

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

	Number of Licensed Facilities	Number of Licensed Beds
HOSP-ACU	28	4,581
HOSP-CAH	64	1,250
HOSP-CHD	3	212
HOSP-LT	4	194
PSY	1	150
PSYCH	3	277
REH HOSP	2	106
	<hr/> Total: 105	6770

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: 8/15/2017

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
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	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 23 Total Lic Beds - 23	SWING BEDS
BRANCH/EXTENSION/OFFSITE: BROWN COUNTY HOSPITAL - 938 E. ZERO ST., AINSWORTH BRANCH/EXTENSION/OFFSITE: BROWN COUNTY HOSPITAL - 938 E. ZERO STREET, 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 TANYA SHARP, CEO	HOSP-CAH	030001	281334	NONE	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	TJC	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	NONE	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	NONE	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 - 91 Total Lic Beds - 91	
(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		NONE				
	MARVIN NETH, ADMINISTRATOR						
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.		NONE				
	DEBORAH HERZBERG, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: TRI-VALLEY PHYSICAL THERAPY-ARAPAHOE - 658 PINE ST, ARAPAHOE							
CENTRAL CITY (MERRICK) - 68826	Merrick Medical Center	1715 26TH ST	HOSP-CAH	H000131	281328	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 946-3015 FAX: (308) 946-2633	MERRICK MEDICAL CENTER		NONE				
	JULIE MURRAY, ADMINISTRATOR						
CENTRAL CITY (MERRICK) - 68826	Merrick Medical Center	1715 26TH ST	HOSP-CAH	H000131	281328	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 946-3015 FAX: (308) 946-2633	MERRICK MEDICAL CENTER		NONE				
	JULIE MURRAY, ADMINISTRATOR						
CHADRON (DAWES) - 69337	Chadron Community Hospital Corp.	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.		NONE				
	ANNA TURMAN, CEO						

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
COLUMBUS (PLATTE) - 68601	HOSP-ACU					Medicare - 0	SWING BEDS
Columbus Community Hospital	630001					Medicaid - 0	
4600 38TH ST	280111					Medicare/Medicaid - 47	
(402) 564-7118 FAX: (402) 562-3378	TJC					Total Lic Beds - 47	
COLUMBUS COMMUNITY HOSPITAL, INC.							
MICHAEL HANSEN, ADMINISTRATOR							
%							
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 WIGGLES & GIGGLES THER - 3912 38TH ST, STE B, COLUMBUS							
BRANCH/EXTENSION/OFFSITE: COLUMBUS COMMUNITY HOSPITAL REHABILITATIVE SERVICE - 3912 38TH ST, STE A, 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							
COZAD (DAWSON) - 69130	HOSP-CAH					Medicare - 0	SWING BEDS
Cozad Community Hospital	220001					Medicaid - 0	
P O BOX 108, 300 EAST 12TH ST	281327					Medicare/Medicaid - 20	
(308) 784-2261 FAX: (308) 784-4691	NONE					Total Lic Beds - 20	
COZAD HOSPITAL DISTRICT #2							
LYLE DAVIS, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: COZAD COMMUNITY PHYSICAL THERAPY - 313 EAST 12TH ST, COZAD							
CREIGHTON (KNOX) - 68729	HOSP-CAH					Medicare - 0	SWING BEDS
Avera Creighton Hospital	490001					Medicaid - 0	
P O BOX 186, 1503 MAIN ST	281331					Medicare/Medicaid - 23	
(402) 358-5700 FAX: (402) 358-5769	NONE					Total Lic Beds - 23	
AVERA SACRED HEART HEALTH SERVICES							
TODD CONSRUCK, CEO							
BRANCH/EXTENSION/OFFSITE: AVERA MEDICAL GROUP CREIGHTON - 1503 MAIN ST, CREIGHTON							
CRETE (SALINE) - 68333	HOSP-CAH					Medicare - 0	SWING BEDS
Crete Area Medical Center	670001					Medicaid - 0	
P O BOX 220, 2910 BETTEN DR	281354					Medicare/Medicaid - 24	
(402) 826-2102 FAX: (402) 826-7950	NONE					Total Lic Beds - 24	
CRETE AREA MEDICAL CENTER							
REBEKAH MUSSMAN, ADMINISTRATOR							
DAVID CITY (BUTLER) - 68632	HOSP-CAH					Medicare - 0	SWING BEDS
Butler County Health Care Center	090001					Medicaid - 0	
372 SOUTH 9TH ST	281332					Medicare/Medicaid - 20	
(402) 367-1200 FAX: (855) 297-3221	NONE					Total Lic Beds - 20	
BUTLER COUNTY							
DON NAIBERK, ADMINISTRATOR							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
ELKHORN (DOUGLAS) - 68022	HOSP-ACU	Methodist Women's Hospital 707 NORTH 190TH PLAZA	H000116			Medicare - 0 Medicaid - 0 Medicare/Medicaid - 112 Total Lic Beds - 114	
(402) 815-4000 FAX: (402) 815-1380	TJC	NEBRASKA METHODIST HOSPITAL SUSAN KORTH, ADMINISTRATOR					
<p>% THE NEBRASKA METHODIST HOSPITAL, 8303 DODGE ST, OMAHA, NE 68114</p>							
FAIRBURY (JEFFERSON) - 68352	HOSP-CAH	Jefferson Community Health Center, Inc. P O BOX 277, 2200 H ST	440001	281319		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 17 Total Lic Beds - 17	SWING BEDS
(402) 729-3351 FAX: (402) 729-2102	NONE	JEFFERSON COMMUNITY HEALTH AND LIFE - FAIRBURY CLI CHAD JURGENS, ADMINISTRATOR					
FALLS CITY (RICHARDSON) - 68355	HOSP-CAH	Community Medical Center, Inc. P O BOX 399, 3307 BARADA ST	H000112	281352		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
(402) 245-2428 FAX: (402) 245-6640	NONE	COMMUNITY MEDICAL CENTER, INC. RYAN LARSEN, ADMINISTRATOR					
FRANKLIN (FRANKLIN) - 68939	HOSP-CAH	Franklin County Memorial Hospital 1406 Q ST	290001	281311		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 14 Total Lic Beds - 14	SWING BEDS
(308) 425-6221 FAX: (308) 425-3164	NONE	FRANKLIN COUNTY THERESA RIZZO, ADMINISTRATOR					

