<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Total Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>ABBEY SENIOR HEALTH</td>
<td>55</td>
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<td>ABBEY WOODS CENTER FOR REHABILITIZATION AND HEALING</td>
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<td>ABC HEALTH CARE</td>
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<td>ABERDEEN HEIGHTS</td>
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<td>ACKERT PARK SKILLED NURSING &amp; REHABILITATION CENTER</td>
<td>38</td>
<td>No</td>
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<td>ADAMS STREET-A STONEBRIDGE COMMUNITY</td>
<td>36</td>
<td>No</td>
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ADDINGTON PLACE OF LEE'S SUMMIT
2160 SE BLUE PARKWAY
LEE'S SUMMIT MO 64063-1007
Mailing Address: 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
Region 3
Facility Number 28136

ADDINGTON PLACE OF SHOAL CREEK
9601 NORTH TULLIS DR
KANSAS CITY MO 64157-7890
Mailing Address: 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
Region 4
Facility Number 28129

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

ADVANCE ASSISTED LIVING
252 PAYTON PLACE
ADVANCE MO 63730-7251
Mailing Address: PO BOX 790
ADVANCE MO 63730-0790
Telephone (573) 722-5200
Level of Care: ALF
Bed Capacity 44
County: STODDARD
DMH Licensed No
Region 2
Facility Number 28426

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

AKINS HEALTH CARE, INC
4432 WEST BELLE PL
SAINT LOUIS MO 63108-2617
Mailing Address: 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
Region 7
Facility Number 00078

ALBANY PLACE LLC
520 S ALBANY
BOLIVAR MO 65613-2116
Mailing Address: PO BOX 176
BOLIVAR MO 65613-0176
Telephone (417) 777-8040
Level of Care: RCF*
Bed Capacity 16
County: POLK
DMH Licensed Yes
Region 1
Facility Number 24731

ALEXIAN BROTHERS LANSDOWNE VILLAGE
4624 LANSDOWNE AVE
SAINT LOUIS MO 63116-1523
Mailing Address: 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
Region 7
Facility Number 14557

ALEXIAN BROTHERS SHERBROOKE VILLAGE
4005 RIPA AVE
SAINT LOUIS MO 63125-2378
Mailing Address: 4005 RIPA AVE
SAINT LOUIS MO 63125-2378
Telephone (314) 544-1111
Level of Care: SNF
Bed Capacity 167
County: SAINT LOUIS COUNTY
DMH Licensed No
Region 7
Facility Number 15436

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address, City/County</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
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<th>Facility Number</th>
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<tbody>
<tr>
<td>ALEXIAN BROTHERS SHERBROOKE VILLAGE</td>
<td>4005 RIPA AVE, SAINT LOUIS</td>
<td>(314) 544-1111</td>
<td>No</td>
<td>88</td>
<td>No</td>
<td>15436</td>
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<tr>
<td>ALLEGRO</td>
<td>1055 BELLEVUE AVENUE, RICHMOND HEIGHTS</td>
<td>314-332-8372</td>
<td>YES</td>
<td>88</td>
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<tr>
<td>ALLWAYS KARE RESIDENTIAL FACILITY, INC</td>
<td>5076 WATERMAN, SAINT LOUIS</td>
<td>(314) 367-9516</td>
<td>No</td>
<td>20</td>
<td>Yes</td>
<td>05212</td>
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<tr>
<td>AMBROSE PARK RESIDENTIAL CARE</td>
<td>517 NORTH OAK, COLE CAMP</td>
<td>(660) 668-3140</td>
<td>No</td>
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<td>26313</td>
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<tr>
<td>ANNA DODSON HOME</td>
<td>4616 HIGHWAY D, FARMINGTON</td>
<td>(573) 756-5530</td>
<td>No</td>
<td>20</td>
<td>Yes</td>
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<tr>
<td>ANNA'S HOUSE RESIDENTIAL CARE FACILITY LLC</td>
<td>194 STATE HWAY MM, NIAangua</td>
<td>(417) 473-6000</td>
<td>No</td>
<td>11</td>
<td>Yes</td>
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<tr>
<td>ANTHELOGY OF BURLINGTON CREEK</td>
<td>6311 NORTH COSBY AVENUE, KANSAS CITY</td>
<td>(816) 505-3030</td>
<td>Yes</td>
<td>110</td>
<td>No</td>
<td>30198</td>
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<tr>
<td>ANTHELOGY OF CLAYTON VIEW</td>
<td>8825 EAGER ROAD, SAINT LOUIS</td>
<td>(314) 961-1700</td>
<td>Yes</td>
<td>90</td>
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<td>30363</td>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
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<th>Ext.</th>
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<th>Region</th>
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<tbody>
<tr>
<td>ANTHOLOGY OF TOWN &amp; COUNTRY</td>
<td>1020 WOODS MILL ROAD</td>
<td></td>
<td>(636) 527-4444</td>
<td>95</td>
<td>Yes</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>1020 WOODS MILL ROAD</td>
<td>No</td>
<td>30612</td>
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<tr>
<td>ANTHOLOGY OF WILDWOOD</td>
<td>251 PLAZA DRIVE</td>
<td>63040-1203</td>
<td>(636) 273-3900</td>
<td>94</td>
<td>Yes</td>
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<td>251 PLAZA DRIVE</td>
<td>No</td>
<td>31049</td>
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<tr>
<td>APERION CARE HIDDEN LAKE</td>
<td>11728 HIDDEN LAKE DR</td>
<td>63138-1757</td>
<td>(314) 355-8833</td>
<td>38</td>
<td>No</td>
<td>SAINT LOUIS COUNTY</td>
<td>7</td>
<td>11728 HIDDEN LAKE DR</td>
<td>Yes</td>
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<td>APERION CARE HIDDEN LAKE</td>
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<td>38</td>
<td>No</td>
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<td>No</td>
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<td>7</td>
<td>11728 HIDDEN LAKE DR</td>
<td>No</td>
<td>18442</td>
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<tr>
<td>APPLE RIDGE CARE CENTER</td>
<td>100 WEST THOMAS AVE</td>
<td>64096-9143</td>
<td>(660) 493-2232</td>
<td>60</td>
<td>Yes</td>
<td>LAFAYETTE</td>
<td>3</td>
<td>PO BOX 188</td>
<td>Yes</td>
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<tr>
<td>APPLEGATE RETIREMENT HOME</td>
<td>1204 TELEGRAPH RD</td>
<td>63125-2528</td>
<td>(314) 631-2003</td>
<td>38</td>
<td>Yes</td>
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<td>7</td>
<td>1204 TELEGRAPH RD</td>
<td>Yes</td>
<td>14409</td>
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<tr>
<td>APPLETON CITY MANOR</td>
<td>600 NORTH OHIO ST</td>
<td>64724-1609</td>
<td>(660) 476-2128</td>
<td>60</td>
<td>No</td>
<td>SAINT CLAIR</td>
<td>1</td>
<td>PO BOX 98</td>
<td>No</td>
<td>01637</td>
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<tr>
<td>ARBORS AT GLENDALE GARDENS - MEMORY</td>
<td>1300 SOUTH MAIN</td>
<td>64735-2728</td>
<td>(660) 885-2272</td>
<td>42</td>
<td>Yes</td>
<td>HENRY</td>
<td>1</td>
<td>1300 S MAIN</td>
<td>No</td>
<td>17054</td>
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</tbody>
</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>Level of Care</th>
<th>Alzheimer's Unit</th>
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<th>Facility Number</th>
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<tr>
<td>ARBORS AT HARMONY GARDENS-MEMORY CARE ASSISTED LIVING BY AMERICARE THE</td>
<td>539 EAST YOUNG AVENUE</td>
<td>WARRENSBURG</td>
<td>MO</td>
<td>24</td>
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<td>Yes</td>
<td>No</td>
<td>31389</td>
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<tr>
<td>ARBORS AT HIGHLAND CREST - ALZHEIMERS ASSISTED LIVING BY AMERICARE, THE</td>
<td>620 GILASPY ROAD</td>
<td>KIRKSVILLE</td>
<td>MO</td>
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<td>ARBORS AT LAKEVIEW BEND - ASSISTED LIVING BY AMERICARE, THE</td>
<td>1700 ASBURY CIRCLE WEST</td>
<td>MEXICO</td>
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<td>No</td>
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<td>ARBORS AT MOUNT CARMEL, THE</td>
<td>723 FIRST CAPITOL DR</td>
<td>SAINT CHARLES</td>
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<td>ARBORS AT VICTORIAN PLACE OF CUBA, MEMORY CARE ASSISTED LIVING BY AMERICARE THE</td>
<td>903 HWY DD</td>
<td>CUBA</td>
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<td>ARBORS AT VICTORIAN PLACE OF WASHINGTON, MEMORY CARE ASSISTED LIVING BY AMERICARE, THE</td>
<td>2701 RABBIT TRAIL DR</td>
<td>WASHINGTON</td>
<td>MO</td>
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<td>No</td>
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<tr>
<td>ARBORS AT WESTBROOK TERRACE-ALZHEIMER'S ASSISTED LIVING BY AMERICARE</td>
<td>3409 NORTH 10 MILE DR</td>
<td>JEFFERSON CITY</td>
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<td>26</td>
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<td>Yes</td>
<td>No</td>
<td>27914</td>
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<td>ARBORS AT WESTRIDGE PLACE - MEMORY CARE BY AMERICARE, THE</td>
<td>539 NORTH WEST ST</td>
<td>SIKESTON</td>
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<td>Yes</td>
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</table>

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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>County</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
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<tr>
<td>Arizona Care Center</td>
<td>101 Arizona ST</td>
<td>(573) 237-4830</td>
<td>ALF</td>
<td>15</td>
<td>FRANKLIN</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Armour Oaks Senior Living Community</td>
<td>8100 Wornall Rd</td>
<td>(816) 363-5141</td>
<td>SNF</td>
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<td>JACKSON</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>00199</td>
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<tr>
<td>Arrowhead Senior Living Community</td>
<td>6100 Arrowhead Drive</td>
<td>573-302-7111</td>
<td>ALF**</td>
<td>90</td>
<td>CAMDEN</td>
<td>No</td>
<td>No</td>
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<td>Ash Grove Healthcare Facility</td>
<td>401 North Medical Dr</td>
<td>(417) 751-2575</td>
<td>SNF</td>
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<td>GREENE</td>
<td>Yes</td>
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<tr>
<td>Ashbrook - Assisted Living by Americare</td>
<td>500 Ashbrook Dr</td>
<td>(573) 756-5544</td>
<td>ALF**</td>
<td>72</td>
<td>SAINT FRANCOIS</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>18138</td>
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<tr>
<td>Ashbury Heights of Chillicothe</td>
<td>603 St Louis St</td>
<td>(660) 707-1270</td>
<td>RCF</td>
<td>12</td>
<td>LIVINGSTON</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Ashbury Heights of Fayette</td>
<td>200 Groce St</td>
<td>(660) 248-3603</td>
<td>RCF</td>
<td>12</td>
<td>HOWARD</td>
<td>No</td>
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<td>23894</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Zip Code</th>
<th>Telephone</th>
<th>Level of Care</th>
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<th>DMH Licensed</th>
<th>Region</th>
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<tr>
<td>ASHBY HEIGHTS OF FULTON</td>
<td>704 WEST CHESTNUT</td>
<td>FULTON</td>
<td>65251-1254</td>
<td>(573) 642-2015</td>
<td>RCF</td>
<td>12</td>
<td>CALLAWAY</td>
<td>No</td>
<td>No</td>
<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>65101-1824</td>
<td>(573) 634-7402</td>
<td>RCF</td>
<td>12</td>
<td>COLE</td>
<td>Yes</td>
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<td>ASHBY HEIGHTS OF LAURIE</td>
<td>299 HIGHWAY RA</td>
<td>LAURIE</td>
<td>65038-6024</td>
<td>(573) 374-0076</td>
<td>RCF</td>
<td>12</td>
<td>MORGAN</td>
<td>No</td>
<td>No</td>
<td>23915</td>
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<td>ASHBY HEIGHTS OF MONTGOMERY CITY</td>
<td>625 WEST 2ND ST</td>
<td>MONTGOMERY CITY</td>
<td>63361-1762</td>
<td>(573) 564-3386</td>
<td>RCF</td>
<td>12</td>
<td>MONTGOMERY</td>
<td>No</td>
<td>No</td>
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<tr>
<td>ASHBY HEIGHTS OF TIPTON</td>
<td>908 SOUTH PARK</td>
<td>TIPTON</td>
<td>65081-8408</td>
<td>(660) 433-6496</td>
<td>RCF</td>
<td>12</td>
<td>MONITEAU</td>
<td>No</td>
<td>No</td>
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<td>ASHLAND HEALTHCARE</td>
<td>300 SOUTH HENRY CLAY BLVD</td>
<td>ASHLAND</td>
<td>65010-9438</td>
<td>(573) 657-2877</td>
<td>SNF</td>
<td>60</td>
<td>BOONE</td>
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<td>ASHLAND VILLA - ASSISTED LIVING BY AMERICARE</td>
<td>301 SOUTH HENRY CLAY BLVD</td>
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<td>65010-9439</td>
<td>(573) 657-1920</td>
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<td>1630 RADIO HILL RD</td>
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<td>ASHTON COURT CARE AND REHABILITATION CENTRE</td>
<td>1200 WEST COLLEGE ST</td>
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<td>64068-1036</td>
<td>(816) 781-3020</td>
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<td>CLAY</td>
<td>Yes</td>
<td>No</td>
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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 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 18
County SAINT LOUIS COUNTY
Region 7 Facility Number 05586

ASSISTED LIVING AT THE MEADOWLANDS
135 MEADOWLANDS ESTATES LN
OFALLOON MO 63366-4591
Mailing Address 135 MEADOWLANDS ESTATES LN
OFALLOON MO 63366-4591
Telephone (636) 978-3600 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 86
County SAINT CHARLES
Region 5 Facility Number 26475

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) 651-0199 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 38
County CAPE GIRARDEAU
Region 2 Facility Number 19892

AURORA NURSING CENTER
1700 SOUTH HUDSON AVE
AURORA MO 65605-2717
Mailing Address 1700 S HUDSON AVE
AURORA MO 65605-2717
Telephone (417) 678-2165 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 125
County LAWRENCE
Region 1 Facility Number 00234
Medicare/Medicaid

AUTUMN LEAVES OF LEE'S SUMMIT
3101 SW 3RD STREET
LEE'S SUMMIT MO 64081-
Mailing Address 3101 SW 3RD STREET
LEE'S SUMMIT MO 64081-
Telephone 816-321-1648 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 54
County JACKSON
Region 3 Facility Number 31077
Medicare/Medicaid

AUTUMN OAKS CARING CENTER
1310 HOVIS ST
MOUNTAIN GROVE MO 65711-1219
Mailing Address 1310 HOVIS ST
MOUNTAIN GROVE MO 65711-1219
Telephone (417) 926-5128 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County WRIGHT
Region 1 Facility Number 07970
Medicare/Medicaid

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 (417) 626-8900 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 38
County JASPER
Region 1 Facility Number 20779

AUTUMN RIDGE
300 AUTUMN RIDGE DR
HERCULANEUM MO 63048-1506
Mailing Address 300 AUTUMN RIDGE DR
HERCULANEUM MO 63048-1506
Telephone (636) 931-8400 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 81
County JEFFERSON
Region 2 Facility Number 15845

AUTUMN TERRACE HEALTH & REHABILITATION
6124 RAYTOWN RD
RAYTOWN MO 64133-4007
Mailing Address 6124 RAYTOWN RD
RAYTOWN MO 64133-4007
Telephone (816) 358-8222 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 154
County JACKSON
Region 3 Facility Number 00768
Medicare/Medicaid

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Thursday, May 09, 2019
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<td>AUTUMN WOODS, INC</td>
<td>5500 NW HOUSTON LAKE DR</td>
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<td>MO</td>
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<td>AVALON GARDEN</td>
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<td>MO</td>
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<td>1441 CHARIC DR</td>
<td>WILDWOOD</td>
<td>MO</td>
<td>63021-2001</td>
<td>(636) 394-2522</td>
<td>SNF</td>
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<td>63650-4338</td>
<td>(573) 546-7429</td>
<td>Alzheimer's Unit</td>
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<td>(417) 581-2101</td>
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<td>BARATHAVEN ALZHEIMER'S SPECIAL CARE CENTER</td>
<td>1030 BARATHAVEN DR</td>
<td>Dardenne Prairie</td>
<td>MO</td>
<td>63368-8606</td>
<td>(636) 329-9160</td>
<td>Alzheimer's Unit</td>
<td>Yes</td>
<td>SAINT CHARLES</td>
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### BARNABAS ACRES
210 FRANKS LN
CAPE GIRARDEAU MO 63701-8439
Mailing Address 210 FRANKS LN
CAPE GIRARDEAU MO 63701-8439
Telephone (573) 334-7679
Level of Care: ALF
County CAPE GIRARDEAU
Region 2
Alzheimer's Unit No
Bed Capacity 56
DMH Licensed Yes
Facility Number 05130

### BARNABAS HOME, THE
1301 MONROE ST
CHILLCOTHE MO 64601-1345
Mailing Address 1301 MONROE ST
CHILLCOTHE MO 64601-1345
Telephone (660) 646-5180
Level of Care: RCF*
County LIVINGSTON
Region 4
Alzheimer's Unit No
Bed Capacity 64
DMH Licensed Yes
Facility Number 04632

### BARNABAS REDWOOD MANOR
1194 LANDON RD
BOURBON MO 65441-8218
Mailing Address 1194 LANDON RD
BOURBON MO 65441-8218
Telephone (573) 468-8150
Level of Care: RCF
County CRAWFORD
Region 6
Alzheimer's Unit No
Bed Capacity 46
DMH Licensed Yes
Facility Number 08609

### BARNES-JEWISH EXTENDED CARE
401 CORPORATE PARK DR
SAINT LOUIS MO 63105-4201
Mailing Address 401 CORPORATE PARK DR
SAINT LOUIS MO 63105-4201
Telephone (314) 725-7447
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 120
DMH Licensed Yes
Facility Number 15878

### BAYLESS BOARDING HOME
3719 SAND CREEK ROAD
FARMINGTON MO 63640-7349
Mailing Address 3719 SAND CREEK RD
FARMINGTON MO 63640-7349
Telephone (573) 747-0889
Level of Care: RCF
County SAINT FRANCOIS
Region 2 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 12
DMH Licensed Yes
Facility Number 17300

### BEACON HILL RESIDENTIAL CARE
2905 CAMPBELL
KANSAS CITY MO 64109-1417
Mailing Address 2905 CAMPBELL
KANSAS CITY MO 64109-1417
Telephone (816) 531-6168
Level of Care: RCF*
County JACKSON
Region 3
Alzheimer's Unit No
Bed Capacity 37
DMH Licensed Yes
Facility Number 00329

### BEAUTIFUL SAVIOR HOME
1003 SOUTH CEDAR ST
BELTON MO 64012-3703
Mailing Address 1003 S CEDAR ST
BELTON MO 64012-3703
Telephone (816) 331-0781
Level of Care: ALF
County CASS
Region 3 Medicare/Medicaid
Alzheimer's Unit No
Bed Capacity 55
DMH Licensed No
Facility Number 00342

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

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<td>RCF</td>
<td>500 CULLER AVE</td>
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<td>BELLEVIEW VALLEY NURSING HOME</td>
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<td>BENEDICT JOSEPH LABRE CENTER</td>
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<td>3863 CLEVELAND</td>
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<td>BENTON HOUSE OF RAYMORE</td>
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<td>2100 JOHNSTON DR</td>
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<td>BENTON HOUSE OF STALEY HILLS</td>
<td>ALF**</td>
<td>11071 N WOODLAND AVE</td>
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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<th>Region</th>
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<td>MONETT</td>
<td>BARRY</td>
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<td>(417) 235-6031</td>
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<td>BENTWOOD NURSING &amp; REHAB</td>
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<td>(314) 921-2700</td>
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<td>BERNARD CARE CENTER</td>
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<td>322 OLD STATE ROAD</td>
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<th>Region</th>
<th>Bed Capacity</th>
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<th>Level of Care</th>
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* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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* 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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Thursday, May 09, 2019
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<tr>
<td>(816) 943-0101</td>
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<tr>
<td>Yes</td>
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<tr>
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<tr>
<td>740 SOUTH HUDSON</td>
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<tr>
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<tr>
<td>Mailing Address 740 SOUTH HUDSON</td>
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<td>AURORA MO 65605-2512</td>
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<td>Telephone</td>
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<tr>
<td>(417) 678-7535</td>
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<tr>
<td>Telephone</td>
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<tr>
<td>(660) 425-7133</td>
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<tr>
<td>BOONVILLE MO 65233-2108</td>
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</tr>
<tr>
<td>(660) 882-3393</td>
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<tr>
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<tr>
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<tr>
<td>Mailing Address 338 THOMPSON</td>
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<tr>
<td>BUFFALO MO 65622-9455</td>
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<td>Telephone</td>
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<th>BRISTOL MANOR OF BUTLER</th>
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<tr>
<td>BUTLER MO 64730-2311</td>
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<tr>
<td>Mailing Address 411 S DELAWARE</td>
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<tr>
<td>BUTLER MO 64730-2311</td>
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<td>(660) 679-3661</td>
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<td>Region 3</td>
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<td>Facility Number: 18817</td>
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</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Telephone</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>County</th>
<th>Region</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>BRISTOL MANOR OF CALIFORNIA</td>
<td>605 PARKVIEW DR</td>
<td>CALIFORNIA</td>
<td>MO</td>
<td>65018</td>
<td>(573) 796-4342</td>
<td>12</td>
<td>No</td>
<td>MONTEAU</td>
<td>6</td>
<td>17401</td>
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<tr>
<td>BRISTOL MANOR OF CAMDENTON</td>
<td>75 FOURTH ST</td>
<td>CAMDENTON</td>
<td>MO</td>
<td>65020-6891</td>
<td>(573) 346-6800</td>
<td>12</td>
<td>No</td>
<td>CAMDEN</td>
<td>6</td>
<td>17914</td>
</tr>
<tr>
<td>BRISTOL MANOR OF CAMERON</td>
<td>920 NORTH HARRIS</td>
<td>CAMERON</td>
<td>MO</td>
<td>64429-1145</td>
<td>(816) 632-6133</td>
<td>12</td>
<td>No</td>
<td>DEKALB</td>
<td>4</td>
<td>18295</td>
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<tr>
<td>BRISTOL MANOR OF CARROLLTON</td>
<td>1016 EAST 10TH ST</td>
<td>CARROLLTON</td>
<td>MO</td>
<td>64633-9348</td>
<td>(660) 542-2349</td>
<td>12</td>
<td>No</td>
<td>CARROLL</td>
<td>4</td>
<td>18316</td>
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<tr>
<td>BRISTOL MANOR OF CARTHAGE</td>
<td>2131 SOUTH RIVER AVE</td>
<td>CARTHAGE</td>
<td>MO</td>
<td>64836-3350</td>
<td>(417) 358-9788</td>
<td>12</td>
<td>No</td>
<td>JASPER</td>
<td>1</td>
<td>20858</td>
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<tr>
<td>BRISTOL MANOR OF CENTRALIA</td>
<td>610 NORTH JEFFERSON ST</td>
<td>CENTRALIA</td>
<td>MO</td>
<td>65240-1178</td>
<td>(573) 682-5913</td>
<td>12</td>
<td>No</td>
<td>BOONE</td>
<td>6</td>
<td>18286</td>
</tr>
<tr>
<td>BRISTOL MANOR OF CLINTON</td>
<td>1402 EAST FRANKLIN</td>
<td>CLINTON</td>
<td>MO</td>
<td>64735-1768</td>
<td>(660) 885-8391</td>
<td>12</td>
<td>No</td>
<td>HENRY</td>
<td>1</td>
<td>16656</td>
</tr>
<tr>
<td>BRISTOL MANOR OF ELDON</td>
<td>1201 EAST NORTH ST</td>
<td>ELDON</td>
<td>MO</td>
<td>65026-2651</td>
<td>(573) 392-1200</td>
<td>12</td>
<td>No</td>
<td>MILLER</td>
<td>6</td>
<td>17701</td>
</tr>
<tr>
<td>BRISTOL MANOR OF ELSBERRY</td>
<td>1402 RIVERVIEW DR</td>
<td>ELSBERRY</td>
<td>MO</td>
<td>63343-1612</td>
<td>(573) 898-5955</td>
<td>12</td>
<td>No</td>
<td>LINCOLN</td>
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<td>20015</td>
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</table>

