Approved Entities

Waiver Number	**456**		
Primary Entity Name	**Achievement Center, Inc.**		
Primary Address	*413 N. Main Street* *Jamestown* *NY* *14701-*	***Primary Phone Number***	*(716) 488-2155*
		Current Waiver Issued Beginning Period	*7/1/2013*
		Current Waiver Ending Period	*6/30/2016*
County	*Chautauqua*		

☑ 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	- -