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

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
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	PAUL UTEMARK, ADMINISTRATOR	NONE				
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	CORY NELSON, ADMINISTRATOR	NONE				
GORDON (SHERIDAN) - 69343	Gordon Memorial Hospital District	300 EAST 8TH ST	HOSP-CAH	730001	281358	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(308) 282-0401 FAX: (308) 282-0431	GORDON MEMORIAL HOSPITAL DISTRICT	DONALD WEILDEMANN	NONE				
GOTHENBURG (DAWSON) - 69138	Gothenburg Memorial Hospital	910 20TH ST	HOSP-CAH	220002	281313	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 12 Total Lic Beds - 12	SWING BEDS
(308) 537-3661 FAX: (308) 537-3074	GOTHENBURG MEMORIAL HOSPITAL DISTRICT	MICHAEL BRANT, ADMINISTRATOR	NONE				
GRAND ISLAND (HALL) - 68803	CHI Health St. Francis	2620 WEST FAIDLEY AVE	HOSP-ACU	370001	280023	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 159 Total Lic Beds - 159	
(308) 384-4600 FAX: (308) 398-5589	CATHOLIC HEALTH INITIATIVES	ED HANNON, ADMINISTRATOR	TJC				

BRANCH/EXTENSION/OFFSITE: ST FRANCIS MEDICAL CENTER CANCER TREATMENT CENTER - 2727 W 2ND ST, STE 314, HASTINGS

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration		Accreditation				
GRANT (PERKINS) - 69140	Perkins County Health Services	900 LINCOLN AVE	HOSP-CAH	600001	281356	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
(308) 352-7200 FAX: (308) 352-7291	PERKINS COUNTY HOSPITAL DISTRICT		NONE				
	JAMES LE BRUN, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: PERKINS CO HEALTH SERVICES TRAILER - 744 LINCOLN AVE, GRANT							
HASTINGS (ADAMS) - 68901	Mary Lanning Healthcare	715 N ST JOSEPH AVE	HOSP-ACU	010002	280032	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 162 Total Lic Beds - 162	
(402) 463-4521 FAX: (402) 461-5321	MARY LANNING HEALTHCARE		TJC				
	ERIC BARBER, ADMINISTRATOR						
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 MIDWEST IMAGING - 730 N DIERS AVE., STE A, GRAND ISLAND							
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/							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DEPT OF REHAB & WELLNESS - 3609 CIMARRON PLAZA, STE 170, HA							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DEPT OF REHABILITATION - 1010 N DIERS AVE, SUITE 3A, GRAND ISL							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE MAMMOGRAPHY SERVICES - 1010 N DIERS AVE, SUITE 3B, GRAND IS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE DIABETES EDUCATION - 715 N. KANSAS AVE, STE 105, HASTINGS							
BRANCH/EXTENSION/OFFSITE: MARY LANNING HEALTHCARE WOUND CENTER - 715 N KANSAS, STE 302, HASTINGS							
HEBRON (THAYER) - 68370	Thayer County Health Services	120 PARK AVE	HOSP-CAH	760001	281304	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 17 Total Lic Beds - 17	SWING BEDS
(402) 768-6041 FAX: (402) 768-4697	THAYER COUNTY		NONE				
	DAVID BURD, CEO						
HENDERSON (YORK) - 68371	Henderson Health Care Services, Inc.	1621 FRONT STREET	HOSP-CAH	820001	281308	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 13 Total Lic Beds - 13	SWING BEDS
(402) 723-4512 FAX: (402) 723-4520	HENDERSON HEALTH CARE SERVICES, INC		NONE				
	CHERYL BROWN, ADMINISTRATOR						