* 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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BRISTOL MANOR OF FULTON
750 SIGN PAINTER ROAD
FULTON  MO  65251-2514
Mailing Address  750 SIGN PAINTER RD
FULTON  MO  65251-2514
Telephone  (573) 642-7557  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  CALLAWAY  DMH Licensed  No
Region  6  Facility Number  18575

BRISTOL MANOR OF HOLDEN
501 WEST SECOND
HOIEN  MO  64040-1205
Mailing Address  501 WEST SECOND
HOLDEN  MO  64040-1205
Telephone  (816) 732-6789  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  JOHNSON  DMH Licensed  No
Region  3  Facility Number  17951

BRISTOL MANOR OF JEFFERSON CITY
510 KENSINGTON PARK
JEFFERSON CITY  MO  65109-6247
Mailing Address  510 KENSINGTON PARK
JEFFERSON CITY  MO  65109-6247
Telephone  (573) 761-5772  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  COLE  DMH Licensed  No
Region  6  Facility Number  20116

BRISTOL MANOR OF LA MONTE
910 SOUTH MAIN ST
LA MONTE  MO  65337-1250
Mailing Address  910 SOUTH MAIN ST
LA MONTE  MO  65337-1250
Telephone  (660) 347-5757  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  PETTIS  DMH Licensed  No
Region  6  Facility Number  21011

BRISTOL MANOR OF LAMAR
603 EAST 17TH ST
LAMAR  MO  64759-2303
Mailing Address  603 EAST 17TH ST
LAMAR  MO  64759-2303
Telephone  (417) 682-6762  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  BARTON  DMH Licensed  No
Region  1  Facility Number  18951

BRISTOL MANOR OF LEXINGTON
2615 MAIN ST
LEXINGTON  MO  64067-1974
Mailing Address  2615 MAIN ST
LEXINGTON  MO  64067-1974
Telephone  (660) 259-6655  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  LAFAYETTE  DMH Licensed  No
Region  3  Facility Number  17543

BRISTOL MANOR OF LINCOLN
204 SOUTH HIGHWAY 65
LINCOLN  MO  65338-2587
Mailing Address  204 S HWY 65
LINCOLN  MO  65338-2587
Telephone  (660) 547-2580  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  BENTON  DMH Licensed  No
Region  6  Facility Number  18092

BRISTOL MANOR OF MACON
707 RANCHLAND DR
MACON  MO  63552-1994
Mailing Address  707 RANCHLAND DR
MACON  MO  63552-1994
Telephone  (660) 385-3020  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  MACON  DMH Licensed  No
Region  5  Facility Number  17865

BRISTOL MANOR OF MARCELINE
102 EAST HAYDEN
MARCELINE  MO  64658-2003
Mailing Address  102 EAST HAYDEN
MARCELINE  MO  64658-2003
Telephone  (660) 376-2210  Alzheimer's Unit  No
Level of Care:  RCF  Bed Capacity  12
County  LINN  DMH Licensed  No
Region  5  Facility Number  17764

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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>Facility Number</th>
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<tbody>
<tr>
<td>BRISTOL MANOR OF MARYVILLE</td>
<td>323 EAST SUMMIT DR</td>
<td>MARYVILLE</td>
<td>NODAWAY</td>
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<td>BRISTOL MANOR OF MONROE CITY</td>
<td>1017 EAST LAWN ST</td>
<td>MONROE CITY</td>
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<td>No</td>
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<tr>
<td>BRISTOL MANOR OF NEVADA</td>
<td>401 EAST WALNUT</td>
<td>NEVADA</td>
<td>VERNON</td>
<td>12</td>
<td>No</td>
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<td>18471</td>
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<td>BRISTOL MANOR OF OAK GROVE</td>
<td>300 NORTH AUSTIN</td>
<td>OAK GROVE</td>
<td>JACKSON</td>
<td>12</td>
<td>No</td>
<td>No</td>
<td>16552</td>
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<tr>
<td>BRISTOL MANOR OF ODESSA</td>
<td>115 SOUTH 5TH ST</td>
<td>ODESSA</td>
<td>LAFAYETTE</td>
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<td>BRISTOL MANOR OF PACIFIC</td>
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<td>FRANKLIN</td>
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<td>BRISTOL MANOR OF PALMYRA</td>
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<td>No</td>
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<td>BRISTOL MANOR OF PRINCETON</td>
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<td>PRINCETON</td>
<td>MERCER</td>
<td>12</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Mailing Address</th>
<th>Telephone</th>
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<th>Bed Capacity</th>
<th>County</th>
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<tr>
<td>BRISTOL MANOR OF RAYMORE</td>
<td>604 EAST SUNRISE DR RAYMORE MO 64083-9037</td>
<td>(816) 322-6782</td>
<td>RCF</td>
<td>12</td>
<td>CASS</td>
<td>No</td>
<td>19730</td>
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<tr>
<td>BRISTOL MANOR OF REPUBLIC</td>
<td>634 EAST HWAY 174 REPUBLIC MO 65738-1124</td>
<td>(417) 732-8998</td>
<td>RCF</td>
<td>12</td>
<td>GREENE</td>
<td>No</td>
<td>20841</td>
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<tr>
<td>BRISTOL MANOR OF SALISBURY</td>
<td>102 NORTH WILLIE ST SALISBURY MO 65281-1458</td>
<td>(660) 388-5728</td>
<td>RCF</td>
<td>12</td>
<td>CHARITON</td>
<td>No</td>
<td>18325</td>
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<tr>
<td>BRISTOL MANOR OF SEDALIA</td>
<td>1208 EAST 24TH ST SEDALIA MO 65301-8231</td>
<td>(660) 827-2028</td>
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<td>PETTIS</td>
<td>No</td>
<td>15808</td>
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<tr>
<td>BRISTOL MANOR OF SMITHVILLE</td>
<td>1502 SOUTH COMMERCIAL SMITHVILLE MO 64089-8474</td>
<td>(816) 532-4490</td>
<td>RCF</td>
<td>12</td>
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<td>No</td>
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<tr>
<td>BRISTOL MANOR OF STOVER</td>
<td>607 WEST 4TH ST STOVER MO 65078-0807</td>
<td>(573) 377-4519</td>
<td>RCF</td>
<td>12</td>
<td>MORGAN</td>
<td>No</td>
<td>18863</td>
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<tr>
<td>BRISTOL MANOR OF TRENTON</td>
<td>1701 EAST 28TH ST TRENTON MO 64683-1177</td>
<td>(660) 359-5599</td>
<td>RCF</td>
<td>12</td>
<td>GRUNDY</td>
<td>No</td>
<td>18597</td>
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<tr>
<td>BRISTOL MANOR OF UNIONVILLE</td>
<td>715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE MO 63565-1142</td>
<td>(660) 947-2151</td>
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<tr>
<td>BRISTOL MANOR OF WARRENSBURG</td>
<td>603 CREACH WARRENSBURG MO 64093-1994</td>
<td>(660) 747-8319</td>
<td>RCF</td>
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<td>JOHNSON</td>
<td>No</td>
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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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<td>1600 ESTATE DR</td>
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<td>BRISTOL MANOR OF WASHINGTON</td>
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<td>FRANKLIN</td>
<td>12</td>
<td>Yes</td>
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<td>Yes</td>
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<td>BRISTOL MANOR OF WEBB CITY</td>
<td>1803 NORTH MAIN, HIGHWAY D</td>
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<td>12</td>
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<td>840 W NORTHVIEW</td>
<td>WENTZVILLE</td>
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<td>12</td>
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<td>BRISTOL MANOR OF WILLARD</td>
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<td>104 EAST ELM ST</td>
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<td>CREVE COEUR</td>
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<td>No</td>
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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
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<th>Region</th>
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<th>Alzheimer's Unit</th>
<th>Medicare/Medicaid</th>
<th>DMH Licensed</th>
<th>Telephone</th>
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<td>BROOKDALE WEST COUNTY</td>
<td>785 HENRY AVE</td>
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<td>MO</td>
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<td>No</td>
<td>(636) 527-5700</td>
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<td>SAINT LOUIS COUNTY</td>
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<td>BROOKDALE WORNALL PLACE</td>
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<td>No</td>
<td>No</td>
<td>(816) 941-7777</td>
<td>ALF**</td>
<td>JACKSON</td>
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<td>BROOKE HAVEN HEALTHCARE</td>
<td>1410 NORTH KENTUCKY AVE</td>
<td>WEST PLAINS</td>
<td>MO</td>
<td>1</td>
<td>120</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>(417) 256-7975</td>
<td>SNF</td>
<td>HOWELL</td>
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<td>BROOKHaven NURSING &amp; REHAB</td>
<td>3405 WEST MT VERNON</td>
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<td>No</td>
<td>No</td>
<td>(417) 874-9600</td>
<td>SNF</td>
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<td>BROOKING PARK</td>
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<td>No</td>
<td>(314) 576-5545</td>
<td>ALF**</td>
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<td>BROOKING PARK</td>
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<td>No</td>
<td>(314) 576-5545</td>
<td>ALF**</td>
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<tr>
<td>BROOKSIDE MANOR RESIDENTIAL CARE, LLC</td>
<td>2434 HIGHWAY H</td>
<td>FARMINGTON</td>
<td>MO</td>
<td>2</td>
<td>97</td>
<td>No</td>
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<td>Yes</td>
<td>(573) 756-6434</td>
<td>RCF*</td>
<td>SAINT FRANCOIS</td>
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<td>BRUNSswick NURSING &amp; REHAB</td>
<td>721 W HARRISON ST</td>
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<td>MO</td>
<td>5</td>
<td>60</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>(660) 548-3182</td>
<td>SNF</td>
<td>CHARITON</td>
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<td>BUffalo PRAIRIE CENTER FOR REHAB AND HEALTHCARE</td>
<td>631 WEST MAIN ST</td>
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<td>MO</td>
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<td>No</td>
<td>No</td>
<td>(417) 345-5422</td>
<td>SNF</td>
<td>DALLAS</td>
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Thursday, May 09, 2019
| Facility Name                        | Address                          | City               | State | Phone                       | Level of Care | Bed Capacity | Facility Number | DMH Licensed | County | Region | Bed Capacity | Alzheimer's Unit | County | Region | Bed Capacity | Alzheimer's Unit | County | Region | Bed Capacity | Alzheimer's Unit | County | Region | Bed Capacity | Alzheimer's Unit | County | Region | Bed Capacity | Alzheimer's Unit |
|-------------------------------------|----------------------------------|--------------------|-------|----------------------------|---------------|--------------|----------------|--------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|---------|---------|--------------|------------------|
| BUTLER CENTER FOR REHABILITATION AND HEALTHCARE | 416 SOUTH HIGH ST | BUTLER | MO | 64730-1827 | Telephone (660) 679-6158 | Level of Care: SNF | Bed Capacity: 98 | Facility Number: 08627 | DMH Licensed | No | BATES | Medicare/Medicaid | No | | | |
| BUTTERFIELD RESIDENTIAL CARE CENTER | 1120 NORTH BUTTERFIELD RD | BOLIVAR | MO | 65613-1000 | Telephone (417) 326-5200 | Level of Care: RCF* | Bed Capacity: 66 | Facility Number: 14436 | DMH Licensed | No | POLK | Region: 1 | No | | | |
| BUTTERFIELD RESIDENTIAL CARE CENTER | 1120 NORTH BUTTERFIELD RD | BOLIVAR | MO | 65613-1000 | Telephone (417) 326-5200 | Level of Care: RCF | Bed Capacity: 24 | Facility Number: 14436 | DMH Licensed | No | POLK | Region: 1 | No | | | |
| BUTTERFLY HAVEN | 11500 CAMPBELL ST | KANSAS CITY | MO | 64131-3829 | Telephone (816) 941-2836 | Level of Care: RCF | Bed Capacity: 12 | Facility Number: 18207 | DMH Licensed | Yes | JACKSON | Region: 3 | No | | | |
| CALIFORNIA CARE CENTER | 1106 SOUTH OAK, ROUTE 3 | CALIFORNIA | MO | 65018-1462 | Telephone (573) 796-3127 | Level of Care: SNF | Bed Capacity: 60 | Facility Number: 10437 | DMH Licensed | No | MONITEAU | Region: 6 | Medicare/Medicaid | No | | | |
| CAMDENTON WINDSOR ESTATES | 2042 N BUSINESS ROUTE 5 | CAMDENTON | MO | 65020-2611 | Telephone (573) 346-5654 | Level of Care: SNF | Bed Capacity: 82 | Facility Number: 08688 | DMH Licensed | No | CAMDEN | Region: 6 | Medicare/Medicaid | No | | | |
| CAMELOT NURSING AND REHABILITATION CENTER | 705 GRAND CANYON DR | FARMINGTON | MO | 63640-2161 | Telephone (573) 756-8911 | Level of Care: SNF | Bed Capacity: 97 | Facility Number: 00978 | DMH Licensed | No | SAINT FRANCOIS | Region: 2 | Medicare/Medicaid | No | | | |
| CANDLELIGHT LODGE RETIREMENT CENTER | 1406 BUSINESS LOOP 70 WEST | COLUMBIA | MO | 65202-1324 | Telephone (573) 449-5287 | Level of Care: ALF | Bed Capacity: 37 | Facility Number: 01013 | DMH Licensed | No | BOONE | Region: 6 | No | | | |
| CANDLELIGHT LODGE RETIREMENT CENTER | 1406 BUSINESS LOOP 70 WEST | COLUMBIA | MO | 65202-1324 | Telephone (573) 449-5287 | Level of Care: ALF** | Bed Capacity: 75 | Facility Number: 01013 | DMH Licensed | No | BOONE | Region: 6 | No | | | |

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Phone Number</th>
<th>Telephone Type</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>Region</th>
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<td>Cape Albeon</td>
<td>(636) 861-3200</td>
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<td>Yes</td>
<td>100</td>
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<td>Capetown Assisted Living</td>
<td>(573) 334-4855</td>
<td>Alzheimer's Unit</td>
<td>Yes</td>
<td>48</td>
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<td>No</td>
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<td>Caregivers Inn</td>
<td>(636) 240-7979</td>
<td>Alzheimer's Unit</td>
<td>Yes</td>
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<td>Carl Junction Residential Care</td>
<td>(417) 782-5659</td>
<td>Alzheimer's Unit</td>
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<td>Carnegie Village Rehabilitation &amp; Health Care Center</td>
<td>(816) 348-8815</td>
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<td>Carnegie Village Senior Living Community</td>
<td>(816) 322-8444</td>
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<td>Carondelet Manor</td>
<td>(816) 941-1300</td>
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<td>(314) 353-9552</td>
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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
DMH Licensed No
Region 4
Facility Number 01061

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: SNF
Bed Capacity 130
County BUCHANAN
DMH Licensed No
Region 4
Medicare/Medicaid
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
Region 3
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 130
County SAINT LOUIS CITY
DMH Licensed No
Region 7
Medicare/Medicaid
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 63
County CARROLL
DMH Licensed No
Region 4
Medicare/Medicaid
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
Region 1
Medicare/Medicaid
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
Region 1
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
Region 1
Medicare/Medicaid
Facility Number 01097

CASTLEPARKE #2
319 PIONEER TRAIL DR
JEFFERSON CITY MO 65109-1508
Mailing Address 319 PIONEER TRAIL DR
JEFFERSON CITY MO 65109-1508

Telephone (573) 636-5300
Level of Care: RCF
Bed Capacity 12
County COLE
DMH Licensed No
Region 6
Facility Number 25245

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<th>Region</th>
<th>Bed Capacity</th>
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<td>CEDARHURST OF COLUMBIA</td>
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<td>CEDARHURST OF SEDALIA</td>
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<td>1800 FIRST CAPITOL DRIVE</td>
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<td>200 WEST RUTH EWING RD</td>
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<td>CENTRAL GARDENS INC</td>
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<td>OZARK</td>
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| **CENTURY PINES ASSISTED LIVING** | 709 EAST MCCRACKEN RD | 58 | MO 65721-9499 | (417) 581-7278 | Alzheimer's Unit | No |
| Mailing Address | 709 EAST MCCRACKEN RD | County | CHRISTIAN | Bed Capacity | 58 |
| OZARK | Region | 1 | DMH Licensed | Yes |

| **CHAFFEE NURSING CENTER** | 12273 STATE HIGHWAY 77 | 71 | MO 63740-8219 | (573) 887-3615 | Alzheimer's Unit | No |
| Mailing Address | 12273 STATE HIGHWAY 77 | County | SCOTT | Bed Capacity | 71 |
| CHAFFEE | Region | 2 | DMH Licensed | No |

| **CHARLTON PARK HEALTH CARE CENTER** | 902 MANOR DR | 10 | MO 65281-1236 | (660) 388-6486 | Alzheimer's Unit | No |
| Mailing Address | 902 MANOR DR | County | CHARITON | Bed Capacity | 10 |
| SALISBURY | Region | 5 | DMH Licensed | No |

| **CHARLESTON MANOR** | 1220 EAST MARSHALL | 120 | MO 63834-1349 | (573) 683-3721 | Alzheimer's Unit | Yes |
| Mailing Address | 1220 EAST MARSHALL | County | MISSISSIPPI | Bed Capacity | 120 |
| CHARLESTON | Region | 2 | DMH Licensed | No |

| **CHARTER SENIOR LIVING AT ST LOUIS HILLS** | 6543 CHIPPEWA ST | 181 | MO 63109-4100 | (314) 647-6600 | Alzheimer's Unit | Yes |
| Mailing Address | 6543 CHIPPEWA ST | County | SAINT LOUIS CITY | Bed Capacity | 181 |
| SAINT LOUIS | Region | 7 | DMH Licensed | No |

| **CHATEAU ANN MARIE** | 7700 MINNESOTA AVE | 22 | MO 63111-3336 | (314) 449-1497 | Alzheimer's Unit | No |
| Mailing Address | 7700 MINNESOTA AVE | County | SAINT LOUIS CITY | Bed Capacity | 22 |
| SAINT LOUIS | Region | 7 | DMH Licensed | Yes |

| **CHATEAU GIRARDEAU** | 3120 INDEPENDENCE ST | 55 | MO 63703-5043 | (573) 335-1281 | Alzheimer's Unit | No |
| Mailing Address | 3120 INDEPENDENCE ST | County | CAPE GIRARDEAU | Bed Capacity | 55 |
| CAPE GIRARDEAU | Region | 2 | DMH Licensed | No |

| **CHATEAU GIRARDEAU** | 3120 INDEPENDENCE ST | 75 | MO 63703-5043 | (573) 335-1281 | Alzheimer's Unit | Yes |
| Mailing Address | 3120 INDEPENDENCE ST | County | CAPE GIRARDEAU | Bed Capacity | 75 |
| CAPE GIRARDEAU | Region | 2 | DMH Licensed | No |

| **CHEROKEE RESIDENTIAL CARE ACQUISITION, LLC** | 3409 MISSOURI AVE | 30 | MO 63118-3236 | (314) 771-8360 | Alzheimer's Unit | No |
| Mailing Address | 3409 MISSOURI AVE | County | SAINT LOUIS CITY | Bed Capacity | 30 |
| SAINT LOUIS | Region | 7 | DMH Licensed | Yes |

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

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Thursday, May 09, 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  Medicaid  Facility Number: 14102

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

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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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: RCF*
Bed Capacity 22
County CLARK
DMH Licensed No
Region 5
Facility Number 01480

CLARK'S MOUNTAIN NURSING CENTER
2100 BARNES
PIEDMONT MO 63957-1008
Mailing Address 2100 BARNES
PIEDMONT MO 63957-1008
Telephone (573) 223-4297 Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 91
County WAYNE
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 17527

CLARU DEVILLE NURSING CENTER
105 SPRUCE ST
FREDERICKTOWN MO 63645-1002
Mailing Address 105 SPRUCE ST
FREDERICKTOWN MO 63645-1002
Telephone (573) 783-3993 Alzheimer's Unit Yes
Level of Care: SNF
Bed Capacity 98
County MADISON
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 19913

CLEARVIEW NURSING CENTER
430 SALCEDO ROAD
SIKESTON MO 63801-4802
Mailing Address PO BOX 707
SIKESTON MO 63801-0707
Telephone (573) 471-2565 Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 98
County SCOTT
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 01318

CLINTON HEALTHCARE AND REHABILITATION CENTER
1009 EAST OHIO
CLINTON MO 64735-2455
Mailing Address 1009 EAST OHIO
CLINTON MO 64735-2455
Telephone (660) 885-5571 Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 120
County HENRY
DMH Licensed No
Region 1 Medicare/Medicaid
Facility Number 01318

COATES STREET COMFORT HOUSE
612 WEST COATES ST
MOBERLY MO 65270-1319
Mailing Address PO BOX 781
MOBERLY MO 65270-0781
Telephone (660) 263-6759 Alzheimer's Unit No
Level of Care: RCF
Bed Capacity 20
County RANDOLPH
DMH Licensed Yes
Region 5 Medicare/Medicaid
Facility Number 08220

COLLIER CARE HOME, INC
3001 NW VESPER ST
BLUE SPRINGS MO 64015-3104
Mailing Address 3001 NW VESPER ST
BLUE SPRINGS MO 64015-3104
Telephone (816) 229-6231 Alzheimer's Unit No
Level of Care: RCF*
Bed Capacity 15
County JACKSON
DMH Licensed Yes
Region 3 Medicare/Medicaid
Facility Number 01591

COLONIAL HOME, THE
102 SUMMIT ST
DONIPHAN MO 63935-1328
Mailing Address 102 SUMMIT ST
DONIPHAN MO 63935-1328
Telephone (573) 996-4283 Alzheimer's Unit No
Level of Care: ALF**
Bed Capacity 31
County RIPLEY
DMH Licensed No
Region 2 Medicare/Medicaid
Facility Number 01610

COLONIAL HOUSE OF CRYSTAL CITY
26 MISSISSIPPI AVE
CRYSTAL CITY MO 63019-1817
Mailing Address PO BOX 461
CRYSTAL CITY MO 63019-1817
Telephone (636) 937-1000 Alzheimer's Unit No
Level of Care: RCF
Bed Capacity 52
County JEFFERSON
DMH Licensed Yes
Region 2 Medicare/Medicaid
Facility Number 22112

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Thursday, May 09, 2019
**COLONIAL HOUSE OF FESTUS I**

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
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
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
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
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
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
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
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 MANOR**

208 WEST COLUMBIA ST
FARMINGTON MO 63640-1705
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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Thursday, May 09, 2019
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<th>Community Name</th>
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<th>County</th>
<th>Region</th>
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<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
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Thursday, May 09, 2019
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<th>Facility Name</th>
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Thursday, May 09, 2019
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<th>County</th>
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Thursday, May 09, 2019
CREVE COEUR MANOR
1127 TIMBER RUN DR
SAINT LOUIS MO 63146-4482
Mailing Address 1127 TIMBER RUN DR
SAINT LOUIS MO 63146-4482
Telephone (314) 434-8361 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 149
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 02417

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

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

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

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

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

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

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

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

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Thursday, May 09, 2019
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Thursday, May 09, 2019
**EASTVIEW MANOR CARE CENTER**  
1622 EAST 28TH ST  
TRENTON MO 64683-1104  
Mailing Address: 1622 EAST 28TH ST  
TRENTON MO 64683-1104  
Telephone: (660) 359-2251  
Level of Care: SNF  
County: GRUNDY  
Region: 4 Medicare/Medicaid  
Alzheimer's Unit: No  
Bed Capacity: 90  
DMH Licensed: No  
DMH Facility Number: 18267

