

**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: JUNEAU**

| <b>PROVIDER/ADDRESS</b>   | <b>Contact and Phones</b>  | <b>County<br/>DQA Region</b> | <b>License Number,<br/>Level and Beds</b> | <b>Owner, Ownership, Certification<br/>Types, Provider Number</b>                           |
|---|--|------------------------------|---|---|
| HERITAGE MANOR<br>307 ROYALL AVE PO BOX 167<br>ELROY, WI 53929  | (608) 462-8491<br>FAX: (608) 462-5088<br>Administrator: WILLIAM GREIG    | JUNEAU<br>Southern           | Lic. 2852<br>SKILLED CARE<br>76 Beds      | EDGEWOOD CARE CENTER INC<br>FOR PROFIT CORPORATION<br>525452 Title 18 SNF Title 19 NF       |
| FAIR VIEW NURSING HOME<br>1050 DIVISION ST<br>MAUSTON, WI 53948 | (608) 847-6161<br>FAX: (608) 847-6017<br>Administrator: JAMES O'KEEFE    | JUNEAU<br>Southern           | Lic. 2650<br>SKILLED CARE<br>60 Beds      | MILE BLUFF MEDICAL CENTER, INC.<br>NONPROFIT CORPORATION<br>525437 Title 18 SNF Title 19 NF |
| CREST VIEW NURSING HOME<br>612 VIEW ST<br>NEW LISBON, WI 53950  | (608) 562-3667<br>FAX: (608) 562-6590<br>Administrator: JENNIFER BRANDAU | JUNEAU<br>Southern           | Lic. 2367<br>SKILLED CARE<br>60 Beds      | MILE BLUFF MEDICAL CENTER, INC.<br>NONPROFIT CORPORATION<br>525581 Title 18 SNF Title 19 NF |