Washington State Directory of Certified Mental Health, Substance Use Disorder, and Problem & Pathological Gambling Services

June 2018

Referrals to Behavioral Health Services and Crisis Intervention:

- Teen Link: 1-866-833-6546
- Substance Abuse and Mental Health Services Administration Treatment Services Locator A federal government website with information for buprenorphine for opioid addiction, methadone treatment programs, suicide prevention lifeline, 24/7 treatment referral line, disaster distress helpline, and more.
ADAMS COUNTY INTEGRATED HEALTH CARE SERVICES - OTHELLO MAIN
425 EAST MAIN STREET, SUITE 600
OTHELLO, WA 99344
(509) 488-4074
(509) 488-5611
CCS@CO.ADAMS.WA.US
WWW.CO.ADAMS.WA.US

VICKI GUSE
ADMINISTRATOR

GLORIA OCHOA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
425 E MAIN ST STE 600
OTHELLO, WA 99344

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200323
ADAMS COUNTY INTEGRATED HEALTH CARE SERVICES - RITZVILLE
108 EAST MAIN STREET
RITZVILLE, WA 99169
(509) 488-4074
(509) 659-4317
CCS@CO.ADAMS.WA.US
WWW.CO.ADAMS.WA.US

VICKI GUSE
ADMINISTRATOR

AMANDA ZEPEDA
MH CLINICAL SUPERVISOR

MAILING ADDRESS
425 E MAIN ST STE 600
OTHELLO, WA 99344

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
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PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

ASOTIN

014600
QUALITY BEHAVIORAL HEALTH - CLARKSTON
900 7TH STREET
CLARKSTON, WA 99403
(509) 758-3341
WWW.QBHS.ORG

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403
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<td><strong>ADVOCATES FOR WELLNESS, LLC</strong></td>
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<td>4911 WEST CANAL DRIVE</td>
<td>120 VISTA WAY</td>
</tr>
<tr>
<td>KENNEWICK, WA 99336</td>
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<tr>
<td>(509) 735-7410</td>
<td>(509) 783-8833</td>
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<tr>
<td><strong>Mailing Address</strong></td>
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<tr>
<td>PO BOX 5697</td>
<td>120 VISTA WAY</td>
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<td>2139 VAN GIESEN STREET</td>
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<td>RICHLAND, WA 99354</td>
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<tr>
<td>(509) 965-7100</td>
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<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
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<td><strong>CHILD ENRICHMENT CENTER - MAIN</strong></td>
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<td>1950 KEENE ROAD, BUILDING L</td>
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<td>RICHLAND, WA 99352</td>
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<td>(509) 420-3442</td>
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<td><a href="mailto:CHILDRENRICHMENTCENTER@GMAIL.COM">CHILDRENRICHMENTCENTER@GMAIL.COM</a></td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

200236
LOURDES COUNSELING CENTER - CULLUM HOUSE
208 CULLUM AVENUE
RICHLAND, WA 99352
(509) 946-5918
WWW.YOURLOURDES.COM
MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
DANA OTIS
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200237
LOURDES COUNSELING CENTER - E&T
1175 CARONDELET DRIVE
RICHLAND, 99354
MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO
DANA OTIS
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200428
LOURDES COUNSELING CENTER - KENNEWICK
500 NORTH MORAIN STREET, SUITE 1250
KENNEWICK, WA 99336
(509) 943-9104
MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
TONY LARSON
CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT

025202
LOURDES COUNSELING CENTER - MAIN
1175 CARONDELET DRIVE
RICHLAND, WA 99354
(509) 943-9104
(509) 943-7215
LOURDESHEALTH.NET
MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
DAVID LOWE
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200188

LOURDES COUNSELING CENTER - TRIAGE
1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO

DANA OATIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

200088

LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK AVENUE
3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336

SHARON GENTRY
DISTRICT DIRECTOR

ROCHELLE BRUNSDON
MH CLINICAL SUPERVISOR

MAILING ADDRESS
3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336

200501

LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK MORAIN
500 NORTH MORAIN STREET, SUITE 1200
KENNEWICK, WA 99336

SHARON GENTRY
DISTRICT DIRECTOR

ROCHELLE BRUNSDON
CLINICAL SUPERVISOR

MAILING ADDRESS
3321 W KENNEWICK AVE
KENNEWICK, WA 99336
BENTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
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- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200470
MERIT RESOURCE SERVICES - KENNEWICK
7510 WEST DESCHUTES PLACE
KENNEWICK, WA 99336
(509) 579-0738
(844) 367-0792
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

MAILING ADDRESS
PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT

200321
RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON
1950 KEENE ROAD, BUILDING G
RICHLAND, WA 99352
(509) 619-0519
INFO@RECOVERYANDWELLNESS.ORG
WWW.RECOVERYANDWELLNESS.ORG

MAILING ADDRESS
1950 KEENE ROAD, BUILDING G
RICHLAND, WA 99352

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- DAY SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

200397
RELIANCE HEALTH SYSTEMS - NEUROPSYCH PROGRAM
1446 SPAULDING PARK, SUITE 303
RICHLAND, WA 99352
(509) 420-5060
INFO@RELIANCEHEALTHSYSTEMS.COM
WWW.RELIANCEHEALTHSYSTEMS.COM

MAILING ADDRESS
1446 SPAULDING PARK, SUITE 303
RICHLAND, WA 99352

KISHORE SHM VARADA
CHAIRMAN/CEO

LINDA ROBB
MH CLINICAL SUPERVISOR
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<td>1445 SPAULDING PARK, RICHLAND, WA 99352</td>
<td>KISHORE SHM VARADA</td>
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<td>MINGHUA ZHU</td>
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<td>105200</td>
<td>SOMERSET COUNSELING CENTER, LLC</td>
<td>1305 MANSFIELD STREET, SUITE 6, RICHLAND, WA 99352</td>
<td>JAIME CARSON</td>
<td>EXECUTIVE DIRECTOR</td>
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<td>GARY L. SOMDAHL</td>
<td>CLINICAL SUPERVISOR</td>
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<td>TRI-CITIES COMMUNITY HEALTH - KENNEWICK</td>
<td>3180 WEST CLEARWATER AVENUE, SUITE E, KENNEWICK, WA 99336</td>
<td>DELL ANDERSON</td>
<td>DIRECTOR</td>
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<td>HECTOR BOBBY GUZMAN</td>
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<td>TRI-CITIES COMMUNITY HEALTH - RICHLAND</td>
<td>829 GOETHALS DRIVE, RICHLAND, WA 99352</td>
<td>DELL ANDERSON</td>
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BENTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL THERAPY
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

CHELAN

200445
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
WENATCHEE ELLIOT STREET
627 ELLIOT STREET
WENATCHEE, WA 98801
(509) 662-6761
WWW.CCYAKIMA.ORG

MAILING ADDRESS
145 S WORTHEN ST
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

DARLENE DARNELL
PRESIDENT & CEO
SHAWN DE LANCY
PROGRAM MANAGER

200342
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
WENATCHEE MOBILE OFFICE
504 SOUTH CHELAN AVENUE
WENATCHEE, WA 98801
(509) 662-6761
WWW.CCYAKIMA.ORG

MAILING ADDRESS
145 S WORTHEN ST
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

DARLENE DARNELL
PRESIDENT & CEO
ERIC SKANSGAARD
DIRECTOR OF COMMUNITY INTEGRATION

200149
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
WENATCHEE WORTHEN STREET
145 SOUTH WORTHEN STREET
WENATCHEE, WA 98801
(509) 662-6761
(509) 888-2118
WWW.CCYAKIMA.ORG

MAILING ADDRESS
5301 TIETON DR
YAKIMA, WA 98908

DARLENE DARNELL
PRESIDENT & CEO
LOUANN PIERCE
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
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- CASE MANAGEMENT
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- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200065 CHILDREN'S HOME SOCIETY OF WASHINGTON - WENATCHEE
1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801
(509) 663-0034
JANICA.LOCKHART@CHS-WA.ORG
WWW.CHILDRENSHOMESOCIETY.ORG

MAILING ADDRESS
1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
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- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

151900 COLUMBIA COUNSELING 607, LLC
610 NORTH MISSION STREET # 106
WENATCHEE, WA 98801
(509) 888-4404

MAILING ADDRESS
610 N MISSION ST # 200
WENATCHEE, WA 98801

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

200161 COLUMBIA VALLEY COMMUNITY HEALTH - CHELAN
105 SOUTH APPLE BLOSSOM DRIVE
CHELAN, WA 98816
(509) 662-4296
(509) 682-6000
WWW.CVCH.ORG

MAILING ADDRESS
600 ORONDO AVE STE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE EASY WAY
140 EASY WAY
WENATCHEE, WA 98801
(509) 662-6000
WWW.CVCH.ORG

MAILING ADDRESS
600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE MAIN
600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801
(509) 662-4296
BHEALTHASSISTANTS@CVCH.ORG
WWW.CVCH.ORG

MAILING ADDRESS
600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CHRN CHRISTOPHER HOUSE, LLC
100 & 101 SOUTH CLEVELAND AVENUE
WENATCHEE, WA 98801
(509) 888-0773
KARINA@CHRNCHRISTOPHERHOUSE.COM
WWW.CHRNCHRISTOPHERHOUSE.COM

MAILING ADDRESS
100 S CLEVELAND AVE
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

NEW HOPE RECOVERY, LLC
238 NORTH CHELAN AVENUE
WENATCHEE, WA 98801
(509) 293-7724

RAYMOND MORRIS REGAN
ADMINISTRATOR

YVONNE REGAN
CLINICAL SUPERVISOR
CHELAN

MAILING ADDRESS
238 N CHELAN AVE
WENATCHEE, WA 98801

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

145900
SHIPWICK-SMITH COUNSELING & POSITIVE LIVING CENTER
326 NORTH MILLER STREET
WENATCHEE, WA 98801
(509) 667-0679

MELISSA PAYNE
ADMINISTRATOR
WAYNE HERSEL
CLINICAL SUPERVISOR

MAILING ADDRESS
326 N MILLER ST
WENATCHEE, WA 98801

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

THE CENTER FOR ALCOHOL AND DRUG TREATMENT
327 OKANOGAN AVENUE
WENATCHEE, WA 98801
(509) 662-9673

LORETTA STOVER
EXECUTIVE DIRECTOR
CHRISTOPHER TIPPETT
CLINICAL DIRECTOR

MAILING ADDRESS
327 OKANOGAN AVE
WENATCHEE, WA 98801

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

THE SANCTUARY AT THE LAKE
503 EAST HIGHLAND AVENUE
CHELAN, WA 98816
(509) 682-8524
(509) 682-6108

JANE Jedwabny
PROGRAM DIRECTOR
KERRY HOUSDEN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

CLALLAM

162400
CEDAR GROVE COUNSELING, INC. - FORKS
494 SOUTH FORKS AVENUE
FORKS, WA 98331
(360) 374-2134

GILL ORR
ADMINISTRATOR
CLALLAM

MAILING ADDRESS
221 N RACE ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

050500
CEDAR GROVE COUNSELING, INC. - PORT ANGELES
221 NORTH RACE STREET
PORT ANGELES, WA 98362
(360) 452-2443
GILL ORR
DIRECTOR

MAILING ADDRESS
221 NORTH RACE STREET
PORT ANGELES, WA 98362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

169400
DOC - CLALLAM BAY CORRECTIONS CENTER
1830 EAGLE CREST WAY
CLALLAM BAY, WA 98326
(360) 725-8602
DAWN WILLIAMS
ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123
OLYMPIA, WA 98504-4112

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

076700
DOC - OLYMPIC CORRECTIONS CENTER
11235 HOH MAINLINE ROAD
FORKS, WA 98331
(360) 725-8628
DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

022600
KLALLAM COUNSELING SERVICES
933 EAST 1ST STREET
PORT ANGELES, WA 98362
(360) 452-4432
STORMY HOWELL
KCS TREATMENT PROGRAM MANAGER
ANGELIQUE BERGLUND
CLINICAL SUPERVISOR

MAILING ADDRESS
933 E 1ST ST
PORT ANGELES, WA 98362
CLALLAM

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

022800
MAKAH RECOVERY SERVICES
100 WELLNESS WAY
NEAH BAY, WA 98357
(360) 645-2461

MAILING ADDRESS
PO BOX 152
NEAH BAY, WA 98357-0152

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

BETTY POFFENBARGER
BEHAVIORAL HEALTH MANAGER

JESSIE PAQUE
CLINICAL SUPERVISOR

086000
OLYMPIC PERSONAL GROWTH CENTER
390 EAST CEDAR STREET
SEQUIM, WA 98382
(360) 681-8463

MAILING ADDRESS
PO BOX 3175
SEQUIM, WA 98382

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

KRISTINA BULLINGTON
ADMINISTRATOR

ANDREW DALY
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

200258
PENINSULA BEHAVIORAL HEALTH - ARLENE ENGEL
HOME
138 WEST 2ND STREET
PORT ANGELES, WA 98362

MAILING ADDRESS
118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

WENDY SISK
CEO

200261
PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY
RESPITE CENTER
112 EAST 8TH STREET
PORT ANGELES, WA 98362

WENDY SISK
CEO
CLALLAM

MAILING ADDRESS
118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS STABILIZATION
GROUP THERAPY
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

200259
PENINSULA BEHAVIORAL HEALTH - HORIZON CENTER
205 EAST 5TH STREET
PORT ANGELES, WA 98362

WENDY SISK
CEO

MAILING ADDRESS
118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

015000
PENINSULA BEHAVIORAL HEALTH - MAIN
118 EAST 8TH STREET
PORT ANGELES, WA 98362
(360) 457-0431

WENDY SISK
CEO

STEPHANIE DILTZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200260
PENINSULA BEHAVIORAL HEALTH - SEQUIM
490 NORTH 5TH AVENUE
SEQUIM, WA 98382

WENDY SISK
CEO
CLALLAM

MAILING ADDRESS
118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

169500
PENINSULA COUNSELING
435 WEST BELL STREET, SUITE D
SEQUIM, WA 98382
(360) 797-1429

MAILING ADDRESS
435 WEST BELL STREET, SUITE D
SEQUIM, WA 98382

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SHELLEY A. HUNTINGTON
ADMINISTRATOR
DALIS L. LAGROTTA
CLINICAL DIRECTOR

043600
QUILEUTE COUNSELING AND RECOVERY SERVICES
560 QUILEUTE HEIGHTS
LA PUSH, WA 98350
(360) 374-4317

MAILING ADDRESS
PO BOX 189
LA PUSH, WA 98350

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

ANDREW SHOGREN
HEALTH DIRECTOR
JANICE BARRERA
CLINICAL SUPERVISOR

155000
REFLECTIONS COUNSELING SERVICES GROUP
3430 EAST HIGHWAY 101
PORT ANGELES, WA 98362
(360) 452-4062

MAILING ADDRESS
PO BOX 478
PORT ANGELES, WA 98362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

G'NELL ASHLEY
ADMINISTRATOR
GLENDA COLEMAN
PROGRAM DIRECTOR
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<th>Service ID</th>
<th>Service Name</th>
<th>Address 1</th>
<th>City, State</th>
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<td>158400</td>
<td>SPECIALTY SERVICES II, LLC</td>
<td>825 EAST 5TH STREET</td>
<td>PORT ANGELES, WA</td>
<td>(360) 477-4790</td>
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<td></td>
<td>LEAH SILVAS ADMINISTRATOR</td>
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<td>PO BOX 141106</td>
<td>SPOKANE VALLEY, WA</td>
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<td>RESIDENTIAL TREATMENT FACILITY</td>
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<tr>
<td>177400</td>
<td>SPECIALTY SERVICES III, LLC</td>
<td>825 EAST 5TH STREET</td>
<td>PORT ANGELES, WA</td>
<td>(509) 232-5766</td>
<td>(360) 740-4790</td>
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<td>JOHN TAYLOR ADMINISTRATOR</td>
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<td></td>
<td>ANGELA MELLO CLINICAL SUPERVISOR</td>
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<td>109800</td>
<td>TRILLIUM TREATMENT CENTER</td>
<td>528 WEST 8TH STREET</td>
<td>PORT ANGELES, WA</td>
<td>(360) 457-9200</td>
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<td>LARRY SUTTON ADMINISTRATOR</td>
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<td>VICKIE SUTTON CLINICAL SUPERVISOR</td>
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<td>095600</td>
<td>TRUE STAR BEHAVIORAL HEALTH SERVICES</td>
<td>1912 WEST 18TH STREET</td>
<td>PORT ANGELES, WA</td>
<td>(360) 417-2282</td>
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<td>JODY JACOBSEN ADMINISTRATOR</td>
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<tr>
<td></td>
<td>JULI LEONARD BUCHMANN CLINICAL SUPERVISOR</td>
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<td>1912 W 18TH ST.</td>
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<tr>
<td>000800</td>
<td>WEST END OUTREACH SERVICES</td>
<td>530 BOGACHIEL WAY</td>
<td>FORKS, WA</td>
<td>(360) 374-6177</td>
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</tr>
<tr>
<td></td>
<td>TANYA MACNEIL DIRECTOR</td>
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<td>GARY WEBB PROGRAM COORDINATOR</td>
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</tbody>
</table>
**CLALLAM**

**MAILING ADDRESS**
530 BOGACHIEL WY
FORKS, WA 98331

**CERTIFIED SERVICES**

**SUBSTANCE USE DISORDER SERVICES:**
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

**MENTAL HEALTH SERVICES:**
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY IN VOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- DAY SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

**CLARK**

**AFFINITY COUNSELING AND TREATMENT**

**CERTIFIED SERVICES**

**SUBSTANCE USE DISORDER SERVICES:**
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

**MENTAL HEALTH SERVICES:**
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY IN VOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- DAY SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

**ASSOCIATES FOR PSYCHIATRIC & MENTAL HEALTH, LLC**

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

**CATHOLIC COMMUNITY SERVICES - VANCOUVER**

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
CLARK

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200438
CENTER FOR AUTISM AND RELATED DISORDERS
9901 NORTHEAST 7TH AVENUE, SUITE C-116
VANCOUVER, WA 98685
(360) 571-2432
(855) 345-2273
INFO@CENTERFORAUTISM.COM
WWW.CENTERFORAUTISM.COM

MAILING ADDRESS
21600 OXNARD ST STE 1800
WOODLAND HILLS, CA 91367

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)

200369
CHILDREN'S CENTER - BATTLE GROUND
11117 NORTHEAST 189TH STREET, SUITE 311
BATTLE GROUND, WA 98604
(360) 699-2244
WWW.THECHILDRENSCENTER.ORG

MAILING ADDRESS
13500 SE 7TH ST
VANCOUVER, WA 98683

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

200026
CHILDREN'S CENTER - MAIN
13500 SOUTHEAST 7TH STREET
VANCOUVER, WA 98686
(360) 699-2244
MANAGEMENT@THECHILDRENSCENTER.ORG
WWW.THECHILDRENSCENTER.ORG

MAILING ADDRESS
13500 SE 7TH STREET
VANCOUVER, WA 98686

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
<table>
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<tr>
<th>Location</th>
<th>Address</th>
<th>Contact Person</th>
<th>Services</th>
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<tbody>
<tr>
<td>200071</td>
<td>CHILDREN'S HOME SOCIETY OF WASHINGTON - BATTLE GROUND</td>
<td>LIBBY HEIN</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, RECOVERY PEER SUPPORT</td>
</tr>
<tr>
<td>200068</td>
<td>CHILDREN'S HOME SOCIETY OF WASHINGTON - VANCOUVER COLUMBIA STREET</td>
<td>LIBBY HEIN</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION, RECOVERY PEER SUPPORT</td>
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<tr>
<td>200069</td>
<td>CHILDREN'S HOME SOCIETY OF WASHINGTON - VANCOUVER MAIN</td>
<td>LIBBY HEIN</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION, RECOVERY PEER SUPPORT</td>
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<tr>
<td>200066</td>
<td>CHILDREN'S HOME SOCIETY OF WASHINGTON - WASHOUGAL</td>
<td>LIBBY HEIN</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION, RECOVERY PEER SUPPORT</td>
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</table>
CLARK

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY PEER SUPPORT

200526

CHOICE WELLNESS CENTERS, LLC
1610 C STREET, SUITE 102
VANCOUVER, WA 98663
(360) 785-0225
(866) 341-2041
ESTELA.CLEMENTE@CHOICEWELLNESSLLC.COM
WWW.CHOICEWELLNESSLLC.COM

MAILING ADDRESS
16420 SE MCGILLIVRAY BLVD STE 103 BOX 194
VANCOUVER, WA 98683

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION

200064

CLARK COUNTY DEPARTMENT OF COMMUNITY SERVICES
1601 EAST 4TH PLAIN BOULEVARD BUILDING 17, SUITE A-152
VANCOUVER, 98661

MAILING ADDRESS
PO BOX 5000
VANCOUVER, 98666-5000

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT

174800

COLUMBIA RIVER MENTAL HEALTH SERVICES - BATTLE GROUND
20 NORTHWEST 20TH AVENUE
BATTLE GROUND, WA 98604
(360) 597-9731

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
COLUMBIA RIVER MENTAL HEALTH SERVICES -
ELAHAN PLACE
7415 NORTHEAST 94TH AVENUE
VANCOUVER, WA 98662
(360) 253-6019
WWW.CRMHS.ORG

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

COLUMBIA RIVER MENTAL HEALTH SERVICES -
ESTHER STREET
1012 ESTHER STREET
VANCOUVER, WA 98660
(360) 993-3000
WWW.CRMHS.ORG

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

CRAIG PRIDEMORE
CEO

JEANNE HEHLEN
THERAPIST III - LEAD

COLUMBIA RIVER MENTAL HEALTH SERVICES -
HAZEL DELL
9105 NORTHEAST HIGHWAY 99, SUITE 201A
VANCOUVER, WA 98665
(360) 579-9721
WWW.CRMHS.ORG

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

CRAIG PRIDEMORE
CEO

JEANNE HEHLEN
THERAPIST III - LEAD

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

COLUMBIA RIVER MENTAL HEALTH SERVICES -
VANCOUVER MAIN
6926 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98661-7254
(360) 993-3000
(360) 993-3003

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

068600

COLUMBIA TREATMENT SERVICES
7017 NORTHEAST HIGHWAY 99, SUITE 114
VANCOUVER, WA 98665
(360) 694-7484

MAILING ADDRESS
7017 NE HIGHWAY 99 STE 114
VANCOUVER, WA 98665

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

200302

COMMUNITY SERVICES NORTHWEST - 39TH STREET
317 EAST 39TH STREET
VANCOUVER, WA 98663
(360) 397-8484
WWW.COMMUNITYSERVICESNW.ORG

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668-1845

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY PEER SUPPORT

200139

COMMUNITY SERVICES NORTHWEST - BATTLE GROUND
11117 NORTHEAST 189TH STREET
BATTLE GROUND, WA 98604
(360) 397-8484
(360) 397-8004
WWW.COMMUNITYSERVICESNW.ORG

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- RECOVERY PEER SUPPORT
COMMUNITY SERVICES NORTHWEST - MAIN
1601 EAST FOURTH PLAIN BLVD., BLDG. 17, STE. B222
VANCOUVER, WA 98661
(360) 397-8484

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668-1845

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

COMMUNITY SERVICES NORTHWEST - TOWN PLAZA
5411 EAST MILL PLAIN BOULEVARD, SUITE 16
VANCOUVER, WA 98661
(360) 397-8484
WWW.COMMUNITYSERVICESNW.ORG

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT

CONSUMER VOICES ARE BORN (CVAB) - REACH CENTER
1601 EAST FOURTH PLAIN BLVD, BLDG 17, SUITE A114
VANCOUVER, WA 98661
(360) 397-8050
(866) 944-2822
WWW.CVABONLINE.COM

MAILING ADDRESS
PO BOX 1707
VANCOUVER, WA 98668

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS PEER SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
200133 CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER
10201 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98662
(360) 397-8050
WWW.CVABONLINE.COM
MACKENZIE DUNHAM
CLINICAL DIRECTOR
BRAD BERRY
EXECUTIVE DIRECTOR
MAILING ADDRESS
PO BOX 1707
VANCOUVER, WA 98668
Mailing Address
PO BOX 1707
VANCOUVER, WA 98668
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CLUBHOUSE
CRISIS PEER SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
128700 COWLITZ TRIBAL TREATMENT PROGRAM - VANCOUVER
7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665
(360) 397-8228
SYBIL IVerson
SUBSTANCE USE PROGRAM ADMINISTRATOR
CHELCIE KOLASKI
CLINICAL SUPERVISOR
MAILING ADDRESS
7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
200451 DAYBREAK YOUTH SERVICES - BRUSH PRAIRIE
11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606
(360) 635-4120
WWW.DAYBREAKYOUTHSERVICES.ORG
CHRISTINE GJESVOLD
MH CLINICAL SUPERVISOR
ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR
MAILING ADDRESS
11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT – CHILDREN
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY
155400 DAYBREAK YOUTH SERVICES - VANCOUVER OUTPATIENT
11818 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 307
VANCOUVER, WA 98684
(360) 750-9635
WWW.DAYBREAKYOUTHSERVICES.ORG
CHRISTINA GJESVOLD
SUD CLINICAL SUPERVISOR
ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR
CLARK

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

077500

DOC - LARCH CORRECTIONS CENTER
15314 NORHEAST DOLE VALLEY ROAD
YACOLT, WA 98675
(360) 725-8628

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

200433

FAMILY SOLUTIONS - 114TH AVENUE BRANCH
2612 NORTHEAST 114TH AVENUE, SUITE 6
VANCOUVER, WA 98684
(360) 695-1014
LBROWN@FAMILY-SOLUTIONS.NET
WWW.FAMILY-SOLUTIONS.NET

LISA CARPENTER
EXECUTIVE DIRECTOR
TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS
1014 MAIN ST
VANCOUVER, WA 98660

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200061

FAMILY SOLUTIONS - MAIN AGENCY
1014 MAIN STREET
VANCOUVER, WA 98660
(360) 695-1014
LBROWN@FAMILY-SOLUTIONS.NET
WWW.FAMILY-SOLUTIONS.NET

LISA CARPENTER
EXECUTIVE DIRECTOR
TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS
1014 MAIN STREET
VANCOUVER, WA 98660

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
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<th>Location</th>
<th>Address Details</th>
<th>Executive Director</th>
<th>Certified Services</th>
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</table>
| 200415   | FAMILY SOLUTIONS - MAIN STREET BRANCH  
1104 MAIN STREET, SUITE 500  
VANCOUVER, WA 98660  
(360) 695-1014  
LBROWN@FAMILY-SOLUTIONS.NET  
WWW.FAMILY-SOLUTIONS.NET | LISA CARPENTER  
EXECUTIVE DIRECTOR  
TRACY ARNEY  
CLINICAL DIRECTOR | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT |
| 173700   | HELPING PROFESSIONALS WELLNESS CENTER, LLC -  
BATTLE GROUND  
1710 WEST MAIN STREET, SUITE 110  
BATTLE GROUND, WA 98604  
(360) 687-3222  
(360) 687-0693 | LAURIE ELLETT  
EXECUTIVE DIRECTOR | SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT |
| 173800   | HELPING PROFESSIONALS WELLNESS CENTER, LLC -  
HAZEL DELL  
9013 NORTHEAST HIGHWAY 99, SUITES Q & V  
VANCOUVER, WA 98665  
(360) 687-0693 | LAURIE ELLETT  
EXECUTIVE DIRECTOR | SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT |
| 200074   | INSTITUTE FOR FAMILY DEVELOPMENT - VANCOUVER  
1313 NORTHEAST 134TH STREET, SUITE 220A  
VANCOUVER, WA 98685 | CHARLOTTE BOOTH  
EXECUTIVE DIRECTOR | MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT |
Kaiser Permanente Dept. of Addiction Medicine
12607 East Mill Plain Boulevard
Vancouver, WA 98684-4098
(360) 418-6001

DAN P. RUSH
CLINICAL DIRECTOR

LINDA MADDEN
CLINICAL SUPERVISOR

Mailing Address:
12607 E Mill Plain Blvd
Vancouver, WA 98684-4098

Certified Services:
Substance Use Disorder Services:
Level I Outpatient
Level II Intensive Outpatient

LifeLine Connections - Camas
329 Northeast Lechner Street
Camas, WA 98607
(360) 397-8246
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

Mailing Address:
PO Box 1678
Vancouver, WA 98668

Certified Services:
Substance Use Disorder Services:
DUI Assessment
Level I Outpatient
Level II Intensive Outpatient

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Peer Support

LifeLine Connections - Main
1601 East Fourth Plain Boulevard, Building 17
Vancouver, WA 98661
(360) 397-8246
(800) 604-0025
INFO@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

Mailing Address:
PO Box 1678
Vancouver, WA 98668-1678

Certified Services:
Substance Use Disorder Services:
Alcohol and Drug Information School
DUI Assessment
Intensive Inpatient
Level I Outpatient
Level II Intensive Outpatient
Recovery Employment Support
Recovery Housing Support
Withdrawal Management

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Housing Support
Recovery Medication Support
Recovery Peer Support
Residential Treatment Facility

LifeLine Connections - Vancouver Branch
11719 Northeast 95th Street, Suite A
Vancouver, WA 98682
(360) 397-8246
INFO@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

Mailing Address:
PO Box 1678
Vancouver, WA 98668

Certified Services:
Substance Use Disorder Services:
DUI Assessment
Level I Outpatient
Level II Intensive Outpatient
Recovery Employment Support
Recovery Housing Support
Withdrawal Management

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Housing Support
Recovery Medication Support
Recovery Peer Support
Residential Treatment Facility
### Certified Services

#### Substance Use Disorder Services:
- Substance Abuse Assessment
- Level I Outpatient
- Level II Intensive Outpatient
- Recovery Employment Support
- Recovery Housing Support
- Problem & Pathological Gambling Services:

#### Mental Health Services:
- Case Management
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Employment Support
- Recovery Peer Support

### 200086

**Lutheran Community Services Northwest - Vancouver**

3600 Main Street  
Vancouver, WA 98663

LCSNW@LCSNW.ORG  
WWW.LCSNW.ORG

**Mailing Address**

3600 Main Street  
Vancouver, WA 98663

### 200319

**NAMI Southwest Washington - Main**

5411 East Mill Plain Boulevard, Suite 4  
Vancouver, WA 98661

(360) 695-2823  
MELINDA.M@NAMISWWA.ORG  
WWW.NAMISWWA.ORG

**Mailing Address**

5411 East Mill Plain Boulevard, Suite 4  
Vancouver, WA 98661

### 200094

**PeaceHealth Southwest Medical Center**

3400 Main Street  
Vancouver, WA 98663

**Mailing Address**

3400 Main Street  
Vancouver, WA 98663

### 200568

**Redwood Recovery Center, LLC**

717 Northeast 61st Street, Suite 102  
Vancouver, WA 98665

(360) 523-2997  
HELLO@REDWOODRECOVERYCENTER.COM  
WWW.REDWOODRECOVERYCENTER.COM

**Crystal Kostrivas**  
Administrator

**Jesse James**  
Clinical Director
MAILING ADDRESS
717 NORTHEAST 61ST STREET, SUITE 102
VANCOUVER, WA 98665

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200268
SEA MAR BEHAVIORAL HEALTH - VANCOUVER 109TH COURT
5501 NORTHEAST 109TH COURT, SUITE A-1
VANCOUVER, WA 98662
(360) 566-4432

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

200269
SEA MAR BEHAVIORAL HEALTH - VANCOUVER FOURTH PLAIN
7803 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98662

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

200339
SEA MAR BEHAVIORAL HEALTH - VANCOUVER MEDICAL
7410 DELAWARE LANE
VANCOUVER, WA 98664
(360) 566-4402
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JENNIFER NAVARRO
CLINICAL SUPERVISOR
SEA MAR BEHAVIORAL HEALTH - VANCOUVER
ORCHARDS
11801 NORTHEAST 65TH STREET
VANCOUVER, WA 98662
(360) 566-4432
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
JENNIFER NAVARRO
MH CLINICAL SUPERVISOR

SEA MAR BEHAVIORAL HEALTH - VANCOUVER
SALMON CREEK
14508 NORTHEAST 20TH AVENUE
VANCOUVER, WA 98686
(360) 852-9070
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH
BREANNA MOSKOVITZ
CLINICAL SUPERVISOR

SERENITY LANE - VANCOUVER
4305 NORTHEAST THURSTON WAY, SUITE E
VANCOUVER, WA 98662
(360) 213-1216
(800) 543-9905

MAILING ADDRESS
PO BOX 8549
COBURG, OR 97408

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

CINDY NORDBERG
OUTPATIENT PROGRAM MANAGER
LARRY LOMBARD
CLINICAL SUPERVISOR

STARTING POINT, INC.
801 GRAND BOULEVARD
VANCOUVER, WA 98661
(360) 696-2010

MAILING ADDRESS
801 GRAND BLVD
VANCOUVER, WA 98661

DAVID WAYNE COLBY
CLINICAL DIRECTOR
DAVE COLBY
CLINICAL SUPERVISOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200115

TCM TEAM
1601 EAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98661
(360) 397-8474
WWW.TELECARECORP.COM

MAILING ADDRESS
PO BOX 2489
VANCOUVER, WA 98661

LISA CLAYTON
ADMINISTRATOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200124

TELECARE - CLARK COUNTY E&T
1601 EAST 4TH PLAIN BOULEVARD
VANCOUVER, WA 98861

MAILING ADDRESS
PO BOX 2489
VANCOUVER, WA 98668

LISA CLAYTON
ADMINISTRATOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

177700

THE RECOVERY VILLAGE RIDGEFIELD - MAIN
888 SOUTH HILLHURST ROAD
RIDGEFIELD, WA 98642
(360) 887-6060
WWW.RIDGEFIELDRECOVERY.COM

MAILING ADDRESS
100 SE 3RD AVE STE 1800
FORT LAUDERDALE, FL 33394

STEVEN HART
DIRECTOR OF OPERATIONS AND ADMIN
DR. RAGHURAM BHAT
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200556

THE RECOVERY VILLAGE RIDGEFIELD - VANCOUVER
5114 NORTHEAST 94TH AVENUE
VANCOUVER, WA 98662
(360) 326-1499
BSURLUJON@ADVANCEDRECOVERYSYSTEMS.COM
WWW.ADVANCEDRECOVERYSYSTEMS.COM

MAILING ADDRESS
100 SE 3RD AVE STE 1800
FT. LAUDERDALE, FL 33394

STEVEN HART
DIRECTOR OF OPERATIONS AND ADMIN
DALLAS CARROLL
SUD CLINICAL SUPERVISOR
CLARK

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

112000
VANCOUVER TREATMENT SOLUTIONS
2009 NORTHEAST 117TH STREET, SUITE 101
VANCOUVER, WA 98686
(360) 566-9112

MAILING ADDRESS
2009 NE 117TH ST STE 101
VANCOUVER, WA 98686

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPiATE SUBSTITUTION TREATMENT

VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)
ST. JOHNS BOULEVARD & 4TH PLAIN BOULEVARD
VANCOUVER, WA 98661
(360) 690-1841

MAILING ADDRESS
P.O. BOX 1035 (V3-SATP)
PORTLAND, OR 97207

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.
7507 NORTHEAST 51ST STREET
VANCOUVER, WA 98662
(360) 906-1190
(503) 939-0350

MAILING ADDRESS
7507 NE 51ST ST
VANCOUVER, WA 98662

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

COLUMBIA

001400
BLUE MOUNTAIN COUNSELING OF COLUMBIA COUNTY
221 EAST WASHINGTON STREET
DAYTON, WA 99328
(509) 382-1164
(866) 382-1164

MAILING ADDRESS
221 E WASHINGTON ST
DAYTON, WA 99328

DIMITA WARREN
CEO

PATRICK FLORES
SUD CLINICAL SUPERVISOR (INTERIM)
COLUMBIA CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

COWLITZ

116600
A NEW SAFEHAVEN
1441 11TH AVENUE
LONGVIEW, WA 98632-3818
(360) 577-4340
DEBRA CASSERD-JOHNSON
ADMINISTRATOR

MAILING ADDRESS
1441 11TH AVENUE
LONGVIEW, WA 98632-3818

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

119300
AWAKENINGS, INC.
404 WEST MAIN STREET
KELSO, WA 98632
(360) 423-2806
MELODY LORENZO
ADMINISTRATOR
GRACE PYON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
404 WEST MAIN STREET
KELSO, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

178200
CHOICES
1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632
(360) 270-9874
LAURI ROWLAND
OWNER/ADMINISTRATOR
LAURIR124@YAHOO.COM

MAILING ADDRESS
1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY
DUI ASSESSMENT

200047
COLUMBIA WELLNESS - KELSO 200 ACADEMY
200 ACADEMY STREET
KELSO, WA 98626
(360) 423-0203
WWW.COLUMBIAWELL.ORG
DAVID MCCLAY
CEO
DEBRA PERKO
CHIEF CLINICAL OFFICER
MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

COLUMBIA WELLNESS - KELSO 210 ACADEMY
210 ACADEMY
KELSO, WA 98626
(360) 577-7442
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

DAVID MCCLAY
CEO
DEBRA PERKO-KORNBERG
CHIEF CLINICAL OFFICER (MH CS)

COLUMBIA WELLNESS - KELSO OAK
309 OAK STREET
KELSO, WA 98626
(360) 577-7442
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

DAVID MCCLAY
CEO
DEBRA PERKO-KORNBERG
CHIEF CLINICAL OFFICER (MH CS)

COLUMBIA WELLNESS - KELSO PACIFIC
214 NORTH PACIFIC AVENUE
KELSO, WA 98626
(360) 423-0203
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

DAVID MCCLAY
CEO
DEBRA PERKO
MH CLINICAL SUPERVISOR
COLUMBIA WELLNESS - LONGVIEW BRANCH
720 14TH AVENUE, SUITE 200
LONGVIEW, WA 98632
(360) 423-0203
WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERapy
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

COLUMBIA WELLNESS - LONGVIEW MAIN
921 14TH AVENUE
LONGVIEW, WA 98632
(360) 423-0203
WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

RESIDENTIAL TREATMENT FACILITY

COLUMBIA WELLNESS - WOODLAND
1251 LEWIS RIVER ROAD, SUITE A
WOODLAND, WA 98674
(360) 423-0203
WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632
COWLITZ CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200062 CORE HEALTH - MAIN
748 14TH AVENUE
LONGVIEW, WA 98632
(360) 562-7472
CAMERONC@CHOBLV.ORG
WWW.COREHEALTHSERVICES.ORG

FRANK MORRISON
CEO
KATIE ALLEN
MH CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 2394
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

015101 COWLITZ FAMILY HEALTH CENTER - BROADWAY CAMPUS
600 BROADWAY STREET
LONGVIEW, WA 98632
(360) 425-9600

DIAN COOPER
EXECUTIVE DIRECTOR
CRYSTAL RICH
CLINICAL SUPERVISOR

MAILING ADDRESS
1057 12TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- LONG-TERM RESIDENTIAL

102200 COWLITZ FAMILY HEALTH CENTER - GRADE STREET CAMPUS
621 GRADE STREET
KELSO, WA 98626
(360) 414-5508

DIAN COOPER
EXECUTIVE DIRECTOR
BRYAN KERR
CLINICAL SUPERVISOR

MAILING ADDRESS
1057 17TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
015100  
COWLITZ FAMILY HEALTH CENTER - TOUTLE RIVER CAMPUS  
2232 SOUTH SILVER LAKE ROAD  
CASTLE ROCK, WA 98611  
(360) 274-3262  
DIAN COOPER  
EXECUTIVE DIRECTOR  
RAMA MITCHELL  
OPERATIONS/CAMPUS MANAGER  

