

STATE OF NEBRASKA

ROSTER

LONG TERM CARE FACILITIES



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

Long Term Care licenses expire March 31st each year

NEBRASKA NURSING HOMES/LONG TERM CARE FACILITIES

	Licensed Facilities	Licensed Beds
NURSING FACILITY (LIC)	1	72
SKILLED NURSING FACILITY (LIC)	8	604
NURSING FACILITY (19)	12	668
SKILLED NURSING FACILITY (18)	1	42
SKILLED NSG/NSG FAC DISTINCT PART	10	1,156
SNF/NF DUAL CERT	172	12,930
	204	15,472

SPECIAL CARE UNIT

Alzheimer	19
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LEGEND

S/NF DP LTC	Long Term Care Hospital / Distinct Part
SNF/NF LTCH	Long Term Care Hospital / Dual
SNF LIC LTC	Long Term Care Hospital / License Only
NF LTCH	Long Term Care Hospital / Nursing Facility
SNF LTCH	Long Term Care Hospital / Skilled Nursing Facility
NF	Nursing Facility (19) - Medicaid Certified
NF LIC	Nursing Facility / License Only
SNF/ICF	Skilled Nursing Facility / Intermediate Care Facility
S/NF DP	Skilled Nursing Facility / Distinct Part - Medicare/Medicaid Distinct Part
SNF-LIC	Skilled Nursing Facility / License Only
SNF/NF	Skilled Nursing Facility / Nursing Facility - ALL BEDS Medicare/Medicaid Certified
18	Medicare Certified
19	Medicaid Certified
LIC	License Only

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

Updated: 5/14/2021

TOWN (County) Zip Code	Name of Facility	Fac Type	No. and Type of Beds	Services
Address	Phone Number	Provider ID		
Licensee Administration	License No	Accreditation		
ADAMS (GAGE) - 68301	Gold Crest Retirement Center	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 52 ICF - 0 Total Lic Beds - 52	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
200 LEVI LANE (402) 988-7115 FAX: (402) 988-2087	COFFMAN-LEVI CHARITABLE TRUST, INC JEFF FRITZEN, ADMINISTRATOR MICHELLE DENKER, Director of Nursing	285065 324001		
AINSWORTH (BROWN) - 69210	Sandhills Care Center	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 46 ICF - 0 Total Lic Beds - 46	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
143 N FULLERTON STREET (402) 387-1294 FAX: (402) 382-3536	AINSWORTH BROWN COUNTY CARE CENTER PENNY JACOBS, ADMINISTRATOR DAWN CRAWFORD, Director of Nursing	285298 NH0027		
ALBION (BOONE) - 68620	Good Samaritan Society - Albion	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 60 ICF - 0 Total Lic Beds - 60	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
1222 SOUTH 7TH STREET P O BOX 271 (402) 395-5050 FAX: (402) 395-2303	THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY KAREN GLESINGER, ADMINISTRATOR JESSICA DONNER, Director of Nursing	285197 034001		
ALLIANCE (BOX BUTTE) - 69301	Highland Park Care Center	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 60 ICF - 0 Total Lic Beds - 60	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
1633 SWEETWATER P O BOX 950 (308) 762-2525 FAX: (308) 762-2528	VSL ALLIANCE, LLC ALICE SMITH, ADMINISTRATOR SUE RICE, Director of Nursing	285063 044002		
ALMA (HARLAN) - 68920	Good Samaritan Society - Colonial Villa	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 53 ICF - 0 Total Lic Beds - 53	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
719 NORTH BROWN STREET (308) 928-2128 FAX: (308) 928-2012	THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY DAN STAUFFER, ADMINISTRATOR RAMONA COFFEY, Director of Nursing	285185 394001		

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ARAPAHOE (FURNAS) - 68922	Good Samaritan Society - Arapahoe	601 MAIN STREET P O BOX 448	(308) 962-5230 FAX: (308) 962-5276	DIXIE JACKSON, ADMINISTRATOR JUDY PARVIN, Director of Nursing	SNF/NF	285175	314001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 30 ICF - 0 Total Lic Beds - 30	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
ASHLAND (SAUNDERS) - 68003	Azria Health Ashland	1700 FURNAS STREET	(402) 944-7031 FAX: (402) 944-3674	STEPHANIE CLIFTON, ADMINISTRATOR TERRI POPE-WOOD, Director of Nursing c/o: AZRIA HEALTH ASHLAND AZRIA HEALTH ASHLAND, 702 S HIGHWAY 6, GRETNA NE 68028	SNF/NF	285140	694001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 97 ICF - 0 Total Lic Beds - 97	ALZHEIMER UNIT BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
ATKINSON (HOLT) - 68713	Good Samaritan Society - Atkinson	409 NEELY STREET	(402) 925-2875 FAX: (402) 925-2450	JESSICA EBY, ADMINISTRATOR JODY FREDRICKSON, Director of Nursing	SNF/NF	285177	414001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 61 ICF - 0 Total Lic Beds - 61	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
AUBURN (NEMAHA) - 68305	Good Samaritan Society - Auburn	1322 U STREET	(402) 274-4954 FAX: (402) 274-4424	CASSANDRA GREENE, ADMINISTRATOR TAMMY BURSOVSKY, Director of Nursing	SNF/NF	285112	564001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 102 ICF - 0 Total Lic Beds - 102	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
AURORA (HAMILTON) - 68818	Memorial Community Care	1423 SEVENTH STREET	(402) 694-8230 FAX: (402) 694-5024	DIANE KELLER, ADMINISTRATOR CHRISTINA BUCKHALTER, Director of Nursing	NF LTCH	28E191	LTCH001		Medicare - 0 Medicaid - 48 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 48	

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AURORA (HAMILTON) - 68818	Westfield Quality Care of Aurora	1313 1ST STREET PO BOX 166	(402) 694-2128 FAX: (402) 694-6366	QUALITY CARE SOLUTIONS, LLC CHRISTOPHER YOUNG, ADMINISTRATOR JENNIFER KORN, Director of Nursing	SNF/NF	285263	NH0031		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BASSETT (ROCK) - 68714	Rock County Hospital Long Term Care	100 EAST SOUTH STREET	(402) 684-2991 FAX: (402) 684-3825	ROCK COUNTY STACEY KNOX, ADMINISTRATOR DAWN WALDNER, Director of Nursing	SNF/NF LTCH	285304	NH0035		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 30 ICF - 0 Total Lic Beds - 30	
BATTLE CREEK (MADISON) - 68715	Community Pride Care Center	901 SOUTH 4TH STREET	(402) 675-7845 FAX: (402) 675-1003	CITY OF BATTLE CREEK STEVEN FREESE, ADMINISTRATOR DONNA TAYLOR, Director of Nursing	SNF/NF	285208	524001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 50 ICF - 0 Total Lic Beds - 50	
BAYARD (MORRILL) - 69334	Chimney Rock Villa	106 EAST 13TH STREET P O BOX A	(308) 586-1142 FAX: (308) 586-2113	CITY OF BAYARD KIMBERLY BURRY, ADMINISTRATOR CASEY SHARP, Director of Nursing	SNF/NF	285260	544001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 49 ICF - 0 Total Lic Beds - 49	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BEATRICE (GAGE) - 68310	Beatrice Health and Rehabilitation	1800 IRVING STREET	(402) 223-2311 FAX: (402) 228-1601	MONROE HEALTHCARE, INC SPENCER MORRIS, ADMINISTRATOR KATHRINE RIETH, Director of Nursing	S/NF DP	285130	324003		Medicare - 14 Medicaid - 0 Medicare/Medicaid - 73 ICF - 0 Total Lic Beds - 87	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

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BEATRICE (GAGE) - 68310	Good Samaritan Society - Beatrice	401 S 22ND STREET	(402) 228-3304 FAX: (402) 223-5220	CORRENE ADAMS, ADMINISTRATOR CERICE CORNELIUS, Director of Nursing	SNF/NF	285203	NH0015		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 80 ICF - 0 Total Lic Beds - 80	ALZHEIMERS/SPECIAL CAI
BEAVER CITY (FURNAS) - 68926	Beaver City Manor	905 FLOYD STREET P O BOX 70	(308) 268-5111 FAX: (308) 268-6006	ANGELA WOODRING, PROVISIONAL ADM SARA LENTZ, Director of Nursing	SNF/NF	285269	314002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 30 ICF - 0 Total Lic Beds - 30	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BEEMER (CUMING) - 68716	Colonial Haven	424 HARRISON	(402) 528-3268 FAX: (402) 528-3410	CHRISTEN SOBRILSKY, ADMINISTRATOR MEGAN NIEWOHNER, Director of Nursing	SNF/NF	285204	184001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 34 ICF - 0 Total Lic Beds - 34	OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
BELLEVUE (SARPY) - 68123	Eastern Nebraska Veterans Home	12505 SOUTH 40TH STREET	(402) 595-2180 FAX: (402) 591-4943	MATTHEW BAUMAN, PROVISIONAL ADM JEFFREY MARTIN, Director of Nursing	SNF-LIC		NH0005		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 120	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BELLEVUE (SARPY) - 68005	Hillcrest Health & Rehab	1702 HILLCREST DRIVE	(402) 291-8500 FAX: (402) 682-4255	TAMMY WESTON, ADMINISTRATOR KIM NICHOLS, Director of Nursing	S/NF DP	285133	684001		Medicare - 85 Medicaid - 0 Medicare/Medicaid - 66 ICF - 0 Total Lic Beds - 151	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
		1902 HARLAN DRIVE, SUITE A, BELLEVUE NE	68005							

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
BENKELMAN (DUNDY) - 69021	Sarah Ann Hester Memorial Home	407 DAKOTA STREET P O BOX 646	(308) 423-2179 FAX: (308) 423-2107	JANICE EDWARDS, ADMINISTRATOR SHELLIE CARROLL, Director of Nursing	SNF/NF	285241	274001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 56 ICF - 0 Total Lic Beds - 56	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BERTRAND (PHELPS) - 68927	Bertrand Nursing Home	100 MINOR AVENUE PO BOX 97	(308) 472-3341 FAX: (308) 472-5356	AMY GRUBE, ADMINISTRATOR TERESA STADLER, Director of Nursing	SNF/NF	285258	614001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 26 ICF - 0 Total Lic Beds - 26	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BLAIR (WASHINGTON) - 68008	Crowell Memorial Home	245 SOUTH 22ND STREET	(402) 426-2177 FAX: (402) 426-2577	JACLYN SVENDGARD, ADMINISTRATOR SHAURICE MCKEE, Director of Nursing	SNF/NF	285210	794001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 74 ICF - 0 Total Lic Beds - 74	
BLAIR (WASHINGTON) - 68008	Good Shepherd Lutheran Home	2242 WRIGHT STREET	(402) 426-4663 FAX: (402) 426-1988	SHARON COLLING, ADMINISTRATOR MARY POWELL, Director of Nursing	SNF/NF	285148	794002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 84 ICF - 0 Total Lic Beds - 84	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
BLOOMFIELD (KNOX) - 68718	Good Samaritan Society - Bloomfield	300 NORTH SECOND ST P O BOX 307	(402) 373-2531 FAX: (402) 373-4806	KAY VANNESS, ADMINISTRATOR KANDICE SEIP, Director of Nursing	SNF/NF	285156	494001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 ICF - 0 Total Lic Beds - 70	OCCUPATIONAL THERAPY PEDIATRIC PHYSICAL THERAPY SPEECH THERAPY

