

**STATE OF NEBRASKA**

**ROSTER**

**HOSPITALS**

General Acute Hospitals  
Critical Access Hospitals  
Rehabilitation Hospitals  
Psychiatric Hospitals

**NEBRASKA**

Good Life. Great Mission.

**DEPT. OF HEALTH AND HUMAN SERVICES**

Department of Health and Human Services  
Division of Public Health, Licensure Unit

Nebraska State Office Building  
301 Centennial Mall South, Third Floor  
PO Box 94986  
Lincoln, NE 68509-4986

Hospital licenses expire December 31 each year

## NEBRASKA HOSPITALS

	<b>Number of Licensed Facilities</b>	<b>Number of Licensed Beds</b>
HOSP-ACU	28	4,757
HOSP-CAH	64	1,254
HOSP-CHD	3	212
HOSP-LT	4	194
PSY	1	150
PSYCH	3	277
REH HOSP	2	106
	<hr/>	
	<b>Total: 105</b>	<b>6950</b>

### **LEGEND**

HOSP-ACU	General Acute Hospital
HOSP-CAH	Critical Access Hospital
HOSP-CHD	Children's Hospital
HOSP-LT	Long Term Care Hospital
LTCH/LIC	Long Term Care Hospital - Licensed Only
PSY	Psychiatric - Licensed Only
PSYCH	Psychiatric Hospital
REH HOSP	Rehabilitation Hospital
TJC	The Joint Commission
AOA	American Osteopathic Association
CARF	Commission on Accreditation of Rehabilitation Facilities

Please contact the Licensure Unit or the provider to determine current Medicare/Medicaid status

**Updated: 5/16/2017**

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
AINSWORTH (BROWN) - 69210	Brown County Hospital	945 EAST ZERO ST (402) 387-2800 FAX: (402) 387-2804 BROWN COUNTY SHANNON SORENSEN, ADMINISTRATOR	HOSP-CAH	060001	281325	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 23 Total Lic Beds - 23	SWING BEDS
BRANCH/EXTENSION/OFFSITE: BROWN COUNTY HOSPITAL - 938 E. ZERO ST., AINSWORTH							
ALBION (BOONE) - 68620	Boone County Health Center	P O BOX 151, 723 WEST FAIRVIEW ST (402) 395-2191 FAX: (402) 395-5165 BOONE COUNTY VICTOR LEE, ADMINISTRATOR	HOSP-CAH	030001	281334	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: BOONE COUNTY HEALTH CENTER MENTAL HEALTH SERVICES - 632 W FAIRVIEW ST, RM #1, ALBION BRANCH/EXTENSION/OFFSITE: ELGIN VETERANS MEDICAL CLINIC OUTPATIENT DEPT - 116 NORTH 2ND ST, ELGIN							
ALLIANCE (BOX BUTTE) - 69301	Box Butte General Hospital	P O BOX 810, 2101 BOX BUTTE AVE (308) 762-6660 FAX: (308) 762-1923 BOX BUTTE COUNTY LORI MAZANEC, INTERIM ADMINIS	HOSP-CAH	040001	281360	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: MEDICAL ARTS PLAZA - 2091 BOX BUTTE AVE, ALLIANCE							
ALMA (HARLAN) - 68920	Harlan County Health System	P O BOX 836, 717 NORTH BROWN ST (308) 928-2151 FAX: (308) 928-9059 HARLAN COUNTY HEALTH SYSTEM BOARD OF TRUSTEES MANUELA WOLF, ADMINISTRATOR	HOSP-CAH	390001	281300	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 19 Total Lic Beds - 19	SWING BEDS
ATKINSON (HOLT) - 68713	West Holt Memorial Hospital	406 W NEELY ST (402) 925-2811 FAX: (402) 925-2810 WEST HOLT MEMORIAL HOSPITAL, INC. BRADLEY PFEIFER, ADMINISTRATOR	HOSP-CAH	410001	281343	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 17 Total Lic Beds - 17	SWING BEDS

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
AUBURN (NEMAHA) - 68305	Nemaha County Hospital	2022 13TH ST	HOSP-CAH	560001	281324	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 16 Total Lic Beds - 16	SWING BEDS
(402) 274-4366 FAX: (402) 274-4399	NEMAHA COUNTY HOSPITAL		DNV				
	MARTIN FATTIG, ADMINISTRATOR						
AURORA (HAMILTON) - 68818	Memorial Hospital	1423 SEVENTH ST	HOSP-CAH	380001	281320	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 12 Total Lic Beds - 12	SWING BEDS
(402) 694-3171 FAX: (402) 694-5024	MEMORIAL COMMUNITY HEALTH, INC.		NONE				
	DIANE KELLER, ADMINISTRATOR						
BASSETT (ROCK) - 68714	Rock County Hospital	102 EAST SOUTH STREET	HOSP-CAH	830001	281333	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
(402) 684-3366 FAX: (402) 684-3677	ROCK COUNTY		NONE				
	STACEY KNOX, ADMINISTRATOR						
BEATRICE (GAGE) - 68310	Beatrice Community Hospital & Health Center, Inc	P O BOX 278, 4800 HOSPITAL PARKWAY	HOSP-CAH	H000119	281364	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 228-3344 FAX: (402) 223-7299	BEATRICE COMMUNITY HOSPITAL & HEALTH CENTER, INC.		TJC				
	JOHN FINDLEY, INTERIM ADMINIS						
BELLEVUE (SARPY) - 68123	Bellevue Medical Center	2500 BELLEVUE MEDICAL CENTER DR	HOSP-ACU	H000115	280132	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 55 Total Lic Beds - 55	
(402) 763-3600 FAX: (402) 763-3619	BELLEVUE MEDICAL CENTER, LLC		TJC				
	DAN DEBEHNKE, CEO						

% NEBRASKA MEDICAL CENTER, 987400 NEBRASKA MEDICAL CENTER, OMAHA, NE 68198

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
BENKELMAN (DUNDY) - 69021	HOSP-CAH	Dundy County Hospital		270001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 14 Total Lic Beds - 14	SWING BEDS
P O BOX 626, 1313 NORTH CHEYENNE ST (308) 423-2204 FAX: (308) 423-5691 DUNDY COUNTY RITA JONES, ADMINISTRATOR	281340 NONE						
BLAIR (WASHINGTON) - 68008	HOSP-CAH	Memorial Community Hospital Corporation		790001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 21 Total Lic Beds - 21	SWING BEDS
810 NORTH 22ND ST (402) 426-2182 FAX: (402) 426-1439 MEMORIAL COMMUNITY HOSPITAL CORPORATION TIM PLANTE, CEO	281359 NONE						
BOYS TOWN (DOUGLAS) - 68010	HOSP-CHD	Boys Town National Research Hospital - West		H000107		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 36 Total Lic Beds - 36	
14000 BOYS TOWN HOSPITAL RD (402) 778-6000 FAX: (402) 498-6357 FATHER FLANAGAN'S BOYS' HOME JOHN ARCH, ADMINISTRATOR	TJC						
% BOYS TOWN NATIONAL RESEARCH HOSPITAL, 555 NORTH 30TH STREET, OMAHA, NE 68131							
BRIDGEPORT (MORRILL) - 69336	HOSP-CAH	Morrill County Community Hospital		540001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
1313 S STREET (308) 262-1616 FAX: (308) 262-0843 MORRILL COUNTY COMMUNITY HOSPITAL ROBIN STUART, ADMINISTRATOR	281318 NONE						
BROKEN BOW (CUSTER) - 68822	HOSP-CAH	Jennie M Melham Memorial Medical Center		100004		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 23 Total Lic Beds - 23	SWING BEDS
145 MEMORIAL DRIVE (308) 872-4100 FAX: (308) 872-4150 JENNIE M MELHAM MEMORIAL MEDICAL CENTER, INC. MICHAEL STECKLER, ADMINISTRATOR	281365 NONE						

