORTH BROWN STATION RD, COLUMBIA, MO 65202-8671</td>
<td>(573) 696-3201</td>
<td>ALF</td>
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<tr>
<td>HILLSIDE CARE CENTER</td>
<td>321 NORTH SECTION, HANNIBAL, MO 63401-3460</td>
<td>(573) 221-1439</td>
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<td>MARION</td>
<td>44</td>
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<td>HILLSIDE LIVING CENTER</td>
<td>10109 RESTORATION CIRCLE, MINERAL POINT, MO 63660-8538</td>
<td>(573) 562-0303</td>
<td>ALF**</td>
<td>WASHINGTON</td>
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<td>Yes</td>
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<tr>
<td>HILLSIDE MANOR HEALTHCARE AND REHAB CENTER</td>
<td>1265 MCLARAN AVE, SAINT LOUIS, MO 63147-1606</td>
<td>(314) 388-4121</td>
<td>SNF</td>
<td>SAINT LOUIS CITY</td>
<td>208</td>
<td>No</td>
<td>04687</td>
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<tr>
<td>HILLTOP HAVEN</td>
<td>18941 CR 305A, EMINENCE, MO 65466-9702</td>
<td>(573) 226-5426</td>
<td>RCF</td>
<td>SHANNON</td>
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### HILLVIEW NURSING & REHAB

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<tr>
<th>Telephone</th>
<th>(816) 858-5222</th>
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<td>Level of Care:</td>
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<tr>
<td>County:</td>
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### HOLDEN MANOR CARE CENTER

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<th>Telephone</th>
<th>(816) 732-4138</th>
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<td>Level of Care:</td>
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<tr>
<td>County:</td>
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<td>Bed Capacity</td>
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### HOLIDAY RESIDENTIAL CARE

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<th>Telephone</th>
<th>(573) 547-7398</th>
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<td>Level of Care:</td>
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### HOLLY HILLS RETIREMENT HOME

<table>
<thead>
<tr>
<th>Telephone</th>
<th>(314) 351-0767</th>
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<td>Level of Care:</td>
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<td>County:</td>
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<td>Region:</td>
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### HOPE CARE CENTER

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<tr>
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<th>(816) 523-3988</th>
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### HOPEDALE COTTAGE ASSISTED LIVING THE

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<th>Telephone</th>
<th>(417) 581-1308</th>
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<td>Level of Care:</td>
<td>ALF**</td>
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<tr>
<td>County:</td>
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<td>Region:</td>
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### HOUSE OF CARE CENTER

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<tr>
<th>Telephone</th>
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<td>RCF</td>
</tr>
<tr>
<td>County:</td>
<td>JACKSON</td>
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<tr>
<td>Region:</td>
<td>3</td>
</tr>
<tr>
<td>Bed Capacity</td>
<td>8</td>
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<tr>
<td>DMH Licensed</td>
<td>Yes</td>
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<tr>
<td>Facility Number</td>
<td>17001</td>
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### HOUSTON HOUSE

<table>
<thead>
<tr>
<th>Telephone</th>
<th>(417) 967-2527</th>
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<tr>
<td>Level of Care:</td>
<td>SNF</td>
</tr>
<tr>
<td>County:</td>
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<td>Region:</td>
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<td>Bed Capacity</td>
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### HUDSON HOUSE

<table>
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<td>Facility Number</td>
<td>10444</td>
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Wednesday, April 03, 2019
HUNTER ACRES CARING CENTER
628 NORTH WEST ST
SIKESTON  MO  63801-4738
Mailing Address  628 NORTH WEST ST
SIKESTON  MO  63801-4738
Telephone  (573) 471-7130
Level of Care:  SNF
Bed Capacity  120
County  SCOTT
DMH Licensed  No
Region  2  Medicare/Medicaid
Facility Number  07345

IGNITE MEDICAL RESORT KANSAS CITY LLC
2100 NW BARRY ROAD
KANSAS CITY  MO  64154-1000
Mailing Address  2100 NW BARRY ROAD
KANSAS CITY  MO  64154-1000
Telephone  (816) 521-6610
Level of Care:  SNF
Bed Capacity  90
County  PLATTE
DMH Licensed  No
Region  4  Medicare/Medicaid
Facility Number  31464

INDEPENDENCE CARE CENTER OF PERRY COUNTY
800 SOUTH KINGSHIGHWAY
PERRYVILLE  MO  63775-2106
Mailing Address  800 SOUTH KINGSHWY
PERRYVILLE  MO  63775-2106
Telephone  (573) 547-6546
Level of Care:  SNF
Bed Capacity  133
County  PERRY
DMH Licensed  No
Region  2  Medicare/Medicaid
Facility Number  06393

INDEPENDENCE CHATEAU
17441 EAST MEDICAL CENTER PARKWAY
INDEPENDENCE  MO  64057-1805
Mailing Address  17441 EAST MEDICAL CENTER PRKwy
INDEPENDENCE  MO  64057-1805
Telephone  (816) 478-1991
Level of Care:  RCF
Bed Capacity  20
County  JACKSON
DMH Licensed  No
Region  3  Facility Number  20682

INDEPENDENCE COURT
121 INDEPENDENCE DR
PERRYVILLE  MO  63775-1496
Mailing Address  121 INDEPENDENCE DR
PERRYVILLE  MO  63775-1496
Telephone  (573) 547-1499
Level of Care:  RCF*
Bed Capacity  75
County  PERRY
DMH Licensed  No
Region  2  Facility Number  06393

INDEPENDENCE MANOR CARE CENTER
1600 SOUTH KINGS HIGHWAY
INDEPENDENCE  MO  64055-1853
Mailing Address  1600 S KINGS HWY
INDEPENDENCE  MO  64055-1853
Telephone  (816) 833-4777
Level of Care:  SNF
Bed Capacity  99
County  JACKSON
DMH Licensed  No
Region  3  Medicare/Medicaid
Facility Number  03807

INDEPENDENCE SQUARE RESIDENTIAL CARE CENTER
1136 SOUTH MAIN ST
PERRYVILLE  MO  63775-8802
Mailing Address  1136 S MAIN ST
PERRYVILLE  MO  63775-8802
Telephone  (573) 547-8600
Level of Care:  RCF*
Bed Capacity  20
County  PERRY
DMH Licensed  No
Region  2  Facility Number  14309

INDIAN HILLS - A STONEBRIDGE COMMUNITY
2601 FAIR ST
CHILLICOTHE  MO  64601-3525
Mailing Address  2601 FAIR ST
CHILLICOTHE  MO  64601-3525
Telephone  (660) 646-1230
Level of Care:  SNF
Bed Capacity  75
County  LIVINGSTON
DMH Licensed  No
Region  4  Medicare/Medicaid
Facility Number  03833

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (33rd General Assembly, Second Regular Session (2006)).

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IRONTON RESIDENTIAL CARE, LLC  
101 SOUTH KNOB ST  
IRONTON  
MO 63650-1501  
Telephone: (573) 546-3080  
Level of Care: RCF  
Bed Capacity: 16  
County: IRON  
DMH Licensed: Yes  
Region: 2  
Facility Number: 01901  
Mailing Address: PO BOX 66  
IRONTON  
MO 63650-0066  

J & J RESIDENTIAL CARE FACILITY II  
104 WESBECHER  
MARBLE HILL  
MO 63764-0378  
Telephone: (573) 238-4602  
Level of Care: RCF*  
Bed Capacity: 12  
County: BOLLINGER  
DMH Licensed: Yes  
Region: 2  
Facility Number: 07171  
Mailing Address: PO BOX 378  
MARBLE HILL  
63764-0378  
MO  

JACKSON MANOR NURSING HOME  
710 BROADRIDGE DR  
JACKSON  
MO 63755-3042  
Telephone: (573) 243-3101  
Level of Care: SNF  
Bed Capacity: 90  
County: CAPE GIRARDEAU  
DMH Licensed: No  
Region: 2  
Facility Number: 03438  
Mailing Address: 710 BROADRIDGE DR  
JACKSON  
63755-3042  
MO  

JACOBS CARE CENTER, LLC  
932 WEST STATE  
SPRINGFIELD  
MO 65806-2846  
Telephone: (417) 865-6140  
Level of Care: RCF  
Bed Capacity: 12  
County: GREENE  
DMH Licensed: Yes  
Region: 1  
Facility Number: 06229  
Mailing Address: 932 WEST STATE  
SPRINGFIELD  
65806-2846  
MO  

JAMES RIVER NURSING AND REHABILITATION  
3550 EAST BATTLEFIELD  
SPRINGFIELD  
MO 65809-3400  
Telephone: (417) 889-9500  
Level of Care: SNF  
Bed Capacity: 120  
County: GREENE  
DMH Licensed: No  
Region: 1  
Facility Number: 17645  
Mailing Address: 3550 EAST BATTLEFIELD  
SPRINGFIELD  
65809-3400  
MO  

JANE HOWELL STUPP APARTMENTS  
2443 PROUHET AVE  
OVERLAND  
MO 63114-1946  
Telephone: (314) 890-7100  
Level of Care: RCF*  
Bed Capacity: 30  
County: SAINT LOUIS COUNTY  
DMH Licensed: Yes  
Region: 7  
Facility Number: 18369  
Mailing Address: 2443 PROUHET AVE  
OVERLAND  
63114-1946  
MO  

JEANNE JUGAN CENTER  
8745 JAMES A REED ROAD  
KANSAS CITY  
MO 64138-4414  
Telephone: (816) 761-4744  
Level of Care: RCF*  
Bed Capacity: 24  
County: JACKSON  
DMH Licensed: No  
Region: 3  
Facility Number: 12724  
Mailing Address: 8745 JAMES A REED RD  
KANSAS CITY  
64138-4414  
MO  

JEANNE JUGAN CENTER  
8745 JAMES A REED ROAD  
KANSAS CITY  
MO 64138-4414  
Telephone: (816) 761-4744  
Level of Care: SNF  
Bed Capacity: 26  
County: JACKSON  
DMH Licensed: No  
Region: 3  
Medicaid  
Facility Number: 12724  
Mailing Address: 8745 JAMES A REED RD  
KANSAS CITY  
64138-4414  
MO  

JEANNE JUGAN CENTER  
8745 JAMES A REED ROAD  
KANSAS CITY  
MO 64138-4414  
Telephone: (816) 761-4744  
Level of Care: SNF  
Bed Capacity: 26  
County: JACKSON  
DMH Licensed: No  
Region: 3  
Medicaid  
Facility Number: 12724  
Mailing Address: 8745 JAMES A REED RD  
KANSAS CITY  
64138-4414  
MO  

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>JEFFERSON CITY MANOR CARE CENTER</td>
<td>1720 VIETH DR</td>
<td>JEFFERSON</td>
<td>MO</td>
<td>6</td>
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<td>102</td>
<td>No</td>
<td>03870</td>
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<tr>
<td>JEFFERSON CITY NURSING AND REHABILITATION CENTER, LLC</td>
<td>1221 SOUTHGATE LN</td>
<td>JEFFERSON</td>
<td>MO</td>
<td>6</td>
<td>SNF</td>
<td>120</td>
<td>No</td>
<td>01865</td>
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<tr>
<td>JEFFERSON GARDENS - ASSISTED LIVING BY AMERICARE</td>
<td>509 WEST ROGERS ST</td>
<td>CLINTON</td>
<td>MO</td>
<td>1</td>
<td>ALF**</td>
<td>42</td>
<td>No</td>
<td>20603</td>
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<tr>
<td>JEFFERSON HEALTH CARE</td>
<td>615 SW OLDHAM PARKWAY</td>
<td>LEE'S SUMMIT</td>
<td>MO</td>
<td>3</td>
<td>SNF</td>
<td>120</td>
<td>No</td>
<td>04415</td>
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<td>JEFFERSON MANOR</td>
<td>902 JEFFERSON AVE</td>
<td>CAPE GIRARDEAU</td>
<td>MO</td>
<td>2</td>
<td>RCF</td>
<td>10</td>
<td>Yes</td>
<td>05445</td>
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<tr>
<td>JOE CLARK RESIDENTIAL CARE HOME</td>
<td>1495 EAST ASHLAND ST</td>
<td>NEVADA</td>
<td>MO</td>
<td>3</td>
<td>ALF**</td>
<td>34</td>
<td>No</td>
<td>23419</td>
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<tr>
<td>JOHN KNOX VILLAGE CARE CENTER</td>
<td>600 NW PRYOR ROAD</td>
<td>LEE'S SUMMIT</td>
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<td>SNF</td>
<td>430</td>
<td>No</td>
<td>14529</td>
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<td>JOHNSON COUNTY CARE CENTER</td>
<td>122 EAST MARKET ST</td>
<td>WARRENSBURG</td>
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<td>JOLET HOME</td>
<td>3920 FOREST</td>
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<td>3</td>
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### JONES' WILDWOOD CARE CENTER