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	Phone Number		Provider ID		
	Licensee		License No		
	Administration		Accreditation		
BLUE HILL (WEBSTER) - 68930			SNF/NF	Medicare - 0	OCCUPATIONAL THERAPY
BCP Blue Hill, LLC			285144	Medicaid - 0	PHYSICAL THERAPY
414 NORTH WILLSON			814001	Medicare/Medicaid - 62	SPEECH THERAPY
(402) 756-2080 FAX: (402) 756-2079				ICF - 0	
BCP BLUE HILL, LLC				Total Lic Beds - 62	
IVA PRINSEN, ADMINISTRATOR					
LESLIE EISENMANN, Director of Nursing					
c/o: BCP BLUE HILL, LLC 702 S HIGHWAY 6, GRETNA NE 68028					
BRIDGEPORT (MORRILL) - 69336			SNF/NF	Medicare - 0	OCCUPATIONAL THERAPY
Skyview Care and Rehab at Bridgeport			285224	Medicaid - 0	PHYSICAL THERAPY
505 O STREET			544002	Medicare/Medicaid - 48	SPEECH THERAPY
(308) 262-0725 FAX: (308) 262-0470				ICF - 0	
SENEX FOUNDATION OF NEBRASKA, INC				Total Lic Beds - 48	
RONALD STAVELY, ADMINISTRATOR					
LAUREN ESQUIVEL, Director of Nursing					
BROKEN BOW (CUSTER) - 68822			SNF/NF LTCH	Medicare - 0	OCCUPATIONAL THERAPY
Brookestone View			285297	Medicaid - 0	PHYSICAL THERAPY
850 LAUREL PARKWAY DRIVE			NH0022	Medicare/Medicaid - 60	SPEECH THERAPY
(308) 767-2300 FAX: (308) 767-2080				ICF - 0	
VSL BROKEN BOW, LLC				Total Lic Beds - 60	
MADISON GUTHRIE, ADMINISTRATOR					
CHRISTINA FURROW, Director of Nursing					
BURWELL (GARFIELD) - 68823			SNF/NF LTCH	Medicare - 0	ALZHEIMERS/SPECIAL CAI
Community Memorial Health Center			285257	Medicaid - 0	BEHAVIORAL NEEDS
1015 F STREET P O BOX 340			NH0036	Medicare/Medicaid - 64	OCCUPATIONAL THERAPY
(308) 346-4440 FAX: (308) 346-5184				ICF - 0	PHYSICAL THERAPY
COMMUNITY MEMORIAL HOSPITAL, INC.				Total Lic Beds - 64	
KALLY CLOETER, ADMINISTRATOR					
JANELLE SCHLENGER, Director of Nursing					
BUTTE (BOYD) - 68722			SNF/NF	Medicare - 0	OCCUPATIONAL THERAPY
Butte Senior Living			285180	Medicaid - 0	PHYSICAL THERAPY
210 BROADWAY			054001	Medicare/Medicaid - 40	SPEECH THERAPY
(402) 775-2355 FAX: (402) 775-2332				ICF - 0	
TEALWOOD CARE CENTERS				Total Lic Beds - 40	
TAMMY BOETTCHER, ADMINISTRATOR					
STEPHANIE BUNNER, Director of Nursing					

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Phone Number	Provider ID				
Licensee	License No				
Administration	Accreditation				
CALLAWAY (CUSTER) - 68825	SNF/NF			Medicare - 0	OCCUPATIONAL THERAPY
Callaway Good Life Center, Inc	285200			Medicaid - 0	PHYSICAL THERAPY
600 WEST KIMBALL STREET PO BOX 250	104002			Medicare/Medicaid - 35	SPEECH THERAPY
(308) 836-2267 FAX: (308) 836-2269				ICF - 0	
CALLAWAY GOOD LIFE CENTER, INC				Total Lic Beds - 35	
VICKY HENDRICKS, ADMINISTRATOR					
BROOKE MOORE, Director of Nursing					
CENTRAL CITY (MERRICK) - 68826	SNF/NF			Medicare - 0	ALZHEIMER UNIT
Azria Health Central City	285147			Medicaid - 0	BEHAVIORAL NEEDS
2720 SOUTH 17TH AVENUE	534001			Medicare/Medicaid - 63	OCCUPATIONAL THERAPY
(308) 946-3088 FAX: (308) 946-2068				ICF - 0	PHYSICAL THERAPY
BCP CENTRAL CITY, LLC				Total Lic Beds - 64	SPEECH THERAPY
KATHERINE KLINGSPORN, ADMINISTRATOR					
DAWN DANKERT, Director of Nursing					
c/o: AZRIA HEALTH CENTRAL CITY , 702 S HIGHWAY 6, GRETNA NE 68028					
CENTRAL CITY (MERRICK) - 68826	SNF/NF LTCH			Medicare - 0	
Litzenberg Memorial County Hospital	285292			Medicaid - 0	
1715 26TH STREET	LTCH006			Medicare/Medicaid - 46	
(308) 946-3015 FAX: (308) 946-5914				ICF - 0	
LITZENBERG MEMORIAL MERRICK COUNTY				Total Lic Beds - 46	
EMILY TRIPLETT, ADMINISTRATOR					
SALLY BERNEY, Director of Nursing					
CHADRON (DAWES) - 69337	SNF/NF			Medicare - 0	OCCUPATIONAL THERAPY
Crest View Care Center	285150			Medicaid - 0	PHYSICAL THERAPY
420 GORDON AVENUE	214001			Medicare/Medicaid - 70	SPEECH THERAPY
(308) 432-3355 FAX: (308) 432-4535				ICF - 0	
KISMET CDR, LLC				Total Lic Beds - 70	
HEATHER SALMON, ADMINISTRATOR					
PATRICK MEDELMAN, Director of Nursing					
CLARKSON (COLFAX) - 68629	SNF/NF			Medicare - 0	OCCUPATIONAL THERAPY
Clarkson Community Care Center	285116			Medicaid - 0	PHYSICAL THERAPY
212 SUNRISE DRIVE	174001			Medicare/Medicaid - 51	SPEECH THERAPY
(402) 892-3494 FAX: (402) 892-3290				ICF - 0	
CITY OF CLARKSON				Total Lic Beds - 52	
HEATHER EAGLE, ADMINISTRATOR					
HOLLY REARDON, Director of Nursing					

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COLERIDGE (CEDAR) - 68727	Park View Haven Nursing Home	309 NORTH MADISON STREET	(402) 283-4224	FAX: (402) 283-4221 VILLAGE TRUSTEES OF COLERIDGE NANCY MOSEL, PROVISIONAL ADM KURTIS HOEFLING, Director of Nursing	SNF/NF	285073	124001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 34 ICF - 0 Total Lic Beds - 34	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
COLUMBUS (PLATTE) - 68601	Brookestone Acres	4715 38TH STREET	(402) 942-9260	FAX: (402) 942-9297 VSL COLUMBUS, LLC NICOLE WOZNICK, ADMINISTRATOR CATHERINE GALL, Director of Nursing	SNF/NF	285291	NH0018		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 80 ICF - 0 Total Lic Beds - 80	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
COLUMBUS (PLATTE) - 68602	Emerald Nursing & Rehab Columbus	2855 40TH AVENUE P O BOX 625	(402) 564-8014	FAX: (402) 564-0885 COLUMBUS OPERATIONS LLC CHELSEY ROAN, ADMINISTRATOR KATIE KRUSE, Director of Nursing	SNF/NF	285092	634001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 145 ICF - 0 Total Lic Beds - 145	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
COZAD (DAWSON) - 69130	Emerald Nursing & Rehab Cozad	318 WEST 18TH STREET	(308) 784-3715	FAX: (308) 784-3746 COZAD OPERATIONS LLC KILEY GOFF, ADMINISTRATOR KRISTIN HENGGELER, Director of Nursing	SNF/NF	285093	224001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 67 ICF - 0 Total Lic Beds - 67	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
CRAWFORD (DAWES) - 69339	Ponderosa Villa	FIRST & PADDOCK STREET P O BOX 526	(308) 665-1224	FAX: (308) 665-2450 CITY OF CRAWFORD LORA SULLIVAN, ADMINISTRATOR TRACI HARRISON, Director of Nursing	SNF/NF	285250	214002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 35 ICF - 0 Total Lic Beds - 35	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

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CREIGHTON (KNOX) - 68729	Avera Creighton Care Centre	1603 MAIN STREET P O BOX 289	(402) 358-5701 FAX: (402) 358-5365	TODD CONSRUCK, PROVISIONAL ADM TANYA CURTIS, Director of Nursing	SNF/NF LTCH	285284	LTCH008	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 47 ICF - 0 Total Lic Beds - 47	
CRETE (SALINE) - 68333	Tabitha Nursing Center at Crete	1800 EAST 13TH STREET	(402) 826-6800 FAX: (402) 826-6894	TABITHA INC. SHERRI DUE, ADMINISTRATOR MICHELLE HUNTER, Director of Nursing c/o: TABITHA, INC. ATTENTION: CFO, 4720 RANDOLPH STREET, LINCOLN NE 68510	SNF/NF	285283	NH0024	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 48 ICF - 0 Total Lic Beds - 48	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
DAVID CITY (BUTLER) - 68632	David Place	260 SOUTH 10TH STREET	(402) 367-3144 FAX: (402) 367-4246	VSL DAVID CITY, LLC BARBARA ALDRICH, ADMINISTRATOR TRUDY SVOBODA, Director of Nursing	SNF/NF	285074	094001	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 86 ICF - 0 Total Lic Beds - 86	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
DAVID CITY (BUTLER) - 68632	St. Joseph's Villa, Inc.	927 SEVENTH STREET	(402) 367-3045 FAX: (402) 367-3730	ST. JOSEPH'S VILLA, INC. TRISHA STEAGER, PROVISIONAL ADM CHRISTINA VACH, Director of Nursing	SNF/NF	285249	094002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 58 ICF - 0 Total Lic Beds - 58	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
DESHLER (THAYER) - 68340	Parkview Haven Nursing Home	1203 4TH STREET P O BOX 667	(402) 365-7237 FAX: (402) 365-7737	CITY OF DESHLER MIRANDA ISERNHAGEN, ADMINISTRATOR TIFFANY FINKE, Director of Nursing	SNF/NF	285261	764001	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 49 ICF - 0 Total Lic Beds - 49	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

