**Approved Entities**

**Waiver Number** 233

**Primary Entity Name** Hudson River HealthCare, Inc.

**Primary Address**

1037 Main Street
Peekskill
NY 10566-

**Primary Phone Number** (914) 734-8600

**County** Westchester

**Current Waiver Issued Beginning Period** 7/1/2016

**Current Waiver Ending Period** 6/30/2019

- LMSW
- LCSW
- Physical Therapy
- Occupational Therapy
- Psychology
- Audiology/Speech Lang.
- Optometry
- Nursing (RN or Nurse Practitioner)
- Medicine (Physician, Physician Asst., Specialist Asst.)

**Additional Sites if any - with Certificate Number**

**Certificate Number** - -