**Address:** 12806 HWY 151
**City:** MADISON
**State:** MO
**Zip Code:** 65263-3114
**Phone:** (660) 291-8636

**Bed Capacity:** 32
**DMH Licensed:** Yes
**Facility Number:** 08573

**Level of Care:** RCF
**County:** MONROE
**Region:** 5
**Medicare/Medicaid:** No
**Alzheimer's Unit:** No

**Mailing Address:** PO BOX 69

---

### JONESBURG NURSING & REHAB

**Address:** 308 CEDAR AVE
**City:** JONESBURG
**State:** MO
**Zip Code:** 63351-1126
**Phone:** (636) 488-5400

**Bed Capacity:** 90
**DMH Licensed:** No
**Facility Number:** 13265

**Level of Care:** SNF
**County:** MONTGOMERY
**Region:** 6
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** No

**Mailing Address:** PO BOX 218

---

### JOPLIN GARDENS

**Address:** 2810 SOUTH JACKSON AVE
**City:** JOPLIN
**State:** MO
**Zip Code:** 64804-2524
**Phone:** (417) 572-0041

**Bed Capacity:** 120
**DMH Licensed:** No
**Facility Number:** 01373

**Level of Care:** SNF
**County:** JASPER
**Region:** 1
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** No

**Mailing Address:** 2810 SOUTH JACKSON AVE

---

### JOPLIN HEALTH AND REHABILITATION CENTER

**Address:** 2218 WEST 32ND ST
**City:** JOPLIN
**State:** MO
**Zip Code:** 64804-3514
**Phone:** (417) 623-5264

**Bed Capacity:** 12583
**DMH Licensed:** Yes
**Facility Number:** 12583

**Level of Care:** SNF
**County:** NEWTON
**Region:** 1
**Medicare/Medicaid:** No
**Alzheimer's Unit:** No

**Mailing Address:** 2218 WEST 32ND ST

---

### JORDAN CREEK NURSING & REHAB

**Address:** 910 SOUTH WEST AVE
**City:** SPRINGFIELD
**State:** MO
**Zip Code:** 65802-4950
**Phone:** (417) 865-8741

**Bed Capacity:** 120
**DMH Licensed:** Yes
**Facility Number:** 03245

**Level of Care:** SNF
**County:** GREENE
**Region:** 1
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** Yes

**Mailing Address:** 910 SOUTH WEST AVE

---

### JOY ADULT CARE CENTER

**Address:** 614 SOUTH MAIN
**City:** CLINTON
**State:** MO
**Zip Code:** 64735-2620
**Phone:** (660) 885-8328

**Bed Capacity:** 42
**DMH Licensed:** Yes
**Facility Number:** 07268

**Level of Care:** RCF*
**County:** HENRY
**Region:** 1
**Medicare/Medicaid:** No
**Alzheimer's Unit:** No

**Mailing Address:** PO BOX 8

---

### JOY ASSISTED LIVING FOR SENIORS

**Address:** 2030 W MOUNT VERNON ST
**City:** SPRINGFIELD
**State:** MO
**Zip Code:** 65802-4846
**Phone:** (417) 864-8805

**Bed Capacity:** 74
**DMH Licensed:** Yes
**Facility Number:** 19668

**Level of Care:** ALF
**County:** GREENE
**Region:** 1
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** No

**Mailing Address:** PO BOX 9655

---

### KABUL NURSING HOMES, INC

**Address:** 1000 MAIN ST
**City:** CABOOL
**State:** MO
**Zip Code:** 65689-9125
**Phone:** (417) 962-3713

**Bed Capacity:** 99
**DMH Licensed:** No
**Facility Number:** 04085

**Level of Care:** SNF
**County:** TEXAS
**Region:** 1
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** No

**Mailing Address:** 1000 MAIN ST

---

### KANSAS CITY CENTER FOR REHABILITATION AND HEALTHCARE

**Address:** 12942 WORNALL RD
**City:** KANSAS CITY
**State:** MO
**Zip Code:** 64145-1253
**Phone:** (816) 423-8500

**Bed Capacity:** 105
**DMH Licensed:** No
**Facility Number:** 06044

**Level of Care:** RCF*
**County:** JACKSON
**Region:** 3
**Medicare/Medicaid:** Yes
**Alzheimer's Unit:** No

**Mailing Address:** 12942 WORNALL RD

---

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Wednesday, April 03, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>12942 WORNALL RD</th>
<th>KANSAS CITY</th>
<th>MO 64145-1253</th>
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<tr>
<td>Telephone</td>
<td>(816) 423-8500</td>
<td>Alzheimer's Unit</td>
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<td>Bed Capacity</td>
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**Kasey Paige Assisted Living**

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<th>Facility Name</th>
<th>3715 JAMIESON AVE</th>
<th>SAINT LOUIS</th>
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<tbody>
<tr>
<td>Telephone</td>
<td>(314) 781-0222</td>
<td>Alzheimer's Unit</td>
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**Katy Manor**

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<th>Facility Name</th>
<th>205 PROSPECT</th>
<th>PILOT GROVE</th>
<th>MO 65276-1111</th>
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<tbody>
<tr>
<td>Telephone</td>
<td>(660) 834-3111</td>
<td>Alzheimer's Unit</td>
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<tr>
<td>Bed Capacity</td>
<td>60</td>
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**Keaton Center**

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<tr>
<th>Facility Name</th>
<th>120 N MILL ST</th>
<th>FESTUS</th>
<th>MO 63028-1816</th>
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<tbody>
<tr>
<td>Telephone</td>
<td>(636) 232-2323</td>
<td>Alzheimer's Unit</td>
<td>No</td>
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<td>Bed Capacity</td>
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**Kidwell Home**

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<tr>
<th>Facility Name</th>
<th>1000 KIDWELL DR</th>
<th>VERSAILLES</th>
<th>MO 65084-1177</th>
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<tbody>
<tr>
<td>Telephone</td>
<td>(573) 378-5175</td>
<td>Alzheimer's Unit</td>
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<td>Bed Capacity</td>
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<td>County</td>
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**King City Manor**

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<tr>
<th>Facility Name</th>
<th>300 WEST FAIRVIEW</th>
<th>KING CITY</th>
<th>MO 64463-9606</th>
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<tr>
<td>Telephone</td>
<td>(660) 535-4325</td>
<td>Alzheimer's Unit</td>
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<td>Bed Capacity</td>
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<td>DMH Licensed: No</td>
<td>Facility Number</td>
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<td>County</td>
<td>GENTRY</td>
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**King's Daughters Home, The**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>620 WEST BOULEVARD ST</th>
<th>MEXICO</th>
<th>MO 65265-2199</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone</td>
<td>(573) 581-1577</td>
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<td>Bed Capacity</td>
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**King's Daughters Home, The**

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<th>Facility Name</th>
<th>620 WEST BOULEVARD ST</th>
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**Kingswood**

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<table>
<thead>
<tr>
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<td>145 4TH ST</td>
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<td>(573) 745-0874</td>
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<td>(636) 947-1100</td>
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<td>LAKE VIEW RESIDENTIAL CARE, LLC</td>
<td>HC 2, BOX 2070</td>
<td>WAPPAPELLO</td>
<td>MO</td>
<td>(573) 222-8676</td>
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<td>102 SOUTH BOLIVAR RD</td>
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<td>(417) 754-2272</td>
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<td>LAKESIDE MANOR</td>
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<td>MO</td>
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<td>LAKESIDE MEADOWS - A STONEBRIDGE COMMUNITY</td>
<td>872 COLLEGE BLVD</td>
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<td>(573) 302-0900</td>
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<th>Facility Name</th>
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**Laurie Care Center**

- **Address:** 610 HWY O, LAURIE, MO 65038-1068
- **Telephone:** (573) 374-8263
- **Level of Care:** SNF
- **County:** MORGAN
- **Bed Capacity:** 108
- **Alzheimer's Unit:** Yes
- **Medicare/Medicaid:** Yes
- **Facility Number:** 04449

**Laurie Knolls**

- **Address:** 610 HWY O, LAURIE, MO 65038-1068
- **Telephone:** (573) 374-8263
- **Level of Care:** RCF*
- **County:** MORGAN
- **Bed Capacity:** 66
- **Alzheimer's Unit:** No
- **Medicare/Medicaid:** Yes
- **Facility Number:** 13765

**LaVerne Senior Living**

- **Address:** 904 HALL AVE, SAVANNAH, MO 64485-1952
- **Telephone:** (816) 324-8263
- **Level of Care:** SNF
- **County:** ANDREW
- **Bed Capacity:** 120
- **Alzheimer's Unit:** No
- **Medicare/Medicaid:** Yes
- **Facility Number:** 04478

**Lawrence County Manor**

- **Address:** 915 CARL ALLEN ST, MT VERNON, MO 65712-1612
- **Telephone:** (417) 466-2183
- **Level of Care:** SNF
- **County:** LAWRENCE
- **Bed Capacity:** 90
- **Alzheimer's Unit:** No
- **Medicare/Medicaid:** Yes
- **Facility Number:** 04349

**Lawrence County Residential Care Center**

- **Address:** 915 CARL ALLEN ST, MT VERNON, MO 65712-1612
- **Telephone:** (417) 466-2183
- **Level of Care:** RCF*
- **County:** LAWRENCE
- **Bed Capacity:** 30
- **Alzheimer's Unit:** No
- **Medicare/Medicaid:** Yes
- **Facility Number:** 04349

**Lawson Manor & Rehab**

- **Address:** 210 WEST 8TH TERRACE, LAWSON, MO 64062-9357
- **Telephone:** (816) 580-3269
- **Level of Care:** SNF
- **County:** RAY
- **Bed Capacity:** 60
- **Alzheimer's Unit:** Yes
- **Medicare/Medicaid:** No
- **Facility Number:** 07395

**Lebanon North Nursing & Rehab**

- **Address:** 596 MORTON RD, LEBANON, MO 65536-3648
- **Telephone:** (417) 532-9173
- **Level of Care:** SNF
- **County:** LACLEDE
- **Bed Capacity:** 180
- **Alzheimer's Unit:** Yes
- **Medicare/Medicaid:** No
- **Facility Number:** 04369

**Lebanon South Nursing & Rehab**

- **Address:** 514 WEST FREMONT RD, LEBANON, MO 65536-4244
- **Telephone:** (417) 532-5351
- **Level of Care:** RCF
- **County:** LACLEDE
- **Bed Capacity:** 68
- **Alzheimer's Unit:** No
- **Medicare/Medicaid:** No
- **Facility Number:** 15650

**Lebanon South Nursing & Rehab**

- **Address:** 514 WEST FREMONT ROAD, LEBANON, MO 65536-4244
- **Telephone:** (417) 532-5351
- **Level of Care:** SNF
- **County:** LACLEDE
- **Bed Capacity:** 116
- **Alzheimer's Unit:** Yes
- **Medicare/Medicaid:** No
- **Facility Number:** 15650

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Wednesday, April 03, 2019
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<p>| Facility Name                          | Address                     | City    | State | Zip       | Telephone          | Level of Care | County     | Bed Capacity | DMH Licensed | Facility Number |
|---------------------------------------|-----------------------------|---------|-------|-----------|-------------------|---------------|------------|--------------|--------------|----------------|----------------|
| LIFE CARE CENTER OF GRANDVIEW         | 6301 EAST 125TH ST          | GRANDVIEW | MO    | 64030-1884| (816) 765-7714    | SNF           | JACKSON    | 172          | No           | 11929          |
| LIFE CARE CENTER OF ST LOUIS          | 3520 CHOUTEAU AVE           | SAINT LOUIS | MO    | 63103-2916| (314) 771-2100    | SNF           | SAINT LOUIS CITY | 100         | No           | 19823          |
| LIFE CARE CENTER OF SULLIVAN          | 875 DUNSFORD DR             | SULLIVAN | MO    | 63080-1238| (573) 468-3128    | SNF           | FRANKLIN   | 120          | No           | 07744          |
| LIFE CARE CENTER OF WAYNESVILLE       | 700 BIRCH LN                | WAYNESVILLE | MO    | 65583-2275| (573) 774-6456    | SNF           | PULASKI    | 120          | No           | 04592          |
| LIFE ENHANCEMENT VILLAGE              | 732 SOUTH GREGG ROAD        | NIXA     | MO    | 65714-7419| (417) 725-6671    | RCF*          | CHRISTIAN  | 44           | Yes          | 14190          |
| LIFE ENHANCEMENT VILLAGE OF BRANSON   | 421 OAKRIDGE ROAD           | WALNUT SHADE | MO    | 65771-9173| (417) 561-5395    | RCF*         | TANEY      | 18           | Yes          | 21270          |
| LIFE WORKS RCF                        | 351 KEITH ST                | PARK HILLS | MO    | 63601-2049| (573) 518-0444    | RCF           | SAINT FRANCOIS | 10          | No           | 17813          |
| LINCOLN COMMUNITY CARE CENTER         | 205 TIMBERLINE DR           | LINCOLN  | MO    | 65338-2007| (660) 547-3322    | SNF           | BENTON     | 66           | No           | 04803          |
| LINCOLN COUNTY NURSING &amp; REHAB        | 1145 EAST CHERRY ST         | TROY     | MO    | 63379-1520| (636) 528-5712    | SNF           | LINCOLN    | 90           | No           | 15750          |</p>
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MAGNOLIA HOME, LLC THE
204 GRAND AVE
FESTUS MO 63028-1842
Mailing Address 204 GRAND AVE
FESTUS MO 63028-1842
Telephone (636) 933-0662 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County JEFFERSON DMH Licensed Yes
Region 2 Facility Number 13697

MAGNOLIA SQUARE NURSING AND REHAB
1502 WEST EDGEWOOD
SPRINGFIELD MO 65807-3567
Mailing Address 1502 WEST EDGEWOOD
SPRINGFIELD MO 65807-3567
Telephone (417) 877-7545 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County GREENE DMH Licensed No
Region 1 Facility Number 23400

MALDEN NURSING & REHAB
1209 STOKELAN
MALDEN MO 63863-1335
Mailing Address 1209 STOKELAN
MALDEN MO 63863-1335
Telephone (573) 276-5115 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 70
County DUNKLIN DMH Licensed No
Region 2 Facility Number 12465

MANOR AT ELFINDALE, THE
1707 WEST ELFINDALE ST
SPRINGFIELD MO 65807-1246
Mailing Address 1707 WEST ELFINDALE ST
SPRINGFIELD MO 65807-1246
Telephone (417) 831-2273 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 117
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 06038