**EDGEOOD MANOR CENTER FOR REHAB AND HEALTHCARE**  
11900 JESSICA LN  
RAYTOWN MO 64138-2649  
Mailing Address: 11900 JESSICA LN  
RAYTOWN MO 64138-2649  
Telephone: (816) 358-7858  
Level of Care: SNF  
County: JACKSON  
Region: 3 Medicare/Medicaid  
Alzheimer's Unit: No  
Bed Capacity: 66  
DMH Licensed: No  
DMH Facility Number: 14119

**EL DORADO SPRINGS RESIDENTIAL CARE**  
805 NORTH JACKSON ST  
EL DORADO SPRINGS MO 64744-2912  
Mailing Address: 805 NORTH JACKSON ST  
EL DORADO SPRINGS MO 64744-2912  
Telephone: (417) 876-4278  
Level of Care: RCF  
County: CEDAR  
Region: 1  
DMH Licensed: Yes  
DMH Facility Number: 12621

**ELDERHAUS INN**  
125 ANNA AVE, #18  
TROY MO 63379-2402  
Mailing Address: 125 ANNA AVE, #18  
TROY MO 63379-2402  
Telephone: (636) 462-6979  
Level of Care: RCF  
County: LINCOLN  
Region: 5  
DMH Licensed: Yes  
DMH Facility Number: 16992

**ELDERHAUS INN #19**  
125 ANNA AVE, #19  
TROY MO 63379-2402  
Mailing Address: 125 ANNA AVE, #19  
TROY MO 63379-2402  
Telephone: (636) 462-6979  
Level of Care: RCF  
County: LINCOLN  
Region: 5  
DMH Licensed: Yes  
DMH Facility Number: 18973

**ELDON NURSING & REHAB**  
1001 E NORTH ST  
ELDON MO 65026-2634  
Mailing Address: 1001 E NORTH ST  
ELDON MO 65026-2634  
Telephone: (573) 392-3164  
Level of Care: SNF  
County: MILLER  
Region: 6 Medicare/Medicaid  
Alzheimer's Unit: Yes  
Bed Capacity: 90  
DMH Licensed: No  
DMH Facility Number: 06139

**ELIZABETH HOUSE**  
12284 DE PAUL DR  
BRIDGETON MO 63044-2508  
Mailing Address: 12284 DE PAUL DR  
BRIDGETON MO 63044-2508  
Telephone: (314) 209-8814  
Level of Care: SNF  
County: SAINT LOUIS COUNTY  
Region: 7  
Alzheimer's Unit: No  
Bed Capacity: 54  
DMH Licensed: No  
DMH Facility Number: 22316

**ELSBERRY MISSOURI HEALTH CARE CENTER**  
1827 HIGHWAY B  
ELSBERRY MO 63343-3126  
Mailing Address: 1827 HWY B  
ELSBERRY MO 63343-3126  
Telephone: (573) 898-2880  
Level of Care: SNF  
County: LINCOLN  
Region: 5 Medicare/Medicaid  
Alzheimer's Unit: No  
Bed Capacity: 56  
DMH Licensed: No  
DMH Facility Number: 02336

**ESSEX BY BRISTOL, THE**  
301 EAST 3RD  
SEDALIA MO 65301-4335  
Mailing Address: 301 EAST 3RD  
SEDALIA MO 65301-4335  
Telephone: (660) 829-1758  
Level of Care: RCF  
County: PETTIS  
Region: 6  
Alzheimer's Unit: No  
Bed Capacity: 24  
DMH Licensed: No  
DMH Facility Number: 23020

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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
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<td>402 REDBUD</td>
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<td>64020-8358</td>
<td>(660) 463-0200</td>
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<td>No</td>
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<td>ESSEX OF GRAIN VALLEY, THE</td>
<td>401 SOUTHWEST ROCK CREEK LN</td>
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<td>64029-8460</td>
<td>(816) 443-3992</td>
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<td>JACKSON</td>
<td>No</td>
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<td>ESSEX OF LEBANON, THE</td>
<td>1316 DEADRA DR</td>
<td>LEBANON</td>
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<td>65536-4609</td>
<td>(417) 532-4863</td>
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<td>1109 OLD FARM RD WEST</td>
<td>MEXICO</td>
<td>MO</td>
<td>65265-3250</td>
<td>(573) 581-5223</td>
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<td>AUDRAIN</td>
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<td>65721-7637</td>
<td>(417) 485-4185</td>
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<td>63775-1359</td>
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<td>610 PRIGGE ROAD</td>
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<td>(314) 741-9393</td>
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<td>2115 KAPPEL DR</td>
<td>SAINT LOUIS</td>
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<td>63136-4115</td>
<td>(314) 867-7474</td>
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<td>EXCELSIOR SPRINGS HOSPITAL</td>
<td>1700 RAINBOW BLVD</td>
<td>EXCELSIOR SPRINGS</td>
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<td>64024-1182</td>
<td>(816) 630-6081</td>
<td>RCF*</td>
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Thursday, May 09, 2019
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<td>Family Partners Home LLC</td>
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<td>Farmington Manor</td>
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FAYETTE CARING CENTER
501 SOUTH PARK
FAYETTE MO 65248-8952
Mailing Address 501 S PARK
FAYETTE MO 65248-8952
Telephone (660) 248-3371 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County HOWARD DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 10870

FERNDALE, INC
15677 COUNTY RD 2430
SAINT JAMES MO 65599-8210
Mailing Address 15677 COUNTY RD 2430
SAINT JAMES MO 65599-8210
Telephone (573) 265-3344 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 32
County PHELPS DMH Licensed Yes
Region 6 Facility Number 02526

FESTUS MANOR
627 WESTWOOD DR S
FESTUS MO 63028-2062
Mailing Address 627 WESTWOOD DR S
FESTUS MO 63028-2062
Telephone (636) 931-9066 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 150
County JEFFERSON DMH Licensed No
Region 2 Facility Number 02546

FESTUS REST HOME
705 MOORE ST
FESTUS MO 63028-1339
Mailing Address PO BOX 51
FESTUS MO 63028-0051
Telephone (636) 937-7125 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 20
County JEFFERSON DMH Licensed Yes
Region 2 Facility Number 02555

FIESER NURSING CENTER
404 MAIN ST
FENTON MO 63026-4107
Mailing Address 404 MAIN ST
FENTON MO 63026-4107
Telephone (636) 343-4344 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 60
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 02569

FLORISSANT VALLEY HEALTH & REHABILITATION CENTER
1200 GRAHAM RD
FLORISSANT MO 63031-8015
Mailing Address 1200 GRAHAM RD
FLORISSANT MO 63031-8015
Telephone (314) 838-6555 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 98
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 00154

FORSYTH CARE CENTER
477 COY BLVD
FORSYTH MO 65653-5132
Mailing Address PO BOX 640
FORSYTH MO 65653-0640
Telephone (417) 546-6337 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County TANEY DMH Licensed No
Region 1 Facility Number 18870

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

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

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Thursday, May 09, 2019
### FOUNTAINBLEAU LODGE

- **Telephone:** (573) 335-1999
- **Level of Care:** SNF
- **County:** Cape Girardeau
- **Region:** 2
- **Bed Capacity:** 33
- **DMH Licensed:** No
- **Facility Number:** 12751

**Mailing Address:** 2001 North Kingshighway

**City:** Cape Girardeau

**State:** MO

**Zip Code:** 63701-2127

### FOUNTAINBLEAU NURSING CENTER

- **Telephone:** (636) 937-3500
- **Level of Care:** SNF
- **County:** Jefferson
- **Region:** 2
- **Bed Capacity:** 106
- **DMH Licensed:** No
- **Facility Number:** 17080

**Mailing Address:** PO Box 700

**City:** Festus

**State:** MO

**Zip Code:** 63028-4107

### FOUNTAINS OF WEST COUNTY AL, LLC THE

- **Telephone:** (636) 220-1660
- **Level of Care:** ALF**
- **County:** Saint Louis County
- **Region:** 7
- **Bed Capacity:** 80
- **DMH Licensed:** Yes
- **Facility Number:** 29435

**Mailing Address:** 15822 Clayton Rd

**City:** Ellisville

**State:** MO

**Zip Code:** 63011-2240

### FOUR SEASONS ASSISTED LIVING

- **Telephone:** (636) 366-4231
- **Level of Care:** ALF**
- **County:** Lincoln
- **Region:** 5
- **Bed Capacity:** 30
- **DMH Licensed:** Yes
- **Facility Number:** 02624

**Mailing Address:** 230 Railroad St

**City:** Moscow Mills

**State:** MO

**Zip Code:** 63362-1600

### FOUR SEASONS LIVING CENTER

- **Telephone:** (660) 826-8803
- **Level of Care:** SNF
- **County:** Pettis
- **Region:** 6
- **Bed Capacity:** 239
- **DMH Licensed:** Yes
- **Facility Number:** 00836

**Mailing Address:** 2800 Highway TT

**City:** Sedalia

**State:** MO

**Zip Code:** 65301-1410

### FOUR SEASONS RCF I

- **Telephone:** (636) 366-4231
- **Level of Care:** RCF
- **County:** Lincoln
- **Region:** 5
- **Bed Capacity:** 23
- **DMH Licensed:** Yes
- **Facility Number:** 02624

**Mailing Address:** 220 Railroad St

**City:** Moscow Mills

**State:** MO

**Zip Code:** 63362-1600

### FOXBERRY TERRACE - ASSISTED LIVING BY AMERICARE

- **Telephone:** (417) 625-1000
- **Level of Care:** ALF**
- **County:** Jasper
- **Region:** 1
- **Bed Capacity:** 46
- **DMH Licensed:** No
- **Facility Number:** 25428

**Mailing Address:** 4316 North St Louis Ave

**City:** Webb City

**State:** MO

**Zip Code:** 64870-9550

### FOXWOOD SPRINGS LIVING CENTER

- **Telephone:** (816) 331-3111
- **Level of Care:** SNF
- **County:** Cass
- **Region:** 3
- **Bed Capacity:** 108
- **DMH Licensed:** No
- **Facility Number:** 02649

**Mailing Address:** 1500 West Foxwood Dr

**City:** Raymore

**State:** MO

**Zip Code:** 64083-9347

### FOXWOOD SPRINGS LIVING CENTER

- **Telephone:** (816) 331-3111
- **Level of Care:** ALF**
- **County:** Cass
- **Region:** 3
- **Bed Capacity:** 62
- **DMH Licensed:** No
- **Facility Number:** 02649

**Mailing Address:** 1500 West Foxwood Dr

**City:** Raymore

**State:** MO

**Zip Code:** 64083-9347

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<td>CAPE GIRARDEAU 429 N FREDERICK ST</td>
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<td>12458</td>
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<table>
<thead>
<tr>
<th>GOOD SAMARITAN CARE CENTER</th>
<th>403 WEST MAIN ST</th>
<th>Telephone</th>
<th>(660) 668-4515</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 72</th>
<th>County: BENTON</th>
<th>DMH Licensed: No</th>
<th>Region: MO</th>
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<tbody>
<tr>
<td>COLE CAMP</td>
<td>MO 65325-1144</td>
<td>Mailing Address: 403 WEST MAIN ST</td>
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<tr>
<td>GOOD SHEPHERD CARE CENTER</td>
<td>1101 WEST CLAY RD</td>
<td>Telephone</td>
<td>(573) 378-5411</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 120</td>
<td>County: MORGAN</td>
<td>DMH Licensed: No</td>
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<td>VERSAILLES</td>
<td>MO 65084-1177</td>
<td>Mailing Address: 1101 WEST CLAY RD</td>
<td>VERSAILLES</td>
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<tr>
<td>GOOD SHEPHERD COMMUNITY CARE AND REHABILITATION</td>
<td>200 WEST 12TH ST</td>
<td>Telephone</td>
<td>(417) 232-4571</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 69</td>
<td>County: DADE</td>
<td>DMH Licensed: No</td>
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<td>LOCKWOOD</td>
<td>MO 65682-8337</td>
<td>Mailing Address: 200 WEST 12TH ST</td>
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<td>GOOD SHEPHERD RESIDENTIAL CARE FACILITY</td>
<td>200 WEST 12TH</td>
<td>Telephone</td>
<td>(417) 232-4571</td>
<td>Level of Care: RCF*</td>
<td>Bed Capacity: 20</td>
<td>County: DADE</td>
<td>DMH Licensed: No</td>
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<tr>
<td>GOWER CONVALESCENT CENTER, INC</td>
<td>323 SOUTH HIGHWAY 169</td>
<td>Telephone</td>
<td>(816) 424-6483</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 82</td>
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<tr>
<td>GOWER</td>
<td>MO 64454-9116</td>
<td>Mailing Address: PO BOX 170</td>
<td>GOWER</td>
<td>MO 64454-0170</td>
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<td>GRAN VILLAS NEOSHO</td>
<td>420 LYON DR</td>
<td>Telephone</td>
<td>(417) 451-7071</td>
<td>Level of Care: RCF</td>
<td>Bed Capacity: 30</td>
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<td>NEOSHO</td>
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<td>GRANBY HOUSE</td>
<td>301 SOUTH MAIN</td>
<td>Telephone</td>
<td>(417) 472-6271</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 60</td>
<td>County: NEWTON</td>
<td>DMH Licensed: No</td>
<td>Region: MO</td>
<td>Facility Number: 16481</td>
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<tr>
<td>GRANBY</td>
<td>MO 64844-8336</td>
<td>Mailing Address: 301 SOUTH MAIN</td>
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<td>MO 64844-8336</td>
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</tr>
<tr>
<td>GRAND MANOR NURSING &amp; REHABILITATION CENTER</td>
<td>3645 COOK AVE</td>
<td>Telephone</td>
<td>(314) 531-2352</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 120</td>
<td>County: SAINT LOUIS CITY</td>
<td>DMH Licensed: No</td>
<td>Region: MO</td>
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<tr>
<td>SAINT LOUIS</td>
<td>MO 63113-3801</td>
<td>Mailing Address: 3645 COOK AVE</td>
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<td>MO 63113-3801</td>
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<tr>
<td>GRAND PAVILION HEALTH AND REHAB, THE</td>
<td>4330 WASHINGTON</td>
<td>Telephone</td>
<td>(816) 753-6800</td>
<td>Level of Care: SNF</td>
<td>Bed Capacity: 154</td>
<td>County: JACKSON</td>
<td>DMH Licensed: No</td>
<td>Region: MO</td>
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<tr>
<td>KANSAS CITY</td>
<td>MO 64111-3340</td>
<td>Mailing Address: 4330 WASHINGTON</td>
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<table>
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<th>Facility Name</th>
<th>Address</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
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<tr>
<td>GRAND RIVER HEALTH CARE</td>
<td>118 TRENTON RD, CHILLICOTHE MO 64601-4002</td>
<td>(660) 646-0353</td>
<td>No</td>
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<td>GRANDVIEW HEALTHCARE CENTER</td>
<td>201 GRAND AVE, WASHINGTON MO 63090-1209</td>
<td>(636) 239-9190</td>
<td>No</td>
<td>102</td>
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<tr>
<td>GRANITE HOUSE RCF</td>
<td>321 SOUTH MAIN ST, IRTONTON MO 63650-1406</td>
<td>(573) 546-7283</td>
<td>No</td>
<td>60</td>
<td>Yes</td>
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<tr>
<td>GREATER HEIGHTS RCF, LLC</td>
<td>600 NORTH FRONT ST, PARK HILLS MO 63601-3804</td>
<td>(573) 431-0344</td>
<td>No</td>
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<tr>
<td>GREEN ACRES RESIDENTIAL CARE FACILITY, LLC</td>
<td>3688 SAND CREEK ROAD, FARMLINGTON MO 63640-7350</td>
<td>(573) 756-2917</td>
<td>No</td>
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<td>Yes</td>
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<tr>
<td>GREEN MEADOWS RETIREMENT HOME</td>
<td>411 NORTH KINGSHIGHWAY, SIKESTON MO 63801-</td>
<td>(573) 471-5503</td>
<td>No</td>
<td>66</td>
<td>Yes</td>
<td>03229</td>
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<tr>
<td>GREEN PARK SENIOR LIVING COMMUNITY</td>
<td>9350 GREEN PARK ROAD, SAINT LOUIS MO 63123-7211</td>
<td>(314) 845-0900</td>
<td>Yes</td>
<td>188</td>
<td>No</td>
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<tr>
<td>GREENVILLE HEALTH CARE CENTER</td>
<td>117 SYCAMORE ST, GREENVILLE MO 63944-0000</td>
<td>(573) 224-3298</td>
<td>No</td>
<td>60</td>
<td>No</td>
<td>15550</td>
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<tr>
<td>GREGORY RIDGE HEALTH CARE CENTER</td>
<td>7001 CLEVELAND AVE, KANSAS CITY MO 64132-1622</td>
<td>(816) 333-0700</td>
<td>No</td>
<td>116</td>
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<td>04109</td>
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Thursday, May 09, 2019
HAMPTON HOUSE OF MALDEN, INC
201 NORTH DECATUR
MALDEN MO 63863-2017
Mailing Address 201 N DECATUR
MALDEN MO 63863-2017
Telephone (573) 276-6054 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 22
County DUNKLIN DMH Licensed Yes
Region 2 Facility Number 03331

HARAMBEE HOUSE, INC
703 NORTH EIGHTH ST
COLUMBIA MO 65201-4516
Mailing Address 703 NORTH EIGHTH ST
COLUMBIA MO 65201-4516
Telephone (573) 443-6972 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 15
County BOONE DMH Licensed Yes
Region 6 Facility Number 17197

HARBOR PLACE - LINN
24 TRENSHAW TRAIL
LINN MO 65051-
Mailing Address 24 TRENSHAW TRAIL
LINN MO 65051-
Telephone 573-897-2100 Alzheimer's Unit NO
Level of Care: RCF Bed Capacity 24
County OSAGE DMH Licensed No
Region 6 Facility Number 31116

HARBOR PLACE ESTATES, LLC
1054 SOUTH HWY 47
WARRENTON MO 63383-2625
Mailing Address 1054 SOUTH HWY 47
WARRENTON MO 63383-2625
Telephone (636) 377-4444 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 36
County WARREN DMH Licensed No
Region 6 Facility Number 30144

HARMONY GARDENS - ASSISTED LIVING BY AMERICARE
503 BURKARTH ROAD
WARRENSBURG MO 64093-3145
Mailing Address 503 BURKARTH RD
WARRENSBURG MO 64093-3145
Telephone (660) 747-5411 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 44
County JOHNSON DMH Licensed No
Region 3 Facility Number 18615

HAROLD AND LOUISE ASSISTED LIVING
135 COMMUNICATION DR
HANNIBAL MO 63401-3670
Mailing Address 135 COMMUNICATION DR
HANNIBAL MO 63401-3670
Telephone (573) 221-1189 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 47
County MARION DMH Licensed Yes
Region 5 Facility Number 29639

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

HARRIS MANOR CARE CENTER
401 SOUTH HENRY
FARMINGTON MO 63640-1823
Mailing Address PO BOX 675
FARMINGTON MO 63640-0675
Telephone (573) 756-5376 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 37
County SAINT FRANCOIS DMH Licensed Yes
Region 2 Facility Number 02256

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

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Thursday, May 09, 2019
**HARTMANN VILLAGE - ASSISTED LIVING BY AMERICARE**

615 RANKIN MILL LN
BOONVILLE MO 65233-2873

Mailing Address 615 RANKIN MILL LN
BOONVILLE MO 65233-2873

Telephone (660) 882-9933
Level of Care: ALF**
Bed Capacity 42
County COOPER
DMH Licensed No
Region 6
Facility Number 26026

**HARTVILLE CARE CENTER**

649 WEST ROLLA ST
HARTVILLE MO 65667-8221

Mailing Address 649 WEST ROLLA ST
HARTVILLE MO 65667-8221

Telephone (417) 741-6192
Level of Care: SNF
Bed Capacity 60
County WRIGHT
DMH Licensed No
Region 1
Facility Number 17946

**HARVESTER RESIDENTIAL CARE**

35 LILLIAN DR
SAINT CHARLES MO 63304-7032

Mailing Address 35 LILLIAN DR
SAINT CHARLES MO 63304-7032

Telephone (636) 939-3833
Level of Care: RCF*
Bed Capacity 38
County SAINT CHARLES
DMH Licensed Yes
Region 5
Facility Number 03411

**HAVEN, THE**

614 SOUTH BY-PASS
KENNETT MO 63857-3240

Mailing Address 612 SOUTH BY-PASS
KENNETT MO 63857-3240

Telephone (573) 888-1201
Level of Care: RCF*
Bed Capacity 64
County DUNKLIN
DMH Licensed Yes
Region 2
Facility Number 27620

**HEART OF THE OZARKS HEALTHCARE CENTER**

2004 CRESTVIEW ST
AVA MO 65608-8903

Mailing Address PO BOX 727
AVA MO 65608-0727

Telephone (417) 683-4129
Level of Care: SNF
Bed Capacity 120
County DOUGLAS
DMH Licensed No
Region 1
Facility Number 01290

**HEARTLAND CARE AND REHABILITATION CENTER**

2525 BOUTIN DR
CAPE GIRARDEAU MO 63701-8551

Mailing Address 2525 BOUTIN DR
CAPE GIRARDEAU MO 63701-8551

Telephone (573) 334-5225
Level of Care: SNF
Bed Capacity 102
County CAPE GIRARDEAU
DMH Licensed No
Region 2
Facility Number 01023

**HEARTLAND II RCF**

117 SOUTH 15TH ST
SAINT JOSEPH MO 64501-2904

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

Telephone (816) 676-1505
Level of Care: RCF*
Bed Capacity 52
County BUCHANAN
DMH Licensed Yes
Region 4
Facility Number 18620

**HEARTLAND RESIDENTIAL CARE FACILITY, INC**

1311 FRANCIS ST
SAINT JOSEPH MO 64501-2318

Mailing Address 1311 FRANCIS ST
SAINT JOSEPH MO 64501-2318

Telephone (816) 233-5779
Level of Care: RCF
Bed Capacity 20
County BUCHANAN
DMH Licensed Yes
Region 4
Facility Number 02491

**HEISINGER LUTHERAN HOME**

1002 WEST MAIN ST
JEFFERSON CITY MO 65109-6901

Mailing Address 1002 WEST MAIN ST
JEFFERSON CITY MO 65109-6901

Telephone (573) 636-6288
Level of Care: SNF
Bed Capacity 60
County COLE
DMH Licensed No
Region 6
Facility Number 03479