MAILING ADDRESS  
1057 12TH AVENUE  
LONGVIEW, WA 98632  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  

120600  
COWLITZ TRIBAL TREATMENT PROGRAM - MAIN  
900 FIR STREET  
LONGVIEW, WA 98632  
(360) 575-3316  
SUD@COWLITZ.ORG  
WWW.COWLITZ.ORG  
SYBIL IVERSON  
SUD PROGRAM ADMINISTRATOR  
DALLAS DE LA GRANGE  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 2429  
LONGVIEW, WA 98632  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  

078000  
DOC - LONGVIEW WORK RELEASE  
1821 FIRST AVENUE  
LONGVIEW, WA 98632  
(360) 725-8628  
DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR  
BRYAN SMITH  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 41123 (MS 41123)  
OLYMPIA, WA 98504-1123  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  

200511  
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - LONGVIEW  
1338 COMMERCE AVENUE, SUITE 303  
LONGVIEW, WA 98632  
(360) 261-6930  
INFO@GREATRIVERSBHO.ORG  
WWW.CIHEALTHSERVICES.COM  
MARC BOLLINGER  
CEO/ADMINISTRATOR  
RON LEHTO  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 1447  
CHEHALIS, WA 98532  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE
- LONGVIEW/KELSO
1230 SEVENTH AVENUE
LONGVIEW, WA 98632
(360) 636-2400

DAN P. RUSH
CLINICAL DIRECTOR

THOMAS GATES
CLINICAL SUPERVISOR

MAILING ADDRESS
1230 SEVENTH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

KELSO TREATMENT SOLUTIONS
305 PACIFIC AVENUE SOUTH, SUITE C
KELSO, WA 98626
(360) 425-5378
N/A
HTTP://WWW.ACADIAHEALTHCARE.COM

NICOLE SMITH
CLINIC DIRECTOR

STEPHANIE WHITFIELD
CLINICAL SUPERVISOR

MAILING ADDRESS
305 PACIFIC AVENUE SOUTH, SUITE C
KELSO, WA 98626

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- OPIATE SUBSTITUTION TREATMENT

LOVE OVERWHELMING
618 14TH AVENUE
LONGVIEW, WA 98632
(360) 749-8056
ADMIN@LOVEOVERWHELMING.ORG
WWW.LOVEOVERWHELMING.NET

CHUCK HENDRICKSON
EXECUTIVE DIRECTOR

LAURA PATTERSON
CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 1670
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT

PEACEHEALTH ST. JOHN MEDICAL CENTER E&T
1615 DELAWARE STREET
LONGVIEW, WA 98632

KYLE RAHN
NETWORK DIRECTOR
**COWLITZ**

**MAILING ADDRESS**
600 BROADWAY STREET, ROOM #226
LONGVIEW, WA 98632

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

<table>
<thead>
<tr>
<th>SERVICE NUMBER</th>
<th>SERVICE NAME</th>
<th>ADDRESS</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>200374</td>
<td>SEA MAR BEHAVIORAL HEALTH - KELSO</td>
<td>17010 ALLEN STREET, KELSO, WA 98626</td>
<td>(360) 261-7020</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
<td><a href="http://WWW.SEAMARCHC.ORG">WWW.SEAMARCHC.ORG</a></td>
</tr>
</tbody>
</table>

**MAILING ADDRESS**
8915 14TH AVE S
SEATTLE, WA 98108

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

**DOUGLAS**

**MAILING ADDRESS**
1014 WALLA WALLA AVE
WENATCHEE, WA 98801

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
DOUGLAS

200160  COLUMBIA VALLEY COMMUNITY HEALTH - EAST
WENATCHEE
230 GRANT ROAD, SUITE A25
EAST WENATCHEE, WA 98802
(509) 662-6000
WWW.CVCH.ORG

MAILING ADDRESS
600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

FERRY

126600  COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM -
INCHELUM
320 SHORT-CUT ROAD
INCHELUM, WA 99138
(509) 722-7067
(800) 573-9343

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

126800  COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM -
KELLER
11669 SOUTH HIGHWAY 21
KELLER, WA 99140
(509) 634-2260

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

001900  NORTHEAST WASHINGTON ALLIANCE COUNSELING
SERVICES - REPUBLIC
65 NORTH KELLER STREET
REPUBLIC, WA 99166
(509) 775-3341
WWW.CO.STEVENS.WA.US/COUNSELING

MAILING ADDRESS
PO BOX 1120
REPUBLIC, WA 99166

DAVID NIELSEN
EXECUTIVE DIRECTOR
DAN PITMAN
SUD CLINICAL SUPERVISOR
FERRY

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY IN VolUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

FRANKLIN

149300 ASSESSMENT AND TREATMENT ASSOCIATES - FRANKLIN COUNTY
9221 SANDIFUR PARKWAY, SUITE D
PASCO, WA 99301
(877) 479-5993

MAILING ADDRESS
13353 BEL-RED ROAD, SUITE 101
BELLEVUE, WA 98005

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

158000 COMPREHENSIVE HEALTHCARE - PASCO
2715 SAINT ANDREWS LOOP, SUITE C
PASCO, WA 99301
(509) 412-1051
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT

075800 DOC - COYOTE RIDGE CORRECTIONS CENTER
1301 NORTH EPHRATA AVENUE
CONNELL, WA 99326
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

Dawn L. Williams
Substance Abuse Administrator

Bryan Smith
Clinical Supervisor
FRANKLIN

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

177600
LOURDES COUNSELING CENTER - PASCO
1020 SOUTH 7TH AVENUE
PASCO, WA 99301
(509) 547-9000
(509) 943-9104
LOURDESHEALTH.NET

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO

DAVID LOWE
CLINICAL SUPERVISOR

GARFIELD

110300
TRI-CITIES COMMUNITY HEALTH - PASCO
715 WEST COURT STREET
PASCO, WA 99301
(509) 545-6506
(509) 547-2204

MAILING ADDRESS
PO BOX 1452
PASCO, WA 99301

DELL ANDERSON
DIRECTOR

HECTOR BOBBY GUZMAN
CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

014601
QUALITY BEHAVIORAL HEALTH - POMEROY
856 WEST MAIN STREET
POMEROY, WA 99347
(509) 843-3791
WWW.QBHS.ORG

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
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<th>EXECUTIVE DIRECTOR/ADMINISTRATOR</th>
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<td>AUTISM THERAPY SERVICES OF MOSES LAKE, LLC</td>
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<td>JESSIE HORWATH</td>
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**MAILING ADDRESS**

PO BOX 1775
MOSES LAKE, WA 98831-0214

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)

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**MAILING ADDRESS**

PO BOX 1057
MOSES LAKE, WA 98837

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY HOUSING SUPPORT
- RECOVERY PEER SUPPORT

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<td>GRANT INTEGRATED SERVICES - MATTAWA</td>
<td>210 GOVERNMENT ROAD, MATTAWA, WA 99349</td>
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**MAILING ADDRESS**

PO BOX 1057
MOSES LAKE, WA 98837

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS STABILIZATION
- FAMILY THERAPY
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- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
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<th>EXECUTIVE DIRECTOR/ADMINISTRATOR</th>
<th>DIRECTOR OF CLINICAL SERVICES</th>
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<td>002200</td>
<td>GRANT INTEGRATED SERVICES - MOSES LAKE MAIN</td>
<td>840 EAST PLUM STREET, MOSES LAKE, WA 98837</td>
<td>GAIL GOODWIN</td>
<td>NOEMI GARCIA</td>
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</table>
GRANT

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200214
GRANT INTEGRATED SERVICES - QUINCY
203 CENTRAL AVENUE SOUTH
QUINCY, WA 98848
(509) 765-9239
WWW.GRANTCOUNTYWA.GOV

GAIL GOODWIN
ADMINISTRATOR
LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

200215
GRANT INTEGRATED SERVICES - ROYAL CITY
130 CAMELIA STREET
ROYAL CITY, WA 99357
(509) 765-9239
WWW.GRANTCOUNTYWA.GOV

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES
LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
### GRANT

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<th>Position</th>
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<tr>
<td>155300</td>
<td>SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - MOSES LAKE</td>
<td>104 WEST BROADWAY MOSES LAKE, WA 98837</td>
<td>MOSES LAKE, WA 98837</td>
<td>ANDREW TATUM</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(509) 855-9494</td>
<td><a href="mailto:JOEB.JOHNSON@STOPWA.COM">JOEB.JOHNSON@STOPWA.COM</a></td>
<td>ROBERT &quot;JIM&quot; LAGERQUIST</td>
<td>PROGRAM MANAGER</td>
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<td><a href="http://WWW.STOPWA.COM">WWW.STOPWA.COM</a></td>
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**CERTIFIED SERVICES**
- SUBSTANCE USE DISORDER SERVICES:
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

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### GRAYS HARBOR

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<td>200496</td>
<td>ACTION COUNSELING - ABERDEEN</td>
<td>914 EAST WISHKAH STREET #B ABERDEEN, WA 98520</td>
<td>ABERDEEN, WA 98520</td>
<td>BETTY KASSUHN</td>
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<tr>
<td></td>
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<td>(360) 532-0205</td>
<td><a href="mailto:ACTION914@GMAIL.COM">ACTION914@GMAIL.COM</a></td>
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**CERTIFIED SERVICES**
- SUBSTANCE USE DISORDER SERVICES:
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

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<th>Grant ID</th>
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<td>BEHAVIORAL HEALTH RESOURCES - ELMA</td>
<td>573 EAST MAIN STREET ELMA, WA 98541</td>
<td>ELMA, WA 98541</td>
<td>LAURIE TEBO</td>
<td>CEO</td>
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<td>(360) 704-7170</td>
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**CERTIFIED SERVICES**
- MENTAL HEALTH SERVICES:
  - BRIEF INTERVENTION TREATMENT
  - CASE MANAGEMENT
  - FAMILY THERAPY
  - GROUP THERAPY
  - INDIVIDUAL TREATMENT
  - LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  - PSYCHIATRIC MEDICATION

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<td>BEHAVIORAL HEALTH RESOURCES - HOQUIAM</td>
<td>205 8TH STREET HOQUIAM, 98550</td>
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<td>LAURIE TEBO</td>
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<th>200396</th>
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<td>403 WEST STATE STREET, SUITE 201 &amp; 206</td>
<td>MARY STONE SMITH</td>
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<td>ABERDEEN, WA 98520</td>
<td>VICE PRESIDENT</td>
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<tr>
<td>(360) 612-3839</td>
<td>GARY SANDWICK</td>
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<tr>
<td><a href="mailto:NIKKIH@CCSWW.ORG">NIKKIH@CCSWW.ORG</a></td>
<td>CLINICAL SUPERVISOR</td>
</tr>
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<td>224 EAST WISHKAH STREET</td>
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<td>ABERDEEN, WA 98520</td>
<td>VICE PRESIDENT</td>
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<tr>
<td>(888) 322-7156</td>
<td>HEIDI WILLIAMS</td>
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<tr>
<td><a href="mailto:HEIDIW@CCSWW.ORG">HEIDIW@CCSWW.ORG</a></td>
<td>SITE DIRECTOR</td>
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<tr>
<td>2700 SIMPSON AVENUE, SUITE 101</td>
<td>DAVID MCCLAY</td>
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<tr>
<td>ABERDEEN, WA 98520</td>
<td>CEO</td>
</tr>
<tr>
<td>(360) 612-0012</td>
<td>DEBRA PERKO-KORNBERG</td>
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<tr>
<td><a href="http://WWW.COLUMBIAWELL.ORG">WWW.COLUMBIAWELL.ORG</a></td>
<td>CHIEF CLINICAL OFFICER (MH CS)</td>
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CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200393  COLUMBIA WELLNESS - HOQUIAM
615 8TH STREET
HOQUIAM, WA 98550
(800) 654-3837
(360) 532-8629
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- ASSESSMENT ONLY

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RESIDENTIAL TREATMENT FACILITY

107500  DOC - STAFFORD CREEK CORRECTIONS CENTER
191 CONSTANTINE WAY
ABERDEEN, WA 98520
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL II INTENSIVE OUTPATIENT

163700  EVERGREEN TREATMENT SERVICES - GRAYS HARBOR CLINIC
804 LEVEE STREET
HOQUIAM, WA 98550
(360) 209-6339

MAILING ADDRESS
1700 AIRPORT WAY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- OPIATE SUBSTITUTION TREATMENT
GRAYS HARBOR

200510 GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM 3033-B INGRAM STREET HOQUIAM, WA 98550 (360) 261-6930 (855) 303-4834 INFO@GREATRIVERSBHO.ORG WWW.CIHEALTHSERVICES.COM

MAILING ADDRESS
PO BOX 1447
CHEHALIS, WA 98532

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

002500 HARBORCREST BEHAVIORAL HEALTH 1006 NORTH H STREET ABERDEEN, WA 98520 (360) 533-8500 (360) 537-6454

MAILING ADDRESS
1006 NORTH H ST
ABERDEEN, WA 98520

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

200484 LIFELINE CONNECTIONS - ABERDEEN 311 SOUTH I STREET ABERDEEN, WA 98520 (360) 397-8246 (800) 604-0025 ADMISSIONS@LIFELINECONNECTIONS.ORG WWW.LIFELINECONNECTIONS.ORG

MAILING ADDRESS
PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
NORTHWEST INDIAN TREATMENT CENTER
308 EAST YOUNG STREET
ELMA, WA 98541
(360) 482-2674

MAILING ADDRESS
PO BOX 477
ELMA, WA 98541

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- RECOVERY HOUSE

QUINAULT INDIAN NATION
1505 KIA-OOK-WA
TAHOLAH, WA 98587
(360) 276-8211

MAILING ADDRESS
PO BOX 289
TAHOLAH, WA 98587

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

SEA MAR BEHAVIORAL HEALTH - ABERDEEN
1813 SUMNER AVENUE
ABERDEEN, WA 98520
(360) 538-1461
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

SEA MAR BEHAVIORAL HEALTH - ELMA
515 MAIN STREET
ELMA, WA 98541
(360) 861-9700
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
GRAYS HARBOR

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

012701
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - ABERDEEN
114 NORTH PARK STREET
ABERDEEN, WA 98520
(360) 533-4997
ANDREW TATUM
ADMINISTRATOR

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

096600
TRUE NORTH-ESD 113 - GRAYS HARBOR
1700 CHERRY STREET
ABERDEEN, WA 98520
(360) 209-5420
ERIN RIFFE
ADMINISTRATOR

MAILING ADDRESS
6005 TYEE DRIVE SW
TUMWATER, WA 98512

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

009600
TSAPOWUM CHEHALIS TRIBAL BEHAVIORAL HEALTH
420 HOWANUT ROAD
OAKVILLE, WA 98568
(360) 709-1733
LEAH NICCOLOCCI
DIRECTOR

MAILING ADDRESS
PO BOX 508
OAKVILLE, WA 98568

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

200549
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - FREELAND OUTPATIENT
5548 MYRTLE AVENUE, SUITE 202
FREELAND, WA 98249
(360) 502-4080
TONY PRENTICE
ADMINISTRATOR

MAILING ADDRESS
PO BOX 508
FREELAND, WA 98249

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

ISLAND
<table>
<thead>
<tr>
<th>ISLAND</th>
<th>ISLAND ASSESSMENT &amp; COUNSELING CENTER, INC. - OAK HARBOR</th>
<th>COMPASS HEALTH - COUPEVILLE</th>
<th>COMPASS HEALTH - HARBOR STATION</th>
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<td><strong>MAILING ADDRESS</strong></td>
<td>PO BOX 141106, SPOKANE VALLEY, WA 99214</td>
<td>20 NORTHWEST 1ST STREET, COUPEVILLE, WA 98239</td>
<td>230 SOUTHEAST CABOT DRIVE, OAK HARBOR, WA 98277</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
<td><strong>SUBSTANCE USE DISORDER SERVICES:</strong></td>
<td><strong>MENTAL HEALTH SERVICES:</strong></td>
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<td>CRISIS OUTREACH</td>
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<td>FAMILY THERAPY</td>
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<td>RECOVERY PEER SUPPORT</td>
<td>PSYCHIATRIC MEDICATION</td>
</tr>
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</table>

**ISLAND MAILING ADDRESS**

PO BOX 141106
SPOKANE VALLEY, WA 99214

**COMPASS HEALTH - COUPEVILLE**

20 NORTHWEST 1ST STREET
COUPEVILLE, WA 98239
(360) 678-5555
WWW.COMPASSHEALTH.ORG

**MAILING ADDRESS**

PO BOX 3810
EVERETT, WA 98213-8810

**COMPASS HEALTH - HARBOR STATION**

230 SOUTHEAST CABOT DRIVE
OAK HARBOR, WA 98277
(360) 682-4100
WWW.COMPASSHEALTH.ORG

**MAILING ADDRESS**

PO BOX 3810
EVERETT, WA 98213-8810

**ISLAND ASSESSMENT & COUNSELING CENTER, INC. - OAK HARBOR**

520 EAST WHIDBEY AVENUE, SUITE 205
OAK HARBOR, WA 98277
(360) 675-5782

**MAILING ADDRESS**

520 E WHIDBEY AVE, STE 205
OAK HARBOR, WA 98277

**CERTIFIED SERVICES**

**SUBSTANCE USE DISORDER SERVICES:**
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

**ADMINISTRATOR**

AMY HOFEDITZ

**CHIEF OPERATING OFFICER**

ANASTASIA ALLES

**CLINICAL MANAGER**

ERIN WELLS

**PROGRAM MANAGER**

LEWIS (LOU) COX
<table>
<thead>
<tr>
<th>Location</th>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
<th>Chief Executive Officer</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>200233</td>
<td>L.E.A.P.S. AND BEYOND, INC. - MAIN</td>
<td>231 SOUTHEAST BARRINGTON DRIVE, SUITE 203, OAK HARBOR, WA 98277-3200</td>
<td>(360) 240-0022</td>
<td><a href="mailto:ADMIN@LEAPSANDBEYOND.COM">ADMIN@LEAPSANDBEYOND.COM</a></td>
<td><a href="http://WWW.LEAPSANDBEYOND.COM">WWW.LEAPSANDBEYOND.COM</a></td>
<td>STACEY HOTTER-KNIGHT</td>
<td>PRESIDENT</td>
</tr>
<tr>
<td>200345</td>
<td>L.E.A.P.S. AND BEYOND, INC. - OAK HARBOR BRANCH</td>
<td>161 BARRINGTON DRIVE, OAK HARBOR, WA 98277</td>
<td>(360) 240-0022</td>
<td><a href="mailto:ADMIN@LEAPSANDBEYOND.COM">ADMIN@LEAPSANDBEYOND.COM</a></td>
<td><a href="http://WWW.LEAPSANDBEYOND.COM">WWW.LEAPSANDBEYOND.COM</a></td>
<td>STACEY HOTTER KNIGHT</td>
<td>PRESIDENT</td>
</tr>
<tr>
<td>200346</td>
<td>L.E.A.P.S. AND BEYOND, INC. - PORT ORCHARD</td>
<td>1730 POTTERY AVENUE, SUITE 100, PORT ORCHARD, WA 98366</td>
<td>(360) 240-0022</td>
<td><a href="mailto:ADMIN@LEAPSANDBEYOND.COM">ADMIN@LEAPSANDBEYOND.COM</a></td>
<td><a href="http://WWW.LEAPSANDBEYOND.COM">WWW.LEAPSANDBEYOND.COM</a></td>
<td>STACEY HOTTER KNIGHT</td>
<td>PRESIDENT</td>
</tr>
<tr>
<td>168300</td>
<td>NAVAL HOSPITAL SUBSTANCE ABUSE AND REHABILITATION PROGRAM (SARP)</td>
<td>3475 NORTH SARATOGA STREET R-52, OAK HARBOR, WA 98278</td>
<td>(360) 257-2394</td>
<td></td>
<td></td>
<td>STEVEN DAGGETT</td>
<td>ADMINISTRATOR/CLINICAL SUPERVISOR</td>
</tr>
</tbody>
</table>
SEA MAR BEHAVIORAL HEALTH - OAK HARBOR
31640 STATE ROUTE 20, SUITE 1
OAK HARBOR, WA 98277
(360) 679-7676

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

OSCAR RIVERA
CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

SUNRISE SERVICES, INC. - COUPEVILLE
107 SOUTH MAIN STREET
COUPEVILLE, WA 98239
(360) 682-6154
(866) 533-1486
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

SUNRISE SERVICES, INC. - OAK HARBOR
530 NORTHEAST MIDWAY BOULEVARD
OAK HARBOR, WA 98277
(360) 720-2946
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

BELIEVE IN RECOVERY, LLC - PORT TOWNSEND MAIN
211 TAYLOR STREET, SUITES 20 &AMP; 21
PORT TOWNSEND, WA 98368
(360) 385-1258

GABRHEA CAUDILL
ADMINISTRATOR

VINCENT MARQUIS
CLINICAL SUPERVISOR
JEFFERSON

MAILING ADDRESS
211 TAYLOR ST STE 20
PORT TOWNSEND, WA 98368

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200081
DISCOVERY BEHAVIORAL HEALTHCARE
884 WEST PARK AVENUE
PORT TOWNSEND, WA 98368
(360) 385-0321
INFO@DISCOVERYBH.ORG
WWW.DISCOVERYBH.ORG

SUSAN EHRLICH
INTERIM CHIEF EXECUTIVE DIRECTOR
TERA PHILLIPS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 565
PORT TOWNSEND, WA 98368

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INFORMATION AND CRISIS
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200454
GRAY WOLF RANCH
3804 HASTINGS AVENUE WEST
PORT TOWNSEND, WA 98368
(800) 571-5505
(360) 385-5505
JUDY@GRAYWOLFRANCH.COM
WWW.GRAYWOLFRANCH.COM

CIHAN BEHLIVAN
EXECUTIVE DIRECTOR
KRIS LEE KAMPF
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 102
PORT TOWNSEND, WA 98368

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
RECOVERY HOUSE
YOUTH RESIDENTIAL

081000
SAFE HARBOR RECOVERY CENTER, INC. FPC
686 LAKE STREET, SUITE 400
PORT TOWNSEND, WA 98368
(360) 385-3866

TERESA WIRTH
ADMINISTRATOR
GLEEFDOR KESSLER, JR.
PRESIDENT/CEO

MAILING ADDRESS
686 LAKE ST STE 400
PORT TOWNSEND, WA 98368
JEFFERSON

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

KING

178000  2ND CHANCE RECOVERY CENTER, LLC
235 SOUTHWEST 153RD STREET
BURIEN, WA 98166
(206) 242-4915

MAILING ADDRESS
235 SW 153RD STREET
BURIEN, WA 98166

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

044000  A POSITIVE ALTERNATIVE, INC.
4649 SUNNYSIDE AVENUE N, SUITE 200
SEATTLE, WA 98103
(206) 547-1955

MAILING ADDRESS
4649 SUNNYSIDE AVE N, STE 200
SEATTLE, WA 98103

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

150100  A RENEWAL CENTER, LLC
401 OLYMPIA AVENUE NE, SUITES 318 & 320
RENTON, WA 98056
(425) 227-0447
(206) 779-5805

MAILING ADDRESS
533 REDMOND PL NE
RENTON, WA 98056

CERTIFIED SERVICES
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

041900  ALPHA RECOVERY CHOICES
10614 BEARDSLEE BOULEVARD, SUITE D
BOTHELL, WA 98011
(425) 483-4664
(888) 429-3999

MAILING ADDRESS
10614 BEARDSLEE BLVD STE D
BOTHELL, WA 98011
KING

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

122500
ALTERNATIVE COUNSELING - KENT
19435 W. VALLEY HIGHWAY, S-109
KENT, WA 98032
(425) 251-1933

DWAYNE BROWN
ADMINISTRATOR

MAILING ADDRESS
19435 W VALLEY HWY S-109
KENT, WA 98032

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

019800
ALTERNATIVES, INC.
3123 EASTLAKE AVENUE EAST, SUITE 100
SEATTLE, WA 98102
(206) 323-4750

JOSEPH WOLFE
DIRECTOR/ADMINISTRATOR
CRISTY CALDWELL
CLINICAL DIRECTOR

MAILING ADDRESS
3123 EASTLAKE AVENUE EAST, SUITE 100
SEATTLE, WA 98102

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

156400
ANTIOCH COUNSELING AND TREATMENT SERVICES
12316 134TH COURT NE
REDMOND, WA 98052
(425) 284-2652
(425) 985-8770

ROBERT RIGG
EXECUTIVE DIRECTOR

MAILING ADDRESS
12316 134TH CT NE
REDMOND, WA 98052

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200450
APPLE CONSULTING
18311 BOTHELL-EVERETT HIGHWAY, BLDG 2, SUITE 260
BOTHELL, WA 98012
(206) 437-5412
(206) 250-9014
ADMIN@APPLE-ASD.COM
WWW.APPLE-ASD.COM

CHIRS JONES
DIRECTOR OF OPERATIONS
STEVEN MICHALSKI
CLINIC DIRECTOR

MAILING ADDRESS
1240 116TH AVE NE STE 102
BELLEVUE, WA 98004
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)

200422 ARK COUNSELING AND TREATMENT SERVICES
634 SOUTHWEST 149TH STREET
BURIEN, WA 98146
(206) 244-0733
ALVIN/CURRIE@YAHOO.COM

MAILING ADDRESS
PO BOX 47055
SEATTLE, WA 98166

CERTIFIED SERVICES
- SUBSTANCE USE DISORDER SERVICES:
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

120700 ARMSTRONG ALCOHOL AND DRUG RECOVERY, LLC
625 STRANDER BOULEVARD, SUITE C
TUWKILA, WA 98188
(206) 575-1958

MAILING ADDRESS
625 STRANDER BLVD STE C
TUWKILA, WA 98188

CERTIFIED SERVICES
- SUBSTANCE USE DISORDER SERVICES:
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

100100 ASIAN COUNSELING AND REFERRAL SERVICE
3639 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98144
(206) 695-7600
ACRSINFO@ACRS.ORG
WWW.ACRS.ORG

MAILING ADDRESS
3639 MARTIN LUTHER KING JR WY S
SEATTLE, WA 98144

CERTIFIED SERVICES
- SUBSTANCE USE DISORDER SERVICES:
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT
  - PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
    - PROBLEM & PATHOLOGICAL GAMBLING

118700 ASSESSMENT AND TREATMENT ASSOCIATES - BELLEVUE MAIN
13353 BEL-RED ROAD, SUITE 101
BELLEVUE, WA 98005
(877) 479-5993

STEVE UHRICH
EXECUTIVE DIRECTOR
SHARON FENTON
CLINICAL SUPERVISOR
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - BELLEVUE MAIN
1800 112TH AVENUE NORTHEAST, SUITE 150W
BELLEVUE, WA 98004
(425) 646-7279
(800) 858-6702
STAFF@ABHC.COM
WWW.ABHC.COM

ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - KENT
841 CENTRAL AVENUE NORTH, SUITE C215
KENT, WA 98032
(425) 646-7279
(800) 858-6702
STAFF@ABHC.COM
WWW.ABHC.COM

ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - SEATTLE
2111 NORTH NORTHGATE WAY, SUITE 212
SEATTLE, WA 98133
(206) 781-2661
(800) 858-6702
STAFF@ABHC.COM
WWW.ABHC.COM

MAILING ADDRESS
13353 BEL-RED RD STE 101
BELLEVUE, WA 98005

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - WEST
SEATTLE
4700 42ND AVENUE SOUTHWEST, SUITE 470
SEATTLE, WA 98116
(206) 935-1282
(800) 858-6702
STAFF@ABHC.COM
WWW.ABHC.COM

MAILING ADDRESS
4700 42ND AVE SW STE 480
SEATTLE, WA 98116

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

ATLANTIC STREET CENTER
2103 SOUTH ATLANTIC STREET
SEATTLE, WA 98144
(206) 329-2050
WWW.ATLANTICSTREET.ORG

MAILING ADDRESS
2103 SOUTH ATLANTIC STREET
SEATTLE, WA 98144

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

HERERI CONTRERAS
PROGRAM DIRECTOR

AUTISM SPECTRUM THERAPIES
12729 NORTHUP WAY, SUITE 23
BELLEVUE, WA 98005
(866) 727-8274
WWW.AUTISMSTHERAPIES.COM

MAILING ADDRESS
2550 N HOLLYWOOD WAY #102
BURBANK, CA 91505

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

ROBERT HAUPT
VICE PRESIDENT

SHANA HUIZENGA
CLINICAL DIRECTOR

AVALON CENTER
6957 CALIFORNIA AVENUE SW
SEATTLE, WA 98136
(206) 935-8228

MAILING ADDRESS
6957 CALIFORNIA AVE SW
SEATTLE, WA 98136

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT

DIANNE HUTCHENSON
ADMINISTRATOR

OLIVETTE FOSTER
CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Area Code</th>
<th>Business Name</th>
<th>Address</th>
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<td>200552</td>
<td>Behavioral Health Works, Inc.</td>
<td>6624 South 196th Street, Suite U107, Kent, WA 98032</td>
<td>Mental Health Services: Recovery Support Applied Behavior Analysis (ABA)</td>
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<tr>
<td>005400</td>
<td>Cascade Behavioral Hospital</td>
<td>12844 Military Road South, Tukwila, WA 98168</td>
<td>Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Intensive Inpatient, Level I Outpatient, Level II Intensive Outpatient, Withdrawal Management</td>
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<td>173200</td>
<td>Casteele, Williams &amp; Associates Comprehensive Behavioral Health, Inc. - Vashon</td>
<td>9730 Southwest Bank Road, Suite 107C, Vashon, WA 98070</td>
<td>Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient, Screening and Brief Intervention</td>
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<td>034300</td>
<td>Catholic Community Services - Seattle</td>
<td>1902 Second Avenue, Suite 208, Seattle, WA 98101</td>
<td>Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient, Screening and Brief Intervention</td>
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**Mailing Address**

- Behavioral Health Works, Inc.: 1301 E Orangewood Ave, Anaheim, CA 92805
- Cascade Behavioral Hospital: 12844 Military Rd S, Tukwila, WA 98168
- Casteele, Williams & Associates Comprehensive Behavioral Health, Inc. - Vashon: 711 S 25th St Ste B, Tacoma, WA 98405
- Catholic Community Services - Seattle: 1001 N J Street, Tacoma, WA 98403
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

200145
CATHOLIC COMMUNITY SERVICES - TUKWILA
651 STRANDER BOULEVARD, SUITE 110
TUKWILA, WA 98188
(253) 850-2500
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

015900
CENTER FOR HUMAN SERVICES - MAIN
17018 15TH AVENUE NE
SHORELINE, WA 98155-5126
(206) 362-7282

MAILING ADDRESS
17018 15TH AVENUE NE
SHORELINE, WA 98155-5126

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200154
CENTER FOR HUMAN SERVICES - SHORELINE
14803 15TH AVENUE NE
SHORELINE, WA 98155
(206) 362-7282
WWW.CHS-NW.ORG

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
CHILDHAVEN - ELI CREEKMORE MEMORIAL
1035 SOUTHWEST 124TH STREET
SEATTLE, WA 98146
(253) 833-5908
(206) 248-4903
BETHANYL@CHILDHAVEN.ORG
WWW.CHILDHAVEN.ORG

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

CHILDHAVEN - MAIN
316 BROADWAY
SEATTLE, WA 98122
(206) 624-6477
(206) 957-4815
BETHANYL@CHILDHAVEN.ORG
WWW.CHILDHAVEN.ORG

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

CHILDHAVEN - PATRICK L. GOGERTY
1345 22ND STREET NE
AUBURN, WA 98002
(253) 833-5908
BETHANYL@CHILDHAVEN.ORG
WWW.CHILDHAVEN.ORG

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

COASTAL TREATMENT SERVICES, INC. - MAIN
BELLEGROVE PROFESSIONAL BUILDING 1515 116TH AVENUE NE, SUITE 302
BELLEVUE, WA 98004
(425) 646-4406

MAILING ADDRESS
BELLEGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

MARGARET FERRIS
DIRECTOR/CEO
## Certified Services

**Substance Use Disorder Services:**
- DUI Assessment
- Level I Outpatient
- Level II Intensive Outpatient

**Problem & Pathological Gambling Services:**
- Problem & Pathological Gambling

**Mental Health Services:**
- Individual Treatment

### 200262

**Coleman's Family Services LLC**

- **Address:** 15 South Grady Way, Suite 305, Renton, WA 98057
- **Phone:** (425) 235-9386
- **Website:** [www.colemansfamilyservices.com](http://www.colemansfamilyservices.com)

**Mailing Address**

- **Address:** 15 South Grady Way, Suite 305, Renton, WA 98057

### 200063

**Community House Mental Health**

- **Address:** 851 Poplar Place South, Seattle, WA 98144
- **Phone:** (206) 322-2387, (206) 586-8250
- **Email:** cszala@chmha.org
- **Website:** [www.chmha.org](http://www.chmha.org)

**Mailing Address**

- **Address:** 851 Poplar Place South, Seattle, WA 98144

### 087600

**Community Psychiatric Clinic - Belltown**

- **Address:** 2329 Fourth Avenue, Seattle, WA 98121
- **Phone:** (206) 461-3649
- **Email:** slopez@cpcwa.org
- **Website:** [www.cpcwa.org](http://www.cpcwa.org)

**Mailing Address**

- **Address:** 11000 Lake City Way NE, Seattle, WA 98125

---

**Certified Services**

**Substance Use Disorder Services:**
- DUI Assessment
- Level I Outpatient
- Level II Intensive Outpatient

**Mental Health Services:**
- Individual Treatment
COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL
204 NORTHEAST 94TH STREET
SEATTLE, WA 98115
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG
DOUG CRANDALL
CHIEF EXECUTIVE OFFICER
LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

MAILING ADDRESS
11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

COMMUNITY PSYCHIATRIC CLINIC - EL REY
2119 SECOND AVENUE
SEATTLE, WA 98121
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG
DOUG CRANDALL
CHIEF EXECUTIVE OFFICER
LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

MAILING ADDRESS
11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

COMMUNITY PSYCHIATRIC CLINIC - LAKE CITY MAIN
11000 LAKE CITY WAY NORTHEAST, SUITE 200
SEATTLE, WA 98125
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG
DOUG CRANDALL
CHIEF EXECUTIVE OFFICER
DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
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<th>Location</th>
<th>Address</th>
<th>Phone</th>
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<th>Website</th>
<th>CEO</th>
<th>Chief Executive Officer</th>
<th>SUD Program Manager</th>
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<td><strong>KING</strong></td>
<td>170800</td>
<td>COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN</td>
<td>10700 MERIDIAN AVENUE NORTH, SUITE G-11</td>
<td>(206) 461-4544</td>
<td><a href="mailto:SLOPEZ@CPCWA.ORG">SLOPEZ@CPCWA.ORG</a></td>
<td><a href="http://WWW.CPCWA.ORG">WWW.CPCWA.ORG</a></td>
<td>DOUG CRANDALL</td>
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<td>Mailing Address</td>
<td>11000 LAKE CITY WAY NE</td>
<td>SEATTLE, WA 98125</td>
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<td><strong>200567</strong></td>
<td>COMMUNITY PSYCHIATRIC CLINIC - SOUTH SEATTLE</td>
<td>4636 EAST MARGINAL WAY SOUTH, SUITE B-130</td>
<td>(206) 461-3614</td>
<td><a href="http://WWW.CPCWA.ORG">WWW.CPCWA.ORG</a></td>
<td>DOUG CRANDALL</td>
<td>CEO</td>
<td>ALICE NICHOLS</td>
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<tr>
<td>Mailing Address</td>
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<td><strong>200559</strong></td>
<td>COMMUNITY PSYCHIATRIC CLINIC - UNIVERSITY DISTRICT</td>
<td>1415 NORTHEAST 43RD STREET</td>
<td>(206) 461-3614</td>
<td><a href="http://WWW.CPCWA.ORG">WWW.CPCWA.ORG</a></td>
<td>DOUG CRANDALL</td>
<td>CEO</td>
<td>ALICE NICHOLS</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>11000 LAKE CITY WAY NE</td>
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<tr>
<td><strong>087400</strong></td>
<td>COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE</td>
<td>4120 STONE WAY NORTH</td>
<td>(206) 461-3707</td>
<td><a href="mailto:SLOPEZ@CPCWA.ORG">SLOPEZ@CPCWA.ORG</a></td>
<td><a href="http://WWW.CPCWA.ORG">WWW.CPCWA.ORG</a></td>
<td>DOUG CRANDALL</td>
<td>CHIEF EXECUTIVE OFFICER</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>11000 LAKE CITY WAY NE</td>
<td>SEATTLE, WA 98125</td>
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</tbody>
</table>
| 200366     | **KING CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL THERAPY  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  |
| 200185     | **CONNECTIONS BEHAVIOR PLANNING & INTERVENTION**  
- KENT  
8725 SOUTH 212TH STREET, BUILDING E  
KENT, WA 98031  
(425) 653-3016  
SHANNON@CONNECTIONS-BEHAVIOR.COM  
WWW.CONNECTIONS-BEHAVIOR.COM  
SHANNON STARKWEATHER  
OPERATIONS MANAGER  
DR. PAUL MULLAN  
SENIOR BCBA/OWNER  |
| 200395     | **CONNECTIONS BEHAVIOR PLANNING & INTERVENTION**  
- SLATER PARK  
11828 SLATER PARK AVENUE NE, SUITE 150  
KIRKLAND, WA 98034  
(425) 653-3016  
SHANNON@CONNECTIONS-BEHAVIOR.COM  
WWW.CONNECTIONS-BEHAVIOR.COM  
SHANNON STARKWEATHER  
OPERATIONS MANAGER  
DR. PAUL MULLAN  
SENIOR BCBA/OWNER  |
| 200303     | **CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
DAY SUPPORT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)  |

**MAILING ADDRESS**  
1003 7TH AVENUE  
KIRKLAND, WA 98033
<table>
<thead>
<tr>
<th>Area Code</th>
<th>Service Location</th>
<th>Address</th>
<th>Contact Information</th>
<th>Certified Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>003800</td>
<td>CONSEJO COUNSELING AND REFERRAL SERVICE - MAIN</td>
<td>3808 South Angeline Street, Seattle, WA 98118</td>
<td>(206) 461-4880</td>
<td>MENTAL HEALTH SERVICES: Case Management, Crisis Outreach, DAY Support, Individual Treatment, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Peer Support</td>
</tr>
<tr>
<td>149500</td>
<td>CONSEJO KENT YOUTH OUTPATIENT SERVICES</td>
<td>515 West Harrison Street, Suite 109, Kent, WA 98032</td>
<td>(206) 461-4880</td>
<td>MENTAL HEALTH SERVICES: Case Management, Crisis Outreach, DAY Support, Individual Treatment, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Peer Support</td>
</tr>
<tr>
<td>Code</td>
<td>Name</td>
<td>Address</td>
<td>Phone</td>
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<td>135400</td>
<td>CONSEJO YOUTH AND FAMILY SERVICES - SEATTLE</td>
<td>8615 14TH AVENUE SOUTH SEATTLE, WA 98108</td>
<td>(206) 461-4080</td>
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<td>158200</td>
<td>COWLITZ TRIBAL TREATMENT PROGRAM - SEATTLE</td>
<td>15455 65TH AVENUE SOUTH TUKWILA, WA 98188</td>
<td>(206) 721-5170</td>
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<td>154100</td>
<td>CRISIS CLINIC</td>
<td>CONFIDENTIAL LOCATION</td>
<td>(866) 789-1511</td>
<td>(866) 833-6546</td>
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<td>113800</td>
<td>CTC COUNSELING SERVICES, LLC</td>
<td>12351 LAKE CITY WAY, SUITE 202 SEATTLE, WA 98125</td>
<td>(206) 957-0721</td>
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KING