MANOR GROVE, INCORPORATED
711 SOUTH KIRKWOOD RD
KIRKWOOD MO 63122-5928
Mailing Address 711 SOUTH KIRKWOOD RD
KIRKWOOD MO 63122-5928
Telephone (314) 965-0864 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 48
County SAINT LOUIS COUNTY DMH Licensed Yes
Region 7 Facility Number 03628

MANOR, THE
2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Mailing Address 2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Telephone (573) 686-1147 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 90
County BUTLER DMH Licensed No
Region 2 Facility Number 00683

MAPLE CREST MANOR
430 NORTH FREDERICK ST
CAPE GIRARDEAU MO 63701-4835
Mailing Address 430 N FREDERICK ST
CAPE GIRARDEAU MO 63701-4835
Telephone (573) 334-2662 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 48
County CAPE GIRARDEAU DMH Licensed Yes
Region 2 Facility Number 03628

MAPLE GROVE LODGE
2407 KENTUCKY ST
LOUISIANA MO 63353-2503
Mailing Address 2407 KENTUCKY ST
LOUISIANA MO 63353-2503
Telephone (573) 754-5456 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 90
County PIKE DMH Licensed No
Region 5 Facility Number 05002

MAPLE LAWN NURSING HOME
1410 WEST LINE ST
PALMYRA MO 63461-1831
Mailing Address PO BOX 232
PALMYRA MO 63461-0232
Telephone (573) 769-2213 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 140
County MARION DMH Licensed No
Region 5 Facility Number 09961

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<td>2510 CLINTON ST</td>
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Wednesday, April 03, 2019
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Wednesday, April 03, 2019

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<td>BOLLINGER</td>
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<td>1101 E 5TH STREET</td>
<td>MARYVILLE</td>
<td>MO 64468-1955</td>
<td>20</td>
<td>No</td>
<td>05149</td>
<td>(660) 582-7447</td>
<td>RCF</td>
<td>NODAWAY</td>
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Wednesday, April 03, 2019
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Phone Number</th>
<th>License Type</th>
<th>Bed Capacity</th>
<th>Medicare/Medicaid</th>
<th>Alzheimer's Unit</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>MARYVILLE LIVING CENTER</td>
<td>524 NORTH LAURA</td>
<td>(660) 582-7447</td>
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<td>4</td>
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<tr>
<td>MASON POINTE CARE CENTER</td>
<td>13190 SOUTH OUTER 40 RD</td>
<td>(314) 434-3330</td>
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<td>62</td>
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<tr>
<td>MASON POINTE CARE CENTER</td>
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<td>(314) 328-4084</td>
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<td>Yes</td>
<td>No</td>
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<td>MATTIS POINTE - ASSISTED LIVING BY AMERICARE</td>
<td>4962 MATTIS ROAD</td>
<td>(816) 449-2741</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
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<td>DEKALB</td>
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<tr>
<td>MAYSVILLE SENIOR LIVING</td>
<td>604 SOUTH POLK</td>
<td>(816) 254-6789</td>
<td>RCF*</td>
<td>24</td>
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<td>No</td>
<td>JACkSON</td>
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<td>1041 WEST TRUMAN RD</td>
<td>(816) 836-1250</td>
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<td>MAYWOOD TERRACE LIVING CENTER</td>
<td>10300 EAST TRUMAN RD</td>
<td>(636) 244-3323</td>
<td>SNF</td>
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<td>SAINT CHARLES</td>
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<td>MCCLAY SENIOR CARE</td>
<td>3801 MCCLAY ROAD</td>
<td>(816) 888-7930</td>
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<td>138</td>
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<td>No</td>
<td>CLAY</td>
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Wednesday, April 03, 2019
MCCRITE PLAZA AT BRIARCLIFF SKILLED NURSING
1301 TULLISON ROAD
KANSAS CITY MO 64116-2640
Mailing Address 1201 NW TULLISON ROAD
KANSAS CITY MO 64116-2639
Telephone 816-888-7930
Level of Care: SNF
County CLAY
Region 4 Medicare
Alzheimer's Unit No
Bed Capacity 80
DMH Licensed No
Facility Number 29084

MCDONALD BOARDING HOME
438 NORTH 17TH ST
SAINT JOSEPH MO 64501-2015
Mailing Address 438 NORTH 17TH ST
SAINT JOSEPH MO 64501-2015
Telephone (816) 233-7060
Level of Care: RCF
County BUCHANAN
Region 4 DMH Licensed Yes
Alzheimer's Unit No
Bed Capacity 9
Facility Number 05170

MCDONALD COUNTY LIVING CENTER
1000 PATTERSON ST
ANDERSON MO 64831-7327
Mailing Address 1000 PATTERSON ST
ANDERSON MO 64831-7327
Telephone (417) 845-3351
Level of Care: SNF
County MCDONALD
Region 1 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 96
DMH Licensed No
Facility Number 05183

MCKNIGHT PLACE ASSISTED LIVING AND MEMORY CARE
THREE MCKNIGHT PLACE
SAINT LOUIS MO 63124-1900
Mailing Address THREE MCKNIGHT PLACE
SAINT LOUIS MO 63124-1900
Telephone (314) 993-3333
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 DMH Licensed No
Alzheimer's Unit Yes
Bed Capacity 55
Facility Number 23542

MCKNIGHT PLACE ASSISTED LIVING AND MEMORY CARE
THREE MCKNIGHT PL
SAINT LOUIS MO 63124-1900
Mailing Address THREE MCKNIGHT PL
SAINT LOUIS MO 63124-1900
Telephone (314) 997-5333
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7 DMH Licensed No
Alzheimer's Unit No
Bed Capacity 120
Facility Number 23542

MCKNIGHT PLACE EXTENDED CARE
TWO MCKNIGHT PL
SAINT LOUIS MO 63124-1900
Mailing Address TWO MCKNIGHT PL
SAINT LOUIS MO 63124-1900
Telephone (314) 993-2221
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare
Alzheimer's Unit No
Bed Capacity 70
DMH Licensed No
Facility Number 18914

MCLARNEY MANOR
215 EAST PRATT
BROOKFIELD MO 64628-1300
Mailing Address PO BOX 129
BROOKFIELD MO 64628-0129
Telephone (660) 258-7402
Level of Care: SNF
County LINN
Region 5 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 05220

MEADOW RIDGE SENIOR LIVING
521 MEADOW RIDGE LN
MOBERLY MO 65270-4550
Mailing Address 521 MEADOW RIDGE LANE
MOBERLY MO 65270-4550
Telephone (660) 263-0550
Level of Care: ALF**
County RANDOLPH
Region 5 DMH Licensed No
Alzheimer's Unit No
Bed Capacity 57
Facility Number 28019

MEADOW VIEW OF HARRISONVILLE HEALTH & REHABILITATION
2203 EAST MECHANIC ST
HARRISONVILLE MO 64701-2060
Mailing Address 2203 EAST MECHANIC ST
HARRISONVILLE MO 64701-2060
Telephone (816) 380-2622
Level of Care: SNF
County CASS
Region 3 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 00968

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Wednesday, April 03, 2019
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<td>806 WEST MULBERRY</td>
<td>PILOT KNOB</td>
<td>MO 63663</td>
<td>(573) 546-7065</td>
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<td>MEADOWVIEW RESIDENTIAL CARE</td>
<td>101 NORTH FAR WEST DR</td>
<td>SAINT JOSEPH</td>
<td>MO 64506-3500</td>
<td>(816) 232-2873</td>
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<td>MEDICALODGES BUTLER</td>
<td>103 EAST NURSERY</td>
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<td>MO 64730-2331</td>
<td>(660) 679-3179</td>
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<td>MEDICALODGES NEOSHO</td>
<td>400 LYON DR</td>
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<td>MO 64850-9194</td>
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<td>MEDICALODGES NEVADA</td>
<td>1210 W ASHLAND ST</td>
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<td>(417) 667-5064</td>
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<td>MELODY HOUSE</td>
<td>3031 SOUTH TEN MILE DR</td>
<td>JEFFERSON CITY</td>
<td>MO 65109-6816</td>
<td>(573) 893-7228</td>
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<td>Yes</td>
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<td>MERAMEC NURSING CENTER</td>
<td>940 MATTOX DR</td>
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<td>MO 63080-2364</td>
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<td>MEYER CARE CENTER</td>
<td>1201 WEST 19TH ST</td>
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<td>MO 64037-1458</td>
<td>(660) 584-4224</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Region</th>
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<td>(660) 265-4032</td>
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<td>MILL CREEK VILLAGE-ASSISTED LIVING BY AMERICARE</td>
<td>1990 W SOUTHAMPTON DR</td>
<td>(573) 381-2510</td>
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<td>30107</td>
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<td>MILLER COUNTY CARE AND REHABILITIZATION CENTER</td>
<td>1157 HWAY 17</td>
<td>(573) 369-2318</td>
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<td>210 ROCK RD</td>
<td>(660) 327-5680</td>
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<td>MINGO RESIDENTIAL CARE FACILITY</td>
<td>24080 STATE HWY 51</td>
<td>(573) 222-3086</td>
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<td>700 EAST URBANDALE DR</td>
<td>(660) 263-9060</td>
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<td>MOCKINGBIRD MANOR RESIDENTIAL CARE</td>
<td>227 W FRANKLIN</td>
<td>(816) 781-8058</td>
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<td>200 SOUTH GERHART</td>
<td>(573) 796-3822</td>
<td>RCF*</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
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<td>200 SOUTH GERHART</td>
<td>CALIFORNIA</td>
<td>MO</td>
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<td>MONROE CITY MANOR CARE CENTER</td>
<td>1010 HIGHWAY 24 &amp; 36 EAST</td>
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<td>MO</td>
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<td>MONROE MANOR</td>
<td>200 SOUTH ST</td>
<td>PARIS</td>
<td>MO</td>
<td>119</td>
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<td>MONTEREY PARK REHABILITATION &amp; HEALTH</td>
<td>4600 LITTLE BLUE PARKWAY</td>
<td>INDEPENDENCE</td>
<td>MO</td>
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<td>No</td>
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<td>14454</td>
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<td>MONTICELLO HOUSE</td>
<td>1115 K LAND DR</td>
<td>JACKSON</td>
<td>MO</td>
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<td>MOORE-FEW CARE CENTER</td>
<td>901 SOUTH ADAMS</td>
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<td>MO</td>
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<td>WARRENSBURG</td>
<td>MO</td>
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<td>1700 MORNINGSIDE DR</td>
<td>CHILlicothe</td>
<td>MO</td>
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MORNINGSIDE CENTER ASSISTED LIVING APARTMENTS
1702 MORNINGSIDE DR
CHILLCOTHIE MO 64601-1545
Mailing Address 1702 MORNINGSIDE DR
CHILLCOTHIE MO 64601-1545
Telephone (660) 646-0170
Level of Care: ALF
County LIVINGSTON
Region 4
Alzheimer's Unit No
Bed Capacity 31
DMH Licensed No
Facility Number 05557

MORNINGSIDE OF BRANSON
5351 GRETNA ROAD
BRANSON MO 65616-7298
Mailing Address 5351 GRETNA RD
BRANSON MO 65616-7298
Telephone (417) 334-3336
Level of Care: RCF
County TANEY
Region 1
Alzheimer's Unit No
Bed Capacity 104
DMH Licensed No
Facility Number 23683

MORNINGSIDE OF CHESTERFIELD VILLAGE
2410 WEST CHESTERFIELD BLVD
SPRINGFIELD MO 65807-8631
Mailing Address 2410 W CHESTERFIELD BLVD
SPRINGFIELD MO 65807-8631
Telephone (417) 886-4000
Level of Care: RCF
County GREENE
Region 1
Alzheimer's Unit No
Bed Capacity 92
DMH Licensed No
Facility Number 23732

MORNINGSIDE OF NEVADA
640 EAST HIGHLAND
NEVADA MO 64772-1091
Mailing Address 640 EAST HIGHLAND
NEVADA MO 64772-1091
Telephone (417) 667-3883
Level of Care: RCF
County VERNON
Region 1
Alzheimer's Unit No
Bed Capacity 37
DMH Licensed No
Facility Number 21025

MORNINGSIDE OF SPRINGFIELD
3540 EAST CHEROKEE
SPRINGFIELD MO 65809-2828
Mailing Address 3540 EAST CHEROKEE
SPRINGFIELD MO 65809-2828
Telephone (417) 889-2222
Level of Care: RCF
County GREENE
Region 1
Alzheimer's Unit No
Bed Capacity 67
DMH Licensed No
Facility Number 21111

MOTHER OF GOOD COUNSEL HOME
6825 NATURAL BRIDGE RD
SAINT LOUIS MO 63121-5314
Mailing Address 6825 NATURAL BRIDGE RD
SAINT LOUIS MO 63121-5314
Telephone (314) 383-4765
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit No
Bed Capacity 114
DMH Licensed No
Facility Number 05568

MOTHER OF PERPETUAL HELP RESIDENCE, INC
7609 WATSON ROAD
SAINT LOUIS MO 63119-5001
Mailing Address 7609 WATSON RD
SAINT LOUIS MO 63119-5001
Telephone (314) 918-2260
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit Yes
Bed Capacity 160
DMH Licensed No
Facility Number 21111

MOUNT CARMEL SENIOR LIVING - ST CHARLES, LLC
723 FIRST CAPITOL DR
SAINT CHARLES MO 63301-2729
Mailing Address 723 FIRST CAPITOL DR
SAINT CHARLES MO 63301-2729
Telephone (636) 946-4140
Level of Care: SNF
County SAINT CHARLES
Region 5
Alzheimer's Unit No
Bed Capacity 110
DMH Licensed No
Facility Number 07560

