

## 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:

- [Washington Recovery Help Line](#): 1-866-789-1511
- [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.

*Division of Behavioral Health and Recovery  
Post Office Box 45330  
Olympia, Washington 98504-5330  
Main Line: 360-725-3700  
Toll Free: 1-800-446-0259  
Fax: 360-725-2279*



---

## ADAMS

---

**000100**      **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](http://WWW.CO.ADAMS.WA.US)

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

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

VICKI GUSE  
ADMINISTRATOR

GLORIA OCHOA  
SUD CLINICAL SUPERVISOR

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

---

**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](http://WWW.CO.ADAMS.WA.US)

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

**CERTIFIED SERVICES**

VICKI GUSE  
ADMINISTRATOR

AMANDA ZEPEDA  
MH CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:  
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  
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](http://WWW.QBHS.ORG)

**MAILING ADDRESS**  
900 7TH ST  
CLARKSTON, WA 99403

CICILY ZORNES  
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY  
SUD CLINICAL SUPERVISOR

---

## ASOTIN

---

### **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:

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 PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

## BENTON

---

060500

### **ACTION COUNSELING - KENNEWICK**

4911 WEST CANAL DRIVE  
KENNEWICK, WA 99336  
(509) 735-7410

ROBERT LACK  
ADMINISTRATOR

### **MAILING ADDRESS**

PO BOX 5697  
KENNEWICK, WA 99336

### **CERTIFIED SERVICES**

#### SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

044400

### **ADVOCATES FOR WELLNESS, LLC**

120 VISTA WAY  
KENNEWICK, WA 99336  
(509) 783-8833

ROBERT L. WILKINSON  
ADMINISTRATIVE DIRECTOR

### **MAILING ADDRESS**

120 VISTA WAY  
KENNEWICK, WA 99336

### **CERTIFIED SERVICES**

#### SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

200147

### **CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - RICHLAND**

2139 VAN GIESEN STREET  
RICHLAND, WA 99354  
(509) 965-7100  
[WWW.CFCSYAKIMA.ORG](http://WWW.CFCSYAKIMA.ORG)

DARLENE DARNELL  
INTERIM PRESIDENT & CEO

### **MAILING ADDRESS**

5301 TIETON DR STE C  
YAKIMA, WA 98908

---

# BENTON

---

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

200155

### **CHILD ENRICHMENT CENTER - MAIN**

1950 KEENE ROAD, BUILDING L  
RICHLAND, WA 99352  
(509) 420-3442  
CHILDENRICHMENTCENTER@GMAIL.COM  
[WWW.CHILDENRICHMENTCENTER.ORG](http://WWW.CHILDENRICHMENTCENTER.ORG)

SARAH HAWS-TAYLOR  
ADMINISTRATOR

### **MAILING ADDRESS**

1950 KEENE ROAD, BUILDING L  
RICHLAND, WA 99352-7752

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

042800

### **CHOICES AND CHANGES, INC.**

1236 COLUMBIA PARK TRAIL  
RICHLAND, WA 99352  
(509) 735-7899

WILLIAM DENNETT  
ADMINISTRATOR

### **MAILING ADDRESS**

1236 COLUMBIA PARK TRAIL  
RICHLAND, WA 99352

## CERTIFIED SERVICES

### SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

131700

### **FIRST STEP COMMUNITY COUNSELING SERVICES, LLC**

415 NORTH MORAIN STREET, SUITES A, B, C, & D  
KENNEWICK, WA 99336  
(509) 735-6900

SARA CLARK  
DIRECTOR

CLIFTON WATSON JR.  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

415 N MORAIN ST STE A-D  
KENNEWICK, WA 99336

## CERTIFIED SERVICES

### SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

161300

### **IDEAL BALANCE - KENNEWICK**

8514 WEST GAGE BOULEVARD, SUITES G AND C  
KENNEWICK, WA 99336  
(509) 440-3387

PENNY S. BELL  
ADMINISTRATOR

NAKIA BECERA  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

8514 W GAGE BLVD, STE G  
KENNEWICK, WA 99336

---

# BENTON

---

**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](http://WWW.YOURLOURDES.COM)

JOHN SERLE  
CEO

DANA OTIS  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DR  
RICHLAND, WA 99354

**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

JOHN SERLE  
CEO

DANA OATIS  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DRIVE  
RICHLAND, 99354

**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

JOHN SERLE  
CEO

TONY LARSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DR  
RICHLAND, WA 99354

**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](http://LOURDESHEALTH.NET)

JOHN SERLE  
CEO

DAVID LOWE  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DR  
RICHLAND, WA 99354

---

## BENTON

---

**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

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

TRIAGE - INVOLUNTARY

---

**200088****LUTHERAN COMMUNITY SERVICES NORTHWEST -  
KENNEWICK AVENUE**

3321 WEST KENNEWICK AVENUE, SUITE 150  
KENNEWICK, WA 99336  
(509) 735-6446  
LCSNW@LCSNW.ORG  
[WWW.LCSNW.ORG](http://WWW.LCSNW.ORG)

SHARON GENTRY  
DISTRICT DIRECTOR

ROCHELLE BRUNSDON  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

3321 WEST KENNEWICK AVENUE, SUITE 150  
KENNEWICK, WA 99336

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

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

---

**200501****LUTHERAN COMMUNITY SERVICES NORTHWEST -  
KENNEWICK MORAIN**

500 NORTH MORAIN STREET, SUITE 1200  
KENNEWICK, WA 99336  
(509) 735-6446  
(800) 678-4876  
LCSNW@LCSNW.ORG  
[WWW.LCSNW.ORG](http://WWW.LCSNW.ORG)

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  
CRISIS PEER SUPPORT  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
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](http://WWW.MERITRESOURCES.ORG)

DAVID L. WILSON  
EXECUTIVE DIRECTOR

ANTHONY ESPARZA, SR.  
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

---

200321

### **RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON**

1950 KEENE ROAD, BUILDING G  
RICHLAND, WA 99352  
(509) 619-0519  
INFO@RECOVERYANDWELLNESS.ORG  
[WWW.RECOVERYANDWELLNESS.ORG](http://WWW.RECOVERYANDWELLNESS.ORG)

KATIE KLUTE  
DIRECTOR

MARY CORLEY  
CLINICAL SUPERVISOR

### **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](http://WWW.RELIANCEHEALTHSYSTEMS.COM)

KISHORE SHM VARADA  
CHAIRMAN/CEO

LINDA ROBB  
MH CLINICAL SUPERVISOR

### **MAILING ADDRESS**

1446 SPAULDING PARK, SUITE 303  
RICHLAND, WA 99352

---

# BENTON

---

## CERTIFIED SERVICES

## MENTAL HEALTH SERVICES:

FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

168900

### RELiance HEALTH SYSTEMS - SALUS HEALTH

1445 SPAULDING PARK  
RICHLAND, WA 99352  
(509) 420-0423

KISHORE SHM VARADA  
CHAIRMAN/CEO

MINGHUA ZHU  
SUD CLINICAL SUPERVISOR

### MAILING ADDRESS

1445 SPAULDING PARK  
RICHLAND, WA 99352

## 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  
PSYCHIATRIC MEDICATION

---

105200

### SOMERSET COUNSELING CENTER, LLC

1305 MANSFIELD STREET, SUITE 6  
RICHLAND, WA 99352  
(509) 942-1624

JAIME CARSON  
EXECUTIVE DIRECTOR

GARY L. SOMDAHL  
CLINICAL SUPERVISOR

### MAILING ADDRESS

1305 MANSFIELD ST STE 6  
RICHLAND, WA 99352

## CERTIFIED SERVICES

### SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

155200

### TRI-CITIES COMMUNITY HEALTH - KENNEWICK

3180 WEST CLEARWATER AVENUE, SUITE E  
KENNEWICK, WA 99336  
(509) 543-8500

DELL ANDERSON  
DIRECTOR

HECTOR BOBBY GUZMAN  
CLINICAL SUPERVISOR

### MAILING ADDRESS

PO BOX 1452  
PASCO, WA 99301

## 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

---

200253

### TRI-CITIES COMMUNITY HEALTH - RICHLAND

829 GOETHALS DRIVE  
RICHLAND, WA 99352

DELL ANDERSON  
DIRECTOR

### MAILING ADDRESS

829 GOETHALS DRIVE  
RICHLAND, WA 99352

---

## BENTON

---

### CERTIFIED SERVICES

MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
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](http://WWW.CCYAKIMA.ORG)

DARLENE DARNELL  
PRESIDENT & CEO

SHAWN DE LANCY  
PROGRAM MANAGER

### 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

---

200342

**CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -  
WENATCHEE MOBILE OFFICE**  
504 SOUTH CHELAN AVENUE  
WENATCHEE, WA 98801  
(509) 662-6761  
[WWW.CCYAKIMA.ORG](http://WWW.CCYAKIMA.ORG)

DARLENE DARNELL  
PRESIDENT & CEO

ERIC SKANSGAARD  
DIRECTOR OF COMMUNITY INTEGRATION

### 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

---

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](http://WWW.CCYAKIMA.ORG)

DARLENE DARNELL  
PRESIDENT & CEO

LOUANN PIERCE  
SUD CLINICAL SUPERVISOR

### MAILING ADDRESS

5301 TIETON DR  
YAKIMA, WA 98908

---

# CHELAN

---

**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 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 APPLIED BEHAVIOR ANALYSIS (ABA)

---

**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](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

KARIN POTTER  
CLINICAL MANAGER

**MAILING ADDRESS**

1014 WALLA WALLA AVENUE  
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

---

**151900****COLUMBIA COUNSELING 607, LLC**

610 NORTH MISSION STREET # 106  
WENATCHEE, WA 98801  
(509) 888-4404

CHRISTINE BELLAMY  
OWNER/ADMINISTRATOR

ANDRA DARLINGTON  
CLINICAL SUPERVISOR

**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](http://WWW.CVCH.ORG)

CAROL DIEDE  
COO

MARY MEGAN KAPPLER  
THERAPIST II

**MAILING ADDRESS**

600 ORONDO AVE STE 1  
WENATCHEE, WA 98801

---

# CHELAN

---

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

200159

### **COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE EASY WAY**

140 EASY WAY  
WENATCHEE, WA 98801  
(509) 662-6000  
[WWW.CVCH.ORG](http://WWW.CVCH.ORG)

CAROL DIEDE  
COO

MARY MEGAN KAPPLER  
THERAPIST II

### **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

---

200158

### **COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE MAIN**

600 ORONDO AVENUE, SUITE 1  
WENATCHEE, WA 98801  
(509) 662-4296  
BHEALTHASSISTANTS@CVCH.ORG  
[WWW.CVCH.ORG](http://WWW.CVCH.ORG)

CAROL DIEDE  
COO

MARY MEGAN KAPPLER  
MH CLINICAL SUPERVISOR

### **MAILING ADDRESS**

600 ORONDO AVENUE, SUITE 1  
WENATCHEE, WA 98801

## 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  
PSYCHIATRIC MEDICATION

---

200020

### **CRH CHRISTOPHER HOUSE, LLC**

100 & 101 SOUTH CLEVELAND AVENUE  
WENATCHEE, WA 98801  
(509) 888-0773  
KARINA@CRHCHRISTOPHERHOUSE.COM  
[WWW.CRHCHRISTOPHERHOUSE.COM](http://WWW.CRHCHRISTOPHERHOUSE.COM)

KEVIN COLWELL  
ADMINISTRATOR

ALLISON NYSTROM  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

100 S CLEVELAND AVE  
WENATCHEE, WA 98801

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

157200

### **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****SHIPOWICK-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

---

**000600****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

---

**004800****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

BETTY POFFENBARGER  
BEHAVIORAL HEALTH MANAGER

JESSIE PAQUE  
CLINICAL SUPERVISOR

**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

---

**086000****OLYMPIC PERSONAL GROWTH CENTER**

390 EAST CEDAR STREET  
SEQUIM, WA 98382  
(360) 681-8463

KRISTINA BULLINGTON  
ADMINISTRATOR

ANDREW DALY  
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

**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:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**200258****PENINSULA BEHAVIORAL HEALTH - ARLENE ENGEL**

**HOME**  
138 WEST 2ND 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

---

**200261****PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY**

**RESPIRE 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

SHELLEY A. HUNTINGTON  
ADMINISTRATOR

DALIS L. LAGROTTA  
CLINICAL DIRECTOR

**MAILING ADDRESS**

435 WEST BELL STREET, SUITE D  
SEQUIM, WA 98382

**CERTIFIED SERVICES**

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:  
PROBLEM & PATHOLOGICAL GAMBLING

**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**043600****QUILEUTE COUNSELING AND RECOVERY SERVICES**

560 QUILEUTE HEIGHTS  
LA PUSH, WA 98350  
(360) 374-4317

ANDREW SHOGREN  
HEALTH DIRECTOR

JANICE BARRERA  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 189  
LA PUSH, WA 98350

**CERTIFIED SERVICES**

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

---

**155000****REFLECTIONS COUNSELING SERVICES GROUP**

3430 EAST HIGHWAY 101  
PORT ANGELES, WA 98362  
(360) 452-4062

G'NELL ASHLEY  
ADMINISTRATOR

GLENDIA COLEMAN  
PROGRAM DIRECTOR

**MAILING ADDRESS**

PO BOX 478  
PORT ANGELES, WA 98362

**CERTIFIED SERVICES**

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

---

# CLALLAM

---

158400

**SPECIALTY SERVICES II, LLC**

825 EAST 5TH STREET  
PORT ANGELES, WA 98362  
(360) 477-4790

LEAH SILVAS  
ADMINISTRATOR

**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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
RESIDENTIAL TREATMENT FACILITY

---

177400

**SPECIALTY SERVICES III, LLC**

825 EAST 5TH STREET  
PORT ANGELES, WA 98362  
(509) 232-5766  
(360) 740-4790

JOHN TAYLOR  
ADMINISTRATOR

ANGELA MELLO  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 141106  
SPOKANE VALLEY, WA 99214

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

---

109800

**TRILLIUM TREATMENT CENTER**

528 WEST 8TH STREET  
PORT ANGELES, WA 98362  
(360) 457-9200

LARRY SUTTON  
ADMINISTRATOR

VICKIE SUTTON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

528 W 8TH 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

---

095600

**TRUE STAR BEHAVIORAL HEALTH SERVICES**

1912 WEST 18TH STREET  
PORT ANGELES, WA 98363  
(360) 417-2282

JODY JACOBSEN  
ADMINISTRATOR

JULI LEONARD BUCHMANN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1912 W 18TH ST.  
PORT ANGELES, WA 98363

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

000800

**WEST END OUTREACH SERVICES**

530 BOGACHIEL WAY  
FORKS, WA 98331  
(360) 374-6177

TANYA MACNEIL  
DIRECTOR

GARY WEBB  
PROGRAM COORDINATOR

---

## 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 INVOLUNTARY 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

---

**158100****AFFINITY COUNSELING AND TREATMENT**

12503 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 119A LAURA M. LEWIS  
ADMINISTRATOR

VANCOUVER, WA 98684  
(360) 314-6507

[WWW.AFFINITYCOUNSELING.NET](http://WWW.AFFINITYCOUNSELING.NET)

SHAHNA CREAGAN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

12503 SE MILL PLAIN BLVD, STE 119A  
VANCOUVER, WA 98684

**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

**200344****ASSOCIATES FOR PSYCHIATRIC & MENTAL HEALTH,  
LLC**

2600 F STREET  
VANCOUVER, WA 98663  
(360) 448-7827  
(888) 571-5088  
APPOINTMENTS@APMENTALHEALTH.NET  
[WWW.APMENTALHEALTH.NET](http://WWW.APMENTALHEALTH.NET)

SHEELA CHOPPALA-NESTOR  
OWNER/ADMINISTRATOR

AMANDA RAGONESI, PH.D  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

2600 F STREET  
VANCOUVER, WA 98663

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

**200146****CATHOLIC COMMUNITY SERVICES - VANCOUVER**

9300 NORTHEAST OAK VIEW DRIVE, SUITE B  
VANCOUVER, WA 98662  
(360) 567-2211  
INFO@CCSWW.ORG  
[WWW.CCSWW.ORG](http://WWW.CCSWW.ORG)

MARY STONE SMITH  
VICE PRESIDENT

DON KOENIG  
SITE DIRECTOR

---

# 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](http://WWW.CENTERFORAUTISM.COM)

CANDICE POGGE  
REGIONAL MANAGER

LAUREN MIZRAHI  
CLINICAL MANAGER

**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](http://WWW.THECHILDRENSCENTER.ORG)

PAT BECKETT  
EXECUTIVE DIRECTOR

PAULA DUNHAM  
CLINICAL DIRECTOR

**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](http://WWW.THECHILDRENSCENTER.ORG)

PAT BECKETT  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

13500 SE 7TH STREET  
VANCOUVER, WA 98686

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

# CLARK

---

200071

**CHILDREN'S HOME SOCIETY OF WASHINGTON -  
BATTLE GROUND**  
701 EAST MAIN STREET  
BATTLE GROUND, WA 98604  
(360) 695-1325  
[WWW.CHILDRENSHOMESOCIETY.ORG](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

**MAILING ADDRESS**

PO BOX 605  
VANCOUVER, WA 98666

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT

---

200068

**CHILDREN'S HOME SOCIETY OF WASHINGTON -  
VANCOUVER COLUMBIA STREET**  
1112 COLUMBIA STREET  
VANCOUVER, WA 98660  
(360) 695-1325  
[WWW.CHILDRENSHOMESOCIETY.ORG](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

**MAILING ADDRESS**

PO BOX 605  
VANCOUVER, WA 98666

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

200069

**CHILDREN'S HOME SOCIETY OF WASHINGTON -  
VANCOUVER MAIN**  
309 WEST 12TH STREET  
VANCOUVER, WA 98660  
(360) 695-1325  
[WWW.CHILDRENSHOMESOCIETY.ORG](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

**MAILING ADDRESS**

PO BOX 605  
VANCOUVER, WA 98666

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

200066

**CHILDREN'S HOME SOCIETY OF WASHINGTON -  
WASHOUGAL**  
1702 C STREET  
WASHOUGAL, WA 98671  
(360) 695-1325  
[WWW.CHILDRENSHOMESOCIETY.ORG](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

**MAILING ADDRESS**

PO BOX 605  
VANCOUVER, WA 98666

---

# 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) 787-2125  
(866) 341-2041  
ESTELA.CLEMENTE@CHOICEWELLNESSLLC.COM  
[WWW.CHOICEWELLNESSLLC.COM](http://WWW.CHOICEWELLNESSLLC.COM)

DOUGLAS UY  
ADMINISTRATOR

### 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

VANESSA GASTON  
DEPARTMENT DIRECTOR

### 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

CRAIG PRIDEMORE  
CHIEF EXECUTIVE OFFICER

KIM NUESSE  
CLINICAL SUPERVISOR

### 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

---

# CLARK

---

**200156**      **COLUMBIA RIVER MENTAL HEALTH SERVICES - ELAHAN PLACE**  
7415 NORTHEAST 94TH AVENUE  
VANCOUVER, WA 98662  
(360) 253-6019  
[WWW.CRMHS.ORG](http://WWW.CRMHS.ORG)

**MAILING ADDRESS**  
PO BOX 1337  
VANCOUVER, WA 98666-1337

**CERTIFIED SERVICES**

CRAIG PRIDEMORE  
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN  
CLINICAL SUPERVISOR

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

---

**200157**      **COLUMBIA RIVER MENTAL HEALTH SERVICES - ESTHER STREET**  
1012 ESTHER STREET  
VANCOUVER, WA 98660  
(360) 993-3000  
[WWW.CRMHS.ORG](http://WWW.CRMHS.ORG)

**MAILING ADDRESS**  
PO BOX 1337  
VANCOUVER, WA 98666-1337

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

CRAIG PRIDEMORE  
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN  
CLINICAL SUPERVISOR

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

---

**200453**      **COLUMBIA RIVER MENTAL HEALTH SERVICES - HAZEL DELL**  
9105 NORTHEAST HIGHWAY 99, SUITE 201A  
VANCOUVER, WA 98665  
(360) 579-9721  
[WWW.CRMHS.ORG](http://WWW.CRMHS.ORG)

**MAILING ADDRESS**  
PO BOX 1337  
VANCOUVER, WA 98666-1337

**CERTIFIED SERVICES**

CRAIG PRIDEMORE  
CEO

JEANNE HEHLEN  
THERAPIST III - LEAD

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

---

**089400**      **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

CRAIG PRIDEMORE  
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN  
CLINICAL SUPERVISOR

---

# CLARK

---

**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

PAMELA PAPROCKI-SIMS  
ADMINISTRATOR

TABITHA ZDUNICH  
CDP

**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](http://WWW.COMMUNITYSERVICESNW.ORG)

JOHN "BUNK" MOREN  
ADMINISTRATOR

**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 98668  
(360) 397-8484  
(360) 397-8004

[WWW.COMMUNITYSERVICESNW.ORG](http://WWW.COMMUNITYSERVICESNW.ORG)

JOHN "BUNK" MOREN  
EXECUTIVE DIRECTOR

MIKE MILLER  
MH PROGRAM MANAGER

**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

---

# CLARK

---

056001

**COMMUNITY SERVICES NORTHWEST - MAIN**

1601 EAST FOURTH PLAIN BLVD., BLDG. 17, STE. B222  
VANCOUVER, WA 98661  
(360) 397-8484

JOHN "BUNK" MOREN  
EXECUTIVE DIRECTOR

JENNIFER HARDER  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1845  
VANCOUVER, WA 98668-1845

**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 EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

200368

**COMMUNITY SERVICES NORTHWEST - TOWN PLAZA**

5411 EAST MILL PLAIN BOULEVARD, SUITE 16  
VANCOUVER, WA 98661  
(360) 397-8484  
[WWW.COMMUNITYSERVICESNW.ORG](http://WWW.COMMUNITYSERVICESNW.ORG)

JOHN "BUNK" MOREN  
EXECUTIVE DIRECTOR

MIKE MILLER  
MH PROGRAM MANAGER

**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

---

200525

**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](http://WWW.CVABONLINE.COM)

BRAD BERRY  
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM  
CLINICAL DIRECTOR

**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

---

# CLARK

---

200133

**CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER**

10201 NORTHEAST FOURTH PLAIN BOULEVARD  
VANCOUVER, WA 98662  
(360) 397-8050  
[WWW.CVABONLINE.COM](http://WWW.CVABONLINE.COM)

BRAD BERRY  
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM  
CLINICAL DIRECTOR

**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

CHELICIE 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](http://WWW.DAYBREAKYOUTHSERVICES.ORG)

ANNETTE KLINEFELTER  
EXECUTIVE DIRECTOR

CHRISTINE GJESVOLD  
MH CLINICAL SUPERVISOR

**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](http://WWW.DAYBREAKYOUTHSERVICES.ORG)

ANNETTE KLINEFELTER  
EXECUTIVE DIRECTOR

CHRISTINA GJESVOLD  
SUD CLINICAL SUPERVISOR

---

# 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 NORTHEAST 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](http://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](http://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

---

# CLARK

---

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](http://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

---

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

**MAILING ADDRESS**

1710 W MAIN ST STE 110  
BATTLE GROUND, WA 98604

**CERTIFIED SERVICES**

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

**MAILING ADDRESS**

1710 W MAIN ST STE 110  
BATTLE GROUND, WA 98604

**CERTIFIED SERVICES**

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

**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

---

# CLARK

---

085000

**KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE  
- VANCOUVER**

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

---

200306

**LIFELINE CONNECTIONS - CAMAS**

329 NORTHEAST LECHNER STREET  
CAMAS, WA 98607  
(360) 397-8246

[WWW.LIFELINECONNECTIONS.ORG](http://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

---

000900

**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](http://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

---

172100

**LIFELINE CONNECTIONS - VANCOUVER BRANCH**

11719 NORTHEAST 95TH STREET, SUITE A  
VANCOUVER, WA 98682  
(360) 397-8246

INFO@LIFELINECONNECTIONS.ORG

[WWW.LIFELINECONNECTIONS.ORG](http://WWW.LIFELINECONNECTIONS.ORG)

