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## *Approved Entities*

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**Waiver Number**                    **1133**

**Primary Entity Name**            **New Destiny Housing Corporation**

**Primary Address**                    *12 West 37th Street 7th Floor*

**Primary Phone Number**            *(646) 472-0262*

*New York*

**Current Waiver Issued Beginning Period**

*NY*

*5/1/2015*

*10018-*

**Current Waiver Ending Period**

**County**                                *New York*

*4/30/2018*

**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 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**

<b>Certificate Number</b>	<b>CW - 1133 - 4344</b>	<b>Bridge Community</b>
<b>Certificate Number</b>	<b>CW - 1133 - 4343</b>	<b>Marcello Manor</b>