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration		Accreditation				
CALLAWAY (CUSTER) - 68825	Callaway District Hospital	P O BOX 100, 211 E KIMBALL ST	HOSP-CAH	100002	281335	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 12 Total Lic Beds - 12	SWING BEDS
(308) 836-2228 FAX: (308) 836-2733	CALLAWAY HOSPITAL DISTRICT	MARVIN NETH, ADMINISTRATOR	NONE				
CAMBRIDGE (FURNAS) - 69022	Cambridge Memorial Hospital Inc dba Tri Valley Heal	1305 WEST HIGHWAY 6/34	HOSP-CAH	310001	281348	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 697-3329 FAX: (308) 697-3331	CAMBRIDGE MEMORIAL HOSPITAL, INC.	DEBORAH HERZBERG, ADMINISTRATOR	NONE				
BRANCH/EXTENSION/OFFSITE: TRI-VALLEY PHYSICAL THERAPY-ARAPAHOE - 658 PINE ST, ARAPAHOE							
CENTRAL CITY (MERRICK) - 68826	Litzenberg Memorial County Hospital	1715 26TH ST	HOSP-CAH	530001	281328	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 946-3015 FAX: (308) 946-2633	LITZENBERG MEMORIAL MERRICK COUNTY	JULIE MURRAY, ADMINISTRATOR	NONE				
CHADRON (DAWES) - 69337	Chadron Community Hospital & Health Services	825 CENTENNIAL DRIVE	HOSP-CAH	H000117	281341	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(308) 432-5586 FAX: (308) 432-2737	CHADRON COMMUNITY HOSPITAL, INC.	ANNA TURMAN, CEO	NONE				
COLUMBUS (PLATTE) - 68601	Columbus Community Hospital	4600 38TH ST	HOSP-ACU	630001	280111	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 47 Total Lic Beds - 47	SWING BEDS
(402) 564-7118 FAX: (402) 562-3378	COLUMBUS COMMUNITY HOSPITAL, INC.	MICHAEL HANSEN, ADMINISTRATOR	TJC				

%, P O BOX 1800, COLUMBUS, NE 68602

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL PREMIER P T - US 30 CENTER BLDG, 3100 23RD ST, STE 15, COL

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL OCCUPATIONAL HEALTH - 3005 19TH ST, STE 300, COLUMBUS

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL W.O.C. HEALTH CENTER - 4508 38TH STREET, STE 210 ROOMS

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL REHABILITATIVE SERVICE - 3912 38TH ST, STE A, COLUMBUS

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL WIGGLES & GIGGLES THER - 3912 38TH ST, STE B, COLUMBUS

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL LABORATORY - 4508 38TH ST, STE 168, COLUMBUS

BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL DIABETES & HEALTH EDUC - 4508 38TH ST, STE 210, CCH ROOM

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
COZAD (DAWSON) - 69130	Cozad Community Hospital	P O BOX 108, 300 EAST 12TH ST (308) 784-2261 FAX: (308) 784-4691	HOSP-CAH	220001	281327	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
	COZAD HOSPITAL DISTRICT #2		NONE				
	LYLE DAVIS, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: COZAD COMMUNITY PHYSICAL THERAPY - 313 EAST 12TH ST, COZAD							
CREIGHTON (KNOX) - 68729	Avera Creighton Hospital	P O BOX 186, 1503 MAIN ST (402) 358-5700 FAX: (402) 358-5769	HOSP-CAH	490001	281331	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 23 Total Lic Beds - 23	SWING BEDS
	AVERA SACRED HEART HEALTH SERVICES		NONE				
	TODD CONSRUCK, CEO						
BRANCH/EXTENSION/OFFSITE: AVERA MEDICAL GROUP CREIGHTON - 1503 MAIN ST, CREIGHTON							
CRETE (SALINE) - 68333	Crete Area Medical Center	P O BOX 220, 2910 BETTEN DR (402) 826-2102 FAX: (402) 826-7950	HOSP-CAH	670001	281354	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
	CRETE AREA MEDICAL CENTER		NONE				
	REBEKAH MUSSMAN, ADMINISTRATOR						
DAVID CITY (BUTLER) - 68632	Butler County Health Care Center	372 SOUTH 9TH ST (402) 367-1200 FAX: (855) 297-3221	HOSP-CAH	090001	281332	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
	BUTLER COUNTY		NONE				
	DON NAIBERK, ADMINISTRATOR						
ELKHORN (DOUGLAS) - 68022	Methodist Women's Hospital	707 NORTH 190TH PLAZA (402) 815-4000 FAX: (402) 815-1380	HOSP-ACU	H000116	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 112 Total Lic Beds - 114	
	NEBRASKA METHODIST HOSPITAL						
	SUSAN KORTH, ADMINISTRATOR						

% THE NEBRASKA METHODIST HOSPITAL, 8303 DODGE ST, OMAHA, NE 68114

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
FAIRBURY (JEFFERSON) - 68352	Jefferson Community Health Center, Inc.	P O BOX 277, 2200 H ST	HOSP-CAH	440001	281319	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 17 Total Lic Beds - 17	SWING BEDS
(402) 729-3351 FAX: (402) 729-2102	JEFFERSON COMMUNITY HEALTH CENTER, INC. CHAD JURGENS, ADMINISTRATOR		NONE				
FALLS CITY (RICHARDSON) - 68355	Community Medical Center, Inc.	P O BOX 399, 3307 BARADA ST	HOSP-CAH	H000112	281352	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
(402) 245-2428 FAX: (402) 245-6640	COMMUNITY MEDICAL CENTER, INC. RYAN LARSEN, ADMINISTRATOR		NONE				
FRANKLIN (FRANKLIN) - 68939	Franklin County Memorial Hospital	1406 Q ST	HOSP-CAH	290001	281311	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 14 Total Lic Beds - 14	SWING BEDS
(308) 425-6221 FAX: (308) 425-3164	FRANKLIN COUNTY THERESA RIZZO, ADMINISTRATOR		NONE				
FREMONT (DODGE) - 68025	Fremont Health Medical Center	450 EAST 23RD ST	HOSP-ACU	250001	280077	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 Total Lic Beds - 70	
(402) 721-1610 FAX: (402) 727-3656	FREMONT HEALTH PATRICK BOOTH, ADMINISTRATOR		TJC				

BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH BEHAVIORAL HEALTH SERVICES - 2560 N HEALTHY WAY, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CARE FOR WOMEN - 700 EAST 29TH STREET, FREMONT  
 BRANCH/EXTENSION/OFFSITE: WEST SHORES MEDICAL CLINIC - 24110 WEST DODGE ROAD, WATERLOO  
 BRANCH/EXTENSION/OFFSITE: LAKE WANAHOO MEDICAL CLINIC - 1320 EAST 31ST STREET, WAHOO  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH FAMILY CARE - 680 EAST FREMONT MEDICAL PARK DRIVE, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH SURGICAL GROUP - 2830 N CLARKSON ST, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH INFECTIOUS DISEASE & TRAVEL MEDICIN - 680 EAST FREMONT MEDICAL PARK  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CARDIOVASCULAR CARE - 426 EAST 22ND ST, STE 101, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CENTER FOR WOUND HEALING - 625 EAST 29TH ST, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH SURGERY CENTER - 840 EAST 29TH ST, FREMONT  
 BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH INTERNAL MEDICINE - 680 EAST FREMONT MEDICAL PARK DRIVE, FREMONT



TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
FREMONT (DODGE) - 68025	Fremont Health Medical Center	450 EAST 23RD ST	HOSP-ACU	250001	280077	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 Total Lic Beds - 70	
(402) 721-1610 FAX: (402) 727-3656		FREMONT HEALTH	TJC				
PATRICK BOOTH, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH BEHAVIORAL HEALTH SERVICES - 2560 N HEALTHY WAY, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CARE FOR WOMEN - 700 EAST 29TH STREET, FREMONT BRANCH/EXTENSION/OFFSITE: WEST SHORES MEDICAL CLINIC - 24110 WEST DODGE ROAD, WATERLOO BRANCH/EXTENSION/OFFSITE: LAKE WANAHOO MEDICAL CLINIC - 1320 EAST 31ST STREET, WAHOO BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH FAMILY CARE - 680 EAST FREMONT MEDICAL PARK DRIVE, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH SURGICAL GROUP - 2830 N CLARKSON ST, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH INFECTIOUS DISEASE & TRAVEL MEDICIN - 680 EAST FREMONT MEDICAL PARK BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CARDIOVASCULAR CARE - 426 EAST 22ND ST, STE 101, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH CENTER FOR WOUND HEALING - 625 EAST 29TH ST, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH SURGERY CENTER - 840 EAST 29TH ST, FREMONT BRANCH/EXTENSION/OFFSITE: FREMONT HEALTH INTERNAL MEDICINE - 680 EAST FREMONT MEDICAL PARK DRIVE, FREMONT							
FRIEND (SALINE) - 68359	Warren Memorial Hospital	905 SECOND ST	HOSP-CAH	670002	281330	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 19 Total Lic Beds - 19	SWING BEDS
(402) 947-2541 FAX: (402) 947-2811		CITY OF FRIEND	NONE				
CHAD THOMPSON, CEO							
GENEVA (FILLMORE) - 68361	Fillmore County Hospital	P O BOX 193, 1900 F STREET	HOSP-CAH	H000121	281301	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(402) 759-3167 FAX: (402) 759-3093		FILLMORE COUNTY	NONE				
PAUL UTEMARK, ADMINISTRATOR							
GENOA (NANCE) - 68640	Genoa Community Hospital	P O BOX 310, 706 EWING AVE	HOSP-CAH	550001	281312	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 19 Total Lic Beds - 19	SWING BEDS
(402) 993-2283 FAX: (402) 993-2373		CITY OF GENOA	NONE				
CORY NELSON, ADMINISTRATOR							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
GORDON (SHERIDAN) - 69343	HOSP-CAH	Gordon Memorial Hospital District		730001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(308) 282-0401 FAX: (308) 282-0431	NONE	300 EAST 8TH ST		281358			
GORDON MEMORIAL HOSPITAL DISTRICT							
ALAN GAMBLE, ADMINISTRATOR							
GOTHENBURG (DAWSON) - 69138	HOSP-CAH	Gothenburg Memorial Hospital		220002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 12 Total Lic Beds - 12	SWING BEDS
(308) 537-3661 FAX: (308) 537-3074	NONE	910 20TH ST		281313			
GOTHENBURG MEMORIAL HOSPITAL DISTRICT							
MICHAEL BRANT, ADMINISTRATOR							
GRAND ISLAND (HALL) - 68803	HOSP-ACU	CHI Health St. Francis		370001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 159 Total Lic Beds - 159	
(308) 384-4600 FAX: (308) 398-5589	TJC	2620 WEST FAIDLEY AVE		280023			
CATHOLIC HEALTH INITIATIVES							
MICHAEL SCHNEIDERS, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: ST FRANCIS MEDICAL CENTER CANCER TREATMENT CENTER - 2727 W 2ND ST, STE 314, HASTINGS							
GRANT (PERKINS) - 69140	HOSP-CAH	Perkins County Health Services		600001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 352-7200 FAX: (308) 352-7291	NONE	900 LINCOLN AVE		281356			
PERKINS COUNTY HOSPITAL DISTRICT							
JAMES LE BRUN, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: PERKINS CO HEALTH SERVICES TRAILER - 744 LINCOLN AVE, GRANT							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
HASTINGS (ADAMS) - 68901	Mary Lanning Healthcare	715 N ST JOSEPH AVE (402) 463-4521 FAX: (402) 461-5321 MARY LANNING HEALTHCARE ERIC BARBER, ADMINISTRATOR	HOSP-ACU	010002	280032	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 161 Total Lic Beds - 161	
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE CARDIAC AND PULMONARY REHA - 715 NORTH KANSAS AVENUE, STI							
BRANCH/EXTENSION/OFFSITE: MORRISON CANCER CENTER - MARY LANNING HEALTHCARE - 815 NORTH KANSAS AVENUE, HASTI							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DIABETES EDUCATION - 715 N. KANSAS AVE, STE 105, HASTINGS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE MAMMOGRAPHY SERVICES - 1010 N DIERS AVE, SUITE 3B, GRAND IS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DEPT OF REHABILITATION - 1010 N DIERS AVE, SUITE 3A, GRAND ISL							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DEPT OF REHAB & WELLNESS - 3609 CIMARRON PLAZA, STE 170, HA							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE WOUND CENTER - 715 N KANSAS, STE 302, HASTINGS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE MEDICAL PARK DIAGNOSTIC CT - 2115 N KANSAS AVE, STE 106, HAS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE HASTINGS IMAGING CENTER - 2207 OSBORNE DR. WEST, STE 200, H							
HEBRON (THAYER) - 68370	Thayer County Health Services	120 PARK AVE (402) 768-6041 FAX: (402) 768-4697 THAYER COUNTY DAVID BURD, CEO	HOSP-CAH	760001	281304	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 17 Total Lic Beds - 17	SWING BEDS
NONE							
HENDERSON (YORK) - 68371	Henderson Health Care Services, Inc.	1621 FRONT STREET (402) 723-4512 FAX: (402) 723-4520 HENDERSON HEALTH CARE SERVICES, INC CHERYL BROWN, ADMINISTRATOR	HOSP-CAH	820001	281308	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 13 Total Lic Beds - 13	SWING BEDS
NONE							
HOLDREGE (PHELPS) - 68949	Phelps Memorial Health Center	1215 TIBBALS ST (308) 995-2211 FAX: (308) 995-3336 PHELPS MEMORIAL HEALTH CENTER MARK HARREL, ADMINISTRATOR	HOSP-CAH	610003	281362	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: PHELPS MEMORIAL THERAPY CENTER - 516 W 14TH AVE, STE 200, HOLDREGE							
BRANCH/EXTENSION/OFFSITE: PHELPS MEMORIAL HEALTH CENTER CARDIAC & PULMONARY - 211 WEST 14TH AVE, HOLDREGE							
BRANCH/EXTENSION/OFFSITE: PMHC SPECIALTY CLINIC - 516 W 14TH AVE, STE 400, HOLDREGE							
BRANCH/EXTENSION/OFFSITE: PMHC SPECIALTY CLINIC - 516 W 14TH AVE, STE 300, HOLDREGE							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
IMPERIAL (CHASE) - 69033	Chase County Community Hospital	P O BOX 819, 600 W 12TH ST	HOSP-CAH	130001	281351	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 22 Total Lic Beds - 22	SWING BEDS
(308) 882-7111 FAX: (308) 882-7342	CHASE COUNTY STEPHEN LEWIS, CEO		NONE				
KEARNEY (BUFFALO) - 68848	CHI Health Good Samaritan	P O BOX 1990, 10 EAST 31ST ST	HOSP-ACU	070001	280009	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 172 Total Lic Beds - 172	
(308) 865-7100 FAX: (308) 865-2867	GOOD SAMARITAN HOSPITAL MICHAEL SCHNIEDERS, ADMINISTRATOR		TJC				
BRANCH/EXTENSION/OFFSITE: GOOD SAMARITAN HOSPITAL CANCER CENTER - 104 W 33RD ST, KEARNEY							
BRANCH/EXTENSION/OFFSITE: KEARNEY IMAGING CENTER - 3219 CENTRAL AVE, STE 109, KEARNEY							
BRANCH/EXTENSION/OFFSITE: GOOD SAMARITAN HOSPITAL MEDICAL FITNESS & REHABILI - 3219 CENTRAL AVE, LOWER LEVEL, K							
KEARNEY (BUFFALO) - 68847	CHI Health Richard Young Behavioral Health	P O BOX 1750, 1755 PRAIRIE VIEW PL	PSYCH	070002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 30 Total Lic Beds - 61	
(308) 865-2000 FAX: (308) 865-2853	GOOD SAMARITAN HOSPITAL MICHAEL SCHNIEDERS, ADMINISTRATOR		TJC				
KEARNEY (BUFFALO) - 68845	Kearney Regional Medical Center, LLC	804 22ND AVENUE	HOSP-ACU	H000123	280134	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 44 Total Lic Beds - 44	
(308) 455-3600 FAX: (308) 455-3950	KEARNEY REGIONAL MEDICAL CENTER, LLC LARRY SPEICHER, ADMINISTRATOR		AOA				
% JOE HLAVACEK, 200 W DOUGLAS, STE 950, WICHITA, KS 67202							
BRANCH/EXTENSION/OFFSITE: CENTRAL PLAINS VALLEY AESTHETIC SURGERY - 3712 28TH AVENUE, KEARNEY							
BRANCH/EXTENSION/OFFSITE: KEARNEY REGIONAL MEDICAL CTR - MEDICAL OFFICE BLDG - 816 22ND AVENUE, KEARNEY							
KIMBALL (KIMBALL) - 69145	Kimball County Hospital	505 SOUTH BURG ST	HOSP-CAH	480001	281305	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 15 Total Lic Beds - 15	SWING BEDS
(308) 235-1952 FAX: (308) 235-1955	KIMBALL COUNTY KENNETH HUNTER, ADMINISTRATOR		NONE				

