
Approved Entities

Waiver Number **98**

Primary Entity Name **ACDS**

Primary Address *4 Fern Place*

Primary Phone Number *(516) 933-4700*

Plainview

Current Waiver Issued Beginning Period

NY

7/1/2016

11803-

Current Waiver Ending Period

County

Nassau

6/30/2019

LMSW

CAT

Physical Therapy

Nursing (RN or Nurse Practitioner)

LCSW

Psychology

Occupational Therapy

Medicine (Physician, Physician Asst., Specialist Asst.)

Licensed_Applied_Behavior_Analyst

Certified_Behavior_Analyst_Assistant

Audiology/Speech Lang.

Mental Health Counseling

Optometry

Other:

Additional Sites if any - with Certificate Number

Certificate Number