ABBEY SENIOR HEALTH
206 NORTH MAIN ST
O'FALLON  MO  63366-2299
Mailing Address: 206 NORTH MAIN ST
O'FALLON  MO  63366-2299
Telephone: (636) 240-5754
Level of Care: SNF
County: SAINT CHARLES
Region: 5
Medicare/Medicaid: No
Bed Capacity: 55
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 27367

ABBEY WOODS CENTER FOR REHABILITATION AND HEALING
5026 FARAON ST
SAINT JOSEPH  MO  64506-3375
Mailing Address: 5026 FARAON ST
SAINT JOSEPH  MO  64506-3375
Telephone: (816) 279-1591
Level of Care: SNF
County: BUCHANAN
Region: 4
Medicare/Medicaid: No
Bed Capacity: 100
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 01463

ABC HEALTH CARE
307 EAST SOUTH ST
HARRISONVILLE  MO  64701-3241
Mailing Address: 307 EAST SOUTH ST
HARRISONVILLE  MO  64701-3241
Telephone: (816) 380-7399
Level of Care: SNF
County: CASS
Region: 3
Medicare/Medicaid: No
Bed Capacity: 60
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 00025

ABERDEEN HEIGHTS
505 COUCH AVE
KIRKWOOD  MO  63122-5536
Mailing Address: 505 COUCH AVE
KIRKWOOD  MO  63122-5536
Telephone: (314) 909-6000
Level of Care: ICF
County: SAINT LOUIS COUNTY
Region: 7
Medicare/Medicaid: Yes
Bed Capacity: 16
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 27570

ABERDEEN HEIGHTS
505 COUCH AVE
KIRKWOOD  MO  63122-5536
Mailing Address: 505 COUCH AVE
KIRKWOOD  MO  63122-5536
Telephone: (314) 909-6000
Level of Care: SNF
County: SAINT LOUIS COUNTY
Region: 7
Medicare/Medicaid: No
Bed Capacity: 38
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 27570

ABERDEEN HEIGHTS
505 COUCH AVE
KIRKWOOD  MO  63122-5536
Mailing Address: 505 COUCH AVE
KIRKWOOD  MO  63122-5536
Telephone: (314) 909-6000
Level of Care: ALF**
County: SAINT LOUIS COUNTY
Region: 7
Medicare/Medicaid: No
Bed Capacity: 36
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 27570

ACKERT PARK SKILLED NURSING & REHABILITATION CENTER
894 LELAND AVE
UNIVERSITY CITY  MO  63130-3239
Mailing Address: 894 LELAND AVE
UNIVERSITY CITY  MO  63130-3239
Telephone: (314) 726-4767
Level of Care: SNF
County: SAINT LOUIS COUNTY
Region: 7
Medicare/Medicaid: No
Bed Capacity: 130
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 02100

ADAMS STREET-A STONEBRIDGE COMMUNITY
1024 ADAMS ST
JEFFERSON CITY  MO  65101-3408
Mailing Address: 1024 ADAMS ST
JEFFERSON CITY  MO  65101-3408
Telephone: (573) 635-1320
Level of Care: SNF
County: COLE
Region: 6
Medicare/Medicaid: No
Bed Capacity: 120
Alzheimer's Unit: No
DMH Licensed: No
Facility Number: 01339

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Monday, November 4, 2019
**ADDINGTON PLACE OF LEE’S SUMMIT**
2160 SE BLUE PARKWAY  
LEE’S SUMMIT  
MO 64063-1007  
Telephone  (816) 554-0101  
Level of Care: ALF**  
Bed Capacity 88  
County JACKSON  
DMH Licensed No  
Facility Number 28136  
Region 3

**ADDINGTON PLACE OF SHOAL CREEK**
9601 NORTH TULLIS DR  
KANSAS CITY  
MO 64157-7890  
Telephone  (816) 407-9667  
Level of Care: ALF**  
Bed Capacity 88  
County CLAY  
DMH Licensed No  
Facility Number 28129  
Region 4

**ADRIAN MANOR HEALTH & REHABILITATION CENTER**
402 WEST 1ST STREET  
ADRIAN  
MO 64720-9277  
Telephone  (816) 297-2107  
Level of Care: SNF  
Bed Capacity 60  
County BATES  
DMH Licensed No  
Facility Number 00032  
Region 3

**ADVANCE ASSISTED LIVING**
252 PAYTON PLACE  
ADVANCE  
MO 63730-7251  
Telephone  (573) 722-5200  
Level of Care: ALF  
Bed Capacity 44  
County STODDARD  
DMH Licensed No  
Facility Number 28426  
Region 2

**ADVANCE NURSING CENTER**
315 SOUTH TILLEY ST  
ADVANCE  
MO 63730-7230  
Telephone  (573) 722-3440  
Level of Care: SNF  
Bed Capacity 70  
County STODDARD  
DMH Licensed No  
Facility Number 11722  
Region 2

**AKINS HEALTH CARE, INC**
4432 WEST BELLE PL  
SAINT LOUIS  
MO 63108-2617  
Telephone  (314) 652-8908  
Level of Care: RCF  
Bed Capacity 20  
County SAINT LOUIS CITY  
DMH Licensed Yes  
Facility Number 00078  
Region 7

**ALBANY PLACE LLC**
520 S ALBANY  
BOLIVAR  
MO 65613-2116  
Telephone  (417) 777-8040  
Level of Care: RCF*  
Bed Capacity 16  
County POLK  
DMH Licensed Yes  
Facility Number 24731  
Region 1

**ALEXIAN BROTHERS LANSDOWNE VILLAGE**
4624 LANSDOWNE AVE  
SAINT LOUIS  
MO 63116-1523  
Telephone  (314) 351-6888  
Level of Care: SNF  
Bed Capacity 145  
County SAINT LOUIS CITY  
DMH Licensed No  
Facility Number 14557  
Region 7

**ALEXIAN BROTHERS SHERBROOKE VILLAGE**
4005 RIPA AVE  
SAINT LOUIS  
MO 63125-2378  
Telephone  (314) 544-1111  
Level of Care: ALF**  
Bed Capacity 88  
County SAINT LOUIS COUNTY  
DMH Licensed No  
Facility Number 15436  
Region 7

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Monday, November 4, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Telephone</th>
<th>Alzheimer's Unit</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>ALEXIAN BROTHERS SHERBROOKE VILLAGE</td>
<td>(314) 544-1111</td>
<td>Yes</td>
<td>SNF</td>
<td>167</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
<td>No</td>
<td>15436</td>
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<tr>
<td>ALLEGRO</td>
<td>314-332-8372</td>
<td>YES</td>
<td>ALF**</td>
<td>88</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
<td>Yes</td>
<td>31437</td>
</tr>
<tr>
<td>ALLWAYS KARE RESIDENTIAL FACILITY, INC</td>
<td>(314) 367-9516</td>
<td>No</td>
<td>RCF</td>
<td>20</td>
<td>SAINT LOUIS CITY</td>
<td>7</td>
<td>No</td>
<td>Yes</td>
<td>05212</td>
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<tr>
<td>AMBROSE PARK RESIDENTIAL CARE</td>
<td>(660) 668-3140</td>
<td>No</td>
<td>RCF*</td>
<td>20</td>
<td>BENTON</td>
<td>6</td>
<td>No</td>
<td>Yes</td>
<td>26313</td>
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<tr>
<td>ANNA DODSON HOME</td>
<td>(573) 756-5530</td>
<td>No</td>
<td>RCF</td>
<td>17</td>
<td>SAINT FRANCOIS</td>
<td>2</td>
<td>No</td>
<td>Yes</td>
<td>02160</td>
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<tr>
<td>ANNA'S HOUSE RESIDENTIAL CARE FACILITY LLC</td>
<td>(417) 473-6000</td>
<td>No</td>
<td>RCF</td>
<td>11</td>
<td>WEBSTER</td>
<td>1</td>
<td>No</td>
<td>Yes</td>
<td>13487</td>
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<tr>
<td>ANTHOLOGY OF BURLINGTON CREEK</td>
<td>(816) 505-3030</td>
<td>Yes</td>
<td>ALF**</td>
<td>110</td>
<td>PLATTE</td>
<td>4</td>
<td>No</td>
<td>No</td>
<td>30198</td>
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<tr>
<td>ANTHOLOGY OF CLAYTON VIEW</td>
<td>(314) 961-1700</td>
<td>Yes</td>
<td>ALF**</td>
<td>90</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
<td>No</td>
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</tbody>
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ANTHOLOGY OF THE PLAZA  
2 EMANUEL CLEAVER II BLVD  
KANSAS CITY, MO 64112-1712  
Mailing Address: 2 EMANUEL CLEAVER 11 BLVD  
KANSAS CITY, MO 64112-1712  
Phone: 816-505-3030  
Level of Care: ALF**  
County: JACKSON  
Region: 3  
Bed Capacity: 96  
Alzheimer's Unit: Yes  
DMH Licensed: No  
Facility Number: 31791

ANTHOLOGY OF TOWN & COUNTRY  
1020 WOODS MILL ROAD  
TOWN AND COUNTRY, MO 63017-0603  
Mailing Address: 1020 WOODS MILL ROAD  
TOWN AND COUNTRY, MO 63017-0603  
Phone: (636) 527-4444  
Level of Care: ALF**  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 94  
Alzheimer's Unit: No  
DMH Licensed: No  
Facility Number: 30612

ANTHOLOGY OF WILLOWood  
251 PLAZA DRIVE  
WILLOWood, MO 63040-1203  
Mailing Address: 251 PLAZA DRIVE  
WILLOWood, MO 63040-1203  
Phone: (636) 273-3900  
Level of Care: ALF**  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 94  
Alzheimer's Unit: Yes  
DMH Licensed: No  
Facility Number: 31049

APERION CARE HIDDEN LAKE  
11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Mailing Address: 11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Phone: (314) 355-8833  
Level of Care: ALF  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 38  
Alzheimer's Unit: No  
DMH Licensed: No  
Facility Number: 18442

APERION CARE HIDDEN LAKE  
11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Mailing Address: 11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Phone: (314) 355-8833  
Level of Care: SNF  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 67  
Alzheimer's Unit: No  
DMH Licensed: No  
Facility Number: 18442

APERION CARE HIDDEN LAKE  
11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Mailing Address: 11728 HIDDEN LAKE DR  
SAINT LOUIS, MO 63138-1757  
Phone: (314) 355-8833  
Level of Care: ALF**  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 38  
Alzheimer's Unit: Yes  
DMH Licensed: No  
Facility Number: 18442

APPLE RIDGE CARE CENTER  
100 WEST THOMAS AVE  
WAVERLY, MO 64096-9143  
Mailing Address: PO BOX 188  
WAVERLY, MO 64096-0188  
Phone: (660) 493-2232  
Level of Care: SNF  
County: LAFAYETTE  
Region: 3  
Bed Capacity: 60  
Alzheimer's Unit: Yes  
DMH Licensed: No  
Facility Number: 08823

APPLEGATE RETIREMENT HOME  
1204 TELEGRAPH RD  
SAINT LOUIS, MO 63125-2528  
Mailing Address: 1204 TELEGRAPH RD  
SAINT LOUIS, MO 63125-2528  
Phone: (314) 631-2003  
Level of Care: RCF*  
County: SAINT LOUIS COUNTY  
Region: 7  
Bed Capacity: 38  
Alzheimer's Unit: Yes  
DMH Licensed: No  
Facility Number: 14409

APPLETON CITY MANOR  
600 NORTH OHIO ST  
APPLETON CITY, MO 64724-1609  
Mailing Address: PO BOX 98  
APPLETON CITY, MO 64724-0098  
Phone: (660) 476-2128  
Level of Care: SNF  
County: SAINT CLAIR  
Region: 1  
Bed Capacity: 60  
Alzheimer's Unit: No  
DMH Licensed: No  
Facility Number: 01637

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer’s Unit</th>
<th>Facility Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARBORS AT GLENDALE GARDENS - MEMORY CARE BY AMERICARE, THE</td>
<td>1300 SOUTH MAIN, CLINTON, MO 64735-2728</td>
<td>(660) 885-2272</td>
<td>ALF**</td>
<td>HENRY</td>
<td>42</td>
<td>Yes</td>
<td>17054</td>
</tr>
<tr>
<td>ARBORS AT HARMONY GARDENS-MEMORY CARE ASSISTED LIVING BY AMERICARE THE</td>
<td>539 EAST YOUNG AVENUE, WARRENSBURG, MO 64093-2728</td>
<td>(660) 429-0034</td>
<td>ALF**</td>
<td>JOHNSON</td>
<td>24</td>
<td>No</td>
<td>31389</td>
</tr>
<tr>
<td>ARBORS AT HIGHLAND CREST - ALZHEIMERS ASSISTED LIVING BY AMERICARE, THE</td>
<td>620 GILASPY ROAD, KIRKSVILLE, MO 63501-4678</td>
<td>(660) 627-8004</td>
<td>ALF**</td>
<td>ADAIR</td>
<td>28</td>
<td>No</td>
<td>23608</td>
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<tr>
<td>ARBORS AT LAKEVIEW BEND - ASSISTED LIVING BY AMERICARE, THE</td>
<td>1700 ASBURY CIRCLE WEST, MEXICO, MO 65265-1400</td>
<td>(573) 581-8777</td>
<td>ALF**</td>
<td>AUDRAIN</td>
<td>39</td>
<td>Yes</td>
<td>13544</td>
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<tr>
<td>ARBORS AT MOUNT CARMEL, THE</td>
<td>723 FIRST CAPITOL DR, SAINT CHARLES, MO 63301-2729</td>
<td>(636) 946-4140</td>
<td>ALF**</td>
<td>SAINT CHARLES</td>
<td>30</td>
<td>No</td>
<td>29396</td>
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<tr>
<td>ARBORS AT PARKSIDE - MEMORY CARE ASSISTED LIVING BY AMERICARE</td>
<td>1700 EAST 10TH ST, ROLLA, MO 65401-4600</td>
<td>(573) 364-2602</td>
<td>ALF**</td>
<td>PHELPS</td>
<td>22</td>
<td>Yes</td>
<td>13589</td>
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<tr>
<td>ARBORS AT VICTORIAN PLACE OF CUBA, MEMORY CARE ASSISTED LIVING BY AMERICARE, THE</td>
<td>903 HWY DD, CUBA, MO 65453-8089</td>
<td>(573) 885-0379</td>
<td>ALF**</td>
<td>CRAWFORD</td>
<td>32</td>
<td>Yes</td>
<td>27071</td>
</tr>
<tr>
<td>ARBORS AT VICTORIAN PLACE OF WASHINGTON, MEMORY CARE ASSISTED LIVING BY AMERICARE, THE</td>
<td>2701 RABBIT TRAIL DR, WASHINGTON, MO 63090-6711</td>
<td>(636) 390-0011</td>
<td>ALF**</td>
<td>FRANKLIN</td>
<td>32</td>
<td>No</td>
<td>28065</td>
</tr>
<tr>
<td>ARBORS AT WESTBROOK TERRACE-ALZHEIMER'S ASSISTED LIVING BY AMERICARE</td>
<td>3409 NORTH 10 MILE DR, JEFFERSON CITY, MO 65109-0530</td>
<td>(573) 556-5648</td>
<td>ALF**</td>
<td>COLE</td>
<td>26</td>
<td>No</td>
<td>27914</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Phone Number</th>
<th>License Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ARBORS AT WESTRIDGE PLACE</strong></td>
<td>539 NORTH WEST ST</td>
<td>SIKESTON</td>
<td>MO</td>
<td>(573) 471-6484</td>
<td>Alzheimer's Unit: Yes, Bed Capacity: 28</td>
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<tr>
<td><strong>ARIZONA CARE CENTER</strong></td>
<td>101 ARIZONA ST</td>
<td>NEW HAVEN</td>
<td>MO</td>
<td>(573) 237-4830</td>
<td>Alzheimer's Unit: No, Bed Capacity: 15</td>
</tr>
<tr>
<td><strong>ARMOUR OAKS SENIOR LIVING COMMUNITY</strong></td>
<td>8100 WORNALL RD</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>(816) 363-5141</td>
<td>Alzheimer's Unit: No, Bed Capacity: 38</td>
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<tr>
<td><strong>ARROWHEAD SENIOR LIVING COMMUNITY</strong></td>
<td>6100 ARROWHEAD DRIVE</td>
<td>OSAGE BEACH</td>
<td>MO</td>
<td>573-302-7111</td>
<td>Alzheimer's Unit: Yes, Bed Capacity: 90</td>
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<tr>
<td><strong>ARROWHEAD SENIOR LIVING COMMUNITY</strong></td>
<td>6100 ARROWHEAD DRIVE</td>
<td>OSAGE BEACH</td>
<td>MO</td>
<td>573-302-7111</td>
<td>Alzheimer's Unit: No, Bed Capacity: 80</td>
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<td><strong>ASH GROVE HEALTHCARE FACILITY</strong></td>
<td>401 NORTH MEDICAL DR</td>
<td>ASH GROVE</td>
<td>MO</td>
<td>(417) 751-2575</td>
<td>Alzheimer's Unit: Yes, Bed Capacity: 82</td>
</tr>
<tr>
<td><strong>ASHBROOK - ASSISTED LIVING BY AMERICARE</strong></td>
<td>500 ASHBOURK DR</td>
<td>FARMINGTON</td>
<td>MO</td>
<td>(573) 756-5544</td>
<td>Alzheimer's Unit: No, Bed Capacity: 72</td>
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<tr>
<td><strong>ASHBURY HEIGHTS OF CHILlicoTHE</strong></td>
<td>603 ST LOUIS ST</td>
<td>CHILlicoTHE</td>
<td>MO</td>
<td>(660) 707-1270</td>
<td>Alzheimer's Unit: No, Bed Capacity: 12</td>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
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<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<td>ASHBY HEIGHTS OF FAYETTE</td>
<td>200 GROCE ST</td>
<td>FAYETTE</td>
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<td>(660) 248-3603</td>
<td>RCF</td>
<td>HOWARD</td>
<td>12</td>
<td>No</td>
<td>No</td>
<td>23894</td>
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<td>ASHBY HEIGHTS OF FULTON</td>
<td>704 WEST CHESTNUT</td>
<td>FULTON</td>
<td>MO</td>
<td>(573) 642-2015</td>
<td>RCF</td>
<td>CALLAWAY</td>
<td>12</td>
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<td>23923</td>
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<td>ASHBY HEIGHTS OF JEFFERSON CITY</td>
<td>834 WEATHERED ROCK COURT</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>(573) 634-7402</td>
<td>RCF</td>
<td>COLE</td>
<td>12</td>
<td>No</td>
<td>No</td>
<td>23936</td>
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<tr>
<td>ASHBY HEIGHTS OF LAURIE</td>
<td>299 HIGHWAY RA</td>
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Monday, November 4, 2019
ASHTON COURT CARE AND REHABILITATION CENTRE
1200 WEST COLLEGE ST
LIBERTY MO 64068-1036
Mailing Address 1200 WEST COLLEGE ST
LIBERTY MO 64068-1036
Telephone (816) 781-3020
Level of Care: SNF
County CLAY
Region 4 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 140
DMH Licensed No
Facility Number 01961

ASSISTED LIVING AT CHARLESS VILLAGE
5943 TELEGRAPH RD
SAINT LOUIS MO 63129-4715
Mailing Address 5943 TELEGRAPH RD
SAINT LOUIS MO 63129-4715
Telephone (314) 846-2002
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit No
Bed Capacity 18
DMH Licensed No
Facility Number 05586

ASSISTED LIVING AT THE MEADOWLANDS
135 MEADOWLANDS ESTATES LN
O'FALLON MO 63366-4591
Mailing Address 135 MEADOWLANDS ESTATES LN
O'FALLON MO 63366-4591
Telephone (573) 651-0199
Level of Care: ALF
County CAPE GIRARDEAU
Region 2
Alzheimer's Unit Yes
Bed Capacity 53
DMH Licensed No
Facility Number 19892

AUBURN CREEK - ASSISTED LIVING BY AMERICARE
2910 BEAVER CREEK DR
CAPE GIRARDEAU MO 63701-1732
Mailing Address 2910 BEAVER CREEK DR
CAPE GIRARDEAU MO 63701-1732
Telephone (573) 634-2031
Level of Care: RCF
County COLE
Region 6
Alzheimer's Unit Yes
Bed Capacity 24
DMH Licensed No
Facility Number 31832

AUBURN RIDGE LIVING CENTER
1425 ASHBURY WAY
WARDSVILLE MO 65101-
Mailing Address 1425 ASHBURY WAY
WARDSVILLE MO 65101-
Telephone (417) 678-2165
Level of Care: SNF
County LAWRENCE
Region 1 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 125
DMH Licensed No
Facility Number 00234

AURORA NURSING CENTER
1700 SOUTH HUDSON AVE
AURORA MO 65605-2717
Mailing Address 1700 S HUDSON AVE
AURORA MO 65605-2717
Telephone (417) 926-5128
Level of Care: SNF
County WRIGHT
Region 1 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 07970

AUTUMN OAKS CARING CENTER
1310 HOVIS ST
MOUNTAIN GROVE MO 65711-1219
Mailing Address 1310 HOVIS ST
MOUNTAIN GROVE MO 65711-1219
Telephone (417) 626-8900
Level of Care: RCF*
County JASPER
Region 1
Alzheimer's Unit No
Bed Capacity 38
DMH Licensed No
Facility Number 20779

AUTUMN PLACE RESIDENTIAL CARE OF JOPLIN
2030 E ZORA ST
JOPLIN MO 64801-1170
Mailing Address 2030 E ZORA ST
JOPLIN MO 64801-1170
Telephone (636) 931-8400
Level of Care: RCF*
County JEFFERSON
Region 2
Alzheimer's Unit Yes
Bed Capacity 81
DMH Licensed No
Facility Number 15845

* 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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Monday, November 4, 2019
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Monday, November 4, 2019
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<td>1030 BARATHAVEN DR</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Alzheimer's Unit</th>
<th>Facility Number</th>
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<tr>
<td>BEAUVAIS MANOR HEALTHCARE &amp; REHAB CENTER</td>
<td>3625 MAGNOLIA AVE</td>
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<tr>
<td>BECKY'S PLACE RESIDENTIAL CARE, LLC</td>
<td>500 CULLER AVE</td>
<td>BUNKER</td>
<td>MO</td>
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<td>BELLEFONTAINE GARDENS NURSING &amp; REHAB</td>
<td>9500 BELLEFONTAINE RD</td>
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<td>BELLEVIEW VALLEY NURSING HOME</td>
<td>23144 HIGHWAY 32</td>
<td>BELLEVIEW</td>
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<td>3863 CLEVELAND</td>
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<td>BENTLEY'S EXTENDED CARE</td>
<td>3060 ASHBY ROAD</td>
<td>OVERLAND</td>
<td>MO</td>
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<td>No</td>
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<tr>
<td>BENTON HOUSE OF BLUE SPRINGS</td>
<td>1701 NW JEFFERSON ST</td>
<td>BLUE SPRINGS</td>
<td>MO</td>
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<td>No</td>
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<td>BENTON HOUSE OF RAYMORE</td>
<td>2100 JOHNSTON DR</td>
<td>RAYMORE</td>
<td>MO</td>
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<td>No</td>
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<td>29896</td>
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<tr>
<td>BENTON HOUSE OF STALEY HILLS</td>
<td>11071 N WOODLAND AVE</td>
<td>KANSAS CITY</td>
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<td>80</td>
<td>No</td>
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<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City, State</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>Facility Number</th>
</tr>
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<tr>
<td><strong>BENTON HOUSE OF TIFFANY SPRINGS</strong></td>
<td>5901 NW 88TH ST</td>
<td>KANSAS CITY</td>
<td>(816) 505-4555</td>
<td>Yes</td>
<td>80</td>
<td>PLATTE</td>
<td>4</td>
<td>No</td>
<td>29519</td>
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<tr>
<td><strong>BENTONVIEW PARK HEALTH &amp; REHABILITATION</strong></td>
<td>410 WEST BENTON ST</td>
<td>MONETT</td>
<td>(417) 235-6031</td>
<td>Yes</td>
<td>120</td>
<td>BARRY</td>
<td>1</td>
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<td><strong>BENTWOOD NURSING &amp; REHAB</strong></td>
<td>1501 CHARBONIER RD</td>
<td>SAINT LOUIS</td>
<td>(314) 371-0200</td>
<td>No</td>
<td>141</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
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<tr>
<td><strong>BERNARD CARE CENTER</strong></td>
<td>4335 WEST PINE BLVD</td>
<td>SAINT LOUIS</td>
<td>(573) 683-4290</td>
<td>No</td>
<td>64</td>
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<tr>
<td><strong>BERTRAND NURSING AND REHAB CENTER</strong></td>
<td>603 WEST HIGHWAY 62</td>
<td>BERTRAND</td>
<td>(314) 921-2700</td>
<td>No</td>
<td>76</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
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<tr>
<td><strong>BETH HAVEN NURSING HOME</strong></td>
<td>2500 PLEASANT ST</td>
<td>HANNIBAL</td>
<td>(573) 221-6000</td>
<td>Yes</td>
<td>105</td>
<td>MARION</td>
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<tr>
<td><strong>BETHESDA DILWORTH</strong></td>
<td>9645 BIG BEND BLVD</td>
<td>SAINT LOUIS</td>
<td>(314) 968-5460</td>
<td>Yes</td>
<td>400</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
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<tr>
<td><strong>BETHESDA HAWTHORNE PLACE</strong></td>
<td>1111 SOUTH BERRY ROAD</td>
<td>SAINT LOUIS</td>
<td>(314) 942-5750</td>
<td>Yes</td>
<td>66</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
<td>30509</td>
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<tr>
<td><strong>BETHESDA MEADOW</strong></td>
<td>322 OLD STATE ROAD</td>
<td>ELLISVILLE</td>
<td>(636) 227-3431</td>
<td>Yes</td>
<td>210</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>No</td>
<td>15226</td>
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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
Alzheimer's Unit Yes
Bed Capacity 192
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: ICF
County SALINE
Region 5 DMH Licensed No
Bed Capacity 60
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: RCF*
County SALINE
Region 5 DMH Licensed No
Bed Capacity 10
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
Alzheimer's Unit No
Bed Capacity 135
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
Alzheimer's Unit Yes
Bed Capacity 150
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
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 18672

BIRCH POINTE HEALTH AND REHABILITATION
3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-
Mailing Address 3705 S JEFFERSON AVE
SPRINGFIELD MO 65807-
Telephone (417) 889-0773
Level of Care: SNF
County GREENE
Region 1 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 31013

BIRCH VIEW NURSING CENTER
8477 NORTH STREET
BIRCH TREE MO 65438-8887
Mailing Address 8477 NORTH STREET
BIRCH TREE MO 65438-8887
Telephone (573) 292-3212
Level of Care: SNF
County SHANNON
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 90
DMH Licensed No
Facility Number 00560

BISHOP SPENCER PLACE, INC, THE
4301 MADISON AVE
KANSAS CITY MO 64111-3491
Mailing Address 4301 MADISON AVE
KANSAS CITY MO 64111-3491
Telephone (816) 931-4277
Level of Care: ALF**
County JACKSON
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 40
DMH Licensed No
Facility Number 20635