MOUNTAIN VIEW HEALTHCARE
1211 NORTH ASH ST
MOUNTAIN VIEW MO 65548-7376
Mailing Address PO BOX 879
MOUNTAIN VIEW MO 65548-0879
Telephone (417) 934-6818
Level of Care: SNF
County HOWELL
Region 1
Alzheimer's Unit Yes
Bed Capacity 105
DMH Licensed No
Facility Number 15542

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Wednesday, April 03, 2019
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<td>4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813</td>
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<td>1425 SOUTH LANDRUM MT VERNON MO 65712-1912</td>
<td>(417) 466-2260</td>
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<td>MY PLACE RESIDENTIAL CARE, L.C.</td>
<td>23 NORTH SIXTH ST FESTUS MO 63028-1301</td>
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<td>MY PLACE TOO, INC</td>
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<td>MYERS NURSING &amp; CONVALESCENT CENTER</td>
<td>2315 WALROND AVE KANSAS CITY MO 64127-4210</td>
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<td>(573) 256-4620</td>
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Wednesday, April 03, 2019
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<th>Facility Name</th>
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Wednesday, April 03, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Telephone</th>
<th>Region</th>
<th>County</th>
<th>Level of Care</th>
<th>Facility Number</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>NORTHWOOD HILLS CARE CENTER</td>
<td>120</td>
<td>Yes</td>
<td>(417) 754-2208</td>
<td>1</td>
<td>POLK</td>
<td>SNF</td>
<td>10607</td>
<td>800 NORTH ARTHUR ST HUMANSVILLE MO 65674-8655</td>
</tr>
<tr>
<td>OAK GROVE NURSING &amp; REHAB</td>
<td>90</td>
<td>Yes</td>
<td>(816) 690-4118</td>
<td>3</td>
<td>JACKSON</td>
<td>SNF</td>
<td>05849</td>
<td>2108 SOUTH MITCHELL OAK GROVE MO 64075-9472</td>
</tr>
<tr>
<td>OAK KNOLL SKILLED NURSING &amp; REHABILITATION CENTER</td>
<td>72</td>
<td>No</td>
<td>(314) 521-7419</td>
<td>7</td>
<td>SAINT LOUIS COUNTY</td>
<td>SNF</td>
<td>05914</td>
<td>37 N CLARK AVE FERGUSON MO 63135-2323</td>
</tr>
<tr>
<td>OAK MEADOWS RCF, LLC</td>
<td>12</td>
<td>Yes</td>
<td>(573) 727-9889</td>
<td>2</td>
<td>BUTLER</td>
<td>RCF</td>
<td>23399</td>
<td>5502 MISTY MEADOW POPLAR BLUFF MO 63901-9287</td>
</tr>
<tr>
<td>OAK PARK CARE CENTER</td>
<td>120</td>
<td>No</td>
<td>(314) 781-3444</td>
<td>7</td>
<td>SAINT LOUIS CITY</td>
<td>SNF</td>
<td>05914</td>
<td>6637 BERTHOLD AVE SAINT LOUIS MO 63139-3318</td>
</tr>
<tr>
<td>OAK POINTE OF CARThAGE</td>
<td>55</td>
<td>Yes</td>
<td>(417) 358-3355</td>
<td>1</td>
<td>JASPER</td>
<td>ALF**</td>
<td>30168</td>
<td>300 W AIRPORT DR CARTHAGE MO 64836-3511</td>
</tr>
<tr>
<td>OAK POINTE OF KEARNEY</td>
<td>55</td>
<td>Yes</td>
<td>(816) 628-0075</td>
<td>4</td>
<td>CLAY</td>
<td>ALF**</td>
<td>29803</td>
<td>200 MEADOWBROOK DR KEARNEY MO 64060-8788</td>
</tr>
<tr>
<td>OAK POINTE OF MARYVILLE</td>
<td>55</td>
<td>Yes</td>
<td>(660) 562-2799</td>
<td>4</td>
<td>NODAWAY</td>
<td>ALF**</td>
<td>29544</td>
<td>817 SOUTH COUNTRY CLUB DR MARYVILLE MO 64468-1477</td>
</tr>
<tr>
<td>OAK POINTE OF MONETT</td>
<td>55</td>
<td>Yes</td>
<td>(417) 235-3500</td>
<td>1</td>
<td>LAWRENCE</td>
<td>ALF**</td>
<td>30206</td>
<td>1011 OLD AIRPORT ROAD MONETT MO 65708-1375</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Region</th>
<th>Mailing Address</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>Alzheimer's Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAK POINTE OF ROLLA</td>
<td>6</td>
<td>1000 EAST LIONS CLUB DRIVE</td>
<td>PHELPS</td>
<td>65</td>
<td>No</td>
<td>31216</td>
<td>ALF**</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>OAK POINTE OF WARRENTON</td>
<td>6</td>
<td>700 FORREST AVE</td>
<td>WARREN</td>
<td>71</td>
<td>No</td>
<td>25045</td>
<td>ALF**</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>OAK RIDGE ASSISTED LIVING</td>
<td>4</td>
<td>403 CRISPIN ST</td>
<td>RAY</td>
<td>55</td>
<td>Yes</td>
<td>29711</td>
<td>ALF**</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>OAK TREE MANOR</td>
<td>4</td>
<td>PO BOX 8186</td>
<td>BUTLER</td>
<td>20</td>
<td>Yes</td>
<td>15039</td>
<td>RCF*</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>OAK TREE VILLAS - A STONEBRIDGE COMM</td>
<td>6</td>
<td>3108 WEST TRUMAN BLVD</td>
<td>COLE</td>
<td>80</td>
<td>No</td>
<td>10300</td>
<td>RCF*</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>OAKDALE CARE CENTER</td>
<td>2</td>
<td>2702 DEBBIE LN</td>
<td>BUTLER</td>
<td>60</td>
<td>No</td>
<td>18157</td>
<td>ALF**</td>
<td>No</td>
<td>No</td>
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<tr>
<td>OAKDALE CARE CENTER</td>
<td>2</td>
<td>2702 DEBBIE LN</td>
<td>BUTLER</td>
<td>36</td>
<td>Yes</td>
<td>18157</td>
<td>RCF*</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
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OAKDALE CARE CENTER  
2702 DEBBIE LN  
POPLAR BLUFF  
MO 63901-2650

Mailing Address  2702 DEBBIE LN  
POPLAR BLUFF  
MO 63901-2650

Telephone  (573) 686-5242  
Level of Care:  SNF  
County  BUTLER  
Region  2  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  70  
DMH Licensed  No  
Facility Number  18157

OAKRIDGE OF PLATTSBURG  
205 EAST CLAY AVE  
PLATTSBURG  
MO 64477-8100

Mailing Address  PO BOX 247  
PLATTSBURG  
MO 64477-0247

Telephone  (816) 539-2128  
Level of Care:  SNF  
County  CLINTON  
Region  4  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  60  
DMH Licensed  No  
Facility Number  05994

OAKS, THE  
5550 NOLAND ROAD  
KANSAS CITY  
MO 64133-3685

Mailing Address  5550 NOLAND RD  
KANSAS CITY  
MO 64133-3685

Telephone  (816) 356-0200  
Level of Care:  RCF  
County  JACKSON  
Region  3  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  62  
DMH Licensed  Yes  
Facility Number  13440

OAKWOOD ESTATES NURSING & REHAB  
5303 BERMUDA DR  
NORMANDY  
MO 63121-1407

Mailing Address  5303 BERMUDA DR  
NORMANDY  
MO 63121-1407

Telephone  (314) 385-0910  
Level of Care:  SNF  
County  SAINT LOUIS COUNTY  
Region  7  Medicare/Medicaid  
Alzheimer's Unit  Yes  
Bed Capacity  126  
DMH Licensed  No  
Facility Number  01238

OASIS RESIDENTIAL CARE FACILITY  
3508 PRAIRIE AVE  
SAINT LOUIS  
MO 63107-2214

Mailing Address  3508 PRAIRIE AVE  
SAINT LOUIS  
MO 63107-2214

Telephone  (314) 534-3355  
Level of Care:  RCF  
County  SAINT LOUIS CITY  
Region  7  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  20  
DMH Licensed  Yes  
Facility Number  15415

OASIS WEST  
1916 NEW JAMESTOWN RD  
SAINT LOUIS  
MO 63138-1508

Mailing Address  1916 NEW JAMESTOWN RD  
SAINT LOUIS  
MO 63138-1508

Telephone  (314) 741-3500  
Level of Care:  RCF  
County  SAINT LOUIS COUNTY  
Region  7  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  8  
DMH Licensed  Yes  
Facility Number  26562

OMEGA HOUSE I, LLC  
500 NORTH ST  
HANNIBAL  
MO 63401-3333

Mailing Address  PO BOX 387  
HANNIBAL  
MO 63401-0387

Telephone  (573) 221-9103  
Level of Care:  RCF  
County  MARION  
Region  5  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  12  
DMH Licensed  Yes  
Facility Number  11118

OMEGA HOUSE II, LLC  
510 NORTH ST  
HANNIBAL  
MO 63401-3333

Mailing Address  PO BOX 387  
HANNIBAL  
MO 63401-0387

Telephone  (573) 221-3898  
Level of Care:  RCF  
County  MARION  
Region  5  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  10  
DMH Licensed  Yes  
Facility Number  15400

OREGON CARE CENTER  
501 MONROE  
OREGON  
MO 64473-7800

Mailing Address  PO BOX 19  
OREGON  
MO 64473-0019

Telephone  (660) 446-3355  
Level of Care:  SNF  
County  HOLT  
Region  4  Medicare/Medicaid  
Alzheimer's Unit  No  
Bed Capacity  60  
DMH Licensed  No  
Facility Number  06097

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Wednesday, April 03, 2019
**ORILLA’S WAY**  
1209 SOUTH HIGH ST  
GRANT CITY  
MO 64456-0056  
Mailing Address: PO BOX 56  
GRANT CITY  
MO 64456-0056  
Phone: (660) 564-2204  
Level of Care: **ALF**  
Bed Capacity: 37  
County: WORTH  
DMH Licensed: No  
Region: 4  
Facility Number: 08591

**OSAGE BEACH REHABILITATION AND HEALTH CARE CENTER**  
844 PASSOVER RD  
OSAGE BEACH  
MO 65065-2834  
Mailing Address: 844 PASSOVER RD  
OSAGE BEACH  
MO 65065-2834  
Phone: (573) 348-2225  
Level of Care: SNF  
Bed Capacity: 94  
County: CAMDEN  
DMH Licensed: No  
Region: 6  
Medicare/Medicaid: No  
Facility Number: 06116

**OUR LADY OF MERCY COUNTRY HOME**  
2160 MERCY DR  
LIBERTY  
MO 64068-7955  
Mailing Address: 2160 MERCY DR  
LIBERTY  
MO 64068-7955  
Phone: (816) 781-5711  
Level of Care: RCF*  
Bed Capacity: 44  
County: CLAY  
DMH Licensed: No  
Region: 4  
Facility Number: 06153

**OXFORD GRAND AT SHOAL CREEK**  
8280 N TULLIS AVENUE  
KANSAS CITY  
MO 64158-7683  
Mailing Address: 8280 N TULLIS AVENUE  
KANSAS CITY  
MO 64158-7683  
Phone: (816) 781-8282  
Level of Care: ALF**  
Bed Capacity: 98  
County: CLAY  
DMH Licensed: No  
Region: 4  
Facility Number: 30758

**OZARK MANOR**  
1013 HIGHWAY Z  
FREDERICKTOWN  
MO 63645-8035  
Mailing Address: 1013 HIGHWAY Z  
FREDERICKTOWN  
MO 63645-8035  
Phone: (573) 783-8338  
Level of Care: **ALF**  
Bed Capacity: 55  
County: MADISON  
DMH Licensed: No  
Region: 2  
Facility Number: 22947

**OZARK MOUNTAIN REGIONAL HEALTHCARE CENTER**  
509 MEADOWLARK AVE  
CRANE  
MO 65633-9317  
Mailing Address: 509 MEADOWLARK AVE  
CRANE  
MO 65633-9317  
Phone: (417) 723-5281  
Level of Care: RCF*  
Bed Capacity: 20  
County: STONE  
DMH Licensed: No  
Region: 1  
Facility Number: 09900

**OZARK MOUNTAIN REGIONAL HEALTHCARE CENTER**  
509 MEADOWLARK AVE  
CRANE  
MO 65633-9317  
Mailing Address: 509 MEADOWLARK AVE  
CRANE  
MO 65633-9317  
Phone: (417) 723-5281  
Level of Care: SNF  
Bed Capacity: 100  
County: STONE  
DMH Licensed: No  
Region: 1  
Medicare/Medicaid: No  
Facility Number: 09900

**OZARK NURSING & CARE CENTER**  
1486 NORTH RIVERSIDE RD  
OZARK  
MO 65721-7688  
Mailing Address: 1486 NORTH RIVERSIDE RD  
OZARK  
MO 65721-7688  
Phone: (417) 581-7126  
Level of Care: SNF  
Bed Capacity: 120  
County: CHRISTIAN  
DMH Licensed: No  
Region: 1  
Medicare/Medicaid: No  
Facility Number: 06240

**OZARK OAKS RESIDENTIAL CARE FACILITY II**  
3405 S SCHIFFERDECKER  
JOPLIN  
MO 64804-1388  
Mailing Address: PO BOX 2526  
JOPLIN  
MO 64803-2526  
Phone: (417) 347-7760  
Level of Care: RCF*  
Bed Capacity: 30  
County: NEWTON  
DMH Licensed: Yes  
Region: 1  
Facility Number: 13636

