
Approved Entities

Waiver Number **311**

Primary Entity Name **Buffalo Hearing and Speech Center, Inc.**

Primary Address *50 East North Street*

Primary Phone Number *(716) 885-8318*

Buffalo

Current Waiver Issued Beginning Period

NY

5/1/2016

14203-

Current Waiver Ending Period

County

Erie

4/30/2019

- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> LMSW | <input checked="" type="checkbox"/> CAT | <input checked="" type="checkbox"/> Physical Therapy | <input checked="" type="checkbox"/> Nursing (RN or Nurse Practitioner) |
| <input checked="" 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"/> Licensed_Applied_Behavior_Analyst | <input type="checkbox"/> Certified_Behavior_Analyst_Assistant | <input checked="" type="checkbox"/> Audiology/Speech Lang. | <input checked="" type="checkbox"/> Mental Health Counseling |
| <input type="checkbox"/> Optometry | <input type="checkbox"/> Other: <input type="text"/> | | |

Additional Sites if any - with Certificate Number

Certificate Number

JT - 311 - 377

Buffalo Hearing and Speech Center, Inc

Certificate Number

JT - 311 - 378

Buffalo Hearing and Speech Center, Inc

Certificate Number

JT - 311 - 562

Buffalo Hearing and Speech Cener, Inc.

Certificate Number

JT - 311 - 376

Buffalo Hearing and Speech Center, Inc