

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

**STATE OF WISCONSIN**  
 Department of Health Services  
 Tuesday, November 17, 2009

**KEY TO DESCRIPTIONS:**  
 Title 18 = Title XVIII, Medicare Certification  
 Title 19 = Title XIX, Medicaid Certification

IMD = Institute for Mental Diseases  
 SNF = Skilled Nursing Facility  
 NF = Nursing Facility

**DIVISION OF QUALITY ASSURANCE**  
 PO Box 2969  
 Madison, WI 53701-2969

**County: EAU CLAIRE**

<b>PROVIDER/ADDRESS</b>	<b>Contact and Phones</b>	<b>County DQA Region</b>	<b>License Number, Level and Beds</b>	<b>Owner, Ownership, Certification Types, Provider Number</b>
OAKWOOD VILLA 2512 NEW PINE DR ALTOONA, WI 54720	(715) 833-0400 FAX: (715) 833-0546 Administrator: JORDAN BRUCE	EAU CLAIRE Western	Lic. 3167 SKILLED CARE 96 Beds	EXTENDICARE HOMES INC FOR PROFIT CORPORATION 525454 Title 18 SNF Title 19 NF
AUGUSTA AREA NURSING HOME 215 E BROWN ST PO BOX 387 AUGUSTA, WI 54722	(715) 286-2266 FAX: (715) 286-2653 Administrator: JOYCE RICHARDS	EAU CLAIRE Western	Lic. 2083 SKILLED CARE 61 Beds	AUGUSTA AREA HOME INC GOVERNMENT CITY 525535 Title 18 SNF Title 19 NF
CLAIREMONT NURSING AND REHABILITATION 2120 HEIGHTS DR EAU CLAIRE, WI 54701	(715) 832-1681 FAX: (715) 832-8367 Administrator: REBECCA ROUSE	EAU CLAIRE Western	Lic. 3224 SKILLED CARE 161 Beds	CLAIREMONT HEALTH ARE CENTER LLC 525364 Title 18 SNF Title 19 NF
DOVE HEALTHCARE-SOUTH 3656 MALL DRIVE EAU CLAIRE, WI 54701	(715) 552-1035	EAU CLAIRE Western	Lic. 5031 SKILLED CARE 50 Beds	TRANSITIONS AT OAKWOOD, LLC Title 18 SNF
DOVE HEALTHCARE-WEST 1405 TRUAX BLVD EAU CLAIRE, WI 54703	(715) 552-1030 FAX: (715) 552-1033 Administrator: KENDALL DUFFY	EAU CLAIRE Western	Lic. 3195 SKILLED CARE 160 Beds	COVENANT HEALTHCARE LLC 525387 Title 18 SNF Title 19 NF
SYVERSON LUTHERAN HOME 816 PORTER AVE EAU CLAIRE, WI 54701	(715) 832-1644 FAX: (715) 832-5336 Administrator: RANDALL RENNOCK	EAU CLAIRE Western	Lic. 2975 SKILLED CARE 115 Beds	GRACE LUTHERAN FOUNDATION INC NONPROFIT CHURCH/CORP 525505 Title 18 SNF Title 19 NF
FALL CREEK VALLEY CARE CENTER 344 LINCOLN AVE P O BOX 398 FALL CREEK, WI 54742	(715) 877-2411 FAX: (715) 877-2651 Administrator: JOHN HALBLEIB	EAU CLAIRE Western	Lic. 2073 SKILLED CARE 60 Beds	COVENANT CARE LLC 525460 Title 18 SNF Title 19 NF