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Wednesday, April 03, 2019
OZARK REHABILITATION & HEALTH CARE CENTER

Telephone          (573) 348-1711  Alzheimer's Unit  No
Level of Care:     SNF
County             CAMDEN
Region 6            Medicare/Medicaid
Bed Capacity       60
DMH Licensed       No
Facility Number    06217

OZARK RIVERVIEW MANOR

Telephone          (417) 581-6025  Alzheimer's Unit  No
Level of Care:     SNF
County             CHRISTIAN
Region 1            Medicare/Medicaid
Bed Capacity       90
DMH Licensed       No
Facility Number    01426

OZARKS METHODIST MANOR, THE

Telephone          (417) 258-2573  Alzheimer's Unit  Yes
Level of Care:     RCF
County             LAWRENCE
Region 1            Medicare/Medicaid
Bed Capacity       76
DMH Licensed       No
Facility Number    06273

PACIFIC CARE CENTER, LLC

Telephone          (636) 271-4222  Alzheimer's Unit  No
Level of Care:     SNF
County             FRANKLIN
Region 6            Medicare/Medicaid
Bed Capacity       120
DMH Licensed       No
Facility Number    12638

PARC PROVENCE

Telephone          (314) 542-2500  Alzheimer's Unit  Yes
Level of Care:     SNF
County             SAINT LOUIS COUNTY
Region 7            Medicare/Medicaid
Bed Capacity       140
DMH Licensed       No
Facility Number    24122

PARK PLACE

Telephone          (636) 561-7275  Alzheimer's Unit  Yes
Level of Care:     ALF**
County             SAINT CHARLES
Region 5            Medicare/Medicaid
Bed Capacity       44
DMH Licensed       No
Facility Number    25379

PARK PLACE APARTMENTS

Telephone          (417) 934-6818  Alzheimer's Unit  No
Level of Care:     ALF
County             HOWELL
Region 1            Medicare/Medicaid
Bed Capacity       18
DMH Licensed       No
Facility Number    15542

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Wednesday, April 03, 2019
**PARKPLACE II**

2000 BOARDWALK PLACE DR
OFallon MO 63368-3901
Mailing Address 2000 BOARDWALK PLACE DR
OFallon MO 63368-3901

Telephone (636) 561-7275
Level of Care: ALF**
County SAINT CHARLES
Region 5
Bed Capacity 80
Alzheimer's Unit No
DMH Licensed No
Facility Number 29016

**PARKDALE MANOR CARE CENTER**

814 WEST SOUTH AVE
MARYVILLE MO 64468-2772
Mailing Address 814 W SOUTH AVE
MARYVILLE MO 64468-2772

Telephone (660) 582-8161
Level of Care: SNF
County NODAWAY
Region 4
Bed Capacity 92
Alzheimer's Unit No
DMH Licensed No
Facility Number 06308

**PARKLACE CARE AND REHABILITATION CENTER**

401 MAR-LE DR
WENTZVILLE MO 63385-1647
Mailing Address 401 MAR-LE DR
WENTZVILLE MO 63385-1647

Telephone (636) 332-9580
Level of Care: SNF
County SAINT CHARLES
Region 6
Bed Capacity 240
Alzheimer's Unit No
DMH Licensed No
Facility Number 04883

**PARKSIDE MANOR**

1201 HUNT AVE
COLUMBIA MO 65202-1367
Mailing Address 1201 HUNT AVE
COLUMBIA MO 65202-1367

Telephone (573) 449-1448
Level of Care: SNF
County BOONE
Region 6
Bed Capacity 120
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 11262

**PARKSIDE-ASSISTED LIVING BY AMERICARE**

2100 PARKSIDE AVE
ROLLA MO 65401-5472
Mailing Address 2100 PARKSIDE AVE
ROLLA MO 65401-5472

Telephone 573-308-0834
Level of Care: ALF**
County PHelpS
Region 6
Bed Capacity 28
Alzheimer's Unit No
DMH Licensed No
Facility Number 31191

**PARKVIEW ESTATES**

1300 EAST 24TH ST
SEDALIA MO 65301-8233
Mailing Address 1405 WEST 3RD STREET
SEDALIA MO 65301-

Telephone (660) 827-3313
Level of Care: RCF*
County PETTIS
Region 6
Bed Capacity 26
Alzheimer's Unit No
DMH Licensed Yes
Facility Number 15971

**PARKVIEW HEALTH CARE FACILITY**

119 WEST FOREST
BOLIVAR MO 65613-1316
Mailing Address 119 WEST FOREST
BOLIVAR MO 65613-1316

Telephone (417) 326-3000
Level of Care: SNF
County POLK
Region 1
Bed Capacity 78
Alzheimer's Unit Yes
DMH Licensed No
Facility Number 17638

**PARKVIEW HEALTHCARE**

128 NORTH HARDESTY
KANSAS CITY MO 64123-1404
Mailing Address 128 NORTH HARDESTY
KANSAS CITY MO 64123-1404

Telephone (816) 241-2020
Level of Care: SNF
County JACKSON
Region 3
Bed Capacity 120
Alzheimer's Unit No
DMH Licensed No
Facility Number 02928

**PARKWAY HEALTH CARE CENTER**

2323 Swope Parkway
KANSAS CITY MO 64130-2638
Mailing Address 2323 Swope Parkway
KANSAS CITY MO 64130-2638

Telephone (816) 924-1122
Level of Care: SNF
County JACKSON
Region 3
Bed Capacity 97
Alzheimer's Unit No
DMH Licensed No
Facility Number 07092

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Wednesday, April 03, 2019
Wednesday, April 03, 2019

PARKWAY SENIOR LIVING, THE
550 NE NAPOLEON DR
BLUE SPRINGS MO 64014-5403
Mailing Address 550 NE NAPOLEON DR
BLUE SPRINGS MO 64014-5403

PARKWOOD MANOR
325 NORTH SPRIGG ST
CAPE GIRARDEAU MO 63701-5531
Mailing Address 325 NORTH SPRIGG ST
CAPE GIRARDEAU MO 63701-5531

PARKWOOD MANOR
325 NORTH SPRIGG ST
CAPE GIRARDEAU MO 63701-5531
Mailing Address 325 N SPRIGG ST
CAPE GIRARDEAU MO 63701-5531

PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE
805 PARKWOOD DR
SAINTE GENEVIEVE MO 63670-1858
Mailing Address 805 PARKWOOD DR
SAINTE GENEVIEVE MO 63670-1858

PARKWOOD SKILLED NURSING AND REHABILITATION CENTER
3201 PARKWOOD LN
MARYLAND HEIGHTS MO 63043-1334
Mailing Address 3201 PARKWOOD LN
MARYLAND HEIGHTS MO 63043-1334

PATHWAYS PROGRAM, THE
161 PIEPER RD
O'FALLON MO 63366-
Mailing Address PO BOX 815
O'FALLON MO 63366-0815

PATRICIA'S RESIDENTIAL CARE FACILITY, INC
510 EAST 2ND ST
ANNAPOlis MO 63620-9104
Mailing Address 510 EAST 2ND ST
ANNAPOlis MO 63620-9104

PAUL L & MARTHA BARONE CARE CENTER
2101 NORTH ASH ST
NEVADA MO 64772-1082
Mailing Address 2101 N ASH ST
NEVADA MO 64772-1082

PEACE HAVEN ASSOCIATION
12630 ROTT RD
SAINT LOUIS MO 63127-1214
Mailing Address 12630 ROTT RD
SAINT LOUIS MO 63127-1214

Telephone (816) 228-8866 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 72
County JACKSON DMH Licensed No
Region 3 Facility Number 29917

Telephone (573) 334-7011 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 10
County CAPE GIRARDEAU DMH Licensed No
Region 2 Facility Number 06291

Telephone (573) 334-7011 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 20
County CAPE GIRARDEAU DMH Licensed Yes
Region 2 Facility Number 06291

Telephone (573) 883-3883 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 66
County SAINTE GENEVIEVE DMH Licensed No
Region 2 Facility Number 23234

Telephone (314) 291-5911 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 130
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 02471

Telephone (636) 978-3132 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 18
County SAINT CHARLES DMH Licensed Yes
Region 5 Facility Number 10934

Telephone (573) 598-4202 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County IRON DMH Licensed Yes
Region 2 Facility Number 06353

Telephone (417) 448-3999 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 40
County VERNON DMH Licensed No
Region 1 Medicaid Facility Number 16917

Telephone (314) 965-3833 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 42
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 06369

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Wednesday, April 03, 2019
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Wednesday, April 03, 2019
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<th>Bed Capacity</th>
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<th>Region</th>
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<td>Riverview at the Park Care and Rehab</td>
<td>1100 Progress Parkway</td>
<td>Sainte Genevieve</td>
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<td>No</td>
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<td>Sainte Genevieve</td>
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<td>Riverview Nursing Center</td>
<td>10303 State Rd C</td>
<td>Mokane</td>
<td>MO</td>
<td>65059-1211</td>
<td>No</td>
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<td>MO</td>
<td>65721-9103</td>
<td>No</td>
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<td>40</td>
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<td>Riverview, The</td>
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<td>Saint Louis</td>
<td>MO</td>
<td>63111-2025</td>
<td>No</td>
<td>No</td>
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<td>Riverways Manor</td>
<td>403 Watercress Rd</td>
<td>Van Buren</td>
<td>MO</td>
<td>63965-9100</td>
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<td>60</td>
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<td>Roaring River Health and Rehabilitation</td>
<td>812 Old Exeter Rd</td>
<td>Cassville</td>
<td>MO</td>
<td>65625-1704</td>
<td>Yes</td>
<td>Yes</td>
<td>90</td>
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<td>Rock Island Village</td>
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<td>MO</td>
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<td>Rock Springs Residential, LLC</td>
<td>81 Pilkenton Ln</td>
<td>Cuba</td>
<td>MO</td>
<td>65453-8136</td>
<td>No</td>
<td>No</td>
<td>18</td>
<td>Crawford</td>
<td>6</td>
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Wednesday, April 03, 2019
ROCKHILL MANOR ASSISTED LIVING
4235 LOCUST ST
KANSAS CITY MO 64110-1016
Mailing Address PO BOX 5930
KANSAS CITY MO 64171-0930
Telephone (816) 931-2225
Level of Care: ALF**
Bed Capacity 36
Alzheimer's Unit No
County JACKSON
DMH Licensed Yes
Region 3
Facility Number 06794

ROCKHILL MANOR ASSISTED LIVING
4235 LOCUST ST
KANSAS CITY MO 64110-1016
Mailing Address PO BOX 5930
KANSAS CITY MO 64171-0930
Telephone (816) 931-2225
Level of Care: ALF
Bed Capacity 154
Alzheimer's Unit No
County JACKSON
DMH Licensed Yes
Region 3
Facility Number 06794

ROCKY RIDGE MANOR
3111 HIGHWAY A
MANSFIELD MO 65704-8105
Mailing Address 3111 HWY A
MANSFIELD MO 65704-8105
Telephone (417) 924-8116
Level of Care: SNF
Bed Capacity 65
Alzheimer's Unit No
County WRIGHT
DMH Licensed No
Region 1
Medicare/Medicaid
Facility Number 04996

ROLLA HEALTH & REHABILITATION SUITES
1200 MCCUTCHEN RD
ROLLA MO 65401-2615
Mailing Address 1200 MCCUTCHEN RD
ROLLA MO 65401-2615
Telephone (573) 364-2311
Level of Care: SNF
Bed Capacity 120
Alzheimer's Unit No
County PHELPS
DMH Licensed No
Region 6
Medicare/Medicaid
Facility Number 08862

ROLLA MANOR CARE CENTER
1800 WHITE COLUMNS DR
ROLLA MO 65401-2044
Mailing Address 1800 WHITE COLUMNS DR
ROLLA MO 65401-2044
Telephone (573) 364-7766
Level of Care: SNF
Bed Capacity 102
Alzheimer's Unit Yes
County PHELPS
DMH Licensed No
Region 6
Medicare/Medicaid
Facility Number 06801

ROLLA PRESBYTERIAN MANOR
1200 HOMELIFE PLAZA
ROLLA MO 65401-2512
Mailing Address 1200 HOMELIFE PLAZA
ROLLA MO 65401-2512
Telephone (573) 364-7336
Level of Care: ALF**
Bed Capacity 37
Alzheimer's Unit Yes
County PHELPS
DMH Licensed No
Region 6
Facility Number 18727

ROLLA PRESBYTERIAN MANOR
1200 HOMELIFE PLAZA
ROLLA MO 65401-2512
Mailing Address 1200 HOMELIFE PLAZA
ROLLA MO 65401-2512
Telephone (573) 364-7336
Level of Care: SNF
Bed Capacity 30
Alzheimer's Unit No
County PHELPS
DMH Licensed No
Region 6
Medicare/Medicaid
Facility Number 18727

ROLLING HILLS CARE FACILITY, LLC
24583 HIGHWAY 5
MILAN MO 63556-2809
Mailing Address 24583 HWY 5
MILAN MO 63556-2809
Telephone (660) 265-4391
Level of Care: RCF
Bed Capacity 9
Alzheimer's Unit No
County SULLIVAN
DMH Licensed Yes
Region 5
Facility Number 19990

ROSATI GROUP HOME
4218 NORTH GRAND BLVD
SAINT LOUIS MO 63107-1806
Mailing Address 4218 N GRAND BLVD
SAINT LOUIS MO 63107-1806
Telephone (314) 534-6624
Level of Care: RCF
Bed Capacity 15
Alzheimer's Unit No
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7
Facility Number 21218

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Wednesday, April 03, 2019
**ROSEWOOD CARE CENTER OF ST LOUIS**