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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Name</th>
<th>Address</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>Alzheimer's Unit</th>
<th>DMH Licensed</th>
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<td><strong>HEISINGER LUTHERAN HOME</strong></td>
<td>1002 WEST MAIN ST</td>
<td>JEFFERSON</td>
<td>MO</td>
<td>65109</td>
<td>(573) 636-6288</td>
<td>ALF**</td>
<td>111</td>
<td>Cole</td>
<td>6</td>
<td>Yes</td>
<td>No</td>
<td>03479</td>
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<td><strong>HERITAGE AVONLEA OF GLADSTONE, LLC</strong></td>
<td>2801 NE 60TH ST</td>
<td>GLADSTONE</td>
<td>MO</td>
<td>64119</td>
<td>(816) 454-7755</td>
<td>RCF</td>
<td>100</td>
<td>Clay</td>
<td>4</td>
<td>No</td>
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<tr>
<td><strong>HERITAGE CARE CENTER</strong></td>
<td>4401 NORTH HANLEY RD</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>63134</td>
<td>(314) 521-7471</td>
<td>SNF</td>
<td>120</td>
<td>Saint Louis County</td>
<td>7</td>
<td>No</td>
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<td><strong>HERITAGE HALL NURSING CENTER</strong></td>
<td>750 EAST HIGHWAY 22</td>
<td>CENTRALIA</td>
<td>MO</td>
<td>65240</td>
<td>(573) 682-5551</td>
<td>ALF**</td>
<td>24</td>
<td>Boone</td>
<td>6</td>
<td>No</td>
<td>Yes</td>
<td>18783</td>
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<td><strong>HERITAGE HILLS ASSISTED LIVING FACILITY</strong></td>
<td>ROUTE 5, BOX 68</td>
<td>PATTON</td>
<td>MO</td>
<td>63662</td>
<td>(573) 866-2003</td>
<td>ALF</td>
<td>72</td>
<td>Dunklin</td>
<td>2</td>
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<td>17533</td>
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<tr>
<td><strong>HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICARE</strong></td>
<td>1802 SAINT FRANCIS ST</td>
<td>KENNETT</td>
<td>MO</td>
<td>63857</td>
<td>(573) 888-1044</td>
<td>SNF</td>
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<td>Dunklin</td>
<td>2</td>
<td>No</td>
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<td><strong>HERITAGE VILLAGE OF GLADSTONE</strong></td>
<td>3000 NORTH EAST 64TH ST</td>
<td>GLADSTONE</td>
<td>MO</td>
<td>64119</td>
<td>(816) 454-5130</td>
<td>ALF**</td>
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<td>4</td>
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<td><strong>HERITAGE VILLAGE OF PLATTE CITY</strong></td>
<td>15 WALLINGFORD DR</td>
<td>PLATTE CITY</td>
<td>MO</td>
<td>64079</td>
<td>(816) 858-2182</td>
<td>RCF*</td>
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<td><strong>HERITAGE NURSING &amp; REHAB</strong></td>
<td>18599 FIRST STREET</td>
<td>HERMITAGE</td>
<td>MO</td>
<td>65668</td>
<td>(417) 745-2111</td>
<td>SNF</td>
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<td>Hickory</td>
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<td>Yes</td>
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Thursday, May 09, 2019
<table>
<thead>
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<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
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<td>HICKORY MANOR</td>
<td>209 HICKORY ST</td>
<td>LICKING</td>
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<td>HIDDEN LAKE CARE CENTER</td>
<td>11400 HIDDEN LAKE DR</td>
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<td>HIGHLAND CREST - ASSISTED LIVING BY AMERICARE</td>
<td>2204 S HALLIBURTON ST</td>
<td>KIRKSVILLE</td>
<td>MO</td>
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<td>16785</td>
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<td>HIGHLAND HOME</td>
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<td>904 EAST 68TH ST</td>
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<td>3</td>
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<td>HILDA FUWELL’S RESIDENTIAL CARE FACILITY</td>
<td>17382 STATE HIGHWAY 25</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>Province</th>
<th>Phone Number</th>
<th>Alzheimer’s Unit</th>
<th>Bed Capacity</th>
<th>County</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Bed Capacity</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>HILLCREST CARE CENTER, INC</td>
<td>1108 CLARKE ST</td>
<td>DE SOTO</td>
<td>MO</td>
<td>(636) 586-3022</td>
<td>No</td>
<td>120</td>
<td>JEFFERSON</td>
<td>2</td>
<td>No</td>
<td>33</td>
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<tr>
<td>HILLCREST RESIDENTIAL CARE, INC</td>
<td>9415 NORTH BROWN STATION RD</td>
<td>COLUMBIA</td>
<td>MO</td>
<td>(573) 696-3201</td>
<td>No</td>
<td>33</td>
<td>Boone</td>
<td>6</td>
<td>Yes</td>
<td>60</td>
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<tr>
<td>HILLSIDE CARE CENTER</td>
<td>321 NORTH SECTION</td>
<td>HANNIBAL</td>
<td>MO</td>
<td>(573) 221-1439</td>
<td>No</td>
<td>44</td>
<td>MARION</td>
<td>5</td>
<td>Yes</td>
<td>60</td>
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<tr>
<td>HILLSIDE LIVING CENTER</td>
<td>10109 RESTORATION CIRCLE</td>
<td>MINERAL POINT</td>
<td>MO</td>
<td>(573) 562-0303</td>
<td>No</td>
<td>60</td>
<td>WASHINGTON</td>
<td>2</td>
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<td>60</td>
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<td>HILLSIDE MANOR HEALTHCARE AND REHAB CENTER</td>
<td>1265 MCLARAN AVE</td>
<td>SAINT LOUIS</td>
<td>MO</td>
<td>(314) 388-4121</td>
<td>Yes</td>
<td>208</td>
<td>SAINT LOUIS CITY</td>
<td>7</td>
<td>No</td>
<td>208</td>
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<td>HILLTOP HAVEN</td>
<td>18941 CR 305A</td>
<td>EMINENCE</td>
<td>MO</td>
<td>(573) 226-5426</td>
<td>No</td>
<td>20</td>
<td>SHANNON</td>
<td>2</td>
<td>Yes</td>
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<td>HILLVIEW NURSING &amp; REHAB</td>
<td>220 O’ROURKE</td>
<td>PLATTE CITY</td>
<td>MO</td>
<td>(816) 858-5222</td>
<td>No</td>
<td>120</td>
<td>PLATTE</td>
<td>4</td>
<td>No</td>
<td>12655</td>
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<tr>
<td>HOLDEN MANOR CARE CENTER</td>
<td>2005 SOUTH LEXINGTON</td>
<td>HOLDEN</td>
<td>MO</td>
<td>(816) 732-4138</td>
<td>No</td>
<td>52</td>
<td>JOHNSON</td>
<td>3</td>
<td>No</td>
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<tr>
<td>HOLIDAY RESIDENTIAL CARE</td>
<td>1019 OLD ST MARY’S RD</td>
<td>PERRYVILLE</td>
<td>MO</td>
<td>(573) 547-7398</td>
<td>No</td>
<td>20</td>
<td>PERRY</td>
<td>2</td>
<td>No</td>
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</tbody>
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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>Facility Number</th>
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<tbody>
<tr>
<td>Holly Hills Retirement Home</td>
<td>6421 Minnesota</td>
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<td>MO</td>
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<td>Hope Care Center</td>
<td>115 East 83rd St</td>
<td>Kansas City</td>
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<td>No</td>
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<td>Hopedale Cottage Assisted Living The</td>
<td>1314 W School Street</td>
<td>Ozark</td>
<td>MO</td>
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<td>House of Care Center</td>
<td>3744 Benton Blvd</td>
<td>Kansas City</td>
<td>MO</td>
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<td>Houston House</td>
<td>1000 North Industrial Dr</td>
<td>Houston</td>
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<td>Hudson House</td>
<td>1700-B South Hudson Ave</td>
<td>Aurora</td>
<td>MO</td>
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<td>Hunter Acres Caring Center</td>
<td>628 North West St</td>
<td>Sikeston</td>
<td>MO</td>
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<td>Ignite Medical Resort Kansas City LLC</td>
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<td>Kansas City</td>
<td>MO</td>
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<td>Independence Care Center of Perry County</td>
<td>800 South Kingshighway</td>
<td>Perryville</td>
<td>MO</td>
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<td>133</td>
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</table>

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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Level of Care</th>
<th>DMH Licensed</th>
<th>Telephone</th>
<th>Facility Number</th>
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<tr>
<td>INDEPENDENCE CHATEAU</td>
<td>17441 EAST MEDICAL CENTER PARKWAY</td>
<td>INDEPENDENCE</td>
<td>64057-1805</td>
<td>20</td>
<td>No</td>
<td>RCF</td>
<td>No</td>
<td>(816) 478-1991</td>
<td>20682</td>
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<td>INDEPENDENCE COURT</td>
<td>121 INDEPENDENCE DR</td>
<td>PERRYVILLE</td>
<td>63775-1496</td>
<td>75</td>
<td>No</td>
<td>RCF*</td>
<td>No</td>
<td>(573) 547-1499</td>
<td>06393</td>
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<tr>
<td>INDEPENDENCE MANOR CARE CENTER</td>
<td>1600 SOUTH KINGS HIGHWAY</td>
<td>INDEPENDENCE</td>
<td>64055-1853</td>
<td>20</td>
<td>No</td>
<td>RCF*</td>
<td>No</td>
<td>(816) 833-4777</td>
<td>14309</td>
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<tr>
<td>INDEPENDENCE SQUARE RESIDENTIAL CARE CENTER</td>
<td>1136 SOUTH MAIN ST</td>
<td>PERRYVILLE</td>
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<td>20</td>
<td>No</td>
<td>RCF*</td>
<td>No</td>
<td>(573) 547-8600</td>
<td>03833</td>
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<tr>
<td>INDIAN HILLS - A STONEBRIDGE COMMUNITY</td>
<td>2601 FAIR ST</td>
<td>CHILLCOTHE</td>
<td>64601-3525</td>
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<td>No</td>
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<td>No</td>
<td>(660) 646-1230</td>
<td>03833</td>
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<td>IRONTON RESIDENTIAL CARE, LLC</td>
<td>101 SOUTH KNOB ST</td>
<td>IRONTON</td>
<td>63650-1501</td>
<td>16</td>
<td>Yes</td>
<td>RCF</td>
<td>Yes</td>
<td>(573) 546-3080</td>
<td>01901</td>
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<tr>
<td>J &amp; J RESIDENTIAL CARE FACILITY II</td>
<td>104 WESBECHER</td>
<td>MARBLE HILL</td>
<td>63764-0378</td>
<td>12</td>
<td>Yes</td>
<td>RCF*</td>
<td>Yes</td>
<td>(573) 238-4602</td>
<td>07171</td>
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<tr>
<td>JACKSON MANOR NURSING HOME</td>
<td>710 BROADRIDGE DR</td>
<td>JACKSON</td>
<td>63755-3042</td>
<td>90</td>
<td>No</td>
<td>SNF</td>
<td>No</td>
<td>(573) 243-3101</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address 1</th>
<th>City</th>
<th>State</th>
<th>Phone</th>
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<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>JACOBS CARE CENTER, LLC</td>
<td>932 WEST STATE</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>(417) 865-6140</td>
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<td>Yes</td>
<td>06229</td>
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<tr>
<td>JAMES RIVER NURSING AND REHABILITATION</td>
<td>3550 EAST BATTLEFIELD</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>(417) 889-9500</td>
<td>120</td>
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<td>17645</td>
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<tr>
<td>JANE HOWELL STU PP APARTMENTS</td>
<td>2443 PROUHET AVE</td>
<td>OVERLAND</td>
<td>MO</td>
<td>(314) 890-7100</td>
<td>30</td>
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<td>Yes</td>
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<tr>
<td>JEANNE JUGAN CENTER</td>
<td>8745 JAMES A REED ROAD</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>(816) 761-4744</td>
<td>24</td>
<td>No</td>
<td>No</td>
<td>12724</td>
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<tr>
<td>JEANNE JUGAN CENTER</td>
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<td>No</td>
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<tr>
<td>JEANNE JUGAN CENTER</td>
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<td>MO</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>(573) 635-6193</td>
<td>102</td>
<td>No</td>
<td>No</td>
<td>03870</td>
</tr>
<tr>
<td>JEFFERSON CITY NURSING AND REHABILITATION CENTER, LLC</td>
<td>1221 SOUTHGATE LN</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>(573) 635-3131</td>
<td>120</td>
<td>No</td>
<td>No</td>
<td>01865</td>
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<tr>
<td>JEFFERSON GARDENS - ASSISTED LIVING BY AMERICARE</td>
<td>509 WEST ROGERS ST</td>
<td>CLINTON</td>
<td>MO</td>
<td>(660) 885-9770</td>
<td>42</td>
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<td>20603</td>
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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City, State Zip</th>
<th>Phone Number</th>
<th>Medicare/Medicaid</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
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<tbody>
<tr>
<td>Jefferson Health Care</td>
<td>615 SW Oldham Parkway</td>
<td>Lee's Summit, MO 64081-2602</td>
<td>(816) 524-3328</td>
<td>No</td>
<td>120</td>
<td>No</td>
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<tr>
<td>Jefferson Manor</td>
<td>902 Jefferson Ave</td>
<td>Cape Girardeau, MO 63703-6755</td>
<td>(573) 651-1373</td>
<td>No</td>
<td>10</td>
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<tr>
<td>Joe Clark Residential Care Home</td>
<td>1495 East Ashland St</td>
<td>Nevada</td>
<td>(417) 667-5000</td>
<td>No</td>
<td>34</td>
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<td>John Knox Village Care Center</td>
<td>600 NW Pryor Road</td>
<td>Warrensburg, MO 64081-1104</td>
<td>(816) 246-4343</td>
<td>Yes</td>
<td>430</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Johnson County Care Center</td>
<td>122 East Market St</td>
<td>Warrensburg, MO 64093-1818</td>
<td>(660) 747-8101</td>
<td>No</td>
<td>87</td>
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<td>No</td>
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<tr>
<td>Joliet Home</td>
<td>3920 Forest</td>
<td>Kansas City, MO 64110-1220</td>
<td>(816) 531-5308</td>
<td>No</td>
<td>17</td>
<td>No</td>
<td>No</td>
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<tr>
<td>Jones' Wildwood Care Center</td>
<td>12806 Hwy 151</td>
<td>Madison, MO 65263-3114</td>
<td>(660) 291-8636</td>
<td>No</td>
<td>32</td>
<td>No</td>
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<tr>
<td>Jonesburg Nursing &amp; Rehab</td>
<td>308 Cedar Ave</td>
<td>Jonesburg, MO 63351-1126</td>
<td>(636) 488-5400</td>
<td>Yes</td>
<td>90</td>
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<tr>
<td>Joplin Gardens</td>
<td>2810 South Jackson Ave</td>
<td>Joplin</td>
<td>(417) 572-0041</td>
<td>No</td>
<td>92</td>
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</tbody>
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**JOPLIN HEALTH AND REHABILITATION CENTER**
2218 WEST 32ND ST
JOPLIN MO 64804-3514
Mailing Address 2218 WEST 32ND ST
JOPLIN MO 64804-3514
Telephone (417) 623-5264 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County NEWTON DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 12583

**JORDAN CREEK NURSING & REHAB**
910 SOUTH WEST AVE
SPRINGFIELD MO 65802-4950
Mailing Address 910 SOUTH WEST AVE
SPRINGFIELD MO 65802-4950
Telephone (417) 865-8741 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County GREENE DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 03245

**JOY ADULT CARE CENTER**
614 SOUTH MAIN
CLINTON MO 64735-2620
Mailing Address PO BOX 8
CLINTON MO 64735-0008
Telephone (660) 885-8328 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 42
County HENRY DMH Licensed Yes
Region 1 Facility Number 07268

**JOY ASSISTED LIVING FOR SENIORS**
2030 W MOUNT VERNON ST
SPRINGFIELD MO 65802-4846
Mailing Address PO BOX 9655
SPRINGFIELD MO 65801-9655
Telephone (417) 864-8805 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 74
County GREENE DMH Licensed Yes
Region 1 Facility Number 19668

**KABUL NURSING HOMES, INC**
1000 MAIN ST
CABOOL MO 65689-9125
Mailing Address 1000 MAIN ST
CABOOL MO 65689-9125
Telephone (417) 962-3713 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 99
County TEXAS DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 04085

**KANSAS CITY CENTER FOR REHABILITATION AND HEALTHCARE**
12942 WORNALL RD
KANSAS CITY MO 64145-1253
Mailing Address 12942 WORNALL RD
KANSAS CITY MO 64145-1253
Telephone (816) 423-8500 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 180
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 00644

**KANSAS CITY CENTER FOR REHABILITATION AND HEALTHCARE**
12942 WORNALL RD
KANSAS CITY MO 64145-1253
Mailing Address 12942 WORNALL RD
KANSAS CITY MO 64145-1253
Telephone (816) 423-8500 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 105
County JACKSON DMH Licensed No
Region 3 Facility Number 00644

**KASEY PAIGE ASSISTED LIVING**
3715 JAMIESON AVE
SAINT LOUIS MO 63109-1109
Mailing Address 3715 JAMIESON AVE
SAINT LOUIS MO 63109-1109
Telephone (314) 781-0222 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 111
County SAINT LOUIS CITY DMH Licensed Yes
Region 7 Facility Number 04650

**KATY MANOR**
205 PROSPECT
PILOT GROVE MO 65276-1111
Mailing Address PO BOX 8
PILOT GROVE MO 65276-0008
Telephone (660) 834-3111 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County COOPER DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 14982

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KEATON CENTER
120 N MILL ST
FESTUS MO 63028-1816
Mailing Address 120 N MILL ST
FESTUS MO 63028-1816
Telephone (636) 232-2323 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 16
County JEFFERSON DMH Licensed Yes
Region 2 Facility Number 20413

KIDWELL HOME
1000 KIDWELL DR
VERSAILLES MO 65084-1177
Mailing Address 1000 KIDWELL DR VERSAILLES MO 65084-1177
Telephone (573) 378-5175 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 44
County MORGAN DMH Licensed No
Region 6 Facility Number 21631

KING CITY MANOR
300 WEST FAIRVIEW
KING CITY MO 64463-9606
Mailing Address 300 WEST FAIRVIEW KING CITY MO 64463-9606
Telephone (660) 535-4325 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County GENTRY DMH Licensed No
Region 4 Facility Number 04305

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

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: RCF* Bed Capacity 12
County AUDRAIN DMH Licensed No
Region 5 Facility Number 04146

KINGSWOOD
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 Yes
Region 3 Facility Number 04152

KINGSWOOD
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 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 Facility Number 04173

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<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>DMH Licensed</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>Facility Number</th>
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<tr>
<td>LA BELLE MANOR CARE CENTER</td>
<td>(660) 213-3234</td>
<td>SNF</td>
<td>94</td>
<td>Yes</td>
<td>LEWIS</td>
<td>No</td>
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<td>LA BELLE MAISON-ASSISTED LIVING BY AMERICARE</td>
<td>(573) 472-2546</td>
<td>ALF**</td>
<td>30</td>
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<td>SCOTT</td>
<td>No</td>
<td>2</td>
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<td>LA PLATA NURSING HOME</td>
<td>(660) 332-4315</td>
<td>SNF</td>
<td>52</td>
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<td>MACON</td>
<td>No</td>
<td>7</td>
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<td>LACLEDE COMMONS</td>
<td>(314) 968-5570</td>
<td>ALF**</td>
<td>242</td>
<td>Yes</td>
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<td>LACOBA HOMES, INC</td>
<td>(417) 235-7895</td>
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<td>(573) 442-0577</td>
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<td>LAKE PARKE SENIOR LIVING</td>
<td>(573) 745-0874</td>
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<td>No</td>
<td>CAMDEN</td>
<td>No</td>
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<td>LAKE ST CHARLES ASSISTED LIVING APARTMENTS</td>
<td>(636) 947-1100</td>
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<td>No</td>
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<td>LAKE STOCKTON HEALTHCARE FACILITY</td>
<td>(417) 276-5126</td>
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Thursday, May 09, 2019
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

LAKE SHORES 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

LAKEVIEW 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

LAKEVIEW MEDICARE MEDICAID FACILITY
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: RCF* Bed Capacity 40
County MILLER DMH Licensed No
Region 6 Facility Number 20926

LAKEVIEW 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

LAKEVIEW MOUNTAIN MANOR
238 HARMONY HEIGHTS
FORSYTH MO 65653-5533
Mailing Address 238 HARMONY HEIGHTS
FORSYTH MO 65653-5533
Telephone (417) 546-5595 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 40
County TANEY DMH Licensed Yes
Region 1 Facility Number 06232

LAKEVIEW SUITES
205 TIMBERLINE DR
LINCOLN MO 65338-2007
Mailing Address 205 TIMBERLINE DR
LINCOLN MO 65338-2007
Telephone (660) 547-3089 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 14
County BENTON DMH Licensed No
Region 6 Facility Number 04803

LAKEVIEW HEALTH CARE & REHABILITATION CENTER
1450 ASHLEY RD
BOONVILLE MO 65233-2141
Mailing Address 1450 ASHLEY RD
BOONVILLE MO 65233-2141
Telephone (660) 882-7007 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 19
County COOPER DMH Licensed No
Region 6 Medicaid Facility Number 01602

LAKEVIEW HEALTH CARE & REHABILITATION CENTER
1450 ASHLEY RD
BOONVILLE MO 65233-2141
Mailing Address 1450 ASHLEY RD
BOONVILLE MO 65233-2141
Telephone (660) 882-7007 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County COOPER DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 01602

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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>Level of Care</th>
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<td>LAKEWOOD - ASSISTED LIVING BY AMERICARE</td>
<td>4685 ROBBERSON AVE</td>
<td>SPRINGFIELD MO</td>
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<td>LAMPLIGHT VILLAGE</td>
<td>309 LOCUST ST</td>
<td>WEST PLAINS MO</td>
<td>HOWELL</td>
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<td>LANDING OF O'FALLON, THE</td>
<td>1000 LANDING CIRCLE</td>
<td>SAINT CHARLES MO</td>
<td>SAINT CHARLES</td>
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<td>LANDMARK VILLA ALF</td>
<td>1101 OZARK AVE</td>
<td>CABOOL MO</td>
<td>TEXAS</td>
<td>44</td>
<td>ALF</td>
<td>No</td>
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<td>LAURIE CARE CENTER</td>
<td>610 HWY O</td>
<td>LAURIE MO</td>
<td>MORGAN</td>
<td>108</td>
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<td>No</td>
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<td>LAURIE KNOTS</td>
<td>610 HIGHWAY O</td>
<td>LAURIE MO</td>
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<td>66</td>
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<td>No</td>
<td>No</td>
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<td>LAVERNA SENIOR LIVING</td>
<td>904 HALL AVE</td>
<td>SAVANNAH MO</td>
<td>ANDREW</td>
<td>120</td>
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<td>LAWRENCE COUNTY MANOR</td>
<td>915 CARL ALLEN ST</td>
<td>MT VERNON MO</td>
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<td>90</td>
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</tbody>
</table>

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<table>
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<th>Facility Name</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Alzheimer's Unit</th>
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<th>Mailing Address</th>
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<td>915 CARL ALLEN ST</td>
<td>MT VERNON</td>
<td>65712-1612</td>
<td>(417) 466-2183</td>
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<td>LAWSON MANOR &amp; REHAB</td>
<td>RAY</td>
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<td>07395</td>
<td>210 WEST 8TH TERRACE</td>
<td>LAWSON</td>
<td>64062-9357</td>
<td>(816) 580-3269</td>
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<td>180</td>
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<td>04369</td>
<td>596 MORTON RD</td>
<td>LEBANON</td>
<td>65536-3648</td>
<td>(417) 532-9173</td>
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<td>LEBANON SOUTH NURSING &amp; REHAB</td>
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<td>15650</td>
<td>514 WEST FREMONT RD</td>
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<td>65536-4244</td>
<td>(417) 532-5351</td>
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<td>LEE HOUSE OF ELDON</td>
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<td>53</td>
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<td>13089</td>
<td>105 NORTH MILL ST</td>
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<td>65026-1728</td>
<td>(573) 392-5558</td>
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<td>LEE'S SUMMIT POINTE HEALTH &amp; REHABILITATION</td>
<td>JACKSON</td>
<td>3</td>
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<td>64081-2424</td>
<td>(816) 525-6300</td>
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<td>LEGENDARY NURSING &amp; REHABILITATION LLC</td>
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<td>5</td>
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<td>809 EAST GORDON ST</td>
<td>MARSHALL</td>
<td>65340-2811</td>
<td>(660) 886-2247</td>
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LEISURE LIVING
305 5TH ST
MONETT MO 65708-2312
Mailing Address 305 5TH ST
MONETT MO 65708-2312
Telephone (417) 235-5959 Alzheimer’s Unit No
Level of Care: RCF Bed Capacity 20
County BARRY DMH Licensed Yes
Region 1 Facility Number 18227

LENOIR HEALTH CARE CENTER
3850 CARTWRIGHT LANE
COLUMBIA MO 65201-
Mailing Address 3850 CARTWRIGHT LANE
COLUMBIA MO 65201-
Telephone (573) 876-5800 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 100
County BOONE DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 04750

LENOIR MANOR
3850 CARTWRIGHT LANE
COLUMBIA MO 65201-
Mailing Address 3850 CARTWRIGHT LANE
COLUMBIA MO 65201-
Telephone (573) 876-5800 Alzheimer’s Unit Yes
Level of Care: ALF** Bed Capacity 92
County BOONE DMH Licensed No
Region 6 Facility Number 04750

LEONA HOUSE
5000 NW OLD TRAIL ROAD
KANSAS CITY MO 64151-1946
Mailing Address 5000 NW OLD TRAIL RD
KANSAS CITY MO 64151-1946
Telephone (816) 584-1033 Alzheimer’s Unit Yes
Level of Care: ALF** Bed Capacity 7
County PLATTE DMH Licensed No
Region 4 Facility Number 24748