MAILING ADDRESS
12351 LAKE CITY WAY, SUITE 202
SEATTLE, WA 98125

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

077000

DOC - BISHOP LEWIS WORK RELEASE
703 8TH AVENUE
SEATTLE, WA 98104
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

077200

DOC - HELEN B. RATCLIFFE WORK RELEASE
1531 13TH AVENUE SOUTH
SEATTLE, WA 98114
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

077300

DOC - REYNOLDS WORK RELEASE
410 4TH AVENUE
SEATTLE, WA 98104
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

200189

DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER
1600 SOUTH LANE STREET
SEATTLE, WA 98144
(206) 464-1570
INFO@DESC.ORG
WWW.DESC.ORG

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

DANIEL MALONE
EXECUTIVE DIRECTOR
GRAYDON ANDRUS
DIRECTOR OF CLINICAL PROGRAMS (MH CS)
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

169200
DOWNTOWN EMERGENCY SERVICE CENTER - JAMES STREET
216 JAMES STREET
SEATTLE, WA 98104
(206) 441-3041

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

097900
DOWNTOWN EMERGENCY SERVICE CENTER - MAIN
515 THIRD AVENUE
SEATTLE, WA 98104
(206) 464-1570

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

169100
DOWNTOWN EMERGENCY SERVICE CENTER - WALL STREET
222 WALL STREET, SUITE 100
SEATTLE, WA 98121
(206) 441-3041

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104
<table>
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<tr>
<th>Certification</th>
<th>Services</th>
<th>Contact Information</th>
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<tr>
<td><strong>KING</strong></td>
<td><strong>CERTIFIED SERVICES</strong>&lt;br&gt;<strong>SUBSTANCE USE DISORDER SERVICES:</strong>&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;LEVEL II INTENSIVE OUTPATIENT</td>
<td><strong>MENTAL HEALTH SERVICES:</strong>&lt;br&gt;CASE MANAGEMENT&lt;br&gt;CRISIS OUTREACH&lt;br&gt;DAY SUPPORT&lt;br&gt;GROUP THERAPY&lt;br&gt;INDIVIDUAL TREATMENT&lt;br&gt;LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY EMPLOYMENT SUPPORT&lt;br&gt;RECOVERY MEDICATION SUPPORT&lt;br&gt;RECOVERY PEER SUPPORT</td>
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<tr>
<td><strong>109700</strong></td>
<td><strong>EASTSIDE CENTER FOR FAMILY</strong>&lt;br&gt;2025 112TH AVENUE NE, SUITE 201&lt;br&gt;BELLEVUE, WA 98004&lt;br&gt;(425) 462-8558</td>
<td><strong>LAURA HALFORD</strong>&lt;br&gt;ADMINISTRATOR</td>
</tr>
<tr>
<td><strong>037201</strong></td>
<td><strong>EASTSIDE RECOVERY GROUP</strong>&lt;br&gt;1715 114TH AVENUE SE, SUITE 204&lt;br&gt;BELLEVUE, WA 98004&lt;br&gt;(425) 454-0839&lt;br&gt;<a href="mailto:INFO@EASTSIDERG.COM">INFO@EASTSIDERG.COM</a>&lt;br&gt;WWW.EASTSIDERG.COM</td>
<td><strong>JILL WEINSTEIN</strong>&lt;br&gt;ADMINISTRATOR&lt;br&gt;<strong>PAUL HUNZIKER</strong>&lt;br&gt;CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>200191</strong></td>
<td><strong>EASTSIDE SOCIAL SKILLS THERAPY, LLC</strong>&lt;br&gt;5436 232ND AVENUE SE&lt;br&gt;ISSAQAH, WA 98029&lt;br&gt;(206) 380-3009</td>
<td><strong>LARA EFFLAND</strong>&lt;br&gt;EXECUTIVE CLINICAL DIRECTOR</td>
</tr>
<tr>
<td><strong>200048</strong></td>
<td><strong>EATING RECOVERY CENTER OF WASHINGTON - MAIN</strong>&lt;br&gt;1231 116TH AVENUE NORTHEAST&lt;br&gt;BELLEVUE, WA 98004&lt;br&gt;(425) 451-1134&lt;br&gt;<a href="mailto:INFO@EATINGRECOVERY.COM">INFO@EATINGRECOVERY.COM</a>&lt;br&gt;WWW.EATINGRECOVERYCENTER.COM</td>
<td><strong>LARA EFFLAND</strong>&lt;br&gt;EXECUTIVE CLINICAL DIRECTOR</td>
</tr>
</tbody>
</table>
### Certified Services

**Mental Health Services:**
- Case Management
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Medication Support
- Residential Treatment Facility

#### Eating Recovery Center of Washington - Seattle

- **Address:**
  - 901 Boren Avenue, Suite 1800
  - Seattle, WA 98104
- **Contact Information:**
  - (425) 326-5300
  - (425) 214-9360
  - Info@EatingRecovery.com
  - WWW.EATINGRECOVERYCENTER.COM

#### Edgewood Seattle Addiction Services

- **Address:**
  - 1200 Westlake Avenue N, Suite 508
  - Seattle, WA 98109
- **Contact Information:**
  - (206) 402-4115

#### Engage ABA LLC

- **Confidential Location**
- **Contact Information:**
  - (425) 761-5010
  - (206) 719-2506
  - Aidan@EngageABA.com

#### Evergreen Healthcare

- **Address:**
  - 11800 Northeast 128th Street, 2nd Floor
  - Kirkland, WA 98034
- **Contact Information:**
  - (425) 899-6300
  - (800) 548-0558

### Mailing Address

#### Eating Recovery Center of Washington - Seattle

- **Address:**
  - 1231 116th Ave NE
  - Bellevue, WA 98004

#### Edgewood Seattle Addiction Services

- **Address:**
  - 1200 Westlake Avenue N, Suite 508
  - Seattle, WA 98109

#### Engage ABA LLC

- **Address:**
  - 11800 Northeast 128th Street, 2nd Floor
  - Kirkland, WA 98034
KING

MAILING ADDRESS
12040 NE 128TH ST, MS:74
KIRKLAND, WA 98034

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

EVERGREEN TREATMENT SERVICES - REACH
200477
2133 3RD AVENUE, SUITE 116
SEATTLE, WA 98121
(206) 432-3574
(206) 223-3644
MAIL@ETSREACH.ORG
WWW.ETSREACH.ORG

KELLEY CRAIG
REACH CO-DIRECTOR
TRICIA HOWE
REACH SUPERVISOR

MAILING ADDRESS
1700 AIRPORT WAY S
SEATTLE, WA 98134

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

EVERGREEN TREATMENT SERVICES - SOUTH KING COUNTY CLINIC
200408
1412 SOUTHWEST 43RD STREET
RENTON, WA 98057
(425) 264-0750
WWW.EVERGREENTREATMENT.ORG

MOLLY CARNEY, PHD
EXECUTIVE DIRECTOR
SEAN SOTH
CLINICAL SUPERVISOR

MAILING ADDRESS
1700 AIRPORT WAY S
SEATTLE, WA 98134

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

EVERGREEN TREATMENT SERVICES - UNIT 1
016300
1700 AIRPORT WAY SOUTH
SEATTLE, WA 98134-1618
(206) 223-3644

MOLLY CARNEY
EXECUTIVE DIRECTOR
CAROL DAVIDSON
CLINICAL SUPERVISOR

MAILING ADDRESS
1700 AIRPORT WY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

EVERGREEN TREATMENT SERVICES - UNIT 2
016301
1740 AIRPORT WAY SOUTH
SEATTLE, WA 98134-1618
(206) 903-1898

MOLLY CARNEY
EXECUTIVE DIRECTOR
CAROL DAVIDSON
CLINICAL SUPERVISOR

MAILING ADDRESS
1700 AIRPORT WY S
SEATTLE, WA 98134-1618
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

101300
EVERGREEN TREATMENT SERVICES - UNIT 3
ONE COMMUNITY LOCATION
SEATTLE, WA 98134
(206) 223-3644

MAILING ADDRESS
1700 AIRPORT WY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
OPIATE SUBSTITUTION TREATMENT

037000
EXODUS - YOUTH
33010 SOUTHEAST 99TH STREET
SNOQUALMIE, WA 98065
(425) 831-2623

MAILING ADDRESS
33010 SE 99TH ST
SNOQUALMIE, WA 98065

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

118200
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND ARTS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034
(425) 821-2000

MAILING ADDRESS
10200 NE 132ND ST
KIRKLAND, WA 98034

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN

200420
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND E&T
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034
(425) 821-2000
HTTP://WWW.FAIRFAXHOSPITAL.COM/

MAILING ADDRESS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN
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<td>16570</td>
<td>FAMILY THERAPY &amp; RECOVERY P.S.</td>
<td>15 SOUTH GRADY WAY, SUITE 249, RENTON, WA 98057</td>
<td>SUBSTANCE USE DISORDER SERVICES: DUI ASSESSMENT, LEVEL I OUTPATIENT, LEVEL II INTENSIVE OUTPATIENT</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
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<td>200195</td>
<td>FEAT OF WASHINGTON</td>
<td>14434 NORTHEAST 8TH STREET, SUITE 300, BELLEVUE, WA 98007</td>
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<td>RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</td>
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<td>200196</td>
<td>FOUNDATIONS FOR LEARNING AND BEHAVIOR, INC.</td>
<td>15600 REDMOND WAY, SUITE 205, REDMOND, WA 98052</td>
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<td>170300</td>
<td>FRIENDS OF YOUTH - DUVALL</td>
<td>26420 NORTHEAST VIRGINIA STREET, DUVALL, WA 98019</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL, DUI ASSESSMENT, LEVEL I OUTPATIENT</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT</td>
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<td>040901</td>
<td>FRIENDS OF YOUTH - MAIN</td>
<td>414 FRONT STREET NORTH</td>
<td>ISSAQAI, WA</td>
<td>98052</td>
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<td>DUI ASSESSMENT</td>
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<td>170200</td>
<td>FRIENDS OF YOUTH - NORTH BEND</td>
<td>401 BALLARAT AVENUE NORTH</td>
<td>NORTH BEND, WA</td>
<td>98045</td>
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<td>200060</td>
<td>FULL LIFE CARE</td>
<td>2600 SOUTH WALKER STREET</td>
<td>SEATTLE, WA</td>
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<td>CASE MANAGEMENT</td>
<td>FAMILY THERAPY</td>
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<tr>
<td>042400</td>
<td>FUTURE VISIONS PROGRAM, INC.</td>
<td>620 M STREET NE, SUITE 2</td>
<td>AUBURN, WA</td>
<td>98002</td>
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<td>ALCOHOL AND DRUG INFORMATION SCHOOL</td>
<td>DUI ASSESSMENT</td>
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200217 HARBORVIEW MEDICAL CENTER - INPATIENT
325 9TH AVENUE
SEATTLE, WA 98104

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

098800 HARBORVIEW MEDICAL CENTER ADDICTIONS PROGRAM
401 BROADWAY
SEATTLE, WA 98104
(206) 744-9657

MAILING ADDRESS
325 9TH AVE MS: 359797
SEATTLE, WA 98104-2499

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200216 HARBORVIEW MENTAL HEALTH SERVICES
325 9TH AVENUE
SEATTLE, WA 98104

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200049 HERO HOUSE
12838 SE 40TH PLACE
BELLEVUE, WA 98006
(425) 614-1282
KAILEYF@HEROHOUSE.ORG
WWW.HEROHOUSE.ORG

MAILING ADDRESS
12838 SE 40TH PLACE
BELLEVUE, WA 98006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CLUBHOUSE

KAILEY FIEDLER
EXECUTIVE DIRECTOR
159400  
**HOPE + HELP**  
230 AUBURN WAY SOUTH #1B & 2B  
AUBURN, WA 98002  
(253) 333-2328  
WWW.HH-C.NET  

**MAILING ADDRESS**  
230 AUBURN WAY S #1B  
AUBURN, WA 98002

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
SCREENING AND BRIEF INTERVENTION  
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:  
PROBLEM & PATHOLOGICAL GAMBLING

---

178600  
**HOPE PLACE**  
3802 SOUTH OTHELLO STREET  
SEATTLE, WA 98118  
(206) 628-2008  

**MAILING ADDRESS**  
3802 S OTHELLO ST  
SEATTLE, WA 98118

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

174700  
**HOTEL CALIFORNIA BY THE SEA**  
1601 114TH AVENUE SOUTHEAST  
BELLEVUE, WA 98004  
(800) 762-6717  
WWW.HOTELCALIFORNIABYTHESEA.COM  

**MAILING ADDRESS**  
1601 114TH AVENUE SOUTHEAST  
BELLEVUE, WA 98004

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

200050  
**HUMANITY'S CHILDREN**  
451 SOUTHWEST 10TH STREET, #201  
RENTON, WA 98057  
(425) 429-0033  

**MAILING ADDRESS**  
PO BOX 75011  
SEATTLE, WA 98175

**CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT
200051  IKRON CORPORATION GREATER SEATTLE - MAIN
3805 108TH AVENUE NE, SUITES 204 & 102
BELLEVUE, WA 98004
(425) 242-1713
IKRONGREATERSSEATTLE@IKRON.ORG
WWW.SEATTLE.IKRON.ORG
LUDMILA MONICA NEGRILA
DIRECTOR
Mailing Address:
3805 108TH AVENUE NE, SUITES 204 & 102
BELLEVUE, WA 98004

Certified Services:
Substance Use Disorder Services:
- Alcohol and Drug Information School
- DUI Assessment
- Level I Outpatient
- Level II Intensive Outpatient

Mental Health Services:
- Brief Intervention Treatment
- Case Management
- Day Support
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Employment Support
- Recovery Peer Support

200539  IKRON CORPORATION GREATER SEATTLE - MERIDIAN CENTER
10303 MERIDIAN AVENUE NORTH, SUITE 204
SEATTLE, WA 98133
(206) 420-7949
(425) 242-1713
IKRONGREATERSSEATTLE@IKRON.ORG
WWW.SEATTLE.IKRON.ORG
LUDMILA MONICA NEGRILA
EXECUTIVE DIRECTOR/CLINICAL DIRECTOR
Mailing Address:
3805 108TH AVE NE STE 204
BELLEVUE, WA 98004

Certified Services:
Substance Use Disorder Services:
- Alcohol and Drug Information School
- DUI Assessment
- Level I Outpatient
- Level II Intensive Outpatient

Mental Health Services:
- Brief Intervention Treatment
- Case Management
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Employment Support
- Recovery Peer Support

200220  IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - BELLEVUE
1800 112TH AVENUE NE, SUITE 260E
BELLEVUE, WA 98004
(425) 643-2133
(417) 830-4796
MWILSON@EMBASSYLLC.COM
WWW.IMAGINEBEHAVIOR.COM
DR. CHARNA MINTZ
EXECUTIVE DIRECTOR
JEN COLLADO
PROGRAM DIRECTOR
Mailing Address:
5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

Certified Services:
Mental Health Services:
- Recovery Support Applied Behavior Analysis (ABA)

200222  IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE
2414 SW ANDOVER STREET, SUITE D-120
SEATTLE, WA 98106
DR. CHARNA MINTZ
EXECUTIVE DIRECTOR
DANETTE DARROW
PROGRAM DIRECTOR
KING

MAILING ADDRESS
5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200077
INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY
34004 16TH AVENUE S, SUITE 200
FEDERAL WAY, WA 98003
CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS
34004 16TH AVENUE S., SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  CASE MANAGEMENT
  FAMILY THERAPY
  INDIVIDUAL TREATMENT

136000
INTEGRATIVE COUNSELING SERVICES
701 NORTH 36TH STREET, SUITE 300
SEATTLE, WA 98103
SCOTT REDING
ADMINISTRATOR

MAILING ADDRESS
701 N 36TH ST STE 300
SEATTLE, WA 98103

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  ALCOHOL AND DRUG INFORMATION SCHOOL
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT

004300
INTERCEPT ASSOCIATES
30620 PACIFIC HIGHWAY SOUTH, SUITE 107
FEDERAL WAY, WA 98003
NANCY STARK
DIRECTOR
ANNE NEARN
TREATMENT DIRECTOR

MAILING ADDRESS
30620 PACIFIC HWY S STE 107
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  ALCOHOL AND DRUG INFORMATION SCHOOL
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT

129400
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - SEATTLE
4250 AURORA AVENUE NORTH, SUITE A106
SEATTLE, WA 98103
AMY HOFEDITZ
ADMINISTRATOR

MAILING ADDRESS
4250 AURORA AVE N STE A106
SEATTLE, WA 98103
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

103200
KENT TREATMENT SOLUTIONS
21851 84TH AVE S, #101
KENT, WA 98032
(425) 687-7082
MICHAE COURTOIS
CLINIC DIRECTOR
RAND JOHNSON
CLINICAL SUPERVISOR

MAILING ADDRESS
21851 84TH AVE S, #101
KENT, WA 98032

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPHATE SUBSTITUTION TREATMENT

016700
KENT YOUTH AND FAMILY SERVICES
232 2ND AVENUE SOUTH, SUITE 201
KENT, WA 98032
(253) 859-0300
MIKE HEINISCH
EXECUTIVE DIRECTOR
PAULA FREDERICK
DIRECTOR OF CLINICAL PROGRAMS

MAILING ADDRESS
232 2ND AVE S STE 201
KENT, WA 98032

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200227
KING COUNTY CRISIS & COMMITMENT SERVICES
401 5TH AVENUE, SUITE 400
SEATTLE, WA 98104
(206) 263-1438
DCHS@KINGCOUNTY.GOV
WWW.KINGCOUNTY.GOV
KELLI NOMURA
KING COUNTY BHO ADMINISTRATOR
CHRISTINE PIATT
HOSPITAL PLACEMENT & DIVERSION SUPERVISOR

MAILING ADDRESS
401 5TH AVENUE, SUITE 400
SEATTLE, WA 98104

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
RECOVERY PEER SUPPORT

004404
KING COUNTY EMERGENCY SERVICE PATROL
1930 BOREN AVENUE
SEATTLE, WA 98121
(206) 205-1076
(206) 263-8961
DANIEL FLOYD
PROGRAM COORDINATOR

MAILING ADDRESS
1930 BOREN AVE
SEATTLE, WA 98121

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
EMERGENCY SERVICE PATROL
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER
200 MILL AVENUE SOUTH, SUITE 10
RENTON, WA 98057
(425) 226-5062
DYAMAMOTO@KCSARC.ORG
WWW.KCSARC.ORG
DEANN YAMAMOTO
DEPUTY EXECUTIVE DIRECTOR
LARRAINE LYNCH
CLINICAL PROGRAM MANAGER

MAILING ADDRESS
PO BOX 300
RENTON, WA 98057

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

LA ESPERANZA HCS - BURIEN
15405 1ST AVENUE SOUTH, SUITE 2
BURIEN, WA 98148
(206) 306-2690
ZOILA SARITAMA
ADMINISTRATOR
ALVIN CURRY
CLINICAL SUPERVISOR

MAILING ADDRESS
15405 1ST AVE S, STE 2
BURIEN, WA 98148

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LA FE - THE HOPE, LLC
15 SOUTH GRADY WAY, SUITE 528
RENTON, WA 98057
(425) 793-9834
SONIA VARGAS
ADMINISTRATOR
ARMANDO H. VARGAS
CLINICAL SUPERVISOR

MAILING ADDRESS
15 S GRADY WY STE 436
RENTON, WA 98057

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LAKESIDE-MILAM RECOVERY CENTERS, INC. - AUBURN
721 45TH STREET NE, SUITE C
AUBURN, WA 98002-1303
(253) 859-6436
PAULETTE HARRIS
ADMINISTRATOR
APRIL STERLING
CLINICAL SUPERVISOR

MAILING ADDRESS
10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Contact Person</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ISSAQUAH</strong></td>
<td>300 NORTHEAST GILMAN BOULEVARD, SUITE 200, ISSAQUAH, WA 98027 (425) 392-8468</td>
<td>CALVIN WALKER</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOBY PETERSON</td>
<td>CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>Mailing Address</strong></td>
<td>10322 NE 132ND STREET, ISSAQUAH, WA 98034-2829</td>
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</tr>
<tr>
<td><strong>CERTIFIED SERVICES</strong></td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL</td>
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<tr>
<td></td>
<td>LEVEL II INTENSIVE OUTPATIENT</td>
<td></td>
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</tr>
</tbody>
</table>

| **KIRKLAND**      | 6725 116TH AVENUE NE, SUITE 110, KIRKLAND, WA 98033-8455 (425) 822-5095 | LISA LIERLEY         | ADMINISTRATOR              |
|                   |                                                                          | JEFF STEVENS        | CLINICAL SUPERVISOR        |
| **Mailing Address** | 10322 NE 132ND ST, KIRKLAND, WA 98034-2829                           |                      |                            |
| **CERTIFIED SERVICES** | SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL |                      |                            |
|                   | DUI ASSESSMENT                                                          |                      |                            |
|                   | LEVEL I OUTPATIENT                                                      |                      |                            |
|                   | LEVEL II INTENSIVE OUTPATIENT                                           |                      |                            |

| **KIRKLAND INPATIENT** | 10322 NORTHEAST 132ND STREET, KIRKLAND, WA 98034-2829 (425) 823-3116 (800) 231-4303 HELP@LAKESIDEMILAM.COM WWW.LAKESIDEMILAM.COM | ELIZABETH MELOENY | ADMINISTRATOR |
|                       |                                                                          | DAVE RUDDUCK        | CLINICAL SUPERVISOR        |
| **Mailing Address**   | 10322 NE 132ND ST, KIRKLAND, WA 98034-2829                           |                      |                            |
| **CERTIFIED SERVICES** | SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL |                      |                            |
|                       | DUI ASSESSMENT                                                          |                      |                            |
|                       | INTENSIVE INPATIENT                                                    |                      |                            |
|                       | LEVEL I OUTPATIENT                                                      |                      |                            |
|                       | LEVEL II INTENSIVE OUTPATIENT                                           |                      |                            |
|                       | WITHDRAWAL MANAGEMENT                                                   |                      |                            |
|                       | YOUTH RESIDENTIAL                                                      |                      |                            |
|                       | YOUTH WITHDRAWAL MANAGEMENT                                             |                      |                            |

| **RENTON**          | 1000 SW 7TH STREET, SUITE B, RENTON, WA 98057-5216 (206) 248-4358 HELP@LAKESIDEMILAM.COM WWW.LAKESIDEMILAM.COM | DEENA DOLE           | ADMINISTRATOR              |
|                    |                                                                          | JAY YOURGLISH       | CLINICAL SUPERVISOR        |
| **Mailing Address** | 10322 NE 132ND ST, KIRKLAND, WA 98034-2829                           |                      |                            |
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

091400  LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE EASTLAKE
2815 EASTLAKE AVENUE EAST, SUITE 100
SEATTLE, WA 98102-3086
(206) 341-9373

CATHERINE WERDEN
ADMINISTRATOR

DAN LABUDA
CLINICAL SUPERVISOR

MAILING ADDRESS
10322 NE 132ND STREET
KIRKLAND, WA 98034-2829

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200565  LIFELONG AIDS ALLIANCE
1016 EAST PIKE STREET, SUITE 300
SEATTLE, WA 98122
(206) 957-1600
(877) 297-0576
WWW.LIFELONG.ORG

JOHN STREIMIKES
SENIOR MANAGER OF CLINICAL SERVICES

ROBERT GIBBS, JR.
CHEMICAL DEPENDENCY COUNSELOR

MAILING ADDRESS
PO BOX 80547
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

144400  LOVELAND ASSOCIATES
2815 EASTLAKE AVENUE EAST
SEATTLE, WA 98102
(206) 910-7477

JILL LOVELAND
ADMINISTRATOR/OWNER

MAILING ADDRESS
4110 42ND AVE NE
SEATTLE, WA 98105

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

200312  LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT
10803 SOUTHEAST KENT-KANGLEY ROAD, #101
KENT, WA 98030
(253) 487-7573
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG

ANDREW KRITOVICH
CLINICAL DIRECTOR

MAILING ADDRESS
4040 S 188TH ST STE 200
SEATAC, WA 98188
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200084
LUTHERAN COMMUNITY SERVICES NORTHWEST - SEATAC MAIN
4040 SOUTH 188TH STREET, SUITE 200
SEATAC, WA 98188
BETH FARMER
PROGRAM DIRECTOR
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG/

MAILING ADDRESS
4040 SOUTH 188TH STREET, SUITE 200
SEATAC, WA 98188

CERTIFIED SERVICES

138600
MATT TALBOT CENTER
2313 THIRD AVENUE
SEATTLE, WA 98121
GREGG ALEX
EXECUTIVE DIRECTOR
(206) 256-9865
(206) 256-9866
JUNGWON YOON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
2313 3RD AVE
SEATTLE, WA 98121

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200089
MATUMAINI COUNSELING & COMMUNITY CENTER
3714 SOUTH FERDINAND STREET
SEATTLE, WA 98118
JAMES NORRIS
EXECUTIVE DIRECTOR
(206) 708-1704

MAILING ADDRESS
PO BOX 66945
BURIEN, WA 98166

CERTIFIED SERVICES

200090
MEIER CLINICS
22232 17TH AVENUE SE, SUITE 312
BOTHELL, WA 98021

MAILING ADDRESS
22232 17TH AVENUE SE, SUITE 312
BOTHELL, WA 98021
<table>
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<tr>
<th>Zip Code</th>
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<tr>
<td>120800</td>
<td>MINDFUL ALTERNATIVES</td>
<td>12727 Northup Way, Suite 19</td>
<td>(425) 454-0116, (206) 355-2508</td>
<td>JOHN O'MALLEY Administrator/Owner</td>
<td>MENTAL HEALTH SERVICES: DAY SUPPORT</td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>12727 Northup Way, Suite 19</td>
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<tr>
<td>200243</td>
<td>MOSAIC CHILDREN'S THERAPY CLINIC</td>
<td>13010 Northeast 20th Street, Suite 300</td>
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<td>ANDREA DUFFIELD CEO</td>
<td>MENTAL HEALTH SERVICES: RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</td>
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<tr>
<td></td>
<td>Mailing Address</td>
<td>13010 NE 20TH STREET, SUITE 300</td>
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<tr>
<td>043100</td>
<td>MOTIVATIONS</td>
<td>17311 135th Avenue NE, Suite B-750</td>
<td>(425) 481-2112</td>
<td>JAMES R. FOUTS Administrator</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>17311 135TH AVE NE STE B-750</td>
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<tr>
<td>022900</td>
<td>MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM</td>
<td>17813 Southeast 392nd Street</td>
<td>(253) 804-8752</td>
<td>MICHAEL P. CLARKE Administrator, DAN CABLE Clinical Supervisor</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>39015 172nd Ave SE</td>
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</table>
MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH
17500 SOUTHEAST 392ND STREET
AUBURN, WA 98092
(253) 804-8752

MICHAEL P. CLARKE
BEHAVIORAL HEALTH DIRECTOR

SABRINA DE LA FUENTE
YOUTH CD SUPERVISOR

MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH
17500 SOUTHEAST 392ND STREET
AUBURN, WA 98092
(253) 804-8752

MICHAEL P. CLARKE
BEHAVIORAL HEALTH DIRECTOR

SABRINA DE LA FUENTE
YOUTH CD SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER
202 NORTH DIVISION STREET
AUBURN, WA 98001
(253) 545-2050

PAM HAITHCOX EGGLESTON
ADMINISTRATOR

ANGELA NAYLOR
DIRECTOR

MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER
202 NORTH DIVISION STREET
AUBURN, WA 98001
(253) 545-2050

PAM HAITHCOX EGGLESTON
ADMINISTRATOR

ANGELA NAYLOR
DIRECTOR

MAILING ADDRESS
202 NORTH DIVISION STREET
AUBURN, WA 98001

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

NAVOS - AUBURN
402 EAST MAIN STREET, SUITE 160
AUBURN, WA 98002

KEN RYAN
PROGRAM SUPERVISOR

JOE TANGNEY
CLINICAL SUPERVISOR

NAVOS - AUBURN
402 EAST MAIN STREET, SUITE 160
AUBURN, WA 98002

KEN RYAN
PROGRAM SUPERVISOR

JOE TANGNEY
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

NAVOS - BURIEN 136TH STREET
1210 SOUTHWEST 136TH STREET
BURIEN, WA 98166
(206) 257-6601

MIRIAM MIYAKE
ADMINISTRATIVE DIRECTOR

ANGELA FRYE
CLINICAL SUPERVISOR

NAVOS - BURIEN 136TH STREET
1210 SOUTHWEST 136TH STREET
BURIEN, WA 98166
(206) 257-6601

MIRIAM MIYAKE
ADMINISTRATIVE DIRECTOR

ANGELA FRYE
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

161000 NAVOS - BURIEN 152ND STREET
1033 SOUTHWEST 152ND STREET
BURIEN, WA 98166
(206) 242-1698
(206) 257-6624
WWW.NAVOS.ORG

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

VICTOR PLACE
ADMINISTRATOR

TIM PRIMEAUX
CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200246 NAVOS - BURIEN 8TH AVENUE
15035 8TH AVENUE SOUTH
BURIEN, WA 98148
WWW.NAVOS.ORG

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

JUDY HEALY
ADMINISTRATOR

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT

200231 NAVOS - CLIP
1033 SOUTHWEST 152ND STREET
BURIEN, WA 98166
(206) 829-1100
WWW.NAVOS.ORG

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

ELLIE CARRITHERS
DIRECTOR OF RESIDENTIAL SERVICES
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

200244
NAVOS - INPATIENT SERVICES
2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126

TERRY McINERNEY
DIRECTOR OF NURSING

WWW.NAVOS.ORG

MAILING ADDRESS
2600 SW HOLDEN STREET
SEATTLE, WA 98126

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200248
NAVOS - KENT
23960 35TH PLACE SOUTH
KENT, WA 98032

KEN RYAN
PROGRAM SUPERVISOR

WWW.NAVOS.ORG

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

172800
NAVOS - MAIN
2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126
(206) 933-7263
WWW.NAVOS.ORG

MAILING ADDRESS
2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

178400
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC
- SEATTLE
2366 EASTLAKE AVENUE EAST, SUITE 331
SEATTLE, WA 98102
(206) 407-3333
NEWLIFERECEPTIONNICOLE@OUTLOOK.COM
WWW.RECOVERNEWLIFE.COM

DIANE BUFORD
CEO

MELANIE KEPLINGER
SUD CLINICAL SUPERVISOR
KING

MAILING ADDRESS
5019 GROVE ST STE 103A
MARYSVILLE, WA 98270

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

142100
NEW LIFE RECOVERY SOLUTIONS
12330 NORTHEAST 8TH STREET, SUITE 100
BELLEVUE, WA 98005
(425) 454-2238
(206) 617-6611
WILLIAM REDINGER
EXECUTIVE DIRECTOR
COLIN H. NAUGHTON
CLINICAL SUPERVISOR

MAILING ADDRESS
12330 NE 8TH ST STE 100
BELLEVUE, WA 98005

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

141600
NEW TRADITIONS
9045 16TH AVENUE SW
SEATTLE, WA 98106
(206) 762-7207
(206) 767-8011
SHINO HARADA
EXEC DIRECTOR

MAILING ADDRESS
9045 16TH AVE SW
SEATTLE, WA 98106

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

015600
NEXUS YOUTH AND FAMILIES - AUBURN MAIN
1000 AUBURN WAY SOUTH
AUBURN, WA 98002
(253) 939-2202
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG
SHELLY PRICCO
EXECUTIVE DIRECTOR
MARK WALRATH
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
LEVEL I OUTPATIENT
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

170100
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE
1356 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG
SHELLY PRICCO
EXECUTIVE DIRECTOR
MARK WALRATH
SUD CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Address</th>
<th>Phone</th>
<th>Website</th>
<th>Director</th>
<th>Clinical Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>KING</strong></td>
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<tr>
<td><strong>MAILING ADDRESS</strong></td>
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<tr>
<td>1000 AUBURN WAY S AUBURN, WA 98002</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
<td><strong>MENTAL HEALTH SERVICES:</strong></td>
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<tr>
<td><strong>SUBSTANCE USE DISORDER SERVICES:</strong></td>
<td>BRIEF INTERVENTION TREATMENT</td>
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<td>LEVEL I OUTPATIENT</td>
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<tr>
<td>170000</td>
<td>NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET</td>
<td>SHELLEY PRICCO</td>
<td>MARK WALRATH</td>
<td></td>
</tr>
<tr>
<td>847 BLAKE STREET ENUMCLAW, WA 98022</td>
<td>EXECUTIVE DIRECTOR</td>
<td>SUD CLINICAL SUPERVISOR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(360) 825-4586 <a href="mailto:LAURAST@NEXUS4KIDS.ORG">LAURAST@NEXUS4KIDS.ORG</a></td>
<td></td>
<td><a href="http://WWW.NEXUS4KIDS.ORG">WWW.NEXUS4KIDS.ORG</a></td>
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<tr>
<td>200532</td>
<td>NEXUS YOUTH AND FAMILIES - MAPLE VALLEY</td>
<td>SHELLEY PRICCO</td>
<td>MARK WALRATH</td>
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</tr>
<tr>
<td>24930 224TH AVENUE SOUTHEAST MAPLE VALLEY, WA 98038</td>
<td>EXECUTIVE DIRECTOR</td>
<td>SUD CLINICAL SUPERVISOR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(253) 939-2202 <a href="mailto:INFO@NEXUS4KIDS.ORG">INFO@NEXUS4KIDS.ORG</a></td>
<td></td>
<td><a href="http://WWW.NEXUS4KIDS.ORG">WWW.NEXUS4KIDS.ORG</a></td>
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<tr>
<td>139500</td>
<td>NORTH STAR TREATMENT GROUP, LLC</td>
<td>CRAIG S. ROCK</td>
<td></td>
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<tr>
<td>15 SOUTH GRADY WAY, SUITE 505 RENTON, WA 98057</td>
<td>ADMINISTRATOR</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(206) 241-1187</td>
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<td><strong>MAILING ADDRESS</strong></td>
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<td>INDIVIDUAL TREATMENT</td>
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</tr>
</tbody>
</table>
200495  NORTHBOUND TREATMENT SERVICES OF WASHINGTON, LLC
510 2ND AVENUE WEST
SEATTLE, WA 98119
(866) 311-0003
MIKEP@LIVINGSOBER.COM
WWW.LIVINGSOBER.COM

MAILING ADDRESS
510 2ND AVENUE WEST
SEATTLE, WA 98119

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

118000  NORTHSHORE YOUTH AND FAMILY SERVICES
19201 120TH AVENUE NE, SUITE 108
BOTHELL, WA 98011
(425) 485-6541
INFO@NORTHSHOUREYOUTHANDFAMILYSERVICES.ORG
WWW.NORTHSHOUREYOUTHANDFAMILYSERVICES.ORG

MAILING ADDRESS
19201 120TH AVENUE NE, SUITE 108
BOTHELL, WA 98011

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

176100  NORTHSIDE COUNSELING, LLC
1207 NORTH 200TH STREET, SUITE 213A
SHORELINE, WA 98133
(206) 533-8333
MVERANTH12@GMAIL.COM

MAILING ADDRESS
1207 NORTH 200TH STREET, SUITE 213A
SHORELINE, WA 98133

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200250  NORTHWEST ABA - MAIN
651 STRANDER BOULEVARD, SUITE 105
TUKWILA, WA 98188
(206) 226-1472
INFO@NORTHWESTABA.COM
WWW.NORTHWESTABA.COM

MAILING ADDRESS
PO BOX 88083
TUKWILA, WA 98138

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200251  NORTHWEST BEHAVIORAL ASSOCIATES
3003 NORTHUP WAY, SUITE 200
BELLEVUE, 98004
KING

MAILING ADDRESS
3003 NORTHUP WAY, SUITE 200
BELLEVUE, 98004

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200252
NORTHWEST HOSPITAL E&T - SEATTLE
1550 NORTH 115TH STREET
SEATTLE, WA 98133

MAILING ADDRESS
1550 NORTH 115TH STREET
SEATTLE, WA 98133

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

151800
NORTHWEST RECOVERY CENTERS, LLC
17600 TALBOT ROAD SOUTH, SUITE 3
RENTON, WA 98055
(425) 254-2899

MAILING ADDRESS
PO BOX 39199
LAKEWOOD, WA 98496

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

003900
NORTHWEST RESOURCES ONE, LLC
33438 1ST WAY SOUTH
FEDERAL WAY, WA 98003
(206) 824-9273
ABROOKSNWRONE@GMAIL.COM
NORTHWESTRESOURCES.ORG

MAILING ADDRESS
33438 1ST WAY SOUTH
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

173900
NUA COUNSELING, PLLC
2505 3RD AVENUE, SUITE 325
SEATTLE, WA 98121
(206) 905-4667
(206) 905-4668

MAILING ADDRESS
2505 3RD AVENUE, SUITE 325
SEATTLE, WA 98121

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

MICHAEL A. WEBSTER
OWNER/ADMINISTRATOR

ARTHUR DAHLEN III
OWNER

PAUL HUNZIKER
CLINICAL SUPERVISOR

ERIN LYNCH
ADMINISTRATOR
KING

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200091
OLIVE CREST
2500 116TH AVENUE NE, SUITE 1
BELLEVUE, WA 98004
(425) 462-1612
WWW.OLIVECREST.ORG/PN

MAILING ADDRESS
2500 116TH AVENUE NE, SUITE 1
BELLEVUE, WA 98004

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

200092
OPAL CLINIC FOR EATING DISORDERS, PLLC
1100 NORTHEAST 45TH STREET, SUITE 600
SEATTLE, WA 98105
(206) 926-9087
WWW.OPALFOODANDBODY.COM

MAILING ADDRESS
1100 NE 45TH STREET, SUITE 600
SEATTLE, WA 98105

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200254
ORGANIZATION FOR RESEARCH AND LEARNING
12430 83RD AVENUE SOUTH
SEATTLE, WA 98179
(206) 930-5556

MAILING ADDRESS
3815 S OTHELLO ST STE 100
SEATTLE, WA 98118

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200385
PACIFIC ISLAMIC COMMUNITY AND CULTURAL SERVICES
10634 EAST RIVERSIDE DRIVE, SUITE 300
BOTHELL, WA 98011
(425) 949-5779
SEAPICAS@AOL.COM
WWW.PICAS.ORG

MAILING ADDRESS
10634 EAST RIVERSIDE DRIVE, SUITE 300
BOTHELL, WA 98011

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION
PIB-PROCESO, LLC - KENT
23830 PACIFIC HIGHWAY SOUTH, SUITES 323-325
KENT, WA 98032
(206) 414-1974
MARCO SANCHEZ
MANAGER/PARTNER

MAILING ADDRESS
1833 N 105TH ST, STE 101
SEATTLE, WA 98133

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

PIB-PROCESO, LLC - SEATTLE
1833 NORTH 105TH STREET, SUITE 101
SEATTLE, WA 98133
(206) 478-1191
MARCO SANCHEZ
MANAGER/PARTNER

MAILING ADDRESS
1833 N 105TH ST, STE 101
SEATTLE, WA 98133

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

PIONEER COUNSELING SERVICES - SEATTLE
901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144
(206) 470-3856
WWW.PIONEERHUMANSERVICES.ORG
BETH HAMMONDS
DIRECTOR
LESLEY CHRISTEN
CHEMICAL DEPENDENCY SUPERVISOR

MAILING ADDRESS
901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

PIONEER HUMAN SERVICES - CO-OCCURRING RESIDENTIAL PROGRAM (CORP)
11900 BEACON AVENUE SOUTH
SEATTLE, WA 98178
(206) 772-6900
WWW.PIONEERHUMANSERVICES.ORG
GEORGE CALDERON
DIRECTOR III

