Approved Entities

Waiver Number	**759**		
Primary Entity Name	**The New York State Institute on Disability Inc NYSID**		
Primary Address	*25 Beaver Street*	***Primary Phone Number***	*(718) 494-6457*
	New York		
	NY	***Current Waiver Issued Beginning Period***	
	10004-	*5/10/2015*	
		Current Waiver Ending Period	
County	*Manhattan*	*5/9/2018*	

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	- -