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
LEXINGTON (DAWSON) - 68850	HOSP-CAH	Lexington Regional Health Center P O BOX 980, 1201 NORTH ERIE ST (308) 324-5651 FAX: (308) 324-8359 LEXINGTON REGIONAL HEALTH CENTER LESLIE MARSH, ADMINISTRATOR		220004	281361	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: LRHC REHABILITATIVE SERVICES - 1600 WEST 13TH STREET, LEXINGTON							
LINCOLN (LANCASTER) - 68506	HOSP-ACU	Bryan Medical Center 1600 SOUTH 48TH ST (402) 481-1111 FAX: (402) 481-8306 BRYAN MEDICAL CENTER JOHN WOODRICH, ADMINISTRATOR		500001	280003	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 374 Total Lic Beds - 374	
<p>% ATTN: ANGELA HERBERT, ORGANIZATIONAL QUALITY, BRYAN MEDICAL CENTER, 1600 SOUTH 48TH STREET LINCOLN, NE 68506</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER MRI SERVICES - 2222 SOUTH 16TH ST, TOWER B STE 100, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER THERAPY SERVICES - 7501 S 27TH ST EXCLUDING STE 100 &amp; FITNESS CT</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER OUTPATIENT SERVICES @ BRYA - 1500 SOUTH 48TH ST, 1ST FLOOR, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER LABORATORY - 2221 SOUTH 17TH ST, STE 100, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 1600 SOUTH 48TH ST, STE 600, RM 1, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 2222 SOUTH 16TH ST, TOWER B STE 110, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 1500 SOUTH 48TH ST, STE 400, VASCULAR SCAN RM, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER OUTPATIENT RADIOLOGY - 3901 PINE LAKE RD, SUITE 110, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER PEDIATRIC REHABILITATION SERV - 1500 S. 48TH ST., STE 709, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER CARDIAC-VASCULAR OUTPATIENT S - 1600 SOUTH 48TH ST, STE 301, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER COUNSELING CENTER - 2221 SOUTH 17TH ST, STE 201, LINCOLN</p> <p>BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER COUNSELING CENTER - 2221 SOUTH 17TH ST, STE 310, LINCOLN</p>							
LINCOLN (LANCASTER) - 68502	HOSP-ACU	Bryan Medical Center 2300 SOUTH 16TH ST (402) 481-1111 FAX: (402) 481-5377 BRYAN MEDICAL CENTER JOHN WOODRICH, ADMINISTRATOR		500003	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 266 Total Lic Beds - 266	
<p>% ATTN: ANGELA HERBERT, ORGANIZATIONAL QUALITY, BRYAN MEDICAL CENTER, 1600 SOUTH 48TH STREET LINCOLN, NE 68506</p>							
LINCOLN (LANCASTER) - 68526	HOSP-ACU	CHI Health Nebraska Heart 7500 SOUTH 91ST ST (402) 328-3000 FAX: (402) 328-3010 NEBRASKA HEART HOSPITAL PETER DIONISOPOULOS, ADMINISTRATOR		H000118	280128	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 63 Total Lic Beds - 63	
BRANCH/EXTENSION/OFFSITE: NEBRASKA HEART HOSPITAL IMAGING CENTER - 7440 SOUTH 91ST ST, STE 100, LINCOLN							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
LINCOLN (LANCASTER) - 68510	HOSP-ACU	CHI Health St. Elizabeth		500007		Medicare - 0 Medicaid - 0	
555 SOUTH 70TH ST	280020					Medicare/Medicaid - 260	
(402) 219-7700 FAX: (402) 219-8973	TJC					Total Lic Beds - 260	
CATHOLIC HEALTH INITIATIVES							
KIM MOORE, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH SLEEP DISORDER CENTER - 575 SOUTH 70TH ST., SUITE 445, LINCOLN							
BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH OUTPATIENT CLINICS - 575 SOUTH 70TH ST, SUITE 435, LINCOLN							
BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH WOUND CARE CENTER - 7441 O ST, STE 200, LINCOLN							
LINCOLN (LANCASTER) - 68509	PSYCH	Lincoln Regional Center		500004		Medicare - 0 Medicaid - 0	
PO BOX 94949 FOLSOM & WEST PROSPECTOR	284003					Medicare/Medicaid - 68	
(402) 471-4444 FAX: (402) 479-5124	TJC					Total Lic Beds - 200	
STATE OF NEBRASKA, DEPT OF HEALTH & HUMAN SERVVS							
MYLES JONES, ADMINISTRATOR							
LINCOLN (LANCASTER) - 68506	HOSP-ACU	Lincoln Surgical Hospital		H000103		Medicare - 0 Medicaid - 0	
1710 SOUTH 70TH ST, SUITE 200	280127					Medicare/Medicaid - 21	
(402) 484-9090 FAX: (402) 483-0476	NONE					Total Lic Beds - 21	
LINCOLN SURGERY CENTER, LLC							
ROBIN LINAFFELTER, ADMINISTRATOR							
LINCOLN (LANCASTER) - 68506	REH HOSP	Madonna Rehabilitation Hospital		500005		Medicare - 0 Medicaid - 0	
5401 SOUTH ST	283025					Medicare/Medicaid - 60	
(402) 413-3000 FAX: (402) 413-4113	CARF					Total Lic Beds - 60	
MADONNA REHABILITATION HOSPITAL							
PAUL DONGILLI, JR, ADMINISTRATOR							
% ATTN: PAUL DONGILLI, JR, PH.D., 5401 SOUTH STREET, LINCOLN, NE 68506							
BRANCH/EXTENSION/OFFSITE: MADONNA REHAB HOSPITAL THERAPY PLUS PROACTIVE - 7111 STEPHANIE LANE, LINCOLN							
BRANCH/EXTENSION/OFFSITE: MADONNA REHAB HOSPITAL THERAPY PLUS NORTHWEST - 5633 NORTHWEST 1ST ST, LINCOLN							
LINCOLN (LANCASTER) - 68506	HOSP-LT	Madonna Rehabilitation LTC Hospital		507001		Medicare - 0 Medicaid - 0	
5401 SOUTH ST	282000					Medicare/Medicaid - 86	
(402) 413-3000 FAX: (402) 413-4604	CARF					Total Lic Beds - 86	
MADONNA REHABILITATION HOSPITAL							
SUSAN KLANECKY, ADMINISTRATOR							
% ATTN: SUSAN KLANECKY, MSN, RN, CCM, CRRN, 5401 SOUTH STREET, LINCOLN, NE 68506							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Licensee	Administration	Accreditation				
LINCOLN (LANCASTER) - 68502	Select Specialty Hospital - Lincoln	2300 SOUTH 16TH STREET - 7TH FLOOR	HOSP-LT	H000124	282002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	
(402) 361-5755 FAX: (402) 884-5284	SCOTT BUTTERFIELD, ADMINISTRATOR	SELECT SPECIALTY HOSPITAL - LINCOLN, INC.	TJC				
%, 4714 GETTYSBURG RD, ATTN: MELANIE NOTARIO MECHANICSBURG, PA 17055							
LYNCH (BOYD) - 68746	Niobrara Valley Hospital	P O BOX 118, 401 SOUTH 5TH STREET	HOSP-CAH	050001	281303	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(402) 569-2451 FAX: (402) 569-2474	KELLY KALKOWSKI, ADMINISTRATOR	NIOBRARA VALLEY HOSPITAL CORP	NONE				
BRANCH/EXTENSION/OFFSITE: NIOBRARA VALLEY HOSPITAL MEDICAL CLINIC - 108 WEST EVANS ST, SPENCER							
MCCOOK (RED WILLOW) - 69001	Community Hospital	P O BOX 1328, 1301 EAST H ST	HOSP-CAH	320007	281363	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(308) 344-2650 FAX: (308) 344-8572	TROY BRUNTZ, ADMINISTRATOR	COMMUNITY HOSPITAL ASSOCIATION					
BRANCH/EXTENSION/OFFSITE: COMMUNITY HOSPITAL OUTPATIENT SERVICES - 302 EAST 6TH ST, CURTIS							
BRANCH/EXTENSION/OFFSITE: COMMUNITY HOSPITAL OUTPATIENT SERVICES - 406 EAST 1ST ST, TRENTON							
MINDEN (KEARNEY) - 68959	Kearney County Health Services	727 EAST 1ST ST	HOSP-CAH	460001	281306	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 10 Total Lic Beds - 10	SWING BEDS
(308) 832-3400 FAX: (308) 832-3417	LUKE POORE, ADMINISTRATOR	KEARNEY COUNTY	NONE				
NEBRASKA CITY (OTOE) - 68410	CHI Health St Mary's	1301 GRUNDMAN BLVD	HOSP-CAH	H000128	281342	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
(402) 873-3321 FAX: (402) 873-9033	DANIEL KELLY, ADMINISTRATOR	ST. MARY'S COMMUNITY HOSPITAL	NONE				