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DODGE (DODGE) - 68633	Parkview Home, Inc	930 2ND STREET	(402) 693-2212 FAX: (402) 693-2496	CANDACE GIBSON, ADMINISTRATOR DANIEL BIRCHEM, Director of Nursing	SNF/NF	285243	254001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 62 ICF - 0 Total Lic Beds - 64	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
ELKHORN (DOUGLAS) - 68022	Brookestone Meadows Rehabilitation And Care Center	600 BROOKESTONE MEADOWS PLAZA	(402) 289-2696 FAX: (402) 289-1090	JOHN TURNER, ADMINISTRATOR DAWN TRUCKENBROD, Director of Nursing c/o: BROOKESTONE MEADOWS C/O VETTER HOLDING INC, 5020 S 118TH ST, OMAHA NE 68135	SNF/NF	285276	NH0006		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 140 ICF - 0 Total Lic Beds - 140	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
ELKHORN (DOUGLAS) - 68022	Life Care Center of Elkhorn	20275 HOPPER STREET	(402) 289-2572 FAX: (402) 289-0925	MICHELLE YOSICK, ADMINISTRATOR KAYLEE MAGILL, Director of Nursing	SNF/NF	285134	264001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 135 ICF - 0 Total Lic Beds - 135	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
ELWOOD (GOSPER) - 68937	Elwood Care Center	607 SMITH AVENUE P O BOX 315	(308) 785-3302 FAX: (308) 785-3193	KATE REINERS, ADMINISTRATOR LACEY BOWDEN, Director of Nursing	SNF/NF	285215	354001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 43 ICF - 0 Total Lic Beds - 47	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
EMERSON (DAKOTA) - 68733	Heritage of Emerson	607 NEBRASKA STREET	(402) 695-2683 FAX: (402) 695-2188	SHELLEE HUGGENBERGER, ADMINISTRATOR FRANCESCA PICKERING, Director of Nursing	SNF/NF	285222	204001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 38 ICF - 0 Total Lic Beds - 38	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
FAIRBURY (JEFFERSON) - 68352	Heritage Care Center	909 17TH STREET P O BOX 667	(402) 729-2289 FAX: (402) 729-5233	VSL FAIRBURY, LLC SARAH WATSON, ADMINISTRATOR MARTINA SLOANE, Director of Nursing	SNF/NF	285262	444001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 100 ICF - 0 Total Lic Beds - 100	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
FAIRBURY (JEFFERSON) - 68352	Jefferson Community Health & Life Gardenside	2200 NORTH H STREET P O BOX 277	(402) 729-5220 FAX: (402) 729-2102	JEFFERSON COMMUNITY HEALTH CENTER INC DEBRA SUTTON, ADMINISTRATOR LAURA DEBOER, Director of Nursing	SNF/NF LTCH	285282	LTCH010		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 39 ICF - 0 Total Lic Beds - 40	
FAIRMONT (FILLMORE) - 68354	Fairview Manor	255 F STREET	(402) 268-2271 FAX: (402) 268-3901	VILLAGE OF FAIRMONT TAMARA SCHEIL, ADMINISTRATOR MAEGAN NUSS, Director of Nursing	SNF/NF	285206	284002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 40 ICF - 0 Total Lic Beds - 40	
FALLS CITY (RICHARDSON) - 68355	Falls City Care Center	2800 TOWLE STREET	(402) 245-5252 FAX: (402) 245-2592	KISMET FNB, LLC VALERIE BUCKMINSTER, ADMINISTRATOR TAYLOR FENIMORE, Director of Nursing	SNF/NF	285114	664001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 101 ICF - 0 Total Lic Beds - 119	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
FALLS CITY (RICHARDSON) - 68355	Falls City Nursing and Rehabilitation Center	1720 BURTON DRIVE	(402) 245-4466 FAX: (402) 245-4418	STANTON LAKE HEALTHCARE, INC ERIC MARTINEZ, ADMINISTRATOR HEAVENLEE BROWN, Director of Nursing	SNF/NF	285055	664002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 63 ICF - 0 Total Lic Beds - 65	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
FRANKLIN (FRANKLIN) - 68939	Arbor Care Centers-Franklin LLC	1006 M STREET	(308) 425-6262	FAX: (308) 425-8589 ARBOR CARE CENTERS-FRANKLIN LLC ALAN KENNEDY, ADMINISTRATOR AMANDA LIENEMANN, Director of Nursing	SNF/NF	285096	294002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 42 ICF - 0 Total Lic Beds - 42	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
FREMONT (DODGE) - 68025	Dunklau Gardens	450 EAST 23RD STREET	(402) 721-1610	FAX: (402) 727-3656 METHODIST FREMONT HEALTH RACHEL REIMAN, ADMINISTRATOR JAYMA BROWN, Director of Nursing	SNF/NF LTCH	285119	LTCH037		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 106 ICF - 0 Total Lic Beds - 106	
FREMONT (DODGE) - 68025	Nye Legacy Health & Rehabilitation Center	3210 N CLARKSON	(402) 721-9300	FAX: (402) 753-4800 FREMONT CARE CENTER, INC. D. KIRK SWEENEY, ADMINISTRATOR YASMINE KAISER, Director of Nursing c/o: NYE LEGACY HEALTH & REHABILITATION CENTER C/O FREMONT CARE CENTER INC, 2230 N SOMERS, FREMONT NE 68025	SNF/NF	285278	NH0008		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 100 ICF - 0 Total Lic Beds - 100	OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
FREMONT (DODGE) - 68025	Nye Pointe Health & Rehab Ctr	2700 LAVERNA STREET	(402) 727-4900	FAX: (402) 727-8163 FREMONT CARE CENTER, INC. D. KIRK SWEENEY, ADMINISTRATOR CRISTA FISCHER, Director of Nursing	SNF/NF	285235	254003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 43 ICF - 0 Total Lic Beds - 43	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
FULLERTON (NANCE) - 68638	Arbor Care Centers-Fullerton LLC	202 NORTH ESTHER PO BOX 648	(308) 536-2488	FAX: (308) 536-4134 ARBOR CARE CENTERS-FULLERTON LLC JANNELLE HELLBUSCH, PROVISIONAL ADM ALYSON PELAN, Director of Nursing	SNF/NF	285115	554001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 75 ICF - 0 Total Lic Beds - 75	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
GENEVA (FILLMORE) - 68361	Heritage Crossings	501 NORTH 13TH STREET	(402) 759-3194 FAX: (402) 759-3140	VSL GENEVA, LLC LAURA LEA, ADMINISTRATOR SHARON LAMBRECHT, Director of Nursing	SNF/NF	285230	284003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 68 ICF - 0 Total Lic Beds - 68	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
GENOA (NANCE) - 68640	Genoa Community Hospital/LTC	606/706 EWING AVENUE P O BOX 310	(402) 993-2283 FAX: (402) 993-2373	CITY OF GENOA AMANDA ROEBUCK, ADMINISTRATOR FAITH WEAVER, Director of Nursing	NF	28E271	554002		Medicare - 0 Medicaid - 39 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 39	ALZHEIMERS/SPECIAL CAI BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
GERING (SCOTTS BLUFF) - 69341	Heritage Estates	2325 LODGE DRIVE	(308) 436-5007 FAX: (308) 436-5920	VSL GERING, LLC CORY MORRIS, ADMINISTRATOR JENNIFER LUJAN, Director of Nursing	SNF/NF	285071	NH0002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 102 ICF - 0 Total Lic Beds - 102	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
GORDON (SHERIDAN) - 69343	Gordon Countryside Care	500 EAST 10TH STREET	(308) 282-0806 FAX: (308) 282-0251	GORDON MEMORIAL HOSPITAL DISTRICT STEPHANIE HUFFMAN, ADMINISTRATOR SHARON ALEXANDER, Director of Nursing	NF	28E257	734001		Medicare - 0 Medicaid - 40 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 40	
GOTHENBURG (DAWSON) - 69138	Hilltop Estates	2520 AVENUE M P O BOX 429	(308) 537-7138 FAX: (308) 537-7130	K. C. HEALTH CARE ENTERPRISES, INC. SCOTT BAHE, ADMINISTRATOR NICOLE GAONA, Director of Nursing	SNF/NF	285163	224002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No Accreditation	No. and Type of Beds	Services
GRANT (PERKINS) - 69140	Golden Ours Convalescent Home	902 CENTRAL AVENUE	(308) 352-7200 FAX: (308) 352-7291	PERKINS COUNTY HOSPITAL DISTRICT SHAUN MEYER, ADMINISTRATOR JOLENE LOBNER, Director of Nursing	NF LTCH	28E199	LTCH015	Medicare - 0 Medicaid - 50 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 50	
GREELEY (GREELEY) - 68842	Greeley Care Home	201 E O'CONNOR AVENUE	(308) 428-5145 FAX: (308) 428-2013	VILLAGE OF GREELEY DORENE SPIES, ADMINISTRATOR JULIE CARRAHER, Director of Nursing	SNF/NF	285286	364001	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 26 ICF - 0 Total Lic Beds - 26	OCCUPATIONAL THERAPY PHYSICAL THERAPY
GRETNA (SARPY) - 68028	Azria Health Gretna	700 HIGHWAY 6	(402) 332-3446 FAX: (402) 332-4645	BCP GRETNA, LLC LORETTA ALLEN, ADMINISTRATOR NICOLE MOORE, Director of Nursing c/o: AZRIA HEALTH GRETNA , 702 S HIGHWAY 6, GRETNA NE 68028	SNF/NF	285146	684002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 63 ICF - 0 Total Lic Beds - 63	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HARTINGTON (CEDAR) - 68739	Arbor Care Centers-Hartington LLC	401 DARLENE STREET PO BOX 107	(402) 254-3905 FAX: (402) 254-3963	ARBOR CARE CENTERS-HARTINGTON LLC LINDSAY HUTCHINSON, ADMINISTRATOR HEATHER BRUMMER, Director of Nursing	SNF/NF	285088	124002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 47 ICF - 0 Total Lic Beds - 47	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HARVARD (CLAY) - 68944	Harvard Rest Haven	400 EAST 7TH STREET	(402) 772-7591 FAX: (402) 772-7111	CITY OF HARVARD KRISTI SEDERSTEN, PROVISIONAL ADM BEATRIZ LEDEZMA, Director of Nursing	SNF/NF	285272	164002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 37 ICF - 0 Total Lic Beds - 37	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
HASTINGS (ADAMS) - 68901	Good Samaritan Society - Hastings Village	926 EAST E STREET	(402) 463-3181 FAX: (402) 463-3740	DORIN VAIPAN, ADMINISTRATOR CHERYL CHRISTENSON, Director of Nursing	SNF/NF	285072	014001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 175 ICF - 0 Total Lic Beds - 175	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HAY SPRINGS (SHERIDAN) - 69347	Pioneer Manor Nursing Home	318 N 3RD STREET P O BOX 310	(308) 638-4483 FAX: (308) 638-7385	KRYSTYN TURMAN, PROVISIONAL ADM MICHELLE REITZ, Director of Nursing	SNF/NF	285212	734002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 57 ICF - 0 Total Lic Beds - 57	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HEBRON (THAYER) - 68370	Blue Valley Lutheran Nursing Home	220 PARK AVENUE P O BOX 166	(402) 768-3900 FAX: (402) 768-3901	DOUG CHOS, ADMINISTRATOR REBEKAH PETRAS, Director of Nursing	SNF/NF	285259	764002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HEMINGFORD (BOX BUTTE) - 69348	Hemingford Community Care Center	605 DONALD AVENUE P O BOX 307	(308) 487-3301 FAX: (308) 487-5447	CATHY SNYDER, ADMINISTRATOR JAE ANN BRADT, Director of Nursing	NF	28E301	044003		Medicare - 0 Medicaid - 36 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 36	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HENDERSON (YORK) - 68371	Legacy Square	1621 FRONT STREET	(402) 723-5301 FAX: (402) 723-4520	HENDERSON HEALTH CARE SERVICES, INC CHERYL BROWN, ADMINISTRATOR BARBARA CHELEWSKI, Director of Nursing	NF LTCH	28E173	LTCH017		Medicare - 0 Medicaid - 40 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 40	