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<th>County</th>
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<th>Level of Care</th>
<th>Region</th>
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<th>Facility Number</th>
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<td>BISHOP SPENCER PLACE, INC, THE</td>
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<td></td>
<td>(816) 931-4277</td>
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<tr>
<td>BLESSED HOMES</td>
<td>305 E 63RD ST</td>
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<td>No</td>
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<tr>
<td></td>
<td>Mailing Address: 305 E 63RD ST</td>
<td>KANSAS CITY</td>
<td></td>
<td></td>
<td>(816) 678-8061</td>
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<tr>
<td>BLESSING CENTER, THE</td>
<td>302 NORTH MAIN</td>
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<td></td>
<td>Mailing Address: 302 NORTH MAIN</td>
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<td>(660) 397-2293</td>
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<td>BLOODFIELD LIVING CENTER</td>
<td>606 WEST MISSOURI ST</td>
<td>BLOOMFIELD</td>
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<td></td>
<td>Mailing Address: 606 WEST MISSOURI ST</td>
<td>BLOOMFIELD</td>
<td></td>
<td></td>
<td>(573) 568-2137</td>
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<td>BLUE CASTLE OF THE OZARKS</td>
<td>1830 E LAVERNE ST</td>
<td>BOLIVAR</td>
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<td>Mailing Address: 1830 E LAVERNE ST</td>
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<td></td>
<td>(417) 777-2583</td>
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<td>BLUE CIRCLE REHAB AND NURSING</td>
<td>2939 MAGAZINE STREET</td>
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<td>BLUE HILLS REST HOME, INC</td>
<td>2207 NORTH BLUE MILLS RD</td>
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<td>Mailing Address: 2207 N BLUE MILLS RD</td>
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<td></td>
<td></td>
<td>(816) 796-3376</td>
<td></td>
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<td>BLUEGRASS TERRACE</td>
<td>102 REDTAIL DR</td>
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<td>No</td>
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<td></td>
<td>Mailing Address: 102 REDTAIL DR</td>
<td>ASHLAND</td>
<td></td>
<td></td>
<td>(573) 657-0899</td>
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<td>BLUFF CREEK TERRACE - ASSISTED LIVING BY AMERICARE</td>
<td>3104 BLUFF CREEK DR</td>
<td>COLUMBIA</td>
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<td></td>
<td>Mailing Address: 3104 BLUFF CREEK DR</td>
<td>COLUMBIA</td>
<td></td>
<td></td>
<td>(573) 815-9111</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
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<th>Mailing Address</th>
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<td>BOONE</td>
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<td>No</td>
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<td>SNF</td>
<td>Yes</td>
<td>(573) 442-6060</td>
<td>3105 BLUFF CREEK DR</td>
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<td>BOARDING INN, THE</td>
<td>40</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>Yes</td>
<td>00709</td>
<td>RCF</td>
<td>No</td>
<td>(314) 426-0091</td>
<td>9444 MIDLAND BLVD</td>
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<td>BOLIVAR MANOR HOUSE</td>
<td>20</td>
<td>POLK</td>
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<td>RCF*</td>
<td>No</td>
<td>(417) 326-7873</td>
<td>404 EAST BROADWAY</td>
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<td>BOULEVARD SENIOR LIVING OF ST CHARLES</td>
<td>128</td>
<td>SAINT CHARLES</td>
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<td>31029</td>
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<td>Yes</td>
<td>(636) 757-5077</td>
<td>3340 EHLMANN ROAD</td>
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<td>BOULEVARD SENIOR LIVING OF WENTZVILLE</td>
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<td>No</td>
<td>(636) 698-9458</td>
<td>120 PERRY CATE BOULEVARD</td>
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<td>No</td>
<td>(573) 324-5560</td>
<td>119 WEST CENTENNIAL AVE</td>
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<td>No</td>
<td>(417) 725-0177</td>
<td>902 NORTH MAIN</td>
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<td>BRENT B TINNIN MANOR</td>
<td>60</td>
<td>REYNOLDS</td>
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<td>No</td>
<td>08027</td>
<td>SNF</td>
<td>No</td>
<td>(573) 663-2545</td>
<td>220 EUEL POLK DR</td>
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<td>BRENTMOOR RETIREMENT COMMUNITY</td>
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<td>SAINT LOUIS COUNTY</td>
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<td>No</td>
<td>19968</td>
<td>ALF**</td>
<td>No</td>
<td>(314) 995-3811</td>
<td>8600 DELMAR BLVD</td>
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B R I D G E A T   F L O R I S S A N T, T H E
1101 GARDEN PLAZA DR
FLORISSANT   MO   63033-2269
Mailing Address 1101 GARDEN PLAZA DR
FLORISSANT   MO   63033-2269
Telephone   (314) 831-0988
Level of Care: ALF**
Bed Capacity   102
County   SAINT LOUIS COUNTY
DMH Licensed   No
Region   7
Facility Number   27826

B R I D G E W A Y   R E S I D E N T I A L   C A R E   F A C I L I T Y
828 JEFFERSON ST
FULTON   MO   65251-1877
Mailing Address 828 JEFFERSON ST
FULTON   MO   65251-1877
Telephone   (573) 642-7770
Level of Care: RCF*
Bed Capacity   94
County   CALLAWAY
DMH Licensed   Yes
Region   6
Facility Number   13522

B R I D G E W O O D   H E A L T H   C A R E   C E N T E R
11515 TROOST
KANSAS CITY   MO   64131-3769
Mailing Address 11515 TROOST
KANSAS CITY   MO   64131-3769
Telephone   (816) 943-0101
Level of Care: SNF
Bed Capacity   166
County   JACKSON
DMH Licensed   No
Region   3
Facility Number   06555

B R I S T O L   M A N O R   O F   A U R O R A
740 SOUTH HUDSON
AURORA   MO   65605-2512
Mailing Address 740 SOUTH HUDSON
AURORA   MO   65605-2512
Telephone   (417) 678-7535
Level of Care: RCF
Bed Capacity   12
County   LAWRENCE
DMH Licensed   No
Region   1
Facility Number   20352

B R I S T O L   M A N O R   O F   B E T H A N Y
811 SOUTH 24TH ST
BETHANY   MO   64424-2631
Mailing Address 811 SOUTH 24TH ST
BETHANY   MO   64424-2631
Telephone   (660) 425-7133
Level of Care: RCF
Bed Capacity   12
County   HARRISON
DMH Licensed   No
Region   4
Facility Number   19068

B R I S T O L   M A N O R   O F   B O O N V I L L E
1290 ASHLEY RD
BOONVILLE   MO   65233-2108
Mailing Address 1290 ASHLEY RD
BOONVILLE   MO   65233-2108
Telephone   (660) 862-3393
Level of Care: RCF
Bed Capacity   12
County   COOPER
DMH Licensed   No
Region   6
Facility Number   17310

B R I S T O L   M A N O R   O F   B R O O K F I E L D
338 THOMPSON
BROOKFIELD   MO   64628-2419
Mailing Address 338 THOMPSON
BROOKFIELD   MO   64628-2419
Telephone   (660) 258-5065
Level of Care: RCF
Bed Capacity   12
County   LINN
DMH Licensed   No
Region   5
Facility Number   18666

B R I S T O L   M A N O R   O F   B U F F A L O
1002 SOUTH BIRCH
BUFFALO   MO   65622-9455
Mailing Address 1002 SOUTH BIRCH
BUFFALO   MO   65622-9455
Telephone   (417) 345-5500
Level of Care: RCF
Bed Capacity   12
County   DALLAS
DMH Licensed   No
Region   1
Facility Number   18142

B R I S T O L   M A N O R   O F   B U T L E R
411 SOUTH DELAWARE
BUTLER   MO   64730-2311
Mailing Address 411 S DELAWARE
BUTLER   MO   64730-2311
Telephone   (660) 679-3661
Level of Care: RCF
Bed Capacity   12
County   BATES
DMH Licensed   No
Region   3
Facility Number   18817

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Mailing Address</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
</tr>
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<tbody>
<tr>
<td>BRISTOL MANOR OF CALIFORNIA</td>
<td>605 PARKVIEW DR</td>
<td>CALIFORNIA</td>
<td>12</td>
<td>No</td>
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<td>BRISTOL MANOR OF CAMDENTON</td>
<td>75 FOURTH ST</td>
<td>CAMDEN</td>
<td>12</td>
<td>No</td>
<td>17914</td>
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<tr>
<td>BRISTOL MANOR OF CAMERON</td>
<td>920 NORTH HARRIS</td>
<td>DEKALB</td>
<td>12</td>
<td>No</td>
<td>18295</td>
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<tr>
<td>BRISTOL MANOR OF CARROLLTON</td>
<td>1016 EAST 10TH ST</td>
<td>CARROLL</td>
<td>12</td>
<td>No</td>
<td>18316</td>
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<tr>
<td>BRISTOL MANOR OF CARTAGHAGE</td>
<td>2131 SOUTH RIVER AVE</td>
<td>JASPER</td>
<td>Yes</td>
<td>Yes</td>
<td>20858</td>
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<tr>
<td>BRISTOL MANOR OF CENTRALIA</td>
<td>610 NORTH JEFFERSON ST</td>
<td>BOONE</td>
<td>12</td>
<td>No</td>
<td>18286</td>
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<td>BRISTOL MANOR OF CLINTON</td>
<td>1402 EAST FRANKLIN</td>
<td>HENRY</td>
<td>12</td>
<td>No</td>
<td>16656</td>
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<tr>
<td>BRISTOL MANOR OF ELDON</td>
<td>1201 EAST NORTH ST</td>
<td>MILLER</td>
<td>12</td>
<td>No</td>
<td>17701</td>
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<tr>
<td>BRISTOL MANOR OF ELSBERRY</td>
<td>1402 RIVERVIEW DR</td>
<td>LINCOLN</td>
<td>12</td>
<td>No</td>
<td>20015</td>
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<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Phone Number</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>County</th>
<th>DMH Licensed</th>
<th>Region</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td><strong>BRISTOL MANOR OF FULTON</strong></td>
<td>750 SIGN PAINTER ROAD</td>
<td>(573) 642-7557</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>CALLAWAY</td>
<td>No</td>
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<td>18575</td>
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<tr>
<td><strong>BRISTOL MANOR OF HOLDEN</strong></td>
<td>501 WEST SECOND</td>
<td>(816) 732-6789</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>JOHNSON</td>
<td>No</td>
<td>3</td>
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<tr>
<td><strong>BRISTOL MANOR OF JEFFERSON CITY</strong></td>
<td>510 KENSINGTON PARK</td>
<td>(573) 761-5772</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>COLE</td>
<td>No</td>
<td>6</td>
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<td><strong>BRISTOL MANOR OF LAMAR</strong></td>
<td>603 EAST 17TH ST</td>
<td>(417) 682-6762</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>BARTON</td>
<td>No</td>
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<tr>
<td><strong>BRISTOL MANOR OF LEXINGTON</strong></td>
<td>2615 MAIN ST</td>
<td>(660) 259-6655</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>LAFAYETTE</td>
<td>No</td>
<td>3</td>
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<td><strong>BRISTOL MANOR OF LINCOLN</strong></td>
<td>204 SOUTH HIGHWAY 65</td>
<td>(660) 547-2580</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>BENTON</td>
<td>No</td>
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<td>18092</td>
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<tr>
<td><strong>BRISTOL MANOR OF MACON</strong></td>
<td>707 RANCHLAND DR</td>
<td>(660) 385-3020</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>MACON</td>
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<td>5</td>
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<td><strong>BRISTOL MANOR OF MARCELINE</strong></td>
<td>102 EAST HAYDEN</td>
<td>(660) 376-2210</td>
<td>RCF</td>
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<td>No</td>
<td>LINN</td>
<td>No</td>
<td>5</td>
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<tr>
<td><strong>BRISTOL MANOR OF MARYVILLE</strong></td>
<td>323 EAST SUMMIT DR</td>
<td>(660) 582-4131</td>
<td>RCF</td>
<td>12</td>
<td>No</td>
<td>NODAWAY</td>
<td>No</td>
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Monday, November 4, 2019
**BRISTOL MANOR OF MONROE CITY**
1017 EAST LAWN ST
MONROE CITY MO 63456-1433
Telephone (573) 735-3068
Level of Care: RCF
Bed Capacity: 12
County MONROE
DMH Licensed: Yes
Region 5
Facility Number 20045

**BRISTOL MANOR OF NEVADA**
401 EAST WALNUT
NEVADA MO 64772-2457
Telephone (417) 667-5700
Level of Care: RCF
Bed Capacity: 12
County VERNON
DMH Licensed: Yes
Region 1
Facility Number 18471

**BRISTOL MANOR OF OAK GROVE**
300 NORTH AUSTIN
OAK GROVE MO 64075-8109
Telephone (816) 625-8691
Level of Care: RCF
Bed Capacity: 12
County JACKSON
DMH Licensed: No
Region 3
Facility Number 16552

**BRISTOL MANOR OF ODESSA**
115 SOUTH 5TH ST
ODESSA MO 64076-1330
Telephone (816) 633-8692
Level of Care: RCF
Bed Capacity: 12
County LAFAYETTE
DMH Licensed: No
Region 3
Facility Number 16547

**BRISTOL MANOR OF PACIFIC**
2049 ROSE LN
PACIFIC MO 63069-1165
Telephone (636) 257-8020
Level of Care: RCF
Bed Capacity: 12
County FRANKLIN
DMH Licensed: No
Region 6
Facility Number 20237

**BRISTOL MANOR OF PALMYRA**
1815 SOUTH MAIN
PALMYRA MO 63461-1961
Telephone (573) 769-2127
Level of Care: RCF
Bed Capacity: 12
County MARION
DMH Licensed: No
Region 5
Facility Number 20260

**BRISTOL MANOR OF PLEASANT HILL**
2124 HIGHRIDGE
PLEASANT HILL MO 64080-1912
Telephone (816) 987-2562
Level of Care: RCF
Bed Capacity: 12
County CASS
DMH Licensed: No
Region 3
Facility Number 16538

**BRISTOL MANOR OF PRINCETON**
200 NORTH FULLERTON
PRINCETON MO 64673-1176
Telephone (660) 748-4354
Level of Care: RCF
Bed Capacity: 12
County MERCER
DMH Licensed: No
Region 4
Facility Number 18846

**BRISTOL MANOR OF RAYMORE**
604 EAST SUNRISE DR
RAYMORE MO 64083-9037
Telephone (816) 322-6782
Level of Care: RCF
Bed Capacity: 12
County CASS
DMH Licensed: No
Region 3
Facility Number 19730

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<thead>
<tr>
<th>Facility Name</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Region</th>
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<tr>
<td>BRISTOL MANOR OF REPUBLIC</td>
<td>634 EAST HWY 174</td>
<td>REPUBLIC</td>
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<td>BRISTOL MANOR OF SALISBURY</td>
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<td>BRISTOL MANOR OF SEDALIA</td>
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<td>BRISTOL MANOR OF SMITHVILLE</td>
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<td>SMITHVILLE</td>
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<td>BRISTOL MANOR OF STOVER</td>
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<td>BRISTOL MANOR OF UNIONVILLE</td>
<td>715 NORTH 22ND ST, HWY 5 NORTH</td>
<td>UNIONVILLE</td>
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<td>BRISTOL MANOR OF WARRENSBURG</td>
<td>603 CREACH</td>
<td>WARRENSBURG</td>
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<td>3</td>
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<td>BRISTOL MANOR OF WARRENTON</td>
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<td>12</td>
<td>No</td>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>BRISTOL MANOR OF WARSAW</td>
<td>1600 ESTATE DR</td>
<td>WARSAW</td>
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<tr>
<td>BRISTOL MANOR OF WASHINGTON</td>
<td>100 WEST 12TH ST</td>
<td>WASHINGTON</td>
<td>MO</td>
<td>12</td>
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<td>6</td>
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<td>20138</td>
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<td>BRISTOL MANOR OF WEBB CITY</td>
<td>1803 NORTH MAIN, HIGHWAY D</td>
<td>WEBB CITY</td>
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<td>BROOK CHERITH ASSISTED LIVING</td>
<td>104 EAST ELM ST</td>
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<td>BROOKDALE CREVE COEUR</td>
<td>ONE NEW BALLAS PLACE</td>
<td>CREVE COEUR</td>
<td>MO</td>
<td>46</td>
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<td>7</td>
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<td>BROOKDALE WEST COUNTY</td>
<td>785 HENRY AVE</td>
<td>BALLWIN</td>
<td>MO</td>
<td>98</td>
<td>No</td>
<td>7</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City/County</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>BROOKDALE WORNALL PLACE</td>
<td>501 WEST 107TH ST</td>
<td>KANSAS CITY</td>
<td>(816) 941-7777</td>
<td>ALF**</td>
<td>No</td>
<td>68</td>
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<tr>
<td>BROOKE HAVEN HEALTHCARE</td>
<td>1410 NORTH KENTUCKY AVE</td>
<td>WEST PLAINS</td>
<td>(417) 256-7975</td>
<td>SNF</td>
<td>Yes</td>
<td>120</td>
<td>No</td>
<td>06253</td>
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<tr>
<td>BROOKHAVEN NURSING &amp; REHAB</td>
<td>3405 WEST MT VERNON</td>
<td>SPRINGFIELD</td>
<td>(417) 874-9600</td>
<td>SNF</td>
<td>No</td>
<td>90</td>
<td>No</td>
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<tr>
<td>BROOKING PARK</td>
<td>307 SOUTH WOODS MILL RD</td>
<td>CHESTERFIELD</td>
<td>(314) 576-5545</td>
<td>SNF</td>
<td>Yes</td>
<td>97</td>
<td>No</td>
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<tr>
<td>BROOKSIDE MANOR RESIDENTAL CARE, LLC</td>
<td>2434 HIGHWAY H</td>
<td>FARMINGTON</td>
<td>(573) 756-6434</td>
<td>RCF*</td>
<td>Yes</td>
<td>20</td>
<td>Yes</td>
<td>20034</td>
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<tr>
<td>BRUNSWICK NURSING &amp; REHAB</td>
<td>721 W HARRISON ST</td>
<td>BRUNSWICK</td>
<td>(660) 548-3182</td>
<td>SNF</td>
<td>No</td>
<td>60</td>
<td>No</td>
<td>03123</td>
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<td>BUFFALO PRAIRIE CENTER FOR REHAB AND HEALTHCARE</td>
<td>631 WEST MAIN ST</td>
<td>BUFFALO</td>
<td>(417) 345-5422</td>
<td>SNF</td>
<td>NO</td>
<td>60</td>
<td>No</td>
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<tr>
<td>BUTLER CENTER FOR REHABILITATION AND HEALTHCARE</td>
<td>416 SOUTH HIGH ST</td>
<td>BUTLER</td>
<td>(660) 679-6158</td>
<td>SNF</td>
<td>No</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>Facility Number</th>
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<td>BUTTERFIELD RESIDENTIAL CARE CENTER</td>
<td>66 1120 NORTH BUTTERFIELD RD</td>
<td>BOLIVAR</td>
<td>MO</td>
<td>65613-1000</td>
<td>(417) 326-5200</td>
<td>RCF*</td>
<td>No</td>
<td>14436</td>
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<tr>
<td>BUTTERFIELD RESIDENTIAL CARE CENTER</td>
<td>66 1120 NORTH BUTTERFIELD RD</td>
<td>BOLIVAR</td>
<td>MO</td>
<td>65613-1000</td>
<td>(417) 326-5200</td>
<td>RCF</td>
<td>No</td>
<td>14436</td>
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<tr>
<td>BUTTERFLY HAVEN</td>
<td>11500 CAMPBELL ST</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>64131-3829</td>
<td>(816) 941-2836</td>
<td>RCF</td>
<td>No</td>
<td>18207</td>
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<td>CALIFORNIA CARE CENTER</td>
<td>1106 SOUTH OAK, ROUTE 3</td>
<td>CALIFORNIA</td>
<td>MO</td>
<td>65018-1462</td>
<td>(573) 796-3127</td>
<td>SNF</td>
<td>No</td>
<td>10437</td>
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<td>CAMDENTON WINDSOR ESTATES</td>
<td>2042 N BUSINESS ROUTE 5</td>
<td>CAMDENTON</td>
<td>MO</td>
<td>65020-2611</td>
<td>(573) 346-5654</td>
<td>SNF</td>
<td>No</td>
<td>08688</td>
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<tr>
<td>CAMELOT NURSING AND REHABILITATION CENTER</td>
<td>705 GRAND CANYON DR</td>
<td>FARMINGTON</td>
<td>MO</td>
<td>63640-2161</td>
<td>(573) 756-8911</td>
<td>SNF</td>
<td>No</td>
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<td>CANDLELIGHT LODGE RETIREMENT CENTER</td>
<td>1406 BUSINESS LOOP 70 WEST</td>
<td>COLUMBIA</td>
<td>MO</td>
<td>65202-1324</td>
<td>(573) 449-5287</td>
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<td>Yes</td>
<td>01013</td>
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<tr>
<td>CANDLELIGHT LODGE RETIREMENT CENTER</td>
<td>1406 BUSINESS LOOP 70 WEST</td>
<td>COLUMBIA</td>
<td>MO</td>
<td>65202-1324</td>
<td>(573) 449-5287</td>
<td>ALF</td>
<td>No</td>
<td>01013</td>
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<tr>
<td>CAPE ALBEON</td>
<td>3300 LAKE BEND DR</td>
<td>VALLEY PARK</td>
<td>MO</td>
<td>63088-2524</td>
<td>(636) 861-3200</td>
<td>ALF**,</td>
<td>Yes</td>
<td>22838</td>
</tr>
</tbody>
</table>

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Monday, November 4, 2019
| Facility Name                        | Address                      | City          | State  | Zip  | Level of Care  | Bed Capacity | County     | Region | DMH Licensed | Facility Number | Alzheimer's Unit | Telephone       | Mailing Address | City          | State  | Zip  | Alzheimer's Unit | Bed Capacity | County     | Region | DMH Licensed | Facility Number | Alzheimer's Unit | Telephone       | Mailing Address | City          | State  | Zip  | Alzheimer's Unit | Bed Capacity | County     | Region | DMH Licensed | Facility Number |
|------------------------------------|------------------------------|---------------|---------|------|----------------|--------------|------------|--------|--------------|----------------|-----------------|----------------|----------------|----------------|---------|------|----------------|------------|------------|--------|--------------|----------------|----------------|----------------|---------------|-------------|---------|----------------|------------|------------|--------|--------------|----------------|
| CAPETOWN ASSISTED LIVING           | 2857 CAPE LACROIX RD         | CAPE GIRARDEAU | MO     | 63701-8588 | ALF**          | 48            | CAPE GIRARDEAU | 2      | No            | 23989           | Yes             | (573) 334-4855 | 2857 CAPE LACROIX RD | CAPE GIRARDEAU | MO     | 63701-8588 | Yes             | 48            | CAPE GIRARDEAU | 2      | No            | 23989           | Yes             | (573) 334-4855 |
| CAREGIVERS INN                     | 1297 FEISE RD                | DARDENNE PRAIRIE | MO | 63368-6710 | ALF**          | 30            | SAINT CHARLES | 5      | No            | 15342           | No              | (636) 240-7979 | 1297 FEISE RD | DARDENNE PRAIRIE | MO | 63368-6710 | No              | 30            | SAINT CHARLES | 5      | No            | 15342           | No              | (636) 240-7979 |
| CARL JUNCTION RESIDENTIAL CARE     | 201 FIR RD                   | CARL JUNCTION | MO     | 64834-9222 | RCF*           | 37            | JASPER     | 1      | No            | 20550           | No              | (417) 782-5659 | 201 FIR RD | CARL JUNCTION | MO | 64834-9222 | No              | 37            | JASPER     | 1      | No            | 20550           | No              | (417) 782-5659 |
| CARNEGIE VILLAGE REHABILITATION & HEALTH CARE CENTER | 105 BERNARD DRIVE | BELTON | MO | 64012-6181 | SNF            | 78            | CASS       | 3      | No            | 30531           | No              | (816) 348-8815 | 105 BERNARD DRIVE | BELTON | MO | 64012-6181 | No              | 78            | CASS       | 3      | No            | 30531           | No              | (816) 348-8815 |
| CARNEGIE VILLAGE SENIOR LIVING COMMUNITY | 103 BERNARD DR | BELTON | MO | 64012-6182 | ALF**          | 85            | CASS       | 3      | No            | 25482           | No              | (816) 322-8444 | 103 BERNARD DR | BELTON | MO | 64012-6182 | No              | 85            | CASS       | 3      | No            | 25482           | No              | (816) 322-8444 |
| CARONDELET MANOR                   | 621 CARONDELET DR            | KANSAS CITY   | MO     | 64114-4670 | SNF            | 162          | JACKSON    | 3      | No            | 12185           | No              | (816) 941-1300 | 621 CARONDELET DR | KANSAS CITY | MO | 64114-4670 | No              | 162          | JACKSON    | 3      | No            | 12185           | No              | (816) 941-1300 |
| CARONDELET RETIREMENT MANOR        | 6811 MICHIGAN                | SAINT LOUIS   | MO     | 63111-2834 | RCF*           | 33            | SAINT LOUIS CITY | 7      | Yes           | 01058           | Yes             | (314) 353-9552 | 6811 MICHIGAN | SAINT LOUIS | MO | 63111-2834 | Yes             | 33            | SAINT LOUIS CITY | 7      | Yes           | 01058           | Yes             | (314) 353-9552 |
| CARRIAGE RESIDENTIAL CARE CENTER LLC | 508 NORTH WASHINGTON ST     | FARMINGTON    | MO     | 63640-1756 | RCF*           | 20            | SAINT FRANCOIS | 2      | Yes           | 07824           | Yes             | (573) 756-8140 | 508 NORTH WASHINGTON ST | FARMINGTON | MO | 63640-1756 | Yes             | 20            | SAINT FRANCOIS | 2      | Yes           | 07824           | Yes             | (573) 756-8140 |
| CARRIAGE SQUARE LIVING & REHAB CENTER | 4009 GENE FIELD RD          | SAINT JOSEPH  | MO     | 64506-1864 | SNF            | 130           | BUCHANAN   | 4      | No            | 01061           | No              | (816) 364-1526 | 4009 GENE FIELD RD | SAINT JOSEPH | MO | 64506-1864 | No              | 130           | BUCHANAN   | 4      | No            | 01061           | No              | (816) 364-1526 |

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CARRIAGE SQUARE LIVING & REHAB CENTER
4009 GENE FIELD RD
SAINT JOSEPH MO 64506-1864
Mailing Address 4009 GENE FIELD RD
SAINT JOSEPH MO 64506-1864
Telephone (816) 364-1526
Level of Care: RCF*
Bed Capacity: 32
County BUCHANAN
Alzheimer's Unit: No
DMH Licensed: No
Region 4 Facility Number: 01061