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
NELIGH (ANTELOPE) - 68756	HOSP-CAH	Antelope Memorial Hospital		020001		Medicare - 0 Medicaid - 0	SWING BEDS
P O BOX 229, 102 WEST 9TH ST	281326	(402) 887-4151 FAX: (402) 887-6397		NONE		Medicare/Medicaid - 25 Total Lic Beds - 25	
		ANTELOPE MEMORIAL HOSPITAL					
		JACK GREEN, ADMINISTRATOR					
NORFOLK (MADISON) - 68701	HOSP-ACU	Faith Reg Health Services/East Campus		520002		Medicare - 0 Medicaid - 0	
1500 KOENIGSTEIN AVE		(402) 371-4880 FAX: (402) 644-7468	TJC			Medicare/Medicaid - 20 Total Lic Beds - 20	
		FAITH REGIONAL HEALTH SERVICES					
		MARK KLOSTERMAN, ADMINISTRATOR					
NORFOLK (MADISON) - 68701	HOSP-ACU	Faith Reg Health Services/West Campus		520001		Medicare - 0 Medicaid - 0	
2700 WEST NORFOLK AVE	280125	(402) 371-4880 FAX: (402) 644-7468	TJC			Medicare/Medicaid - 111 Total Lic Beds - 111	
		FAITH REGIONAL HEALTH SERVICES					
		MARK KLOSTERMAN, ADMINISTRATOR					
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL OUTPATIENT RADIOLOGY - 301 NORTH 27TH ST, STE 13, NORFOLK							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL SLEEP DISORDER CENTER - 110 NORTH 29TH ST, STE 203, NORFOLK							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL REHABILITATION THERAPIES PIERCE CLI - 201 N ST, RM 109, PIERCE							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL ELECTROMYOGRAPHY LAB - 301 N 27TH ST, STE 12, RM 3, NORFOLK							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL CARSON CANCER CENTER - 110 NORTH 29TH ST, STE 101, NORFOLK							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL CARDIAC & PULMONARY REHABILITATION - 110 NORTH 29TH ST, STE 202, NORFO							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL HEALTH SERVICES OUTPATIENT CENTER - 308 WEST 2ND ST, TILDEN							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL REHABILITATION THERAPIES STANTON CL - 1007 KINGWOOD ST, TRAINING RM 12							
NORFOLK (MADISON) - 68701	PSY	Norfolk Regional Center		520003		Medicare - 0 Medicaid - 0	
P O BOX 1209, 1700 NORTH VICTORY RD		(402) 370-3400 FAX: (402) 370-4229	NONE			Medicare/Medicaid - 0 Total Lic Beds - 150	
		STATE OF NEBRASKA, DEPT OF HEALTH & HUMAN SERVVS					
		MYLES JONES, ADMINISTRATOR					



TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
NORTH PLATTE (LINCOLN) - 69101	Great Plains Health	601 WEST LEOTA ST	HOSP-ACU	510001	280065	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 116 Total Lic Beds - 116	
(308) 696-8000 FAX: (308) 696-7199	NORTH PLATTE NE HOSPITAL CORPORATION MEL MCNEA, ADMINISTRATOR		TJC				
BRANCH/EXTENSION/OFFSITE: GREAT PLAINS HEALTH SPORTS & THERAPY CENTER - 1115 SOUTH COTTONWOOD ST, NORTH PLATTE							
BRANCH/EXTENSION/OFFSITE: GREAT PLAINS HEALTH IMAGING CENTER - 1101 SOUTH OAK, NORTH PLATTE							
O' NEILL (HOLT) - 68763	Avera St. Anthony's Hospital	300 NORTH 2ND ST	HOSP-CAH	410002	281329	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 336-2611 FAX: (402) 336-5135	AVERA ST. ANTHONY'S HOSPITAL TODD CONSRUCK, CEO		NONE				
OAKLAND (BURT) - 68045	Oakland Mercy Hospital	601 EAST SECOND ST	HOSP-CAH	080001	281321	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 16 Total Lic Beds - 16	SWING BEDS
(402) 685-5601 FAX: (402) 685-6223	OAKLAND MERCY HOSPITAL JOHN WERNER, ADMINISTRATOR		NONE				
OGALLALA (KEITH) - 69153	Ogallala Community Hospital	2601 NORTH SPRUCE ST	HOSP-CAH	470001	281355	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
(308) 284-4011 FAX: (308) 284-7262	BANNER HEALTH DREW DOSTAL		NONE				

