

**Provider Service Information**  
**BASIC and ENDORSED SERVICES**

County: **Scotland**

Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>AGAPE ASSOCIATES, INC</b> 619 South Main Street Laurinburg, NC 28352	745 <i>Yes</i>	Patricia Knott	910-276-2072	910-276-2068	910-276-2072
<i>FundingSources: IPRS, Medicaid</i>					
Family Therapy with Patient, Family Therapy without Patient, MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child					
Community Support - Adult, Community Support - Child/Adolescent, Diagnostic Assessment					
<b>AUTISM SOCIETY OF NC</b> 1000 S Main Street Laurinburg, NC 28352	750	Steven King Suite 12	910-277-0636	910-276-2112	910-391-8258
<i>FundingSources: Medicaid</i>					
Developmental Therapy					
CAP-MR/DD Waiver Services					
<b>CAROLINA PROFESSIONAL MENTAL HEALTH</b> 17160 Plant Road Laurinburg, N. C. 28352	844 <i>No</i>	Joni Thomas	910-272-9356	910-735-1945	
<i>FundingSources: Medicaid</i>					
Developmental Therapy					
Child and Adolescent Day Treatment					
<b>CHILDREN'S TREATMENT CENTER, INC</b> Scotland House Laurinburg, NC 28352	909 <i>No</i>	Betty Smith 1500 Stewartville Road	910-276-4610	910-276-8572	910-323-3771
<i>FundingSources:</i>					
Child Residential Treatment Services					

**Provider Service Information**  
**BASIC and ENDORSED SERVICES**

County: Scotland

Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>COMMUNITY INNOVATIONS</b> 1015 West Boulevard Laurinburg, NC 28352	707	No	Martha Locklear	910-277-1577	910-374-8278
<i>FundingSources: IPRS, Medicaid</i>					

Community Support - Team, Intensive In-Home Services

<b>COMMUNITY INNOVATIONS</b> 704 Progress Place Suite B Laurinburg, NC 28352	707	No	Martha Locklear	910-277-3212	910-735-0774	910-374-8278
<i>FundingSources: Medicaid</i>						

DD Case Mgmt (TCM), Developmental Therapy, Independent Living, Language Interpretation, MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child, Supervised Living

CAP-MR/DD Waiver Services, Community Support - Adult, Community Support - Child/Adolescent, Community Support - Team, Diagnostic Assessment, Intensive In-Home Services

<b>COORDINATED HEALTH SERVICES</b> 1015 West Boulevard Laurinburg, NC 28352	706	No	Janie Scott	910-276-8112	910-276-8335	888-317-0628
<i>FundingSources: Medicaid</i>						

DD Case Mgmt (TCM), Developmental Therapy

CAP-MR/DD Waiver Services, Community Support - Adult, Community Support - Child/Adolescent, Diagnostic Assessment

<b>CROSS CREEK GROUP HOME</b> 703 Aberdeen Road Laurinburg, NC 28353	721	Yes	Peggy McRavin PO Box 2250	910-277-9280		910-277-9280
<i>FundingSources:</i>						

Developmental Therapy

Child Residential Treatment Services

County: **Scotland**

Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>CROSS CREEK GROUP HOME</b> Cross Creek Home Laurinburg, NC 28352	721 No	Peggy McRavin 321 Wilson Street	910-277-9280		910-277-9280

*FundingSources:*

Developmental Therapy

Child Residential Treatment Services

<b>CROSS CREEK GROUP HOME</b> Cross Creek Home #2 Laurinburg, NC 28352	721 No	Peggy McRavin 810 McGirts Bridge Road	910-277-9280		910-277-9280
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*FundingSources:*

Developmental Therapy

Child Residential Treatment Services

<b>EMPOWERMENT GROUP HOME CARE</b> 521 Atkinson Street Laurinburg, N. C. 28352	963 No	Tammy Hollingsworth	910-291-0085	910-291-0086	
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*FundingSources: Medicaid*

Child and Adolescent Day Treatment

<b>EVERGREEN BEHAVIORAL MANAGEMENT, INC</b> 416 Fairley Street Laurinburg, N. C. 28352	714 No	Nikki Gore	910-276-8545	910-276-8587	
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*FundingSources: IPRS, Medicaid, Medicare*

Crisis Mobil Team, DD Case Mgmt (TCM), Developmental Therapy, MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child, Psychiatric Services, Psychological Evaluations, SA Outpatient Therapy - Group Adult, SA Outpatient Therapy - Group Child, SA Outpatient Therapy - Individual Adult, SA Outpatient Therapy - Individual Child, Supervised Living

Community Support - Team, Diagnostic Assessment, Intensive In-Home Services, Mobile Crisis

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Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>GENERATIONS HEALTH SERVICES</b> 911 Atkinson Street Laurinburg, NC 28353	832 <b>Yes</b>	Agyenim A-Boateng PO Box 1887	910-291-9909	910-291-9913	910-291-9909
<i>FundingSources: Medicaid</i>					

Drug Screenings, DUI Assessments/Treatment, Forensic Evaluations, Language Interpretation, MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child, SA Outpatient Therapy - Group Adult, SA Outpatient Therapy - Group Child, SA Outpatient Therapy - Individual Adult, SA Outpatient Therapy - Individual Child