MAILING ADDRESS
11900 BEACON AVE S
SEATTLE, WA 98178
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200529
PROGRAMA SER
901 SOUTH 3RD STREET
RENTON, WA 98057
(206) 387-1240
(206) 293-2957

MAILING ADDRESS
PO BOX 891
RENTON, WA 98057

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

KING

113500
RAGING RIVER RECOVERY CENTER
9575 ETHAN WADE WAY SOUTHEAST
SNOQUALMIE, WA 98065
(425) 831-5425
(425) 831-5426
WWW.SNOQUALMIETRIBE.US

MAILING ADDRESS
ATTN: KENDA ERICKSON
SNOQUALMIE, WA 98065

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200107
REFUGEE WOMEN'S ALLIANCE - KENT
124 4TH AVENUE SOUTH, SUITE 230
KENT, WA 98030

MAILING ADDRESS
4008 MARTIN LUTHER KING JR WAY S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200106
REFUGEE WOMEN'S ALLIANCE - SEATAC
16256 MILITARY ROAD SOUTH, SUITE 102
SEATAC, WA 98168
(206) 241-4659
MAHNAZ@REWA.ORG
WWW.REWA.ORG

MAILING ADDRESS
4008 MARTIN LUTHER KING JR WAY S
SEATTLE, WA 98108

MAHNAZ ESHETU
EXECUTIVE DIRECTOR
MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200105
REFUGEE WOMEN’S ALLIANCE - SEATTLE MAIN
4008 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98108
(206) 721-0243
WWW.REWA.ORG

MAILING ADDRESS
4008 MARTIN LUTHER KING JR WAY SOUTH
SEATTLE, WA 98108

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

017100
RENTON AREA YOUTH & FAMILY SERVICES
1025 SOUTH THIRD STREET
RENTON, WA 98055
(425) 271-5600
WWW.RAYS.ORG

MAILING ADDRESS
PO BOX 1510
RENTON, WA 98057

CERTIFIED SERVICES

PREVENTICATION SERVICES:
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

005200
RESIDENCE XII - KIRKLAND
12029 113TH AVENUE NE
KIRKLAND, WA 98034
(425) 823-8844
LIZ M. BRAUN, PH.D.
CEO
CANDACE HUNSUCKER
CLINICAL SUPERVISOR/TX DIR

MAILING ADDRESS
12029 113TH AVE NE
KIRKLAND, WA 98034

CERTIFIED SERVICES

PREVENTICATION SERVICES:
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

117000
RIVERTON PLACE
3020 SOUTH 128TH STREET
BURIEN, WA 98168
(206) 242-5585
SCOTT CLEVELAND
ASSISTANT DIRECTOR
DERYL W. DAVIS-BELL
CLINICAL SUPERVISOR

MAILING ADDRESS
3020 S 128TH ST
BURIEN, WA 98168
200372 ROOTS CLINIC AT ACADEMY FOR PRECISION LEARNING
5031 UNIVERSITY WAY NE, SUITE 105
SEATTLE, WA 98105
(206) 427-0115
INFO@APLSCHOOL.ORG
WWW.APLSCHOOL.ORG

MAILING ADDRESS
PO BOX 51241
SEATTLE, WA 98115

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

159100 RYTERH - BELLEVUE
14715 BEL-RED ROAD, SUITE 100
BELLEVUE, WA 98007
(206) 525-5050

MAILING ADDRESS
2400 NE 95TH ST
SEATTLE, WA 98115-2499

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

005500 RYTERH - MAIN
2400 NORTHEAST 95TH STREET
SEATTLE, WA 98115
(206) 525-5050
GETHELP@RYTHER.ORG
WWW.RYTHER.ORG

MAILING ADDRESS
2400 NE 95TH ST
SEATTLE, WA 98115-2499

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

163800 SCHICK SHADEL HOSPITAL
12101 AMBAUM BOULEVARD SW
SEATTLE, WA 98146
(206) 244-8100

MAILING ADDRESS
12101 AMBAUM BLVD SW
SEATTLE, WA 98146
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

200239  SEA MAR BEHAVIORAL HEALTH - BELLEVUE
12835 BEL-RED ROAD, BUILDING 100, SUITE 145
BELLEVUE, WA 98005
(206) 764-4714

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

200353  SEA MAR BEHAVIORAL HEALTH - BELLEVUE CHILD & FAMILY
1811 156TH AVENUE NE
BELLEVUE, WA 98007
(425) 460-7125
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
CASSANDRA ELLSWORTH
CLINICAL SUPERVISOR

200435  SEA MAR BEHAVIORAL HEALTH - DES MOINES
2781 SOUTH 242ND STREET
DES MOINES, WA 98198
(206) 763-5277
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
SHANA WHITNEY
CLINICAL SUPERVISOR

137900  SEA MAR BEHAVIORAL HEALTH - FEDERAL WAY
31405 18TH AVENUE SOUTH
FEDERAL WAY, WA 98003
(253) 681-6640
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
SHANA WHITNEY
CLINICAL SUPERVISOR
MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

SEA MAR BEHAVIORAL HEALTH - KENT
25028 104TH AVENUE SOUTHEAST
KENT, WA 98030
(206) 764-8019
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

SEA MAR BEHAVIORAL HEALTH - SEATTLE
10001 17TH PLACE SOUTH
SEATTLE, WA 98168
(206) 766-6960

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

SEA MAR BEHAVIORAL HEALTH - TURNING POINT RECOVERY
113 23RD AVENUE SOUTH
SEATTLE, WA 98144
(206) 219-5980

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MARCO MEDINA
CLINICAL SUPERVISOR

CLAUDIA D'ALLEGRI
VP, BEHAVIORAL HEALTH

MARCO MEDINA
CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Area Code</th>
<th>Address Details</th>
<th>Certified Services</th>
</tr>
</thead>
</table>
| 200434    | **SEA MAR BEHAVIORAL HEALTH - WHITE CENTER**  
9650 15TH AVENUE SOUTHWEST  
SEATTLE, WA 98106  
(206) 783-8277  
INFO@SEAMARCHC.ORG  
WWW.SEAMARCHC.ORG  
CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH  
SARAH DAILEY  
CLINICAL SUPERVISOR  
Mailing Address  
8915 14TH AVE S  
SEATTLE, WA 98108  
| MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION |
| 017200    | **SEADRUNAR**  
10344 14TH AVENUE SOUTH  
SEATTLE, WA 98108  
(206) 767-0244  
SHERI HEALEY  
EXECUTIVE DIRECTOR  
ANGELA GROUT  
CLINICAL SUPERVISOR  
Mailing Address  
PO BOX 80864  
SEATTLE, WA 98108  
| SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LONG-TERM RESIDENTIAL  
RECOVERY HOUSE  
WITHDRAWAL MANAGEMENT |
| 200270    | **SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC**  
4746 11TH AVENUE NE, SUITE 102  
SEATTLE, WA 98105  
(206) 535-9876  
MARA OBLAK  
PRESIDENT  
Mailing Address  
4746 11TH AVENUE NE, SUITE 102  
SEATTLE, WA 98105  
| MENTAL HEALTH SERVICES:  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA) |
| 200392    | **SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER**  
4909 25TH AVENUE NE  
SEATTLE, WA 98105  
(206) 987-8080  
(866) 987-2000  
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG  
WWW.SEATTLECHILDRENS.ORG  
ERIN EASLEY  
DIRECTOR  
RAHPEL BERNIER  
CLINICAL DIRECTOR  
Mailing Address  
4800 SAND POINT WAY NE  
SEATTLE, WA 98105  
| MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION |
200390  SEATTLE CHILDREN’S HOSPITAL - BELLEVUE  1135 116TH AVENUE NE  BELLEVUE, WA 98004  (206) 987-2164  (866) 987-2000  FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG  WWW.SEATTLECHILDRENS.ORG  
LESLIE PIerson  DIRECTOR, PSYCHIATRY  
CAROL ROCKHILL  MEDICAL DIRECTOR  
MAILING ADDRESS  4800 SAND POINT WAY NE  SEATTLE, WA 98105  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  

200347  SEATTLE CHILDREN’S HOSPITAL - MAIN  4800 SAND POINT WAY NE  SEATTLE, WA 98105  (206) 987-2164  (866) 987-2000  FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG  WWW.SEATTLECHILDRENS.ORG  
KATHY BREWER  MANAGER, INSURANCE PROCESSING/UTILIZATION REVIEW  
DEBRA GUMBARDO  CHIEF PSYCHO-SOCIAL SERVICES  
MAILING ADDRESS  4800 SAND POINT WAY NE  SEATTLE, WA 98105  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  

200391  SEATTLE CHILDREN’S HOSPITAL - ODESSA BROWN CHILDREN’S CLINIC  2101 EAST YESLER WAY  SEATTLE, WA 98122  (206) 987-7210  (866) 987-2000  FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG  WWW.SEATTLECHILDRENS.ORG  
ARLEsIA BAILEY  DIRECTOR  
MARK FADOOL  CLINICAL DIRECTOR  
MAILING ADDRESS  4800 SAND POINT WAY NE  SEATTLE, WA 98105  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  

115200  SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES  1216 PINE STREET, SUITE 300  SEATTLE, WA 98101  (206) 323-1768  INFO@SEATTLECOUNSELING.ORG  WWW.SEATTLECOUNSELING.ORG  
ANN MCGETTIGAN  EXECUTIVE DIRECTOR  
PAT SOON  CLINICAL DIRECTOR
KING

MAILING ADDRESS
1216 PINE ST STE 300
SEATTLE, WA 98101

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

SHAWNA FAY GALLAGHER
BEHAVIORAL HEALTH DIRECTOR

STEPHANIE TOMPKINS
BH ASSOCIATE DIRECTOR

005700

SEATTLE INDIAN HEALTH BOARD
611 12TH AVENUE SOUTH
SEATTLE, WA 98114
(206) 324-9360

MAILING ADDRESS
611 12TH AVE S
SEATTLE, WA 98114

CERTIFIED SERVICES
SUBSTANCE DISORDER SERVICES:
- LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200242

SENeca FAMILY OF AGENCIES
210 SOUTH HUDSON STREET, SUITES 312 &AMP; 318
SEATTLE, WA 98134
(206) 832-8518
WWW.SENECAFOA.ORG

MAILING ADDRESS
210 SOUTH HUDSON STREET, SUITES 312 &AMP; 318
SEATTLE, WA 98134

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

009700

SHAMROCK GROUP, INC.
10564 5TH AVENUE NE, SUITE 301
SEATTLE, WA 98125
(206) 789-4784

MAILING ADDRESS
10564 5TH AVENUE NE, SUITE 301
SEATTLE, WA 98125

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

200109

SISTERS IN COMMON
15 SOUTH GRADY WAY, SUITE 310
RENTON, WA 98055

MAILING ADDRESS
POST OFFICE BOX 1514
RENTON, WA 98057
<table>
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<td><strong>CERTIFIED SERVICES</strong></td>
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<td>BRIEF INTERVENTION TREATMENT</td>
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<td>CASE MANAGEMENT</td>
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<td><strong>INDIVIDUAL TREATMENT</strong></td>
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### 200467

**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.**
- **KENT**
  - 1019 WEST JAMES STREET, SUITE A
    - KENT, WA 98032
  - (253) 234-1190
  - WWW.STOPWA.COM

**MAILING ADDRESS**
- PO BOX 111297
  - TACOMA, WA 98411

**CERTIFIED SERVICES**
- **MENTAL HEALTH SERVICES:**
  - BRIEF INTERVENTION TREATMENT
  - CASE MANAGEMENT
  - INDIVIDUAL TREATMENT

**ANDREW TATUM**
- ADMINISTRATOR

**LINDA IRISH**
- PROGRAM MANAGER

### 200271

**SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN**
- 11032 20TH AVENUE NE
  - SEATTLE, WA 98125
- (206) 397-5196
- INFO@SEBASEATTLE.COM
- WWW.SEBASEATTLE.COM

**MAILING ADDRESS**
- 11032 20TH AVENUE NE
  - SEATTLE, WA 98125

**CERTIFIED SERVICES**
- **MENTAL HEALTH SERVICES:**
  - RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

**DANIELLE SAYEBROOK**
- OWNER

### 200425

**SOUND EDUCATION & BEHAVIOR ASSOCIATES - THIRD AVENUE**
- 9714 3RD AVENUE NE, SUITE 206
  - SEATTLE, WA 98115
- (206) 397-5196
- INFO@SEBASEATTLE.COM
- WWW.SEBASEATTLE.COM

**MAILING ADDRESS**
- 9714 3RD AVENUE NE, SUITE 206
  - SEATTLE, WA 98115

**CERTIFIED SERVICES**
- **MENTAL HEALTH SERVICES:**
  - RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

**DANIELLE SAYEBROOK**
- OWNER

### 166900

**SOUND FAMILY CENTER LLC**
- 17924 140TH AVENUE NORTHEAST, SUITE 230
  - WOODINVILLE, WA 98072
- (425) 419-4800

**MAILING ADDRESS**
- 17924 140TH AVENUE NORTHEAST, SUITE 230
  - WOODINVILLE, WA 98072

**CERTIFIED SERVICES**
- **SUBSTANCE USE DISORDER SERVICES:**
  - LEVEL I OUTPATIENT

**JOHN TYE**
- ADMINISTRATOR

**KAELE E. CLARK**
- CLINICAL SUPERVISOR
SOUND MENTAL HEALTH - AUBURN
4238 AUBURN WAY NORTH
AUBURN, WA 98002
(253) 876-7600
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

Mailing Address
1600 E OLIVE ST
SEATTLE, WA 98122

Certified Services
Substance Use Disorder Services:
DUI Assessment
Level I Outpatient
Level II Intensive Outpatient
Problem & Pathological Gambling Services:
Problem & Pathological Gambling

Mental Health Services:
Brief Intervention Treatment
Case Management
Crisis Outreach
Crisis Peer Support
Crisis Stabilization
Crisis Telephone Support
Day Support
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Medication Support
Recovery Peer Support
Recovery Support Wraparound Facilitation

KATRINA EGNER
Chief Programs Officer
ARDEN JAMES
SUD Clinical Supervisor

SOUND MENTAL HEALTH - BELLEVUE BUILDING A
14216 NORTHEAST 21ST STREET
BELLEVUE, WA 98007
(425) 653-4900
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

Mailing Address
1600 E OLIVE ST
SEATTLE, WA 98122

Certified Services
Substance Use Disorder Services:
DUI Assessment
Level I Outpatient
Level II Intensive Outpatient

Mental Health Services:
Brief Intervention Treatment
Case Management
Crisis Outreach
Crisis Peer Support
Crisis Stabilization
Crisis Telephone Support
Day Support
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Medication Support
Recovery Peer Support
Recovery Support Wraparound Facilitation

KATRINA EGNER
Chief Programs Officer
THERESA WINTHER
MH & SUD Clinical Supervisor

SOUND MENTAL HEALTH - BELLEVUE BUILDING B
14270 NORTHEAST 21ST STREET
BELLEVUE, WA 98007
(425) 653-5000
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

Mailing Address
1600 E OLIVE ST
SEATTLE, WA 98122

Certified Services
Substance Use Disorder Services:
DUI Assessment

Mental Health Services:
Brief Intervention Treatment
Case Management
Crisis Outreach
Crisis Peer Support
Crisis Stabilization
Crisis Telephone Support
Day Support
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Medication Support
Recovery Peer Support
Recovery Support Wraparound Facilitation

KATRINA EGNER
Chief Programs Officer
CARA GRESHAM
SUD Clinical Supervisor
### Certified Services

**Substance Use Disorder Services:**
- Level I Outpatient
- Level II Intensive Outpatient

**Mental Health Services:**
- Brief Intervention Treatment
- Case Management
- Crisis Outreach
- Crisis Peer Support
- Crisis Stabilization
- Crisis Telephone Support
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Recovery Employment Support
- Recovery Medication Support
- Recovery Peer Support

### Sound Mental Health - Broadway

**600 Broadway, Suite 170**  
**Seattle, WA 98122**  
**(206) 302-2200**  
**ClientFeedback@SMH.org**  
**www.SMH.org**

**KATRINA EGNER**  
CHIEF PROGRAMS OFFICER

**TERRY RICHARDSON**  
MH CLINICAL SUPERVISOR

**Mailing Address**  
**1600 E Olive St**  
**Seattle, WA 98122**

### Certified Services

**Substance Use Disorder Services:**
- Level I Outpatient
- Level II Intensive Outpatient

**Mental Health Services:**
- Brief Intervention Treatment
- Case Management
- Crisis Outreach
- Crisis Peer Support
- Crisis Stabilization
- Crisis Telephone Support
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Employment Support
- Recovery Medication Support
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

### Sound Mental Health - Capitol Hill Main

**1600 East Olive Street**  
**Seattle, WA 98122**  
**(206) 302-2200**  
**ClientFeedback@SMH.org**  
**www.SMH.org**

**KATRINA EGNER**  
CHIEF PROGRAMS OFFICER

**Mailing Address**  
**1600 E Olive St**  
**Seattle, WA 98122**
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200272  SOUND MENTAL HEALTH - CAPITOL HILL NORTH
122 16TH AVENUE EAST
SEATTLE, WA 98112
(206) 302-2800
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CHRISTINE ATIENZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

106500  SOUND MENTAL HEALTH - NORTHGATE
9706 4TH AVENUE NE, SUITE 303
SEATTLE, WA 98115
(206) 302-2900

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
200276 SOUND MENTAL HEALTH - REDMOND
16225 NORTHEAST 87TH STREET, SUITE A-6
REDMOND, WA 98052
(425) 653-4960
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

106200 SOUND MENTAL HEALTH - SOUTHCENTER
6100 SOUTHCENTER BOULEVARD
TUKWILA, WA 98188-2441
(206) 444-7800

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200443 SOUND MENTAL HEALTH - TUKWILA
6400 SOUTHCENTER BOULEVARD
TUKWILA, WA 98188
(206) 444-3600
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

DENNIS MARCERON
PROGRAM MANAGER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- DAY SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200116 SOUTHEAST YOUTH AND FAMILY SERVICES
3722 SOUTH HUDSON STREET
SEATTLE, WA 98118
(206) 721-5542
WWW.SEYFS.ORG

ANTHONY AUSTIN
EXECUTIVE DIRECTOR
STEPHANIE MCWETHY
CLINICAL DIRECTOR

MAILING ADDRESS
3722 SOUTH HUDSON STREET
SEATTLE, WA 98118

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

200117 SOUTHWEST YOUTH AND FAMILY SERVICES
4555 DELRIDGE WAY SW
SEATTLE, WA 98106

MAILING ADDRESS
4555 DELRIDGE WAY SW
SEATTLE, WA 98106

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

200052 STEPS, LLC
2366 EASTLAKE AVENUE EAST, SUITE 102
SEATTLE, WA 98102
(206) 829-9328

HEATHER SUAREZ
CO-OWNER/CONSULTANT
SHANE MIRAMONTEZ
CO-OWNER/CONSULTANT

MAILING ADDRESS
2366 EASTLAKE AVENUE EAST, SUITE 102
SEATTLE, WA 98102

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
200278  SUM OF LEARNING  
2310 130TH AVENUE NE, BUILDING B, SUITE 100  
BELLEVUE, WA 98005  
(425) 954-7243  
INFO@SUMOFLEARNING.COM  
WWW.SUMOFLEARNING.COM  

MAILING ADDRESS  
2310 130TH AVENUE NE, BUILDING B, SUITE 100  
BELLEVUE, WA 98005  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

006100  SUNRISE CENTERS  
12650 FIRST AVENUE SOUTH  
SEATTLE, WA 98168  
(206) 248-3006  

MAILING ADDRESS  
12650 FIRST AVE S  
SEATTLE, WA 98168  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

044901  SWEDISH MEDICAL CENTER - BALLARD  
5300 TALLMAN AVENUE NW  
SEATTLE, WA 98107  
(206) 781-6209  

MAILING ADDRESS  
ATTN: CHIEF NURSING OFFICER  
SEATTLE, WA 98107  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT

200394  SWEDISH MEDICAL CENTER, BALLARD BEHAVIORAL HEALTH  
5300 TALLMAN AVENUE NW  
SEATTLE, WA 98107  
(206) 320-2230  
SMC-CLINQUALITYINVESTIGATIONS@SWEDISH.ORG  
WWW.SWEDISH.ORG  

MAILING ADDRESS  
ATTN: CHIEF NURSING OFFICER  
SEATTLE, WA 98107  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT
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<th>Location</th>
<th>Company</th>
<th>Address</th>
<th>Contact</th>
<th>Website</th>
<th>Services</th>
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</thead>
<tbody>
<tr>
<td>TELECARE - KING COUNTY E&amp;T</td>
<td>33480 13TH PLACE SOUTH FEDERAL WAY, WA 98003</td>
<td>(253) 285-7101 (888) 249-2327</td>
<td>TYVONNE BERRING ADMINISTRATOR RODNEY PRYOR CLINICAL DIRECTOR</td>
<td><a href="http://WWW.TELECARECORP.COM">WWW.TELECARECORP.COM</a></td>
<td>MENTAL HEALTH SERVICES: INPATIENT EVALUATION AND TREATMENT - ADULT</td>
</tr>
<tr>
<td>THE EMILY PROGRAM - RTF</td>
<td>4 NICKERSON STREET, SUITE 300 SEATTLE, WA 98109</td>
<td>(888) 364-5977</td>
<td>REBECCA MAY SITE DIRECTOR MONIQUE DESCHANE SITE DIRECTOR</td>
<td><a href="http://WWW.EMILYPROGRAM.COM">WWW.EMILYPROGRAM.COM</a></td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT DAY SUPPORT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION RECOVERY MEDICATION SUPPORT RESIDENTIAL TREATMENT FACILITY</td>
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<tr>
<td>THE EMILY PROGRAM - SEATTLE</td>
<td>1700 WESTLAKE AVENUE NORTH, SUITE 650 SEATTLE, WA 98109</td>
<td>(888) 364-5977</td>
<td>JOANNA STAGG SITE MANAGER</td>
<td><a href="http://WWW.EMILYPROGRAM.COM">WWW.EMILYPROGRAM.COM</a></td>
<td>MENTAL HEALTH SERVICES: DAY SUPPORT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION</td>
</tr>
<tr>
<td>THE EVERGREEN AT NORTHPOINT</td>
<td>13037 NORTHEAST BEL RED ROAD, SUITE 102 BELLEVUE, WA 98005</td>
<td>(425) 285-7539</td>
<td>THOMAS HAMMAN ADMINISTRATOR</td>
<td><a href="mailto:TMCLURE@NORTHPOINTRECOVERY.COM">TMCLURE@NORTHPOINTRECOVERY.COM</a> <a href="http://WWW.EVERGREENDRUGREHAB.COM">WWW.EVERGREENDRUGREHAB.COM</a></td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT MENTAL HEALTH SERVICES: CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT</td>
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</tbody>
</table>
KING

004000 THERAPEUTIC HEALTH SERVICES - BELLEVUE
1412 140TH PLACE NORTHEAST
BELLEVUE, WA 98007
(425) 747-7892

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

JEREMY PETERSON
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

150900 THERAPEUTIC HEALTH SERVICES - KENT
24823 SOUTH PACIFIC HIGHWAY
KENT, WA 98032
(253) 681-0010
(253) 681-0011

MAILING ADDRESS
24823 S PACIFIC HWY
KENT, WA 98032

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

HOLLIE CHRISTIANCY
BRANCH MANAGER

PHILIP JONES
SUD CLINICAL SUPERVISOR

083500 THERAPEUTIC HEALTH SERVICES - SEATTLE RAINIER AVENUE
5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118
(206) 723-1980

MAILING ADDRESS
5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

RANDON AEA
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR
<table>
<thead>
<tr>
<th>Zip Code</th>
<th>Location</th>
<th>Manager</th>
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<tr>
<td>10440</td>
<td>THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET</td>
<td>GEORGE CALDERON</td>
<td>(206) 323-0934</td>
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<td>NORMAN JOHNSON</td>
<td>EXECUTIVE DIRECTOR</td>
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<td>MAILING ADDRESS</td>
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<td>1116 SUMMIT AVE SEATTLE, WA 98101</td>
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<td>01580</td>
<td>THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE</td>
<td>GEORGE CALDERON</td>
<td>(206) 323-0930</td>
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<td>MAILING ADDRESS</td>
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<td>ATTN: CYNTHIA M. DUAY SEATTLE, WA 98101</td>
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<td>01690</td>
<td>THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH &amp; FAMILY</td>
<td>ROGER IINO</td>
<td>(206) 322-7676</td>
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<td>NORMAN JOHNSON</td>
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<td>MAILING ADDRESS</td>
<td></td>
<td>1901 MARTIN LUTHER KING JR WAY SOUTH SEATTLE, WA 98144</td>
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<td>RECOVERY SUPPORT WRAPAROUND FACILITATION</td>
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</table>
KING

015801  THERAPEUTIC HEALTH SERVICES - SHORELINE
16715 AURORA AVENUE NORTH, SUITE 102
SHORELINE, WA 98133
(206) 546-9766
BEN ROSS
BRANCH MANAGER
NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200330  THIRA HEALTH, LLC
400 108TH AVENUE NE, SUITES 402, 520, 700
BELLEVUE, WA 98004
(425) 454-1199
INFO@THIRAHEALTH.COM
WWW.THIRAHEALTH.COM
DR. MERHI MOORE
CHIEF EXECUTIVE/MEDICAL OFFICER

MAILING ADDRESS
400 108TH AVE NE STE 402
BELLEVUE, WA 98004

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

005701  THUNDERBIRD - SEATTLE INDIAN HEALTH BOARD
9236 RENTON AVENUE SOUTH
SEATTLE, WA 98118
(206) 722-7152
SHAWNA FAY GALLAGHER
BEHAVIORAL HEALTH DIRECTOR
STEPHANIE TOMPKINS
BH ASSOCIATE DIRECTOR

MAILING ADDRESS
611 12TH AVENUE SOUTH
SEATTLE, WA 98114

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

200131  TRANSITIONAL RESOURCES
2970 SOUTHWEST AVALON WAY
SEATTLE, WA 98126
(206) 983-2051
INFO@TRANSITIONALRESOURCES.ORG
WWW.TRANSITIONALRESOURCES.ORG.
DARCELL SLOVEK-WALKER
CEO
JULIA WATKINS
CLINICAL DIRECTOR

MAILING ADDRESS
2970 SW AVALON WAY
SEATTLE, WA 98126
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200132
UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE
13470 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98178

MAILING ADDRESS
17701 108TH AVENUE SE, #336
RENTON, WA 98055

CERTIFIED SERVICES

200316
UW HARING CENTER
1981 NORTHEAST COLUMBIA ROAD
SEATTLE, WA 98195
(206) 543-4011
BETHM8@GMAIL.COM
WWW.HARINGCENTER.ORG

ILENE SCHWARTZ
DIRECTOR
TARA GOODINHO
CLINICAL SUPERVISOR

MAILING ADDRESS
1981 NE COLUMBIA ROAD
SEATTLE, WA 98195

CERTIFIED SERVICES

091100
VALLEY CITIES COUNSELING & CONSULTATION - AUBURN
2704 I STREET NE
AUBURN, WA 98002
(253) 833-7444

SHEKH ALI
INTERIM CEO
REBEKAH POWERS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200517
VALLEY CITIES COUNSELING & CONSULTATION - AURORA CLINIC
13555 WA-99
SEATTLE, WA 98133
(253) 833-7444
(206) 963-3145
WWW.VALLEYCITIES.ORG

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO

200405
VALLEY CITIES COUNSELING & CONSULTATION - ENUMCLAW
1335 COLE STREET
ENUMCLAW, WA 98022
(425) 336-4100
(253) 833-7444
WWW.VALLEYCITIES.ORG

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO

164700
VALLEY CITIES COUNSELING & CONSULTATION - DES MOINES
26401 PACIFIC HIGHWAY SOUTH
DES MOINES, WA 98198
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

SHEKH ALI
ACTING CEO

LYNN ALLAR
MH CLINICAL SUPERVISOR/SITE DIRECTOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY PEER SUPPORT

090900
VALLEY CITIES COUNSELING & CONSULTATION - FEDERAL WAY
33301 1ST WAY SOUTH, SUITE C-115
FEDERAL WAY, WA 98003
(253) 833-7444

MAILING ADDRESS
325 WEST GOWE STREET
FEDERAL WAY, WA 98032

SHEKH ALI
ACTING CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

091000
VALLEY CITIES COUNSELING & CONSULTATION - KENT
325 WEST GOWE STREET
KENT, WA 98032
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

200520
VALLEY CITIES COUNSELING & CONSULTATION - LAKE CITY CLINIC
12736 33RD AVENUE NORTHEAST
SEATTLE, WA 98125
(253) 833-7444
(206) 963-3145
WWW.VALLEYCITIES.ORG

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO

HESUSA "SUSIE" KROLL
REGIONAL OPERATIONS DIRECTOR (MH CS)
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200523
VALLEY CITIES COUNSELING & CONSULTATION - PIKE PLACE CLINIC
1537 WESTERN AVENUE
SEATTLE, WA 98101
(253) 833-7444
WWW.VALLEYCITIES.ORG

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO
JESSICA WILLIAMS
CLINIC MANAGER (MH CS)

164600
VALLEY CITIES COUNSELING & CONSULTATION - RENTON
221 WELLS AVENUE SOUTH
RENTON, WA 98057
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

174600
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE MERIDIAN AVENUE
10521 MERIDIAN AVENUE NORTH
SEATTLE, WA 98133
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR
Certified Services
Substance Use Disorder Services:
Level I Outpatient
Level II Intensive Outpatient

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (LRA) Support
Psychiatric Medication
Recovery Employment Support
Recovery Peer Support

174100
Valley Cities Counseling & Consultation - Seattle Rainier Avenue
8444 Rainier Avenue South
Seattle, WA 98118
(253) 833-7444

Mailing Address
325 W Gowe St
Kent, WA 98032

Certified Services
Substance Use Disorder Services:
Level I Outpatient
Level II Intensive Outpatient

Kenneth Taylor
CEO

Rose Baldridge
SUD Clinical Supervisor

200134
Vashon Youth and Family Services
20110 Vashon Highway Southwest
Vashon, WA 98070
(206) 463-5511
Info@VYFS.org
WWW.VYFS.ORG

Mailing Address
PO Box 237
Vashon, WA 98070

Certified Services
Substance Use Disorder Services:
Level I Outpatient
Level II Intensive Outpatient
Screening and Brief Intervention

Barbara Garrett
Director of Clinical Services

Diane Hopkins
SUD Clinical Supervisor

006400
Veterans Administration Puget Sound Health Care System - Seattle
1660 South Columbian Way
Seattle, WA 98108
(206) 764-2123

Mailing Address
Attn: Blake Toder
Seattle, WA 98108-1597

Certified Services
Substance Use Disorder Services:
Level I Outpatient
Level II Intensive Outpatient
Withdrawal Management

Carl Rimmele, Ph.D
Director
200574  WAPI COMMUNITY SERVICES - FEDERAL WAY
28815 PACIFIC HIGHWAY SOUTH, SUITE 7A
FEDERAL WAY, WA 98003
(844) 987-9274
INFO@WAPISEATTLE.ORG
WWW.WAPISEATTLE.ORG

MAILING ADDRESS
28815 PACIFIC HIGHWAY SOUTH, SUITE 7A
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

AILEEN DE LEON
EXECUTIVE DIRECTOR
CHIA-CHI WANG
CLINICAL DIRECTOR

078300  WAPI COMMUNITY SERVICES - MAIN
861 POPLAR PLACE SOUTH
SEATTLE, WA 98144
(844) 987-9274
INFO@WAPISEATTLE.ORG
WWW.WAPISEATTLE.ORG

MAILING ADDRESS
861 POPLAR PLACE SOUTH
SEATTLE, WA 98144

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

AILEEN DE LEON
EXECUTIVE DIRECTOR
CHIA-CHI WANG
CLINICAL DIRECTOR

200148  WASHINGTON NATIONAL COUNSELING, LLC
17121 SOUTHEAST 270TH PLACE
COVINGTON, WA 98042
(253) 631-1725
WWW.WNC-COUNSELING.COM

MAILING ADDRESS
PO BOX 9862
COVINGTON, WA 98042

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY

IFEANYI C. CHUKWU
PRESIDENT/CLINICAL DIRECTOR

167200  YMCA OF GREATER SEATTLE
2100 24TH AVENUE SOUTH, SUITE 260
SEATTLE, WA 98144
(206) 382-5340
WWW.SEATTLEYMCA.ORG

MAILING ADDRESS
2100 24TH AVE S STE 260
SEATTLE, WA 98144

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

ROGER IINO
ASSOCIATE EXECUTIVE DIRECTOR
STUART YOUNG
MH CLINICAL SUPERVISOR
200002  YOU GROW GIRL
10215 LAKE CITY WAY NE, SUITE H
SEATTLE, WA 98125
(206) 643-9622
INFO@ANNARA.ORG
WWW.ANNARA.ORG
LYNN COLEMAN
EXECUTIVE DIRECTOR
SHERICE ARNOLD-ARRINGTON
MH CLINICAL SUPERVISOR
Mailing Address
10215 LAKE CITY WAY NE, SUITE H
SEATTLE, WA 98125
Certified Services
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

006500  YOUTH EASTSIDE SERVICES - BELLEVUE MAIN
999 164TH AVENUE NORTHEAST
BELLEVUE, WA 98008
(425) 747-4937
PATTI SKELTON-MCGOUGHAN
EXECUTIVE DIRECTOR
KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR
Mailing Address
999 164TH AVENUE NE
BELLEVUE, WA 98008
Certified Services
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

006501  YOUTH EASTSIDE SERVICES - KIRKLAND
11829 97TH AVE NE
KIRKLAND, WA 98034
(425) 747-4937
PATTI SKELTON-MCGOUGHAN
EXECUTIVE DIRECTOR
KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR
Mailing Address
999 164TH AVE NE
BELLEVUE, WA 98008
Certified Services
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

073500  YOUTH EASTSIDE SERVICES - REDMOND
15600 REDMOND WAY, SUITE 102
REDMOND, WA 98052
(425) 869-6036
(425) 747-4937
PATTI SKELTON-MCGOUGHAN
EXECUTIVE DIRECTOR
KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR
Mailing Address
999 164TH AVE NE
BELLEVUE, WA 98008
KING

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

KITSAP

119000  ACTION COUNSELING - PORT ORCHARD
729 PROSPECT STREET, SUITE 200
PORT ORCHARD, WA 98366
(360) 895-1307
(360) 649-7646

MAILING ADDRESS
729 PROSPECT ST STE 200
PORT ORCHARD, WA 98366

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

BETTY KASSUHN
ADMINISTRATOR

027300  AGAPE UNLIMITED
4841 AUTO CENTER WAY, SUITE 101
BREMERTON, WA 98312
(360) 373-1529

MAILING ADDRESS
4841 AUTO CENTER WAY, SUITE 101
BREMERTON, WA 98312

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SARA MAREZ-FIELDS
EXECUTIVE DIRECTOR
TODD BENSON
TREATMENT DIRECTOR

118600  CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC
2817 WHEATON WAY, SUITE 205
BREMERTON, WA 98310
(360) 373-0155

MAILING ADDRESS
2817 WHEATON WAY, SUITE 205
BREMERTON, WA 98310

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LINDSY MCGOWAN-ANDERSON
ADMINISTRATOR
MIKE STONE
CLINICAL SUPERVISOR

200326  CATHOLIC COMMUNITY SERVICES - BREMERTON
2625 WHEATON WAY, SUITE B
BREMERTON, WA 98310
(360) 792-2020
(888) 649-6732
DAVEK@CCSWW.ORG
WWW.CCSWW.ORG/FAMILYPRESERVATION

MARY STONE SMITH
VICE PRESIDENT
DAVE KUCKLICK
SITE DIRECTOR
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
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</thead>
</table>
| **KITSAP**

**MAILING ADDRESS**
1001 N J STREET
TACOMA, WA 98403

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

**086500**

**DOC - PENINSULA WORK RELEASE**
1340 LLOYD PARK WAY
PORT ORCHARD, WA 98366
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

**MAILING ADDRESS**
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

**200480**

**EAGLE HARBOR COUNSELING, LLC**
600 WINSLOW WAY EAST, SUITE 232
BAINBRIDGE ISLAND, WA 98110
(425) 478-1000

EAGLEHARBORCOUNSELING@GMAIL.COM
WWW.EAGLEHARBORCOUNSELING.COM

JULIA JENSINE
OWNER/ADMINISTRATOR

**MAILING ADDRESS**
600 WINSLOW WAY EAST, SUITE 232
BAINBRIDGE ISLAND, WA 98110

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT

**148700**

**HEALTHY WHOLE SOLUTIONS**
1014 BAY STREET, SUITE 24
PORT ORCHARD, WA 98366
(360) 602-0022

CAROL HARDEBECK
INTERIM ADMINISTRATOR

MITCHELL R. BROWN
CLINICAL SUPERVISOR

**MAILING ADDRESS**
1014 BAY ST STE 24
PORT ORCHARD, WA 98366

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

**200079**

**INSTITUTE FOR FAMILY DEVELOPMENT - BREMERTON**
5610 KITSAP WAY, SUITE 315
BREMERTON, WA 98312

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR
KITSAP

MAILING ADDRESS
34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

200230
KITSAP MENTAL HEALTH SERVICES - ADOLESCENT INPATIENT
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311
JOE ROSZAK
EXEC. DIR.

200229
KITSAP MENTAL HEALTH SERVICES - ADULT INPATIENT
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311
JOE ROSZAK
EXEC. DIR.

