Approved Entities

Waiver Number	**234**		
Primary Entity Name	**Lower West Side Household Services Corp.**		
Primary Address	*16 East 40th Street* *12th Floor* *New York* *New York* *10016-*	***Primary Phone Number***	*(212) 307-7107*
		Current Waiver Issued Beginning Period	*5/1/2014*
		Current Waiver Ending Period	*4/30/2017*
County	*New York*		

☑ LMSW	☑ CAT	☑ Physical Therapy	☑ Nursing (RN or Nurse Practitioner)
☑ LCSW	☑ Psychology	☑ Occupational Therapy	☑ Medicine (Physician, Physician Asst., Specialist Asst.)
☑ Mental Health Counseling	☐ Optometry	☑ Audiology/Speech Lang.	☐ Other:

Additional Sites if any - with Certificate Number

Certificate Number	**JT - 234 - 314**	**Lower West Side HHS Corporation**