
Approved Entities

Waiver Number **550**

Primary Entity Name **LIFT Inc.**

Primary Address *2715 Bainbridge Avenue*

Primary Phone *(718) 733-3897*
Number

Bronx

NY

10458-

Current Waiver Issued Beginning Period
4/1/2013

Current Waiver Ending Period
3/31/2016

County *Bronx*

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		

Additional Sites if any - with Certificate Number

Certificate Number

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