CARRIE DUMAS LONG TERM CARE FACILITY
2836 BENTON BLVD
KANSAS CITY MO 64128-1140
Mailing Address 2836 BENTON BLVD
KANSAS CITY MO 64128-1140
Telephone (816) 924-5017
Level of Care: ALF
Bed Capacity: 34
County JACKSON
DMH Licensed: Yes
Facility Number: 18550

CARRIE ELLIGSON GIETNER HOME
5000 SOUTH BROADWAY
SAINT LOUIS MO 63111-2015
Mailing Address 5000 S BROADWAY
SAINT LOUIS MO 63111-2015
Telephone (314) 752-0000
Level of Care: SNF
Bed Capacity: 63
County SAINT LOUIS CITY
DMH Licensed: No
Facility Number: 02877

CARROLL HOUSE
307 GRAND
CARROLLTON MO 64633-2265
Mailing Address 307 GRAND
CARROLLTON MO 64633-2265
Telephone (660) 542-1599
Level of Care: SNF
Bed Capacity: 130
County CARROLL
DMH Licensed: No
Facility Number: 22027

CARTHAGE HEALTH AND REHABILITATION CENTER
1901 BUENA VISTA AVE
CARTHAGE MO 64836-3178
Mailing Address 1901 BUENA VISTA AVE
CARTHAGE MO 64836-3178
Telephone (417) 358-1937
Level of Care: SNF
Bed Capacity: 120
County JASPER
DMH Licensed: No
Facility Number: 12472

CASABLANCA CARE CENTER
524 SOUTH ALBANY
BOLIVAR MO 65613-2116
Mailing Address PO BOX 970
BOLIVAR MO 65613-0970
Telephone (417) 777-7247
Level of Care: RCF*
Bed Capacity: 11
County POLK
DMH Licensed: Yes
Facility Number: 21150

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
Level of Care: SNF
Bed Capacity: 60
County BARRY
DMH Licensed: No
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
Level of Care: RCF
Bed Capacity: 12
County COLE
DMH Licensed: No
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
Level of Care: RCF
Bed Capacity: 12
County COLE
DMH Licensed: No
Facility Number: 25921

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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
JEFFERSON CITY MO 65109-1508
Mailing Address 1538 N OLD CASTLE ROAD
JEFFERSON CITY MO 65109-1508

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 POINTE
1800 WHITE COLUMNS DR
ROLLA MO 65401-2044
Mailing Address 1800 WHITE COLUMNS DR
ROLLA MO 65401-2044

Telephone (573) 364-7766 Alzheimer’s Unit Yes
Level of Care: SNF Bed Capacity 102
County PHELPS DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 06801

CEDAR RIDGE CARE CENTER, LLC
71 SYCAMORE
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

CEDARGATE HEALTHCARE
2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036
Mailing Address 2350 KANELL BLVD
POPLAR BLUFF MO 63901-4036

Telephone (573) 785-0188 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 108
County BUTLER DMH Licensed No
Region 2 Medicare/Medicaid 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 Alzheimer’s Unit No
Level of Care: ALF Bed Capacity 16
County BUTLER DMH Licensed No
Region 2 Facility Number 01182

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<th>Facility Name</th>
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<th>Telephone</th>
<th>Bed Capacity</th>
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<td>CEDARHURST OF BLUE SPRINGS</td>
<td>20551 E TRINITY PLACE</td>
<td>816-203-1939</td>
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<td>Yes</td>
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<td>CEDARHURST OF COLUMBIA</td>
<td>2333 CHAPEL HILL RD</td>
<td>(573) 234-1091</td>
<td>127</td>
<td>No</td>
<td>6</td>
<td>29874</td>
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<tr>
<td>CEDARHURST OF DES PERES</td>
<td>12826 DAYLIGHT CIRCLE</td>
<td>(314) 384-3654</td>
<td>76</td>
<td>No</td>
<td>7</td>
<td>30351</td>
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<td>CEDARHURST OF SEDALIA</td>
<td>3761 WEST 10TH ST</td>
<td>(660) 827-8900</td>
<td>90</td>
<td>No</td>
<td>6</td>
<td>25967</td>
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<tr>
<td>CEDARHURST OF ST. CHARLES ASSISTED LIVING &amp; MEMORY CARE</td>
<td>1800 FIRST CAPITOL DRIVE</td>
<td>(636) 442-4500</td>
<td>155</td>
<td>No</td>
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<td>30676</td>
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<td>CEDARS OF LIBERTY HEALTH CARE CENTER</td>
<td>200 WEST RUTH EWING RD</td>
<td>(816) 781-7600</td>
<td>206</td>
<td>Yes</td>
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<tr>
<td>CENTRAL GARDENS INC</td>
<td>302 NORTH ELM ST</td>
<td>(573) 624-0011</td>
<td>83</td>
<td>No</td>
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<td>5143 WATERMAN BLVD</td>
<td>(314) 367-5620</td>
<td>41</td>
<td>Yes</td>
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<td>CENTURY PINES ASSISTED LIVING</td>
<td>709 EAST MCCRACKEN RD</td>
<td>(417) 581-7278</td>
<td>20</td>
<td>No</td>
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Monday, November 4, 2019
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
County  CHRISTIAN
Region  1
Bed Capacity  58
DMH Licensed  Yes
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
County  SCOTT
Region  2
Bed Capacity  71
DMH Licensed  No
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
County  CHARITON
Region  5
Bed Capacity  120
DMH Licensed  No
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
County  MISSISSIPPI
Region  2
Bed Capacity  181
DMH Licensed  Yes
Facility Number  01251

CHARTER SENIOR LIVING AT ST LOUIS HILLS
6543 CHIPPEWA ST
SAINT LOUIS  MO  63111-3336
Mailing Address  6543 CHIPPEWA ST
SAINT LOUIS  MO  63111-3336

Telephone  (314) 647-6600
Level of Care: ALF*
County  SAINT LOUIS CITY
Region  7
Bed Capacity  22
DMH Licensed  Yes
Facility Number  14711

CHATEAU ANN MARIE
7700 MINNESOTA AVE
SAINT LOUIS  MO  63118-3236
Mailing Address  7700 MINNESOTA AVE
SAINT LOUIS  MO  63118-3236

Telephone  (314) 449-1497
Level of Care: ALF
County  SAINT LOUIS CITY
Region  7
Bed Capacity  75
DMH Licensed  Yes
Facility Number  01386

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: SNF
County  CAPE GIRARDEAU
Region  2
Bed Capacity  55
DMH Licensed  No
Facility Number  01386

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*
County  CAPE GIRARDEAU
Region  2
Bed Capacity  55
DMH Licensed  No
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
Level of Care: RCF*
County  SAINT LOUIS CITY
Region  7
Bed Capacity  30
DMH Licensed  Yes
Facility Number  14047

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Monday, November 4, 2019
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 Medicare 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

CLARK CARE CENTER - ONE
1505 EAST ASHLAND ST
NEVADA MO 64772-4025
Mailing Address PO BOX 246
NEVADA MO 64772-0246
Telephone (417) 667-3900 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 38
County VERNON DMH Licensed Yes
Region 1 Facility Number 20206

CLARK COUNTY NURSING HOME
1260 N JOHNSON ST
KAHOKA MO 63445-1100
Mailing Address 1260 N JOHNSON ST
KAHOKA MO 63445-1100
Telephone (660) 727-3303 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 103
County CLARK DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 01480

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Monday, November 4, 2019
<table>
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<th>Facility Name</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>Region</th>
<th>Email Address</th>
<th>MOA License Status</th>
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<tr>
<td><strong>CLARK'S MOUNTAIN NURSING CENTER</strong></td>
<td>(573) 223-4297</td>
<td>No</td>
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<td>105 SPRUCE ST</td>
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<td><strong>CLEARVIEW NURSING CENTER</strong></td>
<td>(573) 471-2565</td>
<td>No</td>
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<tr>
<td><strong>CLINTON HEALTHCARE AND REHABILITATION CENTER</strong></td>
<td>(660) 885-5571</td>
<td>No</td>
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<td><strong>COATES STREET COMFORT HOUSE</strong></td>
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<td><strong>COLLIER CARE HOME, INC</strong></td>
<td>(816) 229-6231</td>
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<td>(573) 996-4283</td>
<td>No</td>
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<tr>
<td><strong>COLONIAL HOUSE OF CRYSTAL CITY</strong></td>
<td>(636) 937-1000</td>
<td>No</td>
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Monday, November 4, 2019
COLONIAL HOUSE OF FESTUS I
500 SUNSHINE DR
FESTUS MO 63028-1645
Mailing Address 500 SUNSHINE DR FESTUS MO 63028-1645
Telephone (636) 937-7140 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 30
County JEFFERSON DMH Licensed Yes
Region 2 Facility Number 00726

COLONIAL HOUSE OF FESTUS II
129 GRAY ST
FESTUS MO 63028-1950
Mailing Address 129 GRAY ST FESTUS MO 63028-1950
Telephone (636) 937-4050 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 23
County JEFFERSON DMH Licensed Yes
Region 2 Facility Number 07322

COLONIAL MANOR, LLC
907 WEST MALONE ST
SIKESTON MO 63801-2425
Mailing Address 907 WEST MALONE ST SIKESTON MO 63801-2425
Telephone (573) 471-5541 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 20
County SCOTT DMH Licensed Yes
Region 2 Facility Number 13255

COLONIAL RESIDENTIAL CARE FACILITY II
1162 CEDAR ST
BISMARCK MO 63624-8920
Mailing Address PO BOX 727 BISMARCK MO 63624-0727
Telephone (573) 734-2846 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 48
County SAINT FRANCOIS DMH Licensed Yes
Region 2 Facility Number 01693

COLONIAL SPRINGS HEALTHCARE CENTER
750 W COOPER ST
BUFFALO MO 65622-8662
Mailing Address PO BOX 978 BUFFALO MO 65622-0978
Telephone (417) 345-2228 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 134
County DALLAS DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 01302

COLONY POINTE-ASSISTED LIVING BY AMERICARE
1510 CHAPEL HILL RD
COLUMBIA MO 65203-5457
Mailing Address 1510 CHAPEL HILL RD COLUMBIA MO 65203-5457
Telephone (573) 234-1193 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 59
County BOONE DMH Licensed No
Region 6 Facility Number 28191

COLUMBIA MANOR CARE CENTER
2012 NIFONG BLVD
COLUMBIA MO 65201-3874
Mailing Address 2012 NIFONG BLVD COLUMBIA MO 65201-3874
Telephone (573) 449-1246 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 52
County BOONE DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 01715

COLUMBIA POST ACUTE
3535 BERRYWOOD DRIVE
COLUMBIA MO 65201-6584
Mailing Address 3535 BERRYWOOD DRIVE COLUMBIA MO 65201-6584
Telephone 573-397-7144 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 70
County BOONE DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 30959

COLUMBIA STREET RESIDENTIAL CARE CENTER LLC
208 WEST COLUMBIA ST
FARMINGTON MO 63640-1705
Mailing Address PO BOX 272 FARMINGTON MO 63640-0675
Telephone (573) 756-7481 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 16
County SAINT FRANCOIS DMH Licensed Yes
Region 2 Facility Number 01729

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COMMUNITIES OF WILDWOOD RANCH
3222 SOUTH JOHN DUFFY DR
JOPLIN MO 64804-1569
Mailing Address 3222 SOUTH JOHN DUFFY DR
JOPLIN MO 64804-1569
Telephone (417) 621-0175
Level of Care: SNF
Bed Capacity 120
County JASPER
DMH Licensed No
Region 1 Medicare/Medicaid
Facility Number 29077

COMMUNITY CARE CENTER OF LEMAY, INC
9353 SOUTH BROADWAY
SAINT LOUIS MO 63125-1600
Mailing Address 9353 SOUTH BROADWAY
SAINT LOUIS MO 63125-1600
Telephone (314) 631-0540
Level of Care: SNF
Bed Capacity 99
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 01732

COMMUNITY MANOR
783 WEBER ROAD
FARMINGTON MO 63640-3318
Mailing Address 783 WEBER RD
FARMINGTON MO 63640-3318
Telephone (573) 756-8998
Level of Care: SNF
Bed Capacity 13887
County SAINT FRANCOIS
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 01740

COMMUNITY OF AUTUMN COURT AT MT VERNON, THE
1421 S LANDRUM ST
MOUNT VERNON MO 65712-1912
Mailing Address 1421 S LANDRUM ST
MOUNT VERNON MO 65712-1912
Telephone (417) 466-3549
Level of Care: ALF**
Bed Capacity 20809
County LAWRENCE
DMH Licensed No
Region 1 Medicare/Medicaid
Facility Number 01777

COMMUNITY SPRINGS HEALTHCARE FACILITY
400 EAST HOSPITAL RD
EL DORADO SPRINGS MO 64744-2024
Mailing Address 400 EAST HOSPITAL RD
EL DORADO SPRINGS MO 64744-2024
Telephone (417) 876-2531
Level of Care: SNF
Bed Capacity 21439
County CEDAR
DMH Licensed Yes
Region 1 Medicare/Medicaid
Facility Number 01780

CONVERSE HOME
17025 OLD JAMESTOWN RD
FLORISSANT MO 63034-1414
Mailing Address 17025 OLD JAMESTOWN RD
FLORISSANT MO 63034-1414
Telephone (314) 355-8041
Level of Care: RCF
Bed Capacity 31851
County SAINT LOUIS COUNTY
DMH Licensed Yes
Region 7 Medicare/Medicaid
Facility Number 01791

COOPER HOUSE
4385 MARYLAND AVE
SAINT LOUIS MO 63108-2703
Mailing Address 4385 MARYLAND AVE
SAINT LOUIS MO 63108-2703
Telephone (314) 535-1919
Level of Care: RCF*
Bed Capacity 36
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7 Medicare/Medicaid
Facility Number 01777

COPPER ROCK HEALTHCARE
712 COPPER ROCK DRIVE
ROGERSVILLE MO 65742-8970
Mailing Address 712 COPPER ROCK DRIVE
ROGERSVILLE MO 65742-8970
Telephone (417) 202-4606
Level of Care: SNF
Bed Capacity 144
County WEBSTER
DMH Licensed No
Region 1 Medicare/Medicaid
Facility Number 01780

CORI MANOR HEALTHCARE & REHABILITATION CENTER
560 CORISANDE HILLS RD
FENTON MO 63026-5613
Mailing Address 560 CORISANDE HILLS RD
FENTON MO 63026-5613
Telephone (636) 343-2282
Level of Care: SNF
Bed Capacity 144
County JEFFERSON
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 01777

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Monday, November 4, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
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<td>COTTAGES OF LAKE ST LOUIS</td>
<td>2885 TECHNOLOGY DRIVE</td>
<td>LAKE SAINT LOUIS</td>
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<td>COUNTRY AIRE ESTATES, LLC</td>
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<table>
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<th>Zip Code 63000</th>
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<th>Phone</th>
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<td>COUNTRY HAVEN BOARDING HOME - BUILDING II</td>
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<td>SAINTE GENEVIEVE</td>
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<td>MOUNTAIN GROVE</td>
<td>MO 65711-1403</td>
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<td>(417) 926-1955</td>
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<td>PARK HILLS</td>
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<td>(573) 431-2889</td>
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<td>COUNTRY OAK VILLAGE</td>
<td>101 CROSS CREEK DR 15 101 CROSS CREEK DR</td>
<td>GRAIN VALLEY</td>
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<td>(816) 224-2700</td>
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<td>SCOTT CITY</td>
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<td>SCOTT CITY</td>
<td>(573) 264-1555</td>
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<td>COUNTRY VALLEY HOME</td>
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<td>SAINT JAMES</td>
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<td>SAINT JAMES</td>
<td>(573) 265-8250</td>
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<td>2106 WEST MAIN ST 15 2106 WEST MAIN ST</td>
<td>BOWLING GREEN</td>
<td>MO 63334-1049</td>
<td>BOWLING GREEN</td>
<td>(573) 324-2216</td>
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<td>COUNTRYSIDE CARE CENTER, LLC</td>
<td>385 SOUTH EISENHOWER 15 385 SOUTH EISENHOWER</td>
<td>MONETT</td>
<td>MO 65708-8266</td>
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<td>(417) 235-4040</td>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
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<th>Bed Capacity</th>
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<tr>
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<td>APPLETON CITY</td>
<td>MO</td>
<td>(660) 476-2128</td>
<td>24</td>
<td>No</td>
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<td>COUNTRYSIDE HOME, LLC</td>
<td>24499 PARK DR</td>
<td>LEBANON</td>
<td>MO</td>
<td>(417) 532-7418</td>
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<td>COUNTRYSIDE MANOR, LLC</td>
<td>1415 E US HWY 54</td>
<td>VANDALIA</td>
<td>MO</td>
<td>(573) 594-6215</td>
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<td>CRAB APPLE VILLAGE SENIOR ESTATES</td>
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<td>(636) 629-6161</td>
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<td>(417) 723-5900</td>
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<td>DOE RUN</td>
<td>MO</td>
<td>(573) 756-4656</td>
<td>30</td>
<td>No</td>
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<td>CRESTVIEW HOME</td>
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<td>MO</td>
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<td>11400 MEHL AVE</td>
<td>FLORISSANT</td>
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<td>(314) 741-3525</td>
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### CREVE COEUR ASSISTED LIVING AND MEMORY CARE

<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Zip Code</th>
<th>Telephone Number</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>Alzheimer's Unit</th>
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<th>Facility Number</th>
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<tr>
<td>693 DECKER LN</td>
<td>CREVE COEUR</td>
<td>MO 63141-7127</td>
<td>693 DECKER LANE</td>
<td>(314)997-4532</td>
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<td>1127 TIMBER RUN DR</td>
<td>SAINT LOUIS</td>
<td>MO 63146-4482</td>
<td>(314) 434-8361</td>
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<td>149</td>
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<td>Yes</td>
<td>No</td>
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<td>CROSS CREEK AT LEE'S SUMMIT</td>
<td>3320 NE WILSHIRE DR</td>
<td>LEE'S SUMMIT</td>
<td>MO 64064-2077</td>
<td>(816) 607-5700</td>
<td>ALF**</td>
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<td>JACKSON</td>
<td>2</td>
<td>Yes</td>
<td>No</td>
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<td>CROWLEY RIDGE CARE CENTER</td>
<td>1204 NORTH OUTER RD</td>
<td>DEXTER</td>
<td>MO 63841-8684</td>
<td>(573) 624-5557</td>
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<td>3001 EAST ELM</td>
<td>HARRISONVILLE</td>
<td>MO 64701-1196</td>
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<td>MO 63031-6716</td>
<td>(314) 838-2211</td>
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<td>CRYSTAL MANOR</td>
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<td>ADRIAN</td>
<td>MO 64720-9277</td>
<td>(816) 297-8832</td>
<td>RCF</td>
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<td>(636) 933-1818</td>
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<td>Yes</td>
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<table>
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<tr>
<th>Facility Name</th>
<th>Telephone</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
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<td>CUBA MANOR, INC</td>
<td>(573) 885-4500</td>
<td>No</td>
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<td>CRAWFORD</td>
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<tr>
<td>CURRENT RIVER NURSING CENTER, INC</td>
<td>(573) 996-4239</td>
<td>Yes</td>
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<tr>
<td>CYPRESS POINT - SKILLED NURSING BY AMERICARE</td>
<td>(573) 624-8908</td>
<td>No</td>
<td>79</td>
<td>STODDARD</td>
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<td>No</td>
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<td>DADE COUNTY NURSING HOME DISTRICT</td>
<td>(417) 637-5315</td>
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<td>DAVIESS COUNTY NURSING AND REHABILITATION</td>
<td>(660) 663-2197</td>
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<td>DELHAVEN MANOR</td>
<td>(314) 361-2902</td>
<td>No</td>
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<td>DELMAR GARDENS NORTH</td>
<td>(314) 355-1516</td>
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<td>(636) 532-0150</td>
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<td>7</td>
<td>No</td>
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DELMAR GARDENS OF MERAMEC VALLEY
1 ARBOR TERRACE
FENTON MO 63026-3900
Mailing Address 1 ARBOR TERRACE
FENTON MO 63026-3900
Telephone (636) 343-0016
Level of Care: SNF
Alzheimer’s Unit Yes
Level of Care: SNF
Bed Capacity 190
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 13468

DELMAR GARDENS OF O’FALLON
7068 SOUTH OUTER 364
OFallon MO 63368-7757
Mailing Address 7068 SOUTH OUTER 364
OFallon MO 63368-7757
Telephone (636) 240-6100
Level of Care: SNF
Alzheimer’s Unit Yes
Level of Care: SNF
Bed Capacity 240
County SAINT CHARLES
DMH Licensed No
Region 5 Medicare/Medicaid
Facility Number 24291

DELMAR GARDENS ON THE GREEN
15197 CLAYTON RD
CHESTERFIELD MO 63017-7048
Mailing Address 15197 CLAYTON RD
CHESTERFIELD MO 63017-7048
Telephone (636) 394-7515
Level of Care: SNF
Alzheimer’s Unit No
Level of Care: SNF
Bed Capacity 180
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 01515

DELMAR GARDENS SOUTH
5300 BUTLER HILL ROAD
SAINT LOUIS MO 63128-4152
Mailing Address 5300 BUTLER HILL RD
SAINT LOUIS MO 63128-4152
Telephone (314) 842-0588
Level of Care: SNF
Alzheimer’s Unit Yes
Level of Care: SNF
Bed Capacity 250
County SAINT LOUIS COUNTY
DMH Licensed Yes
Region 7 Medicare/Medicaid
Facility Number 12909

DELMAR GARDENS WEST
13550 SOUTH OUTER 40 RD
TOWN AND COUNTRY MO 63017-5812
Mailing Address 13550 SOUTH OUTER 40 RD
TOWN AND COUNTRY MO 63017-5812
Telephone (314) 878-1330
Level of Care: SNF
Alzheimer’s Unit No
Level of Care: SNF
Bed Capacity 321
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 02120

DELTASOUTH NURSING & REHABILITATION
640 COLONEL GEORGE E DAY PARKWAY
SIKESTON MO 63801-0624
Mailing Address 640 COLONEL GEORGE E DAY PARKWAY
SIKESTON MO 63801-0624
Telephone (573) 471-3400
Level of Care: SNF
Alzheimer’s Unit No
Level of Care: SNF
Bed Capacity 60
County NEW MADRID
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 30584

DESMET RETIREMENT COMMUNITY
1425 NORTH NEW FLORISSANT RD
FLORISSANT MO 63033-2154
Mailing Address 1425 N NEW FLORISSANT RD
FLORISSANT MO 63033-2154
Telephone (314) 838-3811
Level of Care: ALF**
Alzheimer’s Unit No
Level of Care: ALF**
Bed Capacity 68
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 20664

DEXTER LIVING CENTER
415 S CATALPA STREET
DEXTER MO 63841-2017
Mailing Address 415 S CATALPA ST
DEXTER MO 63841-2017
Telephone (573) 624-7491
Level of Care: SNF
Alzheimer’s Unit No
Level of Care: SNF
Bed Capacity 73
County STODDARD
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 02156

DIANA’S BOARDING HOME - 2
HC 64, BOX 4677
MARBLE HILL MO 63764-9408
Mailing Address HC 64, BOX 4677
MARBLE HILL MO 63764-9408
Telephone (573) 238-3344
Level of Care: RCF
Alzheimer’s Unit No
Level of Care: RCF
Bed Capacity 40
County BOLLINGER
DMH Licensed Yes
Region 2 Medicare/Medicaid
Facility Number 23940

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### Diana’s Boarding Home #3
- **Location**: HC 64 Box 4683 MINERAL HILL, MO 63764-9408
- **County**: BOLLINGER
- **Region**: 2
- **Telephone**: (573) 238-1300
- **Bed Capacity**: 40
- **DMH Licensed**: Yes
- **Facility Number**: 30984
- **Alzheimer’s Unit**: No

### Diana’s Boarding Home 1
- **Location**: HC 64, BOX 4590 MARBLE HILL, MO 63764-9408
- **County**: BOLLINGER
- **Region**: 2
- **Telephone**: (573) 866-2010
- **Bed Capacity**: 10
- **DMH Licensed**: Yes
- **Facility Number**: 11123
- **Alzheimer’s Unit**: No

### Diversicare of St Joseph
- **Location**: 3002 N 18TH ST SAINT JOSEPH, MO 64505-1872
- **County**: BUCHANAN
- **Region**: 4
- **Telephone**: (816) 364-4200
- **Bed Capacity**: 60
- **DMH Licensed**: No
- **Facility Number**: 08000
- **Medicare/Medicaid**: No

### Dixon Nursing & Rehab
- **Location**: 403 EAST 10TH ST DIXON, MO 65459-6049
- **County**: PULASKI
- **Region**: 6
- **Telephone**: (573) 759-2135
- **Bed Capacity**: 20
- **DMH Licensed**: No
- **Facility Number**: 15510
- **Medicare/Medicaid**: No

### Dolan Memory Care at Calais
- **Location**: 1225 TENNANT RD SAINT LOUIS, MO 63146-5523
- **County**: SAINT LOUIS CITY
- **Region**: 7
- **Telephone**: (314) 569-9060
- **Bed Capacity**: Yes
- **DMH Licensed**: No
- **Facility Number**: 27755
- **Medicare/Medicaid**: No

### Dolan Memory Care at Conway
- **Location**: 12550 CONWAY RD CREVE COEUR, MO 63141-8613
- **County**: SAINT LOUIS COUNTY
- **Region**: 7
- **Telephone**: (314) 576-3998
- **Bed Capacity**: Yes
- **DMH Licensed**: No
- **Facility Number**: 22648
- **Medicare/Medicaid**: No

### Dolan Memory Care at Frontier
- **Location**: 11566 FRONTIER DR CHESTERFIELD, MO 63006-4082
- **County**: SAINT LOUIS COUNTY
- **Region**: 7
- **Telephone**: (314) 995-5331
- **Bed Capacity**: Yes
- **DMH Licensed**: No
- **Facility Number**: 25162
- **Medicare/Medicaid**: No

### Dolan Memory Care at Mason Manor
- **Location**: 12740 MASON MANOR SAINT LOUIS, MO 63141-7350
- **County**: SAINT LOUIS COUNTY
- **Region**: 7
- **Telephone**: (314) 576-6200
- **Bed Capacity**: Yes
- **DMH Licensed**: No
- **Facility Number**: 19861
- **Medicare/Medicaid**: No

### Dolan Memory Care at Schuetz
- **Location**: 1706 SCHUETZ RD SAINT LOUIS, MO 63146-4931
- **County**: SAINT LOUIS COUNTY
- **Region**: 7
- **Telephone**: (314) 989-1762
- **Bed Capacity**: Yes
- **DMH Licensed**: No
- **Facility Number**: 23805
- **Medicare/Medicaid**: No

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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>Mailing Address</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Region</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>11350 DOLAN WAY</td>
<td>PO BOX 4082</td>
<td>ALF**</td>
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<td>DOUGHERTY FERRY ASSISTED LIVING &amp; MEMORY CARE</td>
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<th>County</th>
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<td>11900 JESSICA LN</td>
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Monday, November 4, 2019
ESSEX OF GRAIN VALLEY, THE
401 SOUTHWEST ROCK CREEK LN
GRAIN VALLEY MO 64029-8460
Mailing Address 401 SOUTHWEST ROCK CREEK LN
GRAIN VALLEY MO 64029-8460
Telephone (816) 443-3992
Level of Care: RCF
Bed Capacity 12
County JACKSON
DMH Licensed No
Region 3
Facility Number 24475

