Approved Entities

Waiver Number	**646**		
Primary Entity Name	**Jewish Family Service of Orange County, Inc.**		
Primary Address	*720 Route 17M*	***Primary Phone Number***	*(845) 341-1173*
	Middletown		
	NY	***Current Waiver Issued Beginning Period***	
	10940-	*6/1/2015*	
		Current Waiver Ending Period	
County	*Orange*	*5/31/2018*	

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 Behavior Analyst	☐ Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number	- -