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
HOLDREGE (PHELPS) - 68949	HOSP-CAH					Medicare - 0	SWING BEDS
Phelps Memorial Health Center	610003					Medicaid - 0	
1215 TIBBALS ST	281362					Medicare/Medicaid - 25	
(308) 995-2211 FAX: (308) 995-3336						Total Lic Beds - 25	
PHELPS MEMORIAL HEALTH CENTER							
MARK HARREL, ADMINISTRATOR							
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 300, HOLDREGE							
BRANCH/EXTENSION/OFFSITE: PMHC SPECIALTY CLINIC - 516 W 14TH AVE, STE 400, HOLDREGE							
IMPERIAL (CHASE) - 69033	HOSP-CAH					Medicare - 0	SWING BEDS
Chase County Community Hospital	130001					Medicaid - 0	
P O BOX 819, 600 W 12TH ST	281351					Medicare/Medicaid - 20	
(308) 882-7111 FAX: (308) 882-7342	NONE					Total Lic Beds - 20	
CHASE COUNTY							
STEPHEN LEWIS, CEO							
KEARNEY (BUFFALO) - 68848	HOSP-ACU					Medicare - 0	
CHI Health Good Samaritan	070001					Medicaid - 0	
P O BOX 1990, 10 EAST 31ST ST	280009					Medicare/Medicaid - 172	
(308) 865-7100 FAX: (308) 865-2867	TJC					Total Lic Beds - 172	
GOOD SAMARITAN HOSPITAL							
MICHAEL SCHNIEDERS, ADMINISTRATOR							
BRANCH/EXTENSION/OFFSITE: GOOD SAMARITAN HOSPITAL MEDICAL FITNESS & REHABILI - 3219 CENTRAL AVE, LOWER LEVEL, K							
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							
KEARNEY (BUFFALO) - 68847	PSYCH					Medicare - 0	
CHI Health Richard Young Behavioral Health	070002					Medicaid - 0	
P O BOX 1750, 1755 PRAIRIE VIEW PL						Medicare/Medicaid - 30	
(308) 865-2000 FAX: (308) 865-2853	TJC					Total Lic Beds - 61	
GOOD SAMARITAN HOSPITAL							
MICHAEL SCHNIEDERS, ADMINISTRATOR							
KEARNEY (BUFFALO) - 68845	HOSP-ACU					Medicare - 0	
Kearney Regional Medical Center, LLC	H000123					Medicaid - 0	
804 22ND AVENUE	280134					Medicare/Medicaid - 44	
(308) 455-3600 FAX: (308) 455-3950	AOA					Total Lic Beds - 44	
KEARNEY REGIONAL MEDICAL CENTER, LLC							
LARRY SPEICHER, ADMINISTRATOR							
% JOE HLAVACEK, 200 W DOUGLAS, STE 950, WICHITA, KS 67202							
BRANCH/EXTENSION/OFFSITE: KEARNEY REGIONAL MEDICAL CTR - MEDICAL OFFICE BLDG - 816 22ND AVENUE, KEARNEY							
BRANCH/EXTENSION/OFFSITE: CENTRAL PLAINS VALLEY AESTHETIC SURGERY - 3712 28TH AVENUE, KEARNEY							

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
KIMBALL (KIMBALL) - 69145	Kimball County Hospital	505 SOUTH BURG ST	(308) 235-1952 FAX: (308) 235-1955	KENNETH HUNTER, ADMINISTRATOR	HOSP-CAH	480001	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 15 Total Lic Beds - 15	SWING BEDS
BRANCH/EXTENSION/OFFSITE: LRHC REHABILITATIVE SERVICES - 1600 WEST 13TH STREET, LEXINGTON									
LEXINGTON (DAWSON) - 68850	Lexington Regional Health Center	P O BOX 980, 1201 NORTH ERIE ST	(308) 324-5651 FAX: (308) 324-8359	LESLIE MARSH, ADMINISTRATOR	HOSP-CAH	220004		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) - 68502	Bryan Medical Center	2300 SOUTH 16TH ST	(402) 481-1111 FAX: (402) 481-5377	JOHN WOODRICH, ADMINISTRATOR	HOSP-ACU	500003	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 266 Total Lic Beds - 266	
% ATTN: ANGELA HERBERT, ORGANIZATIONAL QUALITY , BRYAN MEDICAL CENTER, 1600 SOUTH 48TH STREET LINCOLN, NE 68506									
LINCOLN (LANCASTER) - 68506	Bryan Medical Center	1600 SOUTH 48TH ST	(402) 481-1111 FAX: (402) 481-8306	JOHN WOODRICH, ADMINISTRATOR	HOSP-ACU	500001	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 374 Total Lic Beds - 374	
% ATTN: ANGELA HERBERT, ORGANIZATIONAL QUALITY, BRYAN MEDICAL CENTER, 1600 SOUTH 48TH STREET LINCOLN, NE 68506									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER COUNSELING CENTER - 2221 SOUTH 17TH ST, STE 310, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 1500 SOUTH 48TH ST, STE 400, VASCULAR SCAN RM, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER OUTPATIENT RADIOLOGY - 3901 PINE LAKE RD, SUITE 110, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 2222 SOUTH 16TH ST, TOWER B STE 110, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER MRI SERVICES - 2222 SOUTH 16TH ST, TOWER B STE 100, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER OUTPATIENT SERVICES @ BRYA - 1500 SOUTH 48TH ST, 1ST FLOOR, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER LABORATORY - 2221 SOUTH 17TH ST, STE 100, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER PEDIATRIC REHABILITATION SERV - 1500 S. 48TH ST., STE 709, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER COUNSELING CENTER - 2221 SOUTH 17TH ST, STE 201, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER - 1600 SOUTH 48TH ST, STE 600, RM 1, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER CARDIAC-VASCULAR OUTPATIENT S - 1600 SOUTH 48TH ST, STE 301, LINCOLN									
BRANCH/EXTENSION/OFFSITE: BRYAN MEDICAL CENTER THERAPY SERVICES - 7501 S 27TH ST EXCLUDING STE 100 & FITNESS CT									