018400
KITSAP MENTAL HEALTH SERVICES - MAIN
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311
(360) 373-5031
WWW.KITSAPMENTALHEALTH.ORG
JOE ROSZAK
CEO
STACEY DEVENNEY
CCO (MH & SUD)

MAILING ADDRESS
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - CHILDREN

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY
KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD
2535 MITCHELL ROAD SE
PORT ORCHARD, WA 98366
(360) 373-5031
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD
900 SHERIDAN ROAD, SUITES 103 & 106
BREMERTON, WA 98310
(360) 373-5031
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

KITSAP MENTAL HEALTH SERVICES - WHEATON WAY
4040 WHEATON WAY, SUITES 108, 112, 204, 206, 210
BREMERTON, WA 98310
(360) 373-5031
WWW.KITSAPMENTALHEALTH.ORG
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311
<table>
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<td>CERTIFIED SERVICES</td>
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<td>RECOVERY SUPPORT WRAPAROUND FACILITATION</td>
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**KITSAP RECOVERY CENTER - INPATIENT**

**Address:** 661 TAYLOR AVENUE PORT ORCHARD, WA 98366

**Phone:** (360) 337-4625

**Website:** [WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM](http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM)

**Directors:**
- BERGEN STARKE - TREATMENT DIRECTOR
- KENNETH WILSON - CLINICAL SUPERVISOR

**Mailing Address:**
614 DIVISION ST MS-23
PORT ORCHARD, WA 98366

**CERTIFIED SERVICES**

| SUBSTANCE USE DISORDER SERVICES: |
| INTENSIVE INPATIENT |
| WITHDRAWAL MANAGEMENT |

**KITSAP RECOVERY CENTER - OUTPATIENT**

**Address:** 1026 SIDNEY AVENUE PORT ORCHARD, WA 98366

**Phone:** (360) 337-5725

**Website:** [WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM](http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM)

**Directors:**
- BERGEN STARKE - ADMINISTRATOR

**Mailing Address:**
614 DIVISION ST MS-23
PORT ORCHARD, WA 98366

**CERTIFIED SERVICES**

| SUBSTANCE USE DISORDER SERVICES: |
| LEVEL I OUTPATIENT |
| LEVEL II INTENSIVE OUTPATIENT |

**NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)**

**Address:** ONE BOONE ROAD BREMERTON, WA 98312

**Phone:**
- (360) 475-5350
- (360) 475-5314

**Directors:**
- ANGELA MATTISON - PROGRAM DIRECTOR
- JOHN T. VAUGHN - CLINICAL SUPERVISOR

**Mailing Address:**
ONE BOONE ROAD ATTN: SARP
BREMERTON, WA 98312

**CERTIFIED SERVICES**

| SUBSTANCE USE DISORDER SERVICES: |
| ALCOHOL AND DRUG INFORMATION SCHOOL |
| LEVEL I OUTPATIENT |
| LEVEL II INTENSIVE OUTPATIENT |

**OLALLA GUEST LODGE**

**Address:** 12850 LALA COVE LANE SE OLALLA, WA 98359

**Phone:**
- (253) 857-6201
- (800) 882-6201

**Email:** MAIL@OLALLA.ORG OR RECOVERY@OLALLA.ORG

**Website:** [WWW.OLALLA.ORG](http://WWW.OLALLA.ORG)

**Directors:**
- CHRISTINE LYNCH - EXECUTIVE DIRECTOR
- MELODY MCKEE - CLINICAL OPERATIONS MANAGER (SUD CS)
KITSAP

MAILING ADDRESS
12850 LALA COVE LN SE
OLALLA, WA 98359

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

088800
PORT GAMBLE S'KLALLAM RECOVERY CENTER
7550 LITTLE BOSTON ROAD NE
KINGSTON, WA 98346
(360) 297-6326

JOLENE GEORGE (INTERIM ADMIN)
CHILD & FAMILY SVCS DIRECTOR
COURTNEY OLIVER
CLINICAL SUPERVISOR

MAILING ADDRESS
31912 LITTLE BOSTON RD NE
KINGSTON, WA 98346

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200108
RMH SERVICES
1933 4TH STREET
BREMERTON, WA 98337
(360) 479-4959
ELLENEPSTEIN@YAHOO.COM

ELLEN EPSTEIN
DIRECTOR

MAILING ADDRESS
1933 4TH STREET
BREMERTON, WA 98337

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

110900
SUQUAMISH TRIBE WELLNESS PROGRAM
18490 SUQUAMISH WAY, SUITE 107
SUQUAMISH, WA 98392
(360) 394-8558
WWW.SUQUAMISH.NSN.US

GRACE JONES
ADMINISTRATOR

MAILING ADDRESS
PO BOX 1228
SUQUAMISH, WA 98392

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
KITSAP

200282 THE MARC - MILES ABA SERVICES - SILVERDALE
3100 NORTHWEST BUCKLIN HILL ROAD, SUITE 224
SILVERDALE, WA 98383

MAILING ADDRESS
3100 NW BUCKLIN HILL ROAD, SUITE 224
SILVERDALE, WA 98383

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

042900 THE RIGHT CHOICE COUNSELING SERVICE, INC.
1740 NORTHEAST RIDDELL ROAD, SUITE 170
BREMERTON, WA 98310
(360) 373-4077

MAILING ADDRESS
1740 NE RIDDELL RD, STE 170
BREMERTON, WA 98310

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

006600 WEST SOUND TREATMENT CENTER - PORT ORCHARD
1415 LUMSDEN ROAD
PORT ORCHARD, WA 98367
(360) 876-9430

MAILING ADDRESS
1415 LUMSDEN RD
PORT ORCHARD, WA 98367

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

169700 WEST SOUND TREATMENT CENTER - POULSBO
19351 8TH AVENUE NE, SUITE 204
POULSBO, WA 98370
(360) 598-3929

MAILING ADDRESS
1415 LUMSDEN RD
PORT ORCHARD, WA 98367

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
200543  BARTH CLINIC - ELLensburg
1206 NORTH DOLARWAY ROAD, SUITE 118
ELLensburg, WA 98926
(877) 457-5657
(509) 457-5653
MEAGANTAKAMORI@BARTHCLINIC.COM
WWW.BARTHCLINIC.COM

MAILING ADDRESS
PO BOX 1207
YAKIMA, WA 98907-1207

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200301  COMPREHENSIVE HEALTHCARE - CLE ELum
402 EAST 1ST STREET
CLE ELUM, WA 98922
(509) 674-2340
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 949
YAKIMA, WA 98907

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200023  COMPREHENSIVE HEALTHCARE - ELLensburg 4th Avenue
220 WEST 4TH AVENUE
ELLensburg, WA 98926
(509) 925-9861

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
### Kittitas

**Comprehensive Healthcare - Ellensburg Pearl Street**
- Address: 707 North Pearl Street, Suite H, Ellensburg, WA 98926
- Phone: (509) 925-9861
- Admin: Ron Gengler
- Clinical Supv: Rebecca Twohy

**Mailing Address**
- PO Box 959, Yakima, WA 98907

**Certified Services**
- **Substance Use Disorder Services:**
  - Alcohol and Drug Information School
  - DUI Assessment
  - Information and Crisis
  - Level I Outpatient

**Mental Health Services:**
- Brief Intervention Treatment
- Case Management
- Crisis Emergency Involuntary Detention
- Crisis Outreach
- Family Therapy
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Employment Support
- Recovery Medication Support
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

### Ellensburg

**Ellie Lorenz Counseling and Consulting Service**
- Address: 514 East 3rd Street, Cle Elum, WA 98922
- Phone: (509) 260-0068
- Owner/Admin: Ellie Lorenz

**Mailing Address**
- 9325 Upper Peoh Point Road, Cle Elum, WA 98922

**Certified Services**
- **Problem & Pathological Gambling Services:**
  - Problem & Pathological Gambling

### Klickitat

**Comprehensive Healthcare - Goldendale**
- Address: 112 West Main Street, Goldendale, WA 98620
- Phone: (509) 773-5801
- Admin: Ron Gengler
- Clinical Supv: Rebecca Twohy
KLICKITAT

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- INFORMATION AND CRISIS
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

115900

COMPREHENSIVE HEALTHCARE - WHITE SALMON
432 NORTHEAST TOHOMISH STREET
WHITE SALMON, WA 98672
(509) 493-3400

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

COMPREHENSIVE HEALTHCARE - WHITE SALMON
432 NORTHEAST TOHOMISH STREET
WHITE SALMON, WA 98672
(509) 493-3400

RON GENGLER
ADMINISTRATOR
REBECCA TWOHY
SUD CLINICAL SUPERVISOR

LEWIS

200499

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CENTRALIA OUTPATIENT
1723 KRESKY AVENUE
CENTRALIA, WA 98531-8985
(360) 559-6201
ADMISSIONS@ABHSINC.NET
WWW.ABHSINC.NET

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

TONY PRENTICE
ADMINISTRATOR
ANGELA MELLO
MH & SUD CLINICAL SUPERVISOR
146500  AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CHEHALIS  
500 SOUTHEAST WASHINGTON AVENUE  
CHEHALIS, WA 98532  
(360) 266-5029  
(866) 729-8038  
WWW.AMERICANBEHAVIORALHEALTH.NET  

MARC MALMER  
ADMINISTRATOR  
CRAIG ZAHN  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 141106  
SPOKANE VALLEY, WA 99214  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
LONG-TERM RESIDENTIAL  
RECOVERY HOUSE  
SECURE WITHDRAWAL MANAGEMENT & STABILIZATION  
WITHDRAWAL MANAGEMENT  

155800  CASCADE MENTAL HEALTH CARE - CHEHALIS  
135 WEST MAIN STREET  
CHEHALIS, WA 98532  
(360) 748-4339  
WWW.CASCADEMENTALHEALTH.ORG  

RICHARD STRIDE  
CEO  
DAVID KING  
SUD CLINICAL SUPERVISOR  

MAILING ADDRESS  
2428 REYNOLDS AVE  
CENTRALIA, WA 98531  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION  

007400  CASCADE MENTAL HEALTH CARE - MAIN  
2428 WEST REYNOLDS AVENUE  
CENTRALIA, WA 98531  
(360) 330-9044  
WWW.CASCADEMENTALHEALTH.ORG  

RICHARD STRIDE  
CEO  
KAREN ROSE  
SUD CLINICAL SUPERVISOR  

MAILING ADDRESS  
2428 W REYNOLDS AVE  
CENTRALIA, WA 98531-4554
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<td>CORE HEALTH - CENTRALIA</td>
<td>104 SOUTH ROCK STREET, CENTRALIA, WA 98531</td>
<td>(360) 200-5419</td>
<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
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<td>CORRECT CARE, LLC</td>
<td>20311 OLD HIGHWAY 9 SW, CENTRALIA, WA 98531</td>
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<td>NISTON FRANCO</td>
<td>EXECUTIVE DIRECTOR</td>
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<td>ESMERALDA LYBRAND</td>
<td>SUD CLINICAL SUPERVISOR</td>
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#### Mailing Address

Address: PO BOX 1371, CHEHALIS, WA 98532

#### Certified Services

- Substance Use Disorder Services:
  - Alcoholic and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient

- Mental Health Services:
  - Brief Intervention Treatment
  - Case Management
  - Family Therapy
  - Group Therapy
  - Individual Treatment
  - Psychiatric Medication
  - Recovery Peer Support

### Certified Services

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#### Mailing Address

Address: PO BOX 1371, CHEHALIS, WA 98532

#### Certified Services

- Substance Use Disorder Services:
  - Alcoholic and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient

- Mental Health Services:
  - Brief Intervention Treatment
  - Case Management
  - Family Therapy
  - Group Therapy
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  - Psychiatric Medication
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### Certified Services

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#### Mailing Address

Address: PO BOX 87, MOSSYROCK, WA 98564

#### Certified Services

- Substance Use Disorder Services:
  - Alcoholic and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient

- Mental Health Services:
  - Brief Intervention Treatment
  - Case Management
  - Family Therapy
  - Group Therapy
  - Individual Treatment
  - Psychiatric Medication
  - Recovery Peer Support
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - MAIN
57 WEST MAIN STREET, SUITE 260
CHEHALIS, WA 98532
(360) 795-5955
(800) 392-6298
INFO@GREATRIVERSBHO.ORG
WWW.CIHEALTHSERVICES.COM
MARC BOLLINGER
CEO/ADMINISTRATOR
RON LEHTO
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1447
CHEHALIS, WA 98532

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  CASE MANAGEMENT
  CRISIS EMERGENCY INVOLUNTARY DETENTION
  CRISIS OUTREACH
  CRISIS PEER SUPPORT
  CRISIS STABILIZATION
  CRISIS TELEPHONE SUPPORT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  PSYCHIATRIC MEDICATION
  RECOVERY MEDICATION SUPPORT
  RECOVERY PEER SUPPORT

GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT
375 SOUTHWEST 11TH STREET
CHEHALIS, WA 98532
(360) 740-3420
DAVID REINKE
JUVENILE REHABILITATION COORDINATOR
SHIRLEY BIVINS
JUVENILE REHABILITATION COORDINATOR

MAILING ADDRESS
375 SW 11TH ST, MS: S21-5
CHEHALIS, WA 98532

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  LEVEL II INTENSIVE OUTPATIENT

NEW DIRECTIONS COUNSELING - CHEHALIS
1956 NORTHEAST KRESKY ROAD
CHEHALIS, WA 98532
(360) 740-4380
(360) 740-1807
SCOTT M. DICKINSON
ADMINISTRATOR
UNKNOWN 11/5/09
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 59
CHEHALIS, WA 98532

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  ALCOHOL AND DRUG INFORMATION SCHOOL
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT

TRUE NORTH-ESD 113 - LEWIS
SUITE C2-1, LEWIS COUNTY MALL
CHEHALIS, WA 98532
(360) 748-2274
SMUELLER@ESD113.ORG
WWW.ESD113.ORG/TRUENORTH
ERIN RIFFE
ADMINISTRATOR
JACKIE YEE
INTERM CLINICAL SUPERVISOR

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512
LEWIS

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LINCOLN

007600
LINCOLN COUNTY ALCOHOL & DRUG CENTER
505 1ST STREET
DAVENPORT, WA 99122
(509) 725-2111
WWW.CO.LINCOLN.WA.US
DARREN MATTOZZI
EXECUTIVE DIRECTOR
SUSAN HATTEN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 152
DAVENPORT, WA 99122-0152

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

160900
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT
1211 MERRIAM STREET
DAVENPORT, WA 99122
(509) 725-3001
(888) 725-3001
WWW.CO.STEVENS.WA.US/COUNSELING
DAVID NIELSEN
EXECUTIVE DIRECTOR
DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1211 MERRIAM ST
DAVENPORT, WA 99122

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

MASON

073000
BEHAVIORAL HEALTH RESOURCES - SHELTON
110 WEST K STREET
SHELTON, WA 98584
(360) 426-1696
(360) 704-7170
Laurie Tebo
CEO
DANIELLE MURPHY
RECOVERY SERVICES MANAGER

MAILING ADDRESS
3857 MARTIN WAY EAST
OLYMPIA, WA 98506
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT

---

200340

CATHOLIC COMMUNITY SERVICES - SHELTON

601 WEST FRANKLIN STREET
SHELTON, WA 98584
(888) 322-7156
HEIDIW@CCSWW.ORG
WWW.CCSWW.ORG/FAMILYPRESERVATION

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

---

200367

COMMUNITY YOUTH SERVICES - SHELTON

601 WEST FRANKLIN STREET, SUITE G-201
SHELTON, WA 98584
(360) 943-0780
(888) 698-1816
TAY@COMMUNITYYOUTHSERVICES.ORG
WWW.COMMUNITYYOUTHSERVICES.ORG

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- RECOVERY EMPLOYMENT SUPPORT
- SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS STABILIZATION
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

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200488

CONSEJO COUNSELING AND REFERRAL SERVICE - SHELTON

627 WEST FRANKLIN STREET
SHELTON, WA 98584
(206) 461-4880
EXEC@CONSEJOCOUNSELING.ORG
WWW.CONSEJONEW.CONSEJOCOUNSELING.ORG

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

JENNY RODRIGUEZ
REGIONAL DIRECTOR (MH & SUD CLINICAL SUPERVISOR)

MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118
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**MASON**

168500  
**TELECARE - MASON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM**  
601 WEST FRANKLIN STREET, SUITE B  
SHELTON, WA 98584  
(360) 462-3016  
TELECARECORP.COM

**MAILING ADDRESS**  
PO BOX 14339  
TUMWATER, WA 98511

**CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

105800  
**TRUE NORTH-ESD 113 - MASON**  
807 WEST PINE STREET  
SHELTON, WA 98584  
(360) 427-2050

**MAILING ADDRESS**  
6005 TYEE DR SW  
TUMWATER, WA 98512

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**OKANOGAN**

007900  
**COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - NESPELEM**  
21 COLVILLE STREET  
NESPELEM, WA 99155  
(509) 634-2600  
(509) 634-2610

**MAILING ADDRESS**  
PO BOX 50  
NESPELEM, WA 99155

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

126700  
**COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - OMAK**  
507 BENTON STREET  
OMAK, WA 98841  
(509) 422-7410  
(800) 573-9343

**MAILING ADDRESS**  
PO BOX 150  
NESPELEM, WA 99155-0150

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---
OKANOGAN

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

007800
OKANOGAN BEHAVIORAL HEALTHCARE, INC.
1007 KOALA DRIVE
OMAK, WA 98841
(509) 826-6191
LAPPLE@OKBHC.ORG
WWW.OKBHC.ORG

JAMES “JIM” NOVELLI
CEO

BARNABY TENZIN DENISON
CLINICAL DIRECTOR (MH CLINICAL SUPERVISOR)

MAILING ADDRESS
1007 KOALA DR
OMAK, WA 98841

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

PACIFIC

153600
FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC
25517 PARK AVENUE
OCEAN PARK, WA 98640
(800) 272-3199
(360) 665-4494
INFO@FREEBYTHESEA.COM
WWW.FREEBYTHESEA.COM

SUSAN HARRIS
ADMINISTRATOR

JENNIFER HARRIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 399
OCEAN PARK, WA 98640

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RESIDENTIAL TREATMENT FACILITY

159500
KLEAN LONG BEACH WASHINGTON LLC
211 PIONEER ROAD WEST
LONG BEACH, WA 98631
(360) 642-3105
WWW.KLEANTREATMENTCENTERS.COM

LAURIE BECK
DIRECTOR OF OPERATIONS

GREGORY LIPPERT
CLINICAL SUPERVISOR

MAILING ADDRESS
211 PIONEER RD W
LONG BEACH, WA 98631
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

- INTENSIVE INPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- LONG-TERM RESIDENTIAL
- WITHDRAWAL MANAGEMENT

200486

LIFELINE CONNECTIONS - SOUTH BEND
1006 ROBERT BUSH DRIVE WEST
SOUTH BEND, WA 98586
(360) 397-8246
(800) 604-0025
ADMISSIONS@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1679
VANCOUVER, WA 98668

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY HOUSING SUPPORT

MENTAL HEALTH SERVICES:

- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY HOUSING SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

052000

NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)
11 YOUTH CAMP LANE (MS: B25-2)
NASELLE, WA 98638-8600
(360) 484-3223

SPENCER MOOERS
PROGRAM MANAGER

STEVE FOX
CD COORDINATOR

MAILING ADDRESS
11 YOUTH CAMP LN (MS: B25-2)
NASELLE, WA 98638-8600

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

- LEVEL I OUTPATIENT

112300

SHOALWATER BAY INDIAN TRIBE
2373 OLD TOKELAND ROAD, BUILDING E
TOKELAND, WA 98590
(360) 267-8126

KIM ZILLYETT-HARRIS
HEALTH DIRECTOR

LAURA HAMILTON
CD PROGRAM DIRECTOR

MAILING ADDRESS
PO BOX 130
TOKELAND, WA 98590

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

143100

TRUE NORTH-ESD 113 - PACIFIC
921 COMMERCIAL STREET
RAYMOND, WA 98577
(360) 942-2474

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERIM CLINICAL SUPERVISOR

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512
PACIFIC

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

134300
WILLAPA BEHAVIORAL HEALTH - LONG BEACH
2204 PACIFIC HIGHWAY NORTH
LONG BEACH, WA 98631
(360) 642-3787

Mailing Address
2204 PACIFIC HIGHWAY N
LONG BEACH, WA 98631

ADAM R. MARQUIS
CEO
ELIZABETH LIMBOCKER
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

134400
WILLAPA BEHAVIORAL HEALTH - RAYMOND
300 OCEAN AVENUE
RAYMOND, WA 98577
(360) 942-2303

Mailing Address
PO BOX 65
SOUTH BEND, WA 98586-0065

ADAM R. MARQUIS
CEO
ELIZABETH LIMBOCKER
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

PEND OREILLE

008100
PEND OREILLE COUNTY COUNSELING SERVICES - MAIN
105 SOUTH GARDEN AVENUE
NEWPORT, WA 99156
(509) 447-5651
(800) 404-5151
WWW.PENDOREILLE.ORG

ANNABELLE S. PAYNE
DIRECTOR

THERESA ALLEN
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

Mailing Address
PO BOX 5055
NEWPORT, WA 99156-5055
### PEND OREILLE

**CERTIFIED SERVICES**  
**SUBSTANCE USE DISORDER SERVICES:**  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

**MENTAL HEALTH SERVICES:**  
CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**PEND OREILLE COUNTY COUNSELING SERVICES - METALINE FALLS**  
302 PARK STREET  
METALINE FALLS, WA 99153  
(509) 447-5651  
[WWW.PENDOREILLE.ORG](http://WWW.PENDOREILLE.ORG)

**MAILING ADDRESS**  
PO BOX 5055  
NEWPORT, WA 99156-5055

---

**PEND OREILLE COUNTY COUNSELING SERVICES - METALINE FALLS**  
302 PARK STREET  
METALINE FALLS, WA 99153  
(509) 447-5651  
[WWW.PENDOREILLE.ORG](http://WWW.PENDOREILLE.ORG)

**DIRECTOR**  
ANNABELLE S. PAYNE

**CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)**  
THERESA ALLEN

---

### PIERCE

**A CHANGE INTO RECOVERY, LLC**  
719 EAST MAIN AVENUE, SUITE C  
PUYALLUP, WA 98372  
(253) 841-8165  
(253) 841-4818

**MAILING ADDRESS**  
719 E MAIN AVE, STE C  
PUYALLUP, WA 98372

---

**ABRACADABRA RECOVERY CENTER**  
18407 PACIFIC AVENUE SOUTH  
SPANAWAY, WA 98387  
(253) 271-7615

**ADMINISTRATOR**  
DAVID A. HARRIS  
JOHN DORMAN  
LESLIE J. THIEME

**MAILING ADDRESS**  
18407 PACIFIC AVE S  
SPANAWAY, WA 98387

---

**ABRACADABRA RECOVERY CENTER**  
18407 PACIFIC AVENUE SOUTH  
SPANAWAY, WA 98387  
(253) 271-7615

**CLINICAL SUPERVISOR**  
JOHN DORMAN  
LESLEY J. THIEME
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<tr>
<th>Code</th>
<th>Facility Name</th>
<th>Address Details</th>
<th>Contact Details</th>
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<td>200561</td>
<td>ADONAI COUNSELING &amp; EMPLOYMENT, INC.</td>
<td>4104 SOUTH M STREET, TACOMA, WA 98418</td>
<td>(253) 777-1434 (253) 503-1572</td>
<td><a href="http://www.adonaicounseling.com">www.adonaicounseling.com</a></td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>4104 SOUTH M STREET, TACOMA, WA 98418</td>
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<tr>
<td>145100</td>
<td>AL'TA COUNSELING AND TESTING</td>
<td>702 BROADWAY, SUITE 102, TACOMA, WA 98402</td>
<td>(253) 365-2000</td>
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<tr>
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<td>Mailing Address</td>
<td>702 BROADWAY STE 102, TACOMA, WA 98402</td>
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<td>134100</td>
<td>ALTERNATIVE COUNSELING - SPANAWAY</td>
<td>17002 PACIFIC AVENUE SOUTH, SPANAWAY, WA 98387</td>
<td>(253) 538-2323</td>
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<td>ARMY SUBSTANCE ABUSE PROGRAM (ASAP)</td>
<td>BUILDING 2008B NORTH 3RD AVENUE, JOINT BASE LEWIS-MCCHORD, WA 98433</td>
<td>(253) 967-2202 (253) 967-6765</td>
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<td>Mailing Address</td>
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<td>145700</td>
<td><strong>ASIAN COUNSELING TREATMENT SERVICES (ACTS)</strong></td>
<td>8811 SOUTH TACOMA WAY, SUITE 106, LAKEWOOD, WA 98499</td>
<td>TAE SON LEE, EXECUTIVE DIRECTOR</td>
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<td><strong>MAILING ADDRESS</strong></td>
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<td>054700</td>
<td><strong>CASTEELE, WILLIAMS &amp; ASSOCIATES</strong></td>
<td>711 SOUTH 25TH STREET, SUITE B, TACOMA, WA 98405</td>
<td>JOHN L. CASTEELE, JR., PH.D., EXECUTIVE DIRECTOR</td>
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<td><strong>COMPREHENSIVE BEHAVIORAL HEALTH, INC. - MAIN</strong></td>
<td></td>
<td>LOUIS WESLEY HORTON, SUD CLINICAL SUPERVISOR</td>
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<td>200489</td>
<td><strong>CATHOLIC COMMUNITY SERVICES - RUSTON</strong></td>
<td>5219 NORTH SHIRLEY STREET, SUITE 002, RUSTON, WA 98407</td>
<td>MARY STONE SMITH, VICE PRESIDENT</td>
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<td><strong>MAILING ADDRESS</strong></td>
<td>1001 N J STREET, TACOMA, WA 98403</td>
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<td>200144</td>
<td><strong>CATHOLIC COMMUNITY SERVICES - TACOMA 14TH STREET</strong></td>
<td>702 SOUTH 14TH STREET, TACOMA, WA 98405</td>
<td>MARY STONE SMITH, VICE PRESIDENT</td>
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CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

CATHOLIC COMMUNITY SERVICES - TACOMA MAIN
5410 NORTH 44TH STREET
TACOMA, WA 98407
(253) 759-9544
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

Mailing Address
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

CATHOLIC COMMUNITY SERVICES - UNIVERSITY PLACE
7610 40TH STREET WEST, SUITE 300
UNIVERSITY PLACE, WA 98466
(253) 830-6242
CCSFAMILYPRESERVATIONINFO@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT
TIFFANY RADONICH
SITE DIRECTOR

Mailing Address
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

COMMUNITY COUNSELING INSTITUTE, INC.
2502 TACOMA AVENUE
TACOMA, WA 98402
(253) 759-0852

WILLIAM H. JAMES, PH.D, CDP
EXECUTIVE DIRECTOR
TERI HANSEN
CLINICAL SUPERVISOR

Mailing Address
PO BOX 5305
TACOMA, WA 98415-0305

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
200298  COMPREHENSIVE LIFE RESOURCES - ADULT OUTPATIENT
1305 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200184  COMPREHENSIVE LIFE RESOURCES - GIG HARBOR
5262 OLYMPIC DRIVE NW, SUITE A
GIG HARBOR, WA 98335
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES

200182  COMPREHENSIVE LIFE RESOURCES - MAIN
1201 SOUTH PROCTOR STREET
TACOMA, WA 98405
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200183  COMPREHENSIVE LIFE RESOURCES - PARK PLACE RTF
610 YAKIMA AVENUE
TACOMA, WA 98405
(253) 396-5881
ASTARKEY@CMHSHARE.ORG
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF OUTPATIENT SERVICES (MH CS)
PIERCE

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS STABILIZATION
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

200562
COMPREHENSIVE LIFE RESOURCES - SPANAWAY
201 160TH STREET SOUTH
SPANAWAY, WA 98387
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO
KATHY HAGEN
OUTPATIENT SERVICES DIRECTOR (MH CS)

MAILING ADDRESS
TACOMA, WA 98405

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200297
COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER
1424 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO
KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

124800
CONSEJO COUNSELING AND REFERRAL SERVICE - TACOMA
5915 ORCHARD STREET WEST, UNIT B
TACOMA, WA 98466
(253) 414-7461
(206) 461-4880

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR
YVONNE ELMENDORF
CLINICAL SUPERVISOR

MAILING ADDRESS
5915 ORCHARD ST W UNIT B
TACOMA, WA 98466
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

150400
CROSSROADS TREATMENT CENTER, INC.
4928 109TH STREET SOUTHWEST
LAKEWOOD, WA 98499
(253) 473-7474
WWW.LILASAUCIER@CROSSROADSTREATMENT.ORG
WWW.CROSSROADSTREATMENT.ORG

JEREMIAH SAUCIER
OWNER/ADMINISTRATOR

MAILING ADDRESS
4926 109TH STREET SOUTHWEST
LAKEWOOD, WA 98499

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

078100
DOC - PROGRESS HOUSE WORK RELEASE
5601 6TH AVENUE
TACOMA, WA 98406
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

077800
DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN - PURDY
9601 BILUCIICH ROAD NORTHWEST
GIG HARBOR, WA 98332
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

122800
EXODUS COUNSELING AND TREATMENT SERVICES
918 ALDER AVENUE
SUMNER, WA 98390
(253) 891-2662

MARK A. WALRATH
ADMINISTRATOR

LINDA K. WALRATH
CLINICAL SUPERVISOR
PIERCER

MAILING ADDRESS
918 ALDER AVE
SUMNER, WA 98390

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

162100 F.H. COUNSELING & ASSOCIATES PLCC
917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433
(253) 777-4772
LIBBY HAINES
ADMINISTRATOR
ALFREDA HAINES
CEO & CLINICAL SUPERVISOR

MAILING ADDRESS
917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

101700 FOUNDATION FOR MULTICULTURAL SOLUTIONS
2316 SOUTH STATE STREET, SUITE B
TACOMA, WA 98405
(253) 572-3214
PATRICIA NEAGLE
PROGRAM MANAGER

MAILING ADDRESS
2316 S STATE ST STE B
TACOMA, WA 98405

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

007001 GIG HARBOR COUNSELING
5122 OLYMPIC DRIVE NW, SUITE A-105
GIG HARBOR, WA 98335
(253) 851-2552
CHRISTINE LYNCH
EXECUTIVE DIRECTOR
MELODY MCKEE
CLINICAL OPERATIONS MANAGER

MAILING ADDRESS
5122 OLYMPIC DR NW STE A-105
GIG HARBOR, WA 98335

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200057 GREATER LAKES MENTAL HEALTHCARE - 72ND STREET
1415 EAST 72ND STREET, SUITE B
TACOMA, WA 98404
(253) 620-5800
WWW.GLMHC.ORG
TERRI CARD
PRESIDENT & CEO
CLAUDIA REYES GARZA
CLINICAL MANAGER

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT

200056  GREATER LAKES MENTAL HEALTHCARE - MAIN
9330 59TH AVENUE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
HTTP://WWW.GLMHC.ORG/

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

TERRI CARD
PRESIDENT & CEO

GLENN CZERWINSKI
VP OF CLINICAL OPERATIONS (MH CS)

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200482  GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA
9315 GRAVELLY LAKE DRIVE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
WWW.GLMHC.ORG

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

TERRI CARD
PRESIDENT & CEO

DEANNA CARRON
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- RECOVERY PEER SUPPORT

200059  GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE
9108 LAKEWOOD DRIVE SW
LAKEWOOD, WA 98499

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

TERRI CARD
PRESIDENT & CEO
<table>
<thead>
<tr>
<th>Address</th>
<th>President &amp; CEO</th>
<th>Clinical Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>200364</strong> G. LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC</td>
<td>TERRI CARD</td>
<td>LATONYA LITTLETON</td>
</tr>
<tr>
<td>113 170TH STREET SOUTH SPANAWAY, WA 98387</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(253) 535-1935</td>
<td><a href="http://WWW.GLMHC.ORG">WWW.GLMHC.ORG</a></td>
<td></td>
</tr>
<tr>
<td><strong>20055</strong> G. LAKES RECOVERY CENTER E&amp;T</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14016 SOUTH A STREET TACOMA, WA 98444</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>200493</strong> HOLISTIC RECOVERY FOR MOTHERS</td>
<td>NAOMI VILLANO</td>
<td>MELISSA LAWS</td>
</tr>
<tr>
<td>2550 SOUTH G STREET TACOMA, WA 98405</td>
<td>EXECUTIVE DIRECTOR</td>
<td>CLINICAL DIRECTOR (MH &amp; SUD)</td>
</tr>
<tr>
<td>(253) 383-7710</td>
<td><a href="mailto:TREATMENT@NEWPHOEBEHOUSE.ORG">TREATMENT@NEWPHOEBEHOUSE.ORG</a></td>
<td></td>
</tr>
<tr>
<td>(253) 257-7110</td>
<td><a href="http://WWW.HOLISTICRECOVERYFORMOTHERS.ORG">WWW.HOLISTICRECOVERYFORMOTHERS.ORG</a></td>
<td></td>
</tr>
<tr>
<td><strong>20053</strong> HOPESPKARS</td>
<td>JOSEPH LEROY</td>
<td></td>
</tr>
<tr>
<td>6424 NORTH 9TH STREET TACOMA, WA 98406</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PIERCE

MAILING ADDRESS
6424 NORTH 9TH STREET
TACOMA, WA 98406

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
FAMILY THERAPY
INDIVIDUAL TREATMENT

200223
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - LAKEWOOD
8815 SOUTH TACOMA WAY, SUITE 122
LAKEWOOD, WA 98499
(253) 682-0320
(253) 682-0353
INFO@IMAGINEBEHAVIOR.COM
WWW.IMAGINEBEHAVIOR.COM

MAILING ADDRESS
5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

008900
KWAWACHEE COUNSELING CENTER
2209 EAST 32ND STREET, BLDG 4 TREATMENT SVCS
TACOMA, WA 98404-0188
(253) 593-0247

MAILING ADDRESS
2209 E 32ND ST
TACOMA, WA 98404-0188

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

200538
L.E.A.P.S. AND BEYOND, INC. - TACOMA
7808 PACIFIC AVENUE, SUITE 9
TACOMA, WA 98418
(360) 240-0022
ADMIN@LEAPSANDBEYOND.COM
WWW.LEAPSANDBEYOND.COM

MAILING ADDRESS
OAK HARBOR, WA 98277

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

035103
LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP
405 WEST STEWART AVENUE, SUITE A
PUYALLUP, WA 98371-5164
(253) 840-8687

MAILING ADDRESS
10322 NE 132ND ST
KIRKLAND, WA 98034-2829

ALANA LEWIS
ADMINISTRATOR

PENNY SULLIVAN
CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>ZIP CODE</th>
<th>LOCATION</th>
<th>SERVICES</th>
<th>CONTACT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>004604</td>
<td>Lakeside-Milam Recovery Centers, Inc. - Tacoma</td>
<td>Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
<td>JAY YOURGLICH, Administrator; PEDRO RUIZ, Clinical Supervisor</td>
</tr>
<tr>
<td>200238</td>
<td>Magnolia Behavior Therapy - Dupont</td>
<td>Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
<td></td>
</tr>
<tr>
<td>200444</td>
<td>Maxim Healthcare Services, Inc.</td>
<td>Recovery Support Applied Behavior Analysis (ABA)</td>
<td>ALI LYSE, Director of Business Operations; CHANTE STOECKLEY, Behavioral Supervisor</td>
</tr>
<tr>
<td>200566</td>
<td>Medtriq Treatment Center, LLC</td>
<td>Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
<td>CONNIE THOMPSON, Program Administrator; JOHN THOMPSON, Program Director of Clinical Services (MH/SUD)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MAILING ADDRESS</th>
<th>CERTIFIED SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>10322 NE 132ND ST, KIRKLAND, WA 98034-2829</td>
<td>Substance Use Disorder Services:</td>
</tr>
<tr>
<td>3214 W MCGRAW ST STE 212, SEATTLE, WA 98199</td>
<td>Mental Health Services:</td>
</tr>
<tr>
<td>1570 WILMINGTON DRIVE, SUITE 220, DUPONT, WA 98327</td>
<td>Recovery Support Applied Behavior Analysis (ABA)</td>
</tr>
<tr>
<td>2603 BRIDGEPORT WAY WEST, SUITE F, UNIVERSITY PLACE, WA 98466</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MAILING ADDRESS</th>
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<tr>
<td>3214 W MCGRAW ST STE 212, SEATTLE, WA 98199</td>
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<td>1570 WILMINGTON DRIVE, SUITE 220, DUPONT, WA 98327</td>
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<tr>
<td>2603 BRIDGEPORT WAY WEST, SUITE F, UNIVERSITY PLACE, WA 98466</td>
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<td>1570 WILMINGTON DRIVE, SUITE 220, DUPONT, WA 98327</td>
</tr>
<tr>
<td>2603 BRIDGEPORT WAY WEST, SUITE F, UNIVERSITY PLACE, WA 98466</td>
</tr>
</tbody>
</table>
METROPOLITAN DEVELOPMENT COUNCIL - TACOMA
721 SOUTH FAWCETT AVENUE, SUITE 101
TACOMA, WA 98402

MAILING ADDRESS
945 SOUTH FAWCETT AVENUE
TACOMA, WA 98402

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

METROPOLITAN DEVELOPMENT COUNCIL - THE CENTER
721 FAWCETT AVENUE, SUITE 201
TACOMA, WA 98402
(253) 593-2740
WWW.MDC-HOPE.ORG

GREGORY KLEINER
VP HEALTH SERVICES

ROBERTO TERRONES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
721 FAWCETT AVENUE, SUITE 201
TACOMA, WA 98402

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT

MULTICARE BEHAVIORAL HEALTH - ADOLESCENT BEHAVIORAL HEALTH
315 MARTIN LUTHER KING JR WAY
TACOMA, WA 98405
(253) 403-0360
CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

TIM HOLMES
PRESIDENT OF BEHAVIORAL HEALTH

ANGELA NAYLOR, RN
CHIEF NURSE EXECUTIVE

MAILING ADDRESS
315 MARTIN LUTHER KING JR WAY
TACOMA, WA 98405

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT – CHILDREN

MULTICARE BEHAVIORAL HEALTH - ASIAN COUNSELING SERVICES
4301 SOUTH PINE STREET, SUITE 451
TACOMA, WA 98409
CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200211 MULTICARE BEHAVIORAL HEALTH - LUCKETT HOUSE
1701 13TH STREET SE
PUYALLUP, WA 98372

CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS STABILIZATION
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

200210 MULTICARE BEHAVIORAL HEALTH - PACT
4301 SOUTH PINE STREET, SUITE 21
TACOMA, WA 98409

CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCIICH
CD PROGRAM MANAGER

152800 MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372
(253) 697-8507
(888) 910-6300

MAILING ADDRESS
325 E PIONEER AVE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
FAMILY THERAPY
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INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCIICH
CD PROGRAM MANAGER
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

160400
MULTICARE BEHAVIORAL HEALTH - TACOMA
2201 SOUTH 19TH STREET, SUITE 104
TACOMA, WA 98405
(253) 697-8507
(253) 697-8494
TIM.HOLMES@MULTICARE.ORG
WWW.MULTICARE.ORG/BEHAVIORAL-HEALTH

MAILING ADDRESS
325 E PIONEER AVE
PUYALLUP, WA 98372

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

164000
NEW FREEDOM RECOVERY CENTER, LLC
10215 214TH AVENUE EAST
BONNEY LAKE, WA 98391
(253) 862-7374

MAILING ADDRESS
10215 214TH AVE E
BONNEY LAKE, WA 98391

CERTIFIED SERVICES
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200378
NORTHWEST ABA - TACOMA
218 SOUTH 38TH STREET
TACOMA, WA 98418
(206) 313-8840
INFO@NORTHWESTABA.COM
WWW.NORTHWESTABA.COM

MAILING ADDRESS
15445 53RD AVE S STE 110
TUKWILA, WA 98188

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
PIERCE

200431
NORTHWEST INTEGRATED HEALTH - LAKEWOOD
9720 SOUTH TACOMA WAY
LAKEWOOD, WA 98499
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG
AMY CREASER
AGENCY ADMINISTRATOR
TANA RUSSELL
SUD CLINICAL MANAGER
MAILING ADDRESS
5929 WESTGATE BLVD STE A
TACOMA, WA 98406
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIOATE SUBSTITUTION TREATMENT
SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIOATE SUBSTITUTION TREATMENT
SCREENING AND BRIEF INTERVENTION

162000
NORTHWEST INTEGRATED HEALTH - MAIN
3800 3RD STREET SOUTHEAST
PUYALLUP, WA 98374
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG
STEPHANIE LUCAS
AGENCY ADMINISTRATOR
BRIAN BOX
SUD CLINICAL SUPERVISOR
MAILING ADDRESS
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

173000
NORTHWEST INTEGRATED HEALTH - TACOMA
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG
BRANDY KREBS
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ANGELA FRYE
SUD CLINICAL SUPERVISOR
MAILING ADDRESS
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

200097
PEARL STREET CENTER - CLIP
815 SOUTH PEARL STREET
TACOMA, WA 98465
(253) 396-5805
WWW.COMPREHENSIVELIFERESOURCES.ORG
APRIL STALLINGS
PROGRAM DIRECTOR
DR. MIKE LAEDERICH
DIRECTOR
MAILING ADDRESS
815 SOUTH PEARL STREET
TACOMA, WA 98465
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

