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## *Approved Entities*

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**Waiver Number**                    **1476**

**Primary Entity Name**            **LiveOnNY**

**Primary Address**                *460 W. 34th Street, 15th Floor*

**Primary Phone Number**        *(646) 291-4444*

*New York*

**Current Waiver Issued Beginning Period**

*NY*

*4/11/2016*

*10001-*

**Current Waiver Ending Period**

**County**

*Manhattan*

*4/30/2019*

**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 Behavioral Analyst	<input type="checkbox"/> Certified Behavioral Analyst Assistant

**Additional Sites if any - with Certificate Number**

**Certificate Number**

**CW - 1476 - 6844**

**LiveOn NY**