Approved Entities

Waiver Number	**499**		
Primary Entity Name	**Door-A Center of Alternatives, The**		
Primary Address	*555 Broome St (121 Ave of the Americas)*	***Primary Phone Number***	*(212) 453-0293*
	New York		
	NY	***Current Waiver Issued Beginning Period***	
	10013-	*4/1/2016*	
		Current Waiver Ending Period	
County	*Manhattan*	*3/31/2019*	

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 - 499 - 6813**	**Bronx Youth Center**
Certificate Number	**CW - 499 - 6812**	**Broome Street Academy High School**