146100  PENINSULA COUNSELING, INC.
3214 50TH STREET COURT NW, SUITE D-305
GIG HARBOR, WA 98335
(253) 851-4600

MAILING ADDRESS
3214 50TH ST CT NW STE D-305
GIG HARBOR, WA 98335

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

B.B. BUSKIRK, DDS, MA, CDP
ADMINISTRATOR

MAILING ADDRESS
3214 50TH ST CT NW STE D-305
GIG HARBOR, WA 98335

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

PERCH BEHAVIORAL HEALTH
CONFIDENTIAL LOCATION
(253) 312-8909

MAILING ADDRESS

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

WILLIAM WALDO
DIRECTOR OF OPERATIONS

PIERCE COUNTY ALLIANCE - MAIN
510 TACOMA AVENUE SOUTH
TACOMA, WA 98402-5416
(253) 572-4750

MAILING ADDRESS
510 TACOMA AVE S
TACOMA, WA 98402-5416

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

DR. TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR
SAMI FRENCH
MH CLINICAL SUPERVISOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:

PIioneer ADULT COUNSELING - TACOMA
758 ST. HELENS AVENUE
TACOMA, WA 98402
(253) 274-0484

MAILING ADDRESS
758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

BRANDY OTO
DIRECTOR
NANCY BLACKMAN
CLINICAL SUPERVISOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:

PIERCE COUNTY ALLIANCE - MAIN
510 TACOMA AVENUE SOUTH
TACOMA, WA 98402-5416
(253) 572-4750

MAILING ADDRESS
510 TACOMA AVE S
TACOMA, WA 98402-5416

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

DR. TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:

PIioneer ADULT COUNSELING - TACOMA
758 ST. HELENS AVENUE
TACOMA, WA 98402
(253) 274-0484

MAILING ADDRESS
758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

BRANDY OTO
DIRECTOR
NANCY BLACKMAN
CLINICAL SUPERVISOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:

PIERCE COUNTY ALLIANCE - MAIN
510 TACOMA AVENUE SOUTH
TACOMA, WA 98402-5416
(253) 572-4750

MAILING ADDRESS
510 TACOMA AVE S
TACOMA, WA 98402-5416

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

DR. TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR
SAMI FRENCH
MH CLINICAL SUPERVISOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:

PIioneer ADULT COUNSELING - TACOMA
758 ST. HELENS AVENUE
TACOMA, WA 98402
(253) 274-0484

MAILING ADDRESS
758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

BRANDY OTO
DIRECTOR
NANCY BLACKMAN
CLINICAL SUPERVISOR

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:
### PROSPERITY WELLNESS CENTER - GRAHAM

**Address:**
22007 MERIDIAN AVENUE EAST, SUITE A
GRAHAM, WA 98338

**Phone Numbers:**
(253) 375-7530

**Website:**
WWW.PROSPERITYWELLNESSCENTER.COM

**Certified Services**
- **Substance Use Disorder Services:**
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient
- **Problem & Pathological Gambling Services:**
  - Problem & Pathological Gambling

**Mailing Address:**
11012 CANYON RD E STE 8-385
PUYALLUP, WA 98373

**Certified Services**
- **Mental Health Services:**
  - Group Therapy
  - Individual Treatment
  - Psychiatric Medication

---

### PROSPERITY WELLNESS CENTER - MAIN

**Address:**
5001 112TH STREET EAST
TACOMA, WA 98446

**Phone Numbers:**
(253) 531-2103
(253) 863-1380

**Website:**
WWW.PROSPERITYWELLNESSCENTER.COM

**Certified Services**
- **Substance Use Disorder Services:**
  - DUI Assessment
  - Intensive Inpatient
  - Level I Outpatient
  - Level II Intensive Outpatient
  - Withdrawal Management
- **Problem & Pathological Gambling Services:**
  - Problem & Pathological Gambling

**Mailing Address:**
11012 CANYON RD E STE 8-385
PUYALLUP, WA 98373

**Certified Services**
- **Mental Health Services:**
  - Group Therapy
  - Individual Treatment
  - Psychiatric Medication
  - Residential Treatment Facility

---

### PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES

**Address:**
12201 PACIFIC AVENUE SOUTH
TACOMA, WA 98444

**Phone Numbers:**
(253) 536-6425

**Website:**
WWW.PROSPERITYWELLNESSCENTER.COM

**Certified Services**
- **Substance Use Disorder Services:**
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient
- **Problem & Pathological Gambling Services:**
  - Problem & Pathological Gambling

**Mailing Address:**
11012 CANYON RD E, SUITE 8-385
PUYALLUP, WA 98373

**Certified Services**
- **Mental Health Services:**
  - Crisis Peer Support
  - Group Therapy
  - Individual Treatment
  - Psychiatric Medication

---

### REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)

**Address:**
5501 6TH AVENUE
TACOMA, WA 98406-2697

**Phone Numbers:**
(253) 798-7900

**Website:**

**Director:**
CATHY J. PEARSON

**Mailing Address:**
5501 6TH AVE
TACOMA, WA 98406-2697
PIERCE

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200104  RI INTERNATIONAL - COMMUNITY BUILDING
4210 20TH STREET EAST, SUITES B &amp; C
FIFE, WA 98424
(253) 235-5216
WWW.RIINTERNATIONAL.COM

MAILING ADDRESS
2701 N 16TH ST STE 103
PHOENIX, AZ 85006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200103  RI INTERNATIONAL - CSU
2150 FREEMAN ROAD EAST
FIFE, WA 98424
(253) 942-5644

MAILING ADDRESS
2701 N. 16TH ST. STE. 103
PHOENIX, AZ 85006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS STABILIZATION UNIT

200102  RI INTERNATIONAL - E&T
2150 FREEMAN ROAD EAST
FIFE, WA 98424
(253) 584-2300
WWW.RIINTERNATIONAL.COM

MAILING ADDRESS
2701 N 16TH ST STE 103
PHOENIX, AZ 85006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

176400  ROYAL LIFE CENTERS, LLC - PUGET SOUND
1723 BONNEY AVENUE
SUMNER, WA 98390
(253) 750-3571
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
INPATIENT EVALUATION AND TREATMENT - ADULT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
<table>
<thead>
<tr>
<th>Address</th>
<th>Contact Information</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>200265</strong></td>
<td>SEA MAR BEHAVIORAL HEALTH - GIG HARBOR</td>
<td>6659 KIMBALL DRIVE, SUITE C-301 GIG HARBOR, WA 98335 (253) 396-1634 <a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
</tr>
<tr>
<td><strong>164100</strong></td>
<td>SEA MAR BEHAVIORAL HEALTH - PREGNANT &amp; PARENTING WOMEN</td>
<td>1119 TACOMA AVENUE SOUTH TACOMA, WA 98402 (253) 246-6820</td>
</tr>
<tr>
<td><strong>127100</strong></td>
<td>SEA MAR BEHAVIORAL HEALTH - PUYALLUP</td>
<td>12812 101ST AVENUE COURT EAST, SUITE 202 PUYALLUP, WA 98373 (253) 864-4770</td>
</tr>
<tr>
<td><strong>089900</strong></td>
<td>SEA MAR BEHAVIORAL HEALTH - TACOMA</td>
<td>2121 SOUTH 19TH STREET TACOMA, WA 98405 (253) 396-1634 <a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
</tr>
</tbody>
</table>
PIERCE

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200514
SEA MAR BEHAVIORAL HEALTH - TACOMA
HEALTHCARE FOR THE HOMELESS
1307 SOUTH 11TH STREET
TACOMA, WA 98405
(253) 682-2180
(206) 764-6286
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D’ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
CLARE WALSH
MH CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

052102
SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA
1415 CENTER STREET
TACOMA, WA 98409
(253) 280-9860
WWW.SEAMAR.ORG

MARCHE WARD
PROGRAM MANAGER
RODSLYN KENNEY
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

016500
SERENITY COUNSELING SERVICES
5005 PACIFIC HIGHWAY EAST, SUITE 20
FIFE, WA 98424
(253) 922-6522
WWW.SERENITY-COUNSELING.COM

KAREN MYRICK
OWNER/ADMINISTRATOR
KEVIN CURRIE
CLINICAL DIRECTOR

MAILING ADDRESS
5005 PACIFIC HWY E, STE 20
FIFE, WA 98424

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
109600
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.
- PUYALLUP
13921 MERIDIAN AVENUE EAST
PUYALLUP, WA 98373
(253) 770-4720
ANDREW TATUM
ADMINISTRATOR
JEFF WILSON
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

012702
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.
- TACOMA
4301 SOUTH PINE STREET, SUITE 112
TACOMA, WA 98409
(253) 471-0890
ANDREW TATUM
PROGRAM DIRECTOR
STEVE SMITH
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
MENTAL HEALTH SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

018902
TACOMA DETOXIFICATION CENTER
721 SOUTH FAWCETT AVENUE, ROOM 100
TACOMA, WA 98402
(253) 593-2413
MARIAM SSEMUKULA
PROGRAM MANAGER
ROBERTO TERRONES
CLINICAL SUPERVISOR

MAILING ADDRESS
945 S FAWCETT AVE
TACOMA, WA 98402

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

111700
TACOMA TREATMENT SOLUTIONS
9500 FRONT STREET, SUITE 100
LAKEWOOD, WA 98499
(253) 584-3996
(877) 830-7020
ANTHONY HANLEY
CLINIC DIRECTOR
KATHLYNN R. MILLER
CLINICAL SUPERVISOR

MAILING ADDRESS
9500 FRONT ST, STE 100
LAKEWOOD, WA 98499

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT
TPCHD_019000

TACOMA-PIERCE COUNTY TREATMENT SERVICES
3629 SOUTH D STREET
TACOMA, WA 98418
(253) 798-6527
WWW.TPCHD.ORG

ALISA SOLBERG
PROGRAM MANAGER

AMANDA CRABTREE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
3629 SOUTH D ST MS 501
TACOMA, WA 98418-6813

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

TELECARE - COMMUNITY ALTERNATIVES TEAM
3901 SOUTH FIFE STREET, SUITE 301
TACOMA, WA 98409
(253) 589-5334
MLORDS@TELECARECORP.COM
WWW.TELECARECORP.COM

JAMES PRESSON
ADMINISTRATOR

AMY MATHESON
CLINICAL DIRECTOR

MAILING ADDRESS
3901 SOUTH FIFE STREET, SUITE 301
TACOMA, WA 98409

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
PSYCHIATRIC MEDICATION

VETERANS ADMINISTRATION MEDICAL CENTER - AMERICAN LAKE
9600 VETERANS DRIVE
LAKWOOD, WA 98493
(253) 582-8440

ELISIA YANASAK, PH.D
ADMINISTRATOR

CARL RIMMELE, PH.D
DIRECTOR

MAILING ADDRESS
VA PUGET SOUND HEALTH CARE, AMERICAN LAKE
TACOMA, WA 98493-5000

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WESTERN STATE HOSPITAL
9601 STEILACOOM BOULEVARD SOUTHWEST
LAKEWOOD, WA 98498

WWW.DSHS.WA.GOV/BHA

KATHRIN CHRISTENSEN
SUD PROGRAM MANAGER

MAILING ADDRESS
9601 STEILACOOM BLVD SW
LAKEWOOD, WA 98498

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY
SCREENING AND BRIEF INTERVENTION
SAN JUAN

147700 COMPASS HEALTH - LOPEZ ISLAND
46 EADS LANE, SUITE D
LOPEZ ISLAND, WA 98261
(360) 378-2669

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

147600 COMPASS HEALTH - ORCAS ISLAND
1286 MOUNT BAKER ROAD, SUITE B-209
EASTSOUND, WA 98245
(360) 378-2669
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

124600 COMPASS HEALTH - SAN JUAN ISLAND
520 SPRING STREET
FRIDAY HARBOR, WA 98250
(360) 378-2669
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

160600 THE CLEARING
2687 WEST VALLEY ROAD
FRIDAY HARBOR, WA 98250
(425) 275-8600

JOSEPH H. KOELZER, JR.
CEO

SCOTT JEFFREY ALPERT
CLINICAL SUPERVISOR
SAN JUAN

MAILING ADDRESS
2687 WEST VALLEY RD
FRIDAY HARBOR, WA 98250

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

SKAGIT

164800
CATHOLIC COMMUNITY SERVICES - BURLINGTON
614 PETERSON ROAD
BURLINGTON, WA 98233
(360) 757-0131

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DU ASSSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200166
COMPASS HEALTH - MT. VERNON ADULT SERVICES
1100 SOUTH 2ND STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200167
COMPASS HEALTH - MT. VERNON CHILD & FAMILY CLINIC
1005 SOUTH 3RD STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200168
COMPASS HEALTH - MT. VERNON PACT
209 MILWAUKEE STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200519
DIDGWALIC WELLNESS CENTER
8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221
(360) 588-2800
DIDGWALIC@SWINOMISH.NSN.US
WWW.DIDGWALIC.COM

JOHN STEPHENS
PROGRAMS ADMINISTRATOR
DAWN LEE
DIDGWALIC PROGRAMDIRECTOR/SPONSOR

MAILING ADDRESS
8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPiate SUBSTITUTION TREATMENT

200573
EVERGREEN RECOVERY CENTERS - LEGACY LODGE
1905 CONTINENTAL PLACE
MOUNT VERNON, WA 98273
(360) 755-6400
(360) 755-6388
NFRYAR@EVERGREENRC.ORG
WWW.EVERGREENRC.ORG

LINDA GRANT
CEO
ROBERT MCCULLOUGH
PROGRAM MANAGER (SUD CLINICAL SUPERVISOR)

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY
<table>
<thead>
<tr>
<th>Code</th>
<th>Facility Name</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Phone</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>038000</td>
<td>Follman Agency</td>
<td>910 South Anacortes Street, Burlington, WA 98233</td>
<td>910 S ANACORTES ST</td>
<td>(360) 755-1125</td>
<td><a href="mailto:FrontDesk@FollmanAgency.com">FrontDesk@FollmanAgency.com</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Kathy A. Follman</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Administrator</td>
</tr>
<tr>
<td>114600</td>
<td>Phoenix Recovery Services, LLC</td>
<td>1601 East College Way, Suite A, Mount Vernon, WA 98273</td>
<td>1601 E COLLEGE WAY STE A</td>
<td>(360) 848-8437</td>
<td>Carol Hundahl</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Administrator</td>
</tr>
<tr>
<td>005002</td>
<td>Pioneer Center North</td>
<td>1960 Thompson Drive, Sedro Woolley, WA 98284</td>
<td>1960 Thompson Dr</td>
<td>(360) 856-3186</td>
<td>Robert Sullivan</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Director Iii</td>
</tr>
<tr>
<td>153000</td>
<td>Pioneer Human Services - Skagit County Crisis Center</td>
<td>201 Lila Lane, Burlington, WA 98233</td>
<td>201 LILA LANE</td>
<td>(360) 757-7738</td>
<td>Robert Sullivan</td>
</tr>
</tbody>
</table>

### Certified Services
- **SUBSTANCE USE DISORDER SERVICES:**
  - Alcohol and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient
  - Problem & Pathological Gambling Services

- **MENTAL HEALTH SERVICES:**
  - Brief Intervention Treatment
  - Case Management
  - Family Therapy
  - Group Therapy
  - Individual Treatment

### Mailing Address
- 910 S Anacortes St, Burlington, WA 98233-3010
- 1601 E College Way, Mount Vernon, WA 98273
- 1960 Thompson Drive, Sedro Woolley, WA 98284
- 201 Lila Lane, Burlington, WA 98233

### Additional Information
- www.FollmanAgency.com
- www.phoenixrecoveryservices.com
- www.pioneerhumanservices.org
- http://pioneerhumanservices.org/treatment/centers
SKAGIT

MAILING ADDRESS
201 LILA LN
BURLINGTON, WA 98233

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS PEER SUPPORT
CRISIS STABILIZATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200264
SEA MAR BEHAVIORAL HEALTH - ANACORTES
1004 M AVENUE, SUITE 107
ANACORTES, WA 98221

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

079300
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON
1010 EAST COLLEGE WAY, SUITE 100
MOUNT VERNON, WA 98273
(360) 428-8912

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JULIA LUGO
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200551
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON
HWY 99
2203 OLD HIGHWAY 99 SOUTH
MOUNT VERNON, WA 98273
(360) 542-8810
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

BRIAN GRIFFITH
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Phone</th>
<th>Contact Person</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKAGIT REGIONAL HEALTH</td>
<td>1415 EAST KINCAID STREET MOUNT VERNON, WA 98274</td>
<td></td>
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</tr>
<tr>
<td>MAILING ADDRESS</td>
<td>1415 EAST KINCAID STREET MOUNT VERNON, WA 98274</td>
<td></td>
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</tr>
<tr>
<td>SUNRISE SERVICES, INC. - CONCRETE MAIN STREET</td>
<td>45770 MAIN STREET CONCRETE, WA 98237</td>
<td>(360) 336-3762</td>
<td>HOLLY MORGAN</td>
<td>EXECUTIVE ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>SHAWN (SHAMORA) BEARWOOD</td>
<td>MH &amp; SUD CLINICAL DIRECTOR</td>
</tr>
<tr>
<td>MAILING ADDRESS</td>
<td>PO BOX 2569 EVERETT, WA 98213</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>SUNRISE SERVICES, INC. - CONCRETE SR 20</td>
<td>44942 STATE ROUTE 20 CONCRETE, WA 98237</td>
<td>(360) 336-3762</td>
<td>HOLLY MORGAN</td>
<td>EXECUTIVE ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
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<td>SHAWN (SHAMORA) BEARWOOD</td>
<td>MH &amp; SUD CLINICAL DIRECTOR</td>
</tr>
<tr>
<td>MAILING ADDRESS</td>
<td>PO BOX 2569 EVERETT, WA 98213</td>
<td></td>
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</tr>
</tbody>
</table>
200279  SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET
1101 SOUTH 2ND STREET, SUITE A
MOUNT VERNON, WA 98273
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

156600  SUNRISE SERVICES, INC. - MOUNT VERNON COLLEGE WAY
2500 EAST COLLEGE WAY
MOUNT VERNON, WA 98273
(360) 336-3762
(866) 634-3039

MAILING ADDRESS
2500 E COLLEGE WAY
MOUNT VERNON, WA 98273

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200384  SUNRISE SERVICES, INC. - SEDRO WOOLEY
10210 COLLINS ROAD
SEDRO WOOLEY, WA 98284
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

123800  SWINOMISH WELLNESS PROGRAM
17337 RESERVATION ROAD
LA CONNER, WA 98257
(360) 466-7256
(360) 466-7233

JOHN STEPHENS
JSTEPHENS@SWINOMISH.NSN.US

DAWN LEE
PROGRAM/CLINICAL DIRECTOR
SKAGIT

MAILING ADDRESS
17337 RESERVATION ROAD
LA CONNER, WA 98257

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200307
TELECARE - NORTH SOUND EVALUATION & TREATMENT
1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284
(360) 854-7400

MAILING ADDRESS
1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

071300
UNITED NORTHWEST RECOVERY CENTER
605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284
(360) 856-6300

MAILING ADDRESS
605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

126100
UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM
640 STATE ROUTE 20, SUITE A1
SEDRO WOOLLEY, WA 98284
(360) 854-7130

MAILING ADDRESS
25944 COMMUNITY PLAZA WY
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

SKAMANIA

010600
SKAMANIA COUNTY COMMUNITY HEALTH
710 SOUTHWEST ROCK CREEK DRIVE
STEVENSON, WA 98648
(509) 427-3850

MAILING ADDRESS
PO BOX 369
STEVENSON, WA 98648

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

SUSAN DUNTHORNE
SOCIAL SERVICES COORDINATOR
S. GAYLE ROSE
TREATMENT SUPERVISOR

KIRBY RICHARDS, LICSW
DIRECTOR
TAMARA CISSELL
CLINICAL SUPERVISOR
SKAMANIA

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT

SNOHOMISH

200503
ALL ABOUT RECOVERY SERVICES
1316 WALL STREET, SUITE 2C
EVERETT, WA 98201
(425) 212-9877

ELAINE DREGER
ADMINISTRATOR
JEANNE MARIE POURROY-CARTER
CLINICAL SUPERVISOR

MAILING ADDRESS
1316 WALL STREET, SUITE 2C
EVERETT, WA 98201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

054400
ALPINE RECOVERY SERVICES, INC. - ARLINGTON
16404 SMOKEY POINT BOULEVARD, SUITE 109
ARLINGTON, WA 98223
(360) 658-1388

LYNN DEE BAUER
ADMINISTRATOR

MAILING ADDRESS
16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

018500
ALPINE RECOVERY SERVICES, INC. - LYNNWOOD
4202 198TH STREET SW, SUITE 2
LYNNWOOD, WA 98036
(425) 778-1136

LYNN DEE BAUER
ADMINISTRATOR
MAYNARD KIELTY
TREATMENT DIRECTOR

MAILING ADDRESS
16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200460
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SNOHOMISH OUTPATIENT
8625 EVERGREEN WAY, SUITE 100
EVERETT, WA 98208
(425) 322-5581
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR
ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR
SNOHOMISH

MAILING ADDRESS
PO BOX 141106
SPokane VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200550
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
STANWOOD OUTPATIENT
7208 267TH STREET NORTHWEST, SUITE A100
STANWOOD, WA 98292
(360) 502-4090
WWW.AMERICANBEHAVIORALHEALTHSYSTEMS.ORG

MAILING ADDRESS
PO BOX 141106
SPokane VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

130100
ASIAN-AMERICAN CHEMICAL DEPENDENCY
TREATMENT SERVICES
5116 196TH STREET SW, SUITE 101
LYNNWOOD, WA 98036
(425) 776-1290

MAILING ADDRESS
5116 196TH ST SW STE 101
LYNNWOOD, WA 98036

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

132500
ASSESSMENT AND TREATMENT ASSOCIATES -
MOUNTLAKE TERRACE
21907 64TH AVENUE W, SUITE 310
MOUNTLAKE TERRACE, WA 98043
(877) 479-5993

MAILING ADDRESS
13353 BEL-RED RD STE 101
BELLEVUE, WA 98005

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

STEVE UHRICH
EXECUTIVE DIRECTOR

SHARON FENTON
CLINICAL SUPERVISOR

200558
BALANCED LIVING THERAPY, LLC
7500 212TH STREET SOUTHWEST, SUITE 205
EDMONDS, WA 98026
(425) 977-4988
WWW.BALANCEDLIVINGTHERAPY.COM

MAILING ADDRESS
PO BOX 141106
SPokane VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SNOHOMISH

MAILING ADDRESS
7500 212TH STREET SOUTHWEST, SUITE 205
EDMONDS, WA 98026

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT

200533
BASIC STEPS MENTAL HEALTH
12199 VILLAGE CENTER PLACE, SUITE 203
MUKILTEO, WA 98275
(425) 588-8438
JUDITH@BASICSTEPS.LIFE
WWW.BASICSTEPS.LIFE

MAILING ADDRESS
12199 VILLAGE CENTER PLACE, SUITE 203
MUKILTEO, WA 98275

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

113700
BRIDGEWAY TREATMENT SERVICES, LLC
2013 19TH STREET
EVERETT, WA 98201
(425) 283-5315
INFO@BRIDGEWAYTREATMENT.COM
WWW.BRIDGEWAYTREATMENT.COM

MAILING ADDRESS
2013 19TH STREET
EVERETT, WA 98201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200014
BRIDGEWAYS
5801 23RD DRIVE WEST, SUITE 104
EVERETT, WA 98203
(425) 513-8213

MAILING ADDRESS
5801 23RD DRIVE WEST, SUITE 104
EVERETT, WA 98203

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

112100
CANYON PARK TREATMENT SOLUTIONS
22026 20TH AVENUE SE, BUILDING L SUITE 101
BOThELL, WA 98021
(425) 672-7293

MAILING ADDRESS
22026 20TH AVENUE SE, BUILDING L SUITE 101
BOThELL, WA 98021

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
SNOHOMISH

MAILING ADDRESS
22026 20TH AVE SE BLDG L STE 101
BOTHELL, WA 98021

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

200140
CATHOLIC COMMUNITY SERVICES - EVERETT AVENUE
1918 EVERETT AVENUE
EVERETT, WA 98201
(425) 257-2111
WWW.CCSWW.ORG

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200141
CATHOLIC COMMUNITY SERVICES - EVERETT COLBY AVENUE
2722 COLBY AVENUE, SUITE 610
EVERETT, WA 98201
(360) 676-2164
WWW.CCSWW.ORG

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

034400
CATHOLIC COMMUNITY SERVICES - EVERETT WETMORE AVENUE
2610 WETMORE AVENUE
EVERETT, WA 98201
(425) 258-5270

MAILING ADDRESS
1133 RAILROAD AVE STE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
085700  CATHOLIC COMMUNITY SERVICES - MARYSVILLE
1227 2ND STREET
MARYSVILLE, WA 98270
(360) 651-2366
DONNA WELLS
AGENCY DIRECTOR

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

052300  CENTER FOR COUNSELING & HEALTH RESOURCES
547 DAYTON STREET
EDMONDS, WA 98020
(425) 771-5166
WWW.APLACEOFHOPE.COM
BRIAN J. MURPHY
PROGRAM DIRECTOR
LAURA MINOR
TREATMENT DIRECTOR (SUD CS)

MAILING ADDRESS
PO BOX 700
EDMONDS, WA 98020

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

162600  CENTER FOR HUMAN SERVICES - MOUNTLAKE TERRACE
21907 64TH AVENUE WEST, SUITE 240
MOUNTLAKE TERRACE, WA 98043
(206) 362-7282
BERATTA GOMILLION
EXECUTIVE DIRECTOR
DANAE BERGMAN & SCOTT LINGLE
CLINICAL SUPERVISORS

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

162500  CENTER FOR HUMAN SERVICES - SILVER LAKE
10315 19TH AVENUE, UNIT 112
EVERETT, WA 98208
(206) 362-7282
(844) 778-5548
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG
BERATTA GOMILLION
EXECUTIVE DIRECTOR
KATRINA HANAWALT
MENTAL HEALTH DIRECTOR

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155
SNOHOMISH

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

030000

CHOICES ASSESSMENT AND RECOVERY, INC.
11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204
(425) 512-8564

MARIA OVERTON
ADMINISTRATOR

ANTHONY EPPEerson
CLINICAL SUPERVISOR

MAILING ADDRESS
11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

121100

CLEARVIEW COUNSELING
1106 COLUMBIA AVENUE
MARYSVILLE, WA 98270
(360) 653-0374

SCOTT WYKES
EXECUTIVE DIRECTOR

MAILING ADDRESS
1106 COLUMBIA AVE
MARYSVILLE, WA 98270

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

172400

COASTAL TREATMENT SERVICES, INC. - EVERETT ADIS
2520 COLBY AVENUE, SUITE 111
EVERETT, WA 98201
(425) 646-4406

MARGARET FERRIS
ADMINISTRATOR

MAILING ADDRESS
BELLEGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL

200181

COMPASS HEALTH - AURORA HOUSE
20903 70TH AVENUE WEST
EDMONDS, WA 98026
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS STARRERS-FOOTE
CLINICAL SUPERVISOR

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
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</table>
| **COMPASS HEALTH - BAILEY CENTER**  
3322 BROADWAY  
EVERETT, WA 98201  
(425) 349-6700  
WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RESIDENTIAL TREATMENT FACILITY |
| **COMPASS HEALTH - DAWSON PLACE**  
1509 CALIFORNIA STREET  
EVERETT, WA 98201  
(425) 349-6700  
WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS STABILIZATION  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT |
| **COMPASS HEALTH - EVERETT CHILD & FAMILY CLINIC**  
4526 FEDERAL AVENUE, BUILDING 9  
EVERETT, WA 98203  
(425) 349-8300  
(425) 349-8304  
HEATHER.FENNELL@COMPASSH.ORG  
WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION |
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| 200320 | COMPASS HEALTH - EVERETT CHILDREN'S INTENSIVE SERVICES | ANASTASIA ALLES | CHIEF OPERATIONS OFFICER | PO BOX 3810, EVERETT, WA 98213-8810 | (425) 349-6200 | WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION |
| 166100 | COMPASS HEALTH - FEDERAL CAMPUS-BUILDING 4 WEST | ANASTASIA ALLES | CHIEF OPERATING OFFICER | PO BOX 3810, EVERETT, WA 98213-8810 | (425) 349-6200 | WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT |
| 200180 | COMPASS HEALTH - GREENHOUSE | ANASTASIA ALLES | CHIEF OPERATING OFFICER | POST OFFICE BOX 3810, EVERETT, WA 98213-8810 | (425) 349-6700 | WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RESIDENTIAL TREATMENT FACILITY |
| 200308 | COMPASS HEALTH - HAVEN HOUSE | ANASTASIA ALLES | CHIEF OPERATING OFFICER | PO BOX 3810, EVERETT, WA 98213-8810 | (425) 349-6700 | WWW.COMPASSHEALTH.ORG | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RESIDENTIAL TREATMENT FACILITY |
SNOHOMISH

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200172

COMPASS HEALTH - LYNNWOOD ADULT SERVICES
4807 196TH STREET SW, SUITE 220
LYNNWOOD, WA 98036
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

200173

COMPASS HEALTH - LYNNWOOD CHILD & FAMILY CLINIC
4807 196TH STREET SW, SUITE 100
LYNNWOOD, WA 98036
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

200174

COMPASS HEALTH - MARYSVILLE ADULT SERVICES
4308 76TH STREET NE
MARYSVILLE, WA 98270
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR
SNOHOMISH

200170 COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC
1 1022 WEST MAIN STREET
MONROE, WA 98272
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

200534 COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC
2 1016 WEST MAIN STREET
MONROE, WA 98272
(425) 349-8810
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

ANASTASIA ALLES
CHIEF OPERATING OFFICER
FRAN DUCKWORTH
PROGRAM MANAGER

200111 COMPASS HEALTH - MUKILTEO E&T
10710 MUKILTEO SPEEDWAY
MUKILTEO, WA 98275
(425) 349-6200
HTTP://WWW.COMPASSHEALTH.ORG/CONTACT-US/FEEDBACK-S
HTTP://WWW.COMPASSHEALTH.ORG/

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

TOM SEBASTIAN
CEO
CHRIS STARETS-FOOTE
PROGRAM DIRECTOR

200175 COMPASS HEALTH - SMOKEY POINT CHILD & FAMILY CLINIC
3320 173RD PLACE NE #F1
ARLINGTON, WA 98223
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR
### SNOHOMISH

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<tr>
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<td>(360) 725-8628</td>
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<td>DAWN L. WILLIAMS</td>
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<tr>
<td></td>
<td>SUBSTANCE ABUSE ADMINISTRATOR</td>
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<td>BRYAN SMITH</td>
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<td>(360) 725-8628</td>
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<td>DAWN L. WILLIAMS</td>
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SNOHOMISH

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

147300
DOC - MONROE CORRECTIONS CENTER - WSR
(WASHINGTON STATE REFORMATORY)
16708 177TH AVENUE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

076800
DOC - TWIN RIVERS CORRECTIONS CENTER
16774 170TH DRIVE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

200452
EVERETT TREATMENT SERVICES
7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203
(425) 347-9070
EVERETT.TREATMENT_ETS@HOTMAIL.COM
WWW.EVERETT.TREATMENTSERVICES.COM

MARGARET SPENCER
ADMINISTRATOR

ROBERT FROMM
CLINICAL SUPERVISOR

MAILING ADDRESS
7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

010802
EVERGREEN RECOVERY CENTERS - BUILDING B
2601 SUMMIT AVENUE, BUILDING B
EVERETT, WA 98201
(425) 258-2407
ASKUS@EVERGREENMANOR.ORG
WWW.EVERGREENMANOR.ORG

LINDA GRANT
CEO

DALLARIE HORN-MOSBY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

010801
EVERGREEN RECOVERY CENTERS - BUILDING C
2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407

LINDA GRANT
EXECUTIVE DIRECTOR

JULIA LUGO
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

089100
EVERGREEN RECOVERY CENTERS - EVERETT DETOX
2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407
(425) 258-3255

LINDA GRANT
EXECUTIVE DIRECTOR

JIM UPTON
DETOX/HOUSING MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

010803
EVERGREEN RECOVERY CENTERS - EVERETT OUTPATIENT
2732 GRAND AVENUE
EVERETT, WA 98201
(425) 259-5842

LINDA GRANT
EXECUTIVE DIRECTOR

DANIELLE SHANDERA
CLINICAL MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

162800
EVERGREEN RECOVERY CENTERS - LYNNWOOD DETOX
20508 56TH AVENUE WEST
LYNNWOOD, WA 98036
(425) 678-1390
CHAYES@EVERGREENRC.ORG
WWW.EVERGREENMANOR.ORG

SCOTT JOHNSON
DIRECTOR OF DETOX SERVICES

ROBERT MCCULLOUGH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT
SNOHOMISH

133600  EVERGREEN RECOVERY CENTERS - LYNNWOOD OUTPATIENT
4230 198TH STREET SOUTHWEST
LYNNWOOD, WA 98036
(425) 248-4900
WWW.EVERGREENRC.ORG

LINDA GRANT
EXECUTIVE DIRECTOR

ROBERT MCCULLOUGH
SUD CLINICAL SUPERVISOR/PROGRAM MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

011200  EVERGREENHEALTH RECOVERY CENTER, MONROE
17880 147TH STREET SE
MONROE, WA 98272
(360) 794-1405

ERIC JAMES BRITT
EXECUTIVE DIRECTOR

DAVID ANDERSON
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 646
MONROE, WA 98272-0646

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

200194  FAIRFAX BEHAVIORAL HEALTH - EVERETT E&T
916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

MAILING ADDRESS
916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200349  FAIRFAX BEHAVIORAL HEALTH - MONROE E&T
14701 179TH AVENUE SE
MONROE, WA 98272
(425) 821-2000
(800) 435-7221
JO-ELLEN.WATSON@UHSINC.COM
HTTP://WWW.FAIRFAXHOSPITAL.COM/

RICHARD GEIGER
CEO

DR. SAMIR AZIZ
MEDICAL DIRECTOR

MAILING ADDRESS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT
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<td>ARLINGTON, WA 98223</td>
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<td>(360) 652-9640</td>
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<td><a href="http://WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP">WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP</a></td>
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<td>20815 67TH AVE W STE 201</td>
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<td>LYNNWOOD, WA 98036</td>
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<td>(425) 248-4534</td>
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<td>SNOHOMISH</td>
<td>LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS</td>
<td>MARY KAY OSHMAN</td>
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<td>CATHY WERDEN</td>
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SNOHOMISH

MAILING ADDRESS
10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

004603
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204
(425) 267-9573
WWW.LAKESIDEMILAM.COM

MAILING ADDRESS
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200352
MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH
2621 BICKFORD AVENUE, SUITE C-D
SNOHOMISH, WA 98290
(206) 453-4882
WWW.MAGNOLIABEHAVIORTHERAPY.COM

MAILING ADDRESS
3214 W MCGRAW ST STE 212
SEATTLE, WA 98199

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

178300
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - MAIN
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270
(206) 407-3333
(360) 618-6685
NEWLIFERECOVERY@HOTMAIL.COM
WWW.RECOVERNEWLIFE.COM

MAILING ADDRESS
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

114400
PORT GARDNER BAY RECOVERY, INC.
2722 COLBY AVENUE, SUITE 515
EVERETT, WA 98201
(425) 252-4656

MAUREEN FLOREA
ADMINISTRATOR

TOM BLANFORD
CLINICAL SUPERVISOR

RALPH PAMPINO
CEO

DIANE BUFORD
CEO

MELANIE KEPLINGER
CLINICAL SUPERVISOR

KIMBERLI MCCABE
ADMINISTRATOR
SNOHOMISH

MAILING ADDRESS
2722 COLBY AVE STE 515
EVERETT, WA 98201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

035700
PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES
916 PACIFIC AVENUE
EVERETT, WA 98206
(425) 258-7390
(425) 258-7798
KRISTEN HOPSTAD
MANAGER
TIFFANIE DAER
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1067
EVERETT, WA 98206

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

164200
RECOVERY MATTERS, LLC
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290
(360) 568-9396
RECOVERYMATTERS@OUTLOOK.COM
WWW.RECOVERYMATTERSLLC.COM
KIMBERLY SLICK
ADMINISTRATOR/EXECUTIVE DIRECTOR

MAILING ADDRESS
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200373
REHAB WITHOUT WALLS, INC.
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036
(425) 712-0802
ANGIE.HENDRICK@RESCARE.COM
WWW.REHABWITHOUTWALLS.COM/BMAC
MICHAEL MCCORMICK
EXECUTIVE DIRECTOR
ELLIS "GRANT" THOMPSON
DIRECTOR OF CLINICAL MANAGEMENT

MAILING ADDRESS
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

166400
RYTHER - MUKILTEO
315 LINCOLN AVE, SUITE C1
MUKILTEO, WA 98275
(206) 525-5050
KAREN BRADY
CEO/EXECUTIVE DIRECTOR
YVETTE LUDVIK - JESSICA GLOVER
CLINICAL SUPERVISORS
SNOHOMISH

MAILING ADDRESS
2400 NE 95TH ST
SEATTLE, WA 98115

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

SAUK-SUATTEL INDIAN TRIBE
5318 CHIEF BROWN LANE
DARRINGTON, WA 98241
(360) 436-2842
(360) 436-2212

MAILING ADDRESS
5318 CHIEF BROWN LN
DARRINGTON, WA 98241

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SEAMAR BEHAVIORAL HEALTH - EVERETT
5007 CLAREMONT WAY
EVERETT, WA 98203
(425) 609-5505
(425) 347-5415
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESSE RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200334
SEAMAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY
1920 100TH STREET, SUITE A2
EVERETT, WA 98208
(425) 312-0277
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

CLAUDIA D’ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
ELIANA HAFFNER
SUD CLINICAL SUPERVISOR
SUSAN "NIKKI" GOLDEN
CLINICAL SUPERVISOR
139100

SEA MAR BEHAVIORAL HEALTH - LYNNWOOD
4111 ALDERWOOD MALL BOULEVARD
LYNNWOOD, WA 98036
(425) 977-2560
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

KATHERINE SCOTT DAVIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

104600

SEA MAR BEHAVIORAL HEALTH - MONROE
14090 FRYELANDS BOULEVARD SE, SUITE 347
MONROE, WA 98272
(360) 805-3122
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

ELIANA HAFFNER
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

146200

SMOKEY POINT BEHAVIORAL HOSPITAL
3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271
(844) 202-5555
KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.COM
WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM

MATT CROCKETT
CEO

CHRISTINE COSTELLO
DIRECTOR OF CLINICAL SERVICES (MH CLIN SUP)

MAILING ADDRESS
3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT – CHILDREN

200112

SNOHOMISH COUNTY HUMAN SERVICES
3000 ROCKEFELLER AVENUE
EVERETT, WA 98201
(425) 388-7402
HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-

KEN STARK
ADMINISTRATOR
SNOHOMISH

MAILING ADDRESS
300 ROCKEFELLER AVE, MS 305
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION

081300
STILLAGUAMISH TRIBE OF INDIANS
17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

MAILING ADDRESS
17014 59TH AVE NE
ARLINGTON, WA 98223

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION

SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY
1718 BROADWAY
EVERETT, WA 98201
(425) 595-5200

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION

200381
SUNRISE SERVICES, INC. - EVERETT BROADWAY
1520 BROADWAY
EVERETT, WA 98201
(425) 493-5870
(877) 493-5890
INFO@SUNRISEEMAIL.COM
SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
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<th>MH &amp; SUD Clinical Director(s)</th>
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<td><strong>168100</strong> SUNRISE SERVICES, INC. - EVERETT MAIN</td>
<td>1021 NORTH BROADWAY, EVERETT, WA 98201&lt;br&gt;(425) 493-5800</td>
<td>SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;LEVEL II INTENSIVE OUTPATIENT</td>
<td>PO BOX 2569, EVERETT, WA 98213</td>
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<td>HOLLY MORGAN</td>
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<td><strong>200324</strong> SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE</td>
<td>6505 218TH STREET SW, SUITES 6 &amp; 7, MOUNTLAKE TERRACE, WA 98043</td>
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<td><strong>200318</strong> SUNRISE SERVICES, INC. - STANWOOD</td>
<td>9527 271ST STREET NW, STANWOOD, WA 98292&lt;br&gt;(360) 926-8490</td>
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<td>PO BOX 2569, EVERETT, WA 98213</td>
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<td><strong>200121</strong> SWEDISH EDMONDS E&amp;T</td>
<td>21601 76TH AVENUE WEST, EDMONDS, WA 98026&lt;br&gt;(425) 640-4090</td>
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<td>SARAH ZABEL</td>
<td>CHIEF OPERATING OFFICER</td>
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SNOHOMISH