JARED SANFORD  
CEO

BRANDY BRANCH  
CCO/MH & SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1678  
VANCOUVER, WA 98668

---

# CLARK

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

**200086****LUTHERAN COMMUNITY SERVICES NORTHWEST - VANCOUVER**

3600 MAIN STREET  
VANCOUVER, WA 98663

LCSNW@LCSNW.ORG  
[WWW.LCSNW.ORG/](http://WWW.LCSNW.ORG/)

**MAILING ADDRESS**

3600 MAIN STREET  
VANCOUVER, WA 98663

**CERTIFIED SERVICES**

JOE ASBRIDGE  
OPERATIONS MANAGER

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS TELEPHONE SUPPORT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**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](http://WWW.NAMISWWA.ORG)

**MAILING ADDRESS**

5411 EAST MILL PLAIN BOULEVARD, SUITE 4  
VANCOUVER, WA 98661

**CERTIFIED SERVICES**

PEGGY MCCARTHY  
EXECUTIVE DIRECTOR

JANET RAGAN, MA, LMHC  
DIRECTOR OF BEHAVIORAL HEALTH SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**200094****PEACEHEALTH SOUTHWEST MEDICAL CENTER**

3400 MAIN STREET  
VANCOUVER, WA 98663

**MAILING ADDRESS**

3400 MAIN STREET  
VANCOUVER, WA 98663

**CERTIFIED SERVICES**

KYLE RAHN  
DIRECTOR SERVICE LINES

MENTAL HEALTH SERVICES:

DAY SUPPORT  
PSYCHIATRIC MEDICATION

---

**200568****REDWOOD RECOVERY CENTER, LLC**

717 NORTHEAST 61ST STREET, SUITE 102  
VANCOUVER, WA 98665  
(360) 523-2997  
HELLO@REDWOODRECOVERYCENTER.COM  
[WWW.REDWOODRECOVERYCENTER.COM](http://WWW.REDWOODRECOVERYCENTER.COM)

CRYSTAL KOSTRIVAS  
ADMINISTRATOR

JESSE JAMES  
CLINICAL DIRECTOR

---

# CLARK

---

**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

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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**200269****SEA MAR BEHAVIORAL HEALTH - VANCOUVER FOURTH PLAIN**

7803 NORTHEAST FOURTH PLAIN BOULEVARD  
VANCOUVER, WA 98662

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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**200339****SEA MAR BEHAVIORAL HEALTH - VANCOUVER MEDICAL**

7410 DELAWARE LANE  
VANCOUVER, WA 98664  
(360) 566-4402  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

JENNIFER NAVARRO  
CLINICAL SUPERVISOR

**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

---

# CLARK

---

200337

**SEA MAR BEHAVIORAL HEALTH - VANCOUVER ORCHARDS**  
11801 NORTHEAST 65TH STREET  
VANCOUVER, WA 98662  
(360) 566-4432  
INFO@SEAMARCHC.ORG  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

JENNIFER NAVARRO  
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

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

---

200309

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

CLAUDIA D'ALLEGRI  
VP OF BEHAVIORAL HEALTH

BREANNA MOSKOVITZ  
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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

148800

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

CINDY NORDBERG  
OUTPATIENT PROGRAM MANAGER

LARRY LOMBARD  
CLINICAL SUPERVISOR

**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

---

002800

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

DAVID WAYNE COLBY  
CLINICAL DIRECTOR

DAVE COLBY  
CLINICAL SUPERVISOR

**MAILING ADDRESS**  
801 GRAND BLVD  
VANCOUVER, WA 98661

---

# CLARK

---

**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.TELCARECORP.COM](http://WWW.TELCARECORP.COM)

LISA CLAYTON  
ADMINISTRATOR

CANDICE WEBB  
TEAM LEAD

**MAILING ADDRESS**

PO BOX 2489  
VANCOUVER, WA 98661

**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

LISA CLAYTON  
ADMINISTRATOR

**MAILING ADDRESS**

PO BOX 2489  
VANCOUVER, WA 98668

**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](http://WWW.RIDGEFIELDRECOVERY.COM)

STEVEN HART  
DIRECTOR OF OPERATIONS AND ADMIN

DR. RAGHURAM BHAT  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

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

**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  
BSURUJON@ADVANCEDRECOVERYSYSTEMS.COM  
[WWW.ADVANCEDRECOVERYSYSTEMS.COM](http://WWW.ADVANCEDRECOVERYSYSTEMS.COM)

STEVEN HART  
DIRECTOR OF OPERATIONS AND ADMIN

DALLAS CARROLL  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

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

---

## 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

TAMRA KAWAMOTO  
CLINIC DIRECTOR

SHELLY MORGAN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

2009 NE 117TH ST STE 101  
VANCOUVER, WA 98686

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
OPIATE SUBSTITUTION TREATMENT

---

**001300****VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)**

ST. JOHNS BOULEVARD & 4TH PLAIN BOULEVARD  
VANCOUVER, WA 98661  
(360) 690-1841

CHRIS ANDERSON  
CO-ADMINISTRATOR/CLIN SUP

JAMES M. SARDO, PH.D.  
CO-ADMIN/PT CARE LINE MGR

**MAILING ADDRESS**

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

**CERTIFIED SERVICES**

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

---

**054100****WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.**

7507 NORTHEAST 51ST STREET  
VANCOUVER, WA 98662  
(360) 906-1190  
(503) 939-0350

DARYL E. QUICK  
OWNER/ADMINISTRATOR

ROBERTA MORGAN  
CD PROGRAM DIRECTOR

**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

DIMITA WARREN  
CEO

PATRICK FLORES  
SUD CLINICAL SUPERVISOR (INTERIM)

**MAILING ADDRESS**

221 E WASHINGTON ST  
DAYTON, WA 99328

---

## 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  
LAURIR124@YAHOO.COM

LAURI ROWLAND  
OWNER/ADMINISTRATOR

**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](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO  
CHIEF CLINICAL OFFICER

---

# COWLITZ

---

**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

---

**200555****COLUMBIA WELLNESS - KELSO 210 ACADEMY**

210 ACADEMY  
KELSO, WA 98626  
(360) 577-7442  
[WWW.COLUMBIAWELL.ORG](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO-KORNBERG  
CHIEF CLINICAL OFFICER (MH CS)

**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

---

**200553****COLUMBIA WELLNESS - KELSO OAK**

309 OAK STREET  
KELSO, WA 98626  
(360) 577-7442  
[WWW.COLUMBIAWELL.ORG](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO-KORNBERG  
CHIEF CLINICAL OFFICER (MH CS)

**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

---

**200504****COLUMBIA WELLNESS - KELSO PACIFIC**

214 NORTH PACIFIC AVENUE  
KELSO, WA 98626  
(360) 423-0203  
[WWW.COLUMBIAWELL.ORG](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO  
MH CLINICAL SUPERVISOR

**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

---

# COWLITZ

---

200042

**COLUMBIA WELLNESS - LONGVIEW BRANCH**

720 14TH AVENUE, SUITE 200  
LONGVIEW, WA 98632  
(360) 423-0203  
[WWW.COLUMBIAWELL.ORG](http://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

---

200043

**COLUMBIA WELLNESS - LONGVIEW MAIN**

921 14TH AVENUE  
LONGVIEW, WA 98632  
(360) 423-0203  
[WWW.COLUMBIAWELL.ORG](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

921 14TH AVENUE  
LONGVIEW, WA 98632

**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  
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

---

200046

**COLUMBIA WELLNESS - WOODLAND**

1251 LEWIS RIVER ROAD, SUITE A  
WOODLAND, WA 98674  
(360) 423-0203  
[WWW.COLUMBIAWELL.ORG](http://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](http://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

#### MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

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

---

# COWLITZ

---

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](http://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](http://WWW.CIHEALTHSERVICES.COM)

MARC BOLLINGER  
CEO/ADMINISTRATOR

RON LEHTO  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1447  
CHEHALIS, WA 98532

---

# COWLITZ

---

## 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

---

084900

### **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

---

200537

### **KELSO TREATMENT SOLUTIONS**

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

---

200371

### **LOVE OVERWHELMING**

618 14TH AVENUE  
LONGVIEW, WA 98632  
(360) 749-8056  
ADMIN@LOVEOVERWHELMING.ORG  
[WWW.LOVEOVERWHELMING.NET](http://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

---

200095

### **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

---

**200374****SEA MAR BEHAVIORAL HEALTH - KELSO**

17010 ALLEN STREET  
KELSO, WA 98626  
(360) 261-7020  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

STEPHEN MAYNARD  
PROGRAM MANAGER/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

---

**200277****STRENGTHENING FOUNDATIONS LLC**

1338 COMMERCE AVENUE #208  
LONGVIEW, WA 98632

**MAILING ADDRESS**

1104 D 15TH AVENUE #186  
LONGVIEW, WA 98632

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT

---

## DOUGLAS

---

**200314****CHILDREN'S HOME SOCIETY OF WASHINGTON - EAST  
WENATCHEE**

220 EASTMONT AVENUE, SUITE B  
EAST WENATCHEE, WA 98802  
(509) 663-0034  
JANICA.LOCKHART@CHS-WA.ORG  
[WWW.CHS-WA.ORG](http://WWW.CHS-WA.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

KARIN POTTER  
CHILD & FAMILY COUNSELING PROGRAM MANAGER

**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](http://WWW.CVCH.ORG)

CAROL DIEDE  
COO

MARY MEGAN KAPPLER  
THERAPIST II

**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 -  
INCHELIUM**  
320 SHORT-CUT ROAD  
INCHELIUM, WA 99138  
(509) 722-7067  
(800) 573-9343

ALISON BALL  
ADMINISTRATOR

CHARLENE SAM  
CLINICAL SUPERVISOR

**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

ALISON BALL  
ADMINISTRATOR

CHARLENE SAM  
CLINICAL SUPERVISOR

**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](http://WWW.CO.STEVENS.WA.US/COUNSELING)

DAVID NIELSEN  
EXECUTIVE DIRECTOR

DAN PITMAN  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1120  
REPUBLIC, WA 99166

---

## 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 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

---

## FRANKLIN

---

149300

### **ASSESSMENT AND TREATMENT ASSOCIATES -**

#### **FRANKLIN COUNTY**

9221 SANDIFUR PARKWAY, SUITE D  
PASCO, WA 99301  
(877) 479-5993

STEVE UHRICH  
EXECUTIVE DIRECTOR

### **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](http://WWW.COMPHC.ORG)

RON GENGLER  
ADMINISTRATOR

ANDREA RAY  
SUD CLINICAL SUPERVISOR

### **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

DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

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

---

## 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](http://LOURDESHEALTH.NET)

JOHN SERLE  
CEO

DAVID LOWE  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DR  
RICHLAND, WA 99354

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

---

**110300****TRI-CITIES COMMUNITY HEALTH - PASCO**

715 WEST COURT STREET  
PASCO, WA 99301  
(509) 545-6506  
(509) 547-2204

DELL ANDERSON  
DIRECTOR

HECTOR BOBBY GUZMAN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1452  
PASCO, WA 99301

**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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

## GARFIELD

---

**014601****QUALITY BEHAVIORAL HEALTH - POMEROY**

856 WEST MAIN STREET  
POMEROY, WA 99347  
(509) 843-3791  
[WWW.QBHS.ORG](http://WWW.QBHS.ORG)

CICILY ZORNES  
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

900 7TH ST  
CLARKSTON, WA 99403

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I 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

---

# GRANT

---

200455

**AUTISM THERAPY SERVICES OF MOSES LAKE, LLC**

618 SOUTH ALDER STREET  
MOSES LAKE, WA 98837  
(509) 764-6644  
ATS.MBROSS@GMAIL.COM

YVONNE REIGSTAD  
EXECUTIVE DIRECTOR/ADMINISTRATOR

JESSIE HORWATH  
DIRECTOR OF CLINICAL SERVICES

**MAILING ADDRESS**

PO BOX 1775  
MOSES LAKE, WA 98831-0214

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

200212

**GRANT INTEGRATED SERVICES - GRAND COULEE**

322 FORTUYN ROAD  
GRAND COULEE, WA 99133  
(509) 765-9239  
[WWW.GRANTCOUNTYWA.GOV](http://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

---

200213

**GRANT INTEGRATED SERVICES - MATTAWA**

210 GOVERNMENT ROAD  
MATTAWA, WA 99349  
(509) 765-9239  
[WWW.GRANTCOUNTYWA.GOV](http://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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

002200

**GRANT INTEGRATED SERVICES - MOSES LAKE MAIN**

840 EAST PLUM STREET  
MOSES LAKE, WA 98837  
(509) 765-9239  
(509) 765-5402  
[WWW.GRANTCOUNTYWA.GOV](http://WWW.GRANTCOUNTYWA.GOV)

GAIL GOODWIN  
DIRECTOR OF MANAGEMENT SERVICES

NOEMI GARCIA  
SUD MANAGER

---

# 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  
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  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200214****GRANT INTEGRATED SERVICES - QUINCY**

203 CENTRAL AVENUE SOUTH  
QUINCY, WA 98848  
(509) 765-9239  
[WWW.GRANTCOUNTYWA.GOV](http://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](http://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

---

155300

**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.**

**- MOSES LAKE**  
104 WEST BROADWAY  
MOSES LAKE, WA 98837  
(509) 855-9494  
JOEB.JOHNSON@STOPWA.COM  
[WWW.STOPWA.COM](http://WWW.STOPWA.COM)

ANDREW TATUM  
ADMINISTRATOR

ROBERT "JIM" LAGERQUIST  
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

---

## GRAYS HARBOR

---

200496

**ACTION COUNSELING - ABERDEEN**

914 EAST WISHKAH STREET #B  
ABERDEEN, WA 98520  
(360) 532-0205  
(360) 532-0316  
ACTION914@GMAIL.COM  
[WWW.ALTERNATIVECOUNSELING.ORG](http://WWW.ALTERNATIVECOUNSELING.ORG)

BETTY KASSUHN  
ADMINISTRATOR

**MAILING ADDRESS**

914 EAST WISHKAH STREET #B  
ABERDEEN, WA 98520

**CERTIFIED SERVICES**

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

200033

**BEHAVIORAL HEALTH RESOURCES - ELMA**

573 EAST MAIN STREET  
ELMA, WA 98541  
(360) 704-7170  
[WWW.BHR.ORG](http://WWW.BHR.ORG)

LAURIE TEBO  
CEO

**MAILING ADDRESS**

3857 MARTIN WAY E  
OLYMPIA, WA 98506

**CERTIFIED SERVICES**

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

200032

**BEHAVIORAL HEALTH RESOURCES - HOQUIAM**

205 8TH STREET  
HOQUIAM, 98550  
(360) 704-7170  
[WWW.BHR.ORG](http://WWW.BHR.ORG)

LAURIE TEBO  
CEO

**MAILING ADDRESS**

3857 MARTIN WAY E  
OLYMPIA, 98506

---

# GRAYS HARBOR

---

## 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

---

200396

### **CATHOLIC COMMUNITY SERVICES - ABERDEEN STATE STREET**

403 WEST STATE STREET, SUITE 201 &AMP; 206  
ABERDEEN, WA 98520  
(360) 612-3839  
NIKKIH@CCSWW.ORG  
[WWW.CCSWW.ORG](http://WWW.CCSWW.ORG)

MARY STONE SMITH  
VICE PRESIDENT

GARY SANDWICK  
CLINICAL SUPERVISOR

### **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 TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

200350

### **CATHOLIC COMMUNITY SERVICES - ABERDEEN WISHKAH STREET**

224 EAST WISHKAH STREET  
ABERDEEN, WA 98520  
(888) 322-7156  
HEIDIW@CCSWW.ORG  
[WWW.CCSWW.ORG/FAMILYPRESERVATION](http://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  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

200554

### **COLUMBIA WELLNESS - ABERDEEN**

2700 SIMPSON AVENUE, SUITE 101  
ABERDEEN, WA 98520  
(360) 612-0012  
[WWW.COLUMBIAWELL.ORG](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO-KORNBERG  
CHIEF CLINICAL OFFICER (MH CS)

### **MAILING ADDRESS**

921 14TH AVE  
LONGVIEW, WA 98632

---

# GRAYS HARBOR

---

**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](http://WWW.COLUMBIAWELL.ORG)

DAVID MCCLAY  
CEO

DEBRA PERKO  
MH CLINICAL SUPERVISOR

**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

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 II INTENSIVE OUTPATIENT

---

**163700****EVERGREEN TREATMENT SERVICES - GRAYS HARBOR CLINIC**

804 LEVEE STREET  
HOQUIAM, WA 98550  
(360) 209-6339

MOLLY CARNEY  
EXECUTIVE DIRECTOR

SHANNON LINHOFF  
CLINICAL SUPERVISOR

**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](http://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

---

002500

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

MELANIE BRANDT  
CNO

ANGELA BRUMFIELD-LEAKS  
CLINICAL SUPERVISOR

**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](http://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:  
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

---

## GRAYS HARBOR

---

074000

**NORTHWEST INDIAN TREATMENT CENTER**

308 EAST YOUNG STREET  
ELMA, WA 98541  
(360) 482-2674

JUNE O'BRIEN  
DIRECTOR

MICHAEL TISDALE  
CLINICAL SUPERVISOR

**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

---

004500

**QUINALT INDIAN NATION**

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

DAN OVERTON  
BEHAVIORAL HEALTH MANAGER

ERNIE SANCHEZ  
CLINICAL SUPERVISOR

**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

---

137000

**SEA MAR BEHAVIORAL HEALTH - ABERDEEN**

1813 SUMNER AVENUE  
ABERDEEN, WA 98520  
(360) 538-1461  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR  
MH & 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

---

200343

**SEA MAR BEHAVIORAL HEALTH - ELMA**

515 MAIN STREET  
ELMA, WA 98541  
(360) 861-9700  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

8915 14TH AVE S  
SEATTLE, WA 98108

---

## 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  
  
BOBETTE WEBBER  
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

---

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

ERIN RIFFE  
ADMINISTRATOR  
  
KATIE CUTSHAW  
CLINICAL SUPERVISOR

**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  
  
CHARLENE ABRAHAMSON  
CLINICAL SUPERVISOR

**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

---

## ISLAND

---

**200549**      **AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -**  
**FREELAND OUTPATIENT**  
5548 MYRTLE AVENUE, SUITE 202  
FREELAND, WA 98249  
(360) 502-4080  
[WWW.AMERICANBEHAVIORALHEALTHSYSTEMS.ORG](http://WWW.AMERICANBEHAVIORALHEALTHSYSTEMS.ORG)

TONY PRENTICE  
ADMINISTRATOR  
  
CRAIG ZAHN  
CLINICAL SUPERVISOR

---

# ISLAND

---

**MAILING ADDRESS**

PO BOX 141106  
SPOKANE VALLEY, WA 99214

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200465****COMPASS HEALTH - COUPEVILLE**

20 NORTHWEST 1ST STREET  
COUPEVILLE, WA 98239  
(360) 678-5555  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

LEWIS (LOU) COX  
PROGRAM MANAGER

**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

---

**200224****COMPASS HEALTH - HARBOR STATION**

230 SOUTHEAST CABOT DRIVE  
OAK HARBOR, WA 98277  
(360) 682-4100  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL MANAGER

**MAILING ADDRESS**

PO BOX 3810  
EVERETT, WA 98213-8810

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

**086200****ISLAND ASSESSMENT & COUNSELING CENTER, INC. -**

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

AMY HOFEDITZ  
ADMINISTRATOR

**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

---

# ISLAND

---

**200233**      **L.E.A.P.S. AND BEYOND, INC. - MAIN**  
231 SOUTHEAST BARRINGTON DRIVE, SUITE 203      STACEY HOTTER-KNIGHT  
OAK HARBOR, WA 98277-3200      PRESIDENT

ADMIN@LEAPSANDBEYOND.COM  
[WWW.LEAPSANDBEYOND.COM](http://WWW.LEAPSANDBEYOND.COM)

**MAILING ADDRESS**  
231 SE BARRINGTON DRIVE, SUITE 203  
OAK HARBOR, WA 98277-3200

**CERTIFIED SERVICES**

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

---

**200345**      **L.E.A.P.S. AND BEYOND, INC. - OAK HARBOR BRANCH**  
161 BARRINGTON DRIVE      STACEY HOTTER KNIGHT  
OAK HARBOR, WA 98277      PRESIDENT  
(360) 240-0022  
ADMIN@LEAPSANDBEYOND.COM  
[WWW.LEAPSANDBEYOND.COM](http://WWW.LEAPSANDBEYOND.COM)

**MAILING ADDRESS**  
231 SE BARRINGTON DR STE 203  
OAK HARBOR, WA 98277

**CERTIFIED SERVICES**

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

---

**200346**      **L.E.A.P.S. AND BEYOND, INC. - PORT ORCHARD**  
1730 POTTERY AVENUE, SUITE 100      STACEY HOTTER KNIGHT  
PORT ORCHARD, WA 98366      PRESIDENT  
(360) 240-0022  
ADMIN@LEAPSANDBEYOND.COM  
[WWW.LEAPSANDBEYOND.COM](http://WWW.LEAPSANDBEYOND.COM)

**MAILING ADDRESS**  
231 SE BARRINGTON DR STE 203  
OAK HARBOR, WA 98277

**CERTIFIED SERVICES**

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

---

**168300**      **NAVAL HOSPITAL SUBSTANCE ABUSE AND  
REHABILITATION PROGRAM (SARP)**  
3475 NORTH SARATOGA STREET R-52      STEVEN DAGGETT  
OAK HARBOR, WA 98278      ADMINISTRATOR/CLINICAL SUPERVISOR  
(360) 257-2394

**MAILING ADDRESS**  
3475 N SARATOGA ST R-52  
OAK HARBOR, WA 98278-8800

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

---

## ISLAND

---

**163100**      **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

**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

---

**200380**      **SUNRISE SERVICES, INC. - COUPEVILLE**  
107 SOUTH MAIN STREET  
COUPEVILLE, WA 98239  
(360) 682-6154  
(866) 533-1486  
INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

**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

---

**200383**      **SUNRISE SERVICES, INC. - OAK HARBOR**  
530 NORTHEAST MIDWAY BOULEVARD  
OAK HARBOR, WA 98277  
(360) 720-2946  
INFO@SUNRISEEMAIL.COM  
[SUNRISECOMMUNITYLIVING.COM](http://SUNRISECOMMUNITYLIVING.COM)

**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

---

## JEFFERSON

---

**151100**      **BELIEVE IN RECOVERY, LLC - PORT TOWNSEND MAIN**  
211 TAYLOR STREET, SUITES 20 & 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](http://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](http://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

GLEEFORD 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

JAMES LAWRENCE  
OWNER/ADMINISTRATOR

**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

CATHERINE TRESTRAIL  
ADMINISTRATOR

AMY CONDON  
CLINICAL SUPERVISOR

**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 & AMP; 320  
RENTON, WA 98056  
(425) 227-0447  
(206) 779-5805

DONNA WHITMIRE  
ADMINISTRATOR

**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  
BOTHHELL, WA 98011  
(425) 483-4664  
(888) 429-9399

JEANNE POURROY-CARTER  
ADMINISTRATOR

**MAILING ADDRESS**

10614 BEARDSLEE BLVD STE D  
BOTHHELL, 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](http://WWW.APPLE-ASD.COM)

CHRIS JONES  
DIRECTOR OF OPERATIONS

STEVEN MICHALSKI  
CLINIC DIRECTOR

**MAILING ADDRESS**

1240 116TH AVE NE STE 102  
BELLEVUE, WA 98004

---

# KING

---

## 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](mailto:ALVIN/CURRIE@YAHOO.COM)

ALVIN L. CURRIE  
EXECUTIVE DIRECTOR

### **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  
TUKWILA, WA 98188  
(206) 575-1958

JAMES ARMSTRONG  
PROGRAM ADMINISTRATOR

### **MAILING ADDRESS**

625 STRANDER BLVD STE C  
TUKWILA, 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](mailto:ACRSINFO@ACRS.ORG)  
[WWW.ACRS.ORG](http://WWW.ACRS.ORG)

