

Approved Entities

Waiver Number **1027**

Primary Entity Name **Fountain House Inc**

Primary Address *425 West 47th Street*

Primary Phone Number *(212) 582-0340*

New York

Current Waiver Issued Beginning Period

NY

6/1/2015

10036-

Current Waiver Ending Period

County *New York*

5/31/2018

Professional Services to be Offered by Qualified Individuals:

<input checked="" type="checkbox"/> Licensed Master Social Work	<input type="checkbox"/> Licensed Marriage and Family Therapy	<input type="checkbox"/> Licensed Psychoanalysis
<input checked="" type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input checked="" type="checkbox"/> Licensed Mental Health Counseling	<input type="checkbox"/> Licensed Behavior Analyst	<input type="checkbox"/> Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number	CW - 1027 - 5130	Independent Support Program
Certificate Number	CW - 1027 - 5129	ACE Employment Program

<i>Certificate Number</i>	CW - 1027 - 5128	Supported SRO Housing Program
<i>Certificate Number</i>	CW - 1027 - 5127	ACCES Employment Program
<i>Certificate Number</i>	CW - 1027 - 5126	Ticket to Work Employment Program
<i>Certificate Number</i>	CW - 1027 - 5125	On Going Integrated Supported Employment Program
<i>Certificate Number</i>	CW - 1027 - 5124	SRO Program
<i>Certificate Number</i>	CW - 1027 - 5123	Safe Haven Program
<i>Certificate Number</i>	CW - 1027 - 5122	Mobile Outreach Program
<i>Certificate Number</i>	CW - 1027 - 5121	Community Support Services Clubhouse Program