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
HOLDREGE (PHELPS) - 68949	Christian Homes Health Care Center	1923 WEST 4TH AVENUE	(308) 995-4493 FAX: (308) 248-0033	CHRISTIAN HOMES, INC. CHERLYN HUNT, ADMINISTRATOR CINDY PETERSON, Director of Nursing	SNF/NF	285246	614002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 86 ICF - 0 Total Lic Beds - 86	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HOLDREGE (PHELPS) - 68949	Holdrege Memorial Homes, Inc	1320 11TH AVENUE	(308) 995-8631 FAX: (308) 995-8636	HOLDREGE MEMORIAL HOMES KEVIN MORIARTY, ADMINISTRATOR LINDA CARPENTER, Director of Nursing	SNF/NF	285067	614003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 94 ICF - 0 Total Lic Beds - 94	
HOOPER (DODGE) - 68031	Hooper Care Center	400 EAST BIRCHWOOD DRIVE	(402) 654-3362 FAX: (402) 654-2570	VSL HOOPER, LLC DIANE VILLWOK, ADMINISTRATOR JILL KLOKE, Director of Nursing	SNF/NF	285229	254004		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 48 ICF - 0 Total Lic Beds - 48	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
HUMBOLDT (RICHARDSON) - 68376	Colonial Acres Nursing Home	1043 10TH STREET	(402) 862-3123 FAX: (402) 862-2153	CITY OF HUMBOLDT SARAH WHEELER, ADMINISTRATOR ANGELA BYERS, Director of Nursing	SNF/NF	285248	664003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 49 ICF - 0 Total Lic Beds - 49	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
IMPERIAL (CHASE) - 69033	Imperial Manor Nursing Home	933 GRANT STREET P O BOX 757	(308) 882-5333 FAX: (308) 882-4699	CITY OF IMPERIAL ERIC HAIDER, ADMINISTRATOR MARJORIE HAIDER, Director of Nursing	SNF/NF	285252	134001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 58 ICF - 0 Total Lic Beds - 58	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
KEARNEY (BUFFALO) - 68845	Brookestone Gardens	2615 WEST 11TH STREET	(308) 236-0211 FAX: (308) 234-1707	VSL KEARNEY, LLC ANDREW FUSTON, ADMINISTRATOR DANIELLE SAMUELSON, Director of Nursing	SNF/NF	285305	NH0034		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 54 ICF - 0 Total Lic Beds - 54	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
KEARNEY (BUFFALO) - 68847	Central Nebraska Veterans Home	4510 EAST 56TH STREET	(308) 865-6000 FAX: (308) 742-1168	NEBRASKA DEPARTMENT OF VETERAN'S AFFAIRS VAIL OLESON, ADMINISTRATOR TERI PINION, Director of Nursing	SNF-LIC		NH0032		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 225	ALZHEIMERS/SPECIAL CAI
KEARNEY (BUFFALO) - 68847	Good Samaritan Society - St John's	3410 CENTRAL AVENUE	(308) 234-1888 FAX: (308) 236-7157	THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY SHAWN LEACH, PROVISIONAL ADM ASHLEY OURADA, Director of Nursing	SNF/NF	285189	074004		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 56 ICF - 0 Total Lic Beds - 56	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
KEARNEY (BUFFALO) - 68847	Good Samaritan Society - St Luke's Village	2201 EAST 32ND STREET	(308) 237-3108 FAX: (308) 237-3799	THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY SHAWN LEACH, ADMINISTRATOR MISTY OSBURN, Director of Nursing	SNF/NF	285192	074005		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 60 ICF - 0 Total Lic Beds - 60	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
KEARNEY (BUFFALO) - 68847	Mother Hull Home	125 EAST 23RD STREET	(308) 234-2447 FAX: (308) 234-6823	MOTHER HULL HOME INC STEPHANIE SIMMONS, ADMINISTRATOR KRISTINA ROBERTS, Director of Nursing	SNF/NF	285254	074002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 58 ICF - 0 Total Lic Beds - 58	