YOON JOO HAN  
BEHAVIORAL HEALTH PROGRAM DIRECTOR

HARUMI HASHIMOTO  
SUD CLINICAL SUPERVISOR, RECOVERY SERVICES

### **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

#### 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 HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

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

---

# KING

---

**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

---

**081600****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](http://WWW.ABHC.COM)

MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS

RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

**MAILING ADDRESS**

1800 112TH AVE NE STE 150W  
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:

INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**149400****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](http://WWW.ABHC.COM)

MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS

RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

**MAILING ADDRESS**

1800 112TH AVE NE STE 150W  
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:

INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**092200****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](http://WWW.ABHC.COM)

MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS

RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

**MAILING ADDRESS**

2111 N NORTHGATE WAY STE 212  
SEATTLE, WA 98133

**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

---

## KING

---

045600

**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](http://WWW.ABHC.COM)

MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS

RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

**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

---

200027

**ATLANTIC STREET CENTER**

2103 SOUTH ATLANTIC STREET  
SEATTLE, WA 98144  
(206) 329-2050  
[WWW.ATLANTICSTREET.ORG](http://WWW.ATLANTICSTREET.ORG)

HERERI CONTRERAS  
PROGRAM DIRECTOR

**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

---

200035

**AUTISM SPECTRUM THERAPIES**

12729 NORTHUP WAY, SUITE 23  
BELLEVUE, WA 98005  
(866) 727-8274  
[WWW.AUTISM THERAPIES.COM](http://WWW.AUTISM THERAPIES.COM)

ROBERT HAUPT  
VICE PRESIDENT

SHANA HUIZENGA  
CLINICAL DIRECTOR

**MAILING ADDRESS**

2550 N HOLLYWOOD WAY #102  
BURBANK, CA 91505

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

101900

**AVALON CENTER**

6957 CALIFORNIA AVENUE SW  
SEATTLE, WA 98136  
(206) 935-6228

DIANNE HUTCHENSON  
ADMINISTRATOR

OLIVETTE FOSTER  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

6957 CALIFORNIA AVE SW  
SEATTLE, WA 98136

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
LEVEL I OUTPATIENT

---

**KING**

---

**200552**      **BEHAVIORAL HEALTH WORKS, INC.**  
6624 SOUTH 196TH STREET, SUITE U107  
KENT, WA 98032  
(253) 249-7513  
(800) 249-1266  
CARETEAM@BHWCARES.COM  
[WWW.BHWCARES.COM](http://WWW.BHWCARES.COM)

**MAILING ADDRESS**  
1301 E ORANGEWOOD AVE  
ANAHEIM, CA 92805

**CERTIFIED SERVICES**

MONTE LIM  
DIRECTOR OF ADMINISTRATION

CHRISTOPHER ROBERTS  
CLINICAL SUPERVISOR

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

---

**005400**      **CASCADE BEHAVIORAL HOSPITAL**  
12844 MILITARY ROAD SOUTH  
TUKWILA, WA 98168  
(206) 244-0180  
(206) 248-4550  
[WWW.CASCADEBH.COM](http://WWW.CASCADEBH.COM)

**MAILING ADDRESS**  
12844 MILITARY RD S  
TUKWILA, WA 98168

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

MICHAEL URADNIK  
CEO/ADMINISTRATOR

DAN LABUDA  
SUD CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT

---

**173200**      **CASTEELE, WILLIAMS & ASSOCIATES  
COMPREHENSIVE BEHAVIORAL HEALTH, INC. -  
VASHON**  
9730 SOUTHWEST BANK ROAD, SUITE 107C  
VASHON, WA 98070  
(253) 536-2881  
CWACOUNSELING@HOTMAIL.COM

**MAILING ADDRESS**  
711 S 25TH 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  
SCREENING AND BRIEF INTERVENTION

JOHN L. CASTEELE, JR.  
EXECUTIVE DIRECTOR

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

---

**034300**      **CATHOLIC COMMUNITY SERVICES - SEATTLE**  
1902 SECOND AVENUE, SUITE 208  
SEATTLE, WA 98101  
(206) 956-9570  
[WWW.CCSWW.ORG](http://WWW.CCSWW.ORG)

**MAILING ADDRESS**  
1001 N J STREET  
TACOMA, WA 98403

MARY STONE SMITH  
VICE PRESIDENT

JUNGWON YOON  
SUD CLINICAL SUPERVISOR

---

# KING

---

**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](http://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  
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

BERATTA GOMILLION  
EXECUTIVE DIRECTOR

RAMONA K. GRAHAM  
SUBSTANCE ABUSE DEPT. DIRECTOR

**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](http://WWW.CHS-NW.ORG)

BERATTA GOMILLION  
EXECUTIVE DIRECTOR

**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

---

## KING

---

200039

**CHILDHAVEN - ELI CREEKMORE MEMORIAL**

1035 SOUTHWEST 124TH STREET  
SEATTLE, WA 98146  
(253) 833-5908  
(206) 248-4903  
BETHANYL@CHILDHAVEN.ORG  
[WWW.CHILDHAVEN.ORG](http://WWW.CHILDHAVEN.ORG)

JON BOTTEN  
CEO

TODD GEORGE  
SR. PROGRAM DIRECTOR

**MAILING ADDRESS**

316 BROADWAY  
SEATTLE, WA 98122

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

200038

**CHILDHAVEN - MAIN**

316 BROADWAY  
SEATTLE, WA 98122  
(206) 624-6477  
(206) 957-4815  
BETHANYL@CHILDHAVEN.ORG  
[WWW.CHILDHAVEN.ORG](http://WWW.CHILDHAVEN.ORG)

JON BOTTEN  
CEO

TODD GEORGE  
SR. PROGRAM DIRECTOR

**MAILING ADDRESS**

316 BROADWAY  
SEATTLE, WA 98122

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

200040

**CHILDHAVEN - PATRICK L. GOGERTY**

1345 22ND STREET NE  
AUBURN, WA 98002  
(253) 833-5908  
BETHANYL@CHILDHAVEN.ORG  
[WWW.CHILDHAVEN.ORG](http://WWW.CHILDHAVEN.ORG)

JON BOTTEN  
CEO

TODD GEORGE  
SR. PROGRAM DIRECTOR

**MAILING ADDRESS**

316 BROADWAY  
SEATTLE, WA 98122

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

072100

**COASTAL TREATMENT SERVICES, INC. - MAIN**

BELLEGROVE PROFESSIONAL BUILDING 1515 116TH  
AVENUE NE, SUITE 302  
BELLEVUE, WA 98004  
(425) 646-4406

MARGARET FERRIS  
DIRECTOR/CEO

**MAILING ADDRESS**

BELLEGROVE PROFESSIONAL BUILDING  
BELLEVUE, WA 98004

---

## KING

---

**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:

INDIVIDUAL TREATMENT

---

**200262****COLEMAN'S FAMILY SERVICES LLC**

15 SOUTH GRADY WAY, SUITE 305  
RENTON, WA 98057  
(425) 235-9386

[WWW.COLEMANSFAMILYSERVICES.COM](http://WWW.COLEMANSFAMILYSERVICES.COM)

**MAILING ADDRESS**

15 SOUTH GRADY WAY, SUITE 305  
RENTON, WA 98057

**CERTIFIED SERVICES**

ALICE COLEMAN  
ADMINISTRATOR

MICHELLE BYRD  
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT

---

**200063****COMMUNITY HOUSE MENTAL HEALTH**

851 POPLAR PLACE SOUTH  
SEATTLE, WA 98144  
(206) 322-2387

(206) 586-8250

CSZALA@CHMHA.ORG

[WWW.CHMHA.ORG](http://WWW.CHMHA.ORG)

**MAILING ADDRESS**

851 POPLAR PLACE SOUTH  
SEATTLE, WA 98144

**CERTIFIED SERVICES**

CHRISTOPHER SZALA  
EXECUTIVE DIRECTOR

TAMMIE BAKER  
CLINICAL DIRECTOR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**087600****COMMUNITY PSYCHIATRIC CLINIC - BELLTOWN**

2329 FOURTH AVENUE  
SEATTLE, WA 98121  
(206) 461-3649

SLOPEZ@CPCWA.ORG

[WWW.CPCWA.ORG](http://WWW.CPCWA.ORG)

**MAILING ADDRESS**

11000 LAKE CITY WAY NE  
SEATTLE, WA 98125

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

DOUG CRANDALL  
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN  
SUD CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:

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

---

# KING

---

200293

**COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL**

204 NORTHEAST 94TH STREET  
SEATTLE, WA 98115  
(206) 461-3614  
SLOPEZ@CPCWA.ORG  
[WWW.CPCWA.ORG](http://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

---

200292

**COMMUNITY PSYCHIATRIC CLINIC - EL REY**

2119 SECOND AVENUE  
SEATTLE, WA 98121  
(206) 461-3614  
SLOPEZ@CPCWA.ORG  
[WWW.CPCWA.ORG](http://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

---

117700

**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](http://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**

SUBSTANCE USE DISORDER SERVICES:

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 HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

# KING

---

170800

**COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN**

10700 MERIDIAN AVENUE NORTH, SUITE G-11  
SEATTLE, WA 98133  
(206) 461-4544  
SLOPEZ@CPCWA.ORG  
[WWW.CPCWA.ORG](http://WWW.CPCWA.ORG)

DOUG CRANDALL  
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN  
SUD PROGRAM MANAGER

**MAILING ADDRESS**

11000 LAKE CITY WAY NE  
SEATTLE, WA 98125

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

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 HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

200567

**COMMUNITY PSYCHIATRIC CLINIC - SOUTH SEATTLE**

4636 EAST MARGINAL WAY SOUTH, SUITE B-130  
SEATTLE, WA 98134  
(206) 461-3614  
[WWW.CPCWA.ORG](http://WWW.CPCWA.ORG)

DOUG CRANDALL  
CEO

ALICE NICHOLS  
CLINICAL DIRECTOR

**MAILING ADDRESS**

11000 LAKE CITY WAY NE  
SEATTLE, WA 98015

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

200559

**COMMUNITY PSYCHIATRIC CLINIC - UNIVERSITY DISTRICT**

1415 NORTHEAST 43RD STREET  
SEATTLE, WA 98105  
(206) 461-3614  
[WWW.CPCWA.ORG](http://WWW.CPCWA.ORG)

DOUG CRANDALL  
CEO

ALICE NICHOLS  
CLINICAL DIRECTOR (MH CS)

**MAILING ADDRESS**

11000 LAKE CITY WAY NE  
SEATTLE, WA 98015

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT

---

087400

**COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE**

4120 STONE WAY NORTH  
SEATTLE, WA 98103  
(206) 461-3707  
SLOPEZ@CPCWA.ORG  
[WWW.CPCWA.ORG](http://WWW.CPCWA.ORG)

DOUG CRANDALL  
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

11000 LAKE CITY WAY NE  
SEATTLE, WA 98125

---

# 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 TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

**200366****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](http://WWW.CONNECTIONS-BEHAVIOR.COM)

SHANNON STARKWEATHER  
OPERATIONS MANAGER

DR. PAUL MULLAN  
SENIOR BCBA/OWNER

**MAILING ADDRESS**

1003 7TH AVENUE  
KIRKLAND, WA 98033

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

DAY SUPPORT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200185****CONNECTIONS BEHAVIOR PLANNING & INTERVENTION  
- MAIN**

1003 7TH AVENUE  
KIRKLAND, WA 98033  
(425) 658-3016  
SHANNON.S@CONNECTIONS-BEHAVIOR.COM  
[WWW.CONNECTIONS-BEHAVIOR.COM](http://WWW.CONNECTIONS-BEHAVIOR.COM)

SHANNON STARKWEATHER  
OPERATIONS MANAGER

DR. PAUL MULLAN  
SENIOR BCBA/OWNER

**MAILING ADDRESS**

1003 7TH AVENUE  
KIRKLAND, WA 98033

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

DAY SUPPORT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200395****CONNECTIONS BEHAVIOR PLANNING & INTERVENTION  
- SLATER PARK**

11828 SLATER PARK AVENUE NE, SUITE 150  
KIRKLAND, WA 98034  
(425) 653-3016  
SHANNON.S@CONNECTIONS-BEHAVIOR.COM  
[WWW.CONNECTIONS-BEHAVIOR.COM](http://WWW.CONNECTIONS-BEHAVIOR.COM)

SHANNON STARKWEATHER  
OPERATIONS MANAGER

DR. PAUL MULLAN  
SENIOR BCBA/OWNER

**MAILING ADDRESS**

1003 7TH AVE  
KIRKLAND, WA 98033

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

DAY SUPPORT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

# KING

---

**200186**      **CONSEJO COUNSELING AND REFERRAL SERVICE - BELLEVUE**  
13343 BEL-RED ROAD, SUITE 210  
BELLEVUE, WA 98007  
(425) 679-0801  
(206) 461-4880  
[WWW.CONSEJONEW.CONSEJOCOUNSELING.ORG](http://WWW.CONSEJONEW.CONSEJOCOUNSELING.ORG)

**MAILING ADDRESS**  
3808 S ANGELINE ST  
SEATTLE, WA 98118

**CERTIFIED SERVICES**

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

TERESA VISPO-CUBA  
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

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

---

**200187**      **CONSEJO COUNSELING AND REFERRAL SERVICE - LAKE CITY**  
2611 NORTHEAST 125TH STREET, SUITE 145  
SEATTLE, WA 98125  
(206) 461-4880  
[WWW.CONSEJOCOUNSELING.ORG](http://WWW.CONSEJOCOUNSELING.ORG)

**MAILING ADDRESS**  
3808 S ANGELINE ST  
SEATTLE, WA 98118

**CERTIFIED SERVICES**

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

TERESA VISPO-CUBA  
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

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

---

**003800**      **CONSEJO COUNSELING AND REFERRAL SERVICE - MAIN**  
3808 SOUTH ANGELINE STREET  
SEATTLE, WA 98118  
(206) 461-4880

**MAILING ADDRESS**  
3808 S ANGELINE ST  
SEATTLE, WA 98118

**CERTIFIED SERVICES**

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

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

MARCOS SAURI  
CLINICAL SUPERVISOR

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

---

**149500**      **CONSEJO KENT YOUTH OUTPATIENT SERVICES**  
515 WEST HARRISON STREET, SUITE 109  
KENT, WA 98032  
(206) 461-4880

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

MARCOS SAURI  
CLINICAL SUPERVISOR

---

# KING

---

**MAILING ADDRESS**

3808 S ANGELINE ST  
SEATTLE, WA 98118

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT  
CRISIS OUTREACH  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**135400****CONSEJO YOUTH AND FAMILY SERVICES - SEATTLE**

8615 14TH AVENUE SOUTH  
SEATTLE, WA 98108  
(206) 461-4880

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

MARCOS SAURI  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

3808 S ANGELINE  
SEATTLE, WA 98118

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT  
CRISIS OUTREACH  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**158200****COWLITZ TRIBAL TREATMENT PROGRAM - SEATTLE**

15455 65TH AVENUE SOUTH  
TUKWILA, WA 98188  
(206) 721-5170

ELIZABETH TAIL  
PROGRAM DIRECTOR

LETHA FERNANDEZ  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

15455 65TH AVENUE SOUTH  
TUKWILA, WA 98188

**CERTIFIED SERVICES**

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

---

**154100****CRISIS CLINIC**

CONFIDENTIAL LOCATION  
(866) 789-1511  
(866) 833-6546

KATHLEEN SOUTHWICK  
EXECUTIVE DIRECTOR

**MAILING ADDRESS****CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
INFORMATION AND CRISIS

**MENTAL HEALTH SERVICES:**

CRISIS TELEPHONE SUPPORT

---

**113800****CTC COUNSELING SERVICES, LLC**

12351 LAKE CITY WAY, SUITE 202  
SEATTLE, WA 98125  
(206) 957-0721  
INFO@CTCCOUNSELINGSERVICES.COM  
[WWW.CTCCOUNSELINGSERVICES.COM](http://WWW.CTCCOUNSELINGSERVICES.COM)

JESSICA RHODES  
ADMINISTRATOR

CRYSTAL MAZAC  
CLINICAL SUPERVISOR

---

# 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

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

---

**077200****DOC - HELEN B. RATCLIFFE WORK RELEASE**

1531 13TH AVENUE SOUTH  
SEATTLE, WA 98114  
(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

---

**077300****DOC - REYNOLDS WORK RELEASE**

410 4TH AVENUE  
SEATTLE, WA 98104  
(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

---

**200189****DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER**

1600 SOUTH LANE STREET  
SEATTLE, WA 98144  
(206) 464-1570  
INFO@DESC.ORG  
[WWW.DESC.ORG](http://WWW.DESC.ORG)

DANIEL MALONE  
EXECUTIVE DIRECTOR

GRAYDON ANDRUS  
DIRECTOR OF CLINICAL PROGRAMS (MH CS)

**MAILING ADDRESS**

515 THIRD AVE  
SEATTLE, WA 98104

---

# KING

---

**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

---

# KING

---

**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

---

**109700**

**EASTSIDE CENTER FOR FAMILY**  
2025 112TH AVENUE NE, SUITE 201  
BELLEVUE, WA 98004  
(425) 462-8558

LAURA HALFORD  
ADMINISTRATOR

**MAILING ADDRESS**

2025 112TH AVE NE, STE 201  
BELLEVUE, WA 98004

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**037201**

**EASTSIDE RECOVERY GROUP**  
1715 114TH AVENUE SE, SUITE 204  
BELLEVUE, WA 98004  
(425) 454-0839  
INFO@EASTSIDERG.COM  
[WWW.EASTSIDERG.COM](http://WWW.EASTSIDERG.COM)

JILL WEINSTEIN  
ADMINISTRATOR

PAUL HUNZIKER  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1715 114TH AVENUE SE, SUITE 204  
BELLEVUE, WA 98004

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200191**

**EASTSIDE SOCIAL SKILLS THERAPY, LLC**  
5436 232ND AVENUE SE  
ISSAQUAH, WA 98029  
(206) 380-3009

**MAILING ADDRESS**

5436 232ND AVENUE SE  
ISSAQUAH, WA 98029

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200048**

**EATING RECOVERY CENTER OF WASHINGTON - MAIN**  
1231 116TH AVENUE NORTHEAST  
BELLEVUE, WA 98004  
(425) 451-1134  
INFO@EATINGRECOVERY.COM  
[WWW.EATINGRECOVERYCENTER.COM](http://WWW.EATINGRECOVERYCENTER.COM)

LARA EFFLAND  
EXECUTIVE CLINICAL DIRECTOR

**MAILING ADDRESS**

1231 116TH AVENUE NORTHEAST  
BELLEVUE, WA 98004

---

# KING

---

## CERTIFIED SERVICES

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

---

200531

**EATING RECOVERY CENTER OF WASHINGTON - SEATTLE**

901 BOREN AVENUE, SUITE 1800  
SEATTLE, WA 98104  
(425) 326-5300  
(425) 214-9360  
INFO@EATINGRECOVERY.COM  
[WWW.EATINGRECOVERYCENTER.COM](http://WWW.EATINGRECOVERYCENTER.COM)

LARA EFFLAND  
EXECUTIVE CLINICAL DIRECTOR

**MAILING ADDRESS**

1231 116TH AVE NE  
BELLEVUE, WA 98004

**CERTIFIED SERVICES**

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

---

149600

**EDGEWOOD SEATTLE ADDICTION SERVICES**

1200 WESTLAKE AVENUE N, SUITE 508  
SEATTLE, WA 98109  
(206) 402-4115

COURTNEY STRONG  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

1200 WESTLAKE AVENUE N, SUITE 508  
SEATTLE, WA 98109

**CERTIFIED SERVICES**

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

---

200137

**ENGAGE ABA LLC**

CONFIDENTIAL LOCATION  
(425) 761-5010  
(206) 719-2506  
AIDAN@ENGAGEABA.COM

LIZ BLUECHEL  
DIRECTOR OF OPERATIONS

AIDEN VICKERS  
OWNER/PROGRAM MANAGER

**MAILING ADDRESS**

**CERTIFIED SERVICES**

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

---

136100

**EVERGREEN HEALTHCARE**

11800 NORTHEAST 128TH STREET, 2ND FLOOR  
KIRKLAND, WA 98034  
(425) 899-6300  
(800) 548-0558

LEAH JONES  
CD SERVICES ADMINISTRATOR

TODD BELLER  
CD CLINICAL SUPERVISOR

---

# 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

---

**200477****EVERGREEN TREATMENT SERVICES - REACH**

2133 3RD AVENUE, SUITE 116  
SEATTLE, WA 98121  
(206) 432-3574  
(206) 223-3644  
MAIL@ETSREACH.ORG  
[WWW.ETSREACH.ORG](http://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

---

**200408****EVERGREEN TREATMENT SERVICES - SOUTH KING COUNTY CLINIC**

1412 SOUTHWEST 43RD STREET  
RENTON, WA 98057  
(425) 264-0750  
[WWW.EVERGREENTREATMENT.ORG](http://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

---

**016300****EVERGREEN TREATMENT SERVICES - UNIT 1**

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

---

**016301****EVERGREEN TREATMENT SERVICES - UNIT 2**

1740 AIRPORT WAY SOUTH  
SEATTLE, WA 98134-1618  
(206) 903-1898

MOLLY CARNEY  
EXECUTIVE DIRECTOR

CAROL DAVIDSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1700 AIRPORT WAY S  
SEATTLE, WA 98134-1618

---

# KING

---

**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

MOLLY CARNEY  
EXECUTIVE DIRECTOR

CAROL DAVIDSON  
CLINICAL SUPERVISOR

**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

JAMIE BURTON  
PROGRAM MANAGER

MELISSA HEPWORTH  
CLINICAL SUPERVISOR

**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

DR. DEBBIE HOROWSKI  
CLINICAL SERVICES DIRECTOR

ANTONIA MEJORADO  
CD PROFESSIONAL LEAD

**MAILING ADDRESS**

10200 NE 132ND ST  
KIRKLAND, WA 98034

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

---

**200420****FAIRFAX BEHAVIORAL HEALTH - KIRKLAND E&T**

10200 NORTHEAST 132ND STREET  
KIRKLAND, WA 98034  
(425) 821-2000

RON ESCARDA  
GROUP DIRECTOR NW REGION, CEO FAIRFAX HOSPITAL

[HTTP://WWW.FAIRFAXHOSPITAL.COM/](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

---

**KING**

---

**165700****FAMILY THERAPY & RECOVERY P.S.**  
15 SOUTH GRADY WAY, SUITE 249  
RENTON, WA 98057  
(253) 220-9452  
(253) 208-6393  
ADMIN@FAMILYTHERAPYRECOVERY.COM  
[WWW.FAMILYTHERAPYRECOVERY.COM](http://WWW.FAMILYTHERAPYRECOVERY.COM)PAUL HUNZIKER  
PRESIDENT**MAILING ADDRESS**  
15 S GRADY WAY, STE 249  
RENTON, WA 98057**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENTMENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**200195****FEAT OF WASHINGTON**  
14434 NORTHEAST 8TH STREET, SUITE 300  
BELLEVUE, WA 98007  
(425) 223-5126  
(425) 502-5060  
INFO@FEATWA.ORG  
[WWW.FEATWA.ORG](http://WWW.FEATWA.ORG)STEVEN TROYER  
PROGRAM DIRECTOR**MAILING ADDRESS**  
14434 NORTHEAST 8TH STREET, SUITE 300  
BELLEVUE, WA 98007**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200196****FOUNDATIONS FOR LEARNING AND BEHAVIOR, INC.**  
15600 REDMOND WAY, SUITE 205  
REDMOND, WA 98052PAUL JOHNSON  
DIRECTOR**MAILING ADDRESS**  
PO BOX 2755  
REDMOND, WA 98073-2755**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**170300****FRIENDS OF YOUTH - DUVALL**  
26420 NORTHEAST VIRGINIA STREET  
DUVALL, WA 98019  
(425) 844-9669  
(425) 392-6367TERRY POTTMEYER  
PRESIDENT & CEOLAUREN CHRISTENSON  
CLINICAL SUPERVISOR**MAILING ADDRESS**  
PO BOX 12  
ISSAQUAH, WA 98027**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENTMENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

