# **Sherwood Nursing & Rehabilitation Center, Inc.**

FAX Number: (501) 834-5644 Telephone: (501) 834-9960

#### I. FACILITY DATA

Updated:

02/15/2013

**MAILING ADDRESS** 

Administrator:

**Charla Renee Phillips** 

245 Indian Bay Drive

**Total Licensed Beds:** 

2057

98

X

Sherwood, AR 72120

**Life Safety Code Years:** 

**Admininistrator License Number:** 

2000

**PHYSICAL LOCATION** 

245 Indian Bay Drive Sherwood, AR 72120

County: Pulaski-North #60-2

Certification:

Title XIX/XVIII

**Facility Identification Numbers** 

Federal Provider: 04-5376

State License:

State Vendor:

0835

**MMIS Provider:** 

119688311

Certified Beds: 98

Medicaid:

Medicare: 0

Caid/Care:

**Private Beds:** 

O

0

98

HomestyleBeds:

Classification

NF:

SNF:

NF/SNF:

1985

ICF/MR:

ICF/MR10:

## **II. OWNERSHIP AND FINANCIAL INTEREST**

### **Type of Entity:**

Corporation

**Building Ownership** 

Leased from:

Sherwood Nursing Center, Inc. 415 Rogers Avenue

Fort Smith, AR 72901

#### **Ownership and Financial Interest**

Sherwood Nursing & Rehabilitation Center, Inc.

- 100%

**Michael Morton** 415 Rogers Avenue Fort Smith, AR 72901 (479) 783-4672

Effective May 1, 2002 - Change of Ownership and Name Change (Formerly Westlake Living Center) Letter dated March 17, 2003 from Centers for Medicare and Medicaid Services that Sherwood Nursing and Rehabilitation Center, Inc., meets the requirements for participation in the Medicare Program effective 12/19/2002.

New Medicare Federal Provider Number 04-5376. (Previous Medicaid Federal Provider Number 04-A223)

Effective 01/01/2013 - Total licensed and certified beds increase from 88 to 98. Permit of Approval 889 Health Services Commission Approval to transfer 10 beds from Stella Manor Nursing and Rehabilitation Center