ESSEX OF LEBANON, THE
1316 DEADRA DR
LEBANON MO 65536-4609
Mailing Address 1316 DEADRA DR
LEBANON MO 65536-4609
Telephone (417) 532-4863
Level of Care: RCF
Bed Capacity 12
County LACLEDE
DMH Licensed No
Region 1
Facility Number 24257

ESSEX OF MEXICO, THE
1109 OLD FARM RD WEST
MEXICO MO 65265-3250
Mailing Address 1109 OLD FARM RD WEST
MEXICO MO 65265-3250
Telephone (573) 581-5223
Level of Care: RCF
Bed Capacity 12
County AUDRAIN
DMH Licensed No
Region 5
Facility Number 24425

ESSEX OF OZARK, THE
5173 NORTH 22ND
OZARK MO 65721-7637
Mailing Address 5173 NORTH 22ND
OZARK MO 65721-7637
Telephone (417) 485-4185
Level of Care: RCF
Bed Capacity 12
County CHRISTIAN
DMH Licensed No
Region 1
Facility Number 24318

ESTATES OF PERRYVILLE, LLC, THE
430 NORTH WEST ST
PERRYVILLE MO 63775-1359
Mailing Address 430 N WEST ST
PERRYVILLE MO 63775-1359
Telephone (573) 547-1011
Level of Care: SNF
Bed Capacity 156
County PERRY
DMH Licensed No
Region 2
Medicare/Medicaid Facility Number 00137

ESTATES OF SPANISH LAKE, THE
610 PRIGGE ROAD
SAINT LOUIS MO 63138-3543
Mailing Address 610 PRIGGE RD
SAINT LOUIS MO 63138-3543
Telephone (314) 741-9393
Level of Care: SNF
Bed Capacity 150
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7
Medicare/Medicaid Facility Number 15265

ESTATES OF ST LOUIS, LLC, THE
2115 KAPPEL DR
SAINT LOUIS MO 63136-4115
Mailing Address 2115 KAPPEL DR
SAINT LOUIS MO 63136-4115
Telephone (314) 867-7474
Level of Care: SNF
Bed Capacity 94
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7
Medicare/Medicaid Facility Number 05340

EXCELSIOR SPRINGS NURSING & REHAB
1003 MEADOWLARK LN
EXCELSIOR SPRINGS MO 64024-3304
Mailing Address 1003 MEADOWLARK LN
EXCELSIOR SPRINGS MO 64024-3304
Telephone (816) 630-3145
Level of Care: SNF
Bed Capacity 108
County CLAY
DMH Licensed No
Region 4
Medicare/Medicaid Facility Number 19197

FAIR VIEW NURSING HOME
1714 WEST 16TH ST
SEDALIA MO 65301-5273
Mailing Address 1714 WEST 16TH ST
SEDALIA MO 65301-5273
Telephone (660) 827-1594
Level of Care: SNF
Bed Capacity 69
County PETTIS
DMH Licensed No
Region 6
Medicare/Medicaid Facility Number 02469

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Monday, November 4, 2019
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<td>232 CREVE COEUR AVE</td>
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<td>627 WESTWOOD DR S</td>
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Monday, November 4, 2019
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<td>FOUNTAINBLEAU NURSING CENTER</td>
<td>1349 HIGHWAY 61</td>
<td>(636) 937-3500</td>
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<td>FOUNTAINS OF WEST COUNTY AL, LLC THE</td>
<td>15822 CLAYTON RD</td>
<td>(636) 220-1660</td>
<td>ALF**</td>
<td>80</td>
<td>SAINT LOUIS COUNTY</td>
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Monday, November 4, 2019
| Facility Name                                      | Address                     | City          | MO Zip Code       | Phone Number     | Alzheimer’s Unit | Bed Capacity | Region | DMH Licensed | Facility Number |
|---------------------------------------------------|-----------------------------|---------------|------------------|------------------|------------------|--------------|--------|--------------|----------------|----------------|
| **FOUR SEASONS ASSISTED LIVING**                  |                             |               |                  |                  |                  |              |        |              |                |                |
| 230 RAILROAD ST                                   | MOSCOW MILLS, MO 63362-1600 |               |                  | (636) 366-4231   | No               | 30           | 5      | Yes          | 02624          |                |
| Mailing Address 230 RAILROAD ST                   |                             | MOSCOW MILLS  | MO 63362-1600    |                  |                  |              |        |              |                |                |
| **FOUR SEASONS LIVING CENTER**                    |                             |               |                  |                  |                  |              |        |              |                |                |
| 2800 HIGHWAY TT                                   | SEDALIA, MO 65301-1410      |               |                  | (660) 826-8803   | Yes              | 239          | 6      | No           | 00836          |                |
| Mailing Address 2800 HIGHWAY TT                   |                             | SEDALIA       | MO 65301-1410    |                  |                  |              |        |              |                |                |
| **FOUR SEASONS RCF I**                            |                             |               |                  |                  |                  |              |        |              |                |                |
| 220 RAILROAD ST                                   | MOSCOW MILLS, MO 63362-1600 |               |                  | (636) 366-4231   | No               | 23           | 5      | Yes          | 02624          |                |
| Mailing Address 230 RAILROAD ST                   |                             | MOSCOW MILLS  | MO 63362-1600    |                  |                  |              |        |              |                |                |
| **FOXBERRY TERRACE - ASSISTED LIVING BY AMERICARE**|                             |               |                  | (417) 625-1000   | No               | 46           | 1      | Yes          | 25428          |                |
| 4316 N ST LOUIS AVE                               | WEBB CITY, MO 64870-9550    |               |                  |                  |                  |              |        |              |                |                |
| Mailing Address 4316 N ST LOUIS AVE               |                             | WEBB CITY     | MO 64870-9550    |                  |                  |              |        |              |                |                |
| **FOXWOOD SPRINGS LIVING CENTER**                 |                             |               |                  | (816) 331-3111   | No               | 62           | 3      | Yes          | 02649          |                |
| 1500 WEST FOXWOOD DR                              | RAYMORE, MO 64083-9347      |               |                  |                  |                  |              |        |              |                |                |
| Mailing Address 1500 WEST FOXWOOD DR              |                             | RAYMORE       | MO 64083-9347    |                  |                  |              |        |              |                |                |
| **FOXWOOD SPRINGS LIVING CENTER**                 |                             |               |                  | (816) 331-3111   | Yes              | 108          | 3      | No           | 02649          |                |
| 1500 WEST FOXWOOD DR                              | RAYMORE, MO 64083-9347      |               |                  |                  |                  |              |        |              |                |                |
| Mailing Address 1500 WEST FOXWOOD DR              |                             | RAYMORE       | MO 64083-9347    |                  |                  |              |        |              |                |                |
| **FREDERICK STREET MANOR**                        |                             |               |                  | (573) 334-2662   | No               | 32           | 2      | Yes          | 02662          |                |
| 429 NORTH FREDERICK ST                            | CAPE GIRARDEAU, MO 63701-4834 |             |                  |                  |                  |              |        |              |                |                |
| Mailing Address 429 N FREDERICK ST                |                             | CAPE GIRARDEAU| MO 63701-4834    |                  |                  |              |        |              |                |                |
| **FREMONT SENIOR LIVING, THE**                    |                             |               |                  | (417) 881-0500   | Yes              | 72           | 1      | No           | 28782          |                |
| 1520 EAST BATES ST                                | SPRINGFIELD, MO 65804-8401  |               |                  |                  |                  |              |        |              |                |                |
| Mailing Address 1520 EAST BATES ST                |                             | SPRINGFIELD   | MO 65804-8401    |                  |                  |              |        |              |                |                |
| **FRENE VALLEY OF HERMANN-A STONEBRIDGE COMMUNITY**|                             |               |                  | (573) 486-3155   | No               | 18           | 6      | No           | 02690          |                |
| 1800 WEIN ST                                      | HERRMANN, MO 65041-1601     |               |                  |                  |                  |              |        |              |                |                |
| Mailing Address PO BOX 468                        |                             | HERRMANN      | MO 65041-0468    |                  |                  |              |        |              |                |                |

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Monday, November 4, 2019
FRENE VALLEY OF HERMANN-A STONEBRIDGE COMMUNITY
1800 WEIN ST
HERMANN MO 65041-1601
Mailing Address PO BOX 468
HERMANN MO 65041-0468
Telephone (573) 486-3155
Level of Care: SNF
Alzheimer's Unit No
Bed Capacity 118
County GASCONADE
DMH Licensed No
Region 6 Medicare/Medicaid
Facility Number 02690

FRENE VALLEY OF OWENSVILLE-A STONEBRIDGE COMMUNITY
1016 W HIGHWAY 28
OWENSVILLE MO 65066-1677
Mailing Address PO BOX 593
OWENSVILLE MO 65066-0593
Telephone (573) 437-6877
Level of Care: SNF
Alzheimer's Unit Yes
Bed Capacity 131
County GASCONADE
DMH Licensed No
Region 6 Medicare/Medicaid
Facility Number 19051

FRIENDSHIP VILLAGE CHESTERFIELD
15201 OLIVE BLVD
CHESTERFIELD MO 63017-1810
Mailing Address 15201 OLIVE BLVD
CHESTERFIELD MO 63017-1810
Telephone (636) 532-1515
Level of Care: ALF**
Alzheimer's Unit No
Bed Capacity 22
County SAINT LOUIS COUNTY
DMH Licensed Yes
Region 7 Medicare/Medicaid
Facility Number 02715

FRIENDSHIP VILLAGE CHESTERFIELD
15201 OLIVE BLVD
CHESTERFIELD MO 63017-1810
Mailing Address 15201 OLIVE BLVD
CHESTERFIELD MO 63017-1810
Telephone (636) 532-1515
Level of Care: SNF
Alzheimer's Unit No
Bed Capacity 99
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 02715

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
Level of Care: SNF
Alzheimer's Unit No
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
Level of Care: SNF
Alzheimer's Unit No
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
Level of Care: SNF
Alzheimer's Unit No
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
Level of Care: SNF
Alzheimer's Unit Yes
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
Level of Care: ALF
Alzheimer's Unit No
Bed Capacity 41
County CALLAWAY
DMH Licensed No
Region 6 Medicare/Medicaid
Facility Number 18735

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Monday, November 4, 2019
GARDEN VILLAS NORTH
4505 PARKER ROAD
BLACK JACK MO 63033-4268
Mailing Address 4505 PARKER RD BLACK JACK MO 63033-4268
Telephone (314) 355-6100
Level of Care: ALF**
County ST LOUIS COUNTY
Region 7
Telephone (314) 355-6100
Bed Capacity 90
DMH Licensed No
Facility Number 28930

GARDEN VILLAS OF O'FallON
7092 SOUTH OUTER 364 ROAD
OFALLOn MO 63368-7757
Mailing Address 7092 SOUTH OUTER 364 RD OFALLOn MO 63368-7757
Telephone (636) 240-5560
Level of Care: ALF
County ST LOUIS COUNTY
Region 5
Telephone (636) 240-5560
Bed Capacity 95
DMH Licensed No
Facility Number 27793

GARDEN VILLAS SOUTH
13457 TESSON FERRY RD
SAINT LOUIS MO 63128-4010
Mailing Address 13457 TESSON FERRY RD SAINT LOUIS MO 63128-4010
Telephone (314) 843-7788
Level of Care: ALF
County ST LOUIS COUNTY
Region 7
Telephone (314) 843-7788
Bed Capacity 76
DMH Licensed No
Facility Number 28964

GARDENS AT BARRY ROAD, THE
8300 NW BARRY RD
KANSAS CITY MO 64153-1634
Mailing Address 8300 NW BARRY RD KANSAS CITY MO 64153-1634
Telephone (816) 584-3200
Level of Care: ALF**
County PLATTE
Region 4
Telephone (816) 584-3200
Bed Capacity 40
DMH Licensed No
Facility Number 23774

GARDENS AT BARRY ROAD, THE
8300 NW BARRY ROAD
KANSAS CITY MO 64153-1634
Mailing Address 8300 NW BARRY RD KANSAS CITY MO 64153-1634
Telephone (816) 584-3200
Level of Care: ALF
County PLATTE
Region 4
Telephone (816) 584-3200
Bed Capacity 100
DMH Licensed No
Facility Number 23774

GARDENS, THE
1302 WEST SUNSET
SPRINGFIELD MO 65807-5943
Mailing Address 1302 WEST SUNSET SPRINGFIELD MO 65807-5943
Telephone (417) 899-7600
Level of Care: ALF**
County GREENE
Region 1
Telephone (417) 899-7600
Bed Capacity 148
DMH Licensed No
Facility Number 20288

GASCONADE MANOR NURSING HOME
1910 NURSING HOME RD
OWENSVILLE MO 65066-2844
Mailing Address PO BOX 520 OWENSVILLE MO 65066-0520
Telephone (573) 437-4101
Level of Care: SNF
County GASCONADE
Region 6
Telephone (573) 437-4101
Bed Capacity 79
DMH Licensed No
Facility Number 02804

GASCONADE TERRACE RETIREMENT CENTER
1930 NURSING HOME RD
OWENSVILLE MO 65066-2844
Mailing Address PO BOX 520 OWENSVILLE MO 65066-0520
Telephone (573) 437-4833
Level of Care: ALF
County GASCONADE
Region 6
Telephone (573) 437-4833
Bed Capacity 19
DMH Licensed No
Facility Number 14143

GASLIGHT MANOR
25466 NORTH HWY 5
LEBANON MO 65536
Mailing Address PO BOX 969 LEBANON MO 65536-0969
Telephone (417) 532-3045
Level of Care: ALF
County LACLEDE
Region 1
Telephone (417) 532-3045
Bed Capacity 80
DMH Licensed Yes
Facility Number 08791

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<th>Telephone</th>
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<td>GENERAL BAPTIST NURSING HOME</td>
<td>17108 US HWY 62</td>
<td>CAMPBELL, MO 63933-6383</td>
<td>(573) 246-2155</td>
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<td>DUNKLIN</td>
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<td>GEORGIA BROWN BLOSSER HOME FOR THE AGED</td>
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<td>MARSHALL, MO 65340-1510</td>
<td>(660) 886-5020</td>
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<td>1 GEORGIAN GARDENS DR</td>
<td>POTOSI, MO 63664-1436</td>
<td>(573) 438-6261</td>
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<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>FRANKLIN</td>
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<tr>
<td>GIDEON CARE CENTER</td>
<td>300 LUNBECK</td>
<td>GIDEON, MO 63848-9211</td>
<td>(573) 448-3505</td>
<td>SNF</td>
<td>72</td>
<td>NEW MADRID</td>
<td>No</td>
<td>2</td>
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<td>GLASGOW GARDENS</td>
<td>100 AUDSLEY DR</td>
<td>GLASGOW, MO 65254-9537</td>
<td>(660) 338-2297</td>
<td>SNF</td>
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<td>HOWARD</td>
<td>No</td>
<td>5</td>
<td>No</td>
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<td>GLENDALE GARDENS NURSING &amp; REHAB</td>
<td>3535 EAST CHEROKEE</td>
<td>SPRINGFIELD, MO 65809-2829</td>
<td>(417) 889-9955</td>
<td>SNF</td>
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<td>GREENE</td>
<td>No</td>
<td>1</td>
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<td>GLENFIELD MEMORY CARE HOMES</td>
<td>118 OHMES ROAD</td>
<td>COTTLEVILLE, MO 63376-7649</td>
<td>(636) 447-4449</td>
<td>ALF**</td>
<td>12</td>
<td>SAINT CHARLES</td>
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<tr>
<td>GLENWOOD HEALTHCARE</td>
<td>851 THOROUGHFARE</td>
<td>SEYMOUR, MO 65746-8767</td>
<td>(417) 935-2992</td>
<td>SNF</td>
<td>60</td>
<td>WEBSTER</td>
<td>No</td>
<td>1</td>
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GOGGIN BOARDING HOME
620 COUNTY ROAD 40
CALEDONIA MO 63631-9133
Mailing Address 620 COUNTY RD 40
CALEDONIA MO 63631-9133
Telephone (573) 697-5894 Alzheimer’s Unit No
Level of Care: RCF Bed Capacity 12
County IRON DMH Licensed Yes
Region 2 Facility Number 02937

GOLDEN AGE LIVING CENTER
404 E THIRD ST
STOVER MO 65078-0947
Mailing Address PO BOX 307
STOVER MO 65078-0307
Telephone (573) 377-4521 Alzheimer’s Unit Yes
Level of Care: SNF Bed Capacity 61
County MORGAN DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 02949

GOLDEN AGE NURSING HOME
12498 SE HWY 116
BRAYMER MO 64624-9107
Mailing Address 12498 SE HWY 116
BRAYMER MO 64624-9107
Telephone (660) 645-2243 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 83
County CALDWELL DMH Licensed No
Region Medicare/Medicaid Facility Number 02957

GOLDEN ESTATE RESIDENTIAL CARE
1134 WEST NORTON RD
SPRINGFIELD MO 65803-1070
Mailing Address 1134 WEST NORTON RD
SPRINGFIELD MO 65803-1070
Telephone (417) 833-4440 Alzheimer’s Unit No
Level of Care: RCF* Bed Capacity 31
County GREENE DMH Licensed Yes
Region 1 Facility Number 02984

GOLDEN OAKS, LLC
27882 HIGHWAY H
MARSHALL MO 65340-5303
Mailing Address 27882 HIGHWAY H
MARSHALL MO 65340-5303
Telephone (660) 886-6172 Alzheimer’s Unit No
Level of Care: ALF** Bed Capacity 67
County SALINE DMH Licensed No
Region 5 Facility Number 15380

GOLDEN YEARS CENTER FOR REHAB AND HEALTHCARE
2001 JEFFERSON PARKWAY
HARRISONVILLE MO 64701-3714
Mailing Address 2001 JEFFERSON PRKWY
HARRISONVILLE MO 64701-3714
Telephone (816) 380-4731 Alzheimer’s Unit Yes
Level of Care: SNF Bed Capacity 132
County CASS DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 12458

GOOD SAMARITAN CARE CENTER
403 WEST MAIN ST
COLE CAMP MO 65325-1144
Mailing Address 403 WEST MAIN ST
COLE CAMP MO 65325-1144
Telephone (660) 668-4515 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 72
County BENTON DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 03039

GOOD SHEPHERD CARE CENTER
1101 WEST CLAY RD
VERSAILLES MO 65084-1177
Mailing Address 1101 WEST CLAY RD
VERSAILLES MO 65084-1177
Telephone (573) 378-5411 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 120
County MORGAN DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 21631

GOOD SHEPHERD COMMUNITY CARE AND REHABILITATION
200 WEST 12TH ST
LOCKWOOD MO 65682-8337
Mailing Address 200 WEST 12TH ST
LOCKWOOD MO 65682-8337
Telephone (417) 232-4571 Alzheimer’s Unit Yes
Level of Care: SNF Bed Capacity 69
County DADE DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 03051

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**GOOD SHEPHERD RESIDENTIAL CARE FACILITY**  
200 WEST 12TH  
LOCKWOOD  
MO 65682-8337  
**Telephone** (417) 232-4571  
**Level of Care:** RCF*  
**Bed Capacity:** 20  
**County** Dade  
**DMH Licensed:** No  
**Region** 1  
**Facility Number** 03051  

**GOWER CONVALESCENT CENTER, INC**  
323 SOUTH HIGHWAY 169  
GOWER  
MO 64454-9116  
**Telephone** (816) 424-6483  
**Level of Care:** SNF  
**Bed Capacity:** 82  
**County** Clinton  
**DMH Licensed:** No  
**Region** 4  
**Medicare/Medicaid:** No  

**GRAN VILLAS NEOSHOT**  
420 LYON DR  
NEOSHO  
MO 64850-9194  
**Telephone** (417) 451-7071  
**Level of Care:** RCF  
**Bed Capacity:** 30  
**County** Newton  
**DMH Licensed:** No  
**Region** 2  
**Medicare/Medicaid:** No  

**GRANBY HOUSE**  
301 SOUTH MAIN  
GRANBY  
MO 64844-8336  
**Telephone** (417) 472-6271  
**Level of Care:** SNF  
**Bed Capacity:** 60  
**County** Newton  
**DMH Licensed:** No  
**Region** 1  
**Medicare/Medicaid:** No  

**GRAND MANOR NURSING & REHABILITATION CENTER**  
3645 COOK AVE  
SAINT LOUIS  
MO 63113-3801  
**Telephone** (314) 531-2352  
**Level of Care:** SNF  
**Bed Capacity:** 120  
**County** Saint Louis City  
**DMH Licensed:** No  
**Region** 7  
**Medicare/Medicaid:** No  

**GRAND PAVILION AT THE PLAZA**  
4330 WASHINGTON  
KANSAS CITY  
MO 64111-3340  
**Telephone** (816) 753-6800  
**Level of Care:** SNF  
**Bed Capacity:** 154  
**County** Jackson  
**DMH Licensed:** No  
**Region** 3  
**Medicare/Medicaid:** No  

**GRAND RIVER HEALTH CARE**  
118 TRENTON RD  
CHILLICOTHE  
MO 64601-4002  
**Telephone** (660) 646-0353  
**Level of Care:** SNF  
**Bed Capacity:** 60  
**County** Livingston  
**DMH Licensed:** No  
**Region** 4  
**Medicare/Medicaid:** No  

**GRANDVIEW HEALTHCARE CENTER**  
201 GRAND AVE  
WASHINGTON  
MO 63090-1209  
**Telephone** (636) 239-9190  
**Level of Care:** SNF  
**Bed Capacity:** 102  
**County** Franklin  
**DMH Licensed:** No  
**Region** 6  
**Medicare/Medicaid:** No  

**GRANITE HOUSE RCF LLC**  
321 SOUTH MAIN ST  
IRONTON  
MO 63650-1406  
**Telephone** (573) 546-7283  
**Level of Care:** RCF  
**Bed Capacity:** 60  
**County** Iron  
**DMH Licensed:** Yes  
**Region** 2  
**Facility Number** 04628  

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Monday, November 4, 2019
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<tr>
<th>Organization Name</th>
<th>120 North Front St</th>
<th>Mailing Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Region</th>
<th>Facility Number</th>
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<tr>
<td>Greater Heights RCF, LLC</td>
<td>600 North Front St</td>
<td>PO BOX 603</td>
<td>Park Hills</td>
<td>MO</td>
<td>40</td>
<td>No</td>
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<td>Green Acres Residential Care Facility, LLC</td>
<td>3688 Sand Creek Road</td>
<td>3688 Sand Creek Rd</td>
<td>Farmington</td>
<td>MO</td>
<td>12</td>
<td>No</td>
<td>Yes</td>
<td>2</td>
<td>17289</td>
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<tr>
<td>Green Meadow Sikeston LLC</td>
<td>411 North Kingshighway</td>
<td>PO BOX 909</td>
<td>Sikeston</td>
<td>MO</td>
<td>66</td>
<td>No</td>
<td>Yes</td>
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<td>03229</td>
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<tr>
<td>Green Park Senior Living Community</td>
<td>9350 Green Park Road</td>
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<td>Saint Louis</td>
<td>MO</td>
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<td>Greenville Health Care Center</td>
<td>117 Sycamore St</td>
<td>PO BOX 108</td>
<td>Greenville</td>
<td>MO</td>
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<td>No</td>
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<td>Gregory Ridge Health Care Center</td>
<td>7001 Clevelan Ave</td>
<td>7001 Clevelan Ave</td>
<td>Kansas City</td>
<td>MO</td>
<td>25</td>
<td>No</td>
<td>Yes</td>
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<td>Hampton House of Malden, Inc</td>
<td>201 North Decatur</td>
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<td>MO</td>
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<td>No</td>
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<td>Harambee House, Inc</td>
<td>703 North Eighth St</td>
<td>703 North Eighth St</td>
<td>Columbia</td>
<td>MO</td>
<td>15</td>
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<td>Harbor Place - Linn</td>
<td>24 Trenshaw Trail</td>
<td>24 Trenshaw Trail</td>
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Monday, November 4, 2019
| Facility Name                                      | Address                             | City          | County | Bed Capacity | Alzheimer's Unit | DMH Licensed | Facility Number |
|---------------------------------------------------|-------------------------------------|---------------|--------|--------------|------------------|--------------|----------------|----------------|
| HARBOUR PLACE ESTATES, LLC                        | 1054 SOUTH HWY 47                  | WARRENTON     | MO     | 36           | No               | No           | 30144          |
| PHEONIX TERRACE                                   | 2515 SOUTH HWY 47                  | WARRENTON     | MO     | 36           | No               | No           | 30144          |
| HARMONY GARDENS - ASSISTED LIVING BY AMERICARE    | 503 BURKARTH ROAD                  | WARRENSBURG   | MO     | 44           | No               | No           | 30144          |
| HAROLD AND LOUISE ASSISTED LIVING                 | 135 COMMUNICATION DR               | HANNIBAL      | MO     | 47           | No               | Yes          | 29639          |
| HARRIS HOUSE RESIDENTIAL CARE FACILITY, THE       | 3859 EAST 59TH TERRACE             | KANSAS CITY   | MO     | 7            | No               | No           | 16225          |
| HARRIS RESIDENTIAL CARE CENTER LLC                | 401 SOUTH HENRY                    | FARMINGTON    | MO     | 37           | No               | Yes          | 02256          |
| HARTLAND RESIDENTIAL CARE CENTER                 | 23435 LADDER DR                    | MARSHALL      | MO     | 12           | No               | No           | 15163          |
| HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE   | 615 RANKIN MILL LN                 | BOONVILLE     | MO     | 42           | No               | No           | 26026          |
| HARTVILLE CARE CENTER                             | 649 WEST ROLLA ST                  | HARTVILLE     | MO     | 60           | No               | No           | 17946          |
| HARVEST RESIDENTIAL CARE                          | 35 LILLIAN DR                      | SAINT CHARLES | MO     | 38           | No               | Yes          | 03411          |

