Approved Entities

Waiver Number 369

Primary Entity Name Developmental Delay Rehabilitation Services

Primary Address 14 Sturbridge Court

Primary Phone Number (845) 623-3658

Current Waiver Issued Beginning Period 7/1/2013

Current Waiver Ending Period 6/30/2016

County Rockland

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: Special Education

Additional Sites if any - with Certificate Number

Certificate Number - -