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
KEARNEY (BUFFALO) - 68845	Mt Carmel Home - Keens Memorial	412 WEST 18TH STREET	(308) 237-2287 FAX: (308) 237-7264	EMILY BIRDSLEY, ADMINISTRATOR KATHERINE JOHNSON, Director of Nursing	SNF/NF	285216	074003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 75 ICF - 0 Total Lic Beds - 75	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
KENESAW (ADAMS) - 68956	Premier Estates of Kenesaw, LLC	100 WEST ELM AVENUE P O BOX 10	(402) 752-3212 FAX: (402) 752-3174	KRISTIN ARROWSMITH-SKILES, ADMINISTRATOR WANDA PEREZ, Director of Nursing c/o: PREMIER ESTATES OF KENESAW, LLC TRILLIUM HEALTHCARE CONSULTING, 5115 EAST STATE RD 64, BRADENTON FL 34208	SNF/NF	285166	014003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 76 ICF - 0 Total Lic Beds - 76	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
KIMBALL (KIMBALL) - 69145	Kimball County Manor	810 EAST 7TH STREET	(308) 235-4693 FAX: (308) 235-2082	SHANNON MONHEISER, ADMINISTRATOR SARAH STULL, Director of Nursing	SNF/NF	285256	484001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 49 ICF - 0 Total Lic Beds - 49	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LAUREL (CEDAR) - 68745	Hillcrest Care Center	702 CEDAR AVENUE	(402) 256-3961 FAX: (402) 256-9522	RUTH SANDS-JERKE, ADMINISTRATOR KATE KVOLS, Director of Nursing	SNF/NF	285178	124003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 36 ICF - 0 Total Lic Beds - 36	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LEXINGTON (DAWSON) - 68850	Plum Creek Care Center	1505 NORTH ADAMS STREET	(308) 324-5531 FAX: (308) 324-5630	KISMET LXN, LLC PEGGY RATZLAFF, ADMINISTRATOR JUDY GARY, Director of Nursing	SNF/NF	285159	224003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 66 ICF - 0 Total Lic Beds - 66	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No Accreditation	No. and Type of Beds	Services
LINCOLN (LANCASTER) - 68516	Brookside Rehabilitation Center	4735 SOUTH 54TH STREET	(402) 488-0977 FAX: (402) 488-0133	HOMESTEAD SNF OPERATION LLC TAYLOR SCHOMMER, PROVISIONAL ADM ASHLEY NUSS, Director of Nursing	SNF/NF	285049	504006	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 173 ICF - 0 Total Lic Beds - 173	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68509	Diagnostic & Evaluation Center Hospital & Clinic	3220 WEST VAN DORN STREET	(402) 471-2861 FAX: (402) 479-6300	NEBRASKA DEPARTMENT OF CORRECTIONAL SERVICES CASSANDRA PUTNAM, ADMINISTRATOR TERESA ROYER, Director of Nursing c/o: DEPT OF CORRECTIONAL SERVICES, CASSANDRA PUTNAM DIAGNOSTIC & EVALUATION CENTER HOSPITAL & CLINIC, PO BOX 94661, LINCOLN NE 68509	SNF-LIC	NH0013		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 14	BEHAVIORAL NEEDS PHYSICAL THERAPY RESPIRATORY THERAPY
LINCOLN (LANCASTER) - 68510	Eastmont Towers	6315 O STREET	(402) 489-6591 FAX: (402) 484-4711	CHRISTIAN RETIREMENT HOMES BETH NELSEN, ADMINISTRATOR MERRIT BEUNING, Director of Nursing	SNF	285036	504003	Medicare - 20 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 42	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68504	Gateway Vista	225 NORTH 56TH STREET	(402) 464-6371 FAX: (402) 467-0299	GATEWAY PROPERTIES, INC. LARRY VAN HUNNIK, ADMINISTRATOR MICHELLE THOMPSON, Director of Nursing c/o: GATEWAY PROPERTIES, INC. 2230 NORTH SOMERS STREET, FREMONT NE 68025	SNF/NF	285266	504004	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 80 ICF - 0 Total Lic Beds - 80	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68520	Hillcrest Firethorn	8601 FIRETHORN LANE	(402) 682-6825 FAX: (531) 739-3501	HILLCREST FIRETHORN, LLC BARRY EMERSON, ADMINISTRATOR KRISTINA WATSON, Director of Nursing c/o: HILLCREST FIRETHORN 1902 HARLAN DRIVE, SUITE A, BELLEVUE NE 68005	SNF/NF	285300	NH0029	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 72 ICF - 0 Total Lic Beds - 72	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No Accreditation	No. and Type of Beds	Services
LINCOLN (LANCASTER) - 68506	Holmes Lake Rehabilitation & Care Center	6101 NORMAL BLVD	(402) 489-7175 FAX: (402) 489-5270	MID AMERICA CARE CENTERS, INC. LAVONNE HARROM, ADMINISTRATOR OLGA SOKOLOVA, Director of Nursing	SNF/NF	285164	504005	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 97 ICF - 0 Total Lic Beds - 97	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68502	Lancaster Rehabilitation Center	1001 SOUTH STREET	(402) 441-7101 FAX: (402) 441-3198	LANCASTER SNF OPERATIONS LLC JENNIFER GRAFF, ADMINISTRATOR SANDRA HOVIS, Director of Nursing c/o: LANCASTER REHABILITATION CENTER, LLC 2201 MAIN STREET, EVANSTON IL 60202	SNF/NF	285275	504007	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 293 ICF - 0 Total Lic Beds - 293	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68502	Nebraska State Penitentiary Hospital & Clinic	4201 SOUTH 14TH STREET	(402) 479-3440 FAX: (402) 479-3279	NEBRASKA DEPARTMENT OF CORRECTIONAL SERVICES CASSANDRA PUTNAM, ADMINISTRATOR TEENA LINGER, Director of Nursing c/o: DEPT OF CORRECTIONAL SERVICES, JOHN WILSON NEBRASKA STATE PENITENTIARY HOSPITAL & CLINIC, PO BOX 94661, LINCOLN NE 68509	SNF-LIC	NH0011		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 12	BEHAVIORAL NEEDS PHYSICAL THERAPY RESPIRATORY THERAPY
LINCOLN (LANCASTER) - 68512	Old Cheney Rehabilitation	5431 SOUTH 16TH STREET	(531) 739-3200 FAX: (531) 739-3299	SNF LINCOLN OPERATING COMPANY, LLC RENAE BRIGHT, PROVISIONAL ADM	SNF/NF	285299	NH0028	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 47 ICF - 0 Total Lic Beds - 47	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68526	Southlake Village Rehabilitation & Care Center	9401 ANDERMATT DRIVE	(402) 327-6300 FAX: (402) 476-6395	VSL LINCOLN SOUTHLAKE, LLC DAVID BERGMANN, ADMINISTRATOR JACQUELYN MCCALL, Director of Nursing	SNF/NF	285219	NH00011	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 126 ICF - 0 Total Lic Beds - 126	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	Provider ID	Licensee	License No	No. and Type of Beds	Services
Administration	Accreditation							
LINCOLN (LANCASTER) - 68506	S/NF DP LTC	St. Jane de Chantal 2200 SOUTH 52ND STREET (402) 413-3607 FAX: (402) 413-3620 MADONNA REHABILITATION HOSPITAL MELODY GAGNER, ADMINISTRATOR DONNA HANEY, Director of Nursing c/o: ATTN: PAUL A. DONGILLI MADONNA REHABILITATION HOSPITAL, 5401 SOUTH STREET, LINCOLN NE 68506	LTCH022				Medicare - 0 Medicaid - 30 Medicare/Medicaid - 96 ICF - 0 Total Lic Beds - 126	
LINCOLN (LANCASTER) - 68502	SNF/NF	Sumner Place 1750 SOUTH 20TH STREET (402) 475-6791 FAX: (402) 475-3792 VSL LINCOLN SUMNER, LLC EDWARD REMM, ADMINISTRATOR MINDY ZUHAIRI, Director of Nursing	504008				Medicare - 0 Medicaid - 0 Medicare/Medicaid - 104 ICF - 0 Total Lic Beds - 104	ALZHEIMERS/SPECIAL CARI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68516	SNF/NF	Tabitha At The Landing 6120 SOUTH 34TH STREET (402) 486-8919 FAX: (402) 328-9248 TABITHA INC. KELSIE RYAN, ADMINISTRATOR HEATHER JUREY, Director of Nursing	NH0014				Medicare - 0 Medicaid - 0 Medicare/Medicaid - 55 ICF - 0 Total Lic Beds - 55	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68510	SNF/NF	Tabitha Nursing Home 4720 RANDOLPH STREET (402) 483-7671 FAX: (402) 486-8518 TABITHA HEALTH CARE SERVICES TONYA NOACK, ADMINISTRATOR LORI PORTER, Director of Nursing	504009				Medicare - 0 Medicaid - 0 Medicare/Medicaid - 208 ICF - 0 Total Lic Beds - 208	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
LINCOLN (LANCASTER) - 68506	SNF/NF	The Ambassador Lincoln 4405 NORMAL BLVD (402) 488-2355 FAX: (402) 488-2779 THE AMBASSADOR LINCOLN, INC. BAKER STEINKUHLER, PROVISIONAL ADM TRACY KIRBY, Director of Nursing	504002				Medicare - 0 Medicaid - 0 Medicare/Medicaid - 122 ICF - 0 Total Lic Beds - 122	OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Fac Type	No. and Type of Beds	Services
Address	Phone Number	Provider ID		
Licensee Administration	License No	Accreditation		
LOUISVILLE (CASS) - 68037	Louisville Care Center	S/NF DP	Medicare - 6 Medicaid - 0 Medicare/Medicaid - 55 ICF - 0 Total Lic Beds - 61	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
410 WEST 5TH STREET (402) 234-2125 FAX: (402) 234-2431	285267 114001			
CITY OF LOUISVILLE/LOUISVILLE CARE CENTER KARI WOCKENFUSS, ADMINISTRATOR ANGELA BUGLEWICZ, Director of Nursing				
LOUP CITY (SHERMAN) - 68853	Rose Lane Home	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
RR 2 BOX 46, 1005 NORTH 8TH STREET (308) 745-0303 FAX: (308) 745-0253	285228 744001			
VSL LOUP CITY, LLC MATTHEW GIESELMAN, ADMINISTRATOR ANDREA OBERMILLER, Director of Nursing				
MACY (THURSTON) - 68039	Carl T Curtis Health Education Center Nursing Home	NF	Medicare - 0 Medicaid - 25 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 25	
100 INDIAN HILLS DRIVE PO BOX 250 (402) 837-5381 FAX: (402) 837-4216	28A065 774001			
OMAHA TRIBE OF NEBRASKA MIRIAM WALL, ADMINISTRATOR ANGELA CAMPBELL, Director of Nursing				
MADISON (MADISON) - 68748	Arbor Care Centers-Countryside LLC	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 ICF - 0 Total Lic Beds - 70	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
703 NORTH MAIN STREET (402) 454-3373 FAX: (402) 454-9021	285207 524002			
ARBOR CARE CENTERS-COUNTRYSIDE LLC LISA MCDERMED, ADMINISTRATOR ERIN PETERSON, Director of Nursing				
MCCOOK (RED WILLOW) - 69001	Hillcrest Nursing Home	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 100 ICF - 0 Total Lic Beds - 100	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
309 WEST 7TH STREET P O BOX 1087 (308) 345-4600 FAX: (308) 777-2012	285080 654001			
RED WILLOW COUNTY JAMES FOSTER, ADMINISTRATOR TAMMI SIMPSON, Director of Nursing				

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No Accreditation	No. and Type of Beds	Services
MILFORD (SEWARD) - 68405	Sunrise Country Manor	610 224TH STREET PO BOX A	(402) 761-3230 FAX: (402) 761-3283	SETH STAUFFER, ADMINISTRATOR KELSEY OBERMIRE, Director of Nursing	SNF/NF	285232	724002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 80 ICF - 0 Total Lic Beds - 80	
MINDEN (KEARNEY) - 68959	Bethany Home, Inc	515 WEST FIRST STREET	(308) 832-1594 FAX: (308) 832-0662	ROBERT TANK, ADMINISTRATOR CASSIE SCHMIDT, Director of Nursing	SNF/NF	285270	464002	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
MITCHELL (SCOTTS BLUFF) - 69357	Mitchell Care Center	1723 23RD STREET	(308) 623-1212 FAX: (308) 623-2052	STEPHANIE HAHN, ADMINISTRATOR CRYSTAL WICKHAM, Director of Nursing	SNF/NF	285287	704003	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 50 ICF - 0 Total Lic Beds - 50	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
MULLEN (HOOKER) - 69152	Pioneer Memorial Community Hospital Association	206 NW 4TH STREET P O BOX 578	(308) 546-2217 FAX: (308) 546-2300	NICOLE HOFFMANN, PROVISIONAL ADM JERRY COOPER, Director of Nursing	NF LTCH	28E175	LTCH024	Medicare - 0 Medicaid - 30 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 30	
NEBRASKA CITY (OTOE) - 68410	Prestige Care Center of Nebraska City	1420 NORTH 10TH STREET	(402) 873-3304 FAX: (402) 873-6307	CHASITY COOVER, ADMINISTRATOR MEGAN CORNELISON, Director of Nursing	SNF/NF	285109	584003	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 64 ICF - 0 Total Lic Beds - 64	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	Provider ID	License No	No. and Type of Beds	Services
Administration	Accreditation						
NEBRASKA CITY (OTOE) - 68410	SNF/NF					Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
The Ambassador Nebraska City, Inc	285126					Medicare/Medicaid - 71 ICF - 0	
1800 14TH AVENUE	584001					Total Lic Beds - 71	
(402) 873-6650 FAX: (402) 873-6621							
THE AMBASSADOR HOLDING COMPANY							
JESSICA CRUNK, ADMINISTRATOR							
TAMELA OSBORN, Director of Nursing							
NELIGH (ANTELOPE) - 68756	SNF/NF					Medicare - 0 Medicaid - 0	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
Arbor Care Centers-Neligh LLC	285124					Medicare/Medicaid - 70 ICF - 0	
1100 NORTH T STREET PO BOX 66	024001					Total Lic Beds - 70	
(402) 887-5428 FAX: (402) 887-4832							
ARBOR CARE CENTERS-NELIGH LLC							
STEPHANIE STUHR, PROVISIONAL ADM							
MEGAN ALLEMANG, Director of Nursing							
NEWMAN GROVE (MADISON) - 68758	SNF/NF					Medicare - 0 Medicaid - 0	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
Mid-Nebraska Lutheran Home	285213					Medicare/Medicaid - 45 ICF - 0	
109 NORTH 2ND STREET	524003					Total Lic Beds - 45	
(402) 447-6203 FAX: (402) 447-6244							
MID-NEBRASKA LUTHERAN HOME							
ANGELA CAUBARRUS, ADMINISTRATOR							
SHALYNNE HOHNHOLT, Director of Nursing							
NORFOLK (MADISON) - 68702	SNF/NF					Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
Heritage of Bel Air	285089					Medicare/Medicaid - 108 ICF - 0	
1203 NORTH 13TH STREET	524004					Total Lic Beds - 108	
(402) 371-4991 FAX: (402) 379-0044							
VSL NORFOLK							
KATIE FREDERICK, ADMINISTRATOR							
CRYSTAL DREDGE, Director of Nursing							
NORFOLK (MADISON) - 68701	SNF-LIC					Medicare - 0 Medicaid - 0	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
Norfolk Veterans Home						Medicare/Medicaid - 0 ICF - 0	
600 E BENJAMIN AVENUE	NH0001					Total Lic Beds - 159	
(402) 370-3330 FAX: (402) 370-3190							
NEBRASKA DEPARTMENT OF VETERAN'S AFFAIRS							
JERRY EISENHAEUER, ADMINISTRATOR							
LACEY MOELLER, Director of Nursing							