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<th>Facility Name</th>
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<th>County</th>
<th>Phone Number</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>HAVEN, THE</td>
<td>614 SOUTH BY-PASS</td>
<td>KENNETT</td>
<td>MO</td>
<td>(573) 888-1201</td>
<td>RCF*</td>
<td>64</td>
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<tr>
<td>HEART OF THE OZARKS HEALTHCARE CENTER</td>
<td>2004 CRESTVIEW ST</td>
<td>AVA</td>
<td>MO</td>
<td>(417) 683-4129</td>
<td>SNF</td>
<td>120</td>
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<tr>
<td>HEARTLAND CARE AND REHABILITATION CENTER</td>
<td>2525 BOUTIN DR</td>
<td>CAPE GIRARDEAU</td>
<td>MO</td>
<td>(573) 334-5225</td>
<td>SNF</td>
<td>102</td>
<td>No</td>
<td>01023</td>
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<tr>
<td>HEARTLAND II RCF</td>
<td>117 SOUTH 15TH ST</td>
<td>SAINT JOSEPH</td>
<td>MO</td>
<td>(816) 676-1505</td>
<td>RCF*</td>
<td>52</td>
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<tr>
<td>HEARTLAND RESIDENTIAL CARE FACILITY, INC</td>
<td>1311 FRANCIS ST</td>
<td>SAINT JOSEPH</td>
<td>MO</td>
<td>(816) 233-5779</td>
<td>RCF</td>
<td>20</td>
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<tr>
<td>HEISINGER LUTHERAN HOME</td>
<td>1002 WEST MAIN ST</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>(573) 636-6288</td>
<td>ALF**</td>
<td>111</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</td>
<td>MO</td>
<td>(573) 636-6288</td>
<td>SNF</td>
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<td>No</td>
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<td>HERITAGE AVONLEA OF GLADSTONE, LLC</td>
<td>2801 NE 60TH ST</td>
<td>GLADSTONE</td>
<td>MO</td>
<td>(816) 454-7755</td>
<td>RCF</td>
<td>100</td>
<td>No</td>
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<tr>
<td>HERITAGE CARE CENTER</td>
<td>4401 NORTH HANLEY RD</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>(314) 521-7471</td>
<td>SNF</td>
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HERITAGE HALL NURSING CENTER
750 EAST HIGHWAY 22
CENTRALIA MO 65240-1146
Mailing Address 750 EAST HIGHWAY 22
CENTRALIA MO 65240-1146

Telephone (573) 682-5551
Level of Care: SNF
County BOONE
Region 6 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 03069

HERITAGE HILLS ASSISTED LIVING FACILITY
ROUTE 5, BOX 68
PATTON MO 63662-9760
Mailing Address PO BOX B
PATTON MO 63662-0010

Telephone (573) 866-2003
Level of Care: ALF
County BOLLINGER
Region 2
Alzheimer's Unit No
Bed Capacity 24
DMH Licensed Yes
Facility Number 18783

HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICARE
1802 SAINT FRANCIS ST
KENNETT MO 63857-1568
Mailing Address PO BOX 827
KENNETT MO 63857-0827

Telephone (573) 888-1044
Level of Care: SNF
County DUNKLIN
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 72
DMH Licensed No
Facility Number 17533

HERITAGE VILLAGE OF GLADSTONE
3000 NORTH EAST 64TH ST
GLADSTONE MO 64119-1569
Mailing Address 3000 NE 64TH ST
GLADSTONE MO 64119-1569

Telephone (816) 454-5130
Level of Care: ALF**
County CLAY
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 12510

HERITAGE VILLAGE OF PLATTE CITY
15 WALLINGFORD DR
PLATTE CITY MO 64079-9604
Mailing Address 15 WALLINGFORD DR
PLATTE CITY MO 64079-9604

Telephone (816) 858-2182
Level of Care: RCF*
County PLATTE
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 30
DMH Licensed No
Facility Number 13182

HERMITAGE NURSING & REHAB
18599 FIRST STREET
HERMITAGE MO 65668-9129
Mailing Address PO BOX 325
HERMITAGE MO 65668-0325

Telephone (417) 745-2111
Level of Care: SNF
County HICKORY
Region 1 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 10240

HICKORY MANOR
209 HICKORY ST
LICKING MO 65542-9847
Mailing Address 209 HICKORY ST
LICKING MO 65542-9847

Telephone (573) 674-2111
Level of Care: SNF
County TEXAS
Region 1 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 07929

HIDDEN LAKE CARE CENTER
11400 HIDDEN LAKE DR
RAYTOWN MO 64133-7409
Mailing Address 11400 HIDDEN LAKE DR
RAYTOWN MO 64133-7409

Telephone (816) 737-1010
Level of Care: SNF
County JACKSON
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 112
DMH Licensed No
Facility Number 17146

HIDDEN LAKE CARE CENTER
11400 HIDDEN LAKE DR
RAYTOWN MO 64133-7409
Mailing Address 11400 HIDDEN LAKE DR
RAYTOWN MO 64133-7409

Telephone (816) 737-1010
Level of Care: RCF*
County JACKSON
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 48
DMH Licensed No
Facility Number 17146

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HIGHLAND CREST - ASSISTED LIVING BY AMERICARE
2204 S HALLIBURTON ST
KIRKSVILLE MO 63501-4651
Mailing Address 2204 S HALLIBURTON ST
KIRKSVILLE MO 63501-4651
Telephone (660) 627-8004
Level of Care: ALF**
County ADAIR
Bed Capacity 42
DMH Licensed No
Region 5
Facility Number 16785
Alzheimer's Unit No
County MO
Region 5
DMH Licensed No
Facility Number 16785

HIGHLAND HOME
1325 SOUTH HIGHLAND COURT
MARSHALL MO 65340-3058
Mailing Address PO BOX 974
MARSHALL MO 65340-0974
Telephone (660) 886-8675
Level of Care: RCF
County SALINE
Bed Capacity 18
DMH Licensed No
Region 5
Facility Number 0358
Alzheimer's Unit No
County MO
Region 5
DMH Licensed No
Facility Number 0358

HIGHLAND REHABILITATION & HEALTH CARE CENTER
904 EAST 68TH ST
KANSAS CITY MO 64131-1305
Mailing Address 904 EAST 68TH ST
KANSAS CITY MO 64131-1305
Telephone (816) 333-5485
Level of Care: SNF
County JACKSON
Bed Capacity 162
DMH Licensed No
Region 3
Facility Number 06782
Medicare/Medicaid Yes
County MO
Region 3
DMH Licensed No
Facility Number 06782

HILDA FUWELL'S RESIDENTIAL CARE FACILITY
17382 STATE HIGHWAY 25
DEXTER MO 63841-9710
Mailing Address 17382 STATE HWY 25
DEXTER MO 63841-9710
Telephone (573) 568-2056
Level of Care: RCF
County STODDARD
Bed Capacity 20
DMH Licensed Yes
Region 2
Facility Number 07863
Alzheimer's Unit No
County MO
Region 2
DMH Licensed Yes
Facility Number 07863

HILL CREST MANOR
801 SOUTH COLBY
HAMILTON MO 64644-8287
Mailing Address 801 SOUTH COLBY
HAMILTON MO 64644-8287
Telephone (816) 583-2119
Level of Care: SNF
County CALDWELL
Bed Capacity 90
DMH Licensed No
Region 4
Facility Number 03315
Medicare/Medicaid Yes
County MO
Region 4
DMH Licensed No
Facility Number 03315

HILL CREST MANOR
801 SOUTH COLBY
HAMILTON MO 64644-8287
Mailing Address 801 SOUTH COLBY
HAMILTON MO 64644-8287
Telephone (816) 583-2119
Level of Care: SNF
County CALDWELL
Bed Capacity 90
DMH Licensed No
Region 4
Facility Number 03315
Medicare/Medicaid Yes
County MO
Region 4
DMH Licensed No
Facility Number 03315

HILLCREST CARE CENTER, INC
1108 CLARKE ST
DE SOTO MO 63020-2706
Mailing Address 1108 CLARKE ST
DE SOTO MO 63020-2706
Telephone (636) 586-3022
Level of Care: SNF
County JEFFERSON
Bed Capacity 120
DMH Licensed No
Region 2
Facility Number 20084
Medicare/Medicaid Yes
County MO
Region 2
DMH Licensed No
Facility Number 20084

HILLCREST RESIDENTIAL CARE, INC
9415 NORTH BROWN STATION RD
COLUMBIA MO 65202-8671
Mailing Address 9415 NORTH BROWN STATION RD
COLUMBIA MO 65202-8671
Telephone (573) 696-3201
Level of Care: ALF
County BOONE
Bed Capacity 33
DMH Licensed Yes
Region 6
Facility Number 03572
Alzheimer's Unit No
County MO
Region 6
DMH Licensed Yes
Facility Number 03572

HILLSIDE CARE CENTER
321 NORTH SECTION
HANNIBAL MO 63401-3460
Mailing Address PO BOX 308
HANNIBAL MO 63401-0308
Telephone (573) 221-1439
Level of Care: RCF*
County MARION
Bed Capacity 44
DMH Licensed Yes
Region 5
Facility Number 14879
Alzheimer's Unit No
County MO
Region 5
DMH Licensed Yes
Facility Number 14879

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Monday, November 4, 2019
<table>
<thead>
<tr>
<th>Name</th>
<th>Address 1</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td><strong>HILLSIDE LIVING CENTER</strong></td>
<td>10109 RESTORATION CIRCLE</td>
<td>MINERAL POINT</td>
<td>MO</td>
<td>63660-8538</td>
<td>(573) 562-0303</td>
<td>ALF**</td>
<td>60</td>
<td>WASHINGTON</td>
<td>2</td>
<td>Yes</td>
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<tr>
<td><strong>HILLSIDE MANOR HEALTHCARE AND REHAB CENTER</strong></td>
<td>1265 MCLARAN AVE</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>63147-1606</td>
<td>(314) 388-4121</td>
<td>SNF</td>
<td>208</td>
<td>SAINT LOUIS CITY</td>
<td>7</td>
<td>No</td>
<td>04687</td>
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<tr>
<td><strong>HILLTOP HAVEN RESIDENTIAL CARE FACILITY</strong></td>
<td>18941 CR 305A</td>
<td>EMINENCE</td>
<td>MO</td>
<td>65466-9702</td>
<td>(573) 226-5426</td>
<td>RCF</td>
<td>20</td>
<td>SHANNON</td>
<td>2</td>
<td>Yes</td>
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<td><strong>HILLVIEW NURSING &amp; REHAB</strong></td>
<td>220 O’ROURKE</td>
<td>PLATTE CITY</td>
<td>MO</td>
<td>64079-9360</td>
<td>(816) 858-5222</td>
<td>SNF</td>
<td>120</td>
<td>PLATTE</td>
<td>4</td>
<td>No</td>
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<tr>
<td><strong>HOLDEN MANOR CARE CENTER</strong></td>
<td>2005 SOUTH LEXINGTON</td>
<td>HOLDEN</td>
<td>MO</td>
<td>64040-1610</td>
<td>(816) 732-4138</td>
<td>SNF</td>
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<td>JOHNSON</td>
<td>3</td>
<td>No</td>
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<tr>
<td><strong>HOLIDAY RESIDENTIAL CARE</strong></td>
<td>1019 OLD ST MARY’S RD</td>
<td>PERRYVILLE</td>
<td>MO</td>
<td>63775-1298</td>
<td>(573) 547-7398</td>
<td>RCF*</td>
<td>20</td>
<td>PERRY</td>
<td>2</td>
<td>Yes</td>
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<tr>
<td><strong>HOLLY HILLS RETIREMENT HOME</strong></td>
<td>6421 MINNESOTA</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>63111-2808</td>
<td>(314) 351-0767</td>
<td>RCF*</td>
<td>15</td>
<td>SAINT LOUIS CITY</td>
<td>7</td>
<td>Yes</td>
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<td><strong>HOPE CARE CENTER</strong></td>
<td>115 EAST 83RD ST</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>64114-2537</td>
<td>(816) 523-3988</td>
<td>SNF</td>
<td>16</td>
<td>JACKSON</td>
<td>3</td>
<td>No</td>
<td>21370</td>
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<tr>
<td><strong>HOPEDALE COTTAGE ASSISTED LIVING THE</strong></td>
<td>1314 W SCHOOL STREET</td>
<td>OZARK</td>
<td>MO</td>
<td>65721-</td>
<td>(417) 581-1308</td>
<td>ALF**</td>
<td>24</td>
<td>CHRISTIAN</td>
<td>1</td>
<td>Yes</td>
<td>30302</td>
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</tbody>
</table>

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HOUSE OF CARE CENTER
3744 BENTON BLVD
KANSAS CITY MO 64128-2515
Mailing Address: PO BOX 287912
KANSAS CITY MO 64128-7912
Telephone (816) 921-6852
Level of Care: RCF
Bed Capacity: 8
County: JACKSON
DMH Licensed: Yes
Region: 3
Facility Number: 17001

HOUSTON HOUSE
1000 NORTH INDUSTRIAL DR
HOUSTON MO 65483-9400
Mailing Address: PO BOX 199
HOUSTON MO 65483-0199
Telephone (417) 967-2527
Level of Care: SNF
Bed Capacity: 96
County: TEXAS
DMH Licensed: No
Region: 1
Facility Number: 10626

HUDSON HOUSE
1700-B SOUTH HUDSON AVE
AURORA MO 65605-2717
Mailing Address: 1700-B S HUDSON AVE
AURORA MO 65605-2717
Telephone (417) 678-2169
Level of Care: RCF*
Bed Capacity: 41
County: LAWRENCE
DMH Licensed: No
Region: 1
Facility Number: 10444

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
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
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
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
Facility Number: 03807

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## 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  
CHILLCOTHE  
MO 64601-3525  
Mailing Address 2601 FAIR ST  
CHILLCOTHE  
MO 64601-3525  
Telephone (660) 646-1230  
Level of Care: SNF  
Bed Capacity 75  
County LIVINGSTON  
DMH Licensed Yes  
Region 4  
Facility Number 03833

## INDIAN HILLS - A STONEBRIDGE COMMUNITY
2601 FAIR ST  
CHILLCOTHE  
MO 64601-3525  
Mailing Address 2601 FAIR ST  
CHILLCOTHE  
MO 64601-3525  
Telephone (660) 646-1230  
Level of Care: RCF  
Bed Capacity 40  
County LIVINGSTON  
DMH Licensed No  
Region 4  
Facility Number 03833

## IRONTON RESIDENTIAL CARE, LLC
101 SOUTH KNOB ST  
IRONTON  
MO 63650-1501  
Mailing Address PO BOX 272  
FARMINGTON  
MO 63640-0272  
Telephone (573) 546-3080  
Level of Care: RCF  
Bed Capacity 16  
County IRON  
DMH Licensed Yes  
Region 2  
Facility Number 01901

## J & J RESIDENTIAL CARE FACILITY II
104 WESBECHER  
MARBLE HILL  
MO 63764-0378  
Mailing Address PO BOX 378  
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

## JACKSON MANOR NURSING HOME
710 BROADRIDGE DR  
JACKSON  
MO 63755-3042  
Mailing Address 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

## JACOBS CARE CENTER, LLC
932 WEST STATE  
SPRINGFIELD  
MO 65806-2846  
Mailing Address 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

## JAMES RIVER NURSING AND REHABILITATION
3550 EAST BATTLEFIELD  
SPRINGFIELD  
MO 65809-3400  
Mailing Address 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

## JANE HOWELL STUPP APARTMENTS
2443 PROUHET AVE  
OVERLAND  
MO 63114-1946  
Mailing Address 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

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Alzheimer's Unit</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>JEANNE JUGAN CENTER</td>
<td>8745 JAMES A REED ROAD</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>26</td>
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<tr>
<td>JEANNE JUGAN CENTER</td>
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<td>KANSAS CITY</td>
<td>MO</td>
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<td>JEANNE JUGAN CENTER</td>
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<td>12724</td>
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<tr>
<td>JEFFERSON CITY MANOR CARE CENTER</td>
<td>1720 VIETH DR</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>102</td>
<td>No</td>
<td>No</td>
<td>No</td>
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<td>JEFFERSON CITY NURSING AND REHABILITATION CENTER, LLC</td>
<td>1221 SOUTHGATE LN</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>120</td>
<td>No</td>
<td>No</td>
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<td>JEFFERSON GARDENS - ASSISTED LIVING BY AMERICARE</td>
<td>509 WEST ROGERS ST</td>
<td>CLINTON</td>
<td>MO</td>
<td>42</td>
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<td>JEFFERSON HEALTH CARE</td>
<td>615 SW OLDHAM PARKWAY</td>
<td>LEE'S SUMMIT</td>
<td>MO</td>
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<td>JEFFERSON MANOR</td>
<td>902 JEFFERSON AVE</td>
<td>CAPE GIRARDEAU</td>
<td>MO</td>
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<td>JOE CLARK RESIDENTAL CARE HOME</td>
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<td>NEVADA</td>
<td>MO</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>
<th>Alzheimer's Unit</th>
<th>Region</th>
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<td>JOHN KNOX VILLAGE CARE CENTER</td>
<td>600 NW Pryor Road</td>
<td>Lee's Summit</td>
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<td>430</td>
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<td>JOHNSON COUNTY CARE CENTER</td>
<td>122 East Market St</td>
<td>Warrensburg</td>
<td>Johnson</td>
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<td>JOLET HOME</td>
<td>3920 Forest</td>
<td>Kansas City</td>
<td>Jackson</td>
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<td>JONES' WILDWOOD CARE CENTER</td>
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<td>Madison</td>
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<td>JONESBURG NURSING &amp; REHAB</td>
<td>308 Cedar Ave</td>
<td>Jonesburg</td>
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<td>JOPLIN GARDENS</td>
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<td>Joplin</td>
<td>Jasper</td>
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<td>JOPLIN HEALTH AND REHABILITATION CENTER</td>
<td>2218 West 32nd St</td>
<td>Joplin</td>
<td>Newton</td>
<td>120</td>
<td>No</td>
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<td>JORDAN CREEK NURSING &amp; REHAB</td>
<td>910 South West Ave</td>
<td>Springfield</td>
<td>Greene</td>
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<td>JOY ADULT CARE CENTER</td>
<td>614 South Main</td>
<td>Clinton</td>
<td>Henry</td>
<td>42</td>
<td>No</td>
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<td>07268</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address 1</th>
<th>Address 2</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>JOY ASSISTED LIVING FOR SENIORS</td>
<td>2030 W MOUNT VERNON ST</td>
<td>SPRINGFIELD MO 65802-4846</td>
<td>(417) 864-8805</td>
<td>No</td>
<td>74</td>
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<td>19668</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>PO BOX 9655</td>
<td>SPRINGFIELD MO 65801-9655</td>
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<tr>
<td>KABUL NURSING HOMES, INC</td>
<td>1000 MAIN ST</td>
<td>CABOOL MO 65689-9125</td>
<td>(417) 962-3713</td>
<td>No</td>
<td>99</td>
<td>No</td>
<td>04085</td>
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<td>Mailing Address</td>
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<td>CABOOL MO 65689-9125</td>
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<td>KANSAS CITY CENTER FOR REHABILITIZATION AND HEALTHCARE</td>
<td>12942 WORNALL RD</td>
<td>KANSAS CITY MO 64145-1253</td>
<td>(816) 423-8500</td>
<td>No</td>
<td>105</td>
<td>No</td>
<td>00644</td>
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<td>Mailing Address</td>
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<tr>
<td>KASEY PAIGE ASSISTED LIVING</td>
<td>3715 JAMIESON AVE</td>
<td>SAINT LOUIS MO 63109-1109</td>
<td>(314) 781-0222</td>
<td>No</td>
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<tr>
<td>KATY MANOR</td>
<td>205 PROSPECT</td>
<td>PILOT GROVE MO 65276-1111</td>
<td>(660) 834-3111</td>
<td>No</td>
<td>60</td>
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<td>Mailing Address</td>
<td>PO BOX 8</td>
<td>PILOT GROVE MO 65276-0008</td>
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<tr>
<td>KEATON CENTER</td>
<td>120 N MILL ST</td>
<td>FESTUS MO 63028-1816</td>
<td>(636) 232-2323</td>
<td>No</td>
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<td>Mailing Address</td>
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<td>FESTUS MO 63028-1816</td>
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<tr>
<td>KIDWELL HOME</td>
<td>1000 KIDWELL DR</td>
<td>VERSAILLES MO 65084-1177</td>
<td>(573) 378-5175</td>
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<tr>
<td>KING'S DAUGHTERS HOME, THE</td>
<td>620 WEST BOULEVARD ST</td>
<td>MEXICO MO 65265-2199</td>
<td>(573) 581-1577</td>
<td>No</td>
<td>12</td>
<td>No</td>
<td>04146</td>
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<tr>
<td>Mailing Address</td>
<td>620 WEST BOULEVARD ST</td>
<td>MEXICO MO 65265-2199</td>
<td></td>
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KING’S DAUGHTERS HOME, THE
620 WEST BOULEVARD ST
MEXICO MO 65265-2199
Mailing Address 620 WEST BOULEVARD ST
MEXICO MO 65265-2199
Telephone (573) 581-1577 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 33
County AUDRAIN DMH Licensed No
Region 5 Facility Number 04146

KINGSOOD
10000 WORNALL RD
KANSAS CITY MO 64114-4359
Mailing Address 10000 WORNALL RD KANSAS CITY MO 64114-4359
Telephone (816) 942-0994 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 86
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 04152

KINGSOOD
10000 WORNALL RD
KANSAS CITY MO 64114-4359
Mailing Address 10000 WORNALL RD KANSAS CITY MO 64114-4359
Telephone (816) 942-0994 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 67
County JACKSON DMH Licensed Yes
Region 3 Facility Number 04152

KIRKSVILLE MANOR CARE CENTER
1705 EAST LAHARPE
KIRKSVILLE MO 63501-3927
Mailing Address 1705 EAST LAHARPE KIRKSVILLE MO 63501-3927
Telephone (660) 665-3774 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 132
County ADAIR DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 04161

KNOX COUNTY NURSING HOME DISTRICT
55774 STATE HIGHWAY 6
EDINA MO 63537-4253
Mailing Address 55774 STATE HIGHWAY 6 EDINA MO 63537-4253
Telephone (660) 397-2282 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County KNOX DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 04173

LA BELLE MANOR CARE CENTER
1002 CENTRAL
LA BELLE MO 63447-2092
Mailing Address 1002 CENTRAL LA BELLE MO 63447-2092
Telephone (660) 213-3234 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 94
County LEWIS DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 04212

LA BONNE MAISON-ASSISTED LIVING BY AMERICARE
226 PLAZA DR
SIKESTON MO 63801-5105
Mailing Address 226 PLAZA DR SIKESTON MO 63801-5105
Telephone (573) 472-2546 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 30
County SCOTT DMH Licensed No
Region 2 Facility Number 28804

LA PLATA NURSING HOME
100 OLD STAGECOACH RD
LA PLATA MO 63549-1362
Mailing Address 100 OLD STAGECOACH RD LA PLATA MO 63549-1362
Telephone (660) 332-4315 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 52
County MACON DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 04395

LACLEDE COMMONS
727 S LACLEDE STATION RD
SAINT LOUIS MO 63119-4911
Mailing Address 727 S LACLEDE STATION RD SAINT LOUIS MO 63119-4911
Telephone (314) 968-5570 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 242
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 17713

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Monday, November 4, 2019
LACOBA HOMES, INC
850 HIGHWAY 60
MONETT MO 65708-9376
Mailing Address PO BOX 885
MONETT MO 65708-0885
Telephone (417) 235-7895 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 79
County BARRY DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 04315

LAKE GEORGE ASSISTED LIVING
5000 EAST RICHLAND ROAD
COLUMBIA MO 65201-9606
Mailing Address 5000 EAST RICHLAND RD
COLUMBIA MO 65201-9606
Telephone (573) 442-0577 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 10
County BOONE DMH Licensed No
Region 6 Facility Number 28997

LAKE PARKE SENIOR LIVING
145 4TH ST
CAMDENTON MO 65020-7138
Mailing Address 145 4TH ST
CAMDENTON MO 65020-7138
Telephone (573) 745-0874 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County CAMDEN DMH Licensed No
Region 6 Facility Number 30084

LAKE ST CHARLES ASSISTED LIVING APARTMENTS
45 HONEY LOCUST LN
SAINT CHARLES MO 63303-5711
Mailing Address 45 HONEY LOCUST LN
SAINT CHARLES MO 63303-5711
Telephone (636) 947-1100 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 50
County SAINT CHARLES DMH Licensed No
Region 5 Facility Number 18030

LAKE STOCKTON HEALTHCARE FACILITY
1523 3RD ROAD
STOCKTON MO 65785-9608
Mailing Address PO BOX 945
STOCKTON MO 65785-0945
Telephone (417) 276-5126 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 90
County CEDAR DMH Licensed Yes
Region 1 Medicare/Medicaid Facility Number 07680

LAKE VIEW RESIDENTIAL CARE, LLC
HC 2, BOX 2070
WAPPAPELLO MO 63966-9508
Mailing Address HC 2, BOX 2070
WAPPAPELLO MO 63966-9508
Telephone (573) 222-8676 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 27
County WAYNE DMH Licensed Yes
Region 2 Facility Number 23584

LAKESHORES RESIDENTIAL CARE FACILITY
102 SOUTH BOLIVAR RD
HUMANSVILLE MO 65674-8553
Mailing Address PO BOX 221
HUMANSVILLE MO 65674-0221
Telephone (417) 754-2272 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 30
County POLK DMH Licensed Yes
Region 1 Facility Number 15309

LAKESIDE MANOR
802 KENNEDY
WARSAW MO 65355-3044
Mailing Address PO BOX 280
WARSAW MO 65355-0280
Telephone (660) 438-8850 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 35
County BENTON DMH Licensed Yes
Region 6 Facility Number 05970

LAKESIDES MEADOWS - A STONEBRIDGE COMMUNITY
872 COLLEGE BLVD
OSAGE BEACH MO 65065-8408
Mailing Address 872 COLLEGE BLVD
OSAGE BEACH MO 65065-8408
Telephone (573) 302-0900 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 66
County MILLER DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 20926