MAILING ADDRESS
21601 76TH AVENUE WEST
EDMONDS, WA 98026

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

148000
THE JUANITA CENTER LLC
627 5TH STREET, SUITE 100A
MUKILTEO, WA 98275
(425) 328-9528

G. RAYMOND MCCULLOUGH
ADMINISTRATOR/DIRECTOR

MAILING ADDRESS
PO BOX 491
MUKILTEO, WA 98275

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

111200
THERAPEUTIC HEALTH SERVICES - EVERETT
9930 EVERGREEN WAY, BUILDING Z150
EVERETT, WA 98204
(425) 347-5121

MARLI BRICKER
BRANCH MANAGER
NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

024000
TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES
2821 MISSION HILL ROAD
TULALIP, WA 98270
(360) 716-4400
(360) 716-4343

CARRIE JONES (INTERIM)
ADMINISTRATOR
GINA SKINNER
CDP CLINICAL SUPERVISOR

MAILING ADDRESS
2821 MISSION HILL RD
TULALIP, WA 98270

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200135
VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES
2802 BROADWAY
EVERETT, WA 98201
(425) 609-2210

PHIL D. SMITH
PRESIDENT/CEO
SNOHOMISH

MAILING ADDRESS
2802 BROADWAY
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

SPOKANE

136500
ADEPT ASSESSMENT CENTER - DEER PARK
104 WEST CRAWFORD STREET
DEER PARK, WA 99006
(509) 276-2797

SHANA WINDHORST
ADMINISTRATOR
JAMIE ZABORAC
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 117
DEER PARK, WA 99006

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

107700
ADEPT ASSESSMENT CENTER - SPOKANE
1321 NORTH ASH STREET
SPOKANE, WA 99201
(509) 327-3120
(509) 327-3163

SHANA WINDHORST
ADMINISTRATOR
JAMIE ZABORAC
CLINICAL SUPERVISOR

MAILING ADDRESS
1321 N ASH ST
SPOKANE, WA 99201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

096700
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
COZZA MAIN
44 EAST COZZA DRIVE
SPOKANE, WA 99208
(509) 325-6800
(866) 729-8038
WWW.AMERICANBEHAVIORALHEALTH.NET

MAILING ADDRESS
PO BOX 141108
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
SECURE WITHDRAWAL MANAGEMENT & STABILIZATION
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY
### 134200
**American Behavioral Health Systems, Inc. - Mission**
12715 East Mission Avenue  
Spokane Valley, WA 99216  
(509) 232-5766  
(866) 729-8038  
**Angela Mello**  
Director of Client Services  
**Dexter Baker, Carrie Suazo**  
Clinical Supervisors  

**Mailing Address**  
PO Box 141106  
Spokane Valley, WA 99214

**Certified Services**  
**Substance Use Disorder Services:**  
- DUI Assessment  
- Intensive Inpatient  
- Level I Outpatient  
- Level II Intensive Outpatient  
- Long-Term Residential  
- Recovery House  

**Mental Health Services:**  
- Case Management  
- Group Therapy  
- Individual Treatment  
- Residential Treatment Facility

### 177200
**American Behavioral Health Systems, Inc. - Spokane Outpatient**  
715 East Sprague Avenue #107  
Spokane, WA 99202  
(509) 232-5766  
**Rose Mead**  
Administrator  

**Mailing Address**  
PO Box 141106  
Spokane Valley, WA 99214

**Certified Services**  
**Substance Use Disorder Services:**  
- DUI Assessment  
- Level I Outpatient  
- Level II Intensive Outpatient

### 110400
**American Indian Community Center**  
610 East North Foothills Drive  
Spokane, WA 99207  
(509) 535-0886  
(800) 578-0886  
Lindal@AICCinc.ORG  
WWW.AICCINC.ORG  
**Francis R. Devereaux**  
Executive Director  
**Carol Grabowski**  
Clinical Supervisor  

**Mailing Address**  
610 East North Foothills Drive  
Spokane, WA 99207

**Certified Services**  
**Substance Use Disorder Services:**  
- DUI Assessment  
- Level I Outpatient  
- Level II Intensive Outpatient

### 129800
**At Parr Outpatient Services, LLC**  
124 East Augusta Avenue, Suite 100  
Spokane, WA 99207  
(509) 325-0777  
**Kimberley A. Parr**  
Administrator  

**Mailing Address**  
124 E. Augusta Avenue, 100  
Spokane, WA 99207-2481

**Certified Services**  
**Substance Use Disorder Services:**  
- Alcohol and Drug Information School  
- DUI Assessment  
- Level I Outpatient  
- Level II Intensive Outpatient
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<th>Zip Code</th>
<th>Organization Name</th>
<th>Address</th>
<th>City, State, Zip Code</th>
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<td>BREAKTHROUGH RECOVERY GROUP</td>
<td>11711 EAST SPRAGUE AVENUE, SUITE D4</td>
<td>SPOKANE VALLEY, WA 99206</td>
<td>(509) 927-6838</td>
<td>LISA PARKER</td>
<td>ADMINISTRATOR</td>
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<td>ANDREA FORAN</td>
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<td>CAMAS PATH BHS</td>
<td>934 SOUTH GARFIELD ROAD</td>
<td>AIRWAY HEIGHTS, WA 99001</td>
<td>(509) 789-7630</td>
<td>ALEXANDRIA DESAUTEL</td>
<td>HEALTH CARE ADMINISTRATOR</td>
<td><a href="HTTPS://WWW.KALISPELTRIBE.COM">HTTPS://WWW.KALISPELTRIBE.COM</a></td>
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<td>1960 NORTH HOLY NAMES COURT, FLOOR 3</td>
<td>SPOKANE, WA 99224</td>
<td>(509) 358-4250</td>
<td>PAMELA BROWN</td>
<td>DIRECTOR</td>
<td><a href="http://WWW.CATHOLICCHARITIESSPokane.ORG">WWW.CATHOLICCHARITIESSPokane.ORG</a></td>
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<td>(509) 242-2308</td>
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<td>12 EAST 5TH AVENUE</td>
<td>SPOKANE, WA 99210</td>
<td>(509) 358-4250</td>
<td>ROB MCCANN</td>
<td>EXECUTIVE DIRECTOR</td>
<td><a href="mailto:DEVELOPMENT@CCSPokane.ORG">DEVELOPMENT@CCSPokane.ORG</a></td>
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<td>JERRY SCHWAB</td>
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CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE WEST PLAINS
8727 West Highway 2
SPOKANE, WA 99224
(509) 747-4174
WWW.CHS-WA.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER
ERIC DOTSON
CLINICAL SUPERVISOR

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT

COURT HOUSE
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR
COLIN HUSFLOEN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216

COLONIAL CLINIC
910 NORTH WASHINGTON STREET, SUITE 210
SPOKANE, WA 99201
(509) 327-9831

THOMAS HUSTON STOLZ
TREATMENT DIRECTOR
PATRICK HENNESSY
CLINICAL SUPERVISOR

MAILING ADDRESS
910 N WASHINGTON ST., STE 210
SPOKANE, WA 99201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

COURAGE TO CHANGE
13015 WEST 14TH AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 863-4233
WWW.COURAGETOCHANGEWESTPLAINS.COM

ANGELA SILVA
DIRECTOR OF TREATMENT
MELISSA HURT-MORAN
DIRECTOR OF OPERATIONS

MAILING ADDRESS
PO BOX 212
MEDICAL LAKE, WA 99022

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

CUBHOUSE
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR
COLIN HUSFLOEN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216

COBALT CLINIC
910 NORTH WASHINGTON STREET, SUITE 210
SPOKANE, WA 99201
(509) 327-9831

THOMAS HUSTON STOLZ
TREATMENT DIRECTOR
PATRICK HENNESSY
CLINICAL SUPERVISOR

MAILING ADDRESS
910 N WASHINGTON ST., STE 210
SPOKANE, WA 99201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

COURAGE TO CHANGE
13015 WEST 14TH AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 863-4233
WWW.COURAGETOCHANGEWESTPLAINS.COM

ANGELA SILVA
DIRECTOR OF TREATMENT
MELISSA HURT-MORAN
DIRECTOR OF OPERATIONS

MAILING ADDRESS
PO BOX 212
MEDICAL LAKE, WA 99022

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

CUBHOUSE
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR
COLIN HUSFLOEN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- RECOVERY HOUSE

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RESIDENTIAL TREATMENT FACILITY

011601
DAYBREAK YOUTH SERVICES - SPOKANE INPATIENT
628 SOUTH COWLEY STREET
SPOKANE, WA 99202
(509) 624-3227
(509) 927-1688
WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

LISA BROOKS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS STABILIZATION
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- INPATIENT EVALUATION AND TREATMENT – CHILDREN
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RESIDENTIAL TREATMENT FACILITY

011600
DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT
200 NORTH MULLAN ROAD, SUITE 120
SPOKANE VALLEY, WA 99206
(509) 927-1688
WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

DAWN FLEES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY SUPPORT WRAPAROUND FACILITATION

166600
DISCOVERY COUNSELING GROUP
222 WEST MISSION AVENUE, SUITE 30
SPOKANE, WA 99201
(509) 413-1193

MELISSA MACE
EXECUTIVE DIRECTOR

MAILING ADDRESS
222 W MISSION AVE, SUITE 30
SPOKANE, WA 99201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
075700  
DOC - AIRWAY HEIGHTS CORRECTIONS CENTER  
11929 WEST SPRAGUE AVENUE  
AIRWAY HEIGHTS, WA 99001  
(509) 244-6700  
DAWN L. WILLIAMS  
PROGRAM ADMINISTRATOR  
BRYAN SMITH  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 41123 (MS 41123)  
OLYMPIA, WA 98504-1123  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
LONG-TERM RESIDENTIAL  

076000  
DOC - BROWNSTONE WORK RELEASE  
223 SOUTH BROWNE STREET  
SPOKANE, WA 99201  
(360) 725-8423  
COURTNEY.EVERSON@DOC.WA.GOV  
WWW.DOC.WA.GOV  
DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR  
BRYAN SMITH  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 41123 (MS 41123)  
OLYMPIA, WA 98504-1123  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  

026802  
DOC - ELEANOR CHASE WORK RELEASE  
427 WEST 7TH AVENUE  
SPOKANE, WA 99204  
(360) 725-8628  
DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR  
BRYAN SMITH  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 41123 (MS 41123)  
OLYMPIA, WA 98504-1123  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  

200563  
EASTERN STATE HOSPITAL  
850 WEST MAPLE  
MEDICAL LAKE, WA 99022  
WWW.DSHS.WA.GOV/BHA  
DAWN L. WILLIAMS  
APU ADMIN DIRECTOR & TX MALL/REHAB DIRECTOR  
MAILING ADDRESS  
PO BOX 800  
MEDICAL LAKE, WA 99022  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ASSESSMENT ONLY  

089300  
EXCELSIOR YOUTH CENTER - MAIN  
3754 WEST INDIAN TRAIL ROAD  
SPOKANE, WA 99208  
(509) 328-7041  
CONTACT@4EYC.ORG  
WWW.EXCELSIORYOUTHCENTER.COM  
ANDREW HILL  
CEO  
MELISSA MELSON  
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES

SPOKANE

MAILING ADDRESS
3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSE
RECOVERY HOUSING SUPPORT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

200478
EXCELSIOR YOUTH CENTER - SPOKANE BRANCH
2911 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224
(509) 328-7041
(800) 466-5574
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

MAILING ADDRESS
3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

200430
FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD
505 NORTH ARGONNE ROAD, SUITE B206
SPOKANE VALLEY, WA 99212
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
FRONTIER BEHAVIORAL HEALTH - BOONE
127 WEST BOONE AVENUE
SPOKANE, WA 99201
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202-1586

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIEGTE
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

FRONTIER BEHAVIORAL HEALTH - CALISPEL E&T
1401 NORTH CALISPEL STREET
SPOKANE, WA 99201

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY
131 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FRONTIER BEHAVIORAL HEALTH - CORNERSTONE</strong>&lt;br&gt;17 EAST FIRST AVENUE&lt;br&gt;SPOKANE, WA 99202</td>
<td>JEFF THOMAS&lt;br&gt;CEO/ADMINISTRATOR&lt;br&gt;KEITH BRYANT&lt;br&gt;MH &amp; SUD CLINICAL SUPERVISOR&lt;br&gt;&lt;br&gt;MAMING ADDRESS&lt;br&gt;107 S DIVISION ST&lt;br&gt;SPOKANE, WA 99202</td>
</tr>
<tr>
<td><strong>FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB</strong>&lt;br&gt;2102 EAST SPRAGUE AVENUE&lt;br&gt;SPOKANE, WA 99202</td>
<td>JEFF THOMAS&lt;br&gt;CEO/ADMINISTRATOR&lt;br&gt;&lt;br&gt;MAMING ADDRESS&lt;br&gt;107 SOUTH DIVISION STREET&lt;br&gt;SPOKANE, WA 99202</td>
</tr>
<tr>
<td><strong>FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&amp;T</strong>&lt;br&gt;505 EAST NORTH FOOTHILLS DRIVE&lt;br&gt;SPOKANE, WA 99207</td>
<td>JEFF THOMAS&lt;br&gt;CEO/ADMINISTRATOR&lt;br&gt;NATHAN MRAZ&lt;br&gt;SUD CLINICAL SUPERVISOR&lt;br&gt;&lt;br&gt;MAMING ADDRESS&lt;br&gt;107 SOUTH DIVISION STREET&lt;br&gt;SPOKANE, WA 99202</td>
</tr>
<tr>
<td><strong>FRONTIER BEHAVIORAL HEALTH - HOWARD STREET</strong>&lt;br&gt;7 SOUTH HOWARD STREET, SUITE 321&lt;br&gt;SPOKANE, WA 99201</td>
<td>JEFF THOMAS&lt;br&gt;CEO/ADMINISTRATOR&lt;br&gt;NATHAN MRAZ&lt;br&gt;SUD CLINICAL SUPERVISOR&lt;br&gt;&lt;br&gt;MAMING ADDRESS&lt;br&gt;107 S DIVISION ST&lt;br&gt;SPOKANE, WA 99202</td>
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<tr>
<td>200200</td>
<td>FRONTIER BEHAVIORAL HEALTH - HULSKAMP BUILDING</td>
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<tr>
<td></td>
<td>103 EAST FIRST AVENUE</td>
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<td>SPOKANE, WA 99202</td>
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<td>107 SOUTH DIVISION STREET</td>
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<tr>
<td>SPOKANE, WA 99202</td>
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<tbody>
<tr>
<td>SUBSTANCE USE DISORDER SERVICES:</td>
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<td>LEVEL I OUTPATIENT</td>
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<tr>
<td>LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>BRIEF INTERVENTION TREATMENT</td>
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<tr>
<td>CASE MANAGEMENT</td>
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<tr>
<td>CRISIS EMERGENCY INVOLUNTARY DETENTION</td>
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<td>CRISIS OUTREACH</td>
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<td>PSYCHIATRIC MEDICATION</td>
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<th>FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET</th>
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<tr>
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<td>400 SOUTH JEFFERSON STREET, SUITE 114</td>
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<tr>
<td></td>
<td>SPOKANE, WA 99204</td>
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<tr>
<td></td>
<td>(509) 838-4651</td>
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<td><a href="http://WWW.FBHWA.ORG">WWW.FBHWA.ORG</a></td>
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<td>SPOKANE, WA 99202</td>
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<td>RECOVERY MEDICATION SUPPORT</td>
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<tr>
<td>RECOVERY PEER SUPPORT</td>
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| RECOVERY SUPPORT WRAPAROUND FACILITATION |
FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD
5901 NORTH LIDGERWOOD STREET, SUITE 115
SPOKANE, WA 99208
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

AILEEN HETRICK
MH CLINICAL SUPERVISOR

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

FRONTIER BEHAVIORAL HEALTH - MAIN
107 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIEGTE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

FRONTIER BEHAVIORAL HEALTH - NORTH PINES
317 NORTH PINES ROAD
SPOKANE VALLEY, WA 99206
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202
SPOKANE

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE
124 EAST PACIFIC AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

PAT ANTHONY
MH CLINICAL SUPERVISOR

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

FRONTIER BEHAVIORAL HEALTH - PACT
505 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIETGE
SUD CLINICAL SUPERVISOR
200203  FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING
5125 NORTH MARKET STREET
SPOKANE, WA 99217
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200360  FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE
124 EAST SHORT AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN CORDUAN
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200546  FRONTIER BEHAVIORAL HEALTH - SPRAGUE
2118 EAST SPRAGUE AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO

SHANNON SCHOONVER
MH CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Address 1</th>
<th>Address 2</th>
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<tr>
<td>CERTIFIED SERVICES</td>
<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
<td>LEVEL II  INTENSIVE OUTPATIENT</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>200206</td>
<td>FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES 1401 NORTH CALISPEL STREET SPOKANE, WA 99201</td>
<td>JEFF THOMAS CEO/ADMINISTRATOR</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT CASE MANAGEMENT CRISIS EMERGENCY INVOLUNTARY DETENTION CRISIS OUTREACH CRISIS PEER SUPPORT CRISIS STABILIZATION CRISIS TELEPHONE SUPPORT DAY SUPPORT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY EMPLOYMENT SUPPORT RECOVERY MEDICATION SUPPORT RECOVERY PEER SUPPORT RECOVERY SUPPORT WRAPAROUND FACILITATION</td>
</tr>
<tr>
<td>038800</td>
<td>GATEWAY COUNSELING SERVICES 140 SOUTH ARTHUR STREET, SUITE 665 SPOKANE, WA 99202</td>
<td>NEAL HAYDEN ADMINISTRATOR/OWNER KIMBERLY STANKOVICH CLINICAL SUPERVISOR</td>
<td></td>
</tr>
<tr>
<td>200219</td>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - SPOKANE MAIN 5709 WEST SUNSET HIGHWAY, SUITE 100 SPOKANE, WA 99224</td>
<td>DR. CHARNA MINTZ EXECUTIVE DIRECTOR RICK JUSTUS PROGRAM DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>200080</td>
<td>INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE 720 WEST BOONE AVENUE, SUITE 101 SPOKANE, WA 99201</td>
<td>CHARLOTTE BOOTH EXECUTIVE DIRECTOR</td>
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SPOKANE

MAILING ADDRESS
34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

019701
ISABELLA HOUSE
2308 WEST 3RD AVENUE
SPOKANE, WA 99201
(509) 624-1244
ART JACOBS
ADMINISTRATOR
FARIBA NIKDEL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

172200
KAREN'S HOUSE
4324 NORTH JEFFERSON STREET
SPOKANE, WA 99205
(509) 477-4631
WWW.SPOKANERECOVERY.ORG
BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR
CHRISTINA MACLACHLAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
4324 N JEFFERSON ST
SPOKANE, WA 99205

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
RECOVERY HOUSE

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200087
LUTHERAN COMMUNITY SERVICES NORTHWEST -
SPOKANE
210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201
(509) 797-8224
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG
HEIKE LAKE
AREA DIRECTOR
SHARON O'BRIEN
PROGRAM SUPERVISOR

MAILING ADDRESS
210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

055600

N.A.T.I.V.E. PROJECT
1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831
(509) 325-5502

TONI LODGE
EXECUTIVE DIRECTOR

CLAIRE ABERASTURI
BEHAVIORAL HEALTH DIRECTOR (MH & SUD CS)

MAILING ADDRESS
1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

019702

NEW HORIZON COUNSELING SERVICES
701 EAST 3RD AVENUE
SPOKANE, WA 99202
(509) 838-6092
WWW.NEWHORIZONCARECENTERS.ORG

ALICE BUCKLES
PROGRAM ADMINISTRATOR

KELLY DUKE
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

011401

NEW HORIZON COUNSELING SERVICES - VALLEY
OFFICE
15407 EAST MISSION AVENUE, SUITE 100
SPOKANE VALLEY, WA 99037
(509) 927-1543

ALICE BUCKLES
PROGRAM ADMINISTRATOR

BRADLEY EYLAR
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
200245  NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - NINE MILE FALLS
5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026
(509) 465-2200
WWW.CO.STEVENS.WA.US/COUNSELING

MAILING ADDRESS
5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

DAVID NIelsen
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

200305  NORTHWEST AUTISM CENTER - SPOKANE BRANCH
825 HAWTHORNE ROAD
SPOKANE, 99218
(509) 777-3309
(509) 777-3553
JIDE@NWAUTISM.ORG
WWW.NWAUTISM.ORG

MAILING ADDRESS
825 HAWTHORNE ROAD
SPOKANE, 99218

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

JIM MATTHEWS
PROGRAM MANAGER

DANA STEVENS
DIRECTOR OF CLINICAL SERVICES

200249  NORTHWEST AUTISM CENTER - SPOKANE MAIN
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202
(509) 328-1582
INFO@NWAUTISM.ORG
HTTP://SANDBOX.NWAUTISM.ORG

MAILING ADDRESS
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

ADAM KOGLER
OPERATIONS AND FINANCIAL OFFICER

096700  PARTNERS WITH FAMILIES AND CHILDREN
1321 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(509) 473-4810
WWW.PARTNERSWITHFAMILIES.ORG

MAILING ADDRESS
1321 W BROADWAY AVE
SPOKANE, WA 99201

CAROL PLISCHKE
EXECUTIVE DIRECTOR

KOLLEEN SEWARD
SUD CLINICAL SUPERVISOR
SPOKANE

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

PASSAGES FAMILY SUPPORT
1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202
(509) 892-9241
INFORMATION@PASSAGESFS.ORG
WWW.PASSAGES-SPOKANE.ORG

REBECCA BATES
EXECUTIVE DIRECTOR

MISTY SOUTHALL
CLINICAL SUPERVISOR

MAILING ADDRESS
1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

PATHWAYS OF WASHINGTON, INC.
1050 NORTH ARGONNE ROAD, SUITE 100
SPOKANE VALLEY, WA 99212
(509) 209-8990
PHSWA@PATHWAYS.COM
WWW.PATHWAYS.COM

AMIKI TANIGUCHI
STATE DIRECTOR

MARK MCENDERFER
TEAM LEAD

MAILING ADDRESS
1050 NORTH ARGONNE ROAD, SUITE 100
SPOKANE VALLEY, WA 99212

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

PO BOX 9838
SPOKANE, WA 99209

TENNILLE LIGHTFOOT
DIRECTOR

KEITH BRYANT
CLINICAL PRACTICES MANAGER

MAILING ADDRESS
3070 WEST GARLAND AVENUE
SPOKANE, WA 99205
(509) 325-2355
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
WITHDRAWAL MANAGEMENT

172900  PIONEER COUNSELING SERVICES - SPOKANE
910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201
(509) 325-7232
KATRINA BRYANT
DIRECTOR
CARA STRANGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200439  PIONEER HUMAN SERVICES - SPOKANE RESIDENTIAL REENTRY CENTER
925 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(253) 274-0484
HTTP://PIONEERHUMANSERVICES.ORG

MAILING ADDRESS
758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

200100  PROVIDENCE SACRED HEART MEDICAL CENTER - E&T
101 WEST 8TH AVENUE
SPOKANE, WA 99204

MAILING ADDRESS
101 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT – CHILDREN

200099  PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT
101 WEST 8TH AVENUE
SPOKANE, WA 99204

MAILING ADDRESS
101 WEST 8TH AVENUE
SPOKANE, WA 99204
SPOKANE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
PSYCHIATRIC MEDICATION

200528

PSYCHIATRIC SOLUTIONS
1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216
(509) 863-9779
SUPPORT@PSYCHSOLUTIONS.COM
WWW.PSYCHSOLUTIONS.COM

MAILING ADDRESS
1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

JOSEPH JUDD
EXECUTIVE DIRECTOR

035100

RIVERSIDE RECOVERY CENTER, INC.
3710 NORTH MONROE STREET
SPOKANE, WA 99205
(509) 328-5234

MAILING ADDRESS
3710 N MONROE ST
SPOKANE, WA 99205

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

CHRIS MULLIN
EXECUTIVE DIRECTOR
JAIME PETERSON
CLINICAL SUPERVISOR

176600

ROYAL LIFE CENTERS, LLC - CASCADE
14525 NORTH NEWPORT HIGHWAY
MEAD, WA 99021
(509) 340-9643
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT

TERESA RORIE
PROGRAM DIRECTOR

176700

ROYAL LIFE CENTERS, LLC - SPOKANE DETOX
524 EAST FRANCIS AVENUE
SPOKANE, WA 99208
(509) 919-4150
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

TERESA RORIE
PROGRAM DIRECTOR
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES: CASE MANAGEMENT

INDIVIDUAL TREATMENT

LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT

PSYCHIATRIC MEDICATION

RECOVERY MEDICATION SUPPORT

RENTAL TREATMENT FACILITY

200388 SOAR BEHAVIOR SERVICES

CONFIDENTIAL LOCATION

(509) 999-5657

INFO@SOARBEHAVIOR.COM

WWW.SOARBEHAVIOR.COM

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

120300 SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - SPOKANE

104 SOUTH FREYA STREET BLUE FLAG BUILDING, SUITE 206

SPOKANE, WA 99202

(509) 927-3668

ANDREW TATUM

ADMINISTRATOR

BRAD BRESOLIN

CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 111297

TACOMA, WA 98411

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUN ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

012102 SPARC - CHRISTOPH HOUSE

1403 WEST 7TH AVENUE

SPOKANE, WA 99204-7159

(509) 624-3251

GEORGE FELDMILLER

INTERIM DIRECTOR

BRANDY WOODS

CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.

SPOKANE, WA 99204

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- RECOVERY HOUSE

165900 SPARC - DELANEY HOUSE

1501 WEST 8TH AVENUE

SPOKANE, WA 99204

(509) 624-7456

GEORGE FELDMILLER

INTERIM DIRECTOR

CAROL GRABOWSKI

CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.

SPOKANE, WA 99204

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
SPokane

012101  Sparc - Outpatient Services
1508 West Sixth Avenue
Spokane, WA 99204-7159
(509) 624-5228
Sisadmin@SparcOP.org
WWW.SparcOP.ORG
George Feldmiller
Interim Director
Brandy Woods
Sud Clinical Supervisor

Mailing Address
812 S Walnut St
Spokane, WA 99204

Certified Services
Substance Use Disorder Services:
Alcohol and Drug Information School
Dui Assessment
Level I Outpatient
Level II Intensive Outpatient

Mental Health Services:
Addiction Treatment
Family Therapy
Group Therapy
Individual Treatment
Less Restrictive Alternative (Lra) Support
Psychiatric Medication
Recovery Peer Support

165800  Sparc - Shaw House
1509 West 8th Avenue
Spokane, WA 99204-7159
(509) 624-7456
George Feldmiller
Interim Director
Carol Grabowski
Clinical Supervisor

Mailing Address
812 S Walnut St.
Spokane, WA 99204

Certified Services
Substance Use Disorder Services:
Intensive Inpatient

012100  Sparc - Westbrook House
1404 West 8th Avenue
Spokane, WA 99204-7159
(509) 624-3251
Mark Brownlow
Administrator
Brandy Woods
Clinical Supervisor

Mailing Address
812 S Walnut St.
Spokane, WA 99204

Certified Services
Substance Use Disorder Services:
Intensive Inpatient
Recovery House

200118  Spokane County Detention Services
1100 West Mallon Avenue
Spokane, WA 99260
(509) 477-2278
WWW.SPOKANECOUNTY.ORG/351/Detention-Servic
Kristina Ray
Mental Health Manager

Mailing Address
1100 West Mallon Avenue
Spokane, WA 99260

Certified Services
Mental Health Services:
Brief Intervention Treatment

200119  Spokane County Juvenile Court Services
902 North Adams Street
Spokane, WA 99260
Bonnie Bush
Administrator
SPOKANE

MAILING ADDRESS
902 NORTH ADAMS STREET
SPOKANE, WA 99260

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200120
SPOKANE COUNTY SUPPORTIVE LIVING PROGRAM
327 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4388
SCRBHOCONTRACTS@SPOKANECOUNTY.ORG
WWW.SPOKANECOUNTY.ORG/3155

MAILING ADDRESS
327 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

136200
SPOKANE PUBLIC SCHOOLS - DISTRICT 81
200 NORTH BERNARD STREET
SPOKANE, WA 99201
(509) 354-7946
KEVINMOR@SPOKANESCHOOLS.ORG
WWW.SPOKANESCHOOLS.ORG

MAILING ADDRESS
200 N BERNARD ST
SPOKANE, WA 99201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

011300
SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES
1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095
(509) 324-1420

MAILING ADDRESS
1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

012000
SPOKANE TREATMENT & RECOVERY SERVICES
312 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4631
(509) 477-4650

MAILING ADDRESS
312 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
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<tbody>
<tr>
<td><strong>SPOKANE</strong></td>
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</tbody>
</table>
| **MAILING ADDRESS** | PO BOX 2845  
SPOKANE, WA 99220-2845 |  
**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
EMERGENCY SERVICE PATROL  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT  
YOUTH WITHDRAWAL MANAGEMENT |  
**MENTAL HEALTH SERVICES:**  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RESIDENTIAL TREATMENT FACILITY |  
**154200** SPOKANE TREATMENT SOLUTIONS  
15812 EAST INDIANA AVENUE, SUITE 100  
SPOKANE VALLEY, WA 99216  
(877) 418-8103  
(509) 795-3133 |  
MARK-ERIK DIBIASE  
CLINIC DIRECTOR  
DAVID P. ROBINSON  
CLINICAL SUPERVISOR |  
**MAILING ADDRESS**  
15812 E INDIANA AVE, STE 100  
SPOKANE VALLEY, WA 99216 |  
**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
OPiate SUBSTITUTION TREATMENT |  
**MENTAL HEALTH SERVICES:**  
BRIEF INTERVENTION TREATMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT |  
**083800** SUN RAY COURT  
518 SOUTH BROWNE STREET  
SPOKANE, WA 99202  
(509) 456-5465 |  
THOMAS L. COOK  
BRANCH ADMINISTRATOR |  
**MAILING ADDRESS**  
PO BOX 4627  
SPOKANE, WA 99220-0627 |  
**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
LONG-TERM RESIDENTIAL  
RECOVERY HOUSE |  
**MENTAL HEALTH SERVICES:**  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RESIDENTIAL TREATMENT FACILITY |  
**200280** SUNSHINE BEHAVIORAL HEALTH  
1102 SOUTH RAYMOND ROAD  
SPOKANE, WA 99206  
(509) 892-4342 |  
RON SIMPSON  
ADMINISTRATOR |  
**MAILING ADDRESS**  
1102 SOUTH RAYMOND ROAD  
SPOKANE, WA 99206 |  
**CERTIFIED SERVICES** |
200281  SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER)  
3305 WEST FORT GEORGE WRIGHT DRIVE  
SPOKANE, WA 99224  
RONDA HAIN  
SEER PROGRAM CONTACT  

MAILING ADDRESS  
3305 WEST FORT GEORGE WRIGHT DRIVE  
SPOKANE, WA 99224  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
RECOVERY EMPLOYMENT SUPPORT  

200122  TAMARACK CENTER - CLIP  
2901 WEST ELLIOTT DRIVE  
SPOKANE, WA 99224  

MAILING ADDRESS  
2901 WEST ELLIOTT DRIVE  
SPOKANE, WA 99224  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)  

200123  TAMARACK CENTER - OUTPATIENT  
2901 WEST ELLIOTT DRIVE  
SPOKANE, WA 99224  
TIM DAVIS  
EXECUTIVE DIRECTOR  
ELLEN DAL PRA  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
2901 WEST ELLIOTT DRIVE  
SPOKANE, WA 99224  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  

200127  THE EMILY PROGRAM - SPOKANE  
2020 EAST 29TH AVENUE, SUITE 200  
SPOKANE, WA 99203  
KRISTA CROTTY  
SITE DIRECTOR  

MAILING ADDRESS  
2020 EAST 29TH AVENUE, SUITE 200  
SPOKANE, WA 99203  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION
046200  THE HEALING LODGE - BUTTERFLY PELPALWICHIA GIRLS CD
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

MAILING ADDRESS
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

REBECCA CROCKER  EXECUTIVE DIRECTOR
KIPPIE JONES      SUD CLINICAL SUPERVISOR

150500  THE HEALING LODGE - CEDAR BOYS COD
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

MAILING ADDRESS
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

REBECCA CROCKER  EXECUTIVE DIRECTOR
DODDIE LAGERVALL  SUD CLINICAL SUPERVISOR

150600  THE HEALING LODGE - SAGE BOYS CD
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

MAILING ADDRESS
5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

REBECCA CROCKER  EXECUTIVE DIRECTOR
STEPHANIE MCGREGOR  SUD CLINICAL SUPERVISOR

012400  VETERANS AFFAIRS MEDICAL CENTER - SPOKANE
4815 NORTH ASSEMBLY STREET
SPOKANE, WA 99205-6197
(509) 434-7014

MAILING ADDRESS
4815 N ASSEMBLY ST - 116/668/SATP
SPOKANE, WA 99205-6197

PAUL NICOLAI, COORDINATOR
SUBSTANCE ABUSE PROGRAMS
### SPOKANE

**CERTIFIED SERVICES**
- **SUBSTANCE USE DISORDER SERVICES:**
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

---

#### YFA CONNECTIONS

- **020000**
- **22 SOUTH THOR STREET**
- **SPOKANE, WA 99202**
- **(509) 532-2000**

**OMI CONNECTIONS**

- **THOMAS MURPHY**
  - ADMINISTRATOR
- **TOM BRYANT**
  - CLINICAL SUPERVISOR

**MAILING ADDRESS**
- **PO BOX 3344**
- **SPOKANE, WA 99220-3344**

**CERTIFIED SERVICES**
- **SUBSTANCE USE DISORDER SERVICES:**
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

- **MENTAL HEALTH SERVICES:**
  - CASE MANAGEMENT
  - GROUP THERAPY
  - INDIVIDUAL TREATMENT
  - LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  - PSYCHIATRIC MEDICATION

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#### YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION

- **200536**
- **930 NORTH MONROE STREET**
- **SPOKANE, WA 99201**
- **(509) 789-9297**

**WWW.YWCASPOKANE.ORG**

**MARGARET CURTIN REY-BEAR**
- CLINICAL DIRECTOR

**MAILING ADDRESS**
- **930 NORTH MONROE STREET**
- **SPOKANE, WA 99201**

**CERTIFIED SERVICES**
- **MENTAL HEALTH SERVICES:**
  - BRIEF INTERVENTION TREATMENT
  - CASE MANAGEMENT
  - FAMILY THERAPY
  - GROUP THERAPY
  - INDIVIDUAL TREATMENT

---

### STEVENS

#### ADEPT ASSESSMENT CENTER - COLVILLE

- **148100**
- **218 B NORTH OAK STREET**
- **COLVILLE, WA 99114**
- **(509) 684-2349**

**SHANA WINDHORST**
- ADMINISTRATOR

**JAMIE ZABORAC**
- CLINICAL SUPERVISOR

**MAILING ADDRESS**
- **218 B NORTH OAK ST.**
- **COLVILLE, WA 99114**

**CERTIFIED SERVICES**
- **SUBSTANCE USE DISORDER SERVICES:**
  - ALCOHOL AND DRUG INFORMATION SCHOOL
  - DUI ASSESSMENT
  - LEVEL I OUTPATIENT
  - LEVEL II INTENSIVE OUTPATIENT

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#### NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH

- **012501**
- **301 EAST CLAY AVENUE, ROOMS 201 & 216**
- **CHEWELAH, WA 99109**
- **(509) 935-4808**

**WWW.CO.STEVENS.WA.US/COUNSELING**

**DAVID NIELSEN**
- EXECUTIVE DIRECTOR

**DAN PITMAN**
- SUD CLINICAL SUPERVISOR
STEVENS

MAILING ADDRESS
PO BOX 905
CHEWELAH, WA 99109-0905

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - MAIN
165 EAST HAWTHORNE AVENUE
COLVILLE, WA 99114
(509) 684-4597
WWW.CO.STEVENS.WA.US/COUNSELING

MAILING ADDRESS
165 E HAWTHORNE AVE
COLVILLE, WA 99114

012500

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

200512

NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T
982 EAST COLUMBIA AVENUE
COLVILLE, WA 99114
(509) 684-4597
BMICHAELSON@STEVENSCOUNTYWA.GOV
WWW.CO.STEVENSWA.US/COUNSELING/INDEX.HTM

MAILING ADDRESS
165 E HAWTHORNE AVE
COLVILLE, WA 99114

DAVID M. NIELSEN, PH.D.
EXECUTIVE DIRECTOR

D. LYNN GEHRKE
MENTAL HEALTH CLINICAL DIRECTOR

CERTIFIED SERVICES
INPATIENT EVALUATION AND TREATMENT - ADULT
STEVEN

009900  SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM

PROGRAM

6228 OLD SCHOOL ROAD
WEPPINNIT, WA 99040
(1(509) 258-7502 (800) 789-4282

BRENT POTTER
HHS DIRECTOR
LINDA ANDERSON (PEND APPROVAL)
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 540
WEPPINNIT, WA 99040

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I INPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT

THURSTON

089200  ALTERNATIVES PROFESSIONAL COUNSELING, INC.

203 4TH AVENUE EAST, SUITES 301-304
OLYMPIA, WA 98501
(360) 357-7986

NOUNOUCHE CHORLEY
CLINICAL DIRECTOR

MAILING ADDRESS
203 4TH AVE E #301-304
OLYMPIA, WA 98501

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

144000  BALANCED PERSPECTIVES, INC.

2413 PACIFIC AVENUE SE, SUITE B
OLYMPIA, WA 98501
(360) 352-1052

ROBERT SHOPE
MAILING ADDRESS
PO BOX 4141
OLYMPIA, WA 98501

CERTIFIED SERVICES
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

200028  BEHAVIORAL HEALTH RESOURCES - MAIN

3857 MARTIN WAY EAST
OLYMPIA, WA 98506
(360) 704-7170
COMMUNITYRELATIONS@BHR.ORG
WWW.BHR.ORG

LAURIE TEBO
CEO
IAN HARREL
COO/MH CLINICAL SUPERVISOR

MAILING ADDRESS
3857 MARTIN WAY EAST
OLYMPIA, WA 98506
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

020100
BEHAVIORAL HEALTH RESOURCES - TUMWATER
6128 CAPITOL BOULEVARD SE
TUMWATER, WA 98501
(360) 704-7170

MAILING ADDRESS
6128 CAPITOL BLVD SE
TUMWATER, WA 98501

LAURIE TEBO
CEO

DANIELLE MURPHY
RECOVERY SERVICES MANAGER

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200016
CAPITAL RECOVERY CENTER
1000 CHERRY STREET SE
OLYMPIA, WA 98501
(360) 464-3880
(360) 357-2582

MAILING ADDRESS
1000 CHERRY STREET SE
OLYMPIA, WA 98501

JAMES WRIGHT
EXECUTIVE DIRECTOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200142
CATHOLIC COMMUNITY SERVICES - OLYMPIA
1011 10TH AVENUE SOUTHEAST
OLYMPIA, WA 98501
(360) 878-8248
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