TOWN (County) Zip Code	Name of Facility	Fac Type	No. and Type of Beds	Services
Address	Phone Number	Provider ID		
Licensee Administration	License No	Accreditation		
NORFOLK (MADISON) - 68701	St. Joseph's Rehabilitation and Care Center	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 83 ICF - 0 Total Lic Beds - 83	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
401 NORTH 18TH STREET	(402) 644-7375 FAX: (402) 644-7384	285160 524007		
FAITH REGIONAL HEALTH SERVICES	RITA RAFFETY, ADMINISTRATOR			
JUDITH BRUMMET, Director of Nursing				
NORTH PLATTE (LINCOLN) - 69101	AZRIA HEALTH CENTENNIAL PARK	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 68 ICF - 0 Total Lic Beds - 68	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
510 CENTENNIAL CIRCLE	(308) 534-7000 FAX: (308) 534-8216	285094 514001		
CENTENNIAL NORTH PLATTE, LLC	WINSOME BACKER, ADMINISTRATOR			
CHRISTINE JOHANSEN, Director of Nursing	c/o: CENTENNIAL PARK RETIREMENT VILLAGE FIVE STAR QUALITY CARE, ATTN: LICENSING, 400 CENTRE STREET, NEWTON MA 02458			
NORTH PLATTE (LINCOLN) - 69101	Linden Court	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 135 ICF - 0 Total Lic Beds - 135	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
4000 WEST PHILIP AVENUE	(308) 532-5774 FAX: (308) 532-6252	285083 514005		
VSL NORTH PLATTE COURT, LLC	NOLAN GURNSEY, ADMINISTRATOR			
JASMINE MOORE, Director of Nursing				
NORTH PLATTE (LINCOLN) - 69101	North Platte Care Center, LLC	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 71 ICF - 0 Total Lic Beds - 71	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
2900 WEST E STREET	(308) 534-2200 FAX: (308) 534-9069	285165 514003		
NORTH PLATTE CARE CENTER, LLC	CAROLYN RIGGS, ADMINISTRATOR			
SHAWN DILLENBURG, Director of Nursing	c/o: NORTH PLATTE CARE CENTER, LLC TRILLIUM HEALTHCARE CONSULTING LLC, 5115 EAST STATE RD 64, BRADENTON FL 34208			
O' NEILL (HOLT) - 68763	Arbor Care Centers-O'Neill LLC	SNF/NF	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 84 ICF - 0 Total Lic Beds - 84	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
1102 NORTH HARRISON PO BOX 756	(402) 336-2384 FAX: (402) 336-4206	285108 414002		
ARBOR CARE CENTERS-O'NEILL LLC	MATTHEW BURIVAL, ADMINISTRATOR			
RHONDA KETTELER, Director of Nursing				

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
OAKLAND (BURT) - 68045	Oakland Heights	207 SOUTH ENGDAHL AVENUE	(402) 685-5683 FAX: (402) 685-5684	DAVID DEEMER, ADMINISTRATOR CHRISTINA ARNOLD, Director of Nursing	SNF/NF	285281	084002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 45 ICF - 0 Total Lic Beds - 45	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OGALLALA (KEITH) - 69153	Indian Hills Manor	1720 NORTH SPRUCE	(308) 284-4068 FAX: (308) 284-8381	KISMET OGA, LLC CHAD BOS, PROVISIONAL ADM LEA ANNE OTTIS, Director of Nursing	SNF/NF	285091	474001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 82 ICF - 0 Total Lic Beds - 82	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68105	Azria Health Midtown	910 SOUTH 40TH STREET	(402) 342-2015 FAX: (402) 341-0657	AZM, LLC CARA PAGAN, PROVISIONAL ADM HEATHER SCHOLTING, Director of Nursing	SNF/NF	285218	264007		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 61 ICF - 0 Total Lic Beds - 65	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68144	Azria Health Montclair	2525 SOUTH 135TH AVENUE	(402) 333-2304 FAX: (402) 330-1428	AHMO, LLC HAYLEY ADAMS, ADMINISTRATOR TAMMY COX, Director of Nursing c/o: AZRIA HEALTH MONTCLAIR 364 CHURCH AVENUE, WOODMERE NY 11598	SNF/NF	285054	264011		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 175 ICF - 0 Total Lic Beds - 175	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68114	Brighton Gardens of Omaha	9220 WESTERN AVENUE	(402) 393-7313 FAX: (402) 393-7340	SJV 2 OMAHA OPCO LLC JENNIFER BEISHEIM, ADMINISTRATOR LINDA MINER, Director of Nursing	S/NF DP	285274	NH0038		Medicare - 33 Medicaid - 0 Medicare/Medicaid - 12 ICF - 0 Total Lic Beds - 45	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
OMAHA (DOUGLAS) - 68137	Good Samaritan Society - Millard	12856 DEAUVILLE DRIVE	(402) 895-2266 FAX: (402) 895-8964	DEANNA NOVAK, ADMINISTRATOR DEANNA NOVAK, Director of Nursing	SNF/NF	285098	264010		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 106 ICF - 0 Total Lic Beds - 106	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68144	Hillcrest Millard	13225 WESTWOOD LANE	(531) 365-3000 FAX: (531) 365-3001	HILLCREST MILLARD, LLC DERRICK DEFINO, ADMINISTRATOR JUDY SAGVOLD, Director of Nursing 1902 HARLAN DRIVE, BELLEVUE NE 68005	SNF/NF	285302	NH0030		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 76 ICF - 0 Total Lic Beds - 76	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68152	Immanuel Fontenelle	6809 N 68TH PLAZA	(402) 572-2595 FAX: (402) 572-3279	IMMANUEL LONG TERM CARE PATRICK FAIRBANKS, ADMINISTRATOR CYNTHIA LEO GOFTA, Director of Nursing c/o: SENIOR VP & CHIEF OPERATIONS OFFICER IMMANUEL, 1044 N. 115TH STREET, STE. 500, OMAHA NE 68154	SNF/NF	285085	264600		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 165 ICF - 0 Total Lic Beds - 165	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68134	Keystone Ridge Post Acute Nursing and Rehabilitation	7501 KEYSTONE DRIVE	(402) 572-5750 FAX: (888) 673-2151	GOOD HOPE HEALTHCARE, INC WILLIAM DAVIS, ADMINISTRATOR DAWN YOUNG, Director of Nursing c/o: KEYSTONE RIDGE POST ACUTE NURSING AND REHAB 27101 PUERTA REAL, SUITE 450, MISSION VIEJO CA 92691	S/NF DP	285238	264016		Medicare - 26 Medicaid - 0 Medicare/Medicaid - 74 ICF - 0 Total Lic Beds - 100	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68112	Legacy Pointe Rehabilitation Center	3110 SCOTT CIRCLE	(402) 455-6636 FAX: (402) 455-0407	RIDGECREST SNF OPERATIONS LLC CHADD RUSSELL, ADMINISTRATOR TERESA LAWSON, Director of Nursing	SNF/NF	285239	264602		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 108 ICF - 0 Total Lic Beds - 108	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
OMAHA (DOUGLAS) - 68104	Life Care Center of Omaha	6032 VILLE DE SANTE DRIVE	(402) 571-6770 FAX: (402) 571-6273	PETER STYGAR, ADMINISTRATOR KRISTIN YEUTTER, Director of Nursing	SNF/NF	285137	264019		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 128 ICF - 0 Total Lic Beds - 128	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68104	Maple Crest Health Center	2824 NORTH 66TH AVENUE	(402) 551-2110 FAX: (402) 551-4636	AMERICAN BAPTIST HOMES OF THE MIDWEST EUGENIE AHOUNOU, ADMINISTRATOR NAOMI KAMORO, Director of Nursing	SNF/NF	285149	264009		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 175 ICF - 0 Total Lic Beds - 175	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68154	Old Mill Rehabilitation (Omaha TCU)	1131 PAPHILLION PARKWAY	(402) 934-7500 FAX: (402) 934-7560	SNF OMAHA OPERATING COMPANY, LLC MICHELE DEIN, ADMINISTRATOR	SNF/NF	285289	NH0017		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 44 ICF - 0 Total Lic Beds - 44	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68117	Omaha Nursing and Rehabilitation Center	4835 SOUTH 49TH STREET	(402) 733-7200 FAX: (402) 733-1736	SOUTHSIDE HEALTHCARE, INC NEIL HAYHURST, ADMINISTRATOR CORRI DILLENBURG, Director of Nursing	S/NF DP	285240	264013		Medicare - 17 Medicaid - 0 Medicare/Medicaid - 53 ICF - 0 Total Lic Beds - 70	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68104	Quality Living, Inc.	6404 NORTH 70TH PLAZA	(402) 573-3700 FAX: (402) 573-3790	QUALITY LIVING, INC. MICHALA WITAS, ADMINISTRATOR JENNIFER CLARK, Director of Nursing	NF	28A060	264014		Medicare - 0 Medicaid - 120 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 133	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
OMAHA (DOUGLAS) - 68124	River City Nursing and Rehabilitation	7410 MERCY ROAD	(402) 397-1220 FAX: (402) 397-4102	RIVER CITY NURSING LLC COURTNEY GALLU, ADMINISTRATOR MELISSA NEIGER, Director of Nursing	SNF/NF	285058	264002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 174 ICF - 0 Total Lic Beds - 174	OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68154	Rose Blumkin Jewish Home	323 SOUTH 132ND STREET	(402) 330-4272 FAX: (402) 330-2725	JEWISH FEDERATION OF OMAHA, INC. CHRIS ULVEN, ADMINISTRATOR ROCHELLE CASH, Director of Nursing	SNF/NF	285059	264015		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 105 ICF - 0 Total Lic Beds - 105	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68108	St. Joseph Villa Nursing Center	2305 SOUTH 10TH STREET	(402) 345-5683 FAX: (402) 345-1817	DELMAR GARDENS OF OMAHA, LLC HECTOR LEGUILLLOW, ADMINISTRATOR RENEE EDWARDS, Director of Nursing	S/NF DP	285078	264017		Medicare - 0 Medicaid - 152 Medicare/Medicaid - 32 ICF - 0 Total Lic Beds - 184	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68114	The Ambassador Omaha	1540 NORTH 72ND STREET	(402) 393-6500 FAX: (402) 541-4144	THE AMBASSADOR OMAHA, INC. JAKE BLEACH, ADMINISTRATOR POLLY STERN, Director of Nursing	S/NF DP	285127	264003		Medicare - 0 Medicaid - 48 Medicare/Medicaid - 98 ICF - 0 Total Lic Beds - 146	OCCUPATIONAL THERAPY PEDIATRIC PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
OMAHA (DOUGLAS) - 68130	The Lighthouse at Lakeside Village	17600 ARBOR STREET	(402) 717-0200 FAX: (402) 717-0201	IMMANUEL LONG TERM CARE BRODY CHANDLER, ADMINISTRATOR BIANCA CARMEL-COOPER, Director of Nursing	SNF/NF	285280	NH0009		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 36 ICF - 0 Total Lic Beds - 36	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
c/o: IMMANUEL C/O SENIOR VP & CHIEF OPERATIONS OFFICER 1044 NORTH 115TH STREET, STE.500, OMAHA NE 68154										