* 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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Monday, November 4, 2019
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>ZIP</th>
<th>Telephone</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Region</th>
<th>County</th>
<th>Level of Care</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td><strong>LAKESIDE MEADOWS - A STONEBRIDGE COMMUNITY</strong></td>
<td>872 COLLEGE BLVD</td>
<td>OSAGE BEACH</td>
<td>MO</td>
<td>65065-8408</td>
<td>(573) 302-0900</td>
<td>40</td>
<td>No</td>
<td>6</td>
<td>MILLER</td>
<td>RCF*</td>
<td>No</td>
<td>20926</td>
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<td><strong>LAKESIDE MOUNTAIN MANOR</strong></td>
<td>238 HARMONY HEIGHTS</td>
<td>FORSYTH</td>
<td>MO</td>
<td>65653-5533</td>
<td>(417) 546-5595</td>
<td>40</td>
<td>No</td>
<td>1</td>
<td>TANEY</td>
<td>RCF</td>
<td>Yes</td>
<td>06232</td>
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<td><strong>LAKESIDE SUITES</strong></td>
<td>205 TIMBERLINE DR</td>
<td>LINCOLN</td>
<td>MO</td>
<td>65338-2007</td>
<td>(660) 547-3089</td>
<td>14</td>
<td>No</td>
<td>6</td>
<td>BENTON</td>
<td>ALF</td>
<td>No</td>
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<tr>
<td><strong>LAKEVIEW HEALTH CARE &amp; REHABILITATION CENTER</strong></td>
<td>1450 ASHLEY RD</td>
<td>BOONVILLE</td>
<td>MO</td>
<td>65233-2141</td>
<td>(660) 882-7007</td>
<td>60</td>
<td>No</td>
<td>6</td>
<td>COOPER</td>
<td>SNF</td>
<td>Yes</td>
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<td>(660) 882-7007</td>
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<td>COOPER</td>
<td>ICF</td>
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<td>MO</td>
<td>65233-2141</td>
<td>(660) 882-7007</td>
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<td>6</td>
<td>COOPER</td>
<td>RCF*</td>
<td>No</td>
<td>01602</td>
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<td><strong>LAKEWOOD - ASSISTED LIVING BY AMERICARE</strong></td>
<td>4685 ROBBERSON AVE</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>65810-1785</td>
<td>(417) 881-1411</td>
<td>67</td>
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<td>1</td>
<td>GREENE</td>
<td>ALF**</td>
<td>No</td>
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<td><strong>LAMPLIGHT VILLAGE</strong></td>
<td>309 LOCUST ST</td>
<td>WEST PLAINS</td>
<td>MO</td>
<td>65775-3906</td>
<td>(417) 256-2749</td>
<td>32</td>
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<td>RCF*</td>
<td>Yes</td>
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<td><strong>LANDING OF O’FALLON, THE</strong></td>
<td>1000 LANDING CIRCLE</td>
<td>SAINT CHARLES</td>
<td>MO</td>
<td>63304-7647</td>
<td>636-669-0780</td>
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<td>SAINT CHARLES</td>
<td>ALF**</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Region</th>
<th>Bed Capacity</th>
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<td>44</td>
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<td>LAURIE CARE CENTER</td>
<td>610 HWY O</td>
<td>Laurie</td>
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<td>108</td>
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<td>LAURIE KNOCKS</td>
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<td>66</td>
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<td>LAVERNA SENIOR LIVING</td>
<td>904 HALL AVE</td>
<td>Savannah</td>
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<td>04478</td>
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<td>LAWRENCE COUNTY MANOR</td>
<td>915 CARL ALLEN ST</td>
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<td>LAWSON MANOR &amp; REHAB</td>
<td>210 WEST 8TH TERRACE</td>
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<td>LEBANON SOUTH NURSING &amp; REHAB</td>
<td>514 WEST FREMONT ROAD</td>
<td>LEBANON</td>
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<td>116</td>
<td>No</td>
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<table>
<thead>
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<th>Facility Name</th>
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<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>LEE HOUSE OF ELDON</td>
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<td>LEGENDARY NURSING &amp; REHABILATION LLC</td>
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<td>LEISURE LIVING</td>
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<td>LENOIR HEALTH CARE CENTER</td>
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<td>PLATTE</td>
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</table>

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Monday, November 4, 2019
LEVERING REGIONAL HEALTH CARE CENTER
1734 MARKET ST
HANNIBAL  MO 63401-4025
Mailing Address 1734 MARKET ST
HANNIBAL  MO 63401-4025
Telephone (573) 221-2930
Level of Care: RCF*
County MARION
Region 5
Alzheimer's Unit No
Bed Capacity 35
DMH Licensed Yes
Facility Number 15954

LEVERING REGIONAL HEALTH CARE CENTER
1734 MARKET ST
HANNIBAL  MO 63401-4025
Mailing Address 1734 MARKET ST
HANNIBAL  MO 63401-4025
Telephone (573) 221-2930
Level of Care: SNF
County MARION
Region 5
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 179
DMH Licensed No
Facility Number 15954

LEWIS & CLARK GARDENS
1221 BOONSLICK RD
SAINT CHARLES  MO 63301-2328
Mailing Address 1221 BOONSLICK RD
SAINT CHARLES  MO 63301-2328
Telephone (636) 946-6140
Level of Care: SNF
County SAINT CHARLES
Region 5
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 142
DMH Licensed No
Facility Number 01266

LEWIS COUNTY NURSING HOME DISTRICT
17528 STATE HIGHWAY 81
CANTON  MO 63435-3463
Mailing Address PO BOX 266
CANTON  MO 63435-0266
Telephone (573) 288-4454
Level of Care: SNF
County LEWIS
Region 5
Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 04790

LIBERTY HEALTH AND WELLNESS
2201 GLENN HENDREN DR
LIBERTY  MO 64068-3375
Mailing Address 2201 GLENN HENDREN DR
LIBERTY  MO 64068-3375
Telephone (816) 736-8800
Level of Care: SNF
County CLAY
Region 4
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 143
DMH Licensed No
Facility Number 16715

LICKING RESIDENTIAL CARE
225 WEST HIGHWAY 32
LICKING  MO 65542-9832
Mailing Address 225 WEST HIGHWAY 32
LICKING  MO 65542-9832
Telephone (573) 674-2207
Level of Care: RCF*
County TEXAS
Region 1
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 34
DMH Licensed No
Facility Number 24302

LIFE CARE CENTER OF BRIDGETON
12145 BRIDGETON SQUARE DR
BRIDGETON  MO 63044-2616
Mailing Address 12145 BRIDGETON SQUARE DR
BRIDGETON  MO 63044-2616
Telephone (314) 298-7444
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 91
DMH Licensed No
Facility Number 12141

LIFE CARE CENTER OF BROOKFIELD
315 HUNT ST
BROOKFIELD  MO 64628-2412
Mailing Address 315 HUNT ST
BROOKFIELD  MO 64628-2412
Telephone (660) 258-3367
Level of Care: SNF
County LINC
Region 5
Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 120
DMH Licensed No
Facility Number 00822

LIFE CARE CENTER OF CAPE GIRARDEAU
365 SOUTH BROADVIEW ST
CAPE GIRARDEAU  MO 63703-5725
Mailing Address 365 SOUTH BROADVIEW ST
CAPE GIRARDEAU  MO 63703-5725
Telephone (573) 335-2086
Level of Care: SNF
County CAPE GIRARDEAU
Region 2
Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 120
DMH Licensed No
Facility Number 01032

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Monday, November 4, 2019
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LINCOLN COUNTY NURSING & REHAB  
1145 EAST CHERRY ST  
TROY MO 63379-1520  
Mailing Address PO BOX 130  
TROY MO 63379-0130  
Telephone (636) 528-5712  
Level of Care: SNF  
County LINCOLN  
Region 5  
Alzheimer's Unit No  
Bed Capacity 90  
DMH Licensed No  
Facility Number 15750

LINDELL MANOR  
4336 LINDELL BLVD  
SAINT LOUIS MO 63108-2702  
Mailing Address PO BOX 525  
CUBA MO 65453-  
Telephone (314) 652-4828  
Level of Care: RCF*  
County SAINT LOUIS CITY  
Region 7  
Alzheimer's Unit No  
Bed Capacity 24  
DMH Licensed Yes  
Facility Number 10470

LINDEN WOODS VILLAGE  
2901 NE 72ND STREET  
GLADSTONE MO 64119-7400  
Mailing Address 2901 NE 72ND STREET  
GLADSTONE MO 64119-7400  
Telephone (816) 268-4000  
Level of Care: ALF**  
County CLAY  
Region 4  
Alzheimer's Unit No  
Bed Capacity 40  
DMH Licensed No  
Facility Number 30156

LINEN WOODS VILLAGE  
2901 NE 72ND STREET  
GLADSTONE MO 64119-7400  
Mailing Address 2901 NE 72ND STREET  
GLADSTONE MO 64119-7400  
Telephone (816) 268-4000  
Level of Care: SNF  
County CLAY  
Region 4  
Alzheimer's Unit No  
Bed Capacity 40  
DMH Licensed No  
Facility Number 30156

LINN OAK REHABILITATION CENTER  
196 HIGHWAY CC  
LINN MO 65051-3500  
Mailing Address 196 HIGHWAY CC  
LINN MO 65051-3500  
Telephone (573) 897-0700  
Level of Care: SNF  
County OSAGE  
Region 6  
Alzheimer's Unit No  
Bed Capacity 132  
DMH Licensed No  
Facility Number 14130

LIVING CENTER, THE  
2506 LINDEN TREE PARKWAY  
MARSHALL MO 65340-0017  
Mailing Address PO BOX 370  
MARSHALL MO 65340-0370  
Telephone (660) 886-9676  
Level of Care: SNF  
County SALINE  
Region 5  
Alzheimer's Unit Yes  
Bed Capacity 99  
DMH Licensed No  
Facility Number 21791

LIVING COMMUNITY OF ST JOSEPH  
1202 HEARTLAND RD  
SAINT JOSEPH MO 64506-3200  
Mailing Address 1202 HEARTLAND RD  
SAINT JOSEPH MO 64506-3200  
Telephone (816) 671-8500  
Level of Care: SNF  
County BUCHANAN  
Region 4  
Alzheimer's Unit No  
Bed Capacity 96  
DMH Licensed No  
Facility Number 24179

LIVING COMMUNITY OF ST JOSEPH  
1202 HEARTLAND RD  
SAINT JOSEPH MO 64506-3200  
Mailing Address 1202 HEARTLAND RD  
SAINT JOSEPH MO 64506-3200  
Telephone (816) 671-8500  
Level of Care: ALF  
County BUCHANAN  
Region 4  
Alzheimer's Unit No  
Bed Capacity 35  
DMH Licensed No  
Facility Number 24179

LIVINGSTON MANOR CARE CENTER  
939 E BIRCH DR  
CHILLCOTHE MO 64601-2189  
Mailing Address 939 E BIRCH DR  
CHILLCOTHE MO 64601-2189  
Telephone (660) 646-5177  
Level of Care: SNF  
County LIVINGSTON  
Region 4  
Alzheimer's Unit Yes  
Bed Capacity 94  
DMH Licensed No  
Facility Number 20099

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Monday, November 4, 2019
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<td>64130-4418</td>
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Monday, November 4, 2019
MACON HEALTH CARE CENTER
29612 KELLOGG AVE
MACON MO 63552-3702
Mailing Address PO BOX 465
MACON MO 63552-0465
Telephone (660) 385-5797
Level of Care: SNF
Bed Capacity 120
County MACON
DMH Licensed No
Region 5 Medicare/Medicaid
Facility Number 04914

MAGNOLIA HOME, LLC THE
204 GRAND AVE
FESTUS MO 63028-1842
Mailing Address 204 GRAND AVE
FESTUS MO 63028-1842
Telephone (636) 933-0662
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
Level of Care: SNF
Bed Capacity 120
County GREENE
DMH Licensed No
Region 1 Medicare/Medicaid
Facility Number 23400

MALDEN NURSING & REHAB
1209 STOKELAN
MALDEN MO 63863-1335
Mailing Address 1209 STOKELAN
MALDEN MO 63863-1335
Telephone (573) 276-5115
Level of Care: SNF
Bed Capacity 70
County DUNKLIN
DMH Licensed No
Region 2 Medicare/Medicaid
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
Level of Care: SNF
Bed Capacity 100
County GREENE
DMH Licensed No
Region 1 Medicare
Facility Number 17317

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
Level of Care: SNF
Bed Capacity 117
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
Facility Number 06038

MANOR, THE
2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Mailing Address 2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Telephone (573) 686-1147
Level of Care: SNF
Bed Capacity 90
County BUTLER
DMH Licensed No
Region 2 Medicare/Medicaid
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
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
Level of Care: SNF
Bed Capacity 90
County PIKE
DMH Licensed No
Region 5 Medicare/Medicaid
Facility Number 05002

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Monday, November 4, 2019
MARANATHA VILLAGE, INC
233 EAST NORTON RD
SPRINGFIELD MO 65803-3633
Mailing Address 233 EAST NORTON RD
SPRINGFIELD MO 65803-3633
Telephone (417) 833-0016 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County GREENE DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 04907

MARANATHA VILLAGE, INC
233 EAST NORTON RD
SPRINGFIELD MO 65803-3633
Mailing Address 233 EAST NORTON RD
SPRINGFIELD MO 65803-3633
Telephone (417) 833-0016 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 27
County GREENE DMH Licensed No
Region 1 Facility Number 04907

MARI DE VILLA RETIREMENT CENTER, INC
13900 CLAYTON RD
TOWN AND COUNTRY MO 63017-8406
Mailing Address 13900 CLAYTON RD
TOWN AND COUNTRY MO 63017-8406
Telephone (636) 227-5347 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 224
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 05047

MARIAN CLIFF RESIDENTIAL CARE CENTER LLC
381 ELM ST
SAINT MARY MO 63673-9330
Mailing Address PO BOX 272
FARMINGTON MO 63640-0272
Telephone (573) 543-2218 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 66
County SAINTE GENEVIEVE DMH Licensed Yes
Region 2 Facility Number 05058

MARIES MANOR
174 BALLPARK RD
VIENNA MO 65582-8043
Mailing Address 174 BALLPARK RD
VIENNA MO 65582-8043
Telephone (573) 422-3177 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 98
County MARIES DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 10491

MARK TWAIN ASSISTED LIVING, INC
901 UNION AVE
MOBERLY MO 65270-2456
Mailing Address 901 UNION AVE
MOBERLY MO 65270-2456
Telephone (660) 263-6515 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 42
County RANDOLPH DMH Licensed No
Region 5 Facility Number 16369

MARK TWAIN CARING CENTER
3001 MAY ST
POPLAR BLUFF MO 63901-1942
Mailing Address 3001 MAY ST
POPLAR BLUFF MO 63901-1942
Telephone (573) 686-6999 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County BUTLER DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 16013

MARK TWAIN MANOR
11988 MARK TWAIN LN
BRIDGETON MO 63044-2825
Mailing Address 11988 MARK TWAIN LN
BRIDGETON MO 63044-2825
Telephone (314) 291-8240 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 08188

MARSHFIELD CARE CENTER FOR REHAB AND HEALTHCARE
800 SOUTH WHITE OAK
MARSHFIELD MO 65706-2231
Mailing Address 800 SOUTH WHITE OAK
MARSHFIELD MO 65706-2231
Telephone (417) 859-3701 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 74
County WEBSTER DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 18481

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<td>80</td>
<td>(314) 531-2981</td>
<td>No</td>
<td>SAINT LOUIS CITY</td>
<td>Yes</td>
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<td>MARY, QUEEN AND MOTHER CENTER</td>
<td>7601 WATSON RD</td>
<td>SHREWSBURY</td>
<td>MO</td>
<td>230</td>
<td>(314) 961-8000</td>
<td>Yes</td>
<td>SAINT LOUIS COUNTY</td>
<td>No</td>
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<tr>
<td>MARYMOUNT MANOR</td>
<td>313 AUGUSTINE RD</td>
<td>EUREKA</td>
<td>MO</td>
<td>174</td>
<td>(636) 938-6770</td>
<td>No</td>
<td>SAINT LOUIS COUNTY</td>
<td>Yes</td>
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<tr>
<td>MARY'S RANCH, INC</td>
<td>ROUTE 2, BOX 2790</td>
<td>MARBLE HILL</td>
<td>MO</td>
<td>32</td>
<td>(573) 238-4253</td>
<td>No</td>
<td>BOLLINGER</td>
<td>Yes</td>
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<tr>
<td>MARYVILLE CHATEAU</td>
<td>1101 E 5TH STREET</td>
<td>MARYVILLE</td>
<td>MO</td>
<td>20</td>
<td>(660) 582-7447</td>
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<td>MARYVILLE LIVING CENTER</td>
<td>524 NORTH LAURA</td>
<td>MARYVILLE</td>
<td>MO</td>
<td>105</td>
<td>(660) 582-7447</td>
<td>Yes</td>
<td>NODAWAY</td>
<td>No</td>
<td>05149</td>
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</table>
MASON POINTE CARE CENTER
13190 SOUTH OUTER 40 RD
CHESTERFIELD MO 63017-5917
Mailing Address 13190 S OUTER 40 RD CHESTERFIELD MO 63017-5917
Telephone (314) 434-3330 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 256
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 03957

MASON POINTE CARE CENTER
13190 SOUTH OUTER 40 RD
CHESTERFIELD MO 63017-5917
Mailing Address 13190 S OUTER 40 RD CHESTERFIELD MO 63017-5917
Telephone (314) 434-3330 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 62
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 03957

MATTIS POINTE - ASSISTED LIVING BY AMERICARE
4962 MATTIS ROAD
SAINT LOUIS MO 63128-2795
Mailing Address 4962 MATTIS ROAD SAINT LOUIS MO 63128-2795
Telephone (314) 328-4084 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 120
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 30805

MAYSVILLE SENIOR LIVING
604 SOUTH POLK
MAYSVILLE MO 64469-4033
Mailing Address 604 S POLK MAYSVILLE MO 64469-4033
Telephone (816) 449-2741 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County DEKALB DMH Licensed No
Region 4 Facility Number 18304

MAYWOOD MANOR
1041 WEST TRUMAN RD
INDEPENDENCE MO 64050-3447
Mailing Address 1041 WEST TRUMAN RD INDEPENDENCE MO 64050-3447
Telephone (816) 254-6789 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 24
County JACKSON DMH Licensed Yes
Region 3 Facility Number 03948

MAYWOOD TERRACE LIVING CENTER
10300 EAST TRUMAN RD
INDEPENDENCE MO 64052-2258
Mailing Address 10300 EAST TRUMAN RD INDEPENDENCE MO 64052-2258
Telephone (816) 836-1250 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 89
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 08673

MCCLAY SENIOR CARE
3801 MCCLAY ROAD
SAINT PETERS MO 63376-7327
Mailing Address 3801 MCCLAY ROAD SAINT PETERS MO 63376-7327
Telephone (636) 244-3323 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County SAINT CHARLES DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 29933

MCCRITE PLAZA AT BRIARCLIFF ASSISTED LIVING
1201 NW TULLISON RD
KANSAS CITY MO 64116-2639
Mailing Address 1201 NW TULLISON RD KANSAS CITY MO 64116-2639
Telephone (816) 888-7930 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 138
County CLAY DMH Licensed No
Region 4 Facility Number 29084

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 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 80
County CLAY DMH Licensed No
Region 4 Medicare Facility Number 29084

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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 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 9
County BUCHANAN DMH Licensed Yes
Region 4 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 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 96
County MCDONALD DMH Licensed No
Region 1 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 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 55
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 120
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 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 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 70
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 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 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County LINN DMH Licensed No
Region 5 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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 57
County RANDOLPH DMH Licensed No
Region 5 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 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County CASS DMH Licensed No
Region 3 Facility Number 00968

MEADOWBROOK RESIDENTIAL CARE, INC
806 WEST MULBERRY
PILOT KNOB MO 63663-
Mailing Address PO BOX 510
PILOT KNOB MO 63663-0510
Telephone (573) 546-7065 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 36
County IRON DMH Licensed No
Region 2 Facility Number 20513

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Monday, November 4, 2019
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Medicare/Medicaid</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>MEADOWVIEW RESIDENTIAL CARE</td>
<td>101 NORTH FAR WEST DR</td>
<td>SAINT JOSEPH</td>
<td>BUCHANAN</td>
<td>No</td>
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<td>MEDICALODGES BUTLER</td>
<td>103 EAST NURSERY</td>
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<td>Yes</td>
<td>110</td>
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<td>MEDICALODGES NEOSHO</td>
<td>400 LYON DR</td>
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<td>MEDICALODGES NEVADA</td>
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<td>NEVADA</td>
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<td>3031 SOUTH TEN MILE DR</td>
<td>JEFFERSON CITY</td>
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<td>No</td>
<td>15</td>
<td>Yes</td>
<td>18277</td>
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<td>MERAMEC NURSING CENTER</td>
<td>940 MATTOX DR</td>
<td>SULLIVAN</td>
<td>CRAWFORD</td>
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<td>No</td>
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<td>No</td>
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<td>MILAN</td>
<td>SULLIVAN</td>
<td>No</td>
<td>100</td>
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<td>05418</td>
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Monday, November 4, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
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<tbody>
<tr>
<td>MILL CREEK VILLAGE-ASSISTED LIVING BY AMERICARE</td>
<td>(573) 381-2510</td>
<td>ALF**</td>
<td>50</td>
<td>Yes</td>
<td>BOONE</td>
<td>6</td>
<td>No</td>
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<td>MILLER COUNTY CARE AND REHABILITATION CENTER</td>
<td>(573) 369-2318</td>
<td>SNF</td>
<td>86</td>
<td>Yes</td>
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<td>6</td>
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<td>MILLER RESIDENT CARE, INC</td>
<td>(660) 327-5680</td>
<td>RCF*</td>
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<td>MINER NURSING CENTER</td>
<td>(573) 471-7683</td>
<td>SNF</td>
<td>70</td>
<td>No</td>
<td>SCOTT</td>
<td>2</td>
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<tr>
<td>MINGO RESIDENTIAL CARE FACILITY</td>
<td>(573) 222-3086</td>
<td>RCF*</td>
<td>36</td>
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<td>2</td>
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<td>MOBERLY NURSING &amp; REHAB</td>
<td>(660) 263-9060</td>
<td>SNF</td>
<td>120</td>
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<td>RANDOLPH</td>
<td>5</td>
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<td>MOCKINGBIRD MANOR RESIDENTAL CARE</td>
<td>(816) 781-8058</td>
<td>RCF*</td>
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<td>CLAY</td>
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<td>Yes</td>
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<td>MONITEAU CARE CENTER</td>
<td>(573) 796-3822</td>
<td>SNF</td>
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<td>MONITEAU CARE CENTER</td>
<td>(573) 796-3822</td>
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MONROE CITY MANOR CARE CENTER
1010 HIGHWAY 24 & 36 EAST
MONROE CITY  MO  63456-1116
Mailing Address 1010 HWY 24 & 36 EAST
MONROE CITY  MO  63456-1116
Telephone (573) 735-4850
Level of Care: SNF
County MARION
Region 5 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 05473

MONROE MANOR
200 SOUTH ST
PARIS  MO  65275-1165
Mailing Address 200 SOUTH ST
PARIS  MO  65275-1165
Telephone (660) 327-4125
Level of Care: SNF
County MONROE
Region 5 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 119
DMH Licensed No
Facility Number 05484

MONTEREY PARK REHABILITATION & HEALTH CARE CENTER
4600 LITTLE BLUE PARKWAY
INDEPENDENCE  MO  64057-8302
Mailing Address 4600 LITTLE BLUE PRKWY
INDEPENDENCE  MO  64057-8302
Telephone (816) 795-7888
Level of Care: SNF
County JAKES GIVARDEAU
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 122
DMH Licensed No
Facility Number 15987

MONTICELLO HOUSE
1115 K LAND DR
JACKSON  MO  63755-2588
Mailing Address PO BOX 740
JACKSON  MO  63755-0740
Telephone (573) 243-8989
Level of Care: RCF*
County CAPE GIRARDEAU
Region 2 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 32
DMH Licensed No
Facility Number 14454

MONTICELLO HOUSE
1115 K LAND DR
JACKSON  MO  63755-2588
Mailing Address PO BOX 740
JACKSON  MO  63755-0740
Telephone (573) 243-8989
Level of Care: SNF
County CAPE GIRARDEAU
Region 2 Medicare/Medicaid
Alzheimer's Unit Yes
Bed Capacity 105
DMH Licensed No
Facility Number 14454

MOORE-FEW CARE CENTER
901 SOUTH ADAMS
NEVADA  MO  64772-3209
Mailing Address 901 SOUTH ADAMS
NEVADA  MO  64772-3209
Telephone (417) 448-3841
Level of Care: SNF
County VERNON
Region 1 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 108
DMH Licensed No
Facility Number 05703

MOOREVIEW RESIDENTIAL
130 WEST CULTON
WARRENSBURG  MO  64093-1720
Mailing Address 130 WEST CULTON
WARRENSBURG  MO  64093-1720
Telephone (660) 429-1587
Level of Care: RCF
County JOHNSON
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 20
DMH Licensed Yes
Facility Number 11225

MORNINGSIDE CENTER
1700 MORNINGSIDE DR
CHILICOTHE  MO  64601-1545
Mailing Address 1700 MORNINGSIDE DR
CHILICOTHE  MO  64601-1545
Telephone (660) 646-0170
Level of Care: SNF
County LIVINGSTON
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 05557

MORNINGSIDE CENTER ASSISTED LIVING APARTMENTS
1702 MORNINGSIDE DR
CHILICOTHE  MO  64601-1545
Mailing Address 1702 MORNINGSIDE DR
CHILICOTHE  MO  64601-1545
Telephone (660) 646-0170
Level of Care: ALF
County LIVINGSTON
Region 4 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 31
DMH Licensed No
Facility Number 05557

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<table>
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<th>Facility Name</th>
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<tr>
<td>MORNINGSIDE OF BRANSON</td>
<td>5351 GRETNA ROAD</td>
<td>BRANSON</td>
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<td>104</td>
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<td>MORNINGSIDE OF CHESTERFIELD VILLAGE</td>
<td>2410 WEST CHESTERFIELD BLVD</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>GREENE</td>
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<td>No</td>
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<td>MORNINGSIDE OF NEVADA</td>
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<td>NEVADA</td>
<td>MO</td>
<td>VERNON</td>
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<td>MORNINGSIDE OF SPRINGFIELD</td>
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<td>SPRINGFIELD</td>
<td>MO</td>
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<td>67</td>
<td>No</td>
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<td>MOTHER OF GOOD COUNSEL HOME</td>
<td>6825 NATURAL BRIDGE RD</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>SAINT LOUIS COUNTY</td>
<td>114</td>
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<tr>
<td>MOTHER OF PERPETUAL HELP RESIDENCE, INC</td>
<td>7609 WATSON ROAD</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>SAINT LOUIS COUNTY</td>
<td>160</td>
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<tr>
<td>MOUNT CARMEL SENIOR LIVING - ST CHARLES, LLC</td>
<td>723 FIRST CAPITOL DR</td>
<td>SAINT CHARLES</td>
<td>MO</td>
<td>SAINT CHARLES</td>
<td>110</td>
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<td>MOUNTAIN VIEW HEALTHCARE</td>
<td>1211 NORTH ASH ST</td>
<td>MOUNTAIN VIEW</td>
<td>MO</td>
<td>HOWELL</td>
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<td>MS B'S BLESSINGS</td>
<td>4739 COTE BRILLIANTE AVE</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>SAINT LOUIS CITY</td>
<td>6</td>
<td>Yes</td>
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<table>
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<td>OAK MEADOWS RCF, LLC</td>
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<td>5502 MISTY MEADOW, POPLAR BLUFF MO 63901-9287</td>
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Monday, November 4, 2019
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<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer’s Unit</th>
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Monday, November 4, 2019
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<th>Address 2</th>
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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
Bed Capacity: 92
DMH Licensed: No
Region: 4
Facility Number: 06308
Alzheimer's Unit: No

PARKLANE 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
Bed Capacity: 240
DMH Licensed: No
Region: 5
Facility Number: 04883
Alzheimer's Unit: Yes

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
Bed Capacity: 120
DMH Licensed: No
Region: 6
Facility Number: 11262
Alzheimer's Unit: No

PARKSIDE MANOR, LLC
300 S SAINT CHARLES ST
BOWLING GREEN MO 63334-2221
Mailing Address: 300 S SAINT CHARLES ST
BOWLING GREEN MO 63334-2221
Telephone: 573-473-2563
Level of Care: ALF**
County: PIKE
Bed Capacity: 40
DMH Licensed: No
Region: 5
Facility Number: 05511
Alzheimer's Unit: No

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
Bed Capacity: 28
DMH Licensed: No
Region: 6
Facility Number: 31191
Alzheimer's Unit: No

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
Bed Capacity: 78
DMH Licensed: No
Region: 1
Facility Number: 17638
Alzheimer's Unit: Yes