# KING

---

040901

**FRIENDS OF YOUTH - MAIN**

414 FRONT STREET NORTH  
ISSAQUAH, WA 98052  
(425) 392-6367

TERRY POTTMEYER  
PRESIDENT & CEO

MARIE C. MACCOY  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 12  
ISSAQUAH, WA 98027-2914

**CERTIFIED SERVICES**

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

170200

**FRIENDS OF YOUTH - NORTH BEND**

401 BALLARAT AVENUE NORTH  
NORTH BEND, WA 98045  
(425) 888-4151  
INFO@FRIENDSOFYOUTH.ORG  
[WWW.FRIENDSOFYOUTH.ORG](http://WWW.FRIENDSOFYOUTH.ORG)

TERRY POTTMEYER  
PRESIDENT & CEO

LAUREN CHRISTENSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 12  
ISSAQUAH, WA 98027

**CERTIFIED SERVICES**

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

200060

**FULL LIFE CARE**

2600 SOUTH WALKER STREET  
SEATTLE, WA 98144  
(206) 224-3746  
[WWW.FULLLIFECARE.ORG](http://WWW.FULLLIFECARE.ORG)

CATHERINE FARR  
DIRECTOR

KRIS LAU  
DIRECTOR

**MAILING ADDRESS**

2600 SOUTH WALKER STREET  
SEATTLE, WA 98144

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

042400

**FUTURE VISIONS PROGRAM, INC.**

620 M STREET NE, SUITE 2  
AUBURN, WA 98002  
(253) 735-2718

KAREN PARKER  
PROGRAM COORDINATOR

KAREN GARVIN  
CLINICAL MANAGER

**MAILING ADDRESS**

PO BOX 1980  
AUBURN, WA 98071

**CERTIFIED SERVICES**

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

---

# KING

---

**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

BRIGITTE FOLZ  
ADMINISTRATOR

ADRIANE TILLERY  
CLINICAL SUPERVISOR

**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](http://WWW.HEROHOUSE.ORG)

KAILEY FIEDLER  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**  
12838 SE 40TH PLACE  
BELLEVUE, WA 98006

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:  
CLUBHOUSE

---

# KING

---

159400

**HOPE + HELP**

230 AUBURN WAY SOUTH #1B &AMP; 2B  
AUBURN, WA 98002  
(253) 333-2328  
[WWW.HH-C.NET](http://WWW.HH-C.NET)

GEORGE BRUMMELL  
ADMINISTRATOR

CLAUDIA STEWARD  
CLINICAL SUPERVISOR

**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

JENNIFER MANLIEF  
LEAD CASE MANAGER

DERYL DAVIS BELL  
CLINICAL SUPERVISOR

**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](http://WWW.HOTELCALIFORNIABYTHESEA.COM)

JON SCHLENSKE  
DIRECTOR OF OPERATIONS

DARREN BARRY  
CLINICAL SUPERVISOR

**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

HERMANN BERLIN  
DIRECTOR

RHODA BERLIN  
CLINICAL DIRECTOR

**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

---

# KING

---

200051

**IKRON CORPORATION GREATER SEATTLE - MAIN**

3805 108TH AVENUE NE, SUITES 204 &AMP; 102  
BELLEVUE, WA 98004  
(425) 242-1713  
IKRONGREATERSEATTLE@IKRON.ORG  
[WWW.SEATTLE.IKRON.ORG](http://WWW.SEATTLE.IKRON.ORG)

LUDMILA MONICA NEGRILA  
DIRECTOR

**MAILING ADDRESS**

3805 108TH AVENUE NE, SUITES 204 &AMP; 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  
IKRONGREATERSEATTLE@IKRON.ORG  
[WWW.SEATTLE.IKRON.ORG](http://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](http://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  
(206) 216-5000

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  
(253) 941-7555

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  
(206) 547-2171

AMY HOFEDITZ  
ADMINISTRATOR

**MAILING ADDRESS**

4250 AURORA AVE N STE A106  
SEATTLE, WA 98103

---

# KING

---

**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

MICHAEL 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  
OPIATE 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](http://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

---

200228

**KING COUNTY SEXUAL ASSAULT RESOURCE CENTER**

200 MILL AVENUE SOUTH, SUITE 10  
RENTON, WA 98057  
(425) 226-5062  
DYAMAMOTO@KCSARC.ORG  
[WWW.KCSARC.ORG](http://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

---

155500

**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

---

145500

**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

---

009404

**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

---

**KING**

---

035104

**LAKESIDE-MILAM RECOVERY CENTERS, INC. -  
ISSAQUAH**  
300 NORTHEAST GILMAN BOULEVARD, SUITE 200  
ISSAQUAH, WA 98027  
(425) 392-8468

CALVIN WALKER  
ADMINISTRATOR

TOBY PETERSON  
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

009402

**LAKESIDE-MILAM RECOVERY CENTERS, INC. -  
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

004600

**LAKESIDE-MILAM RECOVERY CENTERS, INC. -  
KIRKLAND INPATIENT**  
10322 NORTHEAST 132ND STREET  
KIRKLAND, WA 98034-2829  
(425) 823-3116  
(800) 231-4303  
HELP@LAKESIDEMILAM.COM  
[WWW.LAKESIDEMILAM.COM](http://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

009400

**LAKESIDE-MILAM RECOVERY CENTERS, INC. - RENTON**  
1000 SW 7TH STREET, SUITE B  
RENTON, WA 98057-5216  
(206) 248-4358  
HELP@LAKESIDEMILAM.COM  
[WWW.LAKESIDEMILAM.COM](http://WWW.LAKESIDEMILAM.COM)

DEENA DOLE  
ADMINISTRATOR

JAY YOURGLISH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

10322 NE 132ND ST  
KIRKLAND, WA 98034-2829

---

# KING

---

**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](http://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](http://WWW.LCSNW.ORG)

ANDREW KRITOVICH  
CLINICAL DIRECTOR

**MAILING ADDRESS**

4040 S 188TH ST STE 200  
SEATAC, WA 98188

---

# KING

---

**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/](http://WWW.LCSNW.ORG/)

**MAILING ADDRESS**

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

**CERTIFIED SERVICES**

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

---

**138600****MATT TALBOT CENTER**

2313 THIRD AVENUE  
SEATTLE, WA 98121  
(206) 256-9865  
(206) 256-9866

GREGG ALEX  
EXECUTIVE DIRECTOR

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  
(206) 708-1704

JAMES NORRIS  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

PO BOX 66945  
BURIEN, WA 98166

**CERTIFIED SERVICES**

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

---

**200090****MEIER CLINICS**

22232 17TH AVENUE SE, SUITE 312  
BOTHHELL, WA 98021

**MAILING ADDRESS**

22232 17TH AVENUE SE, SUITE 312  
BOTHHELL, WA 98021

---

# KING

---

## CERTIFIED SERVICES

MENTAL HEALTH SERVICES:  
DAY SUPPORT

---

120800

**MINDFUL ALTERNATIVES**

12727 NORTHUP WAY, SUITE 19  
BELLEVUE, WA 98005  
(425) 454-0116  
(206) 355-2508

JOHN O'MALLEY  
ADMINISTRATOR/OWNER

**MAILING ADDRESS**

12727 NORTHUP WAY, SUITE 19  
BELLEVUE, WA 98005

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT

---

200243

**MOSAIC CHILDREN'S THERAPY CLINIC**

13010 NORTHEAST 20TH STREET, SUITE 300  
BELLEVUE, WA 98005

ANDREA DUFFIELD  
CEO

**MAILING ADDRESS**

13010 NE 20TH STREET, SUITE 300  
BELLEVUE, WA 98005

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

043100

**MOTIVATIONS**

17311 135TH AVENUE NE, SUITE B-750  
WOODINVILLE, WA 98072  
(425) 481-2112

JAMES R. FOUTS  
ADMINISTRATOR

**MAILING ADDRESS**

17311 135TH AVE NE STE B-750  
WOODINVILLE, WA 98072

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

022900

**MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM**

17813 SOUTHEAST 392ND STREET  
AUBURN, WA 98092  
(253) 804-8752

MICHAEL P. CLARKE  
ADMINISTRATOR

DAN CABLE  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

39015 172ND AVE SE  
AUBURN, WA 98092

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

# KING

---

157000

**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

**MAILING ADDRESS**

39015 172ND AVE SE  
AUBURN, WA 98092

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

200361

**MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER**

202 NORTH DIVISION STREET  
AUBURN, WA 98001  
(253) 545-2050  
CUSTOMERSERVICE@MULTICARE.ORG  
[WWW.MULTICARE.ORG](http://WWW.MULTICARE.ORG)

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

---

200247

**NAVOS - AUBURN**

402 EAST MAIN STREET, SUITE 160  
AUBURN, WA 98002

[WWW.NAVOS.ORG](http://WWW.NAVOS.ORG)

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

---

075300

**NAVOS - BURIEN 136TH STREET**

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

[WWW.NAVOS.ORG](http://WWW.NAVOS.ORG)

MIRIAM MIYAKE  
ADMINISTRATIVE DIRECTOR

ANGELA FRYE  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

2600 SW HOLDEN ST  
SEATTLE, WA 98126

---

# KING

---

**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](http://WWW.NAVOS.ORG)

VICTOR PLACE  
ADMINISTRATOR

TIM PRIMEAUX  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

2600 SW HOLDEN ST  
SEATTLE, WA 98126

**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

---

**200246****NAVOS - BURIEN 8TH AVENUE**

15035 8TH AVENUE SOUTH  
BURIEN, WA 98148

[WWW.NAVOS.ORG](http://WWW.NAVOS.ORG)

JUDY HEALY  
ADMINISTRATOR

**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

---

**200231****NAVOS - CLIP**

1033 SOUTHWEST 152ND STREET  
BURIEN, WA 98166  
(206) 829-1100  
[WWW.NAVOS.ORG](http://WWW.NAVOS.ORG)

ELLIE CARRITHERS  
DIRECTOR OF RESIDENTIAL SERVICES

**MAILING ADDRESS**

2600 SW HOLDEN ST  
SEATTLE, WA 98126

---

# KING

---

**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](http://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](http://WWW.NAVOS.ORG)

ROGER BROWN  
CLINICAL SUPERVISOR

**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](http://WWW.NAVOS.ORG)

MEGAN KELLY  
CHIEF CLINICAL OFFICER

**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](http://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](http://WWW.NEXUS4KIDS.ORG)

SHELLY PRICCO  
EXECUTIVE DIRECTOR

MARK WALRATH  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

1000 AUBURN WAY S  
AUBURN, WA 98002

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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](http://WWW.NEXUS4KIDS.ORG)

SHELLY PRICCO  
EXECUTIVE DIRECTOR

MARK WALRATH  
SUD CLINICAL SUPERVISOR

---

## KING

---

**MAILING ADDRESS**

1000 AUBURN WAY S  
AUBURN, WA 98002

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT

---

**170000****NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET**

847 BLAKE STREET  
ENUMCLAW, WA 98022  
(360) 825-4586  
LAURAST@NEXUS4KIDS.ORG  
[WWW.NEXUS4KIDS.ORG](http://WWW.NEXUS4KIDS.ORG)

SHELLY PRICCO  
EXECUTIVE DIRECTOR

MARK WALRATH  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

1000 AUBURN WAY S  
AUBURN, WA 98002

**CERTIFIED SERVICES**

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

**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**200532****NEXUS YOUTH AND FAMILIES - MAPLE VALLEY**

24930 224TH AVENUE SOUTHEAST  
MAPLE VALLEY, WA 98038  
(253) 939-2202  
INFO@NEXUS4KIDS.ORG  
[WWW.NEXUS4KIDS.ORG](http://WWW.NEXUS4KIDS.ORG)

SHELLY PRICCO  
EXECUTIVE DIRECTOR

MARK WALRATH  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

1000 AUBURN WAY S  
AUBURN, WA 98002

**CERTIFIED SERVICES**

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

**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT

---

**139500****NORTH STAR TREATMENT GROUP, LLC**

15 SOUTH GRADY WAY, SUITE 505  
RENTON, WA 98057  
(206) 241-1187

CRAIG S. ROCK  
ADMINISTRATOR

**MAILING ADDRESS**

15 S. GRADY WAY, STE 505  
RENTON, WA 98057

**CERTIFIED SERVICES**

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

---

# KING

---

200495

**NORTHBOUND TREATMENT SERVICES OF  
WASHINGTON, LLC**

510 2ND AVENUE WEST  
SEATTLE, WA 98119  
(866) 311-0003  
MIKEP@LIVINGSOBER.COM  
[WWW.LIVINGSOBER.COM](http://WWW.LIVINGSOBER.COM)

MICHAEL PLAISANCE  
EXECUTIVE DIRECTOR

**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  
BOTHHELL, WA 98011  
(425) 485-6541  
INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG  
[WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG](http://WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG)

DEBBIE FARRAR  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

19201 120TH AVENUE NE, SUITE 108  
BOTHHELL, 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

MICHAEL VERANTH  
EXECUTIVE DIRECTOR/OWNER

**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](http://WWW.NORTHWESTABA.COM)

TAKANORI KOYAMA  
EXECUTIVE DIRECTOR

**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

MICHAEL A. WEBSTER  
OWNER/ADMINISTRATOR

**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](http://NORTHWESTRESOURCES.ORG)

ARTHUR DAHLEN III  
OWNER

PAUL HUNZIKER  
CLINICAL SUPERVISOR

**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****NWA COUNSELING, PLLC**

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

ERIN LYNCH  
ADMINISTRATOR

**MAILING ADDRESS**

2505 3RD AVENUE, SUITE 325  
SEATTLE, WA 98121

---

# 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](http://WWW.OLIVECREST.ORG/PN)

FAITH KNOWLES  
MENTAL HEALTH SUPERVISOR

**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](http://WWW.OPALFOODANDBODY.COM)

ALEXIA GIBLIN  
EXECUTIVE DIRECTOR

**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](http://WWW.PICAS.ORG)

DALILAH WILLIAMS  
ADMINISTRATOR

DEREK MURPHY  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

10634 EAST RIVERSIDE DRIVE, SUITE 300  
BOTHELL, WA 98011

**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:**

GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**KING**

---

165600

**PIB-PROCESO, LLC - KENT**23830 PACIFIC HIGHWAY SOUTH, SUITES 323-325  
KENT, WA 98032  
(206) 414-1974MARCO 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

156500

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

096500

**PIONEER COUNSELING SERVICES - SEATTLE**901 RAINIER AVENUE SOUTH  
SEATTLE, WA 98144  
(206) 470-3856[WWW.PIONEERHUMANSERVICES.ORG](http://WWW.PIONEERHUMANSERVICES.ORG)BETH HAMMONDS  
DIRECTORLESLIE 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 OUTPATIENTMENTAL 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

128100

**PIONEER HUMAN SERVICES - CO-OCCURRING  
RESIDENTIAL PROGRAM (CORP)**11900 BEACON AVENUE SOUTH  
SEATTLE, WA 98178  
(206) 772-6900[WWW.PIONEERHUMANSERVICES.ORG](http://WWW.PIONEERHUMANSERVICES.ORG)GEORGE CALDERON  
DIRECTOR III**MAILING ADDRESS**11900 BEACON AVE S  
SEATTLE, WA 98178

---

# KING

---

**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

NICOLAS LOPEZ  
PROGRAM DIRECTOR

**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

---

**113500****RAGING RIVER RECOVERY CENTER**

9575 ETHAN WADE WAY SOUTHEAST  
SNOQUALMIE, WA 98065  
(425) 831-5425  
(425) 831-5426  
[WWW.SNOQUALMIETRIBE.US](http://WWW.SNOQUALMIETRIBE.US)

KENDA ERICKSON  
ADMINISTRATOR

**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

[WWW.REWA.ORG](http://WWW.REWA.ORG)

**MAILING ADDRESS**

4008 MARTIN LUTHER KING JR WAY S  
SEATTLE, WA 98108

**CERTIFIED SERVICES**

MAHNAZ ESHETU  
EXECUTIVE DIRECTOR

MOLLY DONOVAN  
DIRECTOR OF BEHAVIORAL HEALTH

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](http://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

---

# KING

---

**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](http://WWW.REWA.ORG)

MAHNAZ ESHETU  
EXECUTIVE DIRECTOR

MOLLY DONOVAN  
DIRECTOR OF BEHAVIORAL HEALTH

**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](http://WWW.RAYS.ORG)

LINDSAY HOFFE  
CLINICAL DIRECTOR

DIPTI SARNAIK  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1510  
RENTON, WA 98057

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT

---

**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**

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

---

**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

---

# KING

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**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](http://WWW.APLSCHOOL.ORG)

COURTNEY GUTIERREZ  
CLINICAL DIRECTOR

**MAILING ADDRESS**

PO BOX 51241  
SEATTLE, WA 98115

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**159100****RYTHER - BELLEVUE**

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

KAREN BRADY  
CEO/EXECUTIVE DIRECTOR

YVETTE LUDVIK - JESSICA GLOVER  
CLINICAL SUPERVISORS

**MAILING ADDRESS**

2400 NE 95TH ST  
SEATTLE, WA 98115-2499

**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

---

**005500****RYTHER - MAIN**

2400 NORTHEAST 95TH STREET  
SEATTLE, WA 98115  
(206) 525-5050  
GETHELP@RYTHER.ORG  
[WWW.RYTHER.ORG](http://WWW.RYTHER.ORG)

KAREN BRADY  
CEO/EXECUTIVE DIRECTOR

RACHEL BARRETT  
SENIOR DIRECTOR OF OP SERVICES

**MAILING ADDRESS**

2400 NE 95TH ST  
SEATTLE, WA 98115-2499

**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  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**163800****SCHICK SHADEL HOSPITAL**

12101 AMBAUM BOULEVARD SW  
SEATTLE, WA 98146  
(206) 244-8100

PHILIP HERINK  
CEO/ADMINISTRATOR

ROMMARK MANLIMOS  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

12101 AMBAUM BLVD SW  
SEATTLE, WA 98146

---

# KING

---

**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

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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

**200353****SEA MAR BEHAVIORAL HEALTH - BELLEVUE CHILD & FAMILY**

1811 156TH AVENUE NE  
BELLEVUE, WA 98007  
(425) 460-7125  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

CASSANDRA ELLSWORTH  
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

---

**200435****SEA MAR BEHAVIORAL HEALTH - DES MOINES**

2781 SOUTH 242ND STREET  
DES MOINES, WA 98198  
(206) 763-5277  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://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

---

**137900****SEA MAR BEHAVIORAL HEALTH - FEDERAL WAY**

31405 18TH AVENUE SOUTH  
FEDERAL WAY, WA 98003  
(253) 681-6640  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY  
CLINICAL SUPERVISOR

---

# KING

---

**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

---

**200401****SEA MAR BEHAVIORAL HEALTH - KENT**

25028 104TH AVENUE SOUTHEAST  
KENT, WA 98030  
(206) 764-8019  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

**121300****SEA MAR BEHAVIORAL HEALTH - SEATTLE**

10001 17TH PLACE SOUTH  
SEATTLE, WA 98168  
(206) 766-6960

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

MARCO MEDINA  
CLINICAL SUPERVISOR

**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

---

**172300****SEA MAR BEHAVIORAL HEALTH - TURNING POINT  
RECOVERY**

113 23RD AVENUE SOUTH  
SEATTLE, WA 98144  
(206) 219-5980

CLAUDIA D'ALLEGRI  
VP, BEHAVIORAL HEALTH

MARCO MEDINA  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

8915 14TH AVE S  
SEATTLE, WA 98108

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

INTENSIVE INPATIENT

---

## KING

---

200434

**SEA MAR BEHAVIORAL HEALTH - WHITE CENTER**

9650 15TH AVENUE SOUTHWEST  
SEATTLE, WA 98106  
(206) 763-5277  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

SARAH DAILEY  
CLINICAL SUPERVISOR

**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

---

017200

**SEADRUNAR**

10344 14TH AVENUE SOUTH  
SEATTLE, WA 98168  
(206) 767-0244

SHERI HEALEY  
EXECUTIVE DIRECTOR

ANGELA GROUT  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 80864  
SEATTLE, WA 98108

**CERTIFIED SERVICES**

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) 535-8876

MARA OBLAK  
PRESIDENT

**MAILING ADDRESS**

4746 11TH AVENUE NE, SUITE 102  
SEATTLE, WA 98105

**CERTIFIED SERVICES**

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](http://WWW.SEATTLECHILDRENS.ORG)

ERIN EASLEY  
DIRECTOR

RAPHAEL BERNIER  
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

---

# KING

---

**200390**      **SEATTLE CHILDREN'S HOSPITAL - BELLEVUE  
PSYCHIATRY AT OVERLAKE**  
1135 116TH AVENUE NE  
BELLEVUE, WA 98004  
(206) 987-2164  
(866) 987-2000  
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG  
[WWW.SEATTLECHILDRENS.ORG](http://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](http://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](http://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](http://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:

FAMILY THERAPY  
GROUP THERAPY  
RECOVERY PEER SUPPORT

---

**005700****SEATTLE INDIAN HEALTH BOARD**

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

SHAWNA FAY GALLAGHER  
BEHAVIORAL HEALTH DIRECTOR

STEPHANIE TOMPKINS  
BH ASSOCIATE DIRECTOR

**MAILING ADDRESS**

611 12TH AVE S  
SEATTLE, WA 98114

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**200242****SENECA FAMILY OF AGENCIES**

210 SOUTH HUDSON STREET, SUITES 312 & 318  
SEATTLE, WA 98134  
(206) 832-8518  
[WWW.SENECAFOA.ORG](http://WWW.SENECAFOA.ORG)

NICOLE NELSON  
EXECUTIVE DIRECTOR

EMILY MARSH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

210 SOUTH HUDSON STREET, SUITES 312 & 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

STEVEN E. SCHUMANN  
ADMINISTRATOR

**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

---

# KING

---

## CERTIFIED SERVICES

MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT

---

200467

### SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.

- KENT  
1019 WEST JAMES STREET, SUITE A  
KENT, WA 98032  
(253) 234-1190  
[WWW.STOPWA.COM](http://WWW.STOPWA.COM)

ANDREW TATUM  
ADMINISTRATOR

LINDA IRISH  
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

---

200271

### SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN

11032 20TH AVENUE NE  
SEATTLE, WA 98125  
(206) 397-5196  
INFO@SEBASEATTLE.COM  
[WWW.SEBASEATTLE.COM](http://WWW.SEBASEATTLE.COM)

DANIELLE SAYEBROOK  
OWNER

### MAILING ADDRESS

11032 20TH AVENUE NE  
SEATTLE, WA 98125

### CERTIFIED SERVICES

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

---

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](http://WWW.SEBASEATTLE.COM)

DANIELLE SAYEBROOK  
OWNER

### MAILING ADDRESS

9714 3RD AVENUE NE, SUITE 206  
SEATTLE, WA 98115

### CERTIFIED SERVICES

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

---

166900

### SOUND FAMILY CENTER LLC

17924 140TH AVENUE NORTHEAST, SUITE 230  
WOODINVILLE, WA 98072  
(425) 419-4800

JOHN TYE  
ADMINISTRATOR

KAELI E. CLARK  
CLINICAL SUPERVISOR

### MAILING ADDRESS

17924 140TH AVENUE NORTHEAST, SUITE 230  
WOODINVILLE, WA 98072

### CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

---

**KING**

---

**106400****SOUND MENTAL HEALTH - AUBURN**

4238 AUBURN WAY NORTH  
AUBURN, WA 98002  
(253) 876-7600  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://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