11278 SCHUETZ RD  
SAINT LOUIS  
MO  63146-4957  

Mailing Address 11278 SCHUETZ RD  
SAINT LOUIS  
MO  63146-4957  

**Telephone**  (314) 991-4066  
**Level of Care:** SNF  
**County** SAINT LOUIS COUNTY  
**Region** 7  
**Alzheimer's Unit** No  
**Bed Capacity** 120  
**Medicare/Medicaid** Yes  
**DMH Licensed** No  
**Facility Number** 16378

**ROSEWOOD HEALTH AND REHAB CENTER**

1415 WEST WHITE OAK  
INDEPENDENCE  
MO  64050-2590  

Mailing Address 1415 WEST WHITE OAK  
INDEPENDENCE  
MO  64050-2590  

**Telephone**  (816) 254-3500  
**Level of Care:** SNF  
**County** JACKSON  
**Region** 3  
**Alzheimer's Unit** Yes  
**Bed Capacity** 300  
**DMH Licensed** No  
**Facility Number** 06604

**ROSEWOOD MANOR**

101 EAST PULASKI ST  
RICHLAND  
MO  65556-7404  

Mailing Address 101 EAST PULASKI ST  
RICHLAND  
MO  65556-7404  

**Telephone**  (573) 765-4200  
**Level of Care:** RCF  
**County** PULASKI  
**Region** 6  
**DMH Licensed** No  
**Facility Number** 26939

**ROSEWOOD RESIDENTIAL CARE**

13450 COUNTY RD 7040  
ROLLA  
MO  63018-8122  

Mailing Address 13450 COUNTY RD 7040  
ROLLA  
MO  63018-8122  

**Telephone**  (573) 341-8000  
**Level of Care:** RCF  
**County** PHELPS  
**Region** 6  
**DMH Licensed** No  
**Facility Number** 21083

**ROYAL OAK NURSING & REHAB**

4960 LACLEDE AVE  
SAINT LOUIS  
MO  63108-1404  

Mailing Address 4960 LACLEDE AVE  
SAINT LOUIS  
MO  63108-1404  

**Telephone**  (314) 361-6240  
**Level of Care:** SNF  
**County** SAINT LOUIS CITY  
**Region** 7  
**Alzheimer's Unit** No  
**Bed Capacity** 168  
**DMH Licensed** No  
**Facility Number** 06322

**ROYAL OAKS RESIDENCE**

507 EAST MARSHALL  
SWEET SPRINGS  
MO  65351-9759  

Mailing Address PO BOX 204  
SWEET SPRINGS  
MO  65351-0204  

**Telephone**  (660) 335-6500  
**Level of Care:** ALF  
**County** SALINE  
**Region** 5  
**Alzheimer's Unit** No  
**Bed Capacity** 51  
**DMH Licensed** Yes  
**Facility Number** 14953

**SADDLER RESIDENTIAL CARE FACILITY INC**

730 HODIAMIANT AVE  
SAINT LOUIS  
MO  63112-2002  

Mailing Address 730 HODIAMIANT AVE  
SAINT LOUIS  
MO  63112-2002  

**Telephone**  (314) 725-3709  
**Level of Care:** ALF  
**County** SAINT LOUIS CITY  
**Region** 7  
**Alzheimer's Unit** No  
**Bed Capacity** 20  
**DMH Licensed** Yes  
**Facility Number** 16828

**SALEM CARE CENTER**

1203 NORTH JACKSON  
SALEM  
MO  65560-1076  

Mailing Address PO BOX 29  
SALEM  
MO  65560-0029  

**Telephone**  (573) 729-6649  
**Level of Care:** SNF  
**County** DENT  
**Region** 6  
**Alzheimer's Unit** No  
**Bed Capacity** 60  
**DMH Licensed** No  
**Facility Number** 02354

**SALEM RESIDENTIAL CARE**

1207 EAST ROOSEVELT ST  
SALEM  
MO  65560-9676  

Mailing Address 1207 EAST ROOSEVELT ST  
SALEM  
MO  65560-9676  

**Telephone**  (573) 729-9449  
**Level of Care:** RCF*  
**County** DENT  
**Region** 6  
**Alzheimer's Unit** No  
**Bed Capacity** 35  
**DMH Licensed** No  
**Facility Number** 19746

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Wednesday, April 03, 2019
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<th>Facility Name</th>
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<th>County</th>
<th>Bed Capacity</th>
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<td><strong>SALT RIVER COMMUNITY CARE</strong></td>
<td>142 SHELBY PLAZA RD</td>
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<td><strong>SARCOXIE NURSING CENTER</strong></td>
<td>1505 MINER</td>
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<td><strong>SCENIC NURSING AND REHABILITATION CENTER, LLC</strong></td>
<td>1333 SCENIC DR</td>
<td>HERCULANEUM</td>
<td>MO</td>
<td>189</td>
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<td>09605</td>
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<td><strong>SCHUYLER COUNTY NURSING HOME</strong></td>
<td>1306 US HIGHWAY 63</td>
<td>QUEEN CITY</td>
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<td><strong>SCOTLAND COUNTY CARE CENTER</strong></td>
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<td>MEMPHIS</td>
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<td><strong>SENATH HEALTH CARE CENTER</strong></td>
<td>300 EAST HORNBECK ST</td>
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Wednesday, April 03, 2019
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<th>Facility Name</th>
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<td>SENECA HOME PLACE</td>
<td>2400 SOUTH CHEROKEE AVE</td>
<td>SENECA</td>
<td>64865-9323</td>
<td>(417) 776-8053</td>
<td>Alzheimer's Unit</td>
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<td>SENECA HOUSE</td>
<td>914 CHICKESAW ST</td>
<td>SENECA</td>
<td>64865-9281</td>
<td>(417) 776-8041</td>
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<td>SEVILLE CARE CENTER</td>
<td>35625 HIGHWAY 72</td>
<td>SALEM</td>
<td>65560-7217</td>
<td>(573) 729-6141</td>
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<td>SHADY LAWN LIVING CENTER</td>
<td>13277 STATE ROUTE D</td>
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<td>715 S STATE ROUTE 19</td>
<td>THAYER</td>
<td>65791-1415</td>
<td>(417) 264-7256</td>
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<td>SHADY OAKS RETIREMENT HOME</td>
<td>2913 BEDOLL AVE</td>
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<td>63901-6809</td>
<td>(573) 785-0903</td>
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<td>SHANGRI LA REHAB &amp; LIVING CENTER</td>
<td>930 NORTH EAST DUNCAN RD</td>
<td>BLUE SPRINGS</td>
<td>64014-2173</td>
<td>(816) 229-6677</td>
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<tr>
<td>SHELBYNA VILLA LIFECARE</td>
<td>218 EAST SHELBINA AVE</td>
<td>SHELBINA</td>
<td>63468-4328</td>
<td>(573) 588-4115</td>
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<td>SHEPHERD OF THE HILLS LIVING CENTER</td>
<td>996 STATE HIGHWAY 248</td>
<td>BRANSON</td>
<td>65616-8154</td>
<td>(417) 334-6431</td>
<td>Alzheimer's Unit</td>
<td>No</td>
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<th>Facility Name</th>
<th>Address 1</th>
<th>City</th>
<th>State</th>
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<th>Telephone</th>
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<td>SHEPHERD'S VIEW ASSISTED LIVING</td>
<td>100 SHERIDERS LN</td>
<td>ALTON</td>
<td>MO</td>
<td>65606</td>
<td>(417) 778-7959</td>
<td>No</td>
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<td>SHERIDAN AT CHESTERFIELD, THE</td>
<td>16300 JUSTUS POST ROAD</td>
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<td>63017-4608</td>
<td>(636) 778-4800</td>
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<td>SHERIDAN AT CREVE COEUR, THE</td>
<td>450 NORTH LINDBERGH BLVD</td>
<td>CREVE COEUR</td>
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<td>63141</td>
<td>(314) 628-0004</td>
<td>Yes</td>
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<tr>
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<td>SHERIDAN AT LAUMEIER PARK, THE</td>
<td>12422 ROTT ROAD</td>
<td>SUNSET HILLS</td>
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<td>Mailing Address: 12422 ROTT ROAD</td>
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<td>SHIRKEY NURSING &amp; REHABILITATION CENTER</td>
<td>804 WOLLARD BLVD</td>
<td>RICHMOND</td>
<td>MO</td>
<td>64085-2227</td>
<td>(816) 776-5403</td>
<td>Yes</td>
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<td></td>
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<td>SIENNA HOUSE, INC</td>
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<td>63133-1504</td>
<td>(314) 721-1389</td>
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Wednesday, April 03, 2019
SILVER CREEK - ASSISTED LIVING BY AMERICARE
3325 TEXAS AVE
JOPLIN MO 64804-4343
Mailing Address 3325 TEXAS AVE
JOPLIN MO 64804-4343
Telephone (417) 626-8100
Level of Care: ALF**
Bed Capacity 68
County Newton
DMH Licensed No
Region 1 Facility Number 20541
Alzheimer's Unit Yes

SILVER SPUR
3300 TEXAS AVE
SAINT LOUIS MO 63118-3111
Mailing Address 3300 TEXAS AVE
SAINT LOUIS MO 63118-3111
Telephone (314) 773-3408
Level of Care: ALF
Bed Capacity 37
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7 Facility Number 00185
Alzheimer's Unit No

SILVERSTONE PLACE
2735 EAGLESON DR
ROLLA MO 65401-8384
Mailing Address 2735 EAGLESON DR
ROLLA MO 65401-8384
Telephone (573) 426-6200
Level of Care: SNF
Bed Capacity 110
County PHELPS
DMH Licensed No
Region 6 Facility Number 29351
Alzheimer's Unit No

SMILEY MANOR LLC
5415 THEKLA AVE
SAINT LOUIS MO 63120-2513
Mailing Address 5415 THEKLA AVE
SAINT LOUIS MO 63120-2513
Telephone (314) 932-1360
Level of Care: RCF
Bed Capacity 20
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7 Facility Number 04078
Alzheimer's Unit No

SMITHVILLE LIVING CENTER
106 HOSPITAL DR
SMITHVILLE MO 64089-9333
Mailing Address 106 HOSPITAL DR
SMITHVILLE MO 64089-9333
Telephone (816) 532-0888
Level of Care: SNF
Bed Capacity 100
County CLAY
DMH Licensed No
Region 4 Facility Number 07409
Alzheimer's Unit Yes

SONSHINE MANOR
300 SOUTH COTTONWOOD AVE
REPUBLIC MO 65738-2093
Mailing Address 300 S COTTONWOOD AVE
REPUBLIC MO 65738-2093
Telephone (417) 732-2929
Level of Care: SNF
Bed Capacity 69
County GREENE
DMH Licensed No
Region 1 Facility Number 16723
Alzheimer's Unit No

SOUTH COUNTY NURSING HOME, INC
1101 WEST OUTER 21 RD
ARNOLD MO 63010-4644
Mailing Address 1101 WEST OUTER 21 RD
ARNOLD MO 63010-4644
Telephone (636) 296-5455
Level of Care: SNF
Bed Capacity 153
County JEFFERSON
DMH Licensed No
Region 2 Facility Number 03650
Alzheimer's Unit No

SOUTH HAMPTON PLACE
4700 BRANDON WOODS
COLUMBIA MO 65203-7169
Mailing Address 4700 BRANDON WOODS
COLUMBIA MO 65203-7169
Telephone (573) 874-3674
Level of Care: SNF
Bed Capacity 100
County BOONE
DMH Licensed No
Region 6 Facility Number 19799
Alzheimer's Unit No

SOUTH HAVEN RESIDENTIAL CARE CENTER, LLC
10462 AIRPORT RD
MINERAL POINT MO 63660-9325
Mailing Address 10462 AIRPORT RD
MINERAL POINT MO 63660-9325
Telephone (573) 438-4150
Level of Care: RCF*
Bed Capacity 20
County WASHINGTON
DMH Licensed Yes
Region 2 Facility Number 10529
Alzheimer's Unit No