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					

LINCOLN (LANCASTER) - 68526
 CHI Health Nebraska Heart
 7500 SOUTH 91ST ST
 (402) 328-3000 FAX: (402) 328-3010
 NEBRASKA HEART HOSPITAL
 PETER DIONISOPOULOS, ADMINISTRATOR

BRANCH/EXTENSION/OFFSITE: NEBRASKA HEART HOSPITAL IMAGING CENTER - 7440 SOUTH 91ST ST, STE 100, LINCOLN

LINCOLN (LANCASTER) - 68510
 CHI Health St. Elizabeth
 555 SOUTH 70TH ST
 (402) 219-7700 FAX: (402) 219-8973
 CATHOLIC HEALTH INITIATIVES
 CARY WARD, ADMINISTRATOR

BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH OUTPATIENT CLINICS - 575 SOUTH 70TH ST, SUITE 435, LINCOLN
 BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH SLEEP DISORDER CENTER - 575 SOUTH 70TH ST., SUITE 445, LINCOLN
 BRANCH/EXTENSION/OFFSITE: ST. ELIZABETH WOUND CARE CENTER - 575 SOUTH 70TH STREET, SUITE 200, LINCOLN
 BRANCH/EXTENSION/OFFSITE: SAINT ELIZABETH WOUND CARE CENTER - 575 S. 70TH STREET, SUITE 300, LINCOLN

LINCOLN (LANCASTER) - 68509
 Lincoln Regional Center
 PO BOX 94949 FOLSOM & WEST PROSPECTOR
 (402) 471-4444 FAX: (402) 479-5124
 STATE OF NEBRASKA, DEPT OF HEALTH & HUMAN SERVVS
 MYLES JONES, ADMINISTRATOR

LINCOLN (LANCASTER) - 68506
 Lincoln Surgical Hospital
 1710 SOUTH 70TH ST, SUITE 200
 (402) 484-9090 FAX: (402) 483-0476
 LINCOLN SURGERY CENTER, LLC
 ROBIN LINAFFELTER, ADMINISTRATOR

LINCOLN (LANCASTER) - 68506
 Madonna Rehabilitation Hospital
 5401 SOUTH ST
 (402) 413-3000 FAX: (402) 413-4113
 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