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
Bed Capacity: 120
DMH Licensed: No
Region: 3
Facility Number: 02928
Alzheimer's Unit: No

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
Bed Capacity: 97
DMH Licensed: No
Region: 3
Facility Number: 07092
Alzheimer's Unit: No

PARKWAY SENIOR LIVING, THE
550 NE NAPOLEON DR
BLUE SPRINGS MO 64014-5403
Mailing Address: 550 NE NAPOLEON DR
BLUE SPRINGS MO 64014-5403
Telephone: (816) 228-8866
Level of Care: ALF**
County: JACKSON
Bed Capacity: 72
DMH Licensed: No
Region: 3
Facility Number: 29917
Alzheimer's Unit: Yes

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<th>County</th>
<th>Region</th>
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<th>Bed Capacity</th>
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<td>PEARL'S II EDEN FOR ELDER</td>
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<td>PINE VIEW MANOR, INC</td>
<td>307 NORTH PINEVIEW ST</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City, State Zip</th>
<th>Phone</th>
<th>Level of Care</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
<th>Region</th>
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<tr>
<td>PINE VIEW MANOR, INC</td>
<td>307 NORTH PINEVIEW ST</td>
<td>STANBERRY, MO 64489-1509</td>
<td>(660) 783-2118</td>
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<td>PINEVIEW HEIGHTS ALF</td>
<td>515 GARST</td>
<td>CABOOL, MO 65689-9139</td>
<td>(417) 962-3713</td>
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<td>PIONEER SKILLED NURSING CENTER</td>
<td>1500 SOUTH KANSAS AVE</td>
<td>MARCELIN, MO 64658-1716</td>
<td>(660) 376-2001</td>
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<td>PLEASANT HILL HEALTH AND REHABILITATION CENTER</td>
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<td>PLEASANT HILL, MO 64080-1842</td>
<td>(816) 540-2116</td>
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<td>PLEASANT VALLEY MANOR</td>
<td>213 DAVIS DR</td>
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<td>(417) 257-0179</td>
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<td>PLEASANT VALLEY MANOR CARE CENTER</td>
<td>6814 SOBBIE RD</td>
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<td>(816) 781-5277</td>
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<td>PLEASANT VIEW</td>
<td>641 EUCLID AVE</td>
<td>HANNIBAL, MO 63401-2959</td>
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<td>PLEASANT VIEW</td>
<td>470 RAINBOW DR</td>
<td>ROCK PORT, MO 64482-1641</td>
<td>(660) 744-6252</td>
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<td>POINT LOOKOUT NURSING &amp; REHAB</td>
<td>11103 HISTORIC HIGHWAY 165</td>
<td>HOLLISTER, MO 65672-6239</td>
<td>(417) 334-4105</td>
<td>SNF</td>
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Monday, November 4, 2019
**POPA GOOD SAMARITAN SERVICES, LLC**
16979 HWY 39
VERONA MO 65769-6319
Mailing Address 16979 HWY 39
VERONA MO 65769-6319

**Telephone** (417) 353-4448
**Level of Care:** ALF**
**Bed Capacity** 8
**County** LAWRENCE
**DMH Licensed** No
**Region** 1
**Facility Number** 30440

**PORTAGEVILLE HEALTH CARE CENTER**
290 WEST STATE HWY 162
PORTAGEVILLE MO 63873-9397
Mailing Address PO BOX 408
PORTAGEVILLE MO 63873-0408

**Telephone** (573) 379-2017
**Level of Care:** SNF
**Bed Capacity** 60
**County** NEW MADRID
**DMH Licensed** No
**Region** 2
**Facility Number** 17119

**PORTIA'S RESIDENTIAL CARE**
307 NORTH BROADWAY
POPLAR BLUFF MO 63901-5103
Mailing Address 307 N BROADWAY
POPLAR BLUFF MO 63901-5103

**Telephone** (573) 686-3446
**Level of Care:** RCF
**Bed Capacity** 20
**County** BUTLER
**DMH Licensed** Yes
**Region** 2
**Facility Number** 03002

**POTOSI MANOR, INC**
307 SOUTH HIGHWAY 21
POTOSI MO 63664-9317
Mailing Address 307 S HWY 21
POTOSI MO 63664-9317

**Telephone** (573) 438-3225
**Level of Care:** SNF
**Bed Capacity** 90
**County** WASHINGTON
**DMH Licensed** No
**Region** 2
**Facility Number** 21648

**PREFERRED FAMILY HEALTHCARE, INC**
900 EAST LAHARPE
KIRKSVILLE MO 63501-4520
Mailing Address PO BOX 767
KIRKSVILLE MO 63501-0767

**Telephone** (660) 665-1962
**Level of Care:** RCF*
**Bed Capacity** 57
**County** ADAIR
**DMH Licensed** Yes
**Region** 5
**Facility Number** 21851

**PREMIER RESIDENTIAL CARE**
109 E CROWDER RD
TRENTON MO 64683-1802
Mailing Address 109 EAST CROWDER RD
TRENTON MO 64683-1802

**Telephone** (660) 359-4292
**Level of Care:** RCF
**Bed Capacity** 12
**County** GRUNDY
**DMH Licensed** Yes
**Region** 4
**Facility Number** 02238

**PRIMROSE RETIREMENT COMMUNITY OF JEFFERSON CITY**
1214 FREEDOM BLVD
JEFFERSON CITY MO 65109-0082
Mailing Address 1214 FREEDOM BLVD
JEFFERSON CITY MO 65109-0082

**Telephone** (573) 634-5408
**Level of Care:** ALF**
**Bed Capacity** 45
**County** COLE
**DMH Licensed** No
**Region** 6
**Facility Number** 29697

**PRIMROSE RETIREMENT COMMUNITY OF KANSAS CITY**
8559 NORTH LINE CREEK PARKWAY
KANSAS CITY MO 64154-2100
Mailing Address 8559 NORTH LINE CREEK PARKWAY
KANSAS CITY MO 64154-2100

**Telephone** (816) 468-8282
**Level of Care:** ALF**
**Bed Capacity** 44
**County** PLATTE
**DMH Licensed** No
**Region** 4
**Facility Number** 29020

**PROMISE CARE CENTER, LLC**
1111 CARE AVE
NIXA MO 65714-9679
Mailing Address 1111 CARE AVE
NIXA MO 65714-9679

**Telephone** (573) 795-5012
**Level of Care:** ALF**
**Bed Capacity** 126
**County** CHRISTIAN
**DMH Licensed** No
**Region** 1
**Facility Number** 15935

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<th>Level of Care</th>
<th>Bed Capacity</th>
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<td>4528 NORTH MARKET ST, SAINT LOUIS</td>
<td>(314) 535-5509</td>
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<td>PUTNAM COUNTY CARE CENTER</td>
<td>1814 OAK ST, UNIONVILLE, MO</td>
<td>(660) 947-2492</td>
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<td>PUXICO NURSING &amp; REHABILITATION CENTER</td>
<td>540 NORTH HWY 51, PUXICO, MO</td>
<td>(573) 222-3125</td>
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<td>QUAIL RUN HEALTH CARE CENTER</td>
<td>1405 WEST GRAND AVE, CAMERON, MO</td>
<td>(816) 632-2151</td>
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<td>(573) 335-5810</td>
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<td>RAVENWOOD - ASSISTED LIVING BY AMERICARE</td>
<td>1950 EAST REPUBLIC RD, SPRINGFIELD, MO</td>
<td>(417) 890-6000</td>
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<table>
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<th>Telephone</th>
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<th>County</th>
<th>Level of Care</th>
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<th>Facility Number</th>
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<tr>
<td>RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICARE</td>
<td>(660) 263-8004</td>
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<td>REST HAVEN CONVALESCENT &amp; RETIREMENT HOME</td>
<td>1800 SOUTH INGRAM</td>
<td>SEDALIA</td>
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<td>RICHLAND CARE CENTER, INC</td>
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<td>RICHLAND</td>
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<td>RICHMOND TERRACE ASSISTED LIVING</td>
<td>1633 LACLEDE STATION RD</td>
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<td>MO</td>
<td>(314) 646-8000</td>
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<td>RIDGE CREST NURSING CENTER</td>
<td>706 SOUTH MITCHELL</td>
<td>WARRENSBURG</td>
<td>MO</td>
<td>(660) 429-2177</td>
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<td>RIDGEVIEW ASSISTED LIVING CENTER</td>
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<td>RIDGEVIEW LIVING COMMUNITY</td>
<td>500 BARRETT DR</td>
<td>MALDEN</td>
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<td>RIDGEWAY RESIDENTIAL CARE</td>
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<td>SULLIVAN</td>
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<td>RIVER CITY LIVING COMMUNITY</td>
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<td>JEFFERSON</td>
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<td>RIVER MIST - ASSISTED LIVING BY AMERICARE</td>
<td>2050 WEST MAUD</td>
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<th>Facility Name</th>
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RIVERVIEW, THE
5500 SOUTH BROADWAY
SAINT LOUIS MO 63111-2025
Mailing Address 5500 S BROADWAY
SAINT LOUIS MO 63111-2025
Telephone (314) 353-5900 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 11
County SAINT LOUIS CITY DMH Licensed No
Region 7 Facility Number 02273

RIVERVIEW, THE
5500 SOUTH BROADWAY
SAINT LOUIS MO 63111-2025
Mailing Address 5500 S BROADWAY
SAINT LOUIS MO 63111-2025
Telephone (314) 353-5900 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 130
County SAINT LOUIS CITY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 02273

RIVERWAYS MANOR
403 WATERCRESS RD
VAN BUREN MO 63965-9100
Mailing Address PO BOX 969
VAN BUREN MO 63965-0969
Telephone (573) 323-4282 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County CARTER DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 06744

ROARING RIVER HEALTH AND REHABILITATION
812 OLD EXETER RD
CASSVILLE MO 65625-1704
Mailing Address 812 OLD EXETER RD
CASSVILLE MO 65625-1704
Telephone (417) 847-2184 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 90
County BARRY DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 10644

ROCK ISLAND VILLAGE
619 EAST 8TH STREET
ELDON MO 65026-4740
Mailing Address 619 EAST 8TH STREET
ELDON MO 65026-4740
Telephone (573) 557-9545 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 58
County MILLER DMH Licensed No
Region 6 Facility Number 30865

ROCK SPRINGS RESIDENTIAL, LLC
81 PILKENTON LN
CUBA MO 65453-8136
Mailing Address 81 PILKENTON LN
CUBA MO 65453-8136
Telephone (573) 885-6443 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 18
County CRAWFORD DMH Licensed No
Region 6 Facility Number 15026

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 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 154
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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 36
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 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 65
County WRIGHT DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 04996

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<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<th>County</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>Telephone</th>
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<table>
<thead>
<tr>
<th>SHADY OAKS HEALTHCARE CENTER</th>
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| Telephone (417) 264-7256 |
| Level of Care: SNF |
| County OREGON |
| Region 2 Medicare/Medicaid |
| Alzheimer's Unit No |
| Bed Capacity 120 |
| DMH Licensed No |
| Facility Number 01364 |

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| Telephone (816) 229-6677 |
| Level of Care: SNF |
| County JACKSON |
| Region 3 Medicare/Medicaid |
| Alzheimer's Unit No |
| Bed Capacity 120 |
| DMH Licensed No |
| Facility Number 00677 |

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| Telephone (573) 588-4115 |
| Level of Care: ALF** |
| County SHELBY |
| Region 5 Medicare/Medicaid |
| Alzheimer's Unit No |
| Bed Capacity 68 |
| DMH Licensed No |
| Facility Number 18584 |

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| Telephone (417) 334-6431 |
| Level of Care: SNF |
| County TANEY |
| Region 1 Medicare/Medicaid |
| Alzheimer's Unit No |
| Bed Capacity 100 |
| DMH Licensed No |
| Facility Number 06810 |

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| Telephone (417) 778-7959 |
| Level of Care: ALF** |
| County OREGON |
| Region 2 Medicare/Medicaid |
| Alzheimer's Unit No |
| Bed Capacity 39 |
| DMH Licensed No |
| Facility Number 23135 |

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| Telephone (636) 778-4800 |
| Level of Care: ALF** |
| County SAINT LOUIS COUNTY |
| Region 7 Medicare/Medicaid |
| Alzheimer's Unit Yes |
| Bed Capacity 95 |
| DMH Licensed No |
| Facility Number 30848 |

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| Telephone (314) 628-0004 |
| Level of Care: ALF** |
| County SAINT LOUIS COUNTY |
| Region 7 Medicare/Medicaid |
| Alzheimer's Unit Yes |
| Bed Capacity 53 |
| DMH Licensed No |
| Facility Number 30479 |

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| Telephone 314-219-5232 |
| Level of Care: ALF** |
| County SAINT LOUIS COUNTY |
| Region 7 Medicare/Medicaid |
| Alzheimer's Unit Yes |
| Bed Capacity 98 |
| DMH Licensed No |
| Facility Number 30466 |

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| Telephone (816) 776-5403 |
| Level of Care: SNF |
| County RAY |
| Region 4 Medicare/Medicaid |
| Alzheimer's Unit Yes |
| Bed Capacity 197 |
| DMH Licensed No |
| Facility Number 07289 |

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Monday, November 4, 2019
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Monday, November 4, 2019
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| Facility Name                        | Address                               | City       | Zip     | Phone            | Medicare/Medicaid | Alzheimer's Unit | Bed Capacity | Region | DMH Licensed | Facility Number |
|-------------------------------------|---------------------------------------|------------|---------|------------------|-------------------|------------------|--------------|--------|--------------|----------------|----------------|
| ST ANDREW'S AT NEW FLORENCE         | 515 PICNIC ST                          | NEW FLORENCE| 63363-2223| (573) 415-9333   | No                | No               | 33           | 6      | No           | 05723           |
| ST ANDREW'S AT NEW FLORENCE         | 515 PICNIC ST                          | NEW FLORENCE| 63363-2223| (573) 415-9333   | No                | No               | 87           | 6      | No           | 05723           |
| ST ANN ASSISTED LIVING CENTER       | 10441 INTERNATIONAL PLAZA DR           | SAINT ANN  | 63074-1805| (314) 423-1254   | No                | No               | 40           | 7      | Yes          | 21994           |
| ST CLAIR NURSING CENTER             | 1035 PLAZA COURT NORTH                 | SAINT CLAIR| 63077-1129| (636) 629-2100   | No                | No               | 79           | 6      | No           | 13744           |
| ST ELIZABETH CARE CENTER            | 649 SOUTH WALNUT ST                    | SAINT ELIZABETH| 65075-2440| (573) 493-2215   | No                | No               | 63           | 6      | Yes          | 07516           |
| ST ELIZABETH HALL                   | 325 NORTH NEWSTEAD AVE                 | SAINT LOUIS| 63108-2707| (314) 652-9525   | No                | No               | 50           | 2      | Yes          | 07516           |
| ST FRANCIS PARK - ASSISTED LIVING BY AMERICARE | 1806 SAINT FRANCIS ST | KENNETT | 63857-1568 | (573) 888-1188   | No                | No               | 50           | 2      | No           | 18903           |
| ST FRANCOIS MANOR                   | 1180 OLD JACKSON RD                    | FARMINGTON | 63640-3428| (573) 760-1700   | No                | No               | 11           | 2      | Yes          | 21512           |
| ST FRANCOIS MANOR                   | 1180 OLD JACKSON RD                    | FARMINGTON | 63640-3428| (573) 760-1700   | No                | No               | 118          | 2      | No           | 21512           |

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| Facility Name                          | Address                        | City                     | County          | Bed Capacity | Medicare/Medicaid | Region | Alzheimer's Unit | DMH Licensed | Facility Number |
|---------------------------------------|--------------------------------|--------------------------|------------------|--------------|-------------------|--------|------------------|--------------|-----------------|----------------|
| ST FRANCOIS MANOR                    | 1180 OLD JACKSON RD            | FARMINGTON               | MO               | 29           | Yes               | 2      | No               | Yes          | 21512           |
| ST GENEVIEVE CARE CENTER, INC        | 1010 STE GENEVIEVE DR          | SAINTE GENEVIEVE         | MO               | 90           | No                | 2      | No               | Yes          | 03254           |
| ST JAMES LIVING CENTER               | 415 SIDNEY ST                  | SAINT JAMES              | MO               | 90           | No                | 6      | No               | Yes          | 05238           |
| ST JOE MANOR                         | 10 LAKE DR                     | BONNE TERRE              | MO               | 92           | No                | 2      | No               | Yes          | 22664           |
| ST JOE MANOR                         | 10 LAKE DR                     | BONNE TERRE              | MO               | 120          | No                | 2      | No               | Yes          | 22664           |
| ST JOHNS PLACE                       | 3333 BROWN ROAD                | SAINT LOUIS              | MO               | 94           | No                | 7      | No               | Yes          | 18454           |
| ST JOSEPH CHATEAU                    | 811 NORTH 9TH ST               | SAINT JOSEPH             | MO               | 69           | No                | 4      | No               | Yes          | 07532           |
| ST JOSEPH SENIOR LIVING              | 1317 NORTH 36TH ST             | SAINT JOSEPH             | MO               | 110          | No                | 4      | No               | Yes          | 00526           |
| ST JOSEPH'S BLUFFS                   | 1306 WEST MAIN ST              | JEFFERSON CITY           | MO               | 69           | No                | 6      | No               | Yes          | 07572           |

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<td>SNF</td>
<td>72</td>
<td>No</td>
<td>CRAWFORD</td>
<td>No</td>
<td>6</td>
<td>Medicare/Medicaid</td>
<td>02860</td>
</tr>
<tr>
<td>STONEBRIDGE MARYLAND HEIGHTS</td>
<td>(314) 291-4557</td>
<td>SNF</td>
<td>223</td>
<td>No</td>
<td>SAINT LOUIS COUNTY</td>
<td>No</td>
<td>7</td>
<td>Medicare/Medicaid</td>
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<tr>
<td>STONECREST HEALTHCARE</td>
<td>(573) 244-3171</td>
<td>ALF</td>
<td>21</td>
<td>No</td>
<td>CRAWFORD</td>
<td>No</td>
<td>6</td>
<td></td>
<td>16689</td>
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<tr>
<td>STONEY RIDGE VILLAGE</td>
<td>(660) 827-3993</td>
<td>RCF</td>
<td>81</td>
<td>No</td>
<td>PETTIS</td>
<td>Yes</td>
<td>6</td>
<td></td>
<td>05035</td>
</tr>
<tr>
<td>STOVER'S RESIDENTIAL CARE FACILITY</td>
<td>(660) 265-3262</td>
<td>RCF</td>
<td>20</td>
<td>Yes</td>
<td>SULLIVAN</td>
<td>No</td>
<td>5</td>
<td></td>
<td>07709</td>
</tr>
<tr>
<td>STRAFFORD CARE CENTER</td>
<td>(417) 736-9332</td>
<td>SNF</td>
<td>78</td>
<td>Yes</td>
<td>GREENE</td>
<td>No</td>
<td>1</td>
<td>Medicare/Medicaid</td>
<td>21285</td>
</tr>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>STUART HOUSE, LLC THE</td>
<td>117 S HICKMAN, CENTRALIA</td>
<td>(573) 682-3204</td>
<td>ICF</td>
<td>BOONE</td>
<td>27</td>
<td>No</td>
<td>10146</td>
</tr>
<tr>
<td>STUBBLEFIELD RETIREMENT HOME</td>
<td>5349 HIGHWAY P, CUBA</td>
<td>(573) 885-3661</td>
<td>RCF*</td>
<td>CRAWFORD</td>
<td>34</td>
<td>Yes</td>
<td>17894</td>
</tr>
<tr>
<td>STURGEON RESIDENTIAL CARE</td>
<td>315 E STONE ST, STURGEON</td>
<td>(573) 687-3012</td>
<td>RCF</td>
<td>BOONE</td>
<td>20</td>
<td>No</td>
<td>07733</td>
</tr>
<tr>
<td>SUGAR CREEK - ASSISTED LIVING BY AMERICARE</td>
<td>161 PROFESSIONAL PARKWAY, TROY</td>
<td>(636) 528-3136</td>
<td>ALF**</td>
<td>LINCOLN</td>
<td>60</td>
<td>No</td>
<td>26349</td>
</tr>
<tr>
<td>SUMMIT VILLA LIFECARE</td>
<td>229 KAREN DR, HOLTS SUMMIT</td>
<td>(573) 896-8567</td>
<td>ALF**</td>
<td>CALLAWAY</td>
<td>50</td>
<td>No</td>
<td>21318</td>
</tr>
<tr>
<td>SUMMIT, THE</td>
<td>3660 SUMMIT, KANSAS CITY</td>
<td>(816) 931-1196</td>
<td>SNF</td>
<td>JACKSON</td>
<td>64</td>
<td>No</td>
<td>18330</td>
</tr>
<tr>
<td>SUMMIT VIEW TERRACE ASSISTED LIVING BY AMERICARE</td>
<td>12101 EAST BANNISTER RD, KANSAS CITY</td>
<td>(816) 763-6667</td>
<td>ALF**</td>
<td>JACKSON</td>
<td>52</td>
<td>No</td>
<td>16311</td>
</tr>
<tr>
<td>SUNNY MEADOWS LIVING CENTER</td>
<td>419 NORTH PROSPECT AVE, SEDALIA</td>
<td>(660) 826-5353</td>
<td>RCF</td>
<td>PETTIS</td>
<td>12</td>
<td>Yes</td>
<td>06527</td>
</tr>
<tr>
<td>SUNNYHILL INDEPENDENCE CENTER</td>
<td>3343 ARMBRUSTER ROAD, DE SOTO</td>
<td>(636) 586-2188</td>
<td>ALF**</td>
<td>JEFFERSON</td>
<td>32</td>
<td>Yes</td>
<td>29674</td>
</tr>
</tbody>
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SUNNYHILL RESIDENTIAL CARE FACILITY
134 GRAY ST
FESTUS
MO 63028-1949
Mailing Address PO BOX 356
FESTUS
MO 63028-0356
Telephone (636) 931-4701
Level of Care: RCF
Bed Capacity 20
County JEFFERSON
Alzheimer's Unit No
Region 2
DMH Licensed Yes
Facility Number 07725

SUNNYHILLS RESIDENTIAL CARE FACILITY
17562 IMPERIAL RD
CARTHAGE
MO 64836-8753
Mailing Address 17562 IMPERIAL RD
CARTHAGE
MO 64836-8753
Telephone (417) 358-6122
Level of Care: RCF
Bed Capacity 18
County JASPER
Alzheimer's Unit No
Region 1
DMH Licensed No
Facility Number 13351

SUNNYVIEW NURSING HOME & APARTMENTS
1311 EAST 28TH ST
TRENTON
MO 64683-1103
Mailing Address 1311 EAST 28TH ST
TRENTON
MO 64683-1103
Telephone (660) 359-5647
Level of Care: SNF
Bed Capacity 154
County GRUNDY
Alzheimer's Unit No
Region 4
DMH Licensed No
Facility Number 18509

SUNNYVIEW NURSING HOME & APARTMENTS
1311 EAST 28TH ST
TRENTON
MO 64683-1103
Mailing Address 1311 EAST 28TH ST
TRENTON
MO 64683-1103
Telephone (660) 359-5647
Level of Care: RCF*
Bed Capacity 38
County GRUNDY
Alzheimer's Unit No
Region 4
DMH Licensed No
Facility Number 18509

SUNRISE OF CHESTERFIELD
1880 CLARKSON RD
CHESTERFIELD
MO 63017-5000
Mailing Address 1880 CLARKSON RD
CHESTERFIELD
MO 63017-5000
Telephone (636) 536-3800
Level of Care: ICF
Bed Capacity 95
County SAINT LOUIS COUNTY
Alzheimer's Unit Yes
Region 7
DMH Licensed No
Facility Number 23767

SUNRISE OF CHESTERFIELD
1880 CLARKSON RD
CHESTERFIELD
MO 63017-5000
Mailing Address 1880 CLARKSON RD
CHESTERFIELD
MO 63017-5000
Telephone (636) 536-3800
Level of Care: ALF**
Bed Capacity 3
County SAINT LOUIS COUNTY
Alzheimer's Unit No
Region 7
DMH Licensed No
Facility Number 23767

SUNRISE OF DES PERES
13460 MANCHESTER RD
DES PERES
MO 63131-1734
Mailing Address 13460 MANCHESTER RD
DES PERES
MO 63131-1734
Telephone (314) 965-3800
Level of Care: ICF
Bed Capacity 102
County SAINT LOUIS COUNTY
Alzheimer's Unit Yes
Region 7
DMH Licensed No
Facility Number 24242

SUNRISE OF WEBSTER GROVES
45 EAST LOCKWOOD
SAINT LOUIS
MO 63119-3050
Mailing Address 45 EAST LOCKWOOD
SAINT LOUIS
MO 63119-3050
Telephone (314) 918-7300
Level of Care: ALF**
Bed Capacity 90
County SAINT LOUIS COUNTY
Alzheimer's Unit Yes
Region 7
DMH Licensed No
Facility Number 28242

SUNRISE ON CLAYTON
7920 CLAYTON ROAD
RICHMOND HEIGHTS
MO 63117-1327
Mailing Address 7920 CLAYTON RD
RICHMOND HEIGHTS
MO 63117-1327
Telephone (314) 646-7600
Level of Care: ICF
Bed Capacity 90
County SAINT LOUIS COUNTY
Alzheimer's Unit Yes
Region 7
DMH Licensed No
Facility Number 24149

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Monday, November 4, 2019
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
Alzheimer's Unit  No
Bed Capacity 120
County FRANKLIN
DMH Licensed No
Region 6 Medicare/Medicaid
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
Alzheimer's Unit  No
Bed Capacity 167
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid
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
Alzheimer's Unit  No
Bed Capacity 60
County DEKALB
DMH Licensed No
Region 4 Medicare/Medicaid
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
Alzheimer's Unit  No
Bed Capacity 20
County CRAWFORD
DMH Licensed Yes
Region 6
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
Alzheimer's Unit  No
Bed Capacity 27
County SAINT CHARLES
DMH Licensed Yes
Region 5
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
Alzheimer's Unit  No
Bed Capacity 49
County LINCOLN
DMH Licensed Yes
Region 5
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
Alzheimer's Unit  No
Bed Capacity 26
County SCOTT
DMH Licensed Yes
Region 2
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
Alzheimer's Unit  No
Bed Capacity 38
County JACKSON
DMH Licensed No
Region 3 Medicare
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
Alzheimer's Unit  No
Bed Capacity 38
County GREENE
DMH Licensed No
Region 1 Medicare
Facility Number 31273