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No Accreditation	No. and Type of Beds	Services
ORD (VALLEY) - 68862	Arbor Care Centers - Ord, LLC	220 SOUTH 26TH STREET	(308) 728-4245 FAX: (308) 728-7864	TIMEREE ANDREASEN, ADMINISTRATOR REBECCA BELAK, Director of Nursing	SNF/NF LTCH	285294	NH0037	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 60 ICF - 0 Total Lic Beds - 60	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OSCEOLA (POLK) - 68651	Good Samaritan Society - Osceola	600 CENTER DRIVE	(402) 747-2691 FAX: (402) 747-3685	EMILY TRIPLETT, ADMINISTRATOR JENNIFER PLOCK, Director of Nursing	SNF/NF	285193	644001	Medicare - 0 Medicaid - 0 Medicare/Medicaid - 47 ICF - 0 Total Lic Beds - 47	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
OSHKOSH (GARDEN) - 69154	Regional West Garden County Nursing Home	1100 WEST 2ND	(308) 772-3283 FAX: (308) 772-9916	DONALD WEIDERMANN, ADMINISTRATOR DAWN CRAWFORD, Director of Nursing	NF LTCH	28E180	LTCH036	Medicare - 0 Medicaid - 40 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 40	
PAPILLION (SARPY) - 68133	Hillcrest Country Estates-Cottages	6082 GRAND LODGE AVENUE	(402) 885-7000 FAX: (402) 885-7001	ASHLEY WALTERS, ADMINISTRATOR DANA DOBER, Director of Nursing c/o: HILLCREST COUNTRY ESTATES 1902 HARLAN DRIVE, SUITE A, BELLEVUE NE 68005	S/NF DP	285293	NH0007	Medicare - 0 Medicaid - 26 Medicare/Medicaid - 22 ICF - 0 Total Lic Beds - 186	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
PAPILLION (SARPY) - 68046	Hillcrest Shadow Lake	1507 E GOLD COAST ROAD	(402) 339-6010 FAX: (402) 339-9274	KEVIN SAUBERZWEIG, ADMINISTRATOR HARMONY WIDMAN, Director of Nursing c/o: HILLCREST SHADOW LAKE 1902 HARLAN DRIVE, SUITE A, BELLEVUE NE 68005	NF	28E299	NH0023	Medicare - 0 Medicaid - 115 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 115	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Fac Type	No. and Type of Beds	Services
Address	Phone Number	Provider ID		
Licensee Administration	License No Accreditation			
PAPILLION (SARPY) - 68046	Papillion Manor	SNF/NF	Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
610 SOUTH POLK STREET	(402) 339-7700 FAX: (402) 592-9155	285268	Medicare/Medicaid - 110 ICF - 0	
VSL PAPILLION, LLC	LINNEA DETRICK, ADMINISTRATOR	684004	Total Lic Beds - 110	
MAUREEN BLAYLOCK, Director of Nursing				
PAWNEE CITY (PAWNEE) - 68420	Premier Estates of Pawnee, LLC	SNF/NF	Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
438 12TH STREET P O BOX 513	(402) 852-2975 FAX: (402) 852-2358	285157	Medicare/Medicaid - 64 ICF - 0	
PREMIER ESTATES OF PAWNEE, LLC	JEANNE ENGEL, PROVISIONAL ADM	594001	Total Lic Beds - 64	
MICHELE FREDERICK, Director of Nursing	c/o: PREMIER ESTATES OF PAWNEE LLC TRILLIUM HEALTHCARE CONSULTING, 5115 EAST STATE RD 64, BRADENTON FL 34208			
PENDER (THURSTON) - 68047	Legacy Garden Rehabilitation & Living Center	SNF/NF	Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
200 VALLEY VIEW DRIVE	(402) 385-3072 FAX: (402) 385-2603	285186	Medicare/Medicaid - 42 ICF - 0	
PENDER CARE CENTRE DISTRICT, INC.	SHARI DORSEY, ADMINISTRATOR	774002	Total Lic Beds - 42	
APRIL SCHUMACHER, Director of Nursing				
PIERCE (PIERCE) - 68767	Premier Estates of Pierce, LLC	SNF/NF	Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
515 EAST MAIN STREET P O BOX 189	(402) 329-6228 FAX: (402) 329-4188	285139	Medicare/Medicaid - 75 ICF - 0	
PREMIER ESTATES OF PIERCE, LLC	CHRISTIAN KOENIG, ADMINISTRATOR	624001	Total Lic Beds - 75	
CHRISTANNA DALE, Director of Nursing	c/o: PREMIER ESTATES OF PIERCE, LLC TRILLIUM HEALCARE CONSULTING, 5115 EAST STATE RD 64, BRADENTON NE 34208			
PLAINVIEW (PIERCE) - 68769	Plainview Manor	SNF/NF	Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
101 HARPER STREET P O BOX 219	(402) 582-3849 FAX: (402) 582-3850	285273	Medicare/Medicaid - 39 ICF - 0	
CITY OF PLAINVIEW	JULEEN JOHNSON, ADMINISTRATOR	624002	Total Lic Beds - 39	
TAMI ANDERSON, Director of Nursing				