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<th>Facility Name</th>
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<th>County</th>
<th>Bed Capacity</th>
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<td>SOUTH VIEW HEALTH CARE, LLC</td>
<td>951 CREAMERY ROAD, WEST PLAINS, MO 65775-6052</td>
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<td>SOUTHAVEN</td>
<td>612 SOUTH BYPASS EAST, KENNETT, MO 63857-3240</td>
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<td>SOUTHBROOK - SKILLED NURSING BY AMERICARE</td>
<td>1108 WEST LIBERTY, FARMINGTON, MO 63640-1922</td>
<td>SAINT FRANCOIS</td>
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<td>SOUTHGATE LIVING CENTER</td>
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<td>SOUTHSIDE TOWNE HOUSE</td>
<td>510 SOUTH WASHINGTON, MEXICO, MO 65265-2786</td>
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<td>9916 REAVIS ROAD, AFFTON, MO 63123-5314</td>
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<td>SPECIAL FORCE FAMILY MINISTRIES</td>
<td>428 SOUTH HARRISON ST, NIXA, MO 65714-7809</td>
<td>CHRISTIAN</td>
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<td>18764</td>
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<td>SPENCER PLACE - ASSISTED LIVING BY AMERICARE</td>
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<tr>
<td>SPRIGG STREET MANOR</td>
<td>701 NORTH SPRIGG CAPE GIRARDEAU</td>
<td>MO</td>
<td>63701-4815</td>
<td>(573) 334-2975</td>
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<tr>
<td>SPRING MANOR</td>
<td>3610 PALM ST SAINT LOUIS</td>
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<td>63107-2505</td>
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<td>SPRING RIDGE - ASSISTED LIVING BY AMERICARE</td>
<td>2828 SOUTH MEADOWBROOK SPRINGFIELD</td>
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<td>65807-5925</td>
<td>(417) 889-7100</td>
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<td>SPRING RIVER CHRISTIAN VILLAGE, INC</td>
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<td>MO</td>
<td>64801-8426</td>
<td>(417) 623-4313</td>
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<td>MO</td>
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<td>SPRING VALLEY ASSISTED LIVING</td>
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<td>65804-3608</td>
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<td>SPRING VALLEY HEALTH &amp; REHABILITATION CENTER</td>
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<td>SPRINGFIELD REHABILITATION &amp; HEALTH CARE CENTER</td>
<td>2800 S FORT AVE SPRINGFIELD</td>
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<td>65802-4967</td>
<td>(417) 864-4545</td>
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<td>(417) 569-1114</td>
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<td>1105 VILLAGE RD</td>
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<td>MO</td>
<td>(417) 451-1000</td>
<td>ALF**</td>
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<td>ST AGNES HOME</td>
<td>10341 MANCHESTER RD</td>
<td>KIRKWOOD</td>
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<td>(314) 965-7616</td>
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<td>(314) 209-1177</td>
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<td>300 FORBY RD</td>
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<td>ST ANN ASSISTED LIVING CENTER</td>
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<td>ST CLAIR NURSING CENTER</td>
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<td>(573) 493-2215</td>
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<td>ST ELIZABETH HALL</td>
<td>325 NORTH NEWSTEAD AVE</td>
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<td>ST FRANCIS PARK - ASSISTED LIVING BY AMERICARE</td>
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<td>ST GENEVIEVE CARE CENTER, INC</td>
<td>1010 STE GENEVIEVE DR</td>
<td>SAINTE GENEVIEVE</td>
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<th>Facility Name</th>
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<td>ST JOHNS PLACE</td>
<td>3333 BROWN ROAD</td>
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<td>63114-4327</td>
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Wednesday, April 03, 2019
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<th>Facility Name</th>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
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<table>
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<td>117 S HICKMAN, CENTRALIA, 65240-1316</td>
<td>(573) 682-3204</td>
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<td>5349 HIGHWAY P, CUBA, MO 65453-6281</td>
<td>(573) 885-3661</td>
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<td>(636) 528-3136</td>
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*SUNSET HEALTH CARE CENTER*
400 WEST PARK AVE
UNION MO 63084-1140
Mailing Address 400 WEST PARK AVE
UNION MO 63084-1140

Telephone (636) 583-2252
Level of Care: SNF
County FRANKLIN
Region 6 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 120
DMH Licensed No
Facility Number 07831

*SUNSET HILLS HEALTH AND REHABILITATION CENTER*
10954 KENNERLY RD
SAINT LOUIS MO 63128-2018
Mailing Address 10954 KENNERLY RD
SAINT LOUIS MO 63128-2018

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

*SUNSET HOME*
1201 SOUTH POLK
MAYSVILLE MO 64469-4028
Mailing Address 1201 S POLK
MAYSVILLE MO 64469-4028

Telephone (816) 449-2158
Level of Care: SNF
County DEKALB
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 07798

*SUNSHINE ACRES RESIDENTIAL CARE*
541 ROCK ROAD
BOURBON MO 65441-6324
Mailing Address PO BOX 67
BOURBON MO 65441-0067

Telephone (573) 732-5366
Level of Care: RCF
County CRAWFORD
Region 6 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 20
DMH Licensed Yes
Facility Number 03540

*SUNSHINE HOME CARE - ST CHARLES*
618 HEMSATH RD
SAINT CHARLES MO 63303-5919
Mailing Address 618 HEMSATH RD
SAINT CHARLES MO 63303-5919

Telephone (636) 947-7799
Level of Care: RCF
County SAINT CHARLES
Region 5 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 27
DMH Licensed Yes
Facility Number 08653

*SUNSHINE HOME CARE - WINFIELD*
499 WALNUT ST
WINFIELD MO 63389-1138
Mailing Address PO BOX 185
WINFIELD MO 63389-0185

Telephone (636) 668-8500
Level of Care: RCF
County LINCOLN
Region 5 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 49
DMH Licensed Yes
Facility Number 25266

*SUNSHINE VILLA HOMES LLC*
2520 JAMES ST
SCOTT CITY MO 63780-1219
Mailing Address 2520 JAMES ST
SCOTT CITY MO 63780-1219

Telephone (573) 264-2424
Level of Care: ALF
County SCOTT
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 22
DMH Licensed Yes
Facility Number 07039

*SUNTERRA SPRINGS INDEPENDENCE*
19200 E 37TH TERRACE S
INDEPENDENCE MO 64057-8324
Mailing Address 19200 E 37TH TERRACE S
INDEPENDENCE MO 64057-8324

Telephone (816) 335-3008
Level of Care: SNF
County JACKSON
Region 3 Medicare
Alzheimer's Unit No
Bed Capacity 38
DMH Licensed No
Facility Number 30894

*SUNTERRA SPRINGS SPRINGFIELD*
4935 S NATIONAL AVE
SPRINGFIELD MO 65810-2989
Mailing Address 4935 S NATIONAL AVE
SPRINGFIELD MO 65810-2989

Telephone (417) 720-8050
Level of Care: SNF
County GREENE
Region 1 Medicare
Alzheimer's Unit No
Bed Capacity 38
DMH Licensed No
Facility Number 31273

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

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**SUPERIOR MANOR OF DOWNTOWN, LLC**
1501 CLINTON STREET
SAINT LOUIS  MO  63106-4100
Telephone  (314) 376-5000  Alzheimer's Unit  NO
Level of Care:  RCF
Bed Capacity  40
County  SAINT LOUIS COUNTY  DMH Licensed  No
Region  7  Facility Number  30136

**SURREY PLACE ST LUKE'S HOSPITAL SKILLED NURSING**
14701 OLIVE BLVD
CHESTERFIELD  MO  63017-2221
Telephone  (314) 542-3300  Alzheimer's Unit  Yes
Level of Care:  SNF  Bed Capacity  130
Bed Capacity  130
County  SAINT LOUIS COUNTY  DMH Licensed  No
Region  7  Medicare/Medicaid  Facility Number  15467

**SWEET SPRING'S VILLA**
518 E MARSHALL
SWEET SPRINGS  MO  65351-9756
Telephone  (660) 335-6391  Alzheimer's Unit  Yes
Level of Care:  SNF  Bed Capacity  120
Bed Capacity  120
County  SALINE  DMH Licensed  No
Region  5  Medicare/Medicaid  Facility Number  05378

**SWIFT CREEK RESIDENTIAL CARE CENTER**
1673 HIGHWAY 53
POPLAR BLUFF  MO  63901-4132
Telephone  (573) 778-1129  Alzheimer's Unit  No
Level of Care:  RCF*  Bed Capacity  12
Bed Capacity  12
County  BUTLER  DMH Licensed  Yes
Region  2  Facility Number  20386

**SWITZER RESIDENTIAL CARE**
3260 MYSTIC LN
POPLAR BLUFF  MO  63901-3067
Telephone  (573) 785-9399  Alzheimer's Unit  No
Level of Care:  RCF*  Bed Capacity  20
Bed Capacity  20
County  BUTLER  DMH Licensed  Yes
Region  2  Facility Number  20739

**SWOPE RIDGE GERIATRIC CENTER**
5900 SWOPE PARKWAY
KANSAS CITY  MO  64130-4241
Telephone  (816) 333-2700  Alzheimer's Unit  No
Level of Care:  SNF  Bed Capacity  240
Bed Capacity  240
County  JACKSON  DMH Licensed  No
Region  3  Medicare/Medicaid  Facility Number  07904

**SYLVAN HOUSE**
30 SHERMAN RD
SAINT LOUIS  MO  63125-4125
Telephone  (314) 892-2212  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  40
Bed Capacity  40
County  SAINT LOUIS COUNTY  DMH Licensed  Yes
Region  7  Facility Number  15078

**SYLVIA G THOMPSON RESIDENCE CENTER, INC**
3333 WEST TENTH ST
SEDALIA  MO  65301-2113
Telephone  (660) 826-2118  Alzheimer's Unit  Yes
Level of Care:  SNF  Bed Capacity  120
Bed Capacity  120
County  PETTIS  DMH Licensed  No
Region  6  Medicaid  Facility Number  17278

**TABLE ROCK HEALTHCARE**
276 FOUNTAIN LN
KIMBERLING CITY  MO  65686-9356
Telephone  (417) 739-2481  Alzheimer's Unit  Yes
Level of Care:  SNF  Bed Capacity  120
Bed Capacity  120
County  STONE  DMH Licensed  No
Region  1  Medicare/Medicaid  Facility Number  07911

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Wednesday, April 03, 2019
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Wednesday, April 03, 2019
TIMBERS, THE  
239 KAREN DRIVE  
HOLTS SUMMIT  
MO 65043-2522  
Telephone (573) 415-0390  
Level of Care: ALF**  
Bed Capacity 50  
County CALLAWAY  
DMH Licensed No  
Region 6  
Facility Number 30384  

TIPTON OAK MANOR  
601 WEST MORGAN ST  
TIPTON  
MO 65081-8214  
Telephone (660) 433-5574  
Level of Care: SNF  
Bed Capacity 66  
County MONITEAU  
DMH Licensed No  
Region 6  
Medicare/Medicaid No  
Facility Number 08036  

TOWNE HOUSE, THE  
221 EAST WHITLEY  
MEXICO  
MO 65265-2815  
Telephone (573) 581-2547  
Level of Care: RCF*  
Bed Capacity 29  
County AUDRAIN  
DMH Licensed Yes  
Region 5  
Facility Number 08077  

TOWNHOUSE RESIDENTIAL CARE FACILITY  
207 FRONT ST  
ANNAPOlis  
MO 63620-9130  
Telephone (573) 598-1168  
Level of Care: RCF  
Bed Capacity 18  
County IRON  
DMH Licensed Yes  
Region 2  
Facility Number 20185  

TRI-COUNTY CARE CENTER  
601 NORTH GALLOWAY RD  
VANDALIA  
MO 63382-1252  
Telephone (573) 594-6467  
Level of Care: RCF*  
Bed Capacity 20  
County AUDRAIN  
DMH Licensed No  
Region 5  
Facility Number 08096  

TRI-COUNTY CARE CENTER  
601 NORTH GALLOWAY RD  
VANDALIA  
MO 63382-1252  
Telephone (573) 594-6467  
Level of Care: SNF  
Bed Capacity 90  
County AUDRAIN  
DMH Licensed No  
Region 5  
Medicare/Medicaid Yes  
Facility Number 08096  

TROY HOUSE RESCARE  
350 CAP AU GRIS  
TROY  
MO 63379-1761  
Telephone (636) 462-4915  
Level of Care: RCF*  
Bed Capacity 23  
County LINCOLN  
DMH Licensed No  
Region 5  
Facility Number 08129  

TROY MANOR  
200 THOMPSON DR  
TROY  
MO 63379-2308  
Telephone (636) 528-8446  
Level of Care: ALF  
Bed Capacity 20  
County LINCOLN  
DMH Licensed No  
Region 5  
Facility Number 05397  

TROY MANOR  
200 THOMPSON DR  
TROY  
MO 63379-2308  
Telephone (636) 528-8446  
Level of Care: SNF  
Bed Capacity 130  
County LINCOLN  
DMH Licensed No  
Region 5  
Medicare/Medicaid No  
Facility Number 05397  

* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (33rd General Assembly, Second Regular Session (2006)).  
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Wednesday, April 03, 2019
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<td>TWIN CITY RESIDENTIAL CARE, INC</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Telephone</th>
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<tr>
<td>UNION CARE CENTER</td>
<td>(636) 206-8585</td>
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<td>UNION MANOR, LLC</td>
<td>(314) 383-7310</td>
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<td>URBANA REST HOME</td>
<td>(417) 993-4638</td>
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<td>VALLEY - A STONEBRIDGE COMMUNITY, THE</td>
<td>(314) 741-9101</td>
<td>120</td>
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<td>VALLEY MANOR AND REHABILITATION CENTER</td>
<td>(816) 637-1010</td>
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<td>VALLEY PARK NORTH</td>
<td>(573) 592-4995</td>
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<tr>
<td>VALLEY PARK RETIREMENT CENTER</td>
<td>(573) 896-0208</td>
<td>22</td>
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<td>VALLEY PARK WEST</td>
<td>573-796-2520</td>
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<td>VALLEY VIEW HEALTH &amp; REHABILATION</td>
<td>(660) 263-6887</td>
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<table>
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<th>Establishment Name</th>
<th>Address</th>
<th>City</th>
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<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Level of Care</th>
<th>County</th>
<th>Region</th>
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<th>Facility Number</th>
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<tr>
<td>VELMA DOWDY ASSISTED LIVING</td>
<td>100 HARD ROCK RD DR</td>
<td>VAN BUREN</td>
<td>MO 63965-</td>
<td>(573) 323-2108</td>
<td>24</td>
<td>ALF**</td>
<td>CARTER</td>
<td>2</td>
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<tr>
<td>VERONICA HOUSE</td>
<td>12284 DEPAUL DR</td>
<td>BRIDGETON</td>
<td>MO 63044-2508</td>
<td>(314) 209-8814</td>
<td>No</td>
<td>ALF**</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
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<td>VICTORIAN PLACE OF VIENNA, RESIDENTIAL CARE BY AMERICARE</td>
<td>112 PARKWAY DR</td>
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<td>MO 65582-8003</td>
<td>(573) 422-3230</td>
<td>No</td>
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<td>901 HIGHWAY DD</td>
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<td>MO 65453-8089</td>
<td>(573) 885-0551</td>
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<td>2120 VILLAGE LN</td>
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<td>MO 65041-1600</td>
<td>(573) 486-5060</td>
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<td>MO 65066-1075</td>
<td>(573) 437-5396</td>
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<td>(636) 322-0003</td>
<td>No</td>
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<td>MO 63080-1358</td>
<td>(573) 468-5217</td>
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<td>No</td>
<td>26324</td>
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<td>UNION</td>
<td>MO 63084-1084</td>
<td>(636) 584-0085</td>
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<table>
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<td>(816) 347-2700</td>
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<td>64081-1559</td>
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<td>(816) 761-6838</td>
<td>5301 HARRY TRUMAN DR</td>
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<td>VILLAGE CARE CENTER, INC</td>
<td>810 EAST EDWARDS ST</td>
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<td>18</td>
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<td>(660) 562-3515</td>
<td>810 EAST EDWARDS ST</td>
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Wednesday, April 03, 2019
VILLAGE CENTER CARE OF WENTZVILLE
909 E PITMAN AVE
WENTZVILLE MO 63385-1818
Mailing Address 909 E PITMAN AVE
WENTZVILLE MO 63385-1818
Telephone (636) 219-3114
Level of Care: ALF**
County SAINT CHARLES
Region 5
Alzheimer's Unit No
Bed Capacity 22
DMH Licensed No
Facility Number 28026