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 Alzheimer’s Unit No
Level of Care: RCF* Bed Capacity 35
County MARION DMH Licensed Yes
Region 5 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 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 179
County MARION DMH Licensed No
Region 5 Medicare/Medicaid 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 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 142
County SAINT CHARLES DMH Licensed No
Region 5 Medicare/Medicaid 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 Alzheimer’s Unit Yes
Level of Care: SNF Bed Capacity 120
County LEWIS DMH Licensed No
Region 5 Medicare/Medicaid 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 Alzheimer’s Unit No
Level of Care: SNF Bed Capacity 143
County CLAY DMH Licensed No
Region 4 Medicare/Medicaid Facility Number 16715

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Thursday, May 09, 2019
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<td>Malden Nursing &amp; Rehab</td>
<td>1209 STOKELAN</td>
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Thursday, May 09, 2019
MANOR AT ELFINDALE, THE
1707 WEST ELFINDALE ST
SPRINGFIELD MO 65807-1246
Mailing Address 1707 WEST ELFINDALE ST
SPRINGFIELD MO 65807-1246
Telephone (417) 831-2273 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 100
County GREENE DMH Licensed No
Region 1 Medicare Facility Number 17371

MANOR GROVE, INCORPORATED
711 SOUTH KIRKWOOD RD
KIRKWOOD MO 63122-5928
Mailing Address 711 SOUTH KIRKWOOD RD
KIRKWOOD MO 63122-5928
Telephone (314) 965-0864 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 117
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 060038

MANOR, THE
2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Mailing Address 2071 BARRON RD
POPLAR BLUFF MO 63901-1903
Telephone (573) 686-1147 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 90
County BUTLER DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 03628

MAPLE CREST MANOR
430 NORTH FREDERICK ST
CAPE GIRARDEAU MO 63701-4835
Mailing Address 430 N FREDERICK ST
CAPE GIRARDEAU MO 63701-4835
Telephone (573) 334-2662 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 48
County CAPE GIRARDEAU DMH Licensed Yes
Region 2 Medicare/Medicaid Facility Number 03682

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

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

MAPLE RIDGE RESIDENTIAL CARE CENTER LLC
1034 DORIS DR
FARMINGTON MO 63640-1954
Mailing Address PO BOX 272
FARMINGTON MO 63640-0272
Telephone (573) 760-0155 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 20
County SAINT FRANCOIS DMH Licensed Yes
Region 2 Medicare/Medicaid Facility Number 19808

MAPLE SENIOR LIVING LLC
3 SOUTHWEST FIRST LANE
LAMAR MO 64759-8313
Mailing Address 3 SOUTHWEST FIRST LANE
LAMAR MO 64759-8313
Telephone (417) 682-6184 Alzheimer's Unit No
Level of Care: RCF* Bed Capacity 57
County BARTON DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 20869

MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICARE
2510 CLINTON ST
CARTHAGE MO 64836-3427
Mailing Address 2510 CLINTON ST
CARTHAGE MO 64836-3427
Telephone (417) 358-7201 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 50
County JASPER DMH Licensed No
Region 1 Facility Number 17660

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Thursday, May 09, 2019
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<th>Telephone</th>
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<td>MAPLE WOOD ALZHEIMER'S SPECIAL CARE CENTER</td>
<td>1146 EAST LAKEWOOD ST</td>
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<td>(417) 885-9050</td>
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<td>MAPLE WOOD HEALTHCARE CENTER</td>
<td>724 NORTHEAST 79TH TERRACE</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>(816) 436-8940</td>
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<td>MAPLEBROOK-ASSISTED LIVING BY AMERICARE</td>
<td>520 MAPLE VALLEY DR</td>
<td>FARMINGTON</td>
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<td>(573) 756-2777</td>
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<td>MAPLES HEALTH AND REHABILITATION, THE</td>
<td>610 WEST SUNSET ST</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>(417) 891-1700</td>
<td>SNF</td>
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<td>GREENE</td>
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<td>No</td>
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<td>MAPLEWOOD, INC</td>
<td>1827 CRADER DR</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>(573) 635-0023</td>
<td>ALF**</td>
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<td>COLE</td>
<td>6</td>
<td>Yes</td>
<td>16964</td>
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<tr>
<td>MAPLEWOOD, INC</td>
<td>1827 CRADER DR</td>
<td>JEFFERSON CITY</td>
<td>MO</td>
<td>(573) 635-0023</td>
<td>ALF**</td>
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<td>COLE</td>
<td>6</td>
<td>Yes</td>
<td>16964</td>
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<td>MARANATHA VILLAGE, INC</td>
<td>233 EAST NORTON RD</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>(417) 833-0016</td>
<td>SNF</td>
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<td>1</td>
<td>No</td>
<td>04907</td>
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<tr>
<td>MARANATHA VILLAGE, INC</td>
<td>233 EAST NORTON RD</td>
<td>SPRINGFIELD</td>
<td>MO</td>
<td>(417) 833-0016</td>
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<td>GREENE</td>
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<td>MARI DE VILLA RETIREMENT CENTER, INC</td>
<td>13900 CLAYTON RD</td>
<td>TOWN AND COUNTRY</td>
<td>MO</td>
<td>(636) 227-5347</td>
<td>SNF</td>
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<td>SAINT LOUIS COUNTY</td>
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Thursday, May 09, 2019
**MARIAN CLIFF MANOR**
381 ELM ST
SAINT MARY MO 63673-9330
Mailing Address 381 ELM ST
SAINT MARY MO 63673-9330

- Telephone (573) 543-2218
- Level of Care: RCF*
- County SAINTE GENEVIEVE
- Region 2
- Alzheimer's Unit No
- Bed Capacity 66
- DMH Licensed Yes
- Facility Number 05058

**MARIAN MANOR**
174 BALLPARK RD
VIENNA MO 65582-8043
Mailing Address 174 BALLPARK RD
VIENNA MO 65582-8043

- Telephone (573) 422-3177
- Level of Care: SNF
- County MARIES
- Region 6
- Alzheimer's Unit No
- Bed Capacity 98
- DMH Licensed No
- 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
- Level of Care: SNF
- County RANDOLPH
- Region 5
- Alzheimer's Unit No
- Bed Capacity 42
- DMH Licensed No
- 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) 587-6999
- Level of Care: ICF
- County BUTLER
- Region 2
- Alzheimer's Unit Yes
- Bed Capacity 120
- DMH Licensed No
- 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
- Level of Care: SNF
- County SAINT LOUIS COUNTY
- Region 7
- Alzheimer's Unit No
- Bed Capacity 120
- DMH Licensed No
- 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
- Level of Care: SNF
- County WEBSTER
- Region 1
- Alzheimer's Unit No
- Bed Capacity 74
- DMH Licensed No
- Facility Number 18481

**MARSHFIELD PLACE, LLC**
820 SOUTH WHITE OAK ST
MARSHFIELD MO 65706-2231
Mailing Address 820 SOUTH WHITE OAK ST
MARSHFIELD MO 65706-2231

- Telephone (417) 859-6133
- Level of Care: RCF*
- County WEBSTER
- Region 1
- Alzheimer's Unit No
- Bed Capacity 40
- DMH Licensed Yes
- Facility Number 20500

**MARY CULVER HOME, THE**
221 WEST WASHINGTON AVE
KIRKWOOD MO 63122-3916
Mailing Address 221 W WASHINGTON AVE
KIRKWOOD MO 63122-3916

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

**MARY RYDER HOME**
4361 OLIVE ST
SAINT LOUIS MO 63108-2621
Mailing Address 4361 OLIVE ST
SAINT LOUIS MO 63108-2621

- Telephone (314) 531-2981
- Level of Care: RCF*
- County SAINT LOUIS CITY
- Region 7
- Alzheimer's Unit No
- Bed Capacity 80
- DMH Licensed Yes
- Facility Number 20972

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Thursday, May 09, 2019
MARY, QUEEN AND MOTHER CENTER
7601 WATSON RD
SHREWSBURY MO 63119-5001
Mailing Address 7601 WATSON RD
SHREWSBURY MO 63119-5001
Telephone (314) 961-8000
Level of Care: SNF
Alzheimer's Unit Yes
County SAINT LOUIS COUNTY
Bed Capacity 230
Region 7 Medicare/Medicaid
DMH Licensed No
Facility Number 05103

MARYMOUNT MANOR
313 AUGUSTINE RD
EUREKA MO 63025-1935
Mailing Address PO BOX 600
EUREKA MO 63025-0600
Telephone (636) 938-6770
Level of Care: RCF*
Alzheimer's Unit No
County SAINT LOUIS COUNTY
Bed Capacity 100
Region 7 DMH Licensed Yes
Facility Number 05117

MARY'S RANCH, INC
ROUTE 2, BOX 2790
MARBLE HILL MO 63764-9510
Mailing Address PO BOX 589
MARBLE HILL MO 63764-0589
Telephone (573) 238-4253
Level of Care: RCF*
Alzheimer's Unit No
County BOLLINGER
Bed Capacity 32
Region 2 DMH Licensed Yes
Facility Number 08707

MARYVILLE CHATEAU
1101 E 5TH STREET
MARYVILLE MO 64468-1955
Mailing Address 1101 E 5TH STREET
MARYVILLE MO 64468-1955
Telephone (660) 582-7447
Level of Care: RCF
Alzheimer's Unit No
County NODAWAY
Bed Capacity 20
Region 4 DMH Licensed No
Facility Number 05149

MARYVILLE LIVING CENTER
524 NORTH LAURA
MARYVILLE MO 64468-1955
Mailing Address 524 NORTH LAURA
MARYVILLE MO 64468-1955
Telephone (660) 582-7447
Level of Care: SNF
Alzheimer's Unit Yes
County NODAWAY
Bed Capacity 105
Region 4 DMH Licensed No
Facility Number 05149

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
Level of Care: ALF**
Alzheimer's Unit No
County SAINT LOUIS COUNTY
Bed Capacity 62
Region 7 DMH Licensed No
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
Level of Care: ALF**
Alzheimer's Unit Yes
County SAINT LOUIS COUNTY
Bed Capacity 120
Region 7 DMH Licensed No
Facility Number 30805

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<th>Phone Number</th>
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<td>MAYSVILLE SENIOR LIVING</td>
<td>604 SOUTH POLK, MAYSVILLE, MO 64469-4033</td>
<td>(816) 449-2741</td>
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<td>MAYWOOD MANOR</td>
<td>1041 WEST TRUMAN RD, INDEPENDENCE, MO 64050-3447</td>
<td>(816) 254-6789</td>
<td>RCF*</td>
<td>24</td>
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<td>JACKSON</td>
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<td>MAYWOOD TERRACE LIVING CENTER</td>
<td>10300 EAST TRUMAN RD, INDEPENDENCE, MO 64052-2258</td>
<td>(816) 836-1250</td>
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<td>JACKSON</td>
<td>No</td>
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<td>MCCLAY SENIOR CARE</td>
<td>3801 MCCLAY ROAD, SAINT PETERS, MO 63376-7327</td>
<td>(636) 244-3323</td>
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<td>MCCRITE PLAZA AT BRIARCLIFF ASSISTED LIVING</td>
<td>1201 NW TULLISON RD, KANSAS CITY, MO 64116-2639</td>
<td>(816) 888-7930</td>
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<td>MCCRITE PLAZA AT BRIARCLIFF SKILLED NURSING</td>
<td>1301 TULLISON ROAD, KANSAS CITY, MO 64116-2640</td>
<td>816-888-7930</td>
<td>SNF</td>
<td>80</td>
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<tr>
<td>MCDONALD BOARDING HOME</td>
<td>438 NORTH 17TH ST, SAINT JOSEPH, MO 64501-2015</td>
<td>(816) 233-7060</td>
<td>RCF</td>
<td>9</td>
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<td>BUCHANAN</td>
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<tr>
<td>MCDONALD COUNTY LIVING CENTER</td>
<td>1000 PATTERSON ST, ANDERSON, MO 64831-7327</td>
<td>(417) 845-3351</td>
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<td>Yes</td>
<td>MCDONALD</td>
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<td>MCKNIGHT PLACE ASSISTED LIVING AND MEMORY CARE</td>
<td>THREE MCKNIGHT PL, SAINT LOUIS, MO 63124-1900</td>
<td>(314) 997-5333</td>
<td>ALF**</td>
<td>120</td>
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Thursday, May 09, 2019
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<td>SAINT LOUIS</td>
<td>MO</td>
<td>63124-1900</td>
<td>(314) 993-2221</td>
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<tr>
<td>MCLARNEY MANOR</td>
<td>215 EAST PRATT</td>
<td>BROOKFIELD</td>
<td>MO</td>
<td>64628-1300</td>
<td>(660) 258-7402</td>
<td>SNF</td>
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<td>No</td>
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<tr>
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<td>521 MEADOW RIDGE LN</td>
<td>MOBERLY</td>
<td>MO</td>
<td>65270-4550</td>
<td>(660) 263-0550</td>
<td>ALF**</td>
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<td>No</td>
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Thursday, May 09, 2019
MEDICALODGES NEVADA
1210 W ASHLAND ST
NEVADA MO 64772-1906
Mailing Address 1210 W ASHLAND ST
NEVADA MO 64772-1906

MELODY HOUSE
3031 SOUTH TEN MILE DR
JEFFERSON CITY MO 65109-6816
Mailing Address 3031 S TEN MILE DR
JEFFERSON CITY MO 65109-6816

MERAMEC NURSING CENTER
940 MATTOX DR
SULLIVAN MO 63080-2364
Mailing Address 940 MATTOX DR
SULLIVAN MO 63080-2364

MEYER CARE CENTER
1201 WEST 19TH ST
HIGGINSVILLE MO 64037-1458
Mailing Address 1201 WEST 19TH ST
HIGGINSVILLE MO 64037-1458

MEYER CARE CENTER
1201 WEST 19TH ST
HIGGINSVILLE MO 64037-1458
Mailing Address 1201 WEST 19TH ST
HIGGINSVILLE MO 64037-1458

MILAN HEALTH CARE CENTER
52435 INFIRMARY RD
MILAN MO 63556-2874
Mailing Address 52435 INFIRMARY RD
MILAN MO 63556-2874

MILL CREEK VILLAGE-ASSISTED LIVING BY AMERICARE
1990 W SOUTHAMPTON DR
COLUMBIA MO 65203-6238
Mailing Address 1990 W SOUTHAMPTON DR
COLUMBIA MO 65203-6238

MILLER COUNTY CARE AND REHABILITATION CENTER
1157 HIGHWAY 17
TUSCUMBIA MO 65082-2100
Mailing Address 1157 HWY 17
TUSCUMBIA MO 65082-2100

MILLER RESIDENT CARE, INC
210 ROCK RD
PARIS MO 65275-1282
Mailing Address 210 ROCK RD
PARIS MO 65275-1282

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<tr>
<th>Facility Name</th>
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<th>Phone</th>
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<th>Alzheimer's Unit</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Region</th>
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<td>MOTHER OF GOOD COUNSEL HOME</td>
<td>6825 NATURAL BRIDGE RD</td>
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<td>MOTHER OF PERPETUAL HELP RESIDENCE, INC</td>
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<td>(314) 918-2260</td>
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<td>MOUNT CARMEL SENIOR LIVING - ST CHARLES, LLC</td>
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<td>MT VERNON PLACE CARE CENTER, INC</td>
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<td>MY PLACE TOO, INC</td>
<td>1107 CLARKE ST</td>
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<th>Facility Name</th>
<th>Phone Number</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>Region</th>
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<td>MYERS NURSING &amp; CONVALESCENT CENTER</td>
<td>(816) 231-3180</td>
<td>No</td>
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<td>NAZARETH LIVING CENTER</td>
<td>(314) 487-3950</td>
<td>Yes</td>
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<td>NEIGHBORHOODS AT QUAIL CREEK, THE</td>
<td>(417) 889-1275</td>
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<td>NEIGHBORHOODS REHABILITATION &amp; SKILLED NURSING</td>
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<td>NEVADA NURSING &amp; REHAB</td>
<td>(417) 667-8889</td>
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<tr>
<td>NEW HAVEN CARE CENTER</td>
<td>(573) 237-2103</td>
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* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

** Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).
<table>
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<tr>
<th>Facility Name</th>
<th>5858 BUSIEK ROAD</th>
<th>MO 63640-7325</th>
<th>Telephone (573) 756-2426</th>
<th>Alzheimer’s Unit: No</th>
<th>Level of Care: ALF</th>
<th>Bed Capacity: 15</th>
<th>County: SAINT FRANCOIS</th>
<th>DMH Licensed: Yes</th>
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<th>1050 DAWSON RD</th>
<th>MO 63869-1116</th>
<th>Telephone (573) 748-5622</th>
<th>Alzheimer’s Unit: Yes</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 112</th>
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<th>DMH Licensed: No</th>
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<th>11221 NORTH NASHUA DR</th>
<th>MO 64155-1159</th>
<th>Telephone (816) 734-4433</th>
<th>Alzheimer’s Unit: Yes</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 199</th>
<th>County: CLAY</th>
<th>DMH Licensed: No</th>
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<th>19 NORTH NEWSTEAD</th>
<th>MO 63108-2260</th>
<th>Telephone (314) 286-4510</th>
<th>Alzheimer’s Unit: No</th>
<th>Level of Care: RCF*</th>
<th>Bed Capacity: 20</th>
<th>County: SAINT LOUIS CITY</th>
<th>DMH Licensed: Yes</th>
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<th>Facility Name</th>
<th>801 BRIM ST</th>
<th>MO 63601-3441</th>
<th>Telephone (573) 431-0223</th>
<th>Alzheimer’s Unit: Yes</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 120</th>
<th>County: SAINT FRANCOIS</th>
<th>DMH Licensed: No</th>
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<th>Facility Name</th>
<th>2700 EAST 34TH ST</th>
<th>MO 64804-4310</th>
<th>Telephone (417) 781-1737</th>
<th>Alzheimer’s Unit: No</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 126</th>
<th>County: NEWTON</th>
<th>DMH Licensed: No</th>
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<th>1120 FALCON</th>
<th>MO 63857-3825</th>
<th>Telephone (573) 888-1150</th>
<th>Alzheimer’s Unit: Yes</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 170</th>
<th>County: DUNKLIN</th>
<th>DMH Licensed: No</th>
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<th>Facility Name</th>
<th>2920 FEE FEE RD</th>
<th>MO 63043-1915</th>
<th>Telephone (314) 291-0121</th>
<th>Alzheimer’s Unit: Yes</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 220</th>
<th>County: SAINT LOUIS COUNTY</th>
<th>DMH Licensed: No</th>
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<th>35 SUGAR MAPLE LN</th>
<th>MO 63303-5740</th>
<th>Telephone (636) 946-8887</th>
<th>Alzheimer’s Unit: No</th>
<th>Level of Care: SNF</th>
<th>Bed Capacity: 120</th>
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* Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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Thursday, May 09, 2019
**NHC HEALTHCARE, TOWN & COUNTRY**

13995 CLAYTON RD  
TOWN AND COUNTRY, MO 63017-8400  
Mailing Address 13995 CLAYTON RD  
TOWN AND COUNTRY, MO 63017-8400  
Telephone (636) 227-5070  
Level of Care: SNF  
County SAINT LOUIS COUNTY  
Region 7  
Medicare/Medicaid  
Alzheimer's Unit Yes  
Bed Capacity 282  
DMH Licensed No  
Facility Number 01508  
*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)).*

**NHC HEALTHCARE, WEST PLAINS**

211 DAVIS DR  
WEST PLAINS, MO 65775-2242  
Mailing Address PO BOX 497  
WEST PLAINS, MO 65775-0497  
Telephone (417) 256-0798  
Level of Care: SNF  
County HOWELL  
Region 1  
Medicare/Medicaid  
Alzheimer's Unit Yes  
Bed Capacity 120  
DMH Licensed No  
Facility Number 08434  
**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)).**

**NICK'S HEALTH CARE CENTER, LLC**

253 EAST HIGHWAY 116  
PLATTSBURG, MO 64477-1561  
Mailing Address 253 EAST HWY 116  
PLATTSBURG, MO 64477-1561  
Telephone (816) 539-2376  
Level of Care: SNF  
County CLINTON  
Region 4  
Medicare/Medicaid  
Alzheimer's Unit No  
Bed Capacity 62  
DMH Licensed No  
Facility Number 22058  
**Licensed as an assisted living facility (ALF)**, is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

**NIXA NURSING & REHAB**

1104 NORTH MAIN ST  
NIXA, MO 65714-9316  
Mailing Address 1104 N MAIN ST  
NIXA, MO 65714-9316  
Telephone (417) 725-1777  
Level of Care: RCF  
County CHRISTIAN  
Region 1  
Medicare/Medicaid  
Alzheimer's Unit No  
Bed Capacity 82  
DMH Licensed No  
Facility Number 13840  
**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)).**

**NIXA NURSING & REHAB**

1104 NORTH MAIN ST  
NIXA, MO 65714-9316  
Mailing Address 1104 N MAIN ST  
NIXA, MO 65714-9316  
Telephone (417) 725-1777  
Level of Care: SNF  
County CHRISTIAN  
Region 1  
Medicare/Medicaid  
Alzheimer's Unit No  
Bed Capacity 82  
DMH Licensed No  
Facility Number 13840  
**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)).**

**NODAWAY NURSING HOME**

22371 STATE HIGHWAY 46  
MARYVILLE, MO 64468-8157  
Mailing Address PO BOX 307  
MARYVILLE, MO 64468-0307  
Telephone (660) 562-2876  
Level of Care: SNF  
County NODAWAY  
Region 4  
Medicare/Medicaid  
Alzheimer's Unit No  
Bed Capacity 60  
DMH Licensed No  
Facility Number 05766  
**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)).**

**NORMANDY NURSING CENTER**

7301 SAINT CHARLES ROCK RD  
SAINT LOUIS, MO 63133-1737  
Mailing Address 7301 SAINT CHARLES ROCK RD  
SAINT LOUIS, MO 63133-1737  
Telephone (314) 862-0555  
Level of Care: SNF  
County SAINT LOUIS COUNTY  
Region 7  
Medicare/Medicaid  
Alzheimer's Unit No  
Bed Capacity 116  
DMH Licensed No  
Facility Number 01118  
**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)).**

**NORTERRE**

2580 NORTERRE CIRCLE  
LIBERTY, MO 64068-3412  
Mailing Address 2580 NORTERRE CIRCLE  
LIBERTY, MO 64068-3412  
Telephone (816) 479-4793  
Level of Care: ALF**  
County CLAY**  
Region 4  
Medicare/Medicaid  
Alzheimer's Unit Yes  
Bed Capacity 60  
DMH Licensed No  
Facility Number 31005  
**Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

**NORTERRE**

2555 NORTERRE CIRCLE  
LIBERTY, MO 64068-3313  
Mailing Address 2555 NORTERRE CIRCLE  
LIBERTY, MO 64086-3313  
Telephone (816) 479-4793  
Level of Care: SNF  
County CLAY  
Region 4  
Medicare  
Alzheimer's Unit No  
Bed Capacity 60  
DMH Licensed No  
Facility Number 31005  
**Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

*Thursday, May 09, 2019 Page 87 of 133*
<table>
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<th>Facility Name</th>
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<td>NORTH VILLAGE PARK</td>
<td>(660) 269-7300</td>
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<td>NORTHLAND REHABILITATION &amp; HEALTH CARE CENTER</td>
<td>(816) 702-8000</td>
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<td>OAK GROVE NURSING &amp; REHAB</td>
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<tr>
<td>OAK MEADOWS RCF, LLC</td>
<td>(573) 727-9889</td>
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<td>MOBERLY MO 63901-9287</td>
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</tr>
</tbody>
</table>