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
PLATTSMOUTH (CASS) - 68048	Prestige Care Center of Plattsmouth	602 SOUTH 18TH STREET	(402) 296-2800	FAX: (402) 296-5424 PLATTSMOUTH OPERATIONS LLC CHASITY COOVER, ADMINISTRATOR DEB NESBITT, Director of Nursing	SNF/NF	285104	114002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 111 ICF - 0 Total Lic Beds - 111	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
PLATTSMOUTH (CASS) - 68048	The Nebraska Masonic Home	1300 AVENUE D	(402) 296-7300	FAX: (402) 296-3855 THE NEBRASKA MASONIC HOME MARY RUSSELL, ADMINISTRATOR DAWN PETERS, Director of Nursing	NF LIC	NH0004			Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 72	ALZHEIMERS/SPECIAL CAI PHYSICAL THERAPY
PONCA (DIXON) - 68770	Elms Health Care Center	410 BALL PARK ROAD P O BOX 628	(402) 755-2233	FAX: (402) 755-2245 ELMS HEALTH CARE CENTER, INC. LAURA ZAVADIL, PROVISIONAL ADM CHRISTINA BELLER, Director of Nursing	SNF/NF	285191	244001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 42 ICF - 0 Total Lic Beds - 44	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
RANDOLPH (CEDAR) - 68771	Colonial Manor of Randolph	811 SOUTH MAIN STREET P O BOX 67	(402) 337-0444	FAX: (402) 337-1746 RANDOLPH HEALTHCARE, INC RACHAEL HURLEY, PROVISIONAL ADM SARA SUDBECK, Director of Nursing	SNF/NF	285183	124004		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 45 ICF - 0 Total Lic Beds - 45	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
RAVENNA (BUFFALO) - 68869	Good Samaritan Society - Ravenna	411 WEST GENOA	(308) 452-3230	FAX: (308) 452-3709 THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY JEFF ACHTENBERG, ADMINISTRATOR DIANE PANOWICZ, Director of Nursing	SNF/NF	285202	074006		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 61 ICF - 0 Total Lic Beds - 61	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
RED CLOUD (WEBSTER) - 68970	Heritage of Red Cloud	636 NORTH LOCUST STREET	(402) 746-2296 FAX: (402) 746-2325	VSL RED CLOUD, LLC KIM GRAMS, ADMINISTRATOR CAROLYN FOX, Director of Nursing	SNF/NF	285225	814002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 43 ICF - 0 Total Lic Beds - 43	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
RUSHVILLE (SHERIDAN) - 69360	Oglala Sioux Lakota Nursing Home	7835 ELDERS DRIVE, STATE HIGHWAY 87	(308) 862-4020 FAX: (308) 862-4024	OGLALA SIOUX LAKOTA NURSING HOME, INC. TIFFANY SHANGREAU, PROVISIONAL ADM ELISHA OTTE, Director of Nursing	NF	28E300	NH0025		Medicare - 0 Medicaid - 72 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 72	ALZHEIMERS/SPECIAL CAI
SCOTTSBLUFF (SCOTTS BLUFF) - 69361	Monument Rehabilitation and Care Center	111 WEST 36TH STREET	(308) 635-2019 FAX: (308) 635-2438	SCOTTSBLUFF OPERATIONS LLC JENNIFER COFFMAN, ADMINISTRATOR ANGELA WAHL, Director of Nursing	SNF/NF	285095	704005		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 160 ICF - 0 Total Lic Beds - 160	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
SCOTTSBLUFF (SCOTTS BLUFF) - 69361	Northfield Retirement Communities Care Center	2100 CIRCLE DRIVE	(308) 632-4342 FAX: (308) 630-8170	NORTHFIELD RETIREMENT COMMUNITIES SHELLEY RAMIREZ, ADMINISTRATOR CONNIE LUCIUS, Director of Nursing	SNF/NF	285271	704004		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 66 ICF - 0 Total Lic Beds - 66	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
SCOTTSBLUFF (SCOTTS BLUFF) - 69361	Western Nebraska Veterans Home	1102 WEST 42ND STREET	(308) 632-0300 FAX: (308) 632-1384	NEBRASKA DEPARTMENT OF VETERAN'S AFFAIRS ELIZABETH STRICKER, PROVISIONAL ADM ELIZABETH OSSIAN, Director of Nursing	SNF-LIC		704006		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 62	BEHAVIORAL NEEDS PHYSICAL THERAPY RESPIRATORY THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Fac Type	Provider ID	License No	No. and Type of Beds	Services
Administration	Accreditation						
SEWARD (SEWARD) - 68434	SNF/NF					Medicare - 0 Medicaid - 0	ALZHEIMER UNIT OCCUPATIONAL THERAPY
Ridgewood Rehabilitation & Care Center	285279					Medicare/Medicaid - 82	PHYSICAL THERAPY
624 PINWOOD AVENUE	724003					ICF - 0	SPEECH THERAPY
(402) 643-2902 FAX: (402) 643-6894						Total Lic Beds - 82	
VSL SEWARD, LLC							
RUTH (PEG) BECKER, ADMINISTRATOR							
JEANNE SCHOEN, Director of Nursing							
SIDNEY (CHEYENNE) - 69162	SNF/NF					Medicare - 0 Medicaid - 0	BEHAVIORAL NEEDS OCCUPATIONAL THERAPY
Sidney Regional Medical Center-Extended Care	285290					Medicare/Medicaid - 61	PHYSICAL THERAPY
549 KELLER DRIVE	154002					ICF - 0	SPEECH THERAPY
(308) 254-7303 FAX: (308) 254-8745						Total Lic Beds - 63	
CHEYENNE COUNTY HOSPITAL ASSOCIATION, INC.							
JUDY FRERICHS, ADMINISTRATOR							
TEREASA BROSTROM, Director of Nursing							
c/o: SIDNEY REGIONAL MEDICAL CENTER-EXTENDED CARE 549 KELLER DRIVE, SIDNEY NE 69162							
SOUTH SIOUX CITY (DAKOTA) - 68776	SNF/NF					Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY
Continental Springs, LLC	285082					Medicare/Medicaid - 77	SPEECH THERAPY
3200 G STREET	204003					ICF - 0	
(402) 494-3043 FAX: (402) 494-8830						Total Lic Beds - 77	
CONTINENTAL SPRINGS, LLC							
STACY WERMES, PROVISIONAL ADM							
KIMBERLY KROPP, Director of Nursing							
SOUTH SIOUX CITY (DAKOTA) - 68776	SNF/NF					Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY
Regency Square Care Center	285076					Medicare/Medicaid - 72	SPEECH THERAPY
3501 DAKOTA AVENUE	NH0039					ICF - 0	
(402) 494-4273 FAX: (402) 494-1267						Total Lic Beds - 72	
AZRSQ, LLC							
MIKEL ARDLEY, ADMINISTRATOR							
JENNIFER DEJONG, Director of Nursing							
ST EDWARD (BOONE) - 68660	SNF/NF					Medicare - 0 Medicaid - 0	OCCUPATIONAL THERAPY PHYSICAL THERAPY
Cloverlodge Care Center	285201					Medicare/Medicaid - 47	SPEECH THERAPY
301 NORTH 13TH STREET	034002					ICF - 0	
(402) 678-2294 FAX: (402) 678-2446						Total Lic Beds - 47	
VSL ST EDWARD, LLC							
THERESA NABER, ADMINISTRATOR							
EYDIE SCHRAD, Director of Nursing							

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
ST PAUL (HOWARD) - 68873	Brookefield Park	1405 HERITAGE DRIVE	(308) 754-5486 FAX: (308) 754-5385	VSL ST PAUL, LLC ANDREW WISMER, ADMINISTRATOR CHANDRA SMITH, Director of Nursing	SNF/NF	285226	NH0016		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 ICF - 0 Total Lic Beds - 70	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
STANTON (STANTON) - 68779	Stanton Health Center	301 17TH STREET P O BOX 407	(402) 439-2111 FAX: (402) 439-2132	CITY OF STANTON APRIL JOHNSTON, ADMINISTRATOR LISA RUMSEY, Director of Nursing	SNF/NF	285102	754001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 70 ICF - 0 Total Lic Beds - 70	ALZHEIMER UNIT OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
STROMSBURG (POLK) - 68666	Midwest Covenant Home	615 EAST 9TH STREET P O BOX 367	(402) 764-2711 FAX: (402) 764-4352	MIDWEST COVENANT HOME, INC SHEILA BJERRUM, ADMINISTRATOR TRACI RYSTROM, Director of Nursing	SNF/NF	285062	644002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 51 ICF - 0 Total Lic Beds - 51	
STUART (HOLT) - 68780	Parkside Manor	607 NORTH MAIN STREET P O BOX 350	(402) 924-3601 FAX: (402) 924-3615	STUART VILLAGE NURSING HOME BOARD PARKSIDE MANOR LUCAS KAUP, ADMINISTRATOR LISA KORINKO, Director of Nursing	SNF/NF	285245	414003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 40 ICF - 0 Total Lic Beds - 40	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
SUPERIOR (NUCKOLLS) - 68978	Good Samaritan Society - Superior	1710 IDAHO STREET	(402) 879-4791 FAX: (402) 879-3149	THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY KERREY MILLER, ADMINISTRATOR HEATHER BERENTES, Director of Nursing	SNF/NF	285187	574002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 69 ICF - 0 Total Lic Beds - 69	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
WAHOO (SAUNDERS) - 68066	South Haven Living Center	1400 MARK DRIVE	(402) 443-3737 FAX: (402) 443-5867	VSL WAHOO, LLC BROOKE BELINA, ADMINISTRATOR NICOLE FARLESS, Director of Nursing	SNF/NF	285231	694005		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 85 ICF - 0 Total Lic Beds - 85	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
WAKEFIELD (DIXON) - 68784	Wakefield Health Care Center	306 ASH STREET	(402) 287-2244 FAX: (402) 287-2245	CITY OF WAKEFIELD KAY VANNESS, ADMINISTRATOR KAYLA MILLER, Director of Nursing	SNF/NF	285209	244002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 49 ICF - 0 Total Lic Beds - 49	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
WAUNETA (CHASE) - 69045	Wauneta Care and Therapy Center	427 LEGION STREET PO BOX 520	(308) 394-5738 FAX: (308) 394-5733	VILLAGE OF WAUNETA LISA KISINGER, ADMINISTRATOR DEBRA ANDREW, Director of Nursing	SNF/NF	285220	134002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 36 ICF - 0 Total Lic Beds - 36	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
WAVERLY (LANCASTER) - 68462	Azria Health Waverly	11041 NORTH 137TH ST	(402) 786-2626 FAX: (402) 786-2630	BGP WAVERLY, LLC MICHAEL LANGE, ADMINISTRATOR DEANNA QUALSET, Director of Nursing c/o: AZRIA HEALTH WAVERLY , 702 S HIGHWAY 6, GRETNA NE 68028	SNF/NF	285143	504011		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 54 ICF - 0 Total Lic Beds - 54	OCCUPATIONAL THERAPY PHYSICAL THERAPY RESPIRATORY THERAPY SPEECH THERAPY
WAYNE (WAYNE) - 68787	Wayne Countryview Care and Rehabilitation	811 EAST 14TH STREET	(402) 375-1922 FAX: (402) 375-1923	LINDAHL HEALTHCARE, INC CHERI WINGERT, ADMINISTRATOR TAYLOR LINGREN, Director of Nursing	SNF/NF	285135	804001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 60 ICF - 0 Total Lic Beds - 60	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

TOWN (County) Zip Code	Name of Facility	Address	Phone Number	Licensee Administration	Fac Type	Provider ID	License No	Accreditation	No. and Type of Beds	Services
WEST POINT (CUMING) - 68788	St Joseph's Hillside Villa	540 E WASHINGTON STREET	(402) 372-1118 FAX: (402) 372-5200	SAMUEL PROKOPEC, ADMINISTRATOR KELLY JOHNSON, Director of Nursing	SNF/NF	285303	NH0033		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 54 ICF - 0 Total Lic Beds - 54	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
WILBER (SALINE) - 68465	Wilber Care Center	611 NORTH MAIN	(402) 821-2331 FAX: (402) 821-2568	BARBARA DREYER, ADMINISTRATOR MICHELE VANA, Director of Nursing	SNF/NF	285172	674002		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 58 ICF - 0 Total Lic Beds - 58	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
WISNER (CUMING) - 68791	Wisner Care Center	1105 9TH STREET	(402) 529-3286 FAX: (402) 529-6560	MISHAELA WOLDT, DIRECTOR OF NUR MISHAELA WOLDT, Director of Nursing	SNF/NF	285151	184003		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 38 ICF - 0 Total Lic Beds - 38	OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY
YORK (YORK) - 68467	Nebraska Correctional Center For Women (NCCW) Me	1107 RECHARGE ROAD	(402) 362-3317 FAX: (402) 362-1941	NEBRASKA DEPARTMENT OF CORRECTIONAL SERVICES DIANA TOMEK, PROVISIONAL ADM TANITA TROESTER, Director of Nursing c/o: DEPARTMENT OF CORRECTIONAL SERVICES NCCW ATTN: CASSANDRA PUTNAM, PO BOX 94661, LINCOLN NE 68509	SNF-LIC		NH0019		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 0 ICF - 0 Total Lic Beds - 2	BEHAVIORAL NEEDS PHYSICAL THERAPY RESPIRATORY THERAPY
YORK (YORK) - 68467	York General Hearthstone	2600 NORTH LINCOLN AVENUE P O BOX 159	(402) 362-4333 FAX: (402) 363-0235	YORK GENERAL HEALTH CARE SERVICES JOSEPH JAY COLBURN, ADMINISTRATOR TREVA HANSON, Director of Nursing	SNF/NF	285131	824001		Medicare - 0 Medicaid - 0 Medicare/Medicaid - 127 ICF - 0 Total Lic Beds - 127	ALZHEIMERS/SPECIAL CAI OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

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

Total Facilities: 205