
Approved Entities

Waiver Number **298**

Primary Entity Name **Dix Hills Speech Pathology & Rehabilitation PLLC**

Primary Address *104 Majestic Drive*

Primary Phone Number *(631) 499-5404*

Dix Hills

Current Waiver Issued Beginning Period

New York

5/1/2013

11746-

Current Waiver Ending Period

County

Suffolk

4/30/2016

<input type="checkbox"/> LMSW	<input type="checkbox"/> CAT	<input checked="" type="checkbox"/> Physical Therapy	<input type="checkbox"/> Nursing (RN or Nurse Practitioner)
<input type="checkbox"/> LCSW	<input checked="" type="checkbox"/> Psychology	<input checked="" type="checkbox"/> Occupational Therapy	<input checked="" type="checkbox"/> Medicine (Physician, Physician Asst., Specialist Asst.)
<input type="checkbox"/> Mental Health Counseling	<input type="checkbox"/> Optometry	<input checked="" type="checkbox"/> Audiology/Speech Lang.	<input type="checkbox"/> Other: <input type="text"/>

Additional Sites if any - with Certificate Number

Certificate Number

- -