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
LINCOLN (LANCASTER) - 68506	HOSP-LT					Medicare - 0	
Madonna Rehabilitation LTC Hospital	507001					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							
<p>% ATTN: SUSAN KLANECKY, MSN, RN, CCM, CRRN, 5401 SOUTH STREET, LINCOLN, NE 68506</p>							
LINCOLN (LANCASTER) - 68502	HOSP-LT					Medicare - 0	
Select Specialty Hospital - Lincoln	H000124					Medicaid - 0	
2300 SOUTH 16TH STREET - 7TH FLOOR	282002					Medicare/Medicaid - 24	
(402) 361-5755 FAX: (402) 884-5284	TJC					Total Lic Beds - 24	
SELECT SPECIALTY HOSPITAL - LINCOLN, INC.							
CONNIE SIFFRING, ADMINISTRATOR							
<p>%, 4714 GETTYSBURG RD, ATTN: MELANIE NOTARIO MECHANICSBURG, PA 17055</p>							
LYNCH (BOYD) - 68746	HOSP-CAH					Medicare - 0	SWING BEDS
Niobrara Valley Hospital	050001					Medicaid - 0	
P O BOX 118, 401 SOUTH 5TH STREET	281303					Medicare/Medicaid - 20	
(402) 569-2451 FAX: (402) 569-2474	NONE					Total Lic Beds - 20	
NIOBRARA VALLEY HOSPITAL CORP							
KELLY KALKOWSKI, ADMINISTRATOR							
<p>BRANCH/EXTENSION/OFFSITE: NIOBRARA VALLEY HOSPITAL MEDICAL CLINIC - 108 WEST EVANS ST, SPENCER</p>							
MCCOOK (RED WILLOW) - 69001	HOSP-CAH					Medicare - 0	SWING BEDS
Community Hospital	320007					Medicaid - 0	
P O BOX 1328, 1301 EAST H ST	281363					Medicare/Medicaid - 25	
(308) 344-2650 FAX: (308) 344-8572						Total Lic Beds - 25	
COMMUNITY HOSPITAL ASSOCIATION							
TROY BRUNTZ, ADMINISTRATOR							
<p>BRANCH/EXTENSION/OFFSITE: COMMUNITY HOSPITAL OUTPATIENT SERVICES - 302 EAST 6TH ST, CURTIS</p> <p>BRANCH/EXTENSION/OFFSITE: COMMUNITY HOSPITAL OUTPATIENT SERVICES - 406 EAST 1ST ST, TRENTON</p>							
MINDEN (KEARNEY) - 68959	HOSP-CAH					Medicare - 0	SWING BEDS
Kearney County Health Services	460001					Medicaid - 0	
727 EAST 1ST ST	281306					Medicare/Medicaid - 10	
(308) 832-3400 FAX: (308) 832-3417	NONE					Total Lic Beds - 10	
KEARNEY COUNTY							
LUKE POORE, 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					
NEBRASKA CITY (OTOE) - 68410			HOSP-CAH			Medicare - 0	SWING BEDS
CHI Health St Mary's			H000128			Medicaid - 0	
1301 GRUNDMAN BLVD			281342			Medicare/Medicaid - 18	
(402) 873-3321 FAX: (402) 873-9033			NONE			Total Lic Beds - 18	
	ST. MARY'S COMMUNITY HOSPITAL						
	DANIEL KELLY, ADMINISTRATOR						
NELIGH (ANTELOPE) - 68756			HOSP-CAH			Medicare - 0	SWING BEDS
Antelope Memorial Hospital			020001			Medicaid - 0	
P O BOX 229, 102 WEST 9TH ST			281326			Medicare/Medicaid - 23	
(402) 887-4151 FAX: (402) 887-6397			NONE			Total Lic Beds - 23	
	ANTELOPE MEMORIAL HOSPITAL						
	JACK GREEN, ADMINISTRATOR						
NORFOLK (MADISON) - 68701			HOSP-ACU			Medicare - 0	
Faith Reg Health Services/East Campus			520002			Medicaid - 0	
1500 KOENIGSTEIN AVE						Medicare/Medicaid - 20	
(402) 371-4880 FAX: (402) 644-7468			TJC			Total Lic Beds - 20	
	FAITH REGIONAL HEALTH SERVICES						
	MARK KLOSTERMAN, ADMINISTRATOR						
NORFOLK (MADISON) - 68701			HOSP-ACU			Medicare - 0	
Faith Reg Health Services/West Campus			520001			Medicaid - 0	
2700 WEST NORFOLK AVE			280125			Medicare/Medicaid - 111	
(402) 371-4880 FAX: (402) 644-7468			TJC			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 CARDIAC & PULMONARY REHABILITATION - 110 NORTH 29TH ST, STE 202, NORFO							
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 REHABILITATION THERAPIES STANTON CL - 1007 KINGWOOD ST, TRAINING RM 12							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL REHABILITATION THERAPIES PIERCE CLI - 201 N ST, RM 109, PIERCE							
BRANCH/EXTENSION/OFFSITE: FAITH REGIONAL HEALTH SERVICES OUTPATIENT CENTER - 308 WEST 2ND ST, TILDEN							
NORFOLK (MADISON) - 68701			PSY			Medicare - 0	
Norfolk Regional Center			520003			Medicaid - 0	
P O BOX 1209, 1700 NORTH VICTORY RD						Medicare/Medicaid - 0	
(402) 370-3400 FAX: (402) 370-4229			NONE			Total Lic Beds - 150	
	STATE OF NEBRASKA, DEPT OF HEALTH & HUMAN SERV						
	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
Administration	Accreditation						
OMAHA (DOUGLAS) - 68124	HOSP-ACU					Medicare - 0	
Alegent Health Bergan Mercy Health System dba CH	260001					Medicaid - 0	
7500 MERCY RD	280060					Medicare/Medicaid - 400	
(402) 398-6060 FAX: (402) 398-6920	TJC					Total Lic Beds - 400	
ALEGENT HEALTH							
KEVIN NOKELS, 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 CARDIAC REHAB - 7710 MERCY ROAD, SUITE 226, OMAHA							
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 ADVANCED WOUND CARE - 7710 MERCY ROAD, MEDICAL BLDG ONE,							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH PRESURGICAL SCREENING CLINIC - 7710 MERCY ROAD, SUITE 140, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH UNIVERSITY C AMPUS EMERGENCY DEPARTMENT - 2412 CUMMING ST., STE 100, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH LAVISTA PHYSICAL THERAPY - 8248 SOUTH 96TH ST, STE 102, LA VISTA							
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 101 - 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 - 0	
(402) 449-4000 FAX: (402) 449-5020	NONE					Total Lic Beds - 0	
ALEGENT CREIGHTON HEALTH CREIGHTON UNIVERSITY MEDI							
KEVIN NOKELS, 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 - 345 Total Lic Beds - 345	
(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 SPORTS MEDICINE THERAPY - 12220 K PA, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL WEIGHT MANAGEMENT - 7101 NEWPORT AVE, SUITE 304, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH WEST MAPLE PHYSICAL THERAPY - 16101 EVANS STREET, STE 102, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL PARTIAL HOSPITALIZATION GERIAT - 7101 NEWPORT AVE, STE 311, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHI HEALTH IMMANUEL ADVANCED WOUND CARE - 6751 NORTH 72ND STREET, STE 201, 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 PHYSICIANS/URGENT CARE - 9801 GILES RD, STE 1, LA VISTA							
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 - 4825 DODGE ST, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL REHAB CLINIC - 17819 PIERCE PLAZA, OMAHA							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL & MEDICAL CNTR OP SURGERY CNTR - 110 N 175TH STREET, SUITE 1600, OI							
BRANCH/EXTENSION/OFFSITE: CHILDREN'S HOSPITAL EATING DISORDERS PROGRAM - 1000 N. 90TH ST., SUITE 201, OMAHA							

