

**DIRECTORY OF LICENSED WISCONSIN HOME
 HEALTH AGENCIES BY COUNTY SERVED**

| License and Certification Numbers | Provider Name and Address | Administrator and Phone | Region |
|--|--|--|------------------------------------|
| COUNTY SERVED: Manitowoc | | | |
| Lic. 144 Cert. 527009 Certified for Medicaid | AFFINITY VISITING NURSES 816 WEST WINNECONNE AVE NEENAH, WI 54956 | POTOPINSKI, JAIME (920) 727-2000 FAX: (920) 727-6569 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PERSONAL CARE WORKER | MEDICAL SOCIAL SERVICE PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY |
| Lic. 1106 | AMEDISYS HOME HEALTH 333 MAIN STREET, STE 115 GREEN BAY, WI 54301 | STEBER, JO (920) 430-7890 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PHYSICAL THERAPY | NURSING SPEECH THERAPY | OCCUPATIONAL THERAPY | OTHER |
| Lic. 1047 Cert. 527294 Certified for Medicaid | AMERICAN HOME NURSING, LLC 1623 WISCONSIN AVENUE NEW HOLSTEIN, WI 53061 | PETERSON, KAREN (920) 898-5380 FAX: (920) 898-1609 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PERSONAL CARE WORKER | HOMEMAKER PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY |
| Lic. 1008 Cert. 527302 Certified for Medicaid | AURORA VISITING NURSE ASSOCIATION OF WISCONSIN 931 DISCOVERY RD GREEN BAY, WI 54311 | HENNESSY, CANDACE (920) 288-5100 FAX: (920) 288-5152 | NORTHEASTERN |
| Services Provided: | | | |
| DIETARY OCCUPATIONAL THERAPY | HOME HEALTH AIDE PHYSICAL THERAPY | MEDICAL SOCIAL SERVICE SPEECH PATHOLOGY | NURSING |
| Branch Location(s): | | | |
| AURORA VISITING NURSE ASSOCIATION OF WI 1002 NORTH 21ST STREET MANITOWOC, WI 54220 | | Phone: (920) 682-8188 | |
| Lic. 81 Cert. 527001 Certified for Medicaid | AURORA VISITING NURSE ASSOCIATION OF WISCONSIN 11333 W NATIONAL AVE MILWAUKEE, WI 53227 | HENNESSY, CANDACE (414) 327-2295 | SOUTHEASTERN |
| Services Provided: | | | |
| APPLIANCES AND EQUIPMENT MEDICAL SOCIAL SERVICE PHYSICAL THERAPY | HOME HEALTH AIDE NURSING CARE SPEECH THERAPY | HOMEMAKER NUTRITIONAL GUIDANCE | LABORATORY OCCUPATIONAL THERAPY |
| Branch Location(s): | | | |
| VISITING NURSE ASSN OF WI 1002 NORTH 21ST STREET MANITOWOC, WI 54220 | | Phone: (920) 682-8188 | FAX: (920) 682-8228 |
| VISITING NURSE ASSN OF WI 2314 KOHLER MEMORIAL DRIVE SHEBOYGAN, WI 53081 | | Phone: (920) 458-4314 | FAX: (920) 453-3943 |

**DIRECTORY OF LICENSED WISCONSIN HOME
 HEALTH AGENCIES BY COUNTY SERVED**

| License and Certification Numbers | Provider Name and Address | Administrator and Phone | Region |
|--|---|---|--|
| COUNTY SERVED: Manitowoc | | | |
| Lic. 14 Cert. 527089 Certified for Medicaid | BELLIN HOME HEALTH AGENCY 617 S ROOSEVELT ST GREEN BAY, WI 54301 | SMITTS, MELISSA (920) 432-5434 FAX: (920) 432-5435 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PERSONAL CARE WORKER | MEDICAL SOCIAL SERVICE PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY |
| Lic. 42 Cert. 527085 Certified for Medicaid | CALUMET CTY HLTH DEPT HHC AGENCY 206 COURT ST COURTHOUSE CHILTON, WI 53014 | KOLBE, BONNIE (920) 849-1432 | NORTHEASTERN |
| Services Provided: | | | |
| APPLIANCES AND EQUIPMENT PERSONAL CARE WORKER | HOME HEALTH AIDE PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY |
| Lic. 214 Cert. 527200 Certified for Medicaid | CLARITY CARE INC 424 WASHINGTON AVE OSHKOSH, WI 54904 | KNOLL-GARTNER, NANCY (920) 236-6567 FAX: (920) 236-6572 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PERSONAL CARE WORKER | HOMEMAKER PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY |
| Branch Location(s): | | | |
| CLARITY CARE INC 2649 MANITOWOC ROAD GREEN BAY, WI 54311 | | Phone: (920) 236-6567 | |
| Lic. 218 Cert. 527233 Certified for Medicaid | HEARTLAND HOME CARE LLC 1145 WEST MAIN ST STE 205 DE PERE, WI 54115 | AGEN, NATHANIEL (920) 336-6455 FAX: (920) 336-6646 | SOUTHEASTERN |
| Services Provided: | | | |
| APPLIANCES AND EQUIPMENT MEDICAL SOCIAL SERVICE PERSONAL CARE WORKER | HOME HEALTH AIDE NURSING CARE PHARMACEUTICAL | HOMEMAKER NUTRITIONAL GUIDANCE PHYSICAL THERAPY | LABORATORY OCCUPATIONAL THERAPY SPEECH THERAPY |
| Lic. 143 Cert. 527154 Certified for Medicaid | HOLY FAMILY MEMORIAL HOME CARE 333 REED AV MANITOWOC, WI 54220 | WILLINS, VIDA (920) 320-8441 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE OCCUPATIONAL THERAPY | MEDICAL SOCIAL SERVICE PERSONAL CARE WORKER | NURSING CARE PHYSICAL THERAPY | NUTRITIONAL GUIDANCE SPEECH THERAPY |
| Lic. 1111 | HOME AND HOSPICE ADVANTAGE 3325 BEHRENS PARKWAY SHEBOYGAN, WI 53081 | HOLEMAN, JODY (920) 452-1851 FAX: (920) 452-1852 | |
| Services Provided: | | | |
| APPLIANCES AND EQUIPMENT MEDICAL SOCIAL SERVICE PHARMACEUTICAL | HOME HEALTH AIDE NURSING PHYSICAL THERAPY | HOMEMAKER OCCUPATIONAL THERAPY SPEECH THERAPY | LABORATORY PERSONAL CARE WORKER |