KATRINA EGNER  
CHIEF PROGRAMS OFFICER

ARDEN JAMES  
SUD CLINICAL SUPERVISOR

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

---

**118300****SOUND MENTAL HEALTH - BELLEVUE BUILDING A**

14216 NORTHEAST 21ST STREET  
BELLEVUE, WA 98007  
(425) 653-4900  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://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

KATRINA EGNER  
CHIEF PROGRAMS OFFICER

THERESA WINTHER  
MH & SUD CLINICAL SUPERVISOR

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

---

**200274****SOUND MENTAL HEALTH - BELLEVUE BUILDING B**

14270 NORTHEAST 21ST STREET  
BELLEVUE, WA 98007  
(425) 653-5000  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://WWW.SMH.ORG)

**MAILING ADDRESS**

1600 E OLIVE ST  
SEATTLE, WA 98122

KATRINA EGNER  
CHIEF PROGRAMS OFFICER

CARA GRESHAM  
SUD CLINICAL SUPERVISOR

---

# KING

---

**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

---

**200442****SOUND MENTAL HEALTH - BROADWAY**

600 BROADWAY, SUITE 170  
SEATTLE, WA 98122  
(206) 302-2200  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://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

---

**105900****SOUND MENTAL HEALTH - CAPITOL HILL MAIN**

1600 EAST OLIVE STREET  
SEATTLE, WA 98122  
(206) 302-2200  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://WWW.SMH.ORG)

KATRINA EGNER  
CHIEF PROGRAMS OFFICER

**MAILING ADDRESS**

1600 E OLIVE ST  
SEATTLE, WA 98122

---

# KING

---

**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](http://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

---

## KING

---

200276

**SOUND MENTAL HEALTH - REDMOND**  
16225 NORTHEAST 87TH STREET, SUITE A-6  
REDMOND, WA 98052  
(425) 653-4960  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://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

---

200443

**SOUND MENTAL HEALTH - TUKWILA**  
6400 SOUTHCENTER BOULEVARD  
TUKWILA, WA 98188  
(206) 444-3600  
CLIENTFEEDBACK@SMH.ORG  
[WWW.SMH.ORG](http://WWW.SMH.ORG)

KATRINA EGNER  
CHIEF PROGRAMS OFFICER

DENNIS MARCERON  
PROGRAM MANAGER

**MAILING ADDRESS**

1600 E OLIVE ST  
SEATTLE, WA 98122

---

# KING

---

## 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](http://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  
CRISIS OUTREACH  
CRISIS TELEPHONE SUPPORT  
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)

---

# KING

---

200278

**SUM OF LEARNING**

2310 130TH AVENUE NE, BUILDING B, SUITE 100  
BELLEVUE, WA 98005  
(425) 954-7243  
INFO@SUMOFLEARNING.COM  
[WWW.SUMOFLEARNING.COM](http://WWW.SUMOFLEARNING.COM)

IVY MAN SUM CHUNG  
EXECUTIVE DIRECTOR

**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

WILLIS LEACH  
ADMINISTRATOR

ALVIN CURRIE  
TREATMENT DIRECTOR

**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

VALERIE LYTLE  
ADMINISTRATOR & NURSE MANAGER

STEVE MORRIS  
CLINICAL SUPERVISOR

**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](http://WWW.SWEDISH.ORG)

BRIAN LIVINGSTON  
MD / CHIEF OPERATING OFFICER

HEATHER COLEMAN  
NURSE EXECUTIVE

**MAILING ADDRESS**

ATTN: CHIEF NURSING OFFICER  
SEATTLE, WA 98107

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

---

## KING

---

**200572**      **TELECARE - KING COUNTY E&T**  
33480 13TH PLACE SOUTH  
FEDERAL WAY, WA 98003  
(253) 285-7101  
(888) 249-2327  
[WWW.TELECARECORP.COM](http://WWW.TELECARECORP.COM)

**MAILING ADDRESS**  
33480 13TH PLACE SOTUH  
FEDERAL WAY, WA 98003

**CERTIFIED SERVICES**

TYVONNE BERRING  
ADMINISTRATOR

RODNEY PRYOR  
CLINICAL DIRECTOR

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

---

**200386**      **THE EMILY PROGRAM - RTF**  
4 NICKERSON STREET, SUITE 300  
SEATTLE, WA 98109  
(888) 364-5977  
[WWW.EMILYPROGRAM.COM](http://WWW.EMILYPROGRAM.COM)

**MAILING ADDRESS**  
1700 WESTLAKE AVE N, SUITE 650  
SEATTLE, WA 98109

**CERTIFIED SERVICES**

REBECCA MAY  
SITE DIRECTOR

MONIQUE DESCHANE  
SITE DIRECTOR

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

---

**200126**      **THE EMILY PROGRAM - SEATTLE**  
1700 WESTLAKE AVENUE NORTH, SUITE 650  
SEATTLE, WA 98109  
(888) 364-5977  
[WWW.EMILYPROGRAM.COM](http://WWW.EMILYPROGRAM.COM)

**MAILING ADDRESS**  
1700 WESTLAKE AVENUE NORTH, SUITE 650  
SEATTLE, WA 98109

**CERTIFIED SERVICES**

JOANNA STAGG  
SITE MANAGER

**MENTAL HEALTH SERVICES:**  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**200447**      **THE EVERGREEN AT NORTHPOINT**  
13037 NORTHEAST BEL RED ROAD, SUITE 102  
BELLEVUE, WA 98005  
(425) 285-7539  
TMCCURE@NORTHPOINTRECOVERY.COM  
[WWW.EVERGREENDRUGREHAB.COM](http://WWW.EVERGREENDRUGREHAB.COM)

**MAILING ADDRESS**  
13037 NORTHEAST BEL RED ROAD, SUITE 102  
BELLEVUE, WA 98005

**CERTIFIED SERVICES**

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

THOMAS HAMMAN  
ADMINISTRATOR

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

---

# KING

---

004000

**THERAPEUTIC HEALTH SERVICES - BELLEVUE**

1412 140TH PLACE NORTHEAST  
BELLEVUE, WA 98007  
(425) 747-7892

JEREMY PETERSON  
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 TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

150900

**THERAPEUTIC HEALTH SERVICES - KENT**

24823 SOUTH PACIFIC HIGHWAY  
KENT, WA 98032  
(253) 681-0010  
(253) 681-0011

HOLLIE CHRISTIANCY  
BRANCH MANAGER

PHILIP JONES  
SUD CLINICAL SUPERVISOR

**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

---

083500

**THERAPEUTIC HEALTH SERVICES - SEATTLE RAINIER AVENUE**

5802 RAINIER AVENUE SOUTH  
SEATTLE, WA 98118  
(206) 723-1980

RANDON AEA  
BRANCH MANAGER

NORMAN JOHNSON  
EXECUTIVE DIRECTOR

**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

---

# KING

---

104400

**THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET**

1305 SENECA STREET  
SEATTLE, WA 98101  
(206) 323-0934

GEORGE CALDERON  
BRANCH MANAGER

NORMAN JOHNSON  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

1116 SUMMIT AVE  
SEATTLE, WA 98101

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
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

---

015800

**THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE**

1116 SUMMIT AVENUE  
SEATTLE, WA 98101  
(206) 323-0930

GEORGE CALDERON  
BRANCH MANAGER

NORMAN JOHNSON  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

ATTN: CYNTHIA M. DUAY  
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

---

016900

**THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH & FAMILY**

1901 MARTIN LUTHER KING JR WAY SOUTH  
SEATTLE, WA 98144  
(206) 322-7676

ROGER IINO  
BRANCH MANAGER

NORMAN JOHNSON  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

1901 MARTIN LUTHER KING JR WAY SOUTH  
SEATTLE, WA 98144

**CERTIFIED SERVICES**

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

# 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](http://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) 883-2051  
INFO@TRANSITIONALRESOURCES.ORG  
[WWW.TRANSITIONALRESOURCES.ORG](http://WWW.TRANSITIONALRESOURCES.ORG)

DARCELL SLOVEK-WALKER  
CEO

JULIA WATKINS  
CLINICAL DIRECTOR

**MAILING ADDRESS**

2970 SW AVALON WAY  
SEATTLE, WA 98126

---

# KING

---

## 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**

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT

---

112700

### **UNITED TREATMENT AND THERAPY**

12737 BEL-RED ROAD, SUITE 260  
BELLEVUE, WA 98005  
(425) 688-0033

WILLIAM E. SWAILES  
ADMINISTRATOR

HEIDI ROBIN SWAILES  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

PO BOX 1525  
BELLEVUE, WA 98009-1525

### **CERTIFIED SERVICES**

#### SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT

---

200316

### **UW HARING CENTER**

1981 NORTHEAST COLUMBIA ROAD  
SEATTLE, WA 98195  
(206) 543-4011  
BETHM8@GMAIL.COM  
[WWW.HARINGCENTER.ORG](http://WWW.HARINGCENTER.ORG)

ILENE SCHWARTZ  
DIRECTOR

TARA GOODINHO  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

1981 NE COLUMBIA ROAD  
SEATTLE, WA 98195

### **CERTIFIED SERVICES**

### MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

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

---

# KING

---

**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](http://WWW.VALLEYCITIES.ORG)

SHEKH ALI  
ACTING CEO

HESUSA "SUSIE" KROLL  
REGIONAL OPERATIONS DIRECTOR (MH CS)

**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 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

---

**164700****VALLEY CITIES COUNSELING & CONSULTATION - DES MOINES**

26401 PACIFIC HIGHWAY SOUTH  
DES MOINES, WA 98198  
(253) 833-7444

SHEKH ALI  
ACTING CEO

ROSE BALDRIDGE  
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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**200405****VALLEY CITIES COUNSELING & CONSULTATION -****ENUMCLAW**

1335 COLE STREET  
ENUMCLAW, WA 98022  
(425) 336-4100  
(253) 833-7444  
[WWW.VALLEYCITIES.ORG](http://WWW.VALLEYCITIES.ORG)

SHEKH ALI  
ACTING CEO

LYNN ALLAR  
MH CLINICAL SUPERVISOR/SITE DIRECTOR

**MAILING ADDRESS**

325 W GOWE ST  
KENT, WA 98032

---

# KING

---

**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

SHEKH ALI  
ACTING CEO

REBEKAH POWERS  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

325 WEST GOWE STREET  
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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**091000****VALLEY CITIES COUNSELING & CONSULTATION - KENT**

325 WEST GOWE STREET  
KENT, WA 98032  
(253) 833-7444

SHEKH ALI  
ACTING 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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200520****VALLEY CITIES COUNSELING & CONSULTATION - LAKE CITY CLINIC**

12736 33RD AVENUE NORTHEAST  
SEATTLE, WA 98125  
(253) 833-7444  
(206) 963-3145  
[WWW.VALLEYCITIES.ORG](http://WWW.VALLEYCITIES.ORG)

SHEKH ALI  
ACTING CEO

HESUSA "SUSIE" KROLL  
REGIONAL OPERATIONS DIRECTOR (MH CS)

**MAILING ADDRESS**

325 W GOWE ST  
KENT, WA 98032

---

# KING

---

**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](http://WWW.VALLEYCITIES.ORG)

SHEKH ALI  
ACTING CEO

JESSICA WILLIAMS  
CLINIC MANAGER (MH CS)

**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 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

---

**164600****VALLEY CITIES COUNSELING & CONSULTATION - RENTON**

221 WELLS AVENUE SOUTH  
RENTON, WA 98057  
(253) 833-7444

KENNETH TAYLOR  
CEO

ROSE BALDRIDGE  
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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**174600****VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE MERIDIAN AVENUE**

10521 MERIDIAN AVENUE NORTH  
SEATTLE, WA 98133  
(253) 833-7444

KENNETH TAYLOR  
CEO

ROSE BALDRIDGE  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

325 W GOWE ST  
KENT, WA 98032

---

# KING

---

**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

KENNETH TAYLOR  
CEO

ROSE BALDRIDGE  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

325 W GOWE ST  
KENT, WA 98032

**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

---

**200134****VASHON YOUTH AND FAMILY SERVICES**

20110 VASHON HIGHWAY SOUTHWEST  
VASHON, WA 98070  
(206) 463-5511  
INFO@VYFS.ORG  
[WWW.VYFS.ORG](http://WWW.VYFS.ORG)

BARBARA GARRETT  
DIRECTOR OF CLINICAL SERVICES

DIANE HOPKINS  
SUD CLINICAL SUPERVISOR

**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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**006400****VETERANS ADMINISTRATION PUGET SOUND HEALTH  
CARE SYSTEM - SEATTLE**

1660 SOUTH COLUMBIAN WAY  
SEATTLE, WA 98108  
(206) 764-2123

CARL RIMMELE, PH.D  
DIRECTOR

**MAILING ADDRESS**

ATTN: BLAKE TODER  
SEATTLE, WA 98108-1597

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT

---

## KING

---

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](http://WWW.WAPISEATTLE.ORG)

AILEEN DE LEON  
EXECUTIVE DIRECTOR

CHIA-CHI WANG  
CLINICAL DIRECTOR

**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

---

078300

**WAPI COMMUNITY SERVICES - MAIN**  
861 POPLAR PLACE SOUTH  
SEATTLE, WA 98144  
(844) 987-9274  
INFO@WAPISEATTLE.ORG  
[WWW.WAPISEATTLE.ORG](http://WWW.WAPISEATTLE.ORG)

AILEEN DE LEON  
EXECUTIVE DIRECTOR

CHIA-CHI WANG  
CLINICAL DIRECTOR

**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

---

200148

**WASHINGTON NATIONAL COUNSELING, LLC**  
17121 SOUTHEAST 270TH PLACE  
COVINGTON, WA 98042  
(253) 631-1725  
[WWW.WNC-COUNSELING.COM](http://WWW.WNC-COUNSELING.COM)

IFEANYI C. CHUKWU  
PRESIDENT/CLINICAL DIRECTOR

**MAILING ADDRESS**

PO BOX 8862  
COVINGTON, WA 98042

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY

---

167200

**YMCA OF GREATER SEATTLE**  
2100 24TH AVENUE SOUTH, SUITE 260  
SEATTLE, WA 98144  
(206) 382-5340  
[WWW.SEATTLEYMCA.ORG](http://WWW.SEATTLEYMCA.ORG)

ROGER IINO  
ASSOCIATE EXECUTIVE DIRECTOR

STUART YOUNG  
MH CLINICAL SUPERVISOR

**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

---

# KING

---

200002

**YOU GROW GIRL!**

10215 LAKE CITY WAY NE, SUITE H  
SEATTLE, WA 98125  
(206) 643-9622  
(800) 833-6384  
INFO@ANNARA.ORG  
[WWW.ANNARA.ORG](http://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-MCGOUGAN  
EXECUTIVE DIRECTOR

KRISTIE NEKLASON  
CLIN SUP / SUB AB PGM MGR

**MAILING ADDRESS**

999 164TH AVENUE NE  
BELLEVUE, WA 98008

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

006501

**YOUTH EASTSIDE SERVICES - KIRKLAND**

11829 97TH AVE NE  
KIRKLAND, WA 98034  
(425) 747-4937

PATTI SKELTON-MCGOUGAN  
EXECUTIVE DIRECTOR

KRISTIE NEKLASON  
CLIN SUP / SUB AB PGM MGR

**MAILING ADDRESS**

999 164TH AVE NE  
BELLEVUE, WA 98008

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

073500

**YOUTH EASTSIDE SERVICES - REDMOND**

15600 REDMOND WAY, SUITE 102  
REDMOND, WA 98052  
(425) 869-6036  
(425) 747-4937

PATTI SKELTON-MCGOUGAN  
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

BETTY KASSUHN  
ADMINISTRATOR

**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

---

**027300****AGAPÉ UNLIMITED**

4841 AUTO CENTER WAY, SUITE 101  
BREMERTON, WA 98312  
(360) 373-1529

SARA MAREZ-FIELDS  
EXECUTIVE DIRECTOR

TODD BENSON  
TREATMENT DIRECTOR

**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

---

**118600****CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC**

2817 WHEATON WAY, SUITE 205  
BREMERTON, WA 98310  
(360) 373-0155

LINDSY MCGOWAN-ANDERSON  
ADMINISTRATOR

MIKE STONE  
CLINICAL SUPERVISOR

**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

---

**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](http://WWW.CCSWW.ORG/FAMILYPRESERVATION)

MARY STONE SMITH  
VICE PRESIDENT

DAVE KUCKLICK  
SITE DIRECTOR

---

# 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](http://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.

**MAILING ADDRESS**

5455 ALMIRA DRIVE NE  
BREMERTON, WA 98311

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

INPATIENT EVALUATION AND TREATMENT – CHILDREN

---

**200229****KITSAP MENTAL HEALTH SERVICES - ADULT  
INPATIENT**

5455 ALMIRA DRIVE NE  
BREMERTON, WA 98311

JOE ROSZAK  
EXEC. DIR.

**MAILING ADDRESS**

5455 ALMIRA DRIVE NE  
BREMERTON, WA 98311

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

INPATIENT EVALUATION AND TREATMENT - ADULT

---

**018400****KITSAP MENTAL HEALTH SERVICES - MAIN**

5455 ALMIRA DRIVE NE  
BREMERTON, WA 98311  
(360) 373-5031

[WWW.KITSAPMENTALHEALTH.ORG](http://WWW.KITSAPMENTALHEALTH.ORG)

JOE ROSZAK  
CEO

STACEY DEVENNEY  
CCO (MH & SUD)

**MAILING ADDRESS**

5455 ALMIRA DR NE  
BREMERTON, WA 98311

**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

---

**168700**      **KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD**  
2535 MITCHELL ROAD SE      JOE ROSZAK  
PORT ORCHARD, WA 98366      CEO  
(360) 373-5031  
  
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

---

**174300**      **KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD**  
900 SHERIDAN ROAD, SUITES 103 &AMP; 106      JOE ROSZAK  
BREMERTON, WA 98310      CEO  
(360) 373-5031  
  
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

---

**200338**      **KITSAP MENTAL HEALTH SERVICES - WHEATON WAY**  
4040 WHEATON WAY, SUITES 108, 112, 204, 206, 210      JOE ROSZAK  
BREMERTON, WA 98310      CEO  
(360) 373-5031  
[WWW.KITSAPMENTALHEALTH.ORG](http://WWW.KITSAPMENTALHEALTH.ORG)  
  
STACEY DEVENNEY  
CHIEF CLINICAL DIRECTOR  
  
**MAILING ADDRESS**  
5455 ALMIRA DR NE  
BREMERTON, WA 98311

---

# KITSAP

---

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
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

---

**006700****KITSAP RECOVERY CENTER - INPATIENT**

661 TAYLOR AVENUE  
PORT ORCHARD, WA 98366  
(360) 337-4625  
[WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM](http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM)

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

---

**200505****KITSAP RECOVERY CENTER - OUTPATIENT**

1026 SIDNEY AVENUE  
PORT ORCHARD, WA 98366  
(360) 337-5725  
[WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM](http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM)

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

---

**006900****NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)**

ONE BOONE ROAD  
BREMERTON, WA 98312  
(360) 475-5350  
(360) 475-5314

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

---

**007000****OLALLA GUEST LODGE**

12850 LALA COVE LANE SE  
OLALLA, WA 98359  
(253) 857-6201  
(800) 882-6201  
MAIL@OLALLA.ORG OR RECOVERY@OLALLA.ORG  
[WWW.OLALLA.ORG](http://WWW.OLALLA.ORG)

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](http://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

W. KENT LOVELESS  
ADMINISTRATOR

**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

ONDREA MCCOURRY  
EXECUTIVE DIRECTOR

RONDA FISHER  
CLINICAL SUPERVISOR

**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

ONDREA MCCOURRY  
EXECUTIVE DIRECTOR

DARCY ALLBEE  
CLINICAL SUPERVISOR

**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

---

## KITTITAS

---

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](http://WWW.BARTHCLINIC.COM)

JAMES BARTH  
ADMINISTRATOR

LIZ RICH  
CLINICAL DIRECTOR

**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](http://WWW.COMPHC.ORG)

RON GENGLER  
COO

**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

RON GENGLER  
COO

**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

---

167000

**COMPREHENSIVE HEALTHCARE - ELLENSBURG PEARL STREET**

707 NORTH PEARL STREET, SUITE H  
ELLENSBURG, WA 98926  
(509) 925-9861

RON GENGLER  
ADMINISTRATOR

REBECCA TWOHY  
SUD CLINICAL SUPERVISOR

**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

---

164500

**ELLIE LORENZ COUNSELING AND CONSULTING SERVICE**

514 EAST 3RD STREET  
CLE ELUM, WA 98922  
(509) 260-0068

ELLIE LORENZ  
OWNER/ADMINISTRATOR

**MAILING ADDRESS**

9325 UPPER PEOH POINT ROAD  
CLE ELUM, WA 98922

**CERTIFIED SERVICES**

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

---

174000

**MERIT RESOURCE SERVICES - ELLENSBURG**

200 EAST 3RD AVENUE  
ELLENSBURG, WA 98926  
(509) 925-9821  
LORETTAO@MERITRESOURCES.ORG  
[WWW.MERITRESOURCES.ORG](http://WWW.MERITRESOURCES.ORG)

DAVID L. WILSON  
EXECUTIVE DIRECTOR

EMILY B. NELSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1039  
ELLENSBURG, WA 98926

**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

---

## KLICKITAT

---

115800

**COMPREHENSIVE HEALTHCARE - GOLDENDALE**

112 WEST MAIN STREET  
GOLDENDALE, WA 98620  
(509) 773-5801

RON GENGLER  
ADMINISTRATOR

REBECCA TWOHY  
SUD CLINICAL SUPERVISOR

---

# 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

RON GENGLER  
ADMINISTRATOR

REBECCA TWOHY  
SUD CLINICAL SUPERVISOR

**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

---

# 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](http://WWW.ABHSINC.NET)

TONY PRENTICE  
ADMINISTRATOR

ANGELA MELLO  
MH & SUD 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

MENTAL HEALTH SERVICES:

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

---

# LEWIS

---

146500

**AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CHEHALIS**  
500 SOUTHEAST WASHINGTON AVENUE  
CHEHALIS, WA 98532  
(360) 266-5029  
(866) 729-8038  
[WWW.AMERICANBEHAVIORALHEALTH.NET](http://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  
INTENSIVE INPATIENT  
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](http://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](http://WWW.CASCADEMENTALHEALTH.ORG)

RICHARD STRIDE  
CEO

KAREN ROSE  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

2428 W REYNOLDS AVE  
CENTRALIA, WA 98531-4554

---

# LEWIS

---

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT  
LEVEL I 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  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200300****CASCADE MENTAL HEALTH CARE - MORTON**

228 WEST MAIN STREET  
MORTON, WA 98356  
(360) 330-9044

[WWW.CASCADEMENTALHEALTH.ORG](http://WWW.CASCADEMENTALHEALTH.ORG)

RICHARD STRIDE  
CEO

MATT PATTEN  
CCO/MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

2428 REYNOLDS AVE  
CENTRALIA, WA 98531

**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 TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200426****CORE HEALTH - CENTRALIA**

104 SOUTH ROCK STREET  
CENTRALIA, WA 98531  
(360) 200-5419

CAMERONC@CHOBLV.ORG

[WWW.COREHEALTHSERVICES.ORG](http://WWW.COREHEALTHSERVICES.ORG)

FRANK MORRISON  
CEO

KATIE ALLEN  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 2394  
LONGVIEW, WA 98632

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**200370****CORRECT CARE, LLC**

20311 OLD HIGHWAY 9 SW  
CENTRALIA, WA 98531  
(844) 552-4814

MANFERNANDEZ@CORRECTCARERS.COM

[WWW.CORRECTCARERS.COM](http://WWW.CORRECTCARERS.COM)

CANDICE NOBLE  
INTERIM PROGRAM ADMINISTRATOR

BEVERLY E. ALLEN  
PSYCHIATRIST

---

# LEWIS

---

**MAILING ADDRESS**

800 FAIRWAY DR STE 490  
DEERFIELD BEACH, FL 33441

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

COMPETENCY EVALUATION & RESTORATION TREATMENT

---

**200492****EUGENIA CENTER - CHEHALIS BRANCH**

151 NORTH MARKET BOULEVARD, BUILDING C  
CHEHALIS, WA 98532  
(360) 948-0203  
INFO@EUGENIACENTER.ORG  
[WWW.EUGENIACENTER.ORG](http://WWW.EUGENIACENTER.ORG)

