ASSISTED LIVING HCBS PROVIDERS
ALBANY COUNTY

PREMIUM HEALTH AT HOME 12/2011

1050 N 3RD STREET
SUITE L
LARAMIE WY 82072
Phone: (307)745-8710 Fax: (307)742-9233 Office email address: JULIEBANDEMER@MSN.COM
Provider number: 1043459860
Providing:
ALF Case Managemen REGINA OWENS

QUALITY HOME CARE INC 09/2001

1050 N 3RD ST SUITE D
LARAMIE WY 82070
Phone: (307)742-9035 Fax: (307)742-9051 Office email address:
Provider number: 1386740496
Providing:

ALF Case Managemen KATHLEEN PHILLIPS
REGINA OWENS
TARA MATHES

SPRING WIND ASSISTED LIVING COMMUNITY 01/2009

1072 N 22ND ST
LARAMIE WY 82072
Phone: (307)755-5811 Fax: (307)721-0478 Office email address:
Provider number: 128093700
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

SUMMIT HOME HEALTH CARE 12/2003

204 MCCOLLUM DR #106
LARAMIE WY 82070
Phone: (307)760-4338 Fax: (307)742-3611 Office email address:
Provider number: 1184777625
Providing:

ALF Case Managemen SUZETTE SMITH
MARCELLA WRIGHT
KATHY KLEIN
CATHY VALADES-FLYNN
KRISTEN FRENCH

ASSISTED LIVING HCBS PROVIDERS
CAMPBELL COUNTY

SHARON'S HOME HEALTH CARE 03/2003

PO BOX 189
116 NORTH LITTLE HORN
MOORECROFT WY
Phone: (307)756-3344 Fax: (307)756-3394 Office email address: skan@trib.com
Provider number: 1194839001
Providing:
ALF Case Managemen ROBIN SEELEY

ASSISTED LIVING HCBS PROVIDERS
CROOK COUNTY

SHARON'S HOME HEALTH CARE 03/2003

610 W CONVERSE
PO BOX 73
MOORECROFT WY 82721
Phone: (307)756-3344 Fax: (307)756-339 Office email address: skan@trib.com
Provider number: 1194839001
Providing:
ALF Case Managemen SHARON KANODE
TRISHA TIMBERMAN
LACY CHRISTIANSON
HELENE OBORSKI
CINDY MANKIN
ROBIN SEELEY

SUNDANCE ASSISTED CARE 10/2002

PO BOX 1260
108 ABBEY LANE
SUNDANCE WY 82729
Phone: (307)283-1042 Fax: (307)283-2120 Office email address:
Provider number: 117837700
Providing:
ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
FREMONT COUNTY

AMEDISYS HOME HEALTH CARE - RIVERTON 09/2007

514 E PERSHING
RIVERTON WY 82501
Phone: (307)856-4127 Fax: (307)856-4129 Office email address: mpalmer0210@amedisys.com
Provider number: 1053503565
Providing:

ALF Case Managemen SHERI STANBURY
PEG PALMER
MARY KLINGER
JEANNE HESTER
STACI MORTON

190 CUSTER
LANDER WY 82520
Phone: (307)332-2393 Fax: (307)332-3352 Office email address:
Provider number: 1053503565
Providing:

ALF Case Managemen PEG PALMER
SHERI STANBURY

HOMESTEAD ASSISTED LIVING 04/2009

950 HOMESTEAD AVE
RIVERTON WY 82501
Phone: (307)856-5789 Fax: (307)856-5298 Office email address:
Provider number: 1760627731
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

SHOWBOAT RETIREMENT CENTER 07/2001

150 WYOMING STREET
LANDER WY 82520
Phone: (307) 332-6788 Fax: Office email address:
Provider number: 116322100
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
JOHNSON COUNTY

AGAPE MANOR INC 07/2010

820 NORTH MAIN ST
BUFFALO- WY 82834
Phone: (307)684-5504 Fax: (307)684-9490 Office email address: agapemanor@vcn.com
Provider number: 1700115581
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

BEE HIVE HOMES OF BUFFALO 04/2011

1 NORTH KLONDIKE
BUFFALO WY 82834
Phone: (307)684-8669 Fax: (307)684-8669 Office email address: brucefenton33@hotmail.com
Provider number: 132942100
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

JOHNSON COUNTY MEMORIAL HOSPITAL HOME HEALTH 10/2010

497 LOTT
BUFFALO WY 82834
Phone: (307)684-5521 Fax: (307)684-5385 Office email address: elainek@jchealthcare.com
Provider number: 1992784961
Providing:

ALF Case Managemen ELAINE KOZISEK
ANN FITCH

VETERANS HOME OF WYOMING 04/2011

700 VETERAN'S LANE
BUFFALO WY 82834
Phone: (307)684-5511 Fax: (307)684-7636 Office email address: THOMAS.MCCLAIN@HEALTH.W
Provider number: 130622700
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
LARAMIE COUNTY

ASPEN WIND ASSISTED LIVING COMMUNITY 01/2009

4010 N COLLEGE DR
CHEYENNE WY 82001
Phone: (307)778-9511 Fax: (307)778-8566 Office email address:
Provider number: 128094500
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

CHEYENNE REGIONAL MEDICAL CENTER HH Currently Not Taking New Clients 07/2001

2600 E 18TH ST
CHEYENNE WY 82001
Phone: (307) 634-2273 Fax: Office email address:
Provider number: 1568426435
Providing:

ALF Case Managemen HEATHER JACKSON
MELISSA HURT
JULIE MEYER
BARBARA ARCHAMBEAU
LINDSAY HRUBY
APRIL FALZONE

SIERRA HILLS ASSISTED LIVING COMMUNITY 01/2009

4606 N COLLEGE DR
CHEYENNE WY 82009
Phone: (307)638-7798 Fax: (307)638-7919 Office email address:
Provider number: 128095300
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
LINCOLN COUNTY

BEYOND HOME, INC 05/2012

153 DOYLE CHILD CRCLE
AFTON WY 83110
Phone: (307)885-2263 Fax: (307)885-2264 Office email address: BOBANDJOLENE@HOTMAIL.CO
Provider number: 133007100
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

LEGACY HOMES ASSISTED LIVING FACILITY 07/2001

2391 MUDDY STRING CO RD #117
THAYNE WY 83127
Phone: (307) 883-3800 Fax: (307)883-3801 Office email address: eimerrott@silverstar.com
Provider number: 113552000
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

PREMIER HOME HEALTH 07/2001

PO BOX 999
THAYNE WY 83127
Phone: (307)883-5500 Fax: (307)883-5501 Office email address:
Provider number: 1902841000
Providing:

ALF Case Managemen CATHY COLE

ASSISTED LIVING HCBS PROVIDERS
NATRONA COUNTY

AMEDISYS HOME HEALTH CARE - CASPER 11/2007

130 NORTH ASH STE 201
CASPER WY 72601
Phone: (307)234-6684 Fax: (307)234-6060 Office email address: jcardenas0203@amedisys.com
Provider number: 1255524674
Providing:

ALF Case Managemen JENNIFER WHITE
MELODY LAICHE
JUDY CARDENAS

ANN'S BEST CARE 01/2012

214 NORTH 5TH ST
DOUGLAS WY 82633
Phone: (307)358-0722 Fax: (307)358-0724 Office email address: annsbestcare@netcommander.co
Provider number: 1619955234
Providing:

ALF Case Managemen ANN REX

CASPER/NATRONA CO. PUBLIC HEALTH 02/1995

475 SOUTH SPRUCE
CASPER WY 82601
Phone: (307)235-9340 Fax: (307)577-9774 Office email address: mary.janssen@health.wyo.gov
Provider number: 1184740979
Providing:

ALF Case Managemen TRINA SOPER
DAWN SCHOSSOW
BETH EVELAND

GARDEN SQUARE OF CASPER 04/2005

1950 SOUTH BEVERLY
CASPER WY 82601
Phone: (307)472-1153 Fax: (307)472-1123 Office email address:
Provider number: 120819500
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
NATRONA COUNTY

INTERIM HEALTHCARE 06/1994

1010 E 1ST ST. #A
CASPER WY 82601
Phone: (307) 266-1152 Fax: (307) 577-8041 Office email address:
Provider number: 1326019670
Providing:

ALF Case Managemen MARY HEINEN
HEATHER ANN SCHUMAN
PENNY SCHOLZ
ARTA SCOTT
NIKKI DAY-DARNELL
PAULA SMITH

MEADOW WIND ASSISTED LIVING FACILITY 01/2009

3955 E 12TH ST
CASPER WY 82609
Phone: (307)266-3370 Fax: (307)577-3047 Office email address:
Provider number: 128097000
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

PARK PLACE ASSISTED LIVING COMMUNITY 01/2009

1930 EAST 12TH
CASPER WY 82601
Phone: (037)265-5384 Fax: (307)265-5384 Office email address:
Provider number: 128096100
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
NATRONA COUNTY

SHARON'S HOME HEALTH CARE 03/2003

800 WERNER CT STE 200
CASPER WY 82604
Phone: (307)473-6889 Fax: (307)472-1167 Office email address: SKAN@TRIB.COM
Provider number: 1194839001
Providing:

ALF Case Managemen ANDREA LEE
TONIE BOLGER
CARLA RATH
LYNETTE WHIPPLE

ASSISTED LIVING HCBS PROVIDERS
SHERIDAN COUNTY

MEMORIAL HOSPITAL OF SHERIDAN HC 11/2008

1401 FIFTH STREET
SHERIDAN WY 82801
Phone: (307)672-1083 Fax: (307)672-2585 Office email address: mhsch@sheridanhospital.org
Provider number: 1851420939
Providing:

ALF Case Managemen LOIS JAHNKE

SENIOR CITIZEN'S COUNCIL 11/2008

211 SMITH STREET
SHERIDAN WY 82801
Phone: (307)672-2240 Fax: (307)674-9866 Office email address:
Provider number: 109141700
Providing:

ALF Case Managemen BUNI RUBY

SHERIDAN COUNTY COMMUNITY HEALTH 11/2008

294 S MAIN
SHERIDAN WY 82801
Phone: (307)672-5169 Fax: (307)672-5186 Office email address: judy.stallman@health.wyo.gov
Provider number: 1871681437
Providing:

ALF Case Managemen SUSAN FECK
KATHIE SCHONENBACH

SUGARLAND RIDGE SENIOR LIVING COMMUNITY 08/2010

1551 SUGARLAND DRIVE
SHERIDAN WY 82801
Phone: (307)674-5575 Fax: (307)674-8070 Office email address: dawn.makin@emeritus.com
Provider number: 1881908234
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
TETON COUNTY

PROFESSIONAL HOME CARE 06/1994

555 EAST BROADWAY
PO BOX 428
JACKSON WY 83001
Phone: (307) 739-7467 Fax: (307) 739-7645 Office email address: wwolff@tetonhospital.org
Provider number: 1194744235
Providing:
ALF Case Managemen WENDY WOLFF wwolff@tetonhospital.org

RIVER ROCK ASSISTED LIVING 11/2010

3000 BIG TRAIL DRIVE
JACKSON WY 83001
Phone: (307)734-0500 Fax: Office email address: davidg@riverrockalf.com
Provider number: 1518269653
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
UINTA COUNTY

BEE HIVE HOMES OF EVANSTON 04/2007

1949 W UINTA ST
EVANSTON WY 82930
Phone: (916)205-3311 Fax: (307)444-4484 Office email address:
Provider number: 124228800
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

BEST HOME HEALTH 02/2005

1575 S HWY 150 STE L_
EVANSTON WY 82930
Phone: (307)789-2899 Fax: (307)789-3480 Office email address:
Provider number: 1780615716
Providing:

ALF Case Managemen JOELLE COOK
JANILE KENNEDY

COMPASSIONATE JOURNEY, LLC 04/2011

86 ALLEGIANCE CIRCLE
EVANSTON WY 82930
Phone: (307)789-8316 Fax: (307)789-2286 Office email address: JOYBELL@VCN.COM
Provider number: 1114250727
Providing:

ALF Case Managemen WENDY LEACH
SHANNON MEEKS
CORIE BRADLEY

TENDER HEART ASSISTED LIVING 11/2006

624 TWIN RIDGE
EVANSTON WY 82930
Phone: (307)444-8969 Fax: (307)789-8907 Office email address:
Provider number: 123782900
Providing:

ALF-Level I
ALF-Leve II
ALF-Level III

ASSISTED LIVING HCBS PROVIDERS
UINTA COUNTY

UINTA HOME HEALTH 01/2004

PO BOX 728
EVANSTON WY 82931
Phone: (307)789-7712 Fax: (307)789-7191 Office email address:
Provider number: 1265479075
Providing:

ALF Case Managemen SHARON HOLLINGSHEAD
CINDY CRAWFORD
CYNTHIA CALDWELL
MARCELLA RING
KRIS STRINGER

ASSISTED LIVING HCBS PROVIDERS
WESTON COUNTY

SHARON'S HOME HEALTH CARE 03/2003

PO BOX 1899
116 N LITTLE HORN
MOORECROFT WY 82721
Phone: (307)756-3344 Fax: (307)756-3394 Office email address: skan@trib.com
Provider number: 1194839001
Providing:
ALF Case Managemen ROBIN SEELEY

WESTON COUNTY HEALTH SERVICES 09/2011

1124 WASHINGTON BLVD
NEWCASTLE WY 82701
Phone: (307)746-3553 Fax: (307)746-2475 Office email address: callison@wchs-wy.org
Provider number: 1902944333
Providing:

ALF Case Managemen CARMEN ALLISON