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<table>
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<tr>
<th>Facility Name</th>
<th>Type</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
<th>Region</th>
<th>Mailing Address</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>County</th>
<th>Mailing Address</th>
<th>Telephone</th>
<th>Level of Care</th>
<th>Alzheimer's Unit</th>
<th>Count</th>
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<td>SNF</td>
<td>SAINT LOUIS CITY</td>
<td>120</td>
<td>No</td>
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<td>6637 BERTHOLD AVE</td>
<td>(314) 781-3444</td>
<td>Medicare/Medicaid</td>
<td>No</td>
<td>SAINT LOUIS CITY</td>
<td>6637 BERTHOLD AVE</td>
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<td>(314) 781-3444</td>
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<td>OAK POINTE OF CARTHAGE</td>
<td>ALF</td>
<td>JASPER</td>
<td>55</td>
<td>No</td>
<td>358-3355</td>
<td>1</td>
<td>300 W AIRPORT DR</td>
<td>(417) 358-3355</td>
<td>ALF**</td>
<td>Yes</td>
<td>CLAY</td>
<td>300 W AIRPORT DR</td>
<td>(417) 358-3355</td>
<td>ALF**</td>
<td>Yes</td>
<td>64836-3511</td>
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<td>OAK POINTE OF KEARNEY</td>
<td>ALF**</td>
<td>CLAY</td>
<td>55</td>
<td>No</td>
<td>628-0075</td>
<td>4</td>
<td>200 MEADOWBROOK DR</td>
<td>(816) 628-0075</td>
<td>ALF**</td>
<td>Yes</td>
<td>CLAY</td>
<td>200 MEADOWBROOK DR</td>
<td>(816) 628-0075</td>
<td>ALF**</td>
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<td>64060-8788</td>
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<tr>
<td>OAK POINTE OF MARYVILLE</td>
<td>ALF**</td>
<td>NODAWAY</td>
<td>55</td>
<td>No</td>
<td>562-2799</td>
<td>4</td>
<td>817 SOUTH COUNTRY CLUB DR</td>
<td>(660) 562-2799</td>
<td>ALF**</td>
<td>Yes</td>
<td>NODAWAY</td>
<td>817 SOUTH COUNTRY CLUB DR</td>
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<td>ALF**</td>
<td>Yes</td>
<td>64468-1477</td>
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<td>OAK POINTE OF MONETT</td>
<td>ALF**</td>
<td>LAWRENCE</td>
<td>55</td>
<td>No</td>
<td>235-3500</td>
<td>1</td>
<td>1011 OLD AIRPORT ROAD</td>
<td>(417) 235-3500</td>
<td>ALF**</td>
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<td>LAWRENCE</td>
<td>1011 OLD AIRPORT ROAD</td>
<td>(417) 235-3500</td>
<td>ALF**</td>
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<td>65708-1375</td>
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<td>OAK POINTE OF NEOSHO</td>
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<td>NEWTON</td>
<td>55</td>
<td>No</td>
<td>451-8872</td>
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<td>2601 OAK RIDGE EXTENSION</td>
<td>(417) 451-8872</td>
<td>ALF**</td>
<td>Yes</td>
<td>NEWTON</td>
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<td>OAK POINTE OF ROLLA</td>
<td>ALF**</td>
<td>PHELPS</td>
<td>65</td>
<td>No</td>
<td>426-2186</td>
<td>6</td>
<td>1000 EAST LIONS CLUB DRIVE</td>
<td>(573) 426-2186</td>
<td>ALF**</td>
<td>Yes</td>
<td>PHELPS</td>
<td>1000 EAST LIONS CLUB DRIVE</td>
<td>(573) 426-2186</td>
<td>ALF**</td>
<td>Yes</td>
<td>65401-4356</td>
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<td>OAK POINTE OF WARRENTON</td>
<td>ALF**</td>
<td>WARREN</td>
<td>71</td>
<td>No</td>
<td>456-6464</td>
<td>6</td>
<td>700 FORREST AVE</td>
<td>(636) 456-6464</td>
<td>ALF**</td>
<td>Yes</td>
<td>WARREN</td>
<td>700 FORREST AVE</td>
<td>(636) 456-6464</td>
<td>ALF**</td>
<td>Yes</td>
<td>63383-7040</td>
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<tr>
<td>OAK RIDGE ASSISTED LIVING</td>
<td>ALF**</td>
<td>RAY</td>
<td>55</td>
<td>No</td>
<td>776-3877</td>
<td>4</td>
<td>403 CRISPIN ST</td>
<td>(816) 776-3877</td>
<td>ALF**</td>
<td>Yes</td>
<td>RAY</td>
<td>403 CRISPIN ST</td>
<td>(816) 776-3877</td>
<td>ALF**</td>
<td>Yes</td>
<td>64085-1212</td>
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</table>

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OAK TREE MANOR
3919 MESSANIE
SAINT JOSEPH MO 64506-3458
Mailing Address PO BOX 8186
SAINT JOSEPH MO 64508-8186
Telephone (816) 233-4463
Level of Care: RCF*
County BUCHANAN
Region 4
Alzheimer's Unit No
Bed Capacity 20
DMH Licensed Yes
Facility Number 15039

OAK TREE VILLAS - A STONEBRIDGE COMMUNITY
3108 WEST TRUMAN BLVD
JEFFERSON CITY MO 65109-4918
Mailing Address 3108 WEST TRUMAN BLVD
JEFFERSON CITY MO 65109-4918
Telephone (573) 893-3063
Level of Care: SNF
County COLE
Region 6
Alzheimer's Unit No
Bed Capacity 42
DMH Licensed No
Facility Number 10300

OAK TREE VILLAS - A STONEBRIDGE COMMUNITY
3108 WEST TRUMAN BLVD
JEFFERSON CITY MO 65109-4918
Mailing Address 3108 WEST TRUMAN BLVD
JEFFERSON CITY MO 65109-4918
Telephone (573) 893-3063
Level of Care: ALF
County COLE
Region 6
Alzheimer's Unit No
Bed Capacity 80
DMH Licensed No
Facility Number 10300

OAKDALE CARE CENTER
2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Mailing Address 2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Telephone (573) 686-5242
Level of Care: SNF
County BUTLER
Region 2
Alzheimer's Unit No
Bed Capacity 70
DMH Licensed No
Facility Number 18157

OAKDALE CARE CENTER
2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Mailing Address 2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Telephone (573) 686-5242
Level of Care: ALF
County BUTLER
Region 2
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 18157

OAKDALE CARE CENTER
2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Mailing Address 2702 DEBBIE LN
POPLAR BLUFF MO 63901-2650
Telephone (573) 686-5242
Level of Care: RCF*
County BUTLER
Region 2
Alzheimer's Unit No
Bed Capacity 36
DMH Licensed Yes
Facility Number 18157

OAKRIDGE OF PLATTSBURG
205 EAST CLAY AVE
PLATTSBURG MO 64477-8100
Mailing Address PO BOX 247
PLATTSBURG MO 64477-0247
Telephone (816) 539-2128
Level of Care: SNF
County CLINTON
Region 4
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 05994

OAKS, THE
5550 NOLAND ROAD
KANSAS CITY MO 64133-3685
Mailing Address 5550 NOLAND RD
KANSAS CITY MO 64133-3685
Telephone (816) 356-0200
Level of Care: RCF
County JACKSON
Region 3
Alzheimer's Unit No
Bed Capacity 62
DMH Licensed Yes
Facility Number 13440

OAKWOOD ESTATES NURSING & REHAB
5303 BERMUDA DR
NORMANDY MO 63121-1407
Mailing Address 5303 BERMUDA DR
NORMANDY MO 63121-1407
Telephone (314) 385-0910
Level of Care: SNF
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit Yes
Bed Capacity 126
DMH Licensed No
Facility Number 01238

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Thursday, May 09, 2019
As of August 27, 2006, 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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Thursday, May 09, 2019
OZARK MANOR
1013 HIGHWAY Z
FREDERICKTOWN MO 63645-8035
Mailing Address 1013 HIGHWAY Z
FREDERICKTOWN MO 63645-8035
Telephone (573) 783-8338
Level of Care: ALF**
Bed Capacity 55
County MADISON
DMH Licensed No
Region 2
Facility Number 22947

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

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

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

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

OZARK REHABILITATION & HEALTH CARE CENTER
1083 OZARK CARE DR
OSAGE BEACH MO 65065-3016
Mailing Address PO BOX 270
OSAGE BEACH MO 65065-0270
Telephone (573) 348-1711
Level of Care: SNF
Bed Capacity 60
County CAMDEN
DMH Licensed No
Region 6
Medicare/Medicaid Facility Number 06217

OZARK RIVERVIEW MANOR
1200 WEST HALL ST
OZARK MO 65721-9103
Mailing Address PO BOX 157
OZARK MO 65721-0157
Telephone (417) 581-6025
Level of Care: SNF
Bed Capacity 90
County CHRISTIAN
DMH Licensed No
Region 1
Medicare/Medicaid Facility Number 01426

OZARKS METHODIST MANOR, THE
205 SOUTH COLLEGE
MARIONVILLE MO 65705-9340
Mailing Address PO BOX 403
MARIONVILLE MO 65705-0403
Telephone (417) 258-2573
Level of Care: RCF
Bed Capacity 76
County LAWRENCE
DMH Licensed No
Region 1
Medicare/Medicaid Facility Number 06273

OZARKS METHODIST MANOR, THE
205 SOUTH COLLEGE
MARIONVILLE MO 65705-9340
Mailing Address PO BOX 403
MARIONVILLE MO 65705-0403
Telephone (417) 258-2573
Level of Care: SNF
Bed Capacity 78
County LAWRENCE
DMH Licensed No
Region 1
Medicare/Medicaid Facility Number 06273

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Thursday, May 09, 2019
**PACIFIC CARE CENTER, LLC**
105 SOUTH SIXTH ST  
105 SOUTH SIXTH ST  
105 SOUTH SIXTH ST

**Telephone** (636) 271-4222  
**Level of Care:** ALF**  
**County:** FRANKLIN  
**Bed Capacity:** 16  
**DMH Licensed:** No  
**Region:** 6  
**Facility Number:** 12638

**PACIFIC CARE CENTER, LLC**
105 SOUTH SIXTH ST  
105 SOUTH SIXTH ST  
105 SOUTH SIXTH ST

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

**PARC PROVENCE**
605 COEUR DE VILLE DR  
605 COEUR DE VILLE DR  
605 COEUR DE VILLE DR

**Telephone** (314) 542-2500  
**Level of Care:** SNF  
**County:** SAINT LOUIS COUNTY  
**Bed Capacity:** 140  
**DMH Licensed:** No  
**Region:** 7  
**Facility Number:** 24122

**PARK PLACE**
2004 BOARDWALK PLACE DR  
2004 BOARDWALK PLACE DR  
2004 BOARDWALK PLACE DR

**Telephone** (636) 561-7275  
**Level of Care:** ALF**  
**County:** SAINT CHARLES  
**Bed Capacity:** 44  
**DMH Licensed:** No  
**Region:** 5  
**Facility Number:** 25379

**PARK PLACE APARTMENTS**
1211 NORTH ASH ST  
1211 NORTH ASH ST  
1211 NORTH ASH ST

**Telephone** (417) 934-6818  
**Level of Care:** ALF  
**County:** HOWELL  
**Bed Capacity:** 18  
**DMH Licensed:** No  
**Region:** 1  
**Facility Number:** 15542

**PARK PLACE II**
2000 BOARDWALK PLACE DR  
2000 BOARDWALK PLACE DR  
2000 BOARDWALK PLACE DR

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

**PARKDALE MANOR CARE CENTER**
814 WEST SOUTH AVE  
814 WEST SOUTH AVE  
814 WEST SOUTH AVE

**Telephone** (660) 582-8161  
**Level of Care:** SNF  
**County:** NODAWAY  
**Bed Capacity:** 92  
**DMH Licensed:** No  
**Region:** 4  
**Medicare/Medicaid**  
**Facility Number:** 06308

**PARKLANE CARE AND REHABILITATION CENTER**
401 MAR-LE DR  
401 MAR-LE DR  
401 MAR-LE DR

**Telephone** (636) 332-9580  
**Level of Care:** SNF  
**County:** SAINT CHARLES  
**Bed Capacity:** 240  
**DMH Licensed:** No  
**Region:** 5  
**Medicare/Medicaid**  
**Facility Number:** 04883

**PARKSIDE MANOR**
1201 HUNT AVE  
1201 HUNT AVE  
1201 HUNT AVE

**Telephone** (573) 449-1448  
**Level of Care:** SNF  
**County:** BOONE  
**Bed Capacity:** 120  
**DMH Licensed:** No  
**Region:** 6  
**Medicare/Medicaid**  
**Facility Number:** 11262

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Thursday, May 09, 2019
### 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  
**Region** 5  
**Bed Capacity** 40  
**DMH Licensed** No  
**Facility Number** 05511

### 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** PHILPS  
**Region** 6  
**Bed Capacity** 28  
**DMH Licensed** No  
**Facility Number** 31191

### PARKVIEW ESTATES

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

**Telephone** (660) 827-3313  
**Level of Care:** RCF*  
**County** PETTIS  
**Region** 6  
**Bed Capacity** 26  
**DMH Licensed** Yes  
**Facility Number** 15971

### PARKVIEW HEALTH CARE FACILITY

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

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

### PARK VIEW HEALTHCARE

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

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

### PARKWAY HEALTH CARE CENTER

2323 SWOPE PARKWAY  
KANSAS CITY  
MO  64130-2638  
**Mailing Address** 2323 SWOPE PARKWAY  
KANSAS CITY  
MO  64130-2638  

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

### 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  
**Region** 3  
**Bed Capacity** 72  
**DMH Licensed** No  
**Facility Number** 29917

### PARKWOOD MANOR

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

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

### PARKWOOD MANOR

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

**Telephone** (573) 334-7011  
**Level of Care:** RCF*  
**County** CAPE GIRARDEAU  
**Region** 2  
**Bed Capacity** 20  
**DMH Licensed** Yes  
**Facility Number** 06291

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<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Level of Care</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
<th>Region</th>
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<tr>
<td>PEARL’S II EDEN FOR ELDERS</td>
<td>611 NORTH COLLEGE</td>
<td>PRINCETON</td>
<td>MO</td>
<td>MERCER</td>
<td>60</td>
<td>SNF</td>
<td>No</td>
<td>No</td>
<td>6</td>
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<tr>
<td>PEARL’S RESIDENTIAL CARE</td>
<td>308 SOUTH BROADWAY</td>
<td>PRINCETON</td>
<td>MO</td>
<td>MERCER</td>
<td>26</td>
<td>RCF*</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
</tr>
<tr>
<td>PETTIS COUNTY ASSISTED LIVING, LLC</td>
<td>3017 BROOKING PARK AVENUE</td>
<td>SEDALIA</td>
<td>MO</td>
<td>PETTIS</td>
<td>139</td>
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<td>Yes</td>
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<tr>
<td>PILLARS OF NORTH COUNTY HEALTH &amp; REHABILITATION CENTER, THE</td>
<td>13700 OLD HALLS FERRY RD</td>
<td>FLORISSANT</td>
<td>MO</td>
<td>SAINT LOUIS COUNTY</td>
<td>120</td>
<td>SNF</td>
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<td>PIN OAKS LIVING CENTER</td>
<td>1525 WEST MONROE ST</td>
<td>MEXICO</td>
<td>MO</td>
<td>AUDRAIN</td>
<td>124</td>
<td>SNF</td>
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<td>PINE LODGE RESIDENTIAL CARE</td>
<td>967 N MAPLE ST</td>
<td>BUFFALO</td>
<td>MO</td>
<td>DALLAS</td>
<td>20</td>
<td>RCF</td>
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<td>PINE VALLEY RCF</td>
<td>3381 1st STREET</td>
<td>DOE RUN</td>
<td>MO</td>
<td>SAINT FRANCOIS</td>
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<td>PINE VIEW MANOR, INC</td>
<td>307 NORTH PINEVIEW ST</td>
<td>STANBERRY</td>
<td>MO</td>
<td>GENTRY</td>
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<td>ALF**</td>
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<tr>
<td>PINE VIEW MANOR, INC</td>
<td>307 NORTH PINEVIEW ST</td>
<td>STANBERRY</td>
<td>MO</td>
<td>GENTRY</td>
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<td>SNF</td>
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Thursday, May 09, 2019
PINEVIEW HEIGHTS ALF
515 GARST
CABOOL, MO 65689-9139
Mailing Address: 515 GARST
CABOOL, MO 65689-9139
Telephone: (417) 962-3713
Level of Care: ALF
County: TEXAS
Region: 1
Alzheimer's Unit: No
Bed Capacity: 16
DMH Licensed: Yes
Facility Number: 24668

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

PLEASANT HILL HEALTH AND REHABILITATION CENTER
1300 BROADWAY
PLEASANT HILL, MO 64080-1842
Mailing Address: 1300 BROADWAY PLEASANT HILL
PLEASANT HILL, MO 64080-1842
Telephone: (816) 540-2116
Level of Care: SNF
County: CASS
Region: 3
Alzheimer's Unit: Yes
Bed Capacity: 102
DMH Licensed: No
Facility Number: 15101

PLEASANT HILL MANOR
213 DAVIS DR
WEST PLAINS, MO 65775-2274
Mailing Address: 213 DAVIS DR WEST PLAINS
WEST PLAINS, MO 65775-2274
Telephone: (417) 257-0179
Level of Care: RCF*
County: HOWELL
Region: 1
Alzheimer's Unit: No
Bed Capacity: 72
DMH Licensed: No
Facility Number: 13641

PLEASANT VALLEY MANOR CARE CENTER
6814 SOBBIE RD
LIBERTY, MO 64068-9555
Mailing Address: 6814 SOBBIE RD LIBERTY
LIBERTY, MO 64068-9555
Telephone: (816) 781-5277
Level of Care: ALF**
County: CLAY
Region: 4
Alzheimer's Unit: No
Bed Capacity: 102
DMH Licensed: No
Facility Number: 06020

PLEASANT VIEW
641 EUCLID AVE
HANNIBAL, MO 63401-2959
Mailing Address: 641 EUCLID AVE HANNIBAL
HANNIBAL, MO 63401-2959
Telephone: (573) 406-1090
Level of Care: ALF**
County: MARION
Region: 5
Alzheimer's Unit: No
Bed Capacity: 41
DMH Licensed: No
Facility Number: 25358

PLEASANT VIEW
470 RAINBOW DR
ROCK PORT, MO 64482-1641
Mailing Address: PO BOX 273 ROCK PORT
ROCK PORT, MO 64482-0273
Telephone: (660) 744-6252
Level of Care: SNF
County: ATCHISON
Region: 4
Alzheimer's Unit: No
Bed Capacity: 60
DMH Licensed: No
Facility Number: 06041

PLEASANT VIEW ESTATES
1401 WEST 3RD
SEDALIA, MO 65301-3603
Mailing Address: 1401 WEST 3RD SEDALIA
SEDALIA, MO 65301-3603
Telephone: (660) 827-1088
Level of Care: RCF*
County: PETTIS
Region: 6
Alzheimer's Unit: No
Bed Capacity: 24
DMH Licensed: Yes
Facility Number: 20727

POINT LOOKOUT NURSING & REHAB
11103 HISTORIC HIGHWAY 165
HOLLISTER, MO 65672-6239
Mailing Address: 11103 HISTORIC HWY 165 HOLLISTER
HOLLISTER, MO 65672-6239
Telephone: (417) 334-4105
Level of Care: SNF
County: TANEY
Region: 1
Alzheimer's Unit: Yes
Bed Capacity: 130
DMH Licensed: No
Facility Number: 12716

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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**
County LAWRENCE
Region 1
Alzheimer's Unit Yes
Bed Capacity 8
DMH Licensed No
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
County NEW MADRID
Region 2
Alzheimer's Unit No
Bed Capacity 60
DMH Licensed No
Facility Number 17119

PORTIA'S RESIDENTIAL CARE
307 N BROADWAY
POPLAR BLUFF MO 63901-5103
Mailing Address 307 N  BROADWAY
POPLAR BLUFF MO 63901-5103
Telephone (573) 438-3225
Level of Care: RCF
County BUTLER
Region 2
Alzheimer's Unit No
Bed Capacity 20
DMH Licensed Yes
Facility Number 03002

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*
County ADAIR
Region 5
Alzheimer's Unit No
Bed Capacity 57
DMH Licensed Yes
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
County GRUNDY
Region 4
Alzheimer's Unit No
Bed Capacity 12
DMH Licensed Yes
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**
County COLE
Region 6
Alzheimer's Unit No
Bed Capacity 45
DMH Licensed No
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**
County PLATTE
Region 4
Alzheimer's Unit No
Bed Capacity 44
DMH Licensed No
Facility Number 29020

PROVISION LIVING AT WEST COUNTY
12826 DAYLIGHT CIRCLE
SAINT LOUIS MO 63131-1890
Mailing Address 12826 DAYLIGHT CIRCLE
SAINT LOUIS MO 63131-1890
Telephone (314) 384-3654
Level of Care: ALF**
County SAINT LOUIS COUNTY
Region 7
Alzheimer's Unit Yes
Bed Capacity 76
DMH Licensed No
Facility Number 30351

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address/PO Box</th>
<th>City/County</th>
<th>State</th>
<th>Bed Capacity</th>
<th>Level of Care</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td><strong>PROVISION OF PROMISE</strong></td>
<td>4528 NORTH MARKET ST</td>
<td>SAINT LOUIS</td>
<td>MO</td>
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<td>Yes</td>
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<td><strong>PUTNAM COUNTY CARE CENTER</strong></td>
<td>1814 OAK ST</td>
<td>UNIONVILLE</td>
<td>MO</td>
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<td>SNF</td>
<td>No</td>
<td>06516</td>
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<tr>
<td><strong>PUXICO NURSING &amp; REHABILITATION CENTER</strong></td>
<td>540 NORTH HWY 51</td>
<td>PUXICO</td>
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<td>60</td>
<td>SNF</td>
<td>No</td>
<td>03163</td>
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<td><strong>QUAIL RUN HEALTH CARE CENTER</strong></td>
<td>1405 WEST GRAND AVE</td>
<td>CAMERON</td>
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<td>SNF</td>
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<td><strong>QUALITY RESIDENTIAL CARE</strong></td>
<td>2034 WEST COLLEGE</td>
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<td><strong>QUARTERS AT DES PERES, THE</strong></td>
<td>13230 MANCHESTER RD</td>
<td>DES PERES</td>
<td>MO</td>
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<td>SNF</td>
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<td>02585</td>
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<td><strong>RANCHO MANOR HEALTHCARE &amp; REHABILITATION CENTER</strong></td>
<td>615 RANCHO LN</td>
<td>FLORISSANT</td>
<td>MO</td>
<td>120</td>
<td>SNF</td>
<td>No</td>
<td>17420</td>
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<td><strong>RATLIFF CARE CENTER</strong></td>
<td>717 NORTH SPRIGG</td>
<td>CAPE GIRARDEAU</td>
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<td><strong>RAVENWOOD - ASSISTED LIVING BY AMERICARE</strong></td>
<td>1950 EAST REPUBLIC RD</td>
<td>SPRINGFIELD</td>
<td>MO</td>
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<td>ALF**</td>
<td>No</td>
<td>20791</td>
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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>Alzheimer's Unit</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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<tr>
<td>RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICARE</td>
<td>1830 RAVENWOOD</td>
<td>MOBERLY</td>
<td>MO</td>
<td>(660) 263-8004</td>
<td>Yes</td>
<td>55</td>
<td>RANDOLPH</td>
<td>5</td>
<td>No</td>
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<tr>
<td>RAYTOWN BICKFORD HOUSE</td>
<td>9110 EAST 63RD ST</td>
<td>RAYTOWN</td>
<td>MO</td>
<td>(816) 353-3400</td>
<td>No</td>
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<tr>
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<td>10425 CHESTNUT DR</td>
<td>KANSAS CITY</td>
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<td>(816) 763-4444</td>
<td>No</td>
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<td>Medicare/Medicaid</td>
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<td>801 EUCLID AVE</td>
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<td>(816) 632-7254</td>
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<td>REDWOOD OF CARMEL HILLS</td>
<td>810 EAST WALNUT ST</td>
<td>INDEPENDENCE</td>
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<td>(816) 461-9600</td>
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<tr>
<td>REDWOOD OF INDEPENDENCE</td>
<td>1800 S SWOPE DR</td>
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<td>MO</td>
<td>(816) 257-2566</td>
<td>Yes</td>
<td>130</td>
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<tr>
<td>REDWOOD OF KANSAS CITY SOUTH</td>
<td>8033 HOLMES RD</td>
<td>KANSAS CITY</td>
<td>MO</td>
<td>(816) 363-6222</td>
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<td>100</td>
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<tr>
<td>REDWOOD OF RAYMORE</td>
<td>600 EAST SUNRISE DR</td>
<td>RAYMORE</td>
<td>MO</td>
<td>(816) 322-1991</td>
<td>Yes</td>
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<tr>
<td>REPUBLIC NURSING &amp; REHAB</td>
<td>901 EAST HIGHWAY 174</td>
<td>REPUBLIC</td>
<td>MO</td>
<td>(417) 732-1822</td>
<td>Yes</td>
<td>127</td>
<td>GREENE</td>
<td>1</td>
<td>Medicare/Medicaid</td>
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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>County</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>REST HAVEN CONVALESCENT &amp; RETIREMENT HOME</td>
<td>Pettis</td>
<td>86</td>
<td>No</td>
<td>06582</td>
</tr>
<tr>
<td>RICHARD CARE CENTER, INC</td>
<td>Pulaski</td>
<td>86</td>
<td>No</td>
<td>08100</td>
</tr>
<tr>
<td>RICHMOND TERRACE ASSISTED LIVING</td>
<td>Saint Louis County</td>
<td>99</td>
<td>Yes</td>
<td>22269</td>
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<tr>
<td>RIDGE CREST NURSING CENTER</td>
<td>Johnson</td>
<td>120</td>
<td>No</td>
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<tr>
<td>RIDGEVIEW ASSISTED LIVING CENTER</td>
<td>Stoddard</td>
<td>26</td>
<td>No</td>
<td>10128</td>
</tr>
<tr>
<td>RIDGEVIEW LIVING COMMUNITY</td>
<td>Dunklin</td>
<td>96</td>
<td>No</td>
<td>06656</td>
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<tr>
<td>RIDGECWAY RESIDENTIAL CARE</td>
<td>Franklin</td>
<td>20</td>
<td>Yes</td>
<td>06668</td>
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<tr>
<td>RIVER CITY LIVING COMMUNITY</td>
<td>Cole</td>
<td>87</td>
<td>No</td>
<td>04826</td>
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<td>RIVER MIST - ASSISTED LIVING BY AMERICARE</td>
<td>Butler</td>
<td>42</td>
<td>No</td>
<td>20291</td>
</tr>
</tbody>
</table>