NISTON FRANCO  
EXECUTIVE DIRECTOR

ESMERALDA LYBRAND  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1371  
CHEHALIS, WA 98532

**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  
RECOVERY PEER SUPPORT

---

**054000****EUGENIA CENTER - CHEHALIS MAIN**

121 NORTHWEST CHEHALIS AVENUE  
CHEHALIS, WA 98532  
(360) 740-9767  
INFO@EUGENIACENTER.ORG  
[WWW.EUGENIACENTER.ORG](http://WWW.EUGENIACENTER.ORG)

NISTON FRANCO  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

PO BOX 1371  
CHEHALIS, WA 98532

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**172600****EUGENIA CENTER - MOSSYROCK**

230 EAST STATE STREET  
MOSSYROCK, WA 98564  
(360) 983-3227  
INFO@EUGENIACENTER.ORG  
[WWW.EUGENIACENTER.ORG](http://WWW.EUGENIACENTER.ORG)

NISTON FRANCO  
EXECUTIVE DIRECTOR

ESMERALDA LYBRAND  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 87  
MOSSYROCK, WA 98564

**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  
RECOVERY PEER SUPPORT

---

# LEWIS

---

**200458**      **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](http://WWW.CIHEALTHSERVICES.COM)

**MAILING ADDRESS**  
PO BOX 1447  
CHEHALIS, WA 98532

**CERTIFIED SERVICES**

MARC BOLLINGER  
CEO/ADMINISTRATOR

RON LEHTO  
CLINICAL SUPERVISOR

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

---

**057200**      **GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT**  
375 SOUTHWEST 11TH STREET  
CHEHALIS, WA 98532  
(360) 740-3420

**MAILING ADDRESS**  
375 SW 11TH ST, MS: S21-5  
CHEHALIS, WA 98532

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

DAVID REINKE  
JUVENILE REHABILITATION COORDINATOR

SHIRLEY BIVINS  
JUVENILE REHABILITATION COORDINATOR

---

**057600**      **NEW DIRECTIONS COUNSELING - CHEHALIS**  
1956 NORTHEAST KRESKY ROAD  
CHEHALIS, WA 98532  
(360) 740-4380  
(360) 740-1807

**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

SCOTT M. DICKINSON  
ADMINISTRATOR

UNKNOWN 11/5/09  
CLINICAL SUPERVISOR

---

**101800**      **TRUE NORTH-ESD 113 - LEWIS**  
SUITE C2-1, LEWIS COUNTY MALL  
CHEHALIS, WA 98532  
(360) 748-2274  
SMUELLER@ESD113.ORG  
[WWW.ESD113.ORG/TRUENORTH](http://WWW.ESD113.ORG/TRUENORTH)

**MAILING ADDRESS**  
6005 TYEE DR SW  
TUMWATER, WA 98512

ERIN RIFFE  
ADMINISTRATOR

JACKIE YEE  
INTERM CLINICAL SUPERVISOR

---

## 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](http://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](http://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

---

# MASON

---

**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](http://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 PEER SUPPORT  
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](http://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 PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200488****CONSEJO COUNSELING AND REFERRAL SERVICE - SHELTON**

627 WEST FRANKLIN STREET  
SHELTON, WA 98584  
(206) 461-4880  
EXEC@CONSEJOCOUNSELING.ORG  
[WWW.CONSEJONEW.CONSEJOCOUNSELING.ORG](http://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

---

# MASON

---

**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

---

**125000****DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN**

3420 NORTHEAST SAND HILL ROAD  
BELFAIR, WA 98528  
(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

---

**077700****DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON**

2321 WEST DAYTON AIRPORT ROAD  
SHELTON, WA 98584  
(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

---

**051401****NEW DIRECTIONS COUNSELING - SHELTON**

506 WEST FRANKLIN STREET  
SHELTON, WA 98584  
(360) 427-5232

SCOTT M. DICKINSON  
ADMINISTRATOR

FRED DICKINSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 906  
SHELTON, WA 98584

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**101500****NORTHWEST RESOURCES II, INC. - SHELTON**

235 SOUTH 3RD STREET  
SHELTON, WA 98584  
(360) 426-0890  
INFO@NWRII.COM  
[WWW.NWRII.COM](http://WWW.NWRII.COM)

DENNIS NEAL  
ADMINISTRATOR

JENNIFER CASTANETO  
SUD CLINICAL SUPERVISOR

---

# MASON

---

**MAILING ADDRESS**

2708 WESTMOOR CT SW  
OLYMPIA, WA 98502

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**048500****SKOKOMISH H.O.P.E. ALCOHOL & DRUG PROGRAM**

NORTH 100 TRIBAL CENTER ROAD  
SHELTON, WA 98584  
(360) 877-2008  
(360) 426-5755  
[WWW.SKOKOMISH.ORG/HEALTH-CLINIC](http://WWW.SKOKOMISH.ORG/HEALTH-CLINIC)

DENESE LACLAIR  
HEALTH DIRECTOR

PETYA PACHEVA  
BEHAVIORAL HEALTH PROGRAM MANAGER

**MAILING ADDRESS**

NORTH 100 TRIBAL CENTER ROAD  
SHELTON, WA 98584

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**147800****SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.**

- SHELTON  
611 WEST COTA STREET  
SHELTON, WA 98584  
(360) 426-5654

ANDREW TATUM  
ADMINISTRATOR

CAROL NEWTON  
CLINICAL SUPERVISOR

**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

---

**037400****SQUAXIN ISLAND BEHAVIORAL HEALTH OUTPATIENT PROGRAM**

3760 SOUTHEAST OLD OLYMPIC HIGHWAY  
SHELTON, WA 98584  
(360) 426-1582  
(360) 482-2674

GREG TWIDDY  
BEHAVIORAL HEALTH MANAGER

**MAILING ADDRESS**

3760 SE OLD OLYMPIA HWY  
SHELTON, WA 98584

**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

---

## MASON

---

168500

**TELECARE - MASON MOBILE OUTREACH & INTENSIVE  
CASE MANAGEMENT TEAM**

601 WEST FRANKLIN STREET, SUITE B  
SHELTON, WA 98584  
(360) 462-3016  
[TELECARECORP.COM](http://TELECARECORP.COM)

TYVONNE BERRING  
ADMINISTRATOR

**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

ERIN RIFFE  
ADMINISTRATOR

JACKIE YEE  
INTERM CLINICAL SUPERVISOR

**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

ALISON BALL  
HEALTH SERVICES DIRECTOR

CHARLENE SAM  
CLINICAL SUPERVISOR

**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

ALISON BALL  
ADMINISTRATOR

CHARLENE SAM  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 150  
NESPELEM, WA 99155-0150

---

## OKANOAGAN

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**007800****OKANOAGAN BEHAVIORAL HEALTHCARE, INC.**

1007 KOALA DRIVE  
OMAK, WA 98841  
(509) 826-6191  
LAPPLE@OKBHC.ORG  
[WWW.OKBHC.ORG](http://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) 272-9199  
(360) 665-4494  
INFO@FREEBYTHESEA.COM  
[WWW.FREEBYTHESEA.COM](http://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](http://WWW.KLEANTREATMENTCENTERS.COM)

LAURIE BECK  
DIRECTOR OF OPERATIONS

GREGORY LIPPERT  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

211 PIONEER RD W  
LONG BEACH, WA 98631

---

## PACIFIC

---

**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](http://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:

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

ADAM R. MARQUIS  
CEO

ELIZABETH LIMBOCKER  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

2204 PACIFIC HIGHWAY N  
LONG BEACH, WA 98631

**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

ADAM R. MARQUIS  
CEO

ELIZABETH LIMBOCKER  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 65  
SOUTH BEND, WA 98586-0065

**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](http://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

---

**169000****PEND OREILLE COUNTY COUNSELING SERVICES -  
METALINE FALLS**

302 PARK STREET  
METALINE FALLS, WA 99153  
(509) 447-5651  
[WWW.PENDOREILLE.ORG](http://WWW.PENDOREILLE.ORG)

ANNABELLE S. PAYNE  
DIRECTOR

THERESA ALLEN  
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

**MAILING ADDRESS**

PO BOX 5055  
NEWPORT, WA 99156-5055

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

## PIERCE

---

**173500****A CHANGE INTO RECOVERY, LLC**

719 EAST MAIN AVENUE, SUITE C  
PUYALLUP, WA 98372  
(253) 841-8165  
(253) 841-4818

DAVID A. HARRIS  
ADMINISTRATOR

**MAILING ADDRESS**

719 E MAIN AVE, STE C  
PUYALLUP, WA 98372

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**148500****ABRACADABRA RECOVERY CENTER**

18407 PACIFIC AVENUE SOUTH  
SPANAWAY, WA 98387  
(253) 271-7615

JOHN DORMAN  
ADMINISTRATOR

LESLIE J. THIEME  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

18407 PACIFIC AVE S  
SPANAWAY, WA 98387

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**PIERCE**

---

200561

**ADONAI COUNSELING & EMPLOYMENT, INC.**

4104 SOUTH M STREET  
TACOMA, WA 98418  
(253) 777-1434  
(253) 503-1572  
[WWW.ADONAICOUNSELING.COM](http://WWW.ADONAICOUNSELING.COM)

ARNITA JONES  
ADMINISTRATOR

RUTH CURRAH  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

4104 SOUTH M STREET  
TACOMA, WA 98418

**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  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY EMPLOYMENT SUPPORT

---

145100

**AL'TA COUNSELING AND TESTING**

702 BROADWAY, SUITE 102  
TACOMA, WA 98402  
(253) 365-2000

JEREMY WEKELL  
ADMINISTRATOR

**MAILING ADDRESS**

702 BROADWAY STE 102  
TACOMA, WA 98402

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

134100

**ALTERNATIVE COUNSELING - SPANAWAY**

17002 PACIFIC AVENUE SOUTH  
SPANAWAY, WA 98387  
(253) 538-2323

BETTY KASSUHN  
ADMINISTRATOR

TORRI VOLEZ  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

POST OFFICE BOX 685  
SPANAWAY, WA 98387

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

073600

**ARMY SUBSTANCE ABUSE PROGRAM (ASAP)**

BUILDING 2008B NORTH 3RD AVENUE  
JOINT BASE LEWIS-MCCHORD, WA 98433  
(253) 967-2202  
(253) 967-6765

JOAN H. JOHNSON  
ASAP ADMINISTRATIVE OFFICER

DR. JAMES TILLE  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

BOX 339500, MS: 85 (3RD AND LIGGETT)  
JOINT BASE LEWIS-MCCHORD, WA 98433

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

## PIERCE

---

145700

**ASIAN COUNSELING TREATMENT SERVICES (ACTS)**

8811 SOUTH TACOMA WAY, SUITE 106  
LAKEWOOD, WA 98499  
(253) 302-3826

TAE SON LEE  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

8811 S TACOMA WAY, STE 106  
LAKEWOOD, WA 98499

**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:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

054700

**CASTEELE, WILLIAMS & ASSOCIATES**

**COMPREHENSIVE BEHAVIORAL HEALTH, INC. - MAIN**

711 SOUTH 25TH STREET, SUITE B  
TACOMA, WA 98405  
(253) 536-2881  
CWACOUNSELING@HOTMAIL.COM

JOHN L. CASTEELE, JR., PH.D.  
EXECUTIVE DIRECTOR

LOUIS WESLEY HORTON  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

711 SOUTH 25TH STREET, SUITE B  
TACOMA, WA 98405

**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

---

200489

**CATHOLIC COMMUNITY SERVICES - RUSTON**

5219 NORTH SHIRLEY STREET, SUITE 002  
RUSTON, WA 98407  
(253) 507-7231  
STEPHANIETH@CCSWW.ORG  
[WWW.CCSWW.ORG](http://WWW.CCSWW.ORG)

MARY STONE SMITH  
VICE PRESIDENT

DAVID KUCKLICK  
SITE DIRECTOR/CLINICAL SUPERVISOR

**MAILING ADDRESS**

1001 N J STREET  
TACOMA, WA 98403

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS OUTREACH  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

200144

**CATHOLIC COMMUNITY SERVICES - TACOMA 14TH STREET**

702 SOUTH 14TH STREET  
TACOMA, WA 98405  
(253) 502-2603  
INFO@CCSWW.ORG  
[WWW.CCSWW.ORG](http://WWW.CCSWW.ORG)

MARY STONE SMITH  
VICE PRESIDENT

**MAILING ADDRESS**

1001 N J STREET  
TACOMA, WA 98403

---

# PIERCE

---

## CERTIFIED SERVICES

MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
RECOVERY PEER SUPPORT

---

200019

### CATHOLIC COMMUNITY SERVICES - TACOMA MAIN

5410 NORTH 44TH STREET  
TACOMA, WA 98407  
(253) 759-9544  
INFO@CCSWW.ORG  
[WWW.CCSWW.ORG](http://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

---

200143

### CATHOLIC COMMUNITY SERVICES - UNIVERSITY PLACE

7610 40TH STREET WEST, SUITE 300  
UNIVERSITY PLACE, WA 98466  
(253) 830-6242  
CCSFAMILYPRESERVATIONINFO@CCSWW.ORG  
[WWW.CCSWW.ORG](http://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

---

090800

### 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

---

## PIERCE

---

**200298**      **COMPREHENSIVE LIFE RESOURCES - ADULT  
OUTPATIENT**  
1305 TACOMA AVENUE SOUTH  
TACOMA, WA 98402  
(253) 396-5800  
[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**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

KIM ZACHER  
CEO

KATHY HAGEN  
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

---

**200184**      **COMPREHENSIVE LIFE RESOURCES - GIG HARBOR**  
5262 OLYMPIC DRIVE NW, SUITE A  
GIG HARBOR, WA 98335  
(253) 396-5800  
[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**MAILING ADDRESS**  
1201 S PROCTOR ST  
TACOMA, WA 98405

**CERTIFIED SERVICES**

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

KIM ZACHER  
CEO

KATHY HAGEN  
DIRECTOR OF ADULT SERVICES

---

**200182**      **COMPREHENSIVE LIFE RESOURCES - MAIN**  
1201 SOUTH PROCTOR STREET  
TACOMA, WA 98405  
(253) 396-5800  
[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**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  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

KIM ZACHER  
CEO

KATHY HAGEN  
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

---

**200183**      **COMPREHENSIVE LIFE RESOURCES - PARK PLACE RTF**  
610 YAKIMA AVENUE  
TACOMA, WA 98405  
(253) 396-5881  
ASTARKEY@CMHSHARE.ORG  
[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**MAILING ADDRESS**  
1201 S PROCTOR ST  
TACOMA, WA 98405

**CERTIFIED SERVICES**

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

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](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**MAILING ADDRESS**

TACOMA, WA 98405

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

KIM ZACHER  
CEO

KATHY HAGEN  
OUTPATIENT SERVICES DIRECTOR (MH CS)

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

**200297****COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER**

1424 TACOMA AVENUE SOUTH  
TACOMA, WA 98402  
(253) 396-5800

[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

**MAILING ADDRESS**

1201 S PROCTOR ST  
TACOMA, WA 98405

**CERTIFIED SERVICES**

KIM ZACHER  
CEO

KATHY HAGEN  
DIRECTOR OF ADULT 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

**MAILING ADDRESS**

5915 ORCHARD ST W UNIT B  
TACOMA, WA 98466

MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR

YVONNE ELMENDORF  
CLINICAL SUPERVISOR

---

## PIERCE

---

**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.LILSAUCIER@CROSSROADSTREATMENT.ORG  
[WWW.CROSSROADSTREATMENT.ORG](http://WWW.CROSSROADSTREATMENT.ORG)

JEREMIAH SAUCIER  
OWNER/ADMINISTRATOR

**MAILING ADDRESS**

4928 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 BUJACICH 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

---

## PIERCE

---

**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](http://WWW.GLMHC.ORG)

TERRI CARD  
PRESIDENT & CEO

CLAUDIA REYES GARZA  
CLINICAL MANAGER

**MAILING ADDRESS**

9330 59TH AVE SW  
LAKEWOOD, WA 98499

---

# PIERCE

---

## 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/](http://www.glmhc.org/)

TERRI CARD  
PRESIDENT & CEO

GLENN CZERWINSKI  
VP OF CLINICAL OPERATIONS (MH CS)

### **MAILING ADDRESS**

9330 59TH AVE SW  
LAKEWOOD, WA 98499

### **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](http://www.glmhc.org/)

TERRI CARD  
PRESIDENT & CEO

DEANNA CARRON  
MH CLINICAL SUPERVISOR

### **MAILING ADDRESS**

9330 59TH AVE SW  
LAKEWOOD, WA 98499

### **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

TERRI CARD  
PRESIDENT & CEO

### **MAILING ADDRESS**

9330 59TH AVE SW  
LAKEWOOD, WA 98499

---

# PIERCE

---

## 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  
RESIDENTIAL TREATMENT FACILITY

---

200364

### **GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC**

113 170TH STREET SOUTH  
SPANAWAY, WA 98387  
(253) 535-1935  
[WWW.GLMHC.ORG](http://WWW.GLMHC.ORG)

TERRI CARD  
PRESIDENT & CEO

LATONYA LITTLETON  
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  
RECOVERY PEER SUPPORT

---

200055

### **GREATER LAKES RECOVERY CENTER E&T**

14016 SOUTH A STREET  
TACOMA, WA 98444

### **MAILING ADDRESS**

14016 SOUTH A STREET  
TACOMA, WA 98444

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

---

200493

### **HOLISTIC RECOVERY FOR MOTHERS**

2550 SOUTH G STREET  
TACOMA, WA 98405  
(253) 383-7710  
(253) 257-7110  
TREATMENT@NEWPHOEBEHOUSE.ORG  
[WWW.HOLISTICRECOVERYFORMOTHERS.ORG](http://WWW.HOLISTICRECOVERYFORMOTHERS.ORG)

NAOMI VILLANO  
EXECUTIVE DIRECTOR

MELISSA LAWS  
CLINICAL DIRECTOR (MH & SUD)

### **MAILING ADDRESS**

PO BOX 5245  
TACOMA, WA 98415

## CERTIFIED SERVICES

### SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

200053

### **HOPESPARKS**

6424 NORTH 9TH STREET  
TACOMA, WA 98406

JOSEPH LEROY  
ADMINISTRATOR

---

## 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](http://WWW.IMAGINEBEHAVIOR.COM)

DR. CHARNA MINTZ  
EXECUTIVE DIRECTOR

RYAN HANNIG  
PROGRAM DIRECTOR

**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

JENNIFER LAPOINTE  
ACTING DIRECTOR/ADMINISTRATOR

SHAWN SEVERSE  
CLINICAL SUPERVISOR

**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](http://WWW.LEAPSANDBEYOND.COM)

STACEY HOTTER-KNIGHT  
PRESIDENT

**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

ALANA LEWIS  
ADMINISTRATOR

PENNY SULLIVAN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

10322 NE 132ND ST  
KIRKLAND, WA 98034-2829

---

## PIERCE

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**004604****LAKESIDE-MILAM RECOVERY CENTERS, INC. - TACOMA**

3315 SOUTH 23RD STREET  
TACOMA, WA 98405  
(253) 272-2242

JAY YOURGLICH  
ADMINISTRATOR

PEDRO RUIZ  
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

---

**200238****MAGNOLIA BEHAVIOR THERAPY - DUPONT**

1570 WILMINGTON DRIVE, SUITE 220  
DUPONT, WA 98327

**MAILING ADDRESS**

3214 W MCGRAW ST STE 212  
SEATTLE, WA 98199

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200444****MAXIM HEALTHCARE SERVICES, INC.**

CONFIDENTIAL LOCATION  
(253) 292-4354  
STSWIESS@MAXHEALTH.COM  
[WWW.MAXHEALTH.COM/BEHAVIORAL](http://WWW.MAXHEALTH.COM/BEHAVIORAL)

ALI LYSE  
DIRECTOR OF BUSINESS OPERATIONS

CHANTE STOECKLEY  
BEHAVIORAL SUPERVISOR

**MAILING ADDRESS****CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200566****MEDTRIQ TREATMENT CENTER, LLC**

2603 BRIDGEPORT WAY WEST, SUITE F  
UNIVERSITY PLACE, WA 98466  
(253) 666-6780  
[WWW.MEDTRIQ.COM](http://WWW.MEDTRIQ.COM)

CONNIE THOMPSON  
PROGRAM ADMINISTRATOR

JOHN THOMPSON  
PROGRAM DIRECTOR OF CLINICAL SERVICES (MH/SUD)

**MAILING ADDRESS**

2603 BRIDGEPORT WAY WEST, SUITE F  
UNIVERSITY PLACE, WA 98466

**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

---

## PIERCE

---

**200240 METROPOLITAN DEVELOPMENT COUNCIL - TACOMA  
E&T**  
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

---

**018900 METROPOLITAN DEVELOPMENT COUNCIL - THE  
CENTER**  
721 FAWCETT AVENUE, SUITE 201  
TACOMA, WA 98402  
(253) 593-2740  
[WWW.MDC-HOPE.ORG](http://WWW.MDC-HOPE.ORG)

**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

GREGORY KLEINER  
VP HEALTH SERVICES  
  
ROBERTO TERRONES  
SUD CLINICAL SUPERVISOR

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

---

**200440 MULTICARE BEHAVIORAL HEALTH - ADOLESCENT  
BEHAVIORAL HEALTH**  
315 MARTIN LUTHER KING JR WAY  
TACOMA, WA 98405  
(253) 403-0360  
CUSTOMERSERVICE@MULTICARE.ORG  
[WWW.MULTICARE.ORG](http://WWW.MULTICARE.ORG)

**MAILING ADDRESS**  
315 MARTIN LUTHER KING JR WAY  
TACOMA, WA 98405

**CERTIFIED SERVICES**

TIM HOLMES  
PRESIDENT OF BEHAVIORAL HEALTH  
  
ANGELA NAYLOR, RN  
CHIEF NURSE EXECUTIVE

MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT – CHILDREN

---

**200209 MULTICARE BEHAVIORAL HEALTH - ASIAN  
COUNSELING SERVICES**  
4301 SOUTH PINE STREET, SUITE 451  
TACOMA, WA 98409  
  
CUSTOMERSERVICE@MULTICARE.ORG  
[WWW.MULTICARE.ORG](http://WWW.MULTICARE.ORG)

**MAILING ADDRESS**  
325 EAST PIONEER AVENUE  
PUYALLUP, WA 98372

---

# PIERCE

---

## 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](http://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](http://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

---

152800

### MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN

325 EAST PIONEER AVENUE  
PUYALLUP, WA 98372  
(253) 697-8507  
(888) 910-6300

ROBERT HAMILTON  
PROGRAM MANAGER

JEFFERY PLANCICH  
CD PROGRAM MANAGER

### MAILING ADDRESS

325 E PIONEER AVE  
PUYALLUP, WA 98372

---

# PIERCE

---

**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](http://WWW.MULTICARE.ORG/BEHAVIORAL-HEALTH)

ROBERT HAMILTON  
PROGRAM MANAGER

JEFFERY PLANCICH  
CD PROGRAM MANAGER

**MAILING ADDRESS**

325 E PIONEER AVE  
PUYALLUP, WA 98372

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**164000****NEW FREEDOM RECOVERY CENTER, LLC**

10215 214TH AVENUE EAST  
BONNEY LAKE, WA 98391  
(253) 862-7374

JASON JOHNSTONE  
ADMINISTRATOR

ROB LONG  
EXECUTIVE DIRECTOR & CLINICAL SUPERVISOR

**MAILING ADDRESS**

10215 214TH AVE E  
BONNEY LAKE, WA 98391

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200378****NORTHWEST ABA - TACOMA**