MARY STONE SMITH
VICE PRESIDENT
THURSTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

104900
CATHOLIC COMMUNITY SERVICES - YELM
715 EAST YELM AVENUE, SUITE 8
YELM, WA 98597
(360) 878-8248
(888) 322-7156
STEPHANIETH@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT
HEIDI WILLIAMS
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200162
COMMUNITY YOUTH SERVICES - MAIN
711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

ALICIA FERRIS
CHIEF CLINICAL OFFICER

MAILING ADDRESS
711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200163
COMMUNITY YOUTH SERVICES - PEAR STREET
520 PEAR STREET SOUTHEAST
OLYMPIA, WA 98501
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

SCOTT HANAUER
CEO
ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
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FAMILY THERAPY
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

COMMUNITY YOUTH SERVICES - UNION AVENUE
505 UNION AVENUE SOUTHEAST, 1ST FLOOR
OLYMPIA, WA 98501
(360) 943-0780
(360) 918-7860
TAY@COMMUNITYYOUTHSERVICES.ORG
WWW.COMMUNITYYOUTHSERVICES.ORG

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506

SCOTT HANAUER
CEO
DR. EKATERINA SHKURKIN
PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
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FAMILY THERAPY
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

CRISIS CLINIC OF THURSTON AND MASON COUNTIES
CONFIDENTIAL LOCATION
(360) 586-2888
(800) 627-2211
WWW.CRISIS-CLINIC.ORG

MAILING ADDRESS
PO BOX 13453
OLYMPIA, WA 98508-3453

CB BOWERS
BOARD PRESIDENT
AMY SOHLER
MH & SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS

MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

DOC - CEDAR CREEK CORRECTIONS CENTER
12200 BORDEAUX ROAD
LITTLE ROCK, WA 98556
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT
THURSTON

200513  DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT
7345 LINDERSON WAY SOUTHWEST
TUMWATER, WA 98501
(360) 725-8602
(360) 725-8603
DAWN WILLIAMS
PROGRAM ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
SCREENING AND BRIEF INTERVENTION

147500  FIRST THINGS FIRST 123, LLC
1905 4TH AVENUE EAST, SUITE B
OLYMPIA, WA 98506
(360) 338-0600
(360) 951-1797
ANGIE M. CHAMBERS
ADMINISTRATOR
DARRELL R. CHAMBERS
CLINICAL SUPERVISOR

MAILING ADDRESS
1910 4TH AVE E, PMB 42
OLYMPIA, WA 98506

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

145800  FREEDOM RECOVERY, LLC
715 EAST YELM AVENUE, SUITE 6
YELM, WA 98597
(253) 961-0116
ROBLONG.FRC@COMCAST.NET
JASON JOHNSTONE
CLINICAL SUPERVISOR

MAILING ADDRESS
715 EAST YELM AVENUE, SUITE 6
YELM, WA 98597

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200351  HAND IN HAND BEHAVIORAL CONSULTING LLC
1800 COOPER POINT ROAD, SUITE 21
OLYMPIA, WA 98502
(360) 810-1547
CWOLFF@HANDINHANDBC.COM
WWW.HANDINHANDBC.COM
LAURA CAMPBELL
MEMBER/OWNER

MAILING ADDRESS
PO BOX 6286
OLYMPIA, WA 98507

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200076  INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA
204 QUINCE STREET, SUITE 200
OLYMPIA, WA 98506
CHARLOTTE BOOTH
EXECUTIVE DIRECTOR
THURSTON

MAILING ADDRESS
3400 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

028100 NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM
FRONTAGE ROAD - NISQUALLY RESERVATION
OLYMPIA, WA 98513
(360) 413-2727

SHARLAINE LACLAIR
INTERIM CEO
KELLY KNITTLE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
4820 SHE-NAH-NUM DR SE
OLYMPIA, WA 98513

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

160800 NORTHWEST RESOURCES II, INC. - LACEY
3773-A MARTIN WAY E, SUITE 105
LACEY, WA 98506
(360) 688-7312
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

MAILING ADDRESS
2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

162700 NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH
200 LILLY ROAD NORTHEAST, SUITE C
OLYMPIA, WA 98506
(360) 918-8336
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR
DUANE PRICE
MH CLINICAL SUPERVISOR

MAILING ADDRESS
2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
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<thead>
<tr>
<th>Area</th>
<th>Address</th>
<th>Contact Information</th>
<th>Services</th>
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<tbody>
<tr>
<td><strong>NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN</strong></td>
<td>2708 WESTMOOR COURT SOUTHWEST, OLYMPIA, WA 98502</td>
<td>DENNIS NEAL, ADMINISTRATOR</td>
<td><strong>MENTAL HEALTH SERVICES:</strong> BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
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<td>STANCIN KAHLER, SUD CLINICAL SUPERVISOR</td>
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<td><strong>MAILING ADDRESS</strong></td>
<td>2708 WESTMOOR COURT SOUTHWEST, OLYMPIA, WA 98502</td>
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<td><strong>OLYMPIC HEALTH &amp; RECOVERY SERVICES - MAIN</strong></td>
<td>612 WOODLAND SQUARE LOOP SE, SUITE 401, LACEY, WA 98503</td>
<td>MARK FREEDMAN, CEO</td>
<td><strong>MENTAL HEALTH SERVICES:</strong> BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, CRISIS EMERGENCY INVOLUNTARY DETENTION, CRISIS OUTREACH, CRISIS PEER SUPPORT, CRISIS STABILIZATION, CRISIS TELEPHONE SUPPORT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT, PSYCHIATRIC MEDICATION, RECOVERY EMPLOYMENT SUPPORT, RECOVERY HOUSING SUPPORT, RECOVERY PEER SUPPORT</td>
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<td>JESSICA SHOOK, CLINICAL SUPERVISOR</td>
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<td><strong>MAILING ADDRESS</strong></td>
<td>612 WOODLAND SQUARE LOOP SE, SUITE 401, LACEY, WA 98503</td>
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<tr>
<td><strong>OLYMPIC HEALTH &amp; RECOVERY SERVICES - OLYMPIA</strong></td>
<td>3436 MARY ELDER ROAD NORTHEAST, OLYMPIA, WA 98506</td>
<td>MARK FREEDMAN, CEO</td>
<td><strong>MENTAL HEALTH SERVICES:</strong> CRISIS EMERGENCY INVOLUNTARY DETENTION, CRISIS OUTREACH, CRISIS PEER SUPPORT, CRISIS TELEPHONE SUPPORT</td>
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<td>JESSICA SHOOK, CLINICAL SUPERVISOR</td>
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<tr>
<td><strong>MAILING ADDRESS</strong></td>
<td>3436 MARY ELDER ROAD NORTHEAST, OLYMPIA, WA 98506</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
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</tbody>
</table>
THURSTON

PIERCE COUNTY ALLIANCE - THURSTON COUNTY

**DRUG COURT**
2400 BRISTOL COURT SW, SUITE B
OLYMPIA, WA 98502
(360) 357-2482

**TERREE SCHMIDT-WHELAN**
ADMINISTRATOR

**JAMES BOYLE**
CLINICAL SUPERVISOR

**MAILING ADDRESS**
2400 BRISTOL CT SW STE B
OLYMPIA, WA 98502

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PINNACLE PEAK INSTITUTE, INC.

1822 BLACK LAKE BOULEVARD, SUITE 101
OLYMPIA, WA 98512
(360) 515-0791
(360) 704-0086

**JOHN THOMPSON**
ADMINISTRATOR

**MAILING ADDRESS**
1822 BLACK LAKE BLVD, STE 101
OLYMPIA, WA 98512

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - CCC BRANCH

225 STATE AVENUE NORTHEAST
OLYMPIA, WA 98501
(360) 486-6400
TIMOTHY.LAROCQUE@PROVIDENCE.ORG
WWW.PROVIDENCE.ORG

**SUE BEALL**
SWR DIRECTOR BH SERVICES

**GEORGE CHAPPELL**
MEDICAL DIRECTOR

**MAILING ADDRESS**
413 LILLY RD NE
OLYMPIA, WA 98506

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - MAIN

413 LILLY ROAD NE
OLYMPIA, WA 98506

HTTP://WASHINGTON.PROVIDENCE.ORG

**MAILING ADDRESS**
413 LILLY ROAD NE
OLYMPIA, WA 98506

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
176500  ROYAL LIFE CENTERS, LLC - HAVEN
8649 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0422
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

TERESA RORIE
PROGRAM DIRECTOR
BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8649 MARTIN WAY EAST
LACEY, WA 98516

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

176800  ROYAL LIFE CENTERS, LLC - OLYMPIC
8649 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0070
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

TERESA RORIE
PROGRAM DIRECTOR
BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8649 MARTIN WAY EAST
LACEY, WA 98516

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT

200267  SEA MAR BEHAVIORAL HEALTH - OLYMPIA
3030 LIMITED LANE NW
OLYMPIA, WA 98502
CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

110200  SEA MAR BEHAVIORAL HEALTH - TUMWATER
6334-6336 LITTLE ROCK ROAD SW
TUMWATER, WA 98512
(360) 704-7590
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
ADMINISTRATOR
JARED LANTON
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT

176000
SEA MAR BEHAVIORAL HEALTH - YELM
202 CULLENS STREET NW
YELM, WA 98597
(206) 764-4714

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

111900
SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES
6700 MARTIN WAY EAST, SUITE 117
OLYMPIA, WA 98516
(360) 413-6910

MAILING ADDRESS
1700 AIRPORT WY S
SEATTLE, WA 98134-1618

015300
ST. PETER CHEMICAL DEPENDENCY CENTER
4800 COLLEGE STREET SOUTHEAST
LACEY, WA 98503
(360) 456-7575
(800) 332-0465

MAILING ADDRESS
4800 COLLEGE ST SE
LACEY, WA 98503

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION
- PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
- PROBLEM & PATHOLOGICAL GAMBLING

200041
TELECARE - THURSTON MASON CRISIS TRIAGE
3285 FERGUSON STREET SW
TUMWATER, WA 98512
(360) 943-1907
MFERGUSON@TELECARECORP.COM
WWW.TELECARECORP.COM

JEFF LANDON
ADMINISTRATOR

TYVONNE BERRING
CLINICAL DIRECTOR
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>THURSTON</strong></td>
<td></td>
</tr>
</tbody>
</table>
| **MAILING ADDRESS**  
PO BOX 14339  
TUMWATER, WA 98511 |
| **CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
INPATIENT EVALUATION AND TREATMENT - ADULT |
| **200500**  
TELECARE - THURSTON MASON E&T  
3436 MARY ELDER ROAD NORTHEAST  
OLYMPIA, WA 98506  
(360) 528-2590  
MROSS@TELECARECORP.COM  
[WWW.TELECARECORP.COM](http://WWW.TELECARECORP.COM) |
| HOLLY BORSO  
ADMINISTRATOR |
| KRISTIANN SMITH  
INTERIM CLINICAL DIRECTOR |
| **MAILING ADDRESS**  
PO BOX 14339  
TUMWATER, WA 98511-4339 |
| **CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT |
| **200509**  
TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM  
3436 MARY ELDER ROAD NORTHEAST, SUITE A  
OLYMPIA, WA 98506  
(360) 528-2590  
[WWW.TELECARECORP.COM](http://WWW.TELECARECORP.COM) |
| PAM EGGLESTON  
INTERIM ADMINISTRATOR |
| KRISTIANN SMITH  
CLINICAL DIRECTOR |
| **MAILING ADDRESS**  
PO BOX 14339  
TUMWATER, WA 98511-4339 |
| **CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS STABILIZATION  
GROUP THERAPY  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RESIDENTIAL TREATMENT FACILITY |
| **200498**  
TELECARE - THURSTON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM  
908 5TH AVENUE SOUTHEAST  
OLYMPIA, WA 98501  
(360) 754-2426  
[WWW.TELECARECORP.COM](http://WWW.TELECARECORP.COM) |
| TYVONNE BERRING  
ADMINISTRATOR |
| **MAILING ADDRESS**  
PO BOX 14339  
TUMWATER, WA 98511-4339 |
| **CERTIFIED SERVICES**  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT |
| **200128**  
THE EMILY PROGRAM - LACEY  
673 WOODLAND SQUARE LOOP SE, SUITE 330  
LACEY, WA 98503  
(888) 364-5977  
[WWW.EMILYPROGRAM.COM](http://WWW.EMILYPROGRAM.COM) |
| STACEY SCHILTER-PISANO  
SITE MANAGER |
THURSTON

MAILING ADDRESS
673 WOODLAND SQUARE LOOP SE, SUITE 330
LACEY, WA 98503

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

051400
THE RIGHT STEP, INC.
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503
(360) 923-9585
WWW.THERIGHTSTEPINC.COM

MAILING ADDRESS
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

099600
TRUE NORTH-ESD 113 - TUMWATER MAIN
6005 TYEE DRIVE SW
TUMWATER, WA 98512
(360) 464-6870
(360) 464-6873

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

105700
TRUE NORTH-ESD 113 - YELM
1315 YELM HIGHWAY
YELM, WA 98597
(360) 458-6233

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WAHKIAKUM

001502
WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

CHRIS BISCHOFF
DIRECTOR

DALLAS CARROLL
CLINICAL SUPERVISOR
WAHKIAKUM

MAILING ADDRESS
42 ELOCHOMAN VALLEY RD
CATHLAMET, WA 98612

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT

WALLA WALLA

200067 CHILDREN'S HOME SOCIETY OF WASHINGTON - WALLA WALLA
1612 PENNY LANE
WALLA WALLA, WA 99362
(509) 529-2130
WWW.CHILDRENSHOMESOCIETY.ORG

MAILING ADDRESS
1612 PENNY LANE
WALLA WALLA, WA 99362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

166200 COMPREHENSIVE HEALTHCARE - WALLA WALLA
1520 KELLY PLACE, SUITE 234
WALLA WALLA, WA 99362
(509) 524-2920
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

075900 DOC - WASHINGTON STATE PENITENTIARY
1313 NORTH 13TH STREET
WALLA WALLA, WA 99362
(360) 725-8628

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR
WALLA WALLA

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II  INTENSIVE OUTPATIENT

107400  SERENITY POINT COUNSELING SERVICES, LLC
919 SOUTH 2ND AVENUE
WALLA WALLA, WA 99362
(509) 529-6036
(509) 529-6037
SERENITYPOINTCOUNSELING.COM
WWW.SERENITYPOINTCOUNSELING.COM

PATRICK C. FLORES
ADMINISTRATOR

 PATRICK C. FLORES, LICSW/CDP
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
919 S 2ND AVE
WALLA WALLA, WA 99362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II  INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

013100  VETERANS ADMINISTRATION MEDICAL CENTER - WALLA WALLA
77 WAINWRIGHT DRIVE, BUILDING 143
WALLA WALLA, WA 99362
(509) 525-5200

BOBI GOODSON
SUPERVISOR OF RECOVERY/MH SVCS

KATHY WIKMAN
SENIOR ADDICTION THERAPIST

MAILING ADDRESS
77 WAINWRIGHT DR, BLDG 143, OFFICE 203
WALLA WALLA, WA 99362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT

WHATCOM

038600  BELAIR CLINIC
1130 NORTH STATE STREET
BELLINGHAM, WA 98225
(360) 676-4485

NICOLE WHIPPLE
ADMINISTRATOR

LUZELLEN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
1130 NORTH STATE STREET
BELLINGHAM, WA 98225

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II  INTENSIVE OUTPATIENT

139900  BRIDGES TREATMENT AND RECOVERY - BELLINGHAM
1221 FRASER STREET, SUITE E-1
BELLINGHAM, WA 98229
(360) 714-8180

DYLAN BRASHEAR
ADMINISTRATOR

CARI JONES
CLINICAL SUPERVISOR

MAILING ADDRESS
1221 FRASER ST STE E-1
BELLINGHAM, WA 98229
<table>
<thead>
<tr>
<th>Code</th>
<th>Agency Name</th>
<th>Address</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>147000</td>
<td>BRIDGES TREATMENT AND RECOVERY - FERNADE</td>
<td>6044 PORTAL WAY, SUITE 103, FERNDALE, WA 98248</td>
<td>(360) 714-8180, (360) 393-4579</td>
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<td></td>
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<td>Dylan Brashear, Administrator, Cari Jones, Clinical Supervisor</td>
</tr>
<tr>
<td>078600</td>
<td>CATHOLIC COMMUNITY SERVICES - BELLINGHAM LAKEWAY DRIVE</td>
<td>515 LAKEWAY DRIVE, BELLINGHAM, WA 98225</td>
<td>(360) 676-2187</td>
</tr>
<tr>
<td></td>
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<td>Donna Wells, Agency Director</td>
</tr>
<tr>
<td>200138</td>
<td>CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN</td>
<td>1133 RAILROAD AVENUE, SUITE 100, BELLINGHAM, WA 98225</td>
<td>(360) 676-2164, <a href="http://WWW.CCSWW.ORG">WWW.CCSWW.ORG</a></td>
</tr>
<tr>
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<td>Will Rice, Regional Chief of Operations, Kathy McNaughton, Regional Clinical Director</td>
</tr>
<tr>
<td>200336</td>
<td>COMPASS HEALTH - BELLINGHAM</td>
<td>1216 BAY STREET, BELLINGHAM, WA 98225</td>
<td>(360) 752-4545, <a href="http://WWW.COMPASSHEALTH.ORG">WWW.COMPASSHEALTH.ORG</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Anastasia Alles, Chief Operating Officer, Erin Wells, Clinical Supervisor</td>
</tr>
</tbody>
</table>
WHATCOM

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CRISIS OUTREACH
CRISIS PEER SUPPORT

200178

COMPASS HEALTH - WHATCOM COUNTY MCLEOD
3645 EAST MCLEOD ROAD
BELLINGHAM, WA 98226
(360) 676-2220
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200179

COMPASS HEALTH - WHATCOM TRIAGE CENTER
2030 DIVISION STREET
BELLINGHAM, WA 98226
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRISS STARERS-FOOTE
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
RESIDENTIAL TREATMENT FACILITY

013400

CONTACT COUNSELING
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225
(360) 671-3277

JOHN CHAMBERS
ADMINISTRATOR

MAILING ADDRESS
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

019401

DOC - BELLINGHAM WORK RELEASE
1125 NORTH GARDEN STREET
BELLINGHAM, WA 98225
(360) 676-2150
WWW.DOC.WA.GOV

DAWN WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR
ENDLESS POTENTIAL, LLC
2110 IRON STREET
BELLMINGHAM, WA 98225
(360) 930-6063
(360) 746-4092
CONTACTUS@ENDLESSPOTENTIALLLC.COM
WWW.ENDLESSPOTENTIALLLC.COM

MAILING ADDRESS
2110 IRON STREET
BELLMINGHAM, WA 98225

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)

LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- MAIN
609 NORTHSHORE DRIVE
BELLMINGHAM, WA 98226
(360) 676-6000

MAILING ADDRESS
609 NORTHSHORE DRIVE
BELLMINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY PEER SUPPORT

LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- SUNSET DUPLEX
1727 EAST SUNSET DRIVE
BELLMINGHAM, WA 98226
(360) 676-6000
KAY.BURBIDGE@LWRTC.ORG
WWW.LWRTC.ORG

MAILING ADDRESS
609 NORTHSHORE DR
BELLMINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT

LUMMI COUNSELING SERVICES
2616 KWINA ROAD
BELLMINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

MAILING ADDRESS
2616 KWINA ROAD
BELLMINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT
WHATCOM

MAILING ADDRESS
2616 KWINA ROAD
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

023000
NOOKSACK TRIBE'S GENESIS II
6750 MISSION ROAD
EVERSON, WA 98247
(360) 966-7704

MAILING ADDRESS
PO BOX 157
DEMING, WA 98244

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200456
NORTHWEST REGIONAL COUNCIL
600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-6749
(800) 585-6749
ANDEREAA@DSHS.WA.GOV
WWW.NWRCWA.ORG

MAILING ADDRESS
600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200255
PACIFIC NORTHWEST AUTISM
4370 CORDATA PARKWAY
BELLINGHAM, WA 98226
(360) 348-6414
PACIFICNORTHWESTAUTISM@GMAIL.COM
WWW.PACIFICNORTHWESTAUTISM.COM

MAILING ADDRESS
4152 MERIDIAN ST #105-146
BELLINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200096
PEACEHEALTH ST. JOSEPH MEDICAL CENTER E&T
2901 SQUALICUM PARKWAY
BELLINGHAM, WA 98225
(360) 788-6408

MAILING ADDRESS
BEHAVIORAL HEALTH UNIT
BELLINGHAM, WA 98228-2620

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
**WHATCOM**

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**
INPATIENT EVALUATION AND TREATMENT - ADULT

---

**052100**

**SEA MAR BEHAVIORAL HEALTH - BELLINGHAM**

3350 AIRPORT WAY
BELLINGHAM, WA 98226
(360) 734-5458
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

**MAILING ADDRESS**

8915 14TH AVE S
SEATTLE, WA 98108

---

**CLAUDIA D'ALLEGRI**
VICE PRESIDENT OF BEHAVIORAL HEALTH

**CHARLES WATRAS**
SUD CLINICAL SUPERVISOR

---

**095800**

**SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER**

1603 EAST ILLINOIS STREET
BELLINGHAM, WA 98226
(360) 647-4266

**MAILING ADDRESS**

8915 14TH AVE S
SEATTLE, WA 98108

---

**LESLIE BLAKE**
ADMINISTRATOR

**DIONNEA ANDRICOS**
CLINICAL SUPERVISOR

---

**200419**

**SENDAN CENTER**

1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 305-3275
SENDANCENTER.COM

**MAILING ADDRESS**

1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225

---

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200317**

**SUNRISE SERVICES, INC. - BELLINGHAM**

1515 CORNWALL AVENUE
BELLINGHAM, WA 98225
(360) 746-7200
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

**MAILING ADDRESS**

PO BOX 2569
EVERETT, WA 98213

---

**HOLLY MORGAN**
EXECUTIVE ADMINISTRATOR

**SHAWN (SHAMORA) BEARWOOD**
MH & SUD CLINICAL DIRECTOR
<table>
<thead>
<tr>
<th>200073</th>
<th>UNITY CARE NORTHWEST - BELLINGHAM BRANCH</th>
<th>1616 CORNWALL AVENUE, SUITE 205</th>
<th>BELLINGHAM, WA 98225</th>
<th>(360) 676-6177</th>
<th><a href="http://WWW.UNITYCARENW.ORG">WWW.UNITYCARENW.ORG</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>200310</td>
<td>UNITY CARE NORTHWEST - FERNDALE 5603 BRANCH</td>
<td>5603 3RD AVENUE</td>
<td>FERNDALE, WA 98248</td>
<td>(360) 752-7410</td>
<td><a href="http://WWW.INTERFAITHCHC.ORG">WWW.INTERFAITHCHC.ORG</a></td>
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<td>200404</td>
<td>UNITY CARE NORTHWEST - FERNDALE 5616 BRANCH</td>
<td>5616 3RD AVENUE</td>
<td>FERNDALE, WA 98248</td>
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<tr>
<td>200072</td>
<td>UNITY CARE NORTHWEST - MAIN</td>
<td>220 UNITY STREET</td>
<td>BELLINGHAM, WA 98225</td>
<td>(360) 676-6177</td>
<td><a href="http://WWW.UNITYCARENW.ORG">WWW.UNITYCARENW.ORG</a></td>
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WHATCOM

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

131800
WATERFRONT COUNSELING IN BLAINE
228 CHERRY STREET
BLAINE, WA 98230
(360) 332-1000

MAILING ADDRESS
PO BOX 463
CUSTER, WA 98240

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

119600
WHATCOM COMMUNITY DETOX
2030 DIVISION STREET
BELLINGHAM, WA 98226
(360) 676-2020

MAILING ADDRESS
2030 DIVISION ST
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

WHITMAN

075500
PALOUSE RECOVERY CENTER, LLC
1240 SOUTHEAST BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163
(509) 334-0718

MAILING ADDRESS
1240 SE BISHOP BLVD STE P
PULLMAN, WA 99163

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

013800
PALOUSE RIVER COUNSELING CENTER - MAIN
340 NORTHEAST MAPLE STREET
PULLMAN, WA 99163
(509) 334-1133

MAILING ADDRESS
1240 SE BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

Jean Iverson
Administrator
Darcell Meyers & Jerry Pastore
Co-Mgrs w/Jean Iverson

Mike Berney
Director
Mark Zeigler
Clinical Director
WHITMAN

MAILING ADDRESS
340 NE MAPLE ST
PULLMAN, WA 99163

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200256

PALOUSE RIVER COUNSELING CENTER - PULLMAN
400 NORTHEAST MAIDEN LANE
PULLMAN, WA 99163

MIKE BERNEY
DIRECTOR

MAILING ADDRESS
340 NE MAPLE STREET
PULLMAN, WA 99163

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

YAKIMA

121400

APPLE VALLEY COUNSELING SERVICE
611 WEST A STREET
YAKIMA, WA 98902
(509) 452-1000
(877) 452-2827

WILLIAM ELLIS
ADMINISTRATOR

CHARLOTTE MANTOOTH-SEIP
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 639
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

149800

BALANCE SOCIAL SERVICES, LLC
1400 SUMMITVIEW AVENUE, SUITE 106
YAKIMA, WA 98902
(509) 453-1702

JOE CERVANTES
ADMINISTRATOR

HECTOR MADRID
CLINICAL SUPERVISOR

MAILING ADDRESS
1400 SUMMITVIEW AVE, SUITE 106
YAKIMA, WA 98902-2902
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<th>Name</th>
<th>Street Address</th>
<th>City, State</th>
<th>Phone</th>
<th>Website</th>
<th>Administrator/Owner</th>
<th>Clinical Supervisor</th>
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<tr>
<td>050300</td>
<td>BARTH CLINIC - YAKIMA MAIN</td>
<td>201 EAST LINCOLN AVENUE</td>
<td>YAKIMA, WA 98901</td>
<td>(509) 457-5653</td>
<td><a href="http://WWW.BARTHCLINIC.COM">WWW.BARTHCLINIC.COM</a></td>
<td>JAMES BARTH</td>
<td>MEGHAN TRAVERS</td>
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<tr>
<td>177100</td>
<td>BELIEVE IN RECOVERY, LLC - YAKIMA</td>
<td>3907 CREEKSIDE LOOP, SUITE 110</td>
<td>YAKIMA, WA 98902</td>
<td>(509) 317-2140</td>
<td></td>
<td>VINCENT MARQUIS</td>
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<tr>
<td>200153</td>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA D STREET</td>
<td>303 EAST D STREET, SUITE 5</td>
<td>YAKIMA, WA 98901</td>
<td>(509) 965-7100</td>
<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
<td>DARLENE DARNELL</td>
<td></td>
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<tr>
<td>200150</td>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA KERN ROAD</td>
<td>3801 KERN ROAD</td>
<td>YAKIMA, WA 98902</td>
<td>(509) 965-7100</td>
<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
<td>DARLENE DARNELL</td>
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</table>
YAKIMA

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200152
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA MAIN
5301 TIETON DRIVE, SUITE C
YAKIMA, WA 98908
(509) 965-7100
WWW.CATHOLICCHARITIESCW.ORG

MAILING ADDRESS
5301 TIETON DRIVE, SUITE C
YAKIMA, WA 98908

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- DAY SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

096000
CENTER FOR ADDICTIONS RECOVERY AND EDUCATION (CARE)
1015 SOUTH 40TH AVENUE, SUITE 23
YAKIMA, WA 98908
(509) 966-7246

MAILING ADDRESS
1015 S 40TH AVE STE 23
YAKIMA, WA 98908

CERTIFIED SERVICES

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
- PROBLEM & PATHOLOGICAL GAMBLING

200013
COMPREHENSIVE HEALTHCARE - BRIDGES E&T
201 SOUTH SECOND AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.CWCMH.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- INPATIENT EVALUATION AND TREATMENT - ADULT

200354
COMPREHENSIVE HEALTHCARE - COMPETENCY RESTORATION CENTER
1500 PACIFIC AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.CWCMH.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- COMPETENCY EVALUATION & RESTORATION TREATMENT
049000
COMPREHENSIVE HEALTHCARE - DETOX & OUTPATIENT
505 SOUTH 4TH AVENUE
YAKIMA, WA 98902
(509) 248-1200

MIGUEL MESSINA
ADMINISTRATOR

MARCY TREAT
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INFORMATION AND CRISIS
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION
WITHDRAWAL MANAGEMENT
YOUTH WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVolUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

020500
COMPREHENSIVE HEALTHCARE - MAIN
402 SOUTH 4TH AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.COMPHC.ORG

RON GENGLER
COO

MIGUEL MESSINA
VICE PRESIDENT/SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVolUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

136300
COMPREHENSIVE HEALTHCARE - PATHWAYS
307 WEST WALNUT STREET
YAKIMA, WA 98902
(509) 453-4274
(509) 453-4301

SHAWNA STONEKING
DIRECTOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907
YAKIMA

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

125600
COMPREHENSIVE HEALTHCARE - SUNNYSIDE
1319 SAUL ROAD
SUNNYSIDE, WA 98944
(509) 837-2089

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

MIKE NORTON
ADMINISTRATOR
CINDY BROWN
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

146700
COMPREHENSIVE HEALTHCARE - TWO RIVERS
LANDING
504 SOUTH 3RD AVENUE
YAKIMA, WA 98902
(509) 469-3727
(509) 575-4084

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

TIMOTHY SHIELDS
DIRECTOR
BARBARA MYERS-MULL
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)
INPATIENT EVALUATION AND TREATMENT – CHILDREN

200399
COMPREHENSIVE HEALTHCARE - YAKIMA 2ND AVENUE
206 SOUTH 2ND AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

RON GENGLER
COO

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
YAKIMA

076500  DOC - AHTANUM VIEW WORK RELEASE  
2009 SOUTH 64TH AVENUE  
YAKIMA, WA 98903  
(360) 725-8628  
DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR  
BRYAN SMITH  
CLINICAL SUPERVISOR

MAILING ADDRESS  
PO BOX 41123 (MS 41123)  
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

154800  INNOVATION RESOURCE CENTER  
214 SOUTH 6TH STREET, SUITE 3  
SUNNYSIDE, WA 98944  
(509) 836-2400  
FRANCISCO J. GUERRERO  
ADMINISTRATOR  
MARIE E. GUERRERO  
CLINICAL DIRECTOR

MAILING ADDRESS  
PO BOX 953  
SUNNYSIDE, WA 98944

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

200075  INSTITUTE FOR FAMILY DEVELOPMENT - YAKIMA  
413 NORTH 20TH AVENUE, SUITE B  
YAKIMA, WA 98902  
CHARLOTTE BOOTH  
EXECUTIVE DIRECTOR

MAILING ADDRESS  
34004 16TH AVE. S, SUITE 200  
FEDERAL WAY, WA 98003

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT

153200  INTEGRITY SUPPORT SERVICES, LLC  
242 DIVISION STREET  
GRANDVIEW, WA 98930  
(509) 882-8012  
VICENTE RUIZ  
ADMINISTRATOR

MAILING ADDRESS  
242 DIVISION STREET  
GRANDVIEW, WA 98930

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT
014100  MERIT RESOURCE SERVICES - SUNNYSIDE  
702 EAST FRANKLIN AVENUE  
SUNNYSIDE, WA 98944  
(509) 837-7700  
LORETTAO@MERITRESOURCES.ORG  
WWW.MERITRESOURCES.ORG  
DAVID L. WILSON  
EXECUTIVE DIRECTOR  
ANTHONY ESPARZA  
SUD CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 997  
SUNNYSIDE, WA 98944  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
SCREENING AND BRIEF INTERVENTION  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  

014101  MERIT RESOURCE SERVICES - TOPPENISH  
321 WEST FIRST AVENUE  
TOPPENISH, WA 98948  
(509) 865-5233  
LORETTAO@MERITRESOURCES.ORG  
WWW.MERITRESOURCES.ORG  
DAVID L. WILSON  
EXECUTIVE DIRECTOR  
JILL B. STANTON  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 997  
SUNNYSIDE, WA 98944  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
SCREENING AND BRIEF INTERVENTION  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  

083200  MERIT RESOURCE SERVICES - WAPATO  
312 WEST 2ND STREET  
WAPATO, WA 98951  
(509) 877-7271  
LORETTAO@MERITRESOURCES.ORG  
WWW.MERITRESOURCES.ORG  
DAVID L. WILSON  
EXECUTIVE DIRECTOR  
JILL B. STANTON  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 997  
SUNNYSIDE, WA 98944  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
SCREENING AND BRIEF INTERVENTION  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  

107800  MERIT RESOURCE SERVICES - YAKIMA  
315 NORTH 2ND STREET  
YAKIMA, WA 98901  
(509) 469-9366  
LORETTAO@MERITRESOURCES.ORG  
WWW.MERITRESOURCES.ORG  
DAVID L. WILSON  
EXECUTIVE DIRECTOR  
DAVID R. BURKETT  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 997  
SUNNYSIDE, WA 98944
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<tr>
<th>Location</th>
<th>Address</th>
<th>Services Offered</th>
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<tr>
<td>SUNDOWN M RANCH</td>
<td>2280 SR 821 SELAH, WA 98901</td>
<td>CERTIFIED SERVICES: Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient, Screening and Brief Intervention. Mental Health Services: Brief Intervention Treatment, Case Management, Family Therapy, Group Therapy, Individual Treatment.</td>
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<tr>
<td>TRIUMPH TREATMENT SERVICES - BETH'S PLACE</td>
<td>608 SUPERIOR LANE YAKIMA, WA 98902</td>
<td>CERTIFIED SERVICES: Substance Use Disorder Services: Long-Term Residential. Mental Health Services: Brief Intervention Treatment, Case Management, Family Therapy, Group Therapy, Individual Treatment, Psychiatric Medication, Recovery Medication Support, Residential Treatment Facility.</td>
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<tr>
<td>TRIUMPH TREATMENT SERVICES - CASITA</td>
<td>605 SUPERIOR LANE YAKIMA, WA 98902</td>
<td>CERTIFIED SERVICES: Substance Use Disorder Services: Long-Term Residential. Mental Health Services: Brief Intervention Treatment, Case Management, Family Therapy, Group Therapy, Individual Treatment, Psychiatric Medication, Recovery Medication Support, Residential Treatment Facility.</td>
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<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
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<td>SUBSTANCE USE DISORDER SERVICES:</td>
<td>BRIEF INTERVENTION TREATMENT</td>
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<td>RESIDENTIAL TREATMENT FACILITY</td>
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166300
TRIUMPH TREATMENT SERVICES - INSPIRATIONS
3300 ROOSEVELT AVENUE
YAKIMA, WA 98902
(509) 571-1455
WWW.TRIUMPHTX.ORG

MAILING ADDRESS
PO BOX 2849
YAKIMA, WA 98907-2849

WALLY LEE
CEO
DIANNE SNYDER
CLINICAL SUPERVISOR

013901
TRIUMPH TREATMENT SERVICES - JAMES OLDHAM TREATMENT CENTER
201 HIGHLAND DRIVE
BUENA, WA 98921
(509) 865-6705
WWW.TRIUMPHTX.ORG

MAILING ADDRESS
PO BOX 354
BUENA, WA 98921

WALLY LEE
CEO

013900
TRIUMPH TREATMENT SERVICES - MAIN
120 SOUTH 3RD STREET
YAKIMA, WA 98901
(509) 248-1800
CDAC@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

MAILING ADDRESS
PO BOX 2849
YAKIMA, WA 98907-2849

WALLY LEE
CEO
TOM DAVIDSON
SUD CLINICAL SUPERVISOR

013902
TRIUMPH TREATMENT SERVICES - RIEL HOUSE
613 SUPERIOR LANE
YAKIMA, WA 98902
(509) 575-4810
AVASQUEZ@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO
TOM DAVIDSON
EXECUTIVE CLINICAL DIRECTOR (SUD CS)
MAILING ADDRESS
PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  CASE MANAGEMENT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  PSYCHIATRIC MEDICATION
  RECOVERY MEDICATION SUPPORT
  RESIDENTIAL TREATMENT FACILITY

107000
VETERANS ADMINISTRATION - YAKIMA SUBSTANCE
ABUSE OUTREACH
310 NORTH 5TH AVENUE
YAKIMA, WA 98902
(509) 457-2736

BOBI GOODSON
ADMINISTRATOR

KATHY WIKMAN
SENIOR ADDICTION THERAPIST

MAILING ADDRESS
77 WAINWRIGHT DR (CD TRTMT UNIT)
WALLA WALLA, WA 99362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  LEVEL I OUTPATIENT

014200
YAKAMA NATION TIINÁWIT PROGRAM
20 GUNNYON ROAD
TOPPENISH, WA 98948
(509) 865-5121

ANITA MENDOZA
ADMINISTRATOR/PROGRAM DIRECTOR

ERIC JOHNSON
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 367
TOPPENISH, WA 98948

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  ALCOHOL AND DRUG INFORMATION SCHOOL
  DUI ASSESSMENT
  LEVEL I OUTPATIENT

200285
YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW
1000 WALLACE WAY
GRANDVIEW, WA 98930

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  PSYCHIATRIC MEDICATION

200286
YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH
510 WEST 1ST AVENUE
TOPPENISH, WA 98948

JANIS LUVAAS
ADMINISTRATOR
**MAILING ADDRESS**
918 EAST MEADE AVENUE
YAKIMA, WA 98903

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

---

**050001**
**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA**
12TH AVENUE
307 SOUTH 12TH AVENUE, SUITE 4B
YAKIMA, WA 98902
(509) 575-8457

**MAILING ADDRESS**
307 S. 12TH AVE, STE B
YAKIMA, WA 98902

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

**ADMINISTRATOR**
JANIS LUVAAS
RUDOLFO (RUDY) RAMIREZ

---

**200284**
**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA**
KERN ROAD
3801 KERN ROAD
YAKIMA, WA 98902

**MAILING ADDRESS**
918 EAST MEADE AVENUE
YAKIMA, WA 98903

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)

**ADMINISTRATOR**
JANIS LUVAAS

---

**200283**
**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA**
MAIN
918 EAST MEADE AVENUE
YAKIMA, WA 98903

**MAILING ADDRESS**
918 EAST MEADE AVENUE
YAKIMA, WA 98903

**ADMINISTRATOR**
JANIS LUVAAS
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200287  YAKIMA VALLEY MEMORIAL HOSPITAL E&T
2811 TIETON DRIVE
YAKIMA, WA 98902

JOHN SEE
PSYCHIATRIC SERVICES, INPATIENT NURSE MANAGER

MAILING ADDRESS
2811 TIETON DRIVE
YAKIMA, WA 98902

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200424  AUTISM OUTREACH OF WASHINGTON, INC.
CONFIDENTIAL LOCATION
(619) 795-9925
INFO@AUTISMOUTREACHSOCAL.COM

PATRICK BUNT
PRESIDENT

ABIGAIL BUNT
EXECUTIVE DIRECTOR

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200101  PROTOCOL SERVICES, INC.
621 SOUTHWEST ALDER STREET, SUITE 400
PORTLAND, OR 97205

MAILING ADDRESS
621 SW ALDER STREET, SUITE 400
PORTLAND, OR 97205

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
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LOURDES COUNSELING CENTER - PASCO
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MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH
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MATUMAINI COUNSELING & COMMUNITY CENTER
MAXIM HEALTHCARE SERVICES, INC.
MEDTRIQ TREATMENT CENTER, LLC
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MERIT RESOURCE SERVICES - KENNEWICK
MERIT RESOURCE SERVICES - SUNNYSIDE
MERIT RESOURCE SERVICES - TOPPENISH
MERIT RESOURCE SERVICES - WAPATO
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