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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>County</th>
<th>Region</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
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<td>RIVERVIEW RESIDENTIAL PLACE</td>
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<td>1</td>
<td>RCF*</td>
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</table>

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<tr>
<th>Facility Name</th>
<th>County</th>
<th>Region</th>
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<th>Level of Care</th>
<th>Alzheimer's Unit</th>
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<td>5500 SOUTH BROADWAY</td>
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<tr>
<td>4235 LOCUST ST</td>
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ROLLA HEALTH & REHABILITATION SUITES
1200 MCCUTCHEN RD
ROLLA MO 65401-2615
Mailing Address 1200 MCCUTCHEN RD
ROLLA MO 65401-2615
Telephone (573) 364-2311 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 116
County PHELPS DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 08862

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

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

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

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

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

ROSEWOOD CARE CENTER OF ST LOUIS
11278 SCHUETZ RD
SAINT LOUIS MO 63146-4957
Mailing Address 11278 SCHUETZ RD
SAINT LOUIS MO 63146-4957
Telephone (314) 991-4066 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 16378

ROSEWOOD HEALTH AND REHAB CENTER
1415 WEST WHITE OAK
INDEPENDENCE MO 64050-2590
Mailing Address 1415 WEST WHITE OAK
INDEPENDENCE MO 64050-2590
Telephone (816) 254-3500 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 300
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 06604

ROSEWOOD MANOR
101 EAST PULASKI ST
RICHLAND MO 65556-7404
Mailing Address 101 EAST PULASKI ST
RICHLAND MO 65556-7404
Telephone (573) 765-4200 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 12
County PULASKI DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 26939

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ROSEWOOD RESIDENTIAL CARE
13450 COUNTY RD 7040
ROLLA MO 65401-8122
Mailing Address 13450 COUNTY RD 7040
ROLLA MO 65401-8122
Telephone (573) 341-8000 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 9
County PHELPS DMH Licensed No
Region 6 Facility Number 21083

ROYAL OAK NURSING & REHAB
4960 LACLEDE AVE
SAINT LOUIS MO 63108-1404
Mailing Address 4960 LACLEDE AVE
SAINT LOUIS MO 63108-1404
Telephone (314) 361-6240 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 168
County SAINT LOUIS CITY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 06322

ROYAL OAKS RESIDENCE
507 EAST MARSHALL
SWEET SPRINGS MO 65351-9759
Mailing Address PO BOX 204
SWEET SPRINGS MO 65351-0204
Telephone (660) 335-6500 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 51
County SALINE DMH Licensed Yes
Region 5 Facility Number 14953

SADDLER RESIDENTIAL CARE FACILITY INC
730 HODIAMONT AVE
SAINT LOUIS MO 63112-2002
Mailing Address 730 HODIAMONT AVE
SAINT LOUIS MO 63112-2002
Telephone (314) 725-3709 Alzheimer's Unit No
Level of Care: ALF Bed Capacity 20
County SAINT LOUIS CITY DMH Licensed Yes
Region 7 Facility Number 02354

SALEM CARE CENTER
1203 NORTH JACKSON
SALEM MO 65560-1076
Mailing Address PO BOX 29
SALEM MO 65560-0029
Telephone (573) 729-6649 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 60
County DENT DMH Licensed No
Region 6 Medicaid Facility Number 02354

SALEM RESIDENTIAL CARE
1207 EAST ROOSEVELT ST
SALEM MO 65560-9676
Mailing Address 1207 EAST ROOSEVELT ST
SALEM MO 65560-9676
Telephone (573) 729-9449 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 35
County DENT DMH Licensed No
Region 6 Facility Number 19746

SALT RIVER COMMUNITY CARE
142 SHELBY PLAZA RD
SHELBYNA MO 63468-1065
Mailing Address PO BOX 529
SHELBYNA MO 63468-0529
Telephone (573) 588-4175 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 120
County SHELBY DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 06934

SARCOXIE NURSING CENTER
1505 MINER
SARCOXIE MO 64862-9211
Mailing Address PO BOX 248
SARCOXIE MO 64862-0248
Telephone (417) 548-3434 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 40
County JASPER DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 06864

SCENIC NURSING AND REHABILITATION CENTER, LLC
1333 SCENIC DR
HERCULANEUM MO 63048-1550
Mailing Address 1333 SCENIC DR
HERCULANEUM MO 63048-1550
Telephone (636) 931-2995 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 189
County JEFFERSON DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 09605

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SCHUYLER COUNTY NURSING HOME
1306 US HIGHWAY 63
QUEEN CITY MO 63561-2251
Mailing Address 1306 US HIGHWAY 63
QUEEN CITY MO 63561-2251
Telephone (660) 766-2291
Level of Care: SNF
County SCHUYLER
Region 5 Medicare/Medicaid
Bed Capacity 60
DMH Licensed No
Alzheimer's Unit No
Facility Number 07004

SCOTLAND COUNTY CARE CENTER
434 E SIGLER AVE
MEMPHIS MO 63555-1714
Mailing Address 434 E SIGLER AVE
MEMPHIS MO 63555-1714
Telephone (660) 465-7221
Level of Care: SNF
County SCOTLAND
Region 5 Medicare/Medicaid
Bed Capacity 96
DMH Licensed No
Alzheimer's Unit Yes
Facility Number 07013

SCOTLAND COUNTY RESIDENTIAL TERRACE
434 E SIGLER AVE
MEMPHIS MO 63555-1718
Mailing Address 434 E SIGLER AVE
MEMPHIS MO 63555-1718
Telephone (660) 465-7221
Level of Care: RCF*
County SCOTLAND
Region 5 Medicare/Medicaid
Bed Capacity 28
DMH Licensed No
Alzheimer's Unit No
Facility Number 07013

SEASONS CARE CENTER
15600 WOODS CHAPEL RD
KANSAS CITY MO 64139-1261
Mailing Address 15600 WOODS CHAPEL RD
KANSAS CITY MO 64139-1261
Telephone (816) 478-4757
Level of Care: SNF
County JACKSON
Region 3 Medicare/Medicaid
Bed Capacity 78
DMH Licensed No
Alzheimer's Unit Yes
Facility Number 23712

SENEATH HEALTH CARE CENTER
300 EAST HORNBECK ST
SENAUTH MO 63876-9225
Mailing Address PO BOX 940
SENAUTH MO 63876-0940
Telephone (573) 738-2627
Level of Care: SNF
County DUNKLIN
Region 2 Medicare/Medicaid
Bed Capacity 120
DMH Licensed No
Alzheimer's Unit No
Facility Number 07075

SENEATH SOUTH HEALTH CARE CENTER
300 EAST HORNBECK ST
SENAUTH MO 63876-9225
Mailing Address PO BOX 940
SENAUTH MO 63876-0940
Telephone (573) 738-2627
Level of Care: SNF
County DUNKLIN
Region 2 Medicare/Medicaid
Bed Capacity 30
DMH Licensed No
Alzheimer's Unit No
Facility Number 16147

SENECA HOME PLACE
2400 SOUTH CHEROKEE AVE
SENECA MO 64865-9323
Mailing Address 2400 S CHEROKEE AVE
SENECA MO 64865-9323
Telephone (417) 776-8053
Level of Care: RCF*
County NEWTON
Region 1 Medicare/Medicaid
Bed Capacity 30
DMH Licensed No
Alzheimer's Unit No
Facility Number 17571

SENECA HOUSE
914 CHICKESAW ST
SENECA MO 64865-9281
Mailing Address 914 CHICKESAW ST
SENECA MO 64865-9281
Telephone (417) 776-8041
Level of Care: SNF
County NEWTON
Region 1 Medicare/Medicaid
Bed Capacity 80
DMH Licensed No
Alzheimer's Unit No
Facility Number 17090

SEVILLE CARE CENTER
35625 HIGHWAY 72
SALEM MO 65560-7217
Mailing Address PO BOX 746
SALEM MO 65560-0746
Telephone (573) 729-6141
Level of Care: SNF
County DENT
Region 6 Medicare/Medicaid
Bed Capacity 90
DMH Licensed No
Alzheimer's Unit No
Facility Number 07110

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SHADY LAWN LIVING CENTER
13277 STATE ROUTE D
SAVANNAH  MO  64485-9431
Mailing Address 13277 STATE ROUTE D
SAVANNAH  MO  64485-9431
Telephone   (816) 324-5991   Alzheimer's Unit   Yes
Level of Care:   SNF   Bed Capacity   88
County Andrew   DMH Licensed   No
Region 4 Medicare/Medicaid   Facility Number   07147

SHADY OAKS HEALTHCARE CENTER
715 S STATE ROUTE 19
THAYER  MO  65791-1415
Mailing Address 715 S STATE ROUTE 19
THAYER  MO  65791-1415
Telephone   (417) 264-7256   Alzheimer's Unit   No
Level of Care:   SNF   Bed Capacity   120
County Oregon   DMH Licensed   No
Region 2 Medicare/Medicaid   Facility Number   01364

SHADY OAKS RETIREMENT HOME
2913 BEDOLL AVE
POPLAR BLUFF  MO  63901-6809
Mailing Address 2913 BEDOLL AVE
POPLAR BLUFF  MO  63901-6809
Telephone   (573) 785-0903   Alzheimer's Unit   No
Level of Care:   RCF   Bed Capacity   11
County Butler   DMH Licensed   Yes
Region 2 Medicare/Medicaid   Facility Number   07196

SHANGRI LA REHAB & LIVING CENTER
930 NORTH EAST DUNCAN RD
BLUE SPRINGS  MO  64014-2173
Mailing Address 930 NORTH EAST DUNCAN RD
BLUE SPRINGS  MO  64014-2173
Telephone   (816) 229-6677   Alzheimer's Unit   No
Level of Care:   SNF   Bed Capacity   68
County Jackson   DMH Licensed   No
Region 3 Medicare/Medicaid   Facility Number   00677

SHELBINA VILLA LIFECARE
218 EAST SHELBINA AVE
SHELBINA  MO  63468-4328
Mailing Address 218 EAST SHELBINA AVE
SHELBINA  MO  63468-4328
Telephone   (573) 588-4115   Alzheimer's Unit   No
Level of Care:   ALF**   Bed Capacity   68
County Shelby   DMH Licensed   No
Region 5 Medicare/Medicaid   Facility Number   18584

SHEPHERD OF THE HILLS LIVING CENTER
996 STATE HIGHWAY 248
BRANSON  MO  65616-8154
Mailing Address 996 STATE HWY 248
BRANSON  MO  65616-8154
Telephone   (417) 334-6431   Alzheimer's Unit   No
Level of Care:   SNF   Bed Capacity   100
County Taney   DMH Licensed   No
Region 1 Medicare/Medicaid   Facility Number   06810

SHEPHERD'S VIEW ASSISTED LIVING
100 SHEPHERDS LN
ALTON  MO  65606-0429
Mailing Address PO BOX 429
ALTON  MO  65606-0429
Telephone   (314) 778-7959   Alzheimer's Unit   No
Level of Care:   ALF**   Bed Capacity   39
County Oregon   DMH Licensed   No
Region 2 Medicare/Medicaid   Facility Number   23135

SHERIDAN AT CHESTERFIELD, THE
16300 JUSTUS POST ROAD
CHESTERFIELD  MO  63017-4608
Mailing Address 16300 JUSTUS POST ROAD
CHESTERFIELD  MO  63017-4608
Telephone   (636) 778-4800   Alzheimer's Unit   Yes
Level of Care:   ALF**   Bed Capacity   95
County Saint Louis County   DMH Licensed   No
Region 7 Medicare/Medicaid   Facility Number   30848

SHERIDAN AT CREVE COEUR, THE
450 NORTH LINDBERGH BLVD
CREVE COEUR  MO  63141-
Mailing Address 450 N LINDBERGH BLVD
CREVE COEUR  MO  63141-
Telephone   (314) 628-0004   Alzheimer's Unit   Yes
Level of Care:   ALF**   Bed Capacity   39
County Saint Louis County   DMH Licensed   No
Region 7 Medicare/Medicaid   Facility Number   30479

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<th>City</th>
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<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>SHERIDAN AT LAUMEIER PARK, THE</td>
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<td>SUNSET HILLS</td>
<td>MO 63127-1247</td>
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<td>No</td>
<td>30466</td>
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<td>SHIRKEY NURSING &amp; REHABILITATION CENTER</td>
<td>804 WOLLARD BLVD</td>
<td>RICHMOND</td>
<td>MO 64085-2227</td>
<td>197</td>
<td>No</td>
<td>07289</td>
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<tr>
<td>SIENNA HOUSE, INC</td>
<td>1322 LEROY AVE</td>
<td>SAINT LOUIS</td>
<td>MO 63133-1504</td>
<td>16</td>
<td>Yes</td>
<td>07310</td>
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<td>SIKESTON CONVALESCENT CENTER</td>
<td>103 KENNEDY DR</td>
<td>SIKESTON</td>
<td>MO 63801-5126</td>
<td>120</td>
<td>No</td>
<td>06838</td>
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<td>SILEX COMMUNITY CARE</td>
<td>111 DUNCAN MANSION RD</td>
<td>SILEX</td>
<td>MO 63377-2229</td>
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<td>No</td>
<td>20982</td>
</tr>
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<td>SILEX RESIDENTIAL HOME, LLC</td>
<td>145 DUNCAN MANSION RD</td>
<td>SILEX</td>
<td>MO 63377-2229</td>
<td>60</td>
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<td>SILVER CREEK - ASSISTED LIVING BY AMERICARE</td>
<td>3325 TEXAS AVE</td>
<td>JOPLIN</td>
<td>MO 64804-4343</td>
<td>68</td>
<td>No</td>
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<td>SILVER SPUR</td>
<td>3300 TEXAS AVE</td>
<td>SAINT LOUIS</td>
<td>MO 63118-3111</td>
<td>37</td>
<td>Yes</td>
<td>29351</td>
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<td>SILVERSTONE PLACE</td>
<td>2735 EAGLESON DR</td>
<td>ROLLA</td>
<td>MO 65401-8384</td>
<td>110</td>
<td>No</td>
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</table>

* 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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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address Details</th>
<th>Telephone</th>
<th>Bed Capacity</th>
<th>Region</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>SMILEY MANOR LLC</td>
<td>5415 THEKLA AVE, SAINT LOUIS MO 63120-2513</td>
<td>(314) 932-1360</td>
<td>20</td>
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<tr>
<td>SMITHVILLE LIVING CENTER</td>
<td>106 HOSPITAL DR, SMITHVILLE MO 64089-9333</td>
<td>(816) 532-0888</td>
<td>100</td>
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<tr>
<td>SONSINE MANOR</td>
<td>300 S COTTONWOOD AVE, REPUBLIC MO 65738-2093</td>
<td>(417) 732-2929</td>
<td>69</td>
<td>1</td>
<td>No</td>
<td>16723</td>
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<tr>
<td>SOUTH COUNTY NURSING HOME, INC</td>
<td>1101 WEST OUTER 21 RD, ARNOLD MO 63010-4644</td>
<td>(636) 296-5455</td>
<td>153</td>
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<td>SOUTH HAMPTON PLACE</td>
<td>4700 BRANDON WOODS, COLUMBIA MO 65203-7169</td>
<td>(573) 874-3674</td>
<td>100</td>
<td>6</td>
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<td>19799</td>
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<td>SOUTH HAVEN RESIDENTIAL CARE CENTER, LLC</td>
<td>10462 AIRPORT RD, MINERAL POINT MO 63660-9325</td>
<td>(573) 438-4150</td>
<td>20</td>
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<td>SOUTH POINTE - ASSISTED LIVING BY AMERICARE</td>
<td>5125 OLD HWY 100, WASHINGTON MO 63090-3855</td>
<td>(636) 239-0670</td>
<td>72</td>
<td>6</td>
<td>No</td>
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<tr>
<td>SOUTH VIEW HEALTH CARE, LLC</td>
<td>951 CREAMERY ROAD, WEST PLAINS MO 65775-6052</td>
<td>(417) 255-9322</td>
<td>32</td>
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<td>SOUTHAVEN</td>
<td>612 SOUTH BYPASS EAST, KENNETT MO 63857-3240</td>
<td>(573) 888-9213</td>
<td>36</td>
<td>2</td>
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Thursday, May 09, 2019
SOUTHBROOK - SKILLED NURSING BY AMERICARE
1108 WEST LIBERTY
FARMINGTON  MO  63640-1922
Mailing Address  1108 WEST LIBERTY
FARMINGTON  MO  63640-1922
Telephone  (573) 756-6658
Level of Care:  SNF
County  SAINT FRANCOIS
Region  2  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  104
DMH Licensed  No
Facility Number  02577

SOUTHATE LIVING CENTER
500 TRUMAN BLVD
CARUTHERSVILLE  MO  63630-1261
Mailing Address  500 TRUMAN BLVD
CARUTHERSVILLE  MO  63630-1261
Telephone  (573) 333-5150
Level of Care:  SNF
County  PEMISCOT
Region  2  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  94
DMH Licensed  No
Facility Number  01081

SOUTHSIDE TOWNE HOUSE
510 SOUTH WASHINGTON
MEXICO  MO  65265-2786
Mailing Address  PO BOX 6
MEXICO  MO  65265-0006
Telephone  (573) 581-3203
Level of Care:  RCF*
County  AUDRAIN
Region  5  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  12
DMH Licensed  Yes
Facility Number  16987

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

SPECIAL FORCE FAMILY MINISTRIES
428 SOUTH HARRISON ST
NIXA  MO  65714-7809
Mailing Address  PO BOX 882
NIXA  MO  65714-0882
Telephone  (417) 725-7917
Level of Care:  RCF
County  CHRISTIAN
Region  1  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  12
DMH Licensed  Yes
Facility Number  18764

SPENCER PLACE - ASSISTED LIVING BY AMERICARE
265 SPENCER RD
SAINT PETERS  MO  63376-2430
Mailing Address  265 SPENCER RD
SAINT PETERS  MO  63376-2430
Telephone  (636) 441-6662
Level of Care:  ALF**
County  SAINT CHARLES
Region  5  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  74
DMH Licensed  No
Facility Number  13294

SPRIGG STREET MANOR
701 NORTH SPRIGG
CAPE GIRARDEAU  MO  63704-4815
Mailing Address  701 NORTH SPRIGG
CAPE GIRARDEAU  MO  63704-4815
Telephone  (573) 334-2975
Level of Care:  RCF
County  CAPE GIRARDEAU
Region  2  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  15
DMH Licensed  Yes
Facility Number  17420

SPRING MANOR
3610 PALM ST
SAINT LOUIS  MO  63107-2505
Mailing Address  3610 PALM ST
SAINT LOUIS  MO  63107-2505
Telephone  (314) 533-3111
Level of Care:  ALF**
County  SAINT LOUIS CITY
Region  7  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  94
DMH Licensed  Yes
Facility Number  28552

SPRING RIDGE - ASSISTED LIVING BY AMERICARE
2828 SOUTH MEADOWBROOK
SPRINGFIELD  MO  65807-5925
Mailing Address  2828 SOUTH MEADOWBROOK
SPRINGFIELD  MO  65807-5925
Telephone  (417) 889-7100
Level of Care:  ALF**
County  GREENE
Region  1  Medicare/Medicaid
Alzheimer's Unit  No
Bed Capacity  44
DMH Licensed  No
Facility Number  19713

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Mailing Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td><strong>SPRING RIVER CHRISTIAN VILLAGE, INC</strong></td>
<td>201 S NORTHPARK LN</td>
<td>JOPLIN</td>
<td>JASPER</td>
<td>1</td>
<td>120</td>
<td>No</td>
<td>14251</td>
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<tr>
<td><strong>SPRING RIVER CHRISTIAN VILLAGE, INC</strong></td>
<td>201 S NORTHPARK LN</td>
<td>JOPLIN</td>
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<td>93</td>
<td>No</td>
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<tr>
<td><strong>SPRING VALLEY ASSISTED LIVING</strong></td>
<td>2915 SOUTH FREMONT AVE</td>
<td>SPRINGFIELD</td>
<td>GREENE</td>
<td>1</td>
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<td><strong>SPRING VALLEY HEALTH &amp; REHABILITATION CENTER</strong></td>
<td>2915 SOUTH FREMONT AVE</td>
<td>SPRINGFIELD</td>
<td>GREENE</td>
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<td><strong>SPRINGFIELD REHABILITATION &amp; HEALTH CARE CENTER</strong></td>
<td>2800 S FORT AVE</td>
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<td><strong>SPRINGFIELD SKILLED CARE CENTER</strong></td>
<td>2401 W GRAND ST</td>
<td>SPRINGFIELD</td>
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<td><strong>SPRINGFIELD VILLA</strong></td>
<td>1100 EAST MONTCLAIR</td>
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<td>No</td>
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<td><strong>SPRINGHILL - ASSISTED LIVING BY AMERICARE</strong></td>
<td>1105 VILLAGE RD</td>
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<td><strong>ST AGNES HOME</strong></td>
<td>10341 MANCHESTER RD</td>
<td>KIRKWOOD</td>
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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>City</th>
<th>State</th>
<th>Region</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
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<td>ST ANN ASSISTED LIVING CENTER</td>
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<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
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<th>Phone</th>
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<th>County</th>
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<th>Medicare/Medicaid</th>
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<tbody>
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<td>ST FRANCOIS MANOR</td>
<td>1180 OLD JACKSON RD</td>
<td>FARMINGTON</td>
<td>MO</td>
<td>(573) 760-1700</td>
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<td>(573) 760-1700</td>
<td>ALF</td>
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<tr>
<td>ST JOE MANOR</td>
<td>10 LAKE DR</td>
<td>BONNE TERRE</td>
<td>MO</td>
<td>(573) 358-2800</td>
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<tr>
<td>ST JOE MANOR</td>
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<td>BONNE TERRE</td>
<td>MO</td>
<td>(573) 358-2800</td>
<td>SNF</td>
<td>94</td>
<td>SAINT FRANCOIS</td>
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<td>No</td>
<td>No</td>
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<tr>
<td>ST JOSEPH CHATEAU</td>
<td>811 NORTH 9TH ST</td>
<td>SAINT JOSEPH</td>
<td>MO</td>
<td>(816) 233-5164</td>
<td>SNF</td>
<td>69</td>
<td>BUCHANAN</td>
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ST JOSEPH SENIOR LIVING
110
1317 NORTH 36TH ST
SAINT JOSEPH
MO 64506-2359
Telephone (816) 676-1630 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 110
County BUCHANAN DMH Licensed No
Region 4 Medicare/Medicaid Facility Number 00526