% BANNER CERTIFICATION, CREDENTIALING & LICENSINS, P O BOX 16950, MESA, AZ 85211

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
OMAHA (DOUGLAS) - 68124			HOSP-ACU			Medicare - 0	
Alegent Health Bergan Mercy Health System d/b/a C			260001			Medicaid - 0	
7500 MERCY RD			280060			Medicare/Medicaid - 400	
(402) 398-6060 FAX: (402) 398-6920			TJC			Total Lic Beds - 400	
ALEGENT HEALTH	MARIE KNEDLER, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: LASTING HOPE RECOVERY CENTER - 415 S 25TH AVE, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH P STREET CLINIC - 11909 P ST STE 201, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH SOUTH OMAHA PHYSICAL THERAPY - 4220 L STREET STE 100, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH BERGAN MOB PHYSICAL THERAPY - 7710 MERCY RD STE 100, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH LAKESIDE LABORATORY - 16909 LAKESIDE HILLS CT, STE 108, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH CORE LAB - 4955 F ST, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH BERGAN MERCY ADVANCED WOUND CARE - 7710 MERCY ROAD, MEDICAL BLDG ONE,							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH THORACIC & CARDIOVASCULAR SURGERY - 9850 NICHOLAS ST, STE 250, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH OUTPATIENT REHABILITATION - 2412 CUMING ST., STE 101, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH BERGAN MERCY CARDIAC REHAB - 3006 WEBSTER STREET, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH BERGAN MERCY CARDIAC REHAB - 7710 MERCY ROAD, SUITE 226, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH LAVISTA PHYSICAL THERAPY - 8248 SOUTH 96TH ST, STE 102, LA VISTA							
BRANCH/EXTENSION/OFFSITE: UNIV CAMPUS CHI HLTH CUMC BERG MERC-601 N 30, OMAH - 601 NORTH 30TH STREET, OMAHA							
OMAHA (DOUGLAS) - 68131			HOSP-CHD			Medicare - 0	
Boys Town National Research Hospital			260004			Medicaid - 0	
555 NORTH 30TH ST			283300			Medicare/Medicaid - 31	
(402) 498-6362 FAX: (402) 498-6357			TJC			Total Lic Beds - 31	
FATHER FLANAGAN'S BOYS' HOME	JOHN ARCH, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: BOYS TOWN MEDICAL OFFICE BUILDING STE 100 - 14040 BOYS TOWN HOSPITAL RD, BOYS TOWN							
OMAHA (DOUGLAS) - 68131			HOSP-ACU			Medicare - 0	
CHI Health Creighton University Medical Center - Ber			H000122			Medicaid - 0	
601 NORTH 30TH ST			280030			Medicare/Medicaid - 334	
(402) 449-4000 FAX: (402) 449-5020			NONE			Total Lic Beds - 334	
ALEGENT CREIGHTON HEALTH CREIGHTON UNIVERSITY MEDI	MARIE KNEDLER, ADMINISTRATOR						

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
OMAHA (DOUGLAS) - 68122	CHI Health Immanuel	6901 NORTH 72ND ST	HOSP-ACU	260002	280081	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 356 Total Lic Beds - 356	
(402) 572-2121 FAX: (402) 572-3177		ALEAGENT HEALTH	TJC				
	ANN SCHUMACHER, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: ALEAGENT HEALTH PHYSICAL THERAPY FLORENCE - 8405 NORTH 30TH ST, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL PARTIAL HOSPITALIZATION C&A - 7101 NEWPORT AVE, STE 101, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL OP CHEMICAL DEPENDENCY - 7101 NEWPORT AVE, STE 305, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL PARTIAL HOSPITALIZATION ADULT - 7101 NEWPORT AVE, STE 202, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL PARTIAL HOSPITALIZATION GERIAT - 7101 NEWPORT AVE, STE 311, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL WEIGHT MANAGEMENT - 7101 NEWPORT AVE, SUITE 304, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL ADVANCED WOUND CARE - 6751 NORTH 72ND STREET, STE 201, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH SPORTS MEDICINE THERAPY - 12220 K PA, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH WEST MAPLE PHYSICAL THERAPY - 16101 EVANS STREET, STE 102, OMAHA							
OMAHA (DOUGLAS) - 68130	CHI Health Lakeside	16901 LAKESIDE HILLS CT	HOSP-ACU	H000106	280130	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 157 Total Lic Beds - 157	
(402) 717-8000 FAX: (402) 717-8108		ALEAGENT HEALTH	TJC				
	KEVIN MILLER, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: ALEAGENT CANCER CENTER ONCOLOGY SERVICE - 17201 WRIGHT ST STE 102, OMAHA							
BRANCH/EXTENSION/OFFSITE: LAKESIDE HOSPITAL OUTPATIENT PHYSICAL THERAPY - 16940 LAKESIDE HILLS PLAZA STE 109, OM							
BRANCH/EXTENSION/OFFSITE: ALEAGENT CANCER CENTER IMAGE RECOVERY - 17201 WRIGHT ST STE 202, OMAHA							
BRANCH/EXTENSION/OFFSITE: ALEAGENT MIDWEST CANCER CENTER - 17201 WRIGHT ST STE 201, OMAHA							
BRANCH/EXTENSION/OFFSITE: LAKESIDE HOSPITAL OUTPATIENT CARDIAC REHAB - 16909 LAKESIDE HILLS CT, STE 100, OMAHA							
BRANCH/EXTENSION/OFFSITE: ALEAGENT MIDWEST CANCER IMAGING - 17201 WRIGHT ST STE 100, OMAHA							
BRANCH/EXTENSION/OFFSITE: ALEAGENT CANCER CENTER RADIATION/ONCOLOGY - 17201 WRIGHT ST STE 101, OMAHA							
BRANCH/EXTENSION/OFFSITE: LAKESIDE HOSPITAL SLEEP DISORDERS CLINIC - 16909 LAKESIDE HILLS CT STE 110, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH LAKESIDE ADVANCED WOUND CARE - 17030 LAKESIDE HILLS, STE 222, OMAHA							
OMAHA (DOUGLAS) - 68114	Children's Hospital & Medical Center	8200 DODGE ST	HOSP-CHD	260005	283301	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 145 Total Lic Beds - 145	
(402) 955-5400 FAX: (402) 955-4100		CHILDREN'S HOSPITAL & MEDICAL CENTER	TJC				
	RICHARD AZIZKHAN, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL REHAB, LAB & RADIOLOGY SERVICE - 110 N 175TH ST, STE 1000, WEST VILL							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL EATING DISORDERS PROGRAM - 1000 N. 90TH ST., SUITE 201, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL REHAB CLINIC - 17819 PIERCE PLAZA, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S S P C - HEALTH CARE CLINIC/URGENT CARE - 111 N 84TH ST, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S PHYSICIANS/URGENT CARE - 9801 GILES RD, STE 1, LA VISTA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S PHYSICIANS/URGENT CARE - 4825 DODGE ST, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL & MEDICAL CNTR OP SURGERY CNTR - 110 N 175TH STREET, SUITE 1600, OI							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
OMAHA (DOUGLAS) - 68105	Douglas County Community Mental Health Center	4102 WOOLWORTH AVE	PSYCH	260006	284009	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 16 Total Lic Beds - 16	
(402) 444-7676 FAX: (402) 996-8171	DOUGLAS COUNTY SHERRY GLASNAPP, ADMINISTRATOR		AOA				
OMAHA (DOUGLAS) - 68131	Lasting Hope Recovery Center	415 SOUTH 25TH AVENUE	HOSP-ACU	H000110		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 Total Lic Beds - 64	
(402) 717-5300 FAX: (402) 717-5499	CHI HEALTH BERGAN MERCY HOSPITAL MARIE KNEDLER, ADMINISTRATOR		TJC				
OMAHA (DOUGLAS) - 68118	Madonna Rehabilitation Hospital Omaha	17500 BURKE STREET	REH HOSP	H000130	283026	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 Total Lic Beds - 46	
(402) 401-3100 FAX: (402) 401-5118	MADONNA REHABILITATION HOSPITAL PAUL DONGILLI, JR, ADMINISTRATOR		TJC				
OMAHA (DOUGLAS) - 68118	Madonna Rehabilitation Specialty Hospital Omaha	17500 BURKE STREET	HOSP-LT	H000129	282003	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 32 Total Lic Beds - 32	
(402) 401-3000 FAX: (402) 401-5118	MADONNA REHABILITATION SYSTEMS JASON DOLL, ADMINISTRATOR		TJC				
OMAHA (DOUGLAS) - 68114	Methodist Hospital	8303 DODGE ST	HOSP-ACU	260008	280040	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 423 Total Lic Beds - 423	
(402) 354-4000 FAX: (402) 354-8735	THE NEBRASKA METHODIST HOSPITAL STEPHEN GOESER, ADMINISTRATOR		TJC				

BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL O/P SURGERY & RADIOLOGY/IMAGING - 16120 WEST DODGE RD, 1ST FLOOR  
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL SLEEP CENTER - 515 N 162ND AVE, STE 103, OMAHA  
 BRANCH/EXTENSION/OFFSITE: METHODIST COMMUNITY HEALTH CLINIC - 2650 FARNAM ST, OMAHA  
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL WOUND CENTER - 515 N 162ND AVE, STE 301, OMAHA  
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL PATHOLOGY AND ONCOLOGY SERVICES - 515 N 162ND AVE, STE 100, OMAHA  
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL PAIN MANAGEMENT CLINIC - 515 N 162ND AVE, STE 203, OMAHA  
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL PERINATAL CENTER - 717 N 190TH PLZ, STE 2400, ELKHORN

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
					Accreditation		
OMAHA (DOUGLAS) - 68114	Midwest Surgical Hospital L L C	7915 FARNAM DRIVE	HOSP-ACU	H000111	280131	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 19 Total Lic Beds - 19	
(402) 399-1900 FAX: (402) 399-1999	MIDWEST SURGICAL HOSPITAL, LLC	CHARLES LIVINGSTON, ADMINISTRATOR	NONE				
OMAHA (DOUGLAS) - 68144	Nebraska Orthopaedic Hospital	2808 SOUTH 143RD PLZ	HOSP-ACU	H000105	280129	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	
(402) 609-1600 FAX: (402) 609-1020	OUTLOOK, LLC/NEBRASKA MEDICAL CENTER	LEVI SCHEPPERS, ADMINISTRATOR	TJC				
BRANCH/EXTENSION/OFFSITE: AQUATIC PHYSICAL THERAPY - 2725 SOUTH 144TH ST, STE 114, OMAHA							
BRANCH/EXTENSION/OFFSITE: M R I SERVICES - 2725 SOUTH 144TH ST, STE 118, OMAHA							
BRANCH/EXTENSION/OFFSITE: PERFORMANCE & CONDITIONING CENTER - 2725 SOUTH 144TH ST, STE 116, OMAHA							
BRANCH/EXTENSION/OFFSITE: OUTPATIENT PHYSICAL/OCCUPATIONAL THERAPY - 2725 SOUTH 144TH ST, STE 218, OMAHA							
BRANCH/EXTENSION/OFFSITE: EMERGENCY DEPARTMENT - 2727 S 144TH ST, STE 150, OMAHA							
BRANCH/EXTENSION/OFFSITE: OUTPATIENT SURGERY - 2727 S 144TH ST, STE 180, OMAHA							
BRANCH/EXTENSION/OFFSITE: INFUSION CENTER - 2727 S 144TH ST, STE 260, OMAHA							
BRANCH/EXTENSION/OFFSITE: SHORT STAY UNIT - 2727 S 144TH ST, STE 170, OMAHA							
OMAHA (DOUGLAS) - 68122	Nebraska Spine Hospital	P O BOX 34400, 6901 NORTH 72ND ST, STE 20300	HOSP-ACU	H000114	280133	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 34 Total Lic Beds - 34	
(402) 572-3000 FAX: (402) 572-2657	NEBRASKA SPINE HOSPITAL, LLC	CORY KRUGER, INTERIM ADMINIS	TJC				
OMAHA (DOUGLAS) - 68124	Select Specialty Hospital - Omaha (Central Campus)	1870 SOUTH 75TH STREET	HOSP-LT	H000109	282001	Medicare - 52 Medicaid - 0 Medicare/Medicaid - 0 Total Lic Beds - 52	
(402) 361-5755 FAX: (402) 361-5777	SELECT SPECIALTY HOSPITAL - OMAHA, INC.	LORIE POWELL, ADMINISTRATOR	TJC				

% ATTN: MELANIE NOTARIO, SELECT SPECIALTY MEDICAL, 4714 GETTYSBURG RD MECHANICSBURG, PA 17055

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
OMAHA (DOUGLAS) - 68198			HOSP-ACU			Medicare - 0	
The Nebraska Medical Center DBA Nebraska Medici			260011			Medicaid - 0	
987400 NEBRASKA MEDICAL CENTER			280013			Medicare/Medicaid - 606	
(402) 552-2040 FAX: (402) 552-2152			TJC			Total Lic Beds - 606	
THE NEBRASKA MEDICAL CENTER							
DAN DEBEHNKE, CEO							
<p>% THE NEBRASKA MEDICAL CENTER, 987400 NEBRASKA MEDICAL CENTER, OMAHA, NE 68198            BRANCH/EXTENSION/OFFSITE: THE CANCER CENTER AT VILLAGE POINTE MEDICAL CENTER - 111 N 175TH ST, OMAHA            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER - CLARKSON WEST LABORATORY - 2727 S 144TH ST, STE 160, OMAHA/            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BELLEVUE CANCER SERVICES - 2500 BELLEVUE MEDICAL CENTER D            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER VILLAGE POINTE OP SURG CNT - 110 NORTH 175TH STREET, SUITE 1            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER SPECIALTY CARE CENTER - 804 S 52ND STREET, OMAHA            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER TRUHLSEN EYE INSTITUTE - 3902 LEAVENWORTH STREET, OMAHA            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BELLEVUE CANCER SERVICES - 2510 BELLEVUE MEDICAL CENTER D            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER CARDIOLOGY IMAGING - 2727 S 144TH ST, STE 110, OMAHA            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER VILLAGE POINTE ENDOSCOPY - 111 N 175TH ST, OMAHA            BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BELLEVUE PHARMACY - 2510 BELLEVUE MEDICAL CENTER DR, BELLI</p>							
ORD (VALLEY) - 68862			HOSP-CAH			Medicare - 0	SWING BEDS
Valley County Health System			780001			Medicaid - 0	
2707 L STREET			281353			Medicare/Medicaid - 16	
(308) 728-4200 FAX: (308) 728-7809			NONE			Total Lic Beds - 16	
VALLEY COUNTY HOSPITAL							
NANCY GLAUBKE							
<p>BRANCH/EXTENSION/OFFSITE: V C H S HERITAGE PROGRAM FOR SENIORS - 110 SOUTH 26TH ST, ORD            BRANCH/EXTENSION/OFFSITE: V C H S REHABILITATION CENTER - 708 O ST, LOUP CITY            BRANCH/EXTENSION/OFFSITE: V C H S REHABILITATION CENTER - 150 N 9TH AVE, STE A, BURWELL</p>							
OSCEOLA (POLK) - 68651			HOSP-CAH			Medicare - 0	SWING BEDS
Annie Jeffrey Memorial County Health Center			640001			Medicaid - 0	
P O BOX 428, 531 BEEBE ST			281314			Medicare/Medicaid - 16	
(402) 747-2031 FAX: (402) 747-1405			NONE			Total Lic Beds - 16	
POLK COUNTY							
JOSEPH LOHRMAN, ADMINISTRATOR							
OSHKOSH (GARDEN) - 69154			HOSP-CAH			Medicare - 0	SWING BEDS
Regional West Garden County Hospital			H000127			Medicaid - 0	
1100 WEST 2ND ST			281310			Medicare/Medicaid - 10	
(308) 772-3283 FAX: (308) 772-1079			NONE			Total Lic Beds - 10	
REGIONAL WEST GARDEN COUNTY							
WILLIAM GILES, CEO							