**DIRECTORY OF LICENSED WISCONSIN HOME
 HEALTH AGENCIES BY COUNTY SERVED**

| License and Certification Numbers | Provider Name and Address | Administrator and Phone | Region |
|---|---|--|--|
| COUNTY SERVED: Manitowoc | | | |
| Lic. 1 Cert. 527081 Certified for Medicaid | HOMECARE HEALTH SERVICES INC 1004 WASHINGTON ST MANITOWOC, WI 54220 | SEIDL BABCOCK, LYNN (920) 684-7155 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PHYSICAL THERAPY | NURSING CARE SPEECH THERAPY | OCCUPATIONAL THERAPY | PERSONAL CARE WORKER |
| Lic. 17 Cert. 527094 Certified for Medicaid | HOMEMAKERS INC OF OSHKOSH 2020 W 9TH AVE OSHKOSH, WI 54904 | LONNBORG, TERRY (920) 233-2080 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE | HOMEMAKER | NURSING CARE | PERSONAL CARE WORKER |
| Branch Location(s): | | | |
| HOMEMAKERS INC OF OSHKOSH 770 SOUTH MAIN STREET FOND DU LAC, WI 54935 | | Phone: (920) 233-2080 | |
| Lic. 266 Cert. 527234 Certified for Medicaid | INTERIM HEALTHCARE OF NE WI, INC. 2551 CONTINENTAL CT STE 2 GREEN BAY, WI 54311 | WHITE SPAETH, ANN (920) 494-9444 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE PHARMACEUTICAL | LABORATORY | NURSING CARE | PERSONAL CARE WORKER |
| Lic. 124 Cert. 527139 Certified for Medicaid | ST NICHOLAS HSPTL HOME HEALTH AND HOSPICE 3100 SUPERIOR AVENUE SHEBOYGAN, WI 53081 | SMITH, TANYA (920) 457-5770 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE NURSING CARE SPEECH THERAPY | HOMEMAKER NUTRITIONAL GUIDANCE | LABORATORY OCCUPATIONAL THERAPY | MEDICAL SOCIAL SERVICE PHYSICAL THERAPY |
| Lic. 35 Cert. 527132 Certified for Medicaid | ST VINCENT HOSP HOME HEALTH 1920 S LIBAL ST GREEN BAY, WI 54301 | CMEYLA, CINDY (920) 448-7000 | NORTHEASTERN |
| Services Provided: | | | |
| HOME HEALTH AIDE NURSING CARE PHARMACEUTICAL | HOMEMAKER NUTRITIONAL GUIDANCE PHYSICAL THERAPY | LABORATORY OCCUPATIONAL THERAPY SPEECH THERAPY | MEDICAL SOCIAL SERVICE PERSONAL CARE WORKER |
| Lic. 88 Cert. 527010 Certified for Medicaid | THEDACARE AT HOME 3000 E COLLEGE AVE STE A APPLETON, WI 54915 | FOLLEN, SARAH (920) 969-0919 | NORTHEASTERN |
| Services Provided: | | | |
| APPLIANCES AND EQUIPMENT NUTRITIONAL GUIDANCE PHYSICAL THERAPY | HOME HEALTH AIDE OCCUPATIONAL THERAPY SPEECH THERAPY | MEDICAL SOCIAL SERVICE PERSONAL CARE WORKER | NURSING CARE PHARMACEUTICAL |

**DIRECTORY OF LICENSED WISCONSIN HOME
HEALTH AGENCIES BY COUNTY SERVED**

| License and Certification Numbers | Provider Name and Address | Administrator and Phone | Region |
|--|---|--|---------------|
| COUNTY SERVED: Manitowoc | | | |
| Lic. 1041 | UNIVERSAL HOME HEALTH CARE, INC 933 ERIE AVE STE 9 SHEBOYGAN, WI 53081 | LEE, JOSHUA (920) 452-3370 FAX: (920) 452-3380 | NORTHEASTERN |
| Certified for Medicaid | | | |
| Services Provided: | | | |
| HOME HEALTH AIDE | NURSING | PERSONAL CARE WORKER | |
| Lic. 1009 | UNIVERSAL PEDIATRIC SERVICES 17100 W BLUEMOUND RD STE 101 BROOKFIELD, WI 53005 | ZAJORK, LINDA (262) 782-8292 | SOUTHEASTERN |
| Cert. 527273 | | | |
| Certified for Medicaid | | | |
| Services Provided: | | | |
| HOME HEALTH AIDE | NURSING | | |