ST JOSEPH'S BLUFFS
131
1306 WEST MAIN ST
JEFFERSON CITY
MO 65109-1356
Telephone (573) 635-0166 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 69
County COLE DMH Licensed No
Region 6 Medicare Facility Number 07572

ST LOUIS ALTENHEIM
24
5408 SOUTH BROADWAY
SAINT LOUIS
MO 63111-2023
Telephone (314) 353-7225 Alzheimer's Unit No
Level of Care: ICF Bed Capacity 24
County SAINT LOUIS CITY DMH Licensed No
Region 7 Medicaid Facility Number 07585

ST LOUIS ALTENHEIM
23
5408 SOUTH BROADWAY
SAINT LOUIS
MO 63111-2023
Telephone (314) 353-7225 Alzheimer's Unit Yes
Level of Care: ALF** Bed Capacity 23
County SAINT LOUIS CITY DMH Licensed No
Region 7 Facility Number 07585

ST LOUIS PLACE HEALTH & REHABILITATION
120
2600 REDMAN RD
SAINT LOUIS
MO 63136-5863
Telephone (314) 355-8585 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 120
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 18697

ST LUKE'S CARE CENTER, INC
10
1220 EAST FAIRVIEW AVE
CARTHAGE
JASPER
Telephone (417) 358-9084 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 41
County JASPER DMH Licensed No
Region 1 Facility Number 07606

ST LUKE'S NURSING CENTER, INC
10
1220 EAST FAIRVIEW AVE
CARTHAGE
JASPER
Telephone (417) 358-9084 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 95
County JASPER DMH Licensed No
Region 1 Medicare/Medicaid Facility Number 07606

ST MARY'S MANOR
10
111 MOCK AVE
BLUE SPRINGS
JACKSON
Telephone (816) 228-5655 Alzheimer's Unit Yes
Level of Care: SNF Bed Capacity 130
County JACKSON DMH Licensed No
Region 3 Medicare/Medicaid Facility Number 13219

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<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>Alzheimer's Unit</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<td>ST MARY'S MANOR</td>
<td>111 MOCK AVE</td>
<td>BLUE SPRINGS</td>
<td>MO 64014-2504</td>
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<td>ST PETERS MANOR CARE CENTER</td>
<td>230 SPENCER RD</td>
<td>SAINT PETERS</td>
<td>MO 63376-2425</td>
<td></td>
<td>(636) 441-2750</td>
<td>Yes</td>
<td>94</td>
<td>No</td>
<td>07613</td>
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<tr>
<td>ST SOPHIA HEALTH &amp; REHABILITATION CENTER</td>
<td>936 CHARBONIER RD</td>
<td>FLORISSANT</td>
<td>MO 63031-5220</td>
<td></td>
<td>(314) 831-4800</td>
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<td>No</td>
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<tr>
<td>STARCARE</td>
<td>1606 SOUTH 38TH ST</td>
<td>SAINT JOSEPH</td>
<td>MO 64507-2216</td>
<td></td>
<td>(816) 390-8941</td>
<td>No</td>
<td>18</td>
<td>Yes</td>
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<tr>
<td>STEELVILLE SENIOR LIVING</td>
<td>311 NORTH SPRING ST</td>
<td>STEELVILLE</td>
<td>MO 65565-5089</td>
<td></td>
<td>(573) 775-5815</td>
<td>No</td>
<td>72</td>
<td>No</td>
<td>02860</td>
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<tr>
<td>STEELVILLE SENIOR LIVING</td>
<td>311 NORTH SPRING ST</td>
<td>STEELVILLE</td>
<td>MO 65565-5089</td>
<td></td>
<td>(573) 775-5815</td>
<td>No</td>
<td>21</td>
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<td>02860</td>
</tr>
<tr>
<td>STONEBRIDGE MARYLAND HEIGHTS</td>
<td>2963 DODDRIDGE AVE</td>
<td>MARYLAND HEIGHTS</td>
<td>MO 63043-1736</td>
<td></td>
<td>(314) 291-4557</td>
<td>No</td>
<td>223</td>
<td>No</td>
<td>00855</td>
</tr>
<tr>
<td>STONECREST HEALTHCARE</td>
<td>2 HIGHWAY Y</td>
<td>VIBURNUM</td>
<td>MO 65566-0707</td>
<td></td>
<td>(573) 244-3171</td>
<td>No</td>
<td>60</td>
<td>No</td>
<td>16689</td>
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<tr>
<td>STONEY RIDGE VILLAGE</td>
<td>25023 BOTHWELL PARK RD</td>
<td>SEDALIA</td>
<td>MO 65301-0084</td>
<td></td>
<td>(660) 827-3993</td>
<td>No</td>
<td>81</td>
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<td>05035</td>
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</tbody>
</table>

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<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address Details</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>Medicare/Medicaid</th>
<th>DMH Licensed</th>
<th>Region</th>
<th>Facility Number</th>
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<tr>
<td>STOVER'S RESIDENTIAL CARE FACILITY</td>
<td>520 EAST 5TH ST, MILAN, MO 63556-1222</td>
<td></td>
<td>20</td>
<td>No</td>
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<td>STRAFFORD CARE CENTER</td>
<td>505 WEST EVERGREEN, STRAFFORD, MO 65757-8625</td>
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<tr>
<td>STUART HOUSE, LLC THE</td>
<td>117 S HICKMAN, CENTRALIA, MO 65240-1316</td>
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<td>No</td>
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<td>STUBBLEFIELD RETIREMENT HOME</td>
<td>5349 HIGHWAY P, CUBA, MO 65453-6281</td>
<td></td>
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<td>17894</td>
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<tr>
<td>STURGEON REST HOME</td>
<td>315 E STONE ST, STURGEON, MO 65284-8907</td>
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<td>SUGAR CREEK - ASSISTED LIVING BY AMERICARE</td>
<td>161 PROFESSIONAL PARKWAY, TROY, MO 63379-2829</td>
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<td>No</td>
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<tr>
<td>SUMMIT VILLA LIFECARE</td>
<td>229 KAREN DR, HOLTS SUMMIT, MO 65043-2522</td>
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<td>No</td>
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<td>SUMMIT, THE</td>
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<tr>
<td>SUMMITVIEW TERRACE ASSISTED LIVING BY AMERICARE</td>
<td>12101 EAST BANNISTER RD, KANSAS CITY, MO 64138-4913</td>
<td></td>
<td>52</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>3</td>
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</tr>
</tbody>
</table>

* 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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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Facility Number</th>
<th>Region</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
</tr>
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<tbody>
<tr>
<td>SUNNY MEADOWS LIVING CENTER</td>
<td>419 NORTH PROSPECT AVE</td>
<td>SEDALIA</td>
<td>MO</td>
<td>06527</td>
<td>6</td>
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<td>Yes</td>
<td>06527</td>
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<tr>
<td>SUNNYHILL INDEPENDENCE CENTER</td>
<td>3343 ARMBRUSTER ROAD</td>
<td>DE SOTO</td>
<td>MO</td>
<td>29674</td>
<td>2</td>
<td>ALF**</td>
<td>32</td>
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<tr>
<td>SUNNYHILL RESIDENTIAL CARE FACILITY</td>
<td>134 GRAY ST</td>
<td>FESTUS</td>
<td>MO</td>
<td>07725</td>
<td>2</td>
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<td>SUNNYHILLS RESIDENTIAL CARE FACILITY</td>
<td>17562 IMPERIAL RD</td>
<td>CARTHAGE</td>
<td>MO</td>
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<td>SUNNYVIEW NURSING HOME &amp; APARTMENTS</td>
<td>1311 EAST 28TH ST</td>
<td>TRENTON</td>
<td>MO</td>
<td>18509</td>
<td>4</td>
<td>RCF*</td>
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<tr>
<td>SUNNYVIEW NURSING HOME &amp; APARTMENTS</td>
<td>1311 EAST 28TH ST</td>
<td>TRENTON</td>
<td>MO</td>
<td>18509</td>
<td>4</td>
<td>SNF</td>
<td>154</td>
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<td>18509</td>
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<tr>
<td>SUNRISE OF CHESTERFIELD</td>
<td>1880 CLARKSON RD</td>
<td>CHESTERFIELD</td>
<td>MO</td>
<td>23767</td>
<td>7</td>
<td>ALF**</td>
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<td>No</td>
<td>23767</td>
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<tr>
<td>SUNRISE OF CHESTERFIELD</td>
<td>1880 CLARKSON RD</td>
<td>CHESTERFIELD</td>
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<td>23767</td>
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<td>SUNRISE OF DES PERES</td>
<td>13460 MANCHESTER RD</td>
<td>DES PERES</td>
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<td>24242</td>
<td>7</td>
<td>ICF</td>
<td>102</td>
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<td>24242</td>
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</table>

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Thursday, May 09, 2019
**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**
Alzheimer's Unit  Yes
Bed Capacity  90
County SAINT LOUIS COUNTY
Facility Number 28242
Region 7

**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
Alzheimer's Unit  Yes
Bed Capacity  90
County SAINT LOUIS COUNTY
Facility Number 24149
Region 7

**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
Facility Number 07831
Region 6
Medicare/Medicaid

**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
Facility Number 03182
Region 7
Medicare/Medicaid

**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
Facility Number 07798
Region 4
Medicare/Medicaid

**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
Facility Number 03540
Region 6
Medicare/Medicaid

**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
Facility Number 08653
Region 5

**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
Facility Number 25266
Region 5

**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  22
County SCOTT
DMH Licensed  Yes
Facility Number 07039
Region 2

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<table>
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<tr>
<th>Facility Name</th>
<th>Mailing Address</th>
<th>Phone Number</th>
<th>Level of Care</th>
<th>Bed Capacity</th>
<th>Region</th>
<th>Medicare/Medicaid</th>
<th>County</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tbody>
<tr>
<td>SUNTERRA SPRINGS INDEPENDENCE</td>
<td>19200 E 37TH TERRACE S</td>
<td>(816) 335-3008</td>
<td>SNF</td>
<td>38</td>
<td>3</td>
<td>No</td>
<td>Jackson</td>
<td>No</td>
<td>30894</td>
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<tr>
<td>SUNTERRA SPRINGS SPRINGFIELD</td>
<td>4935 S NATIONAL AVE</td>
<td>(417) 720-8050</td>
<td>SNF</td>
<td>38</td>
<td>1</td>
<td>No</td>
<td>Greene</td>
<td>No</td>
<td>31273</td>
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<tr>
<td>SUPERIOR MANOR OF DOWNTOWN, LLC</td>
<td>1501 CLINTON STREET</td>
<td>(314) 376-5000</td>
<td>RCF</td>
<td>40</td>
<td>7</td>
<td>No</td>
<td>Missouri</td>
<td>No</td>
<td>30136</td>
</tr>
<tr>
<td>SURREY PLACE ST LUKE'S HOSPITAL</td>
<td>14701 OLIVE BLVD</td>
<td>(314) 542-3300</td>
<td>SNF</td>
<td>130</td>
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<td>No</td>
<td>Saint Louis County</td>
<td>Yes</td>
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<tr>
<td>SWEET SPRINGS VILLA</td>
<td>518 E MARSHALL</td>
<td>(660) 335-6391</td>
<td>SNF</td>
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<td>5</td>
<td>Medicare/Medicaid</td>
<td>Saline</td>
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<td>SWIFT CREEK RESIDENTIAL CARE CENTER</td>
<td>1673 HIGHWAY 53</td>
<td>(573) 778-1129</td>
<td>RCF*</td>
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<td>3260 MYSTIC LN</td>
<td>(573) 785-9399</td>
<td>RCF*</td>
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<td>Butler</td>
<td>Yes</td>
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<tr>
<td>SWOPE RIDGE GERIATRIC CENTER</td>
<td>5900 SWOPE PARKWAY</td>
<td>(816) 333-2700</td>
<td>SNF</td>
<td>240</td>
<td>3</td>
<td>Medicare/Medicaid</td>
<td>Jackson</td>
<td>No</td>
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<td>SYLVAN HOUSE</td>
<td>30 SHERMAN RD</td>
<td>(314) 892-2212</td>
<td>RCF</td>
<td>40</td>
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<td>Yes</td>
<td>Saint Louis County</td>
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Thursday, May 09, 2019
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Region</th>
<th>Bed Capacity</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SYLVIA G THOMPSON RESIDENCE CENTER, INC</td>
<td>3333 WEST TENTH ST</td>
<td>SEDALIA</td>
<td>MO</td>
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<td>120</td>
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<td>No</td>
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<td>TABLE ROCK HEALTHCARE</td>
<td>276 FOUNTAIN LN</td>
<td>KIMBERLING CITY</td>
<td>MO</td>
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<td>TARKIO REHABILITATION &amp; HEALTH CARE</td>
<td>300 CEDAR ST</td>
<td>TARKIO</td>
<td>MO</td>
<td>4</td>
<td>42</td>
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<td>1722 HUNTINGFIELD DR</td>
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<td>12335 WEST BEND DR</td>
<td>SAINT LOUIS</td>
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<td>THOMAS RESIDENTIAL CARE CENTER II</td>
<td>119 VIRGINIA ST</td>
<td>SAINT JOSEPH</td>
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<td>THOMAS RESIDENTIAL CARE FACILITY III</td>
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<td>TIFFANY HEIGHTS</td>
<td>1531 NEBRASKA ST</td>
<td>MOUND CITY</td>
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<td>TIFFANY SPRINGS REHABILITATION &amp; HEALTH CARE CENTER</td>
<td>9191 N AMBASSADOR DR</td>
<td>KANSAS CITY</td>
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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
ANNAPOLIS MO 63620-9130
Mailing Address 207 FRONT ST
ANNAPOLIS 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

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

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

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

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<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
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<tr>
<td>TROY MANOR</td>
<td>200 THOMPSON DR</td>
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<td>TRUMAN HEALTHCARE &amp; REHABILITATION CENTER</td>
<td>206 WEST FIRST ST</td>
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<td>TRUMAN LAKE MANOR, INC</td>
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<td>TWIN CITY RESIDENTIAL CARE, INC</td>
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<td>CRYSTAL CITY</td>
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<td>TWIN OAKS AT HERITAGE POINTE</td>
<td>228 SAVANNAH TERRACE</td>
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<td>TWIN OAKS ESTATE, INC</td>
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<th>Facility Name</th>
<th>Address</th>
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<th>Bed Capacity</th>
<th>Bed Size</th>
<th>Alzheimer's Unit</th>
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<td>2711 NORTH UNION BLVD</td>
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<td>URBANA REST HOME</td>
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<td>6768 NORTH HIGHWAY 67</td>
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Thursday, May 09, 2019
VALLEY PARK WEST
678 WINDMILL RIDGE
CALIFORNIA MO 65018-1964
Mailing Address 678 WINDMILL RIDGE
CALIFORNIA MO 65018-1964
Telephone 573-796-2520 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 24
County MONITEAU DMH Licensed No
Region 6 Facility Number 30595

VALLEY VIEW HEALTH & REHABILITATION
1600 EAST ROLLINS ST
MOBERLY MO 65270-2478
Mailing Address 1600 E ROLLINS ST
MOBERLY MO 65270-2478
Telephone (660) 263-6887 Alzheimer's Unit No
Level of Care: SNF Bed Capacity 96
County RANDOLPH DMH Licensed No
Region 5 Medicare/Medicaid Facility Number 13167

VELMA DOWDY ASSISTED LIVING
100 HARD ROCK RD DR
VAN BUREN MO 63965-7403
Mailing Address PO BOX 220
VAN BUREN MO 63965-7403
Telephone (573) 323-2108 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 24
County CARTER** DMH Licensed Yes
Region 2 Facility Number 29947

VERONICA HOUSE
12284 DEPAUL DR
BRENTWOOD MO 63144-2508
Mailing Address 12284 DEPAUL DR
BRENTWOOD MO 63144-2508
Telephone (314) 209-8814 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 100
County SAINT LOUIS COUNTY DMH Licensed No
Region 7 Facility Number 22460

VICTORIAN PLACE OF VIENNA, RESIDENTIAL CARE BY AMERICARE
112 PARKWAY DR
VIENNA MO 65522-8003
Mailing Address 112 PARKWAY DR
VIENNA MO 65522-8003
Telephone (573) 422-3230 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County MARIES DMH Licensed No
Region 6 Facility Number 23333

VICTORIAN PLACE OF CUBA, RESIDENTIAL CARE BY AMERICARE
901 HIGHWAY DD
CUBA MO 65453-8089
Mailing Address 901 HWY DD
CUBA MO 65453-8089
Telephone (573) 855-0551 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County CRAWFORD DMH Licensed No
Region 6 Facility Number 25463

VICTORIAN PLACE OF HERMANN, RESIDENTIAL CARE BY AMERICARE
2120 VILLAGE LN
HERMANN MO 65041-1600
Mailing Address 2120 VILLAGE LANE
HERMANN MO 65041-1600
Telephone (573) 486-5060 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County GASCONADE DMH Licensed No
Region 6 Facility Number 24982

VICTORIAN PLACE OF OWENSVILLE, RESIDENTIAL CARE BY AMERICARE
301 NORTH 7TH ST
OWENSVILLE MO 65066-1075
Mailing Address 301 NORTH 7TH ST
OWENSVILLE MO 65066-1075
Telephone (573) 437-5396 Alzheimer's Unit No
Level of Care: RCF Bed Capacity 48
County GASCONADE DMH Licensed No
Region 6 Facility Number 24133

VICTORIAN PLACE OF ST CLAIR, RESIDENTIAL CARE BY AMERICARE
160 CHARLES DR
SAINT CLAIR MO 63077-1936
Mailing Address 160 CHARLES DR
SAINT CLAIR MO 63077-1936
Telephone (636) 322-0003 Alzheimer's Unit No
Level of Care: ALF** Bed Capacity 48
County FRANKLIN DMH Licensed Yes
Region 6 Facility Number 26005

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<th>Address</th>
<th>City</th>
<th>State</th>
<th>Bed Capacity</th>
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<td>VICTORIAN PLACE OF SULLIVAN, RESIDENTIAL CARE BY AMERICARE</td>
<td>1250 EAST SPRINGFIELD RD</td>
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<td>VICTORIAN PLACE OF UNION, RESIDENTIAL CARE BY AMERICARE</td>
<td>1320 W MAIN</td>
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<td>VICTORIAN PLACE OF WASHINGTON, RESIDENTIAL CARE BY AMERICARE</td>
<td>2800 RABBIT TRAIL DR</td>
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<td>VILLA AT BLUE RIDGE, THE</td>
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<td>VILLA MARIE - A STONEBRIDGE COMMUNITY</td>
<td>1030 EDMONDS ST</td>
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<td>VILLA VENTURA ASSISTED LIVING FACILITY</td>
<td>12100 WORNALL RD</td>
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<td>5301 HARRY TRUMAN DR</td>
<td>GRANDVIEW</td>
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<tr>
<th>Facility Name</th>
<th>Address</th>
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<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
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<td>(636) 922-7600</td>
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<td>VILLAS OF JACKSON LLC THE</td>
<td>670 BROADRIDGE DRIVE</td>
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<td>(573) 986-8210</td>
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<td>VINTAGE GARDENS ASSISTED LIVING</td>
<td>3302 NORTH WOODBINE ROAD</td>
<td>SAINT JOSEPH</td>
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<td>No</td>
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<td>(816) 390-9555</td>
<td>ALF</td>
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<td>3302 NORTH WOODBINE ROAD</td>
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<td>WAGNER RESIDENTIAL CARE, INC</td>
<td>320 N CHAMBER DR</td>
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<td>(573) 783-4511</td>
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<td>WALNUT STREET ASSISTED LIVING</td>
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<th>Facility Name</th>
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WEDGEWOOD GARDENS
17996 BUSINESS 13
REEDS SPRING MO 65737-9663
Mailing Address 17996 BUSINESS 13
REEDS SPRING MO 65737-9663
Telephone (417) 272-6666
Alzheimer's Unit Yes
Level of Care: ALF**
Bed Capacity 46
County STONE
DMH Licensed No
Region 1 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
Alzheimer's Unit No
Level of Care: RCF
Bed Capacity 18
County MACON
DMH Licensed No
Region 5 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
Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 137
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid 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
Alzheimer's Unit No
Level of Care: RCF
Bed Capacity 9
County SAINT LOUIS CITY
DMH Licensed Yes
Region 7 Medicare/Medicaid 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
Alzheimer's Unit Yes
Level of Care: SNF
Bed Capacity 120
County HOWELL
DMH Licensed No
Region 1 Medicare/Medicaid 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
Alzheimer's Unit No
Level of Care: RCF*
Bed Capacity 27
County CLAY
DMH Licensed No
Region 4 Medicare/Medicaid 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
Alzheimer's Unit No
Level of Care: ALF**
Bed Capacity 36
County COLE
DMH Licensed No
Region 6 Medicare/Medicaid Facility Number 20440

WESTCHESTER HOUSE, THE
550 WHITE RD
CHESTERFIELD MO 63017-2316
Mailing Address 550 WHITE RD
CHESTERFIELD MO 63017-2316
Telephone (314) 469-1200
Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 159
County SAINT LOUIS COUNTY
DMH Licensed No
Region 7 Medicare/Medicaid Facility Number 08474

WESTFIELD NURSING CENTER, INC
3144 STATE HIGHWAY FF
SIKESTON MO 63801-8580
Mailing Address PO BOX 489
SIKESTON MO 63801-0489
Telephone (573) 471-1174
Alzheimer's Unit No
Level of Care: SNF
Bed Capacity 98
County NEW MADRID
DMH Licensed No
Region 2 Medicare/Medicaid Facility Number 07306

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<td>(573) 455-2280</td>
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<td>18653</td>
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<tr>
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<td>MARSHALL</td>
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<td>(660) 886-5500</td>
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<tr>
<td>WESTRIDGE GARDENS REHABILITATION &amp; HEALTH CARE CENTER</td>
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<td>RAYTOWN</td>
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<td>(816) 358-3535</td>
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<td>WESTVIEW AT ELLISVILLE ASSISTED LIVING</td>
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<td>(573) 267-3920</td>
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<td>WESTWOOD HILLS HEALTH &amp; REHABILITATION CENTER</td>
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<td>08521</td>
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<td>WEXFORD PLACE ASSISTED LIVING AND MEMORY SUPPORT BY SENIOR STAR</td>
<td>6460 NORTH COSBY AVE</td>
<td>KANSAS CITY</td>
<td>MO</td>
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<td>(816) 587-5400</td>
<td>ALF**</td>
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<table>
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<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Bed Capacity</th>
<th>Region</th>
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<td>WILDWOOD SENIOR LIVING THE</td>
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<td>WINCHESTER NURSING CENTER, INC</td>
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<td>WINDSOR HEALTHCARE &amp; REHAB CENTER</td>
<td>809 WEST BENTON WINDSOR</td>
<td>(660) 647-3102</td>
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<td>WINFIELD RESIDENTIAL CARE</td>
<td>220 WEST WALNUT ST WINFIELD</td>
<td>(636) 668-8110</td>
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<th>Bed Capacity</th>
<th>Level of Care</th>
<th>Medicare/Medicaid</th>
<th>Alzheimer's Unit</th>
<th>DMH Licensed</th>
<th>Facility Number</th>
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<tr>
<td>WOOD OAKS, INC</td>
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<td>WOODLAND HILLS - A STONEBRIDGE COMMUNITY</td>
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