% REGIONAL WEST MEDICAL CENTER, 4021 AVENUE B, SCOTTSBLUFF, NE 69361

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
OSMOND (PIERCE) - 68765	Osmond General Hospital	P O BOX 429, 402 NORTH MAPLE ST (402) 748-3393 FAX: (402) 748-3349	HOSP-CAH	620001	281347	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
	OSMOND GENERAL HOSPITAL, INC. LON KNIEVEL, INTERIM ADMINIS		NONE				
PAPILLION (SARPY) - 68046	CHI Health Midlands	11111 SOUTH 84TH ST (402) 593-3000 FAX: (402) 593-3117	HOSP-ACU	680001	280105	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 121 Total Lic Beds - 121	
	ALEGENT HEALTH KEVIN MILLER, ADMINISTRATOR		TJC				
BRANCH/EXTENSION/OFFSITE: BELLEVUE PHYSICAL THERAPY - 3308 SAMSON WAY, STE 202, BELLEVUE							
PAWNEE CITY (PAWNEE) - 68420	Pawnee County Memorial Hospital	P O BOX 433, 600 I ST (402) 852-2231 FAX: (402) 852-2098	HOSP-CAH	590001	281302	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 11 Total Lic Beds - 11	SWING BEDS
	PAWNEE COUNTY RUTH STEPHENS, CEO		NONE				
PENDER (THURSTON) - 68047	Pender Community Hospital	P O BOX 100, 100 HOSPITAL DRIVE (402) 385-3083 FAX: (402) 385-4041	HOSP-CAH	H000120	281349	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 21 Total Lic Beds - 21	SWING BEDS
	PENDER COMMUNITY HOSPITAL DISTRICT MELISSA KELLY, CEO		NONE				
PLAINVIEW (PIERCE) - 68769	CHI Health Plainview	P O BOX 489, 704 NORTH THIRD ST (402) 582-4245 FAX: (402) 582-3940	HOSP-CAH	620002	281346	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 15 Total Lic Beds - 15	SWING BEDS
	ALEGENT CREIGHTON HEALTH GREG BECKMANN, ADMINISTRATOR		NONE				

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
RED CLOUD (WEBSTER) - 68970	HOSP-CAH	Webster County Community Hospital	810001	281316	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 13 Total Lic Beds - 13	SWING BEDS
P O BOX 465, 621 N FRANKLIN ST		(402) 746-5600 FAX: (402) 746-5687					
WEBSTER COUNTY		MIRYA HALLOCK, ADMINISTRATOR					
SCHUYLER (COLFAX) - 68661	HOSP-CAH	CHI Health Schuyler	170001	281323	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
104 WEST 17TH ST		(402) 352-2441 FAX: (402) 352-2643					
ALEGENT CREIGHTON HEALTH MEMORIAL HOSP SCHUYLER		CONNIE PETERS, ADMINISTRATOR					
SCOTTSBLUFF (SCOTTS BLUFF) - 69361	HOSP-ACU	Regional West Medical Center	700001	280061	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 166 Total Lic Beds - 166	
4021 AVE B		(308) 635-3711 FAX: (308) 630-1815					
REGIONAL WEST MEDICAL CENTER		JOHN MENTGEN, ADMINISTRATOR					
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER NORTH PLAZA - TWO WEST 42ND ST, STES 1400, 2200, 2500, SC							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER INFUSION CENTER - 3911 AVENUE B, SUITE 2100, SCOTTSBLUF							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER REHAB - TWO WEST 42ND ST, STE 2100, SCOTTSBLUFF							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST PSYCHIATRY & BEHAVIORAL CLINIC - TWO WEST 42ND ST, STE 3200, SCOTTSBLU							
BRANCH/EXTENSION/OFFSITE: ANTI-COAGULATION CLINIC - TWO WEST 42ND STREET, SUITE 2400, SCOTTSBLUFF							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER SLEEP DISORDER - TWO WEST 42ND ST, STE 3400, SCOTTSBLI							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER OUTPATIENT SURGICAL - 4022 AVENUE B, SCOTTSBLUFF							
BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER SOUTH PLAZA - 3911 AVENUE B, STES G100, G200, 3200, SCOTT							
SEWARD (SEWARD) - 68434	HOSP-CAH	Memorial Hospital	720001	281339	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
300 NORTH COLUMBIA AVE		(402) 643-2971 FAX: (402) 646-4605					
MEMORIAL HEALTH CARE SYSTEMS		ROGER REAMER, ADMINISTRATOR					
BRANCH/EXTENSION/OFFSITE: MEMORIAL HOSPITAL THERAPY SERVICES - 250 N COLUMBIA AVE, LOWER LEVEL, SEWARD							
SIDNEY (CHEYENNE) - 69162	HOSP-CAH	Sidney Regional Medical Center	H000126	281357	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
1000 POLE CREEK CROSSING		(308) 254-5825 FAX: (308) 254-2300					
CHEYENNE COUNTY HOSPITAL ASSOCIATION, INC.		JASON PETIK, ADMINISTRATOR					



TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
ST PAUL (HOWARD) - 68873	Howard County Medical Center	Howard County Medical Center P O BOX 406, 1113 SHERMAN ST (308) 754-4421 FAX: (308) 754-4429 HOWARD COUNTY ARLAN JOHNSON, ADMINISTRATOR	HOSP-CAH	430001	281338	Medicare - 0 Medicaid - 16 Medicare/Medicaid - 0 Total Lic Beds - 16	SWING BEDS
SUPERIOR (NUCKOLLS) - 68978	Brodstone Memorial Hospital	Brodstone Memorial Hospital P O BOX 187, 520 EAST 10TH ST (402) 879-3281 FAX: (402) 879-3401 BRODSTONE MEMORIAL HOSPITAL JOHN KEELAN, ADMINISTRATOR	HOSP-CAH	570001	281315	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
SYRACUSE (OTOE) - 68446	Community Memorial Hospital	Community Memorial Hospital P O BOX N, 1579 MIDLAND ST (402) 269-2011 FAX: (402) 269-2795 COMMUNITY MEMORIAL HOSPITAL DISTRICT MICHAEL HARVEY, ADMINISTRATOR	HOSP-CAH	580002	281309	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
TECUMSEH (JOHNSON) - 68450	Johnson County Hospital	Johnson County Hospital 202 HIGH ST (402) 335-3361 FAX: (402) 335-6342 JOHNSON COUNTY HOSPITAL DIANE NEWMAN, ADMINISTRATOR	HOSP-CAH	450001	281350	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
VALENTINE (CHERRY) - 69201	Cherry County Hospital	Cherry County Hospital P O BOX 410, 510 NORTH GREEN ST (402) 376-2525 FAX: (402) 376-1627 CHERRY COUNTY HOSPITAL BRENT PETERSON, ADMINISTRATOR	HOSP-CAH	140001	281344	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	License No	Medicare No Accreditation	No. and Type of Beds	Services
WAHOO (SAUNDERS) - 68066	Saunders Medical Center	1760 COUNTY RD J	(402) 443-4191 FAX: (402) 443-1433	SAUNDERS MEDICAL CENTER TYLER TOLINE, CEO	HOSP-CAH	H000108	281307 NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 16 Total Lic Beds - 16	SWING BEDS
BRANCH/EXTENSION/OFFSITE: WAKEFIELD CARE CENTER PHYSICAL THERAPY - 306 ASH ST, WAKEFIELD BRANCH/EXTENSION/OFFSITE: LAUREL PHYSICAL THERAPY - 699 CEDAR AVENUE, LAUREL									
WAYNE (WAYNE) - 68787	Providence Medical Center	1200 PROVIDENCE RD	(402) 375-3800 FAX: (402) 375-7989	PROVIDENCE MEDICAL CENTER, INC. JAMES FRANK, ADMINISTRATOR	HOSP-CAH	800001	281345 NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: ST. FRANCIS REHABILITATION - 2100 21ST CR, STE B, WISNER									
WEST POINT (CUMING) - 68788	St. Francis Memorial Hospital	430 NORTH MONITOR ST	(402) 372-2404 FAX: (402) 372-2360	FRANCISCAN CARE SERVICES, INC. JERRY WORDEKEMPER, ADMINISTRATOR	HOSP-CAH	180001	281322 NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
BRANCH/EXTENSION/OFFSITE: YORK GENERAL ONCOLOGY/ CARDIAC REHAB - 2114 N LINCOLN AVE, STE C, YORK BRANCH/EXTENSION/OFFSITE: YORK GENERAL SLEEP STUDIES - 2319 N LINCOLN AVE, STE A, YORK									
YORK (YORK) - 68467	York General Health Care Services	2222 LINCOLN AVE	(402) 362-6671 FAX: (402) 362-0499	YORK GENERAL HEALTH CARE SERVICES JAMES ULRICH, JR, CEO	HOSP-CAH	820002	281336 NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS

**Total Facilities: 106**