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 PATHOLOGY AND ONCOLOGY SERVICES - 515 N 162ND AVE, STE 100, OMAH
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL SLEEP CENTER - 515 N 162ND AVE, STE 103, OMAHA
 BRANCH/EXTENSION/OFFSITE: METHODIST HOSPITAL PAIN MANAGEMENT CLINIC - 515 N 162ND AVE, STE 203, 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 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
Administration	Accreditation						
OMAHA (DOUGLAS) - 68114	HOSP-ACU					Medicare - 0	
Midwest Surgical Hospital L L C	H000111					Medicaid - 0	
7915 FARNAM DRIVE	280131					Medicare/Medicaid - 19	
(402) 399-1900 FAX: (402) 399-1999	NONE					Total Lic Beds - 19	
MIDWEST SURGICAL HOSPITAL, LLC							
CHARLES LIVINGSTON, ADMINISTRATOR							
OMAHA (DOUGLAS) - 68144	HOSP-ACU					Medicare - 0	
Nebraska Orthopaedic Hospital	H000105					Medicaid - 0	
2808 SOUTH 143RD PLZ	280129					Medicare/Medicaid - 24	
(402) 609-1600 FAX: (402) 609-1020	TJC					Total Lic Beds - 24	
OUTLOOK, LLC/NEBRASKA MEDICAL CENTER							
LEVI SCHEPPERS, ADMINISTRATOR							
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: SHORT STAY UNIT - 2727 S 144TH ST, STE 170, 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							
OMAHA (DOUGLAS) - 68122	HOSP-ACU					Medicare - 0	
Nebraska Spine Hospital	H000114					Medicaid - 0	
P O BOX 34400, 6901 NORTH 72ND ST, STE 20300	280133					Medicare/Medicaid - 34	
(402) 572-3000 FAX: (402) 572-2657	TJC					Total Lic Beds - 34	
NEBRASKA SPINE HOSPITAL, LLC							
CORY KRUGER, INTERIM ADMINIS							
OMAHA (DOUGLAS) - 68124	HOSP-LT					Medicare - 52	
Select Specialty Hospital - Omaha (Central Campus)	H000109					Medicaid - 0	
1870 SOUTH 75TH STREET	282001					Medicare/Medicaid - 0	
(402) 361-5755 FAX: (402) 361-5777	TJC					Total Lic Beds - 52	
SELECT SPECIALTY HOSPITAL - OMAHA, INC.							
DARRELL JONES, ADMINISTRATOR							

