## DIRECTORY OF LICENSED WISCONSIN NURSING HOMES - ALPHABETICAL BY COUNTY AND CITY

### STATE OF WISCONSIN

Department of Health Services

**Tuesday, February 4, 2020**

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### PROVIDER/ADDRESS

**Contact and Phones** | **County** | **DQA Region** | **License Number, Level and Beds** | **Owner, Ownership, Certification Types, Provider Number**
---|---|---|---|---
GRACE LUTHERAN COMMUNITIES - RIVER PINES | 206 N WILLSON DR
ALTOONA, WI 54720 | (715) 598-7800 | EAU CLAIRE | Lic. 5047 | Skilled Care 50 Beds | GRACE LUTHERAN FOUNDATION INC FOR PROFIT CORPORATION 525724 Title 18 SNF Title 19 NF | FAX: (715) 598-7999 Administrator: JENNIFER COHEN

GRACE LUTHERAN COMMUNITIES-PRAIRIE POINTE REHAB SUITES | 286 N WILLSON DR
ALTOONA, WI 54720 | (715) 598-7800 | EAU CLAIRE | Lic. 5048 | Skilled Care 48 Beds | GRACE LUTHERAN FOUNDATION INC NONPROFIT CORPORATION 525725 Title 18 SNF Title 19 NF | FAX: (715) 598-7998 Administrator: JENNIFER COHEN

OAKWOOD HEALTH SERVICES | 2512 NEW PINE DR
ALTOONA, WI 54720 | (715) 833-0400 | EAU CLAIRE | Lic. 3167 | Skilled Care 80 Beds | NSH ALTOONA LLC LIMITED LIABILITY COMPANY 525454 Title 18 SNF Title 19 NF | FAX: (715) 833-0546 Administrator: JON RICHARDSON

AUGUSTA HEALTH AND REHABILITATION | 901 BRIDGE CREEK LANE
AUGUSTA, WI 54722 | (715) 286-2266 | EAU CLAIRE | Lic. 2083 | Skilled Care 50 Beds | AUGUSTA AREA HOME, INC NONPROFIT OTHER 525535 Title 18 SNF Title 19 NF | FAX: (715) 286-2653 Administrator: JAHN BRADLEY

CLEARWATER CARE CENTER | 2120 HEIGHTS DR
EAU CLAIRE, WI 54701 | (715) 832-1681 | EAU CLAIRE | Lic. 3224 | Skilled Care 161 Beds | CLEARWATER CARE CENTER, LLC NONPROFIT CORPORATION 525364 Title 18 SNF Title 19 NF | FAX: (715) 832-8367 Administrator: RANDALL RENNOCK

DOVE HEALTHCARE-SOUTH | 3656 MALL DRIVE
EAU CLAIRE, WI 54701 | (715) 552-1035 | EAU CLAIRE | Lic. 5031 | Skilled Care 34 Beds | TRANSITIONS AT OAKWOOD, LLC LIMITED LIABILITY COMPANY 525701 Title 18 SNF Title 19 NF | FAX: (715) 552-4567 Administrator: ASHLEY SMETANA

DOVE HEALTHCARE-WEST | 1405 TRUA X BLVD
EAU CLAIRE, WI 54703 | (715) 552-1030 | EAU CLAIRE | Lic. 3195 | Skilled Care 110 Beds | COVENANT HEALTHCARE LLC LIMITED LIABILITY COMPANY 525387 Title 18 SNF Title 19 NF | FAX: (715) 552-1033 Administrator: KENDALL ROSEMEYER

MARSHFIELD CLINIC COMFORT AND RECOVERY-EAU CLAIRE | 2116 CRAIG RD
EAU CLAIRE, WI 54701 | (715) 836-1200 | EAU CLAIRE | Lic. 5044 | Skilled Care 12 Beds | GRACE LUTHERAN FOUNDATION INC NONPROFIT CORPORATION 525721 Title 18 SNF | FAX: ( ) Administrator: TARA NENAHLO

### KEY TO DESCRIPTIONS:

- Title 18 = Title XVIII, Medicare Certification
- Title 19 = Title XIX, Medicaid Certification
- SNF = Skilled Nursing Facility
- NF = Nursing Facility
- IMD = Institute for Mental Diseases

### DIVISION OF QUALITY ASSURANCE

PO Box 2969
Madison, WI 53701-2969