Substance Abuse Intensive Outpatnt SAIOP

<b>HELPING HANDS HEALTHCARE SERVICES</b> 306 McKay Street Laurinburg, NC 28352	941 <b>No</b>	Shawn Hobson	910-291-3270	910-291-3272	910-373-9207
<i>FundingSources: Medicaid</i>					

Community Support - Child/Adolescent

<b>MONARCH</b> Scotland Enterprises Laurinburg, NC 28352	859 <b>No</b>	Donna Bethea 1224 Biggs Street	910-276-9664	704-982-1264	704-983-3911
<i>FundingSources: Medicaid</i>					

ADVP, Developmental Therapy

CAP Crisis Services, CAP Day Support , CAP Home and Community Supports, CAP Individual/Caregiver Training/Ed, CAP Personal Care Services, CAP Residential Supports, CAP Respite, CAP Specialized Consultative Services, CAP Supported Employment, CAP-MR/DD Waiver Services

<b>NC MENTOR</b> 303-B South Main Street Laurinburg, NC 28352	701 <b>No</b>	Bethany Roarary	910-610-4494	910-610-4161	910-995-0768
<i>FundingSources: Medicaid</i>					

DD Case Mgmt (TCM), Developmental Therapy, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Child

CAP-MR/DD Waiver Services, Community Support - Adult, Community Support - Child/Adolescent, Diagnostic Assessment, Intensive In-Home Services

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Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>PROFESSIONAL PROVIDERS HOME CARE AGENCY</b> 700-B Progress Place Laurinburg, NC 28352	985 <b>Yes</b>	Paula Jones	910-276-3350	910-276-4450	910-276-3350
<i>FundingSources:</i>					

CAP-MR/DD Waiver Services

<b>RAINBOW 66 STOREHOUSE</b> 1000 South Main Street Laurinburg, NC 28352	800 <b>Yes</b>	Kimmie Johnson	910-276-0766	910-277-6295	910-276-0766
<i>FundingSources: Medicaid</i>					

Independent Living, Supervised Living

CAP-MR/DD Waiver Services

<b>RESOLUTIONS COUNSELING SERVICES</b> 910 Isabelle Street Laurinburg, NC 28353	128 <b>Yes</b>	Pearline McLean, LPC	910-276-7011	910-276-7060	
<i>FundingSources: Medicaid</i>					

MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child, SA Outpatient Therapy - Group Adult, SA Outpatient Therapy - Group Child, SA Outpatient Therapy - Individual Adult, SA Outpatient Therapy - Individual Child

<b>RFCC dba SCOTLAND FAMILY COUNSELING</b> 600 West Church Street Laurinburg, NC 28352	130 <b>Yes</b>		910-276-7011	910-276-7060	
<i>FundingSources: Medicaid</i>					

MI Outpatient Therapy - Group Adult, MI Outpatient Therapy - Group Child, MI Outpatient Therapy - Individual Adult, MI Outpatient Therapy - Individual Child, SA Outpatient Therapy - Group Adult, SA Outpatient Therapy - Group Child, SA Outpatient Therapy - Individual Adult, SA Outpatient Therapy - Individual Child

**Provider Service Information**  
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<b>SCOTLAND COUNTY ADULT DAY SERVICES</b> 425 East Church Street Laurinburg, NC 28352	978 <b>Yes</b>	Vickie L. Jones	910-276-4554		910-276-4554
<i>FundingSources:</i>					

CAP-MR/DD Waiver Services

<b>SOUTHEASTERN UNITED CARE, LLC</b> 213 West Cronly Street Laurinburg, NC 28352	936 <b>No</b>	Demetruis Locklear	910-521-9557		910-618-7952
<i>FundingSources: Medicaid, Medicare</i>					

DD Case Mgmt (TCM), Developmental Therapy

CAP-MR/DD Waiver Services, Community Support - Adult, Community Support - Child/Adolescent, Diagnostic Assessment

<b>SUNSHINE CENTER, INC</b> 21880 Center Street Wagram, NC 28396	923 <b>Yes</b>	Linda McLaughlin PO Box 473	910-734-8549		910-734-8549
<i>FundingSources: IPRS, Medicaid</i>					

DD Case Mgmt (TCM), Supervised Living

<b>TT and T SERVICES, INC</b> 434 Atkinson Street Laurinburg, NC	803 <b>No</b>	Manuel Jacobs	910-474-142	910-474-1429	910-844-1189	910-474-1429
<i>FundingSources: Medicaid</i>						

DD Case Mgmt (TCM), Developmental Therapy

Child Residential Treatment Services, Community Support - Child/Adolescent, Intensive In-Home Services

**Provider Service Information**  
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Provider Name	Corporate Office w/Srvcs	Contact Person	Phone Nu	Fax Nu	1st Responder
<b>TT and T SERVICES, INC</b> Miracle Haven of Wagram Wagram, NC 28396	803 <b>No</b>	Tonya Edwards 21701 Bundy St	910-797-7691	910-904-1157	910-797-7691
<i>FundingSources: Medicaid</i>					

DD Case Mgmt (TCM), Developmental Therapy

Community Support - Child/Adolescent, Intensive In-Home Services

<b>WOODBROUGH CHILD and FAMILY SUPPORT SVCS</b> 910 South Main Street Laurinburg, NC 28352-4737	938 <b>No</b>	Damien Johnson	910-277-2600	910-277-6200	
<i>FundingSources: Medicaid</i>					

Intensive In-Home Services