Approved Entities

Waiver Number	**97**		
Primary Entity Name	**Kids Quality Care, Inc.**		
Primary Address	*122 East 42nd Street* *Suite 3000* *New York* *New York* *10168-*	***Primary Phone Number***	*(212) 338-6960* *23*
		Current Waiver Issued Beginning Period	*5/1/2013*
		Current Waiver Ending Period	*4/30/2016*
County	*New York*		

☐ 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: Licensed Speech Pathologist

Additional Sites if any - with Certificate Number

Certificate Number - -