
Approved Entities

Waiver Number **401**

Primary Entity Name **Julia Dyckman Andrus Memorial Inc., dba Andrus Children's Center**

Primary Address *1156 North Broadway*

Primary Phone *(914) 965-3700*

Number *1270*

Yonkers

New York

10701-

Current Waiver Issued Beginning Period

6/1/2014

Current Waiver Ending Period

5/31/2017

County

Westchester

<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 checked="" 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

- -