% 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
Administration	Accreditation						
OMAHA (DOUGLAS) - 68198	HOSP-ACU	The Nebraska Medical Center		260011		Medicare - 0 Medicaid - 0	
987400 NEBRASKA MEDICAL CENTER	280013					Medicare/Medicaid - 738 Total Lic Beds - 738	
(402) 552-2040 FAX: (402) 552-2152	TJC						
THE NEBRASKA MEDICAL CENTER							
DAN DEBEHNKE, CEO							
<p>% THE NEBRASKA MEDICAL CENTER, 987400 NEBRASKA MEDICAL CENTER, OMAHA, NE 68198 BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER - CLARKSON WEST LABORATORY - 2727 S 144TH ST, STE 160, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BELLEVUE PHARMACY - 2510 BELLEVUE MEDICAL CENTER DR, BELLI BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER MULTISPECIALTY CLINIC AT V - 111 N 175TH ST, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER CLARKSON FAMILY MEDICINE - 4200 DOUGLAS STREET, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER FAMILY MEDICINE AND ORTHOP - 2727 S. 144TH STREET, SUITE 140, I BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER MULTISPECIALTY CLINIC BELL - 2510 BELLEVUE MEDICAL CENTER DI BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER MULTISPECIALTY CLINIC VILL - 110 N 175 STREET AND BURKE STREE BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER EAGLE RUN CLINIC - 3685 N. 129TH STREET, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER FONTENELLE CLINIC - 5050 AMES AVENUE, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER CARDIOVASCULAR CENTER OAKV - 2727 S. 144TH STREET, SUITE 100 BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER HOME INSTEAD CENTER FOR SU - 730 S. 38TH AVE, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER TRUHLSEN EYE INSTITUTE - 3902 LEAVENWORTH STREET, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER VILLAGE POINTE OP SURG CNT - 110 NORTH 175TH STREET, SUITE 1 BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER PLASTIC RECONSTRUCTIVE SUR - 17617 BURKE STREET, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BRENTWOOD VILLAGE - 8604 GILES ROAD, LA VISTA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER PLATTSMOUTH - 1938 HIGHWAY 34 EAST, PLATTSMOUTH BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER SPECIALTY CARE CENTER - 804 S 52ND STREET, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER BELLEVUE CANCER SERVICES - 2500 BELLEVUE MEDICAL CENTER D BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER MIDTOWN - 139 S. 40TH ST, OMAHA BRANCH/EXTENSION/OFFSITE: NEBRASKA MEDICAL CENTER FAMILY MEDICINE CLINIC BEL - 2510 BELLEVUE MEDICAL CENTER DR</p>							
ORD (VALLEY) - 68862	HOSP-CAH	Valley County Health System		780001		Medicare - 0 Medicaid - 0	SWING BEDS
2707 L STREET	281353					Medicare/Medicaid - 16 Total Lic Beds - 16	
(308) 728-4200 FAX: (308) 728-7809	NONE						
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	Annie Jeffrey Memorial County Health Center		640001		Medicare - 0 Medicaid - 0	SWING BEDS
P O BOX 428, 531 BEEBE ST	281314					Medicare/Medicaid - 16 Total Lic Beds - 16	
(402) 747-2031 FAX: (402) 747-1405	NONE						
POLK COUNTY							
JOSEPH LOHRMAN, ADMINISTRATOR							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
OSHKOSH (GARDEN) - 69154	HOSP-CAH	Regional West Garden County Hospital	H000127	281310	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 10 Total Lic Beds - 10	SWING BEDS
1100 WEST 2ND ST		(308) 772-3283 FAX: (308) 772-1079					
REGIONAL WEST GARDEN COUNTY		WILLIAM GILES, CEO					
<p>% REGIONAL WEST MEDICAL CENTER, 4021 AVENUE B, SCOTTSBLUFF, NE 69361</p>							
OSMOND (PIERCE) - 68765	HOSP-CAH	Osmond General Hospital	620001	281347	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 20 Total Lic Beds - 20	SWING BEDS
P O BOX 429, 402 NORTH MAPLE ST		(402) 748-3393 FAX: (402) 748-3349					
OSMOND GENERAL HOSPITAL, INC.		LON KNIEVEL, INTERIM ADMINIS					
PAPILLION (SARPY) - 68046	HOSP-ACU	CHI Health Midlands	680001	280105	TJC	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 121 Total Lic Beds - 121	
11111 SOUTH 84TH ST		(402) 593-3000 FAX: (402) 593-3117					
ALEGENT HEALTH		KEVIN MILLER, ADMINISTRATOR					
<p>BRANCH/EXTENSION/OFFSITE: BELLEVUE PHYSICAL THERAPY - 3308 SAMSON WAY, STE 202, BELLEVUE</p>							
PAWNEE CITY (PAWNEE) - 68420	HOSP-CAH	Pawnee County Memorial Hospital	590001	281302	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 11 Total Lic Beds - 11	SWING BEDS
P O BOX 433, 600 I ST		(402) 852-2231 FAX: (402) 852-2098					
PAWNEE COUNTY		RUTH STEPHENS, CEO					
PENDER (THURSTON) - 68047	HOSP-CAH	Pender Community Hospital	H000120	281349	NONE	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 21 Total Lic Beds - 21	SWING BEDS
P O BOX 100, 100 HOSPITAL DRIVE		(402) 385-3083 FAX: (402) 385-4041					
PENDER COMMUNITY HOSPITAL DISTRICT		MELISSA KELLY, CEO					

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Administration	Accreditation						
PLAINVIEW (PIERCE) - 68769	CHI Health Plainview	P O BOX 489, 704 NORTH THIRD ST (402) 582-4245 FAX: (402) 582-3940 ALEGENT CREIGHTON HEALTH GREG BECKMANN, ADMINISTRATOR	HOSP-CAH	620002	281346	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 15 Total Lic Beds - 15	SWING BEDS
RED CLOUD (WEBSTER) - 68970	Webster County Community Hospital	P O BOX 465, 621 N FRANKLIN ST (402) 746-5600 FAX: (402) 746-5687 WEBSTER COUNTY MIRYA HALLOCK, ADMINISTRATOR	HOSP-CAH	810001	281316	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 13 Total Lic Beds - 13	SWING BEDS
SCHUYLER (COLFAX) - 68661	CHI Health Schuyler	104 WEST 17TH ST (402) 352-2441 FAX: (402) 352-2643 ALEGENT CREIGHTON HEALTH MEMORIAL HOSP SCHUYLER CONNIE PETERS, ADMINISTRATOR	HOSP-CAH	170001	281323	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
SCOTTSBLUFF (SCOTTS BLUFF) - 69361	Regional West Medical Center	4021 AVE B (308) 635-3711 FAX: (308) 630-1815 REGIONAL WEST MEDICAL CENTER JOHN MENTGEN, ADMINISTRATOR	HOSP-ACU	700001	280061	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 166 Total Lic Beds - 166	
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, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER NORTH PLAZA - TWO WEST 42ND ST, STES 1400, 2200, 2500, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: REGIONAL WEST PSYCHIATRY & BEHAVIORAL CLINIC - TWO WEST 42ND ST, STE 3200, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: ANTI-COAGULATION CLINIC - TWO WEST 42ND STREET, SUITE 2400, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER INFUSION CENTER - 3911 AVENUE B, SUITE 2100, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER SLEEP DISORDER - TWO WEST 42ND ST, STE 3400, SCOTTSBLUFF BRANCH/EXTENSION/OFFSITE: REGIONAL WEST MEDICAL CENTER REHAB - TWO WEST 42ND ST, STE 2100, SCOTTSBLUFF							
SEWARD (SEWARD) - 68434	Memorial Hospital	300 NORTH COLUMBIA AVE (402) 643-2971 FAX: (402) 646-4605 MEMORIAL HEALTH CARE SYSTEMS ROGER REAMER, ADMINISTRATOR	HOSP-CAH	720001	281339	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 24 Total Lic Beds - 24	SWING BEDS
BRANCH/EXTENSION/OFFSITE: MEMORIAL HOSPITAL THERAPY SERVICES - 250 N COLUMBIA AVE, LOWER LEVEL, SEWARD							