VILLAGE WEST, THE
318 EAST LITTLE BRICK ROAD
CAMERON MO 64429-1231
Mailing Address 318 EAST LITTLE BRICK RD
CAMERON MO 64429-1231
Telephone (816) 632-1121
Level of Care: RCF*
County DEKALB
Region 4
Alzheimer's Unit No
Bed Capacity 27
DMH Licensed No
Facility Number 18104

VILLAGE, THE
320 EAST LITTLE BRICK RD
CAMERON MO 64429-1231
Mailing Address 320 EAST LITTLE BRICK RD
CAMERON MO 64429-1231
Telephone (816) 632-7611
Level of Care: RCF*
County DEKALB
Region 4
Alzheimer's Unit No
Bed Capacity 49
DMH Licensed No
Facility Number 08945

VILLAGES OF JACKSON CREEK MEMORY CARE, THE
19400 EAST 40TH ST COURT SOUTH
INDEPENDENCE MO 64057-1548
Mailing Address 19400 EAST 40TH ST COURT SOUTH
INDEPENDENCE MO 64057-1548
Telephone (816) 795-1433
Level of Care: ICF
County JACKSON
Region 3
Alzheimer's Unit Yes
Bed Capacity 70
DMH Licensed No
Facility Number 25894

VILLAGES OF JACKSON CREEK, THE
3980 SOUTH JACKSON DR
INDEPENDENCE MO 64057-2205
Mailing Address 3980 S JACKSON DR
INDEPENDENCE MO 64057-2205
Telephone (816) 795-1433
Level of Care: ALF**
County JACKSON
Region 3
Alzheimer's Unit No
Bed Capacity 62
DMH Licensed No
Facility Number 25709

VILLAGES OF JACKSON CREEK, THE
3980 SOUTH JACKSON DR
INDEPENDENCE MO 64057-2205
Mailing Address 3980 S JACKSON DR
INDEPENDENCE MO 64057-2205
Telephone (816) 795-1433
Level of Care: SNF
County JACKSON
Region 3
Alzheimer's Unit No
Bed Capacity 120
DMH Licensed No
Facility Number 25709

VILLAGES OF ST PETERS MEMORY CARE
5300 EXECUTIVE CENTER PARKWAY
SAINT PETERS MO 63376-3182
Mailing Address 5300 EXECUTIVE CENTER PARKWAY
SAINT PETERS MO 63376-3182
Telephone (636) 477-6955
Level of Care: ALF**
County SAINT CHARLES
Region 5
Alzheimer's Unit Yes
Bed Capacity 60
DMH Licensed No
Facility Number 29889

VILLAGES OF ST PETERS, THE
5400 EXECUTIVE CENTRE PKWY
SAINT PETERS MO 63376-2594
Mailing Address 5400 EXECUTIVE CENTRE PKWY
SAINT PETERS MO 63376-2594
Telephone (636) 922-7600
Level of Care: SNF
County SAINT CHARLES
Region 5
Alzheimer's Unit Yes
Bed Capacity 130
DMH Licensed No
Facility Number 26014

VILLAGES OF ST PETERS, THE
5400 EXECUTIVE CENTRE PKWY
SAINT PETERS MO 63376-2594
Mailing Address 5400 EXECUTIVE CENTRE PKWY
SAINT PETERS MO 63376-2594
Telephone (636) 922-7600
Level of Care: ALF**
County SAINT CHARLES
Region 5
Alzheimer's Unit No
Bed Capacity 62
DMH Licensed No
Facility Number 26014

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<table>
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<tr>
<th>Facility Name</th>
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<th>City, State Zip</th>
<th>Phone</th>
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<th>Medicare/Medicaid</th>
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<td>670 BROADRIDGE DRIVE</td>
<td>JACKSON, MO 63755-3044</td>
<td>(573) 986-8210</td>
<td>ALF**</td>
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<td>CAPE GIRARDEAU</td>
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<td>VILLAS-A STONEBRIDGE COMMUNITY, THE</td>
<td>1550 VILLAS DR</td>
<td>DE SOTO, MO 63020-2586</td>
<td>(636) 586-6559</td>
<td>SNF</td>
<td>56</td>
<td>JEFFERSON</td>
<td>No</td>
<td>13501</td>
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<td>VILLAS-A STONEBRIDGE COMMUNITY, THE</td>
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<td>3302 NORTH WOODBINE ROAD</td>
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<td>(816) 390-9555</td>
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<td>320 N CHAMBER DR</td>
<td>FREDERICKTOWN, MO 63645-7947</td>
<td>(573) 783-4511</td>
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<td>WARRENSBURG, MO 64093-3100</td>
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<td>WARRENTON MANOR</td>
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<td>(636) 456-8700</td>
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Wednesday, April 03, 2019
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<th>Facility Name</th>
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<th>City</th>
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<th>County</th>
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<td>MO</td>
<td>(816) 228-6337</td>
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<td>27</td>
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<td>(417) 673-1933</td>
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<td>(417) 859-5144</td>
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<table>
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<tr>
<th>Facility Name</th>
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<th>City</th>
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<th>Telephone</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>Alzheimer's Unit</th>
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<td>312 SOLLEY DR</td>
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<td>65775-2241</td>
<td>(417) 256-2152</td>
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<td><strong>WESTCHESTER HOUSE, THE</strong></td>
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<td>(573) 455-2280</td>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
<th>Bed Capacity</th>
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<th>Alzheimer's Unit</th>
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<th>Mailing Address</th>
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<td>904 APACHE DR</td>
<td>MARSHALL</td>
<td>MO</td>
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<td>(660) 886-5500</td>
<td>904 APACHE DR</td>
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<td>11901 JESSICA LN</td>
<td>RAYTOWN</td>
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<td>64138-2639</td>
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<td>(816) 358-3535</td>
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<td>KANSAS CITY</td>
<td>MO</td>
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<td>4904 EAST WELLRIDGE LN</td>
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Wednesday, April 03, 2019
WHITE OAK LIVING CENTER
1515 WEST WHITE OAK
INDEPENDENCE  MO  64050-2557
Mailing Address 1515 WEST WHITE OAK
INDEPENDENCE  MO  64050-2557
Telephone (816) 254-3500 Alzheimer's Unit  No
Level of Care: ALF** Bed Capacity 78
County JACKSON DMH Licensed  No
Region 3 Facility Number 06604

WILLOW BROOKE - ASSISTED LIVING BY AMERICARE
#1 NORTH POTOMAC CT
UNION  MO  63084-1113
Mailing Address 1 NORTH POTOMAC CT
UNION  MO  63084-1113
Telephone (636) 583-2799 Alzheimer's Unit  No
Level of Care: ALF** Bed Capacity 50
County FRANKLIN DMH Licensed  No
Region 6 Facility Number 13596

WILLOW CARE CENTER
400 WEST WALNUT LN
WILLARD  MO  65781-9432
Mailing Address 400 W WALNUT LN
WILLARD  MO  65781-9432
Telephone (417) 742-3593 Alzheimer's Unit  Yes
Level of Care: SNF Bed Capacity 66
County GREENE DMH Licensed  No
Region 1 Medicare/Medicaid Facility Number 16393

WILLOW CARE REHABILITATION & HEALTH CARE CENTER
328 MUNGER LN
HANNIBAL  MO  63401-2361
Mailing Address 328 MUNGER LN
HANNIBAL  MO  63401-2361
Telephone (573) 221-9122 Alzheimer's Unit  No
Level of Care: SNF Bed Capacity 111
County MARION DMH Licensed  No
Region 5 Medicare/Medicaid Facility Number 03340

WILLOW WEST APARTMENTS
2644 STATE ROUTE 76
WILLWOOD SPRINGS  MO  65793-8254
Mailing Address PO BOX 309
WILLWOOD SPRINGS  MO  65793-0309
Telephone (417) 469-3152 Alzheimer's Unit  No
Level of Care: ALF Bed Capacity 36
County HOWELL DMH Licensed  No
Region 1 Facility Number 08614

WILSHIRE AT LAKEWOOD
600 NE MEADOWVIEW DR
LEE'S SUMMIT  MO  64064-1983
Mailing Address 600 NE MEADOWVIEW DR
LEE'S SUMMIT  MO  64064-1983
Telephone (816) 554-9866 Alzheimer's Unit  No
Level of Care: SNF Bed Capacity 170
County JACKSON DMH Licensed  No
Region 3 Medicare/Medicaid Facility Number 22471

WILSON'S CREEK NURSING & REHAB
3403 WEST MT VERNON
SPRINGFIELD  MO  65802-5241
Mailing Address 3403 WEST MT VERNON
SPRINGFIELD  MO  65802-5241
Telephone (417) 864-5600 Alzheimer's Unit  Yes
Level of Care: SNF Bed Capacity 172
County GREENE DMH Licensed  No
Region 1 Medicare/Medicaid Facility Number 05579

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### WINCHESTER NURSING CENTER, INC

**Telephone:** (573) 293-6702  
**Level of Care:** SNF  
**County:** STODDARD  
**Region:** 2  
**Bed Capacity:** 40  
**Medicare/Medicaid:** No  
**Facility Number:** 31391

**WINCHESTER RESIDENTIAL CARE, INC**

**Telephone:** (573) 293-6705  
**Level of Care:** RCF*  
**County:** STODDARD  
**Region:** 2  
**Bed Capacity:** 26  
**DMH Licensed:** No  
**Facility Number:** 24912

**WINDEMER RESIDENTIAL CARE**

**Telephone:** (816) 741-0753  
**Level of Care:** RCF  
**County:** PLATTE  
**Region:** 4  
**Bed Capacity:** 65  
**DMH Licensed:** No  
**Facility Number:** 08668

### WINDEMERES RESIDENTIAL CARE

**Telephone:** (636) 946-4966  
**Level of Care:** SNF  
**County:** SAINT CHARLES  
**Region:** 5  
**Bed Capacity:** 66  
**DMH Licensed:** No  
**Facility Number:** 06316

**WINDSOR ESTATES OF ST CHARLES SNAL, LLC**

**Telephone:** (636) 946-4966  
**Level of Care:** ALF**  
**County:** SAINT CHARLES  
**Region:** 5  
**Bed Capacity:** 90  
**DMH Licensed:** No  
**Facility Number:** 06316

**WINDSOR ESTATES OF ST CHARLES SNAL, LLC**

**Telephone:** (660) 647-3102  
**Level of Care:** SNF  
**County:** HENRY  
**Region:** 1  
**Bed Capacity:** 60  
**DMH Licensed:** No  
**Facility Number:** 21715

**WINDSOR HEALTHCARE & REHAB CENTER**

**Telephone:** (816) 254-5400  
**Level of Care:** RCF*  
**County:** JACKSON  
**Region:** 3  
**Bed Capacity:** 30  
**DMH Licensed:** Yes  
**Facility Number:** 02389

**WOOD OAKS, INC**

**Telephone:** (573) 238-2614  
**Level of Care:** SNF  
**County:** BOLLINGER  
**Region:** 2  
**Bed Capacity:** 98  
**DMH Licensed:** No  
**Facility Number:** 10864

**WOODLAND HILLS - A STONEBRIDGE COMMUNITY**

**Telephone:** (573) 293-6702  
**Level of Care:** SNF  
**County:** STODDARD  
**Region:** 2  
**Bed Capacity:** 40  
**Medicare/Medicaid:** No  
**Facility Number:** 31391

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

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

Wednesday, April 03, 2019
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Telephone</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>County</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>WOODLAND MANOR</td>
<td>1347 EAST VALLEY WATERMILL RD</td>
<td>(417) 833-1220</td>
<td>No</td>
<td>180</td>
<td>GREENE</td>
<td>No</td>
<td>05794</td>
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<td>WOODLAND MANOR NURSING CENTER</td>
<td>100 WOODLAND COURT</td>
<td>(636) 296-1400</td>
<td>No</td>
<td>178</td>
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<td>No</td>
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<td>WOODLAND MANOR OF ARNOLD, LLC</td>
<td>100 WOODLAND COURT</td>
<td>(636) 296-1400</td>
<td>No</td>
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<td>WORTH COUNTY CONVALESCENT CENTER</td>
<td>503 E 4TH ST</td>
<td>(660) 564-3304</td>
<td>No</td>
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<td>WORTH</td>
<td>No</td>
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</tbody>
</table>

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