Approved Entities

Waiver Number	**179**		
Primary Entity Name	**Healthy Community Alliance Inc**		
Primary Address	*1 School St., Suite 100*	***Primary Phone Number***	*(716) 532-1010*
	Gowanda		
	NY	***Current Waiver Issued Beginning Period***	
	14070-	*3/15/2013*	
		Current Waiver Ending Period	
County	*Cattaraugus*	*3/30/2016*	

Professional Services to be Offered by Qualified Individuals:

☑ Licensed Master Social Work	☐ Licensed Marriage and Family Therapy	☐ Licensed Psychoanalysis
☐ Licensed Clinical Social Work	☐ Licensed Creative Arts Therapy	☐ Psychology
☑ Licensed Mental Health Counseling	☐ Licensed Behavioral Analyst	☐ Certified Behavioral Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number	**CW - 179 - 24**	**Rural Youth Counseling Program**