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	License No	Medicare No	No. and Type of Beds	Services
Phone Number	Administration	Accreditation					
SIDNEY (CHEYENNE) - 69162	Sidney Regional Medical Center	1000 POLE CREEK CROSSING	HOSP-CAH	H000126	281357	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(308) 254-5825 FAX: (308) 254-2300	CHEYENNE COUNTY HOSPITAL ASSOCIATION, INC. JASON PETIK, ADMINISTRATOR		NONE				
ST PAUL (HOWARD) - 68873	Howard County Medical Center	P O BOX 406, 1113 SHERMAN ST	HOSP-CAH	430001	281338	Medicare - 0 Medicaid - 16 Medicare/Medicaid - 0 Total Lic Beds - 16	SWING BEDS
(308) 754-4421 FAX: (308) 754-4429	HOWARD COUNTY ARLAN JOHNSON, ADMINISTRATOR		NONE				
SUPERIOR (NUCKOLLS) - 68978	Brodstone Memorial Hospital	P O BOX 187, 520 EAST 10TH ST	HOSP-CAH	570001	281315	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 879-3281 FAX: (402) 879-3401	BRODSTONE MEMORIAL HOSPITAL SANDRA BORDEN, CEO		NONE				
SYRACUSE (OTOE) - 68446	Community Memorial Hospital	P O BOX N, 1579 MIDLAND ST	HOSP-CAH	580002	281309	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
(402) 269-2011 FAX: (402) 269-2795	COMMUNITY MEMORIAL HOSPITAL DISTRICT MICHAEL HARVEY, ADMINISTRATOR		NONE				
TECUMSEH (JOHNSON) - 68450	Johnson County Hospital	202 HIGH ST	HOSP-CAH	450001	281350	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
(402) 335-3361 FAX: (402) 335-6342	JOHNSON COUNTY HOSPITAL DIANE NEWMAN, ADMINISTRATOR		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					
VALENTINE (CHERRY) - 69201	Cherry County Hospital	P O BOX 410, 510 NORTH GREEN ST	HOSP-CAH	140001	281344	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 18 Total Lic Beds - 18	SWING BEDS
(402) 376-2525 FAX: (402) 376-1627	CHERRY COUNTY HOSPITAL		NONE				
	BRENT PETERSON, ADMINISTRATOR						
WAHOO (SAUNDERS) - 68066	Saunders Medical Center	1760 COUNTY RD J	HOSP-CAH	H000108	281307	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 16 Total Lic Beds - 16	SWING BEDS
(402) 443-4191 FAX: (402) 443-1433	SAUNDERS MEDICAL CENTER		NONE				
	TYLER TOLINE, CEO						
WAYNE (WAYNE) - 68787	Providence Medical Center	1200 PROVIDENCE RD	HOSP-CAH	800001	281345	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 375-3800 FAX: (402) 375-7989	PROVIDENCE MEDICAL CENTER, INC.		NONE				
	JAMES FRANK, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: WAKEFIELD PHYSICAL THERAPY - 308 ASH ST, WAKEFIELD							
BRANCH/EXTENSION/OFFSITE: LAUREL PHYSICAL THERAPY - 699 CEDAR AVENUE, LAUREL							
WEST POINT (CUMING) - 68788	St. Francis Memorial Hospital	430 NORTH MONITOR ST	HOSP-CAH	180001	281322	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 372-2404 FAX: (402) 372-2360	FRANCISCAN CARE SERVICES, INC.		NONE				
	JERRY WORDEKEMPER, ADMINISTRATOR						
BRANCH/EXTENSION/OFFSITE: ST. FRANCIS REHABILITATION - 2100 21ST CR, STE B, WISNER							
YORK (YORK) - 68467	York General Health Care Services	2222 LINCOLN AVE	HOSP-CAH	820002	281336	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 25 Total Lic Beds - 25	SWING BEDS
(402) 362-6671 FAX: (402) 362-0499	YORK GENERAL HEALTH CARE SERVICES		NONE				
	JAMES ULRICH, JR, CEO						
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							

Total Facilities: 107