
Approved Entities

Waiver Number **181**

Primary Entity Name **Adirondack Samaritan Counseling Center Inc.**

Primary Address *15 Boulevard*

Primary Phone *(518) 747-2994*
Number

Hudson falls

Current Waiver Issued Beginning Period

NY

3/15/2015

12839-

Current Waiver Ending Period

County

Washington

3/31/2018

Professional Services to be Offered by Qualified Individuals:

<input checked="" type="checkbox"/> Licensed Master Social Work	<input checked="" 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 checked="" type="checkbox"/> Psychology
<input checked="" 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

- -