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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>SUPERIOR MANOR OF DOWNTOWN, LLC</td>
<td>1501 CLINTON STREET</td>
<td>SAINT LOUIS</td>
<td>40</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>SURREY PLACE ST LUKE’S HOSPITAL SKILLED NURSING</td>
<td>14701 OLIVE BLVD</td>
<td>SAINT LOUIS</td>
<td>130</td>
<td>Yes</td>
<td>No</td>
<td>15467</td>
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<tr>
<td>SWEET SPRINGS VILLA</td>
<td>518 E MARSHALL</td>
<td>SWEET SPRINGS</td>
<td>120</td>
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<td>SWIFT CREEK RESIDENTIAL CARE CENTER</td>
<td>1673 HIGHWAY 53</td>
<td>BUTLER</td>
<td>12</td>
<td>No</td>
<td>Yes</td>
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<td>SWITZER RESIDENTIAL CARE</td>
<td>3260 MYSTIC LN</td>
<td>BUTLER</td>
<td>20</td>
<td>No</td>
<td>Yes</td>
<td>20739</td>
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<td>SWOPE RIDGE GERIATRIC CENTER</td>
<td>5900 SWOPE PARKWAY</td>
<td>JACKSON</td>
<td>240</td>
<td>No</td>
<td>Yes</td>
<td>07904</td>
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<td>SYLVAN HOUSE</td>
<td>30 SHERMAN RD</td>
<td>SAINT LOUIS</td>
<td>40</td>
<td>No</td>
<td>Yes</td>
<td>15078</td>
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<tr>
<td>SYLVIA G THOMPSON RESIDENCE CENTER, INC</td>
<td>3333 WEST TENTH ST</td>
<td>PETTIS</td>
<td>120</td>
<td>No</td>
<td>Yes</td>
<td>17278</td>
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<td>TABLEROCK HEALTHCARE</td>
<td>276 FOUNTAIN LN</td>
<td>STONE</td>
<td>120</td>
<td>Yes</td>
<td>No</td>
<td>07911</td>
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Monday, November 4, 2019
TARKIO REHABILITATION & HEALTH CARE
300 CEDAR ST
TARKIO MO 64491-1174
Mailing Address 300 CEDAR ST
TARKIO MO 64491-1174

TEAL LAKE - ASSISTED LIVING BY AMERICARE
1722 HUNTINGFIELD DR
MEXICO MO 65265-3808
Mailing Address 1722 HUNTINGFIELD DR
MEXICO MO 65265-3808

TESSON HEIGHTS
12335 WEST BEND DR
SAINT LOUIS MO 63128-2160
Mailing Address 12335 WEST BEND DR
SAINT LOUIS MO 63128-2160

THE OAKS RETIREMENT COMMUNITY
127 HAMLET ROAD
BRANSON MO 65616-7746
Mailing Address 127 HAMLET ROAD
BRANSON MO 65616-7746

THOMAS RESIDENTIAL CARE CENTER II
119 VIRGINIA ST
SAINT JOSEPH MO 64504-1543
Mailing Address 119 VIRGINIA ST
SAINT JOSEPH MO 64504-1543

THOMAS RESIDENTIAL CARE FACILITY III
1415 OLIVE ST
SAINT JOSEPH MO 64503-2443
Mailing Address 1415 OLIVE ST
SAINT JOSEPH MO 64503-2443

TIFFANY HEIGHTS
1531 NEBRASKA ST
MOUND CITY MO 64470-1610
Mailing Address PO BOX 308
MOUND CITY MO 64470-0308

TIFFANY SPRINGS REHABILITATION & HEALTH CARE CENTER
9191 N AMBASSADOR DR
KANSAS CITY MO 64154-7247
Mailing Address 9191 N AMBASSADOR DR
KANSAS CITY MO 64154-7247

TIFFANY SPRINGS SENIOR CARE COMMUNITY
9101 N AMBASSADOR DRIVE
KANSAS CITY MO 64154-
Mailing Address 9101 N AMBASSADOR DRIVE
KANSAS CITY MO 64154-

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TIGER PLACE
2910 BLUFF CREEK DR
COLUMBIA MO 65201-3522
Mailing Address 2910 BLUFF CREEK DR
COLUMBIA MO 65201-3522
Telephone (573) 256-4620
Alzheimer's Unit No
Level of Care: ICF
Bed Capacity 112
County BOONE
DMH Licensed No
Region 6
Facility Number 24341

TIMBERLAKE CARE CENTER
12110 HOLMES RD
KANSAS CITY MO 64145-1707
Mailing Address 12110 HOLMES RD
KANSAS CITY MO 64145-1707
Telephone (816) 941-3006
Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 122
County JACKSON
DMH Licensed No
Region 3
Medicare/Medicaid
Facility Number 10962

TIMBERS, THE
239 KAREN DRIVE
HOLTS SUMMIT MO 65043-2522
Mailing Address 239 KAREN DRIVE
HOLTS SUMMIT MO 65043-2522
Telephone (573) 415-0390
Alzheimer's Unit No
Level of Care: ALF**
Bed Capacity 50
County CALLAWAY
DMH Licensed No
Region 6
Medicare/Medicaid
Facility Number 30384

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

TOWNE HOUSE, THE
221 EAST WHITLEY
MEXICO MO 65265-2815
Mailing Address PO BOX 6
MEXICO MO 65265-0006
Telephone (573) 581-2547
Alzheimer's Unit No
Level of Care: RCF*
Bed Capacity 29
County AUDRAIN
DMH Licensed Yes
Region 5
Facility Number 08077

TOWNHOUSE RESIDENTIAL CARE FACILITY
207 FRONT ST
ANNAPELIS MO 63620-9130
Mailing Address 207 FRONT ST
ANNAPELIS MO 63620-9130
Telephone (573) 598-1168
Alzheimer's Unit No
Level of Care: RCF
Bed Capacity 18
County IRON
DMH Licensed Yes
Region 2
Facility Number 20185

TOWNSHIP SENIOR LIVING, THE
4150 WEST REPUBLIC ROAD
BATTLEFIELD MO 65619-7111
Mailing Address 4150 WEST REPUBLIC ROAD
BATTLEFIELD MO 65619-7111
Telephone (417) 881-7800
Alzheimer's Unit Yes
Level of Care: ALF**
Bed Capacity 50
County GREENE
DMH Licensed No
Region 1
Facility Number 31903

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

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Monday, November 4, 2019
TROY HOUSE RESCARE
350 CAP AU GRIS
TROY MO 63379-1761
Mailing Address PO BOX 271 TROY MO 63379-0271
Telephone (636) 462-4915 Alzheimer's Unit No
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
Mailing Address 200 THOMPSON DR TROY MO 63379-2308
Telephone (636) 528-8446 Alzheimer's Unit No
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
Mailing Address 200 THOMPSON DR TROY MO 63379-2308
Telephone (636) 528-8446 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 130
County LINCOLN DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 05397

TRUMAN GARDENS
17451 MEDICAL CENTER PARKWAY
INDEPENDENCE MO 64057-1805
Mailing Address 17451 MEDICAL CENTER PRK WY INDEPENDENCE MO 64057-1805
Telephone (816) 373-7795 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 118
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 03782

TRUMAN HEALTHCARE & REHABILITATION CENTER
206 WEST FIRST ST
LAMAR MO 64759-1291
Mailing Address 206 WEST FIRST ST LAMAR MO 64759-1291
Telephone (417) 682-5718 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 123
County BARTON DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 01346

TRUMAN LAKE MANOR, INC
600 EAST 7TH ST
LOWRY CITY MO 64763-9671
Mailing Address PO BOX 415 LOWRY CITY MO 64763-0415
Telephone (417) 644-2248 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County SAINT CLAIR DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 08140

TURNING POINT GROUP HOME
1720 SWOPE DR
INDEPENDENCE MO 64057-2163
Mailing Address PO BOX 260 INDEPENDENCE MO 64051-0693
Telephone (816) 257-1435 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County JACKSON DMH Licensed Yes
Region 3 Medicare/Medicaid Facility Number 13608

TWIN CITY RESIDENTIAL CARE, INC
#1 HOLDING LN
CRYSTAL CITY MO 63019-1122
Mailing Address PO BOX 92 HERCULANEUM MO 63048-0092
Telephone (636) 937-3851 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County JEFFERSON DMH Licensed Yes
Region 2 Medicare/Medicaid Facility Number 03763

TWIN OAKS AT HERITAGE POINTE
228 SAVANNAH TERRACE
WENTZVILLE MO 63385-3741
Mailing Address 228 SAVANNAH TERRACE WENTZVILLE MO 63385-3741
Telephone (636) 542-5400 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 70
County SAINT CHARLES DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 26877

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Phone Number</th>
<th>Level of Care</th>
<th>Region</th>
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<th>Facility Number</th>
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<tr>
<td>TWIN OAKS ESTATE, INC</td>
<td>707 EMGE RD</td>
<td>O'FALLON</td>
<td>MO</td>
<td>149</td>
<td>No</td>
<td>No</td>
<td>(636) 240-6152</td>
<td>RCF</td>
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<tr>
<td>TWIN PINES ADULT CARE CENTER</td>
<td>1900 S JAMISON</td>
<td>KIRKSVILLE</td>
<td>MO</td>
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<td>Yes</td>
<td>No</td>
<td>(660) 665-2887</td>
<td>SNF</td>
<td>5</td>
<td>Medicare/Medicaid</td>
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<td>U-CITY FOREST MANOR</td>
<td>1301 PARTRIDGE AVE</td>
<td>SAINT LOUIS</td>
<td>MO</td>
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<td>No</td>
<td>No</td>
<td>(314) 862-5556</td>
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<td>Medicare/Medicaid</td>
<td>15454</td>
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<td>UNION CARE CENTER</td>
<td>1080 MARIE LANE</td>
<td>UNION</td>
<td>MO</td>
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<td>No</td>
<td>No</td>
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<td>UNION MANOR, LLC</td>
<td>2711 NORTH UNION BLVD</td>
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<td>(314) 383-7310</td>
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<td>URBANA REST HOME</td>
<td>310 WALNUT ST</td>
<td>URBANA</td>
<td>MO</td>
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<td>Yes</td>
<td>(417) 993-4638</td>
<td>RCF</td>
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<tr>
<td>VALLEY - A STONEBRIDGE COMMUNITY,</td>
<td>6768 NORTH HIGHWAY 67</td>
<td>FLORISSANT</td>
<td>MO</td>
<td>120</td>
<td>No</td>
<td>No</td>
<td>(314) 741-9101</td>
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<td>VALLEY MANOR AND REHABILITATION</td>
<td>1410 HOSPITAL DR</td>
<td>EXCELSIOR SPRINGS</td>
<td>MO</td>
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<td>No</td>
<td>No</td>
<td>(816) 637-1010</td>
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<td>02425</td>
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<tr>
<td>VALLEY PARK NORTH</td>
<td>2631 FAIRWAY DR</td>
<td>FULTON</td>
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<td>No</td>
<td>(573) 592-4995</td>
<td>RCF</td>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>County</th>
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<tr>
<td>VALLEY PARK RETIREMENT CENTER</td>
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<td>No</td>
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<td>VALLEY VIEW HEALTH &amp; REHABILITATION</td>
<td>96</td>
<td>No</td>
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<td>RANDOLPH</td>
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<td>VELMA DOWDY ASSISTED LIVING</td>
<td>24</td>
<td>Yes</td>
<td>Yes</td>
<td>CARTER</td>
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<tr>
<td>VICTORIAN PLACE OF VIENNA, RESIDENTIAL CARE BY AMERICARE</td>
<td>48</td>
<td>No</td>
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<td>VICTORIAN PLACE OF CUBA, RESIDENTIAL CARE BY AMERICARE</td>
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<td>No</td>
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<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>VICTORIAN PLACE OF ST CLAIR, RESIDENTIAL CARE BY AMERICARE</td>
<td>160 CHARLES DR, SAINT CLAIR, MO 63077-1936</td>
<td>FRANKLIN</td>
<td>48</td>
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<td>VICTORIAN PLACE OF SULLIVAN, RESIDENTIAL CARE BY AMERICARE</td>
<td>1250 EAST SPRINGFIELD RD, SULLIVAN, MO 63080-1358</td>
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<td>VICTORIAN PLACE OF UNION, RESIDENTIAL CARE BY AMERICARE</td>
<td>1320 W MAIN, UNION, MO 63084-1084</td>
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<td>VICTORIAN PLACE OF WASHINGTON, RESIDENTIAL CARE BY AMERICARE</td>
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<td>VILLA AT BLUE RIDGE, THE</td>
<td>701 BLUE RIDGE ROAD, COLUMBIA, MO 65201-3734</td>
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<td>97</td>
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<td>VILLA MARIE - A STONEBRIDGE COMMUNITY</td>
<td>1030 EDMONDS ST, JEFFERSON CITY, MO 65109-5213</td>
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<td>Yes</td>
<td>No</td>
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<td>VILLA VENTURA ASSISTED LIVING FACILITY</td>
<td>12100 WORNALL RD, KANSAS CITY, MO 64145-1764</td>
<td>JACKSON</td>
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<td>VILLAGE ASSISTED LIVING</td>
<td>1701 NW O'BRIEN RD, LEE'S SUMMIT, MO 64081-1559</td>
<td>JACKSON</td>
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<td>VILLAGE ASSISTED LIVING</td>
<td>1704 NORTHWEST O'BRIEN RD, LEE'S SUMMIT, MO 64081-1559</td>
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VILLAGE AT CARROLL PARK, THE
5301 HARRY TRUMAN DR
GRANDVIEW MO 64030-1708
Mailing Address 5301 HARRY TRUMAN DR
GRANDVIEW MO 64030-1708

Telephone (816) 761-6838 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 93
County JACKSON DMH Licensed No
Region 3 Facility Number 03157

VILLAGE CARE CENTER, INC
810 EAST EDWARDS ST
MARYVILLE MO 64468-2917
Mailing Address 810 EAST EDWARDS ST
MARYVILLE MO 64468-2917

Telephone (660) 562-3515 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 18
County NODAWAY DMH Licensed No
Region 4 Facility Number 20361

VILLAGE CARE CENTER, INC
810 EAST EDWARDS ST
MARYVILLE MO 64468-2917
Mailing Address 810 EAST EDWARDS ST
MARYVILLE MO 64468-2917

Telephone (660) 562-3515 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 46
County NODAWAY DMH Licensed No
Region 4 Medicare/Medicaid Facility Number 20361

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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 22
County SAINT CHARLES DMH Licensed No
Region 5 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 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 27
County DEKalB DMH Licensed No
Region 4 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 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 49
County DEKalB DMH Licensed No
Region 4 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 Alzheimer's Unit Yes
Level of Care: ICF Bed Capacity 70
County JACKSON DMH Licensed No
Region 3 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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 62
County JACKSON DMH Licensed No
Region 3 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 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 25709

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<tr>
<th>Facility Name</th>
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<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
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<td><strong>VILLAGES OF ST PETERS MEMORY CARE</strong></td>
<td>5300 EXECUTIVE CENTER PARKWAY</td>
<td>SAINT PETERS</td>
<td>MO</td>
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<td>No</td>
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<td>670 BROADRIDGE DRIVE</td>
<td>JACKSON</td>
<td>MO</td>
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<td>No</td>
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<td><strong>VILLAS-A STONEBRIDGE COMMUNITY, THE</strong></td>
<td>1550 VILLAS DR</td>
<td>DE SOTO</td>
<td>MO</td>
<td>56</td>
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<td><strong>VINTAGE GARDENS ASSISTED LIVING</strong></td>
<td>3302 NORTH WOODBINE ROAD</td>
<td>SAINT JOSEPH</td>
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<td>44</td>
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<td><strong>WAGNER RESIDENTIAL CARE, INC</strong></td>
<td>320 N CHAMBER DR</td>
<td>FREDERICKTOWN</td>
<td>MO</td>
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<td>Yes</td>
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Monday, November 4, 2019
WALNUT STREET ASSISTED LIVING
404 WALNUT ST
DONIPHAN  MO  63935-1420
Mailing Address  404 WALNUT ST
DONIPHAN  MO  63935-1420

WARRENSBURG MANOR CARE CENTER
400 CARE CENTER DR
WARRENSBURG  MO  64093-3100
Mailing Address  400 CARE CENTER DR
WARRENSBURG  MO  64093-3100

WARRENTON MANOR
65 STATE HIGHWAY AA
WRIGHT CITY  MO  63383-3301
Mailing Address  65 STATE HIGHWAY AA
WRIGHT CITY  MO  63390-3301

WARSOW HEALTH AND REHABILITATION CENTER
1609 SUNCHASE DR
WARSOW  MO  65355-3059
Mailing Address  1609 SUNCHASE DR
WARSOW  MO  65355-3059

WATERFORD LADIES HOME
500 NW VESPER ST
BLUE SPRINGS  MO  64014-2744
Mailing Address  500 NW VESPER ST
BLUE SPRINGS  MO  64014-2744

WATERFORD SOUTH
11515 HOLMES RD
KANSAS CITY  MO  64131-3856
Mailing Address  11515 HOLMES RD
KANSAS CITY  MO  64131-3856

WATTS STREET MANOR
301 WATTS ST
PARK HILLS  MO  63601-1839
Mailing Address  301 WATTS ST
PARK HILLS  MO  63601-1839

WEBB CITY HEALTH AND REHABILITATION CENTER
2077 STADIUM DR
WEBB CITY  MO  64870-9743
Mailing Address  2077 STADIUM DR
WEBB CITY  MO  64870-9743

WEBCO EAST
1687 W  WASHINGTON ST
MARSHFIELD  MO  65706-2325
Mailing Address  1687 W  WASHINGTON ST
MARSHFIELD  MO  65706-2325

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WEBCO MANOR
1687 W WASHINGTON ST
MARSHFIELD, MO 65706-2325
Mailing Address: 1687 W WASHINGTON ST
MARSHFIELD, MO 65706-2325
Telephone: (417) 859-5144
Level of Care: SNF
County: WEBSTER
Region: 1
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 120
DMH Licensed: No
Facility Number: 08405

WEBWOOD ASSISTED LIVING, LLC
1640 WALDO HATLER DRIVE
NEOSHO, MO 64850-
Mailing Address: 1640 WALDO HATLER DRIVE
NEOSHO, MO 64850-
Telephone: (417) 451-2997
Level of Care: ALF
County: NEWTON
Region: 1
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 25
DMH Licensed: No
Facility Number: 31265

WEDGEWOOD GARDENS
17996 BUSINESS 13
REEDS SPRING, MO 65737-9663
Mailing Address: 17996 BUSINESS 13
REEDS SPRING, MO 65737-9663
Telephone: (417) 272-6666
Level of Care: ALF**
County: STONE
Region: 1
Medicare/Medicaid: Yes
Alzheimer's Unit: Yes
Bed Capacity: 46
DMH Licensed: No
Facility Number: 20615

WELLER PLACE RETIREMENT CENTER
510 WELLER STREET
MACON, MO 63552-1996
Mailing Address: 510 WELLER STREET
MACON, MO 63552-1996
Telephone: (660) 395-2273
Level of Care: RCF
County: MACON
Region: 5
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 18
DMH Licensed: No
Facility Number: 30888

WEST COUNTY CARE CENTER
312 SOLLEY DR
BALLWIN, MO 63021-5248
Mailing Address: 312 SOLLEY DR
BALLWIN, MO 63021-5248
Telephone: (636) 391-0666
Level of Care: SNF
County: SAINT LOUIS COUNTY
Region: 7
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 137
DMH Licensed: No
Facility Number: 04970

WEST PINE GROUP HOME
4232 WEST PINE BLVD
SAINT LOUIS, MO 63108-2840
Mailing Address: 4232 WEST PINE BLVD
SAINT LOUIS, MO 63108-2840
Telephone: (314) 531-9450
Level of Care: RCF
County: SAINT LOUIS CITY
Region: 7
Medicare/Medicaid: Yes
Alzheimer's Unit: No
Bed Capacity: 9
DMH Licensed: Yes
Facility Number: 05948

WEST VUE NURSING AND REHABILITATION CENTER
210 DAVIS DR
WEST PLAINS, MO 65775-2241
Mailing Address: 210 DAVIS DR
WEST PLAINS, MO 65775-2241
Telephone: (417) 256-2152
Level of Care: SNF
County: HOWELL
Region: 1
Medicare/Medicaid: No
Alzheimer's Unit: Yes
Bed Capacity: 130
DMH Licensed: No
Facility Number: 21733

WESTBROOK CARE CENTER, INC
401 S PLATTE CLAY WAY
KEARNEY, MO 64060-7714
Mailing Address: 401 S PLATTE CLAY WAY
KEARNEY, MO 64060-7714
Telephone: (816) 628-2222
Level of Care: RCF*
County: CLAY
Region: 4
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 27
DMH Licensed: No
Facility Number: 19757

WESTBROOK TERRACE - ASSISTED LIVING BY AMERICARE
3335 NORTH TEN MILE DR
JEFFERSON CITY, MO 65109-0528
Mailing Address: 3335 NORTH TEN MILE DR
JEFFERSON CITY, MO 65109-0528
Telephone: (573) 635-2600
Level of Care: ALF**
County: COLE
Region: 6
Medicare/Medicaid: No
Alzheimer's Unit: No
Bed Capacity: 36
DMH Licensed: No
Facility Number: 20440

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Monday, November 4, 2019
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<td>(314) 469-1200</td>
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<td>WESTFIELD NURSING CENTER, INC</td>
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<td>(573) 455-2280</td>
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<td>MARSHALL</td>
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<td>(660) 886-5500</td>
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<td>(636) 527-5554</td>
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<td>WESTVIEW NURSING HOME</td>
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<td>(573) 785-0851</td>
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| Facility Name                                                                 | Address                                        | City               | County | Bed Capacity | DMH Licensed | County Region | Alzheimer's Unit | Facility Number |
|------------------------------------------------------------------------------|------------------------------------------------|--------------------|--------|--------------|--------------|----------------|------------------|-----------------|-----------------|
| WESTWOOD LIVING CENTER                                                       | 1801 NORTH GAINES DR                           | CLINTON            | MO     | 120          | No           | 1              | Yes              | 08521           |
| WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPPORT BY SENIOR STAR              | 6460 NORTH COSBY AVE                           | KANSAS CITY        | MO     | 98           | No           | 4              | Yes              | 28861           |
| WHISPERING OAKS RCF II, LLC                                                 | 203 NORTH B ST                                | POPLAR BLUFF       | MO     | 45           | Yes          | 2              | No               | 16751           |
| WHISPERING PINES SENIOR LIVING LLC                                          | 4904 EAST WELLRIDGE LN                        | JOPLIN             | MO     | 20           | No           | 1              | No               | 09477           |
| WHITE OAK LIVING CENTER                                                     | 1515 WEST WHITE OAK                           | INDEPENDENCE       | MO     | 78           | No           | 3              | No               | 06604           |
| WILLOW BROOKE - ASSISTED LIVING BY AMERICARE                                | #1 NORTH POTOMAC CT                           | UNION              | MO     | 50           | No           | 6              | Yes              | 13596           |
| WILLOW CARE NURSING HOME                                                    | 2646 STATE ROUTE 76                           | WILLOW SPRINGS     | MO     | 105          | No           | 1              | Yes              | 08614           |

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| Facility Name | Address | City | County | Region | Bed Capacity | DMH Licensed | Facility Number | Alzheimer's Unit | Telephone | Level of Care | County | Region | Bed Capacity | DMH Licensed | Facility Number | Alzheimer's Unit | Telephone | Level of Care | County | Region | Bed Capacity | DMH Licensed | Facility Number |
|---------------|---------|------|--------|--------|--------------|--------------|----------------|-----------------|------------|-------------|--------|--------|--------------|--------------|----------------|-----------------|------------|-------------|--------|--------|--------------|--------------|----------------|-----------------|------------|-------------|--------|--------|--------------|--------------|----------------|-----------------|------------|-------------|--------|--------|--------------|--------------|----------------|
| WILLOW CARE REHABILITATION & HEALTH CARE CENTER | 328 MUNGER LN | HANNIBAL | MO | 5 | 111 | No | 03340 | No | (573) 221-9122 | SNF | MARION | 3 | Medicare/Medicaid | 111 | No | 03340 | No | (573) 221-9122 | SNF | MARION | 3 | Medicare/Medicaid | 111 | No | 03340 |
| WILLOW CREEK MEMORY CARE AT LEES SUMMIT | 3101 SW 3RD STREET | LEE'S SUMMIT | MO | 3 | 54 | No | 31077 | No | 816-321-1648 | ALF** | JACKSON | 3 | Medicare/Medicaid | 54 | No | 31077 | No | 816-321-1648 | ALF** | JACKSON | 3 | Medicare/Medicaid | 54 | No | 31077 |
| WILLOW WEST APARTMENTS | 2644 STATE ROUTE 76 | WILLOW SPRINGS | MO | 1 | 36 | No | 08614 | No | (417) 469-3152 | ALF | HOWELL | 1 | Medicare/Medicaid | 36 | No | 08614 | No | (417) 469-3152 | ALF | HOWELL | 1 | Medicare/Medicaid | 36 | No | 08614 |
| WILSHIRE AT LAKEWOOD | 600 NE MEADOWVIEW DR | LEE'S SUMMIT | MO | 3 | 170 | No | 22471 | No | (816) 554-9866 | SNF | JACKSON | 3 | Medicare/Medicaid | 170 | No | 22471 | No | (816) 554-9866 | SNF | JACKSON | 3 | Medicare/Medicaid | 170 | No | 22471 |
| WILSON'S CREEK NURSING & REHAB | 3403 WEST MT VERNON | SPRINGFIELD | MO | 1 | 172 | No | 05579 | No | (417) 864-5600 | SNF | GREENE | 1 | Medicare/Medicaid | 172 | No | 05579 | No | (417) 864-5600 | SNF | GREENE | 1 | Medicare/Medicaid | 172 | No | 05579 |
| WINCHESTER NURSING CENTER, INC | 400 WINCHESTER DRIVE | BERNIE | MO | 2 | 40 | No | 31391 | No | (573) 293-6702 | SNF | STODDARD | 2 | Medicare/Medicaid | 40 | No | 31391 | No | (573) 293-6702 | SNF | STODDARD | 2 | Medicare/Medicaid | 40 | No | 31391 |
| WINCHESTER RESIDENTIAL CARE, INC | 404 WINCHESTER ROAD | BERNIE | MO | 2 | 26 | No | 24912 | No | (573) 293-6705 | RCF | STODDARD | 2 | Medicare/Medicaid | 26 | No | 24912 | No | (573) 293-6705 | RCF | STODDARD | 2 | Medicare/Medicaid | 26 | No | 24912 |
| WINDEMERE RESIDENTIAL CARE | 3100 NORTH WEST VIVION RD | RIVERSIDE | MO | 4 | 65 | No | 08668 | No | (816) 741-0753 | RCF | PLATTE | 4 | Medicare/Medicaid | 65 | No | 08668 | No | (816) 741-0753 | RCF | PLATTE | 4 | Medicare/Medicaid | 65 | No | 08668 |
| WINDSOR ESTATES OF ST CHARLES SNAL, LLC | 2150 WEST RANDOLPH ST | SAINT CHARLES | MO | 5 | 90 | No | 06316 | No | (636) 946-4966 | ALF** | SAINT CHARLES | 5 | Medicare/Medicaid | 90 | No | 06316 | No | (636) 946-4966 | ALF** | SAINT CHARLES | 5 | Medicare/Medicaid | 90 | No | 06316 |

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<td>WINDSOR HEALTHCARE &amp; REHAB CENTER</td>
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<td>1804 SOUTH STERLING AVE</td>
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