218 SOUTH 38TH STREET  
TACOMA, WA 98418  
(206) 313-8840  
INFO@NORTHWESTABA.COM  
[WWW.NORTHWESTABA.COM](http://WWW.NORTHWESTABA.COM)

TAKANORI KOYAMA  
OWNER

**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](http://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  
OPIATE SUBSTITUTION TREATMENT  
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

162000

**NORTHWEST INTEGRATED HEALTH - MAIN**

3800 3RD STREET SOUTHEAST  
PUYALLUP, WA 98374  
(253) 503-0226  
INFO@NWIH.ORG  
[WWW.NWIH.ORG](http://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  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

173000

**NORTHWEST INTEGRATED HEALTH - TACOMA**

5929 WESTGATE BOULEVARD, SUITE A  
TACOMA, WA 98406  
(253) 503-0226  
INFO@NWIH.ORG  
[WWW.NWIH.ORG](http://WWW.NWIH.ORG)

BRANDY KREBS  
AGENCY ADMINISTRATOR

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  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

200097

**PEARL STREET CENTER - CLIP**

815 SOUTH PEARL STREET  
TACOMA, WA 98465  
(253) 396-5805  
[WWW.COMPREHENSIVELIFERESOURCES.ORG](http://WWW.COMPREHENSIVELIFERESOURCES.ORG)

APRIL STALLINGS  
PROGRAM DIRECTOR

DR. MIKE LAEDERICH  
DIRECTOR

**MAILING ADDRESS**

815 SOUTH PEARL STREET  
TACOMA, WA 98465

---

# PIERCE

---

## 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

B.B. BUSKIRK, DDS, MA, CDP  
ADMINISTRATOR

### MAILING ADDRESS

3214 50TH ST CT NW STE D-305  
GIG HARBOR, WA 98335

### CERTIFIED SERVICES

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

---

200331

**PERCH BEHAVIORAL HEALTH**  
CONFIDENTIAL LOCATION  
(253) 312-8909

WILLIAM WALDO  
DIRECTOR OF OPERATIONS

### MAILING ADDRESS

### CERTIFIED SERVICES

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

---

019100

**PIERCE COUNTY ALLIANCE - MAIN**  
510 TACOMA AVENUE SOUTH  
TACOMA, WA 98402-5416  
(253) 572-4750

DR. TERREE SCHMIDT-WHELAN  
EXECUTIVE DIRECTOR

SAMI FRENCH  
MH CLINICAL SUPERVISOR

### MAILING ADDRESS

510 TACOMA AVE S  
TACOMA, WA 98402-5416

### 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  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

114000

**PIONEER ADULT COUNSELING - TACOMA**  
758 ST. HELENS AVENUE  
TACOMA, WA 98402  
(253) 274-0484

BRANDY OTO  
DIRECTOR

NANCY BLACKMAN  
CLINICAL SUPERVISOR

### MAILING ADDRESS

758 ST HELENS AVE  
TACOMA, WA 98402

### 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  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

## PIERCE

---

200544

**PROSPERITY WELLNESS CENTER - GRAHAM**

22007 MERIDIAN AVENUE EAST, SUITE A  
GRAHAM, WA 98338  
(253) 375-7530  
[WWW.PROSPERITYWELLNESSCENTER.COM](http://WWW.PROSPERITYWELLNESSCENTER.COM)

DAVID W. LAWS  
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS  
CLINICAL ADMINISTRATOR

**MAILING ADDRESS**

11012 CANYON RD E STE 8-385  
PUYALLUP, WA 98373

**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:

GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

103700

**PROSPERITY WELLNESS CENTER - MAIN**

5001 112TH STREET EAST  
TACOMA, WA 98446  
(253) 531-2103  
(253) 863-1380  
[WWW.PROSPERITYWELLNESSCENTER.COM](http://WWW.PROSPERITYWELLNESSCENTER.COM)

DAVID W. LAWS  
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS  
CLINICAL ADMINISTRATOR

**MAILING ADDRESS**

11012 CANYON RD E STE 8-385  
PUYALLUP, WA 98373

**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

MENTAL HEALTH SERVICES:

GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RESIDENTIAL TREATMENT FACILITY

---

169800

**PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES**

12201 PACIFIC AVENUE SOUTH  
TACOMA, WA 98444  
(253) 536-6425  
[WWW.PROSPERITYWELLNESSCENTER.COM](http://WWW.PROSPERITYWELLNESSCENTER.COM)

DAVID W. LAWS  
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS  
CLINICAL ADMINISTRATOR

**MAILING ADDRESS**

11012 CANYON RD E, SUITE 8-385  
PUYALLUP, WA 98373

**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:

CRISIS PEER SUPPORT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

052200

**REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)**

5501 6TH AVENUE  
TACOMA, WA 98406-2697  
(253) 798-7900

CATHY J. PEARSON  
DIRECTOR

**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 & C  
FIFE, WA 98424  
(253) 235-5216  
[WWW.RIINTERNATIONAL.COM](http://WWW.RIINTERNATIONAL.COM)

AMANDA BESEL  
RECOVERY SERVICES ADMINISTRATOR II

**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

DON JULIAN SAUCIER  
SUPPORT SERVICES COORDINATOR

GRETCHEN MCCLELLAND  
RECOVERY SERVICES ADMINISTRATOR I

**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](http://WWW.RIINTERNATIONAL.COM)

JULIAN SAUCIER  
SUPPORT SERVICE COORDINATOR

**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](http://WWW.ROYALLIFECENTERS.COM)

PERMELIA FOSTER  
PROGRAM DIRECTOR

KEN PIMPLETON  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

8649 MARTIN WAY E  
LACEY, WA 98516

---

# PIERCE

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RESIDENTIAL TREATMENT FACILITY

---

**200265****SEA MAR BEHAVIORAL HEALTH - GIG HARBOR**

6659 KIMBALL DRIVE, SUITE C-301  
GIG HARBOR, WA 98335  
(253) 396-1634  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

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  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**164100****SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN**

1119 TACOMA AVENUE SOUTH  
TACOMA, WA 98402  
(253) 246-6820

CLAUDIA D'ALLEGRI  
VP, BEHAVIORAL HEALTH

DEBBIE ANN REED  
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

---

**127100****SEA MAR BEHAVIORAL HEALTH - PUYALLUP**

12812 101ST AVENUE COURT EAST, SUITE 202  
PUYALLUP, WA 98373  
(253) 864-4770

CLAUDIA D'ALLEGRI  
ADMINISTRATOR

JENNY RODRIGUEZ  
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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**089900****SEA MAR BEHAVIORAL HEALTH - TACOMA**

2121 SOUTH 19TH STREET  
TACOMA, WA 98405  
(253) 396-1634  
INFO@SEAMARCHC.ORG  
[WWW.SEAMARCHC.ORG](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VP OF BEHAVIORAL HEALTH

MARCHE WARD  
SUD CLINICAL SUPERVISOR

---

# 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](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
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](http://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](http://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

---

**PIERCE**

---

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:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT

---

018902

**TACOMA DETOXIFICATION CENTER**  
721 SOUTH FAWCETT AVENUE, ROOM 100  
TACOMA, WA 98402  
(253) 593-2413

MARIAM SSEMAKULA  
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

---

## PIERCE

---

019000

**TACOMA-PIERCE COUNTY TREATMENT SERVICES**

3629 SOUTH D STREET  
TACOMA, WA 98418  
(253) 798-6527  
[WWW.TPCHD.ORG](http://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

---

200535

**TELECARE - COMMUNITY ALTERNATIVES TEAM**

3901 SOUTH FIFE STREET, SUITE 301  
TACOMA, WA 98409  
(253) 589-5334  
MLORDS@TELECARECORP.COM  
[WWW.TELECARECORP.COM](http://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

---

010200

**VETERANS ADMINISTRATION MEDICAL CENTER -  
AMERICAN LAKE**

9600 VETERANS DRIVE  
LAKEWOOD, 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

---

200508

**WESTERN STATE HOSPITAL**

9601 STEILACOOM BOULEVARD SOUTHWEST  
LAKEWOOD, WA 98498

KATHRIN CHRISTENSEN  
SUD PROGRAM MANAGER

[WWW.DSHS.WA.GOV/BHA](http://WWW.DSHS.WA.GOV/BHA)

**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

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

LUZELLEN SMITH  
PROGRAM MANAGER

**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

---

147600

**COMPASS HEALTH - ORCAS ISLAND**

1286 MOUNT BAKER ROAD, SUITE B-209  
EASTSOUND, WA 98245  
(360) 378-2669

[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

LUZELLEN SMITH  
PROGRAM MANAGER

**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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

124600

**COMPASS HEALTH - SAN JUAN ISLAND**

520 SPRING STREET  
FRIDAY HARBOR, WA 98250  
(360) 378-2669

[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

LUZELLEN SMITH  
PROGRAM MANAGER

**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

---

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

DONNA WELLS  
ADMINISTRATOR

LEX RIVERS  
REGIONAL MANAGER

**MAILING ADDRESS**

1133 RAILROAD AVENUE, SUITE 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  
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](http://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  
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](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

POST OFFICE BOX 3810  
EVERETT, WA 98213-8810

---

# SKAGIT

---

## 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](http://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](http://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](http://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

---

# SKAGIT

---

038000

**FOLLMAN AGENCY**

910 SOUTH ANACORTES STREET  
BURLINGTON, WA 98233  
(360) 755-1125  
FRONTDESK@FOLLMANAGENCY.COM  
[WWW.FOLLMANAGENCY.COM](http://WWW.FOLLMANAGENCY.COM)

KATHY A. FOLLMAN  
ADMINISTRATOR

JAMES H. FOLLMAN  
MH & SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

910 S ANACORTES ST  
BURLINGTON, WA 98233-3010

**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:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

114600

**PHOENIX RECOVERY SERVICES, LLC**

1601 EAST COLLEGE WAY, SUITE A  
MOUNT VERNON, WA 98273  
(360) 848-8437

CAROL HUNDAHL  
ADMINISTRATOR

RACHEL ADAMS  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1601 E COLLEGE WAY STE A  
MOUNT VERNON, WA 98273

**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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

005002

**PIONEER CENTER NORTH**

1960 THOMPSON DRIVE  
SEDRO WOOLLEY, WA 98284  
(360) 856-3186  
[WWW.PIONEERHUMAN SERVICES.ORG](http://WWW.PIONEERHUMAN SERVICES.ORG)

ROBERT SULLIVAN  
DIRECTOR III

TORY SANDOZ  
CLINICAL PRACTICES MANAGER (SUD CS)

**MAILING ADDRESS**

1960 THOMPSON DR  
SEDRO WOOLLEY, WA 98284

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT  
LONG-TERM RESIDENTIAL  
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

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

---

153000

**PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER**

201 LILA LANE  
BURLINGTON, WA 98233  
(360) 757-7738  
KIM.TISDEL@P-H-S.COM  
[HTTP://PIONEERHUMAN SERVICES.ORG/TREATMENT/CENTERS](http://PIONEERHUMAN SERVICES.ORG/TREATMENT/CENTERS)

ROBERT SULLIVAN  
DIRECTOR

---

# 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](http://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  
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  
CASE MANAGEMENT  
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](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VP OF BEHAVIORAL HEALTH

BRIAN GRIFFITH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

8915 14TH AVE S  
SEATTLE, WA 98108

---

# SKAGIT

---

## 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

---

200110

**SKAGIT REGIONAL HEALTH**  
1415 EAST KINCAID STREET  
MOUNT VERNON, WA 98274

### **MAILING ADDRESS**

1415 EAST KINCAID STREET  
MOUNT VERNON, WA 98274

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

---

200363

**SUNRISE SERVICES, INC. - CONCRETE MAIN STREET**  
45770 MAIN STREET  
CONCRETE, WA 98237

INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

### **MAILING ADDRESS**

PO BOX 2569  
EVERETT, WA 98213

## CERTIFIED SERVICES

### 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

---

175700

**SUNRISE SERVICES, INC. - CONCRETE SR 20**  
44942 STATE ROUTE 20  
CONCRETE, WA 98237  
(360) 336-3762

### **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  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

# SKAGIT

---

**200279**      **SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET**  
1101 SOUTH 2ND STREET, SUITE A  
MOUNT VERNON, WA 98273

INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

**MAILING ADDRESS**  
PO BOX 2569  
EVERETT, WA 98213

**CERTIFIED SERVICES**

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
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

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

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 WOOLLEY, WA 98284

INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

**MAILING ADDRESS**  
PO BOX 2569  
EVERETT, WA 98213

**CERTIFIED SERVICES**

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

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

GREGG VON FEMPE  
ADMINISTRATOR

**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

BARBARA THOMPSON/COUSINS  
DIRECTOR

**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

SUSAN DUNTHORNE  
SOCIAL SERVICES COORDINATOR

S. GAYLE ROSE  
TREATMENT SUPERVISOR

**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

KIRBY RICHARDS, LICSW  
DIRECTOR

TAMARA CISSELL  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 369  
STEVENSON, WA 98648

---

## 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](http://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](http://WWW.AMERICANBEHAVIORALHEALTHSYSTEMS.ORG)

TONY PRENTICE  
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

---

**130100****ASIAN-AMERICAN CHEMICAL DEPENDENCY  
TREATMENT SERVICES**

5116 196TH STREET SW, SUITE 101  
LYNNWOOD, WA 98036  
(425) 776-1290

TAE SON LEE  
EXECUTIVE DIRECTOR

**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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**132500****ASSESSMENT AND TREATMENT ASSOCIATES -****MOUNTLAKE TERRACE**

21907 64TH AVENUE W, SUITE 310  
MOUNTLAKE TERRACE, WA 98043  
(877) 479-5993

STEVE UHRICH  
EXECUTIVE DIRECTOR

SHARON FENTON  
CLINICAL SUPERVISOR

**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

---

**200558****BALANCED LIVING THERAPY, LLC**

7500 212TH STREET SOUTHWEST, SUITE 205  
EDMONDS, WA 98026  
(425) 977-4988

[WWW.BALANCEDLIVINGTHERAPY.COM](http://WWW.BALANCEDLIVINGTHERAPY.COM)

MAGGIE ISHAQ  
OWNER/DIRECTOR

---

# 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  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**200533****BASIC STEPS MENTAL HEALTH**

12199 VILLAGE CENTER PLACE, SUITE 203  
MUKILTEO, WA 98275  
(425) 588-8438  
JUDITH@BASICSTEPS.LIFE  
[WWW.BASICSTEPS.LIFE](http://WWW.BASICSTEPS.LIFE)

JUDITH HOLTZ  
ADMINISTRATOR

SCOTT ALPERT  
CLINICAL DIRECTOR (MH & SUD)

**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](http://WWW.BRIDGEWAYTREATMENT.COM)

MICHAEL F. MURRAY, JR.  
ADMINISTRATOR

**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

DONNA KONICKI  
CEO

**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  
BOTHHELL, WA 98021  
(425) 672-7293

JACE ANGELLY  
CLINIC DIRECTOR

MARIA UCHYTIL  
CLINICAL SUPERVISOR

---

# SNOHOMISH

---

**MAILING ADDRESS**

22026 20TH AVE SE BLDG L STE 101  
BOTHHELL, 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](http://WWW.CCSWW.ORG)

WILL RICE  
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON  
REGIONAL CLINICAL DIRECTOR

**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](http://WWW.CCSWW.ORG)

WILL RICE  
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON  
REGIONAL CLINICAL DIRECTOR

**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

DONNA WELLS  
AGENCY DIRECTOR

**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

---

# SNOHOMISH

---

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:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

052300

**CENTER FOR COUNSELING & HEALTH RESOURCES**

547 DAYTON STREET  
EDMONDS, WA 98020  
(425) 771-5166  
[WWW.APLACEOFHOPE.COM](http://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:

CASE MANAGEMENT  
DAY SUPPORT  
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](http://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 EPPERSON  
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](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

POST OFFICE BOX 3810  
EVERETT, WA 98213-8810

---

# 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

---

200176

### COMPASS HEALTH - BAILEY CENTER

3322 BROADWAY  
EVERETT, WA 98201  
(425) 349-6700

[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

### MAILING ADDRESS

PO BOX 3810  
EVERETT, WA 98213-8810

## CERTIFIED SERVICES

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

DANIELLE BLACKWELL  
PROGRAM MANAGER

### 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

---

200177

### COMPASS HEALTH - DAWSON PLACE

1509 CALIFORNIA STREET  
EVERETT, WA 98201  
(425) 349-6700

[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

### MAILING ADDRESS

POST OFFICE BOX 3810  
EVERETT, WA 98213-8810

## CERTIFIED SERVICES

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT

---

200359

### 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](http://WWW.COMPASSHEALTH.ORG)

### MAILING ADDRESS

PO BOX 3810  
EVERETT, WA 98213-8810

## CERTIFIED SERVICES

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

# SNOHOMISH

---

**200320**      **COMPASS HEALTH - EVERETT CHILDREN'S INTENSIVE SERVICES**  
4526 FEDERAL AVENUE, BUILDING 1  
EVERETT, WA 98203  
(425) 349-6200  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213-8810

**CERTIFIED SERVICES**

ANASTASIA ALLES  
CHIEF OPERATIONS OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

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**  
4526 FEDERAL AVENUE, BUILDING 4 WEST  
EVERETT, WA 98213  
(425) 349-6200  
(425) 349-7479  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213-8810

**CERTIFIED SERVICES**

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

CHARISSA WESTERGARD  
DIRECTOR

MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT

---

**200180**      **COMPASS HEALTH - GREENHOUSE**  
2735 10TH STREET  
EVERETT, WA 98201  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
POST OFFICE BOX 3810  
EVERETT, WA 98213-8810

**CERTIFIED SERVICES**

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE  
CLINICAL SUPERVISOR

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**  
2613 WEST MARINE VIEW DRIVE  
EVERETT, WA 98201  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213-8810

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE  
CLINICAL SUPERVISOR

---

# 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](http://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

---

200173

### COMPASS HEALTH - LYNNWOOD CHILD & FAMILY CLINIC

4807 196TH STREET SW, SUITE 100  
LYNNWOOD, WA 98036  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://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

---

200174

### COMPASS HEALTH - MARYSVILLE ADULT SERVICES

4308 76TH STREET NE  
MARYSVILLE, WA 98270  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://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

---

# SNOHOMISH

---

**200170**      **COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC**  
1  
1022 WEST MAIN STREET  
MONROE, WA 98272  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213

**CERTIFIED SERVICES**

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

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

---

**200534**      **COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC**  
2  
1016 WEST MAIN STREET  
MONROE, WA 98272  
(425) 349-8810  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213

**CERTIFIED SERVICES**

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

FRAN DUCKWORTH  
PROGRAM MANAGER

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

---

**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/CONTACT-US/FEEDBACK-S)  
[HTTP://WWW.COMPASSHEALTH.ORG/](http://WWW.COMPASSHEALTH.ORG/)

**MAILING ADDRESS**  
PO BOX 3810  
EVERETT, WA 98213-8810

**CERTIFIED SERVICES**

TOM SEBASTIAN  
CEO

CHRIS STARETS-FOOTE  
PROGRAM DIRECTOR

MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT

---

**200175**      **COMPASS HEALTH - SMOKEY POINT CHILD & FAMILY CLINIC**  
3320 173RD PLACE NE #F1  
ARLINGTON, WA 98223  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

**MAILING ADDRESS**  
POST OFFICE BOX 3810  
EVERETT, WA 98213-8810

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

---

# SNOHOMISH

---

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION

---

200169

### COMPASS HEALTH - SNOHOMISH ADULT SERVICES

221 AVENUE B  
SNOHOMISH, WA 98290  
(425) 349-6700  
[WWW.COMPASSHEALTH.ORG](http://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

---

200114

### COMPASS HEALTH - SNOHOMISH TRIAGE

3322 BROADWAY  
EVERETT, WA 98201

TOM SEBASTIAN  
CEO

CHRIS STARETS-FOOTE  
PROGRAM DIRECTOR

### MAILING ADDRESS

PO BOX 3810  
EVERETT, WA 98213-8810

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

TRIAGE - VOLUNTARY

---

076900

### DOC - MONROE CORRECTIONS CENTER - MSU

16700 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

## CERTIFIED SERVICES

### SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

147200

### DOC - MONROE CORRECTIONS CENTER - SOU (SPECIAL OFFENDER UNIT)

16730 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

---

# SNOHOMISH

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL II INTENSIVE OUTPATIENT

---

**147300**

**DOC - MONROE CORRECTIONS CENTER - WSR  
(WASHINGTON STATE REFORMATORY)**  
16700 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

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**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

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200452**

**EVERETT TREATMENT SERVICES**  
7207 EVERGREEN WAY, SUITE M  
EVERETT, WA 98203  
(425) 347-9070  
EVERETT.TREATMENT\_ETTS@HOTMAIL.COM  
[WWW.EVERETTSTREATMENTSERVICES.COM](http://WWW.EVERETTSTREATMENTSERVICES.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](http://WWW.EVERGREENMANOR.ORG)

LINDA GRANT  
CEO

DALLARIE HORNE-MOSBY  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 12598  
EVERETT, WA 98206-2598

---

# SNOHOMISH

---

**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](http://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](http://WWW.EVERGREENRC.ORG)

**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

LINDA GRANT  
EXECUTIVE DIRECTOR

ROBERT MCCULLOUGH  
SUD CLINICAL SUPERVISOR/PROGRAM MANAGER

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

---

**011200**      **EVERGREENHEALTH RECOVERY CENTER, MONROE**  
17880 147TH STREET SE  
MONROE, WA 98272  
(360) 794-1405

**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

ERIC JAMES BRITT  
EXECUTIVE DIRECTOR

DAVID ANDERSON  
CLINICAL SUPERVISOR

---

**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/](http://WWW.FAIRFAXHOSPITAL.COM/)

**MAILING ADDRESS**  
10200 NORTHEAST 132ND STREET  
KIRKLAND, WA 98034

**CERTIFIED SERVICES**

RICHARD GEIGER  
CEO

DR. SAMIR AZIZ  
MEDICAL DIRECTOR

MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT

---

# SNOHOMISH

---

**200221**      **IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - MOUNTLAKE**  
6505 218TH STREET SW, SUITE 9  
MOUNTLAKE TERRACE, WA 98043

DR. CHARNA MINTZ  
EXECUTIVE DIRECTOR

DANETTE DARROW  
PROGRAM DIRECTOR

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

**CERTIFIED SERVICES**

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

---

**200078**      **INSTITUTE FOR FAMILY DEVELOPMENT - EVERETT**  
14 EAST CASINO ROAD, BUILDING D  
EVERETT, WA 98208

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

---

**113900**      **ISLAND CROSSING COUNSELING SERVICES**  
5700 172ND STREET NE  
ARLINGTON, WA 98223  
(360) 652-9640  
[WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP](http://WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP)

KELLY CAMPBELL  
ADMINISTRATOR

JACKIE ROTH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**  
5700 172ND ST NE  
ARLINGTON, WA 98223

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

---

**124500**      **LA ESPERANZA HCS - LYNNWOOD**  
20815 67TH AVENUE WEST, SUITE 201  
LYNNWOOD, WA 98036  
(425) 248-4534  
(425) 248-4535

ZOILA SARITAMA  
ADMINISTRATOR

ALVIN CURRY  
CLINICAL SUPERVISOR

**MAILING ADDRESS**  
20815 67TH AVE W STE 201  
LYNNWOOD, WA 98036

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

---

**009401**      **LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS**  
7935 LAKE BALLINGER WAY  
EDMONDS, WA 98026-9166  
(425) 670-3664

MARY KAY OSHMAN  
ADMINISTRATOR

CATHY WERDEN  
CLINICAL SUPERVISOR

---

## 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](http://WWW.LAKESIDEMILAM.COM)

MAUREEN FLOREA  
ADMINISTRATOR

TOM BLANFORD  
CLINICAL SUPERVISOR

**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](http://WWW.MAGNOLIABEHAVIORTHERAPY.COM)

RALPH PAMPINO  
CEO

**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](http://WWW.RECOVERNEWLIFE.COM)

DIANE BUFORD  
CEO

MELANIE KEPLINGER  
CLINICAL SUPERVISOR

**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

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  
INTENSIVE INPATIENT  
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](http://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](http://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

---

**144800****SAUK-SUIATTLA INDIAN TRIBE**

5318 CHIEF BROWN LANE  
DARRINGTON, WA 98241  
(360) 436-2842  
(360) 436-2212

HARRIET YURCHAK, BSW, RC  
CLINICAL DIRECTOR

LYNDEE RETZLAFF  
CD TREATMENT SUPERVISOR

**MAILING ADDRESS**

5318 CHIEF BROWN LN  
DARRINGTON, WA 98241

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**052101****SEA MAR BEHAVIORAL HEALTH - EVERETT**

5007 CLAREMONT WAY  
EVERETT, WA 98203  
(425) 609-5505  
(425) 347-5415  
INFO@SEAMARCHC.ORG  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
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  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

**200334****SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY**

1920 100TH STREET, SUITE A2  
EVERETT, WA 98208  
(425) 312-0277  
[WWW.SEAMAR.ORG](http://WWW.SEAMAR.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

SUSAN "NIKKI" GOLDEN  
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

---

## SNOHOMISH

---

139100	<p><b>SEA MAR BEHAVIORAL HEALTH - LYNNWOOD</b> 4111 ALDERWOOD MALL BOULEVARD LYNNWOOD, WA 98036 (425) 977-2560 INFO@SEAMARCHC.ORG <a href="http://WWW.SEAMAR.ORG">WWW.SEAMAR.ORG</a></p> <p><b>MAILING ADDRESS</b> 8915 14TH AVE S SEATTLE, WA 98108</p> <p><b>CERTIFIED SERVICES</b> <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</p>	<p>CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH</p> <p>KATHERINE SCOTT DAVIS MH CLINICAL SUPERVISOR</p> <p><u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT</p>
104600	<p><b>SEA MAR BEHAVIORAL HEALTH - MONROE</b> 14090 FRYELANDS BOULEVARD SE, SUITE 347 MONROE, WA 98272 (360) 805-3122 INFO@SEAMARCHC.ORG <a href="http://WWW.SEAMAR.ORG">WWW.SEAMAR.ORG</a></p> <p><b>MAILING ADDRESS</b> 8915 14TH AVE S SEATTLE, WA 98108</p> <p><b>CERTIFIED SERVICES</b> <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</p>	<p>CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH</p> <p>ELIANA HAFFNER SUD CLINICAL SUPERVISOR</p> <p><u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT</p>
146200	<p><b>SMOKEY POINT BEHAVIORAL HOSPITAL</b> 3955 156TH STREET NORTHEAST MARYSVILLE, WA 98271 (844) 202-5555 KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.COM M <a href="http://WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM">WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM</a></p> <p><b>MAILING ADDRESS</b> 3955 156TH STREET NORTHEAST MARYSVILLE, WA 98271</p> <p><b>CERTIFIED SERVICES</b> <u>SUBSTANCE USE DISORDER SERVICES:</u> LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT WITHDRAWAL MANAGEMENT</p>	<p>MATT CROCKETT CEO</p> <p>CHRISTINE COSTELLO DIRECTOR OF CLINICAL SERVICES (MH CLIN SUP)</p> <p><u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT DAY SUPPORT GROUP THERAPY INDIVIDUAL TREATMENT INPATIENT EVALUATION AND TREATMENT - ADULT INPATIENT EVALUATION AND TREATMENT - CHILDREN</p>
200112	<p><b>SNOHOMISH COUNTY HUMAN SERVICES</b> 3000 ROCKERFELLER AVENUE EVERETT, WA 98201 (425) 388-7402 <a href="http://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-">HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-</a></p>	<p>KEN STARK ADMINISTRATOR</p>

---

# 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

KATHERINE FULTON  
ADMINISTRATOR

**MAILING ADDRESS**

17014 59TH AVE NE  
ARLINGTON, WA 98223

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**174400****SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY**

1718 BROADWAY  
EVERETT, WA 98201  
(425) 595-5200

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  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**200381****SUNRISE SERVICES, INC. - EVERETT BROADWAY**

1520 BROADWAY  
EVERETT, WA 98201  
(425) 493-5870  
(877) 493-5890  
INFO@SUNRISEEMAIL.COM  
[SUNRISECOMMUNITYLIVING.COM](http://SUNRISECOMMUNITYLIVING.COM)

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

**MAILING ADDRESS**

PO BOX 2569  
EVERETT, WA 98213

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT

---

# SNOHOMISH

---

168100

**SUNRISE SERVICES, INC. - EVERETT MAIN**

1021 NORTH BROADWAY  
EVERETT, WA 98201  
(425) 493-5800

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:

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

200324

**SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE**

6505 218TH STREET SW, SUITES 6 & 7  
MOUNTLAKE TERRACE, WA 98043

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

**MAILING ADDRESS**

PO BOX 2569  
EVERETT, WA 98213

**CERTIFIED SERVICES**

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

---

200318

**SUNRISE SERVICES, INC. - STANWOOD**

9527 271ST STREET NW  
STANWOOD, WA 98292  
(360) 926-8490  
INFO@SUNRISEEMAIL.COM  
[WWW.SUNRISECOMMUNITYLIVING.COM](http://WWW.SUNRISECOMMUNITYLIVING.COM)

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

**MAILING ADDRESS**

PO BOX 2569  
EVERETT, WA 98213

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

200121

**SWEDISH EDMONDS E&T**

21601 76TH AVENUE WEST  
EDMONDS, WA 98026  
(425) 640-4090

SARAH ZABEL  
CHIEF OPERATING OFFICER

---

# 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:**

PROBLEM & PATHOLOGICAL GAMBLING

**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](http://WWW.AMERICANBEHAVIORALHEALTH.NET)

ARLENE COOK  
ADMINISTRATOR

**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  
SECURE WITHDRAWAL MANAGEMENT &  
STABILIZATION  
WITHDRAWAL MANAGEMENT

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

---

# SPOKANE

---

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](http://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

---

# SPOKANE

---

160200

**BREAKTHROUGH RECOVERY GROUP**  
11711 EAST SPRAGUE AVENUE, SUITE D4  
SPOKANE VALLEY, WA 99206  
(509) 927-6838

LISA PARKER  
ADMINISTRATOR

ANDREA FORAN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

11711 E SPRAGUE AVE STE D4  
SPOKANE VALLEY, WA 99206

**CERTIFIED SERVICES**

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

---

117400

**CAMAS PATH BHS**  
934 SOUTH GARFIELD ROAD  
AIRWAY HEIGHTS, WA 99001  
(509) 789-7630  
[HTTPS://WWW.KALISPELTRIBE.COM](https://www.kalispeltribe.com)

ALEXANDRIA DESAUTEL  
HEALTH CARE ADMINISTRATOR

SHELLEY ETHRINGTON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

934 S GARFIELD RD  
AIRWAY HEIGHTS, WA 99001

**CERTIFIED SERVICES**

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

---

200491

**CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES**  
1960 NORTH HOLY NAMES COURT, FLOOR 3  
SPOKANE, WA 99224  
(509) 358-4250  
(509) 242-2308  
MIRWIN@CCSPOKANE.ORG  
[WWW.CATHOLICCHARITIESPOKANE.ORG](http://WWW.CATHOLICCHARITIESPOKANE.ORG)

PAMELA BROWN  
DIRECTOR

**MAILING ADDRESS**

1960 NORTH HOLY NAMES COURT, FLOOR 3  
SPOKANE, WA 99224

**CERTIFIED SERVICES**

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

---

200017

**CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN**  
12 EAST 5TH AVENUE  
SPOKANE, WA 99210  
(509) 358-4250  
DEVELOPMENT@CCSPOKANE.ORG  
[WWW.CATHOLICCHARITIESPOKANE.ORG](http://WWW.CATHOLICCHARITIESPOKANE.ORG)

ROB MCCANN  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

PO BOX 2253  
SPOKANE, WA 99210

---

# SPOKANE

---

## CERTIFIED SERVICES

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

---

200457

**CATHOLIC CHARITIES COUNSELING PROGRAM - ST. ANNE'S**

25 WEST 5TH AVENUE  
SPOKANE, WA 99210  
(509) 358-4250  
MIRWIN@CCSPOKANE.ORG  
[WWW.CATHOLICCHARITIESSPOKANE.ORG](http://WWW.CATHOLICCHARITIESSPOKANE.ORG)

JERRY SCHWAB  
DIRECTOR

JEFF BRENO  
ASSISTANT DIRECTOR

**MAILING ADDRESS**

25 WEST 5TH AVENUE  
SPOKANE, WA 99210

**CERTIFIED SERVICES**

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

---

200299

**CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE COOK STREET**

4001 NORTH COOK STREET  
SPOKANE, WA 99207  
(509) 747-4174  
WWW.CHILDRENSHOMESOCIETY.ORG  
[WWW.CHS-WA.ORG](http://WWW.CHS-WA.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

ERIC STAPLETON  
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

---

200070

**CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE MAIN**

2323 NORTH DISCOVERY PLACE  
SPOKANE VALLEY, WA 99216  
(509) 747-4174  
[WWW.CHS-WA.ORG](http://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

---

## SPOKANE

---

200313	<b>CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE WEST PLAINS</b> 8727 WEST HIGHWAY 2 SPOKANE, WA 99224 (509) 747-4174 <a href="http://WWW.CHS-WA.ORG">WWW.CHS-WA.ORG</a>	LIBBY HEIN CHIEF PROGRAM OFFICER  ERIC DOTSON CLINICAL SUPERVISOR
	<b>MAILING ADDRESS</b> 2323 N DISCOVERY PLACE SPOKANE VALLEY, WA 99216	
	<b>CERTIFIED SERVICES</b>	<u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT RECOVERY PEER SUPPORT
025500	<b>COLONIAL CLINIC</b> 910 NORTH WASHINGTON STREET, SUITE 210 SPOKANE, WA 99201 (509) 327-9831	THOMAS HUSTON STOLZ TREATMENT DIRECTOR  PATRICK HENNESSY CLINICAL SUPERVISOR
	<b>MAILING ADDRESS</b> 910 N WASHINGTON ST., STE 210 SPOKANE, WA 99201	
	<b>CERTIFIED SERVICES</b> <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT	<u>MENTAL HEALTH SERVICES:</u> FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT
163600	<b>COURAGE TO CHANGE</b> 13015 WEST 14TH AVENUE AIRWAY HEIGHTS, WA 99001 (509) 863-4233 <a href="http://WWW.COURAGETOCHANGEWESTPLAINS.COM">WWW.COURAGETOCHANGEWESTPLAINS.COM</a>	ANGELA SILVA DIRECTOR OF TREATMENT  MELISSA HURT-MORAN DIRECTOR OF OPERATIONS
	<b>MAILING ADDRESS</b> PO BOX 212 MEDICAL LAKE, WA 99022	
	<b>CERTIFIED SERVICES</b> <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT	
200481	<b>CUBHOUSE</b> 14819 EAST MISSION AVENUE SPOKANE VALLEY, WA 99216 (509) 477-4631 <a href="http://WWW.SPOKANERECOVERY.ORG">WWW.SPOKANERECOVERY.ORG</a>	BLAKE REDDING INTERIM EXECUTIVE DIRECTOR  COLIN HUSFLOEN SUD CLINICAL SUPERVISOR
	<b>MAILING ADDRESS</b> 14819 EAST MISSION AVENUE SPOKANE VALLEY, WA 99216	

---

# SPOKANE

---

**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](http://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](http://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

---

# SPOKANE

---

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](http://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

JANE SCHOLLMAYER  
APU ADMIN DIRECTOR & TX MALL/REHAB DIRECTOR

[WWW.DSHS.WA.GOV/BHA](http://WWW.DSHS.WA.GOV/BHA)

**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](http://WWW.EXCELSIORYOUTHCENTER.COM)

ANDREW HILL  
CEO

MELISSA MELSON  
SUD CLINICAL SUPERVISOR

---

# 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](http://WWW.EXCELSIORYOUTHCENTER.COM)

ANDREW HILL  
CEO

SARA SCHUMACHER  
VP BH SERVICES (MH CLINICAL SUPERVISOR)

**MAILING ADDRESS**

3754 W INDIAN TRAIL RD  
SPOKANE, WA 99208

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200430****FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD**

505 NORTH ARGONNE ROAD, SUITE B206  
SPOKANE VALLEY, WA 99212  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO

JANNO SCHEER  
WISE SUPERVISOR II

**MAILING ADDRESS**

107 S DIVISION ST  
SPOKANE, WA 99202

**CERTIFIED SERVICES**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

---

# SPOKANE

---

012200

**FRONTIER BEHAVIORAL HEALTH - BOONE**

127 WEST BOONE AVENUE  
SPOKANE, WA 99201  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

STEFANIE TIETGE  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

107 S DIVISION ST  
SPOKANE, WA 99202-1586

**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

---

200207

**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

---

200198

**FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY**

131 SOUTH DIVISION STREET  
SPOKANE, WA 99202  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

NATHAN MRAZ  
SUD 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 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

---

# SPOKANE

---

**200201**      **FRONTIER BEHAVIORAL HEALTH - CORNERSTONE**  
17 EAST FIRST AVENUE  
SPOKANE, WA 99202

[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

**MAILING ADDRESS**  
107 S DIVISION ST  
SPOKANE, WA 99202

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

JEFF THOMAS  
CEO/ADMINISTRATOR

KEITH BRYANT  
MH & SUD CLINICAL SUPERVISOR

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

---

**200193**      **FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB**  
2102 EAST SPRAGUE AVENUE  
SPOKANE, WA 99202

**MAILING ADDRESS**  
107 SOUTH DIVISION STREET  
SPOKANE, WA 99202

**CERTIFIED SERVICES**

JEFF THOMAS  
CEO/ADMINISTRATOR

MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CLUBHOUSE  
CRISIS OUTREACH  
INDIVIDUAL TREATMENT  
RECOVERY EMPLOYMENT SUPPORT

---

**200208**      **FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&T**  
505 EAST NORTH FOOTHILLS DRIVE  
SPOKANE, WA 99207

**MAILING ADDRESS**  
107 SOUTH DIVISION STREET  
SPOKANE, WA 99202

**CERTIFIED SERVICES**

JEFF THOMAS  
CEO/ADMINISTRATOR

MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT

---

**200199**      **FRONTIER BEHAVIORAL HEALTH - HOWARD STREET**  
7 SOUTH HOWARD STREET, SUITE 321  
SPOKANE, WA 99201  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

**MAILING ADDRESS**  
107 S DIVISION ST  
SPOKANE, WA 99202

JEFF THOMAS  
CEO/ADMINISTRATOR

NATHAN MRAZ  
SUD CLINICAL SUPERVISOR

---

# 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

---

**200200****FRONTIER BEHAVIORAL HEALTH - HULSKAMP**

**BUILDING**  
103 EAST FIRST AVENUE  
SPOKANE, WA 99202

JEFF THOMAS  
CEO/ADMINISTRATOR

**MAILING ADDRESS**

107 SOUTH DIVISION STREET  
SPOKANE, WA 99202

**CERTIFIED SERVICES****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

---

**200418****FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET**

400 SOUTH JEFFERSON STREET, SUITE 114  
SPOKANE, WA 99204  
(509) 838-4651  
[WWW.FBHW.ORG](http://WWW.FBHW.ORG)

JEFF THOMAS  
CEO

TERESA HAEG  
WISE SUPERVISOR II

**MAILING ADDRESS**

107 S DIVISION ST  
SPOKANE, WA 99202

**CERTIFIED SERVICES****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

---

# SPOKANE

---

200429

**FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD**

5901 NORTH LIDGERWOOD STREET, SUITE 115  
SPOKANE, WA 99208  
(509) 838-4651  
[WWW.FBHWA.ORG](http://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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

200197

**FRONTIER BEHAVIORAL HEALTH - MAIN**

107 SOUTH DIVISION STREET  
SPOKANE, WA 99202  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

STEFANIE TIETGE  
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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

200204

**FRONTIER BEHAVIORAL HEALTH - NORTH PINES**

317 NORTH PINES ROAD  
SPOKANE VALLEY, WA 99206  
(509) 838-4651  
[WWW.FBHWA.ORG](http://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

---

**200362****FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE**

124 EAST PACIFIC AVENUE  
SPOKANE, WA 99202  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

PAT ANTHONY  
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  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

**200202****FRONTIER BEHAVIORAL HEALTH - PACT**

505 EAST NORTH FOOTHILLS DRIVE  
SPOKANE, WA 99202  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

STEFANIE TIETGE  
SUD 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 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

---

# SPOKANE

---

200203

**FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING**

5125 NORTH MARKET STREET  
SPOKANE, WA 99217  
(509) 838-4651  
[WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

NATHAN MRAZ  
SUD 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 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](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO/ADMINISTRATOR

NATHAN CORDUAN  
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  
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](http://WWW.FBHWA.ORG)

JEFF THOMAS  
CEO

SHANNON SCHOONVER  
MH 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 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

---

**200206****FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES**

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:

TRIAGE - VOLUNTARY

---

**038800****GATEWAY COUNSELING SERVICES**

140 SOUTH ARTHUR STREET, SUITE 665  
SPOKANE, WA 99202  
(509) 532-8855

NEAL HAYDEN  
ADMINISTRATOR/OWNER

KIMBERLY STANKOVICH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

140 S ARTHUR ST STE 665  
SPOKANE, WA 99202

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200219****IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SPOKANE MAIN**

5709 WEST SUNSET HIGHWAY, SUITE 100  
SPOKANE, WA 99224

DR. CHARNA MINTZ  
EXECUTIVE DIRECTOR

RICK JUSTUS  
PROGRAM DIRECTOR

**MAILING ADDRESS**

5709 WEST SUNSET HIGHWAY, SUITE 100  
SPOKANE, WA 99224

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200080****INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE**

720 WEST BOONE AVENUE, SUITE 101  
SPOKANE, WA 99201

CHARLOTTE BOOTH  
EXECUTIVE DIRECTOR

---

# 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](http://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](http://WWW.LCSNW.ORG)

HEIKE LAKE  
AREA DIRECTOR

SHARON O'BRIEN  
PROGRAM SUPERVISOR

**MAILING ADDRESS**

210 WEST SPRAGUE AVENUE  
SPOKANE, WA 99201

---

# SPOKANE

---

## 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**

#### 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  
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](http://WWW.NEWHORIZONCARECENTERS.ORG)

ALICE BUCKLES  
PROGRAM ADMINISTRATOR

KELLY DUKE  
CLINICAL SUPERVISOR

### **MAILING ADDRESS**

PO BOX 4627  
SPOKANE, WA 99220-0627

### **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  
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**

#### SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

### MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

# SPOKANE

---

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](http://WWW.CO.STEVENS.WA.US/COUNSELING)

DAVID NIELSEN  
EXECUTIVE DIRECTOR

DAN PITMAN  
SUD CLINICAL SUPERVISOR

**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

---

200305

**NORTHWEST AUTISM CENTER - SPOKANE BRANCH**

825 HAWTHORNE ROAD  
SPOKANE, 99218  
(509) 777-3309  
(509) 777-3553  
JIDE@NWAUTISM.ORG  
[WWW.NWAUTISM.ORG](http://WWW.NWAUTISM.ORG)

JIM MATTHEWS  
PROGRAM MANAGER

DANA STEVENS  
DIRECTOR OF CLINICAL SERVICES

**MAILING ADDRESS**

825 HAWTHORNE ROAD  
SPOKANE, 99218

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

200249

**NORTHWEST AUTISM CENTER - SPOKANE MAIN**

528 EAST SPOKANE FALLS BOULEVARD  
SPOKANE, WA 99202  
(509) 328-1582  
INFO@NWAUTISM.ORG  
[HTTP://SANDBOX.NWAUTISM.ORG](http://SANDBOX.NWAUTISM.ORG)

ADAM KOGLER  
OPERATIONS AND FINANCIAL OFFICER

**MAILING ADDRESS**

528 EAST SPOKANE FALLS BOULEVARD  
SPOKANE, WA 99202

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

098700

**PARTNERS WITH FAMILIES AND CHILDREN**

1321 WEST BROADWAY AVENUE  
SPOKANE, WA 99201  
(509) 473-4810  
[WWW.PARTNERSWITHFAMILIES.ORG](http://WWW.PARTNERSWITHFAMILIES.ORG)

CAROL PLISCHKE  
EXECUTIVE DIRECTOR

KOLLEEN SEWARD  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

1321 W BROADWAY AVE  
SPOKANE, WA 99201

---

# 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

---

**200093****PASSAGES FAMILY SUPPORT**

1002 NORTH SUPERIOR STREET  
SPOKANE, WA 99202  
(509) 892-9241  
INFORMATION@PASSAGESFS.ORG  
[WWW.PASSAGES-SPOKANE.ORG](http://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

---

**200355****PATHWAYS OF WASHINGTON, INC.**

1050 NORTH ARGONNE ROAD, SUITE 100  
SPOKANE VALLEY, WA 99212  
(509) 209-8990  
PHSWA@PATHWAYS.COM  
[WWW.PATHWAYS.COM](http://WWW.PATHWAYS.COM)

AMIKA 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

---

**111600****PIONEER CENTER EAST**

3400 WEST GARLAND AVENUE  
SPOKANE, WA 99205  
(509) 325-2355

TENNILLE LIGHTFOOT  
DIRECTOR

KEITH BRYANT  
CLINICAL PRACTICES MANAGER

**MAILING ADDRESS**

PO BOX 9838  
SPOKANE, WA 99209

---

# SPOKANE

---

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
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](http://pioneerhumanservices.org)

NANCY BLACKMAN  
CLINICAL MANAGER

**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](http://WWW.PSYCHSOLUTIONS.COM)

JOSEPH JUDD  
EXECUTIVE DIRECTOR

**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

---

035100

**RIVERSIDE RECOVERY CENTER, INC.**

3710 NORTH MONROE STREET  
SPOKANE, WA 99205  
(509) 328-5234

CHRIS MULLIN  
EXECUTIVE DIRECTOR

JAIME PETERSON  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

3710 N MONROE ST  
SPOKANE, WA 99205

**CERTIFIED SERVICES**

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

---

176600

**ROYAL LIFE CENTERS, LLC - CASCADE**

14525 NORTH NEWPORT HIGHWAY  
MEAD, WA 99021  
(509) 340-9643  
ADMISSIONS@ROYALCENTERS.COM  
[WWW.ROYALLIFECENTERS.COM](http://WWW.ROYALLIFECENTERS.COM)

TERESA RORIE  
PROGRAM DIRECTOR

**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

---

176700

**ROYAL LIFE CENTERS, LLC - SPOKANE DETOX**

524 EAST FRANCIS AVENUE  
SPOKANE, WA 99208  
(509) 919-4150  
ADMISSIONS@ROYALCENTERS.COM  
[WWW.ROYALLIFECENTERS.COM](http://WWW.ROYALLIFECENTERS.COM)

TERESA RORIE  
PROGRAM DIRECTOR

**MAILING ADDRESS**

8649 MARTIN WAY E  
LACEY, WA 98516

---

# SPOKANE

---

**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

---

**200388****SOAR BEHAVIOR SERVICES**

CONFIDENTIAL LOCATION  
(509) 999-5657  
INFO@SOARBEHAVIOR.COM  
[WWW.SOARBEHAVIOR.COM](http://WWW.SOARBEHAVIOR.COM)

JAMES MATTHEWS  
CLINICAL DIRECTOR

**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  
DUI 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](http://WWW.SPARCOP.ORG)

**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:**  
CASE MANAGEMENT  
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

**MAILING ADDRESS**  
812 S WALNUT ST.  
SPOKANE, WA 99204

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT

GEORGE FELDMILLER  
INTERIM DIRECTOR

CAROL GRABOWSKI  
CLINICAL SUPERVISOR

---

**012100**      **SPARC - WESTBROOK HOUSE**  
1404 WEST 8TH