Approved Entities

Waiver Number	**431**		
Primary Entity Name	**Children's Home Intervention Program, Inc.**		
Primary Address	*4024 Amboy Road*	***Primary Phone Number***	*(718) 984-9022*
	Staten Island		
	New York	***Current Waiver Issued Beginning Period***	
	10308-	*7/1/2013*	
		Current Waiver Ending Period	
County	*Richmond*	*6/30/2016*	

☑ 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 - -