Approved Entities

Waiver Number	**405**		
Primary Entity Name	**Assistance by Improv Services for Developmentally Disabled**		
Primary Address	*1015 Grand Concourse Suite 1G* *New York* *NY* *10452-*	***Primary Phone Number***	*(718) 618-7337*
		Current Waiver Issued Beginning Period	*7/1/2012*
		Current Waiver Ending Period	*6/30/2015*
County	*Bronx*		

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		

Additional Sites if any - with Certificate Number

Certificate Number	- -