
Approved Entities

Waiver Number **1271**

Primary Entity Name **Alcoholism Council of New York**

Primary Address *2 Washington Street*
7th Floor
New York
NY
10004-

Primary Phone *(212) 252-7001*
Number

Current Waiver Issued Beginning Period
4/1/2013

Current Waiver Ending Period
3/31/2016

County *NY*

Professional Services to be Offered by Qualified Individuals:

<input type="checkbox"/> Licensed Master Social Work	<input type="checkbox"/> Licensed Marriage and Family Therapy	<input type="checkbox"/> Licensed Psychoanalysis
<input 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 Behavioral Analyst	<input type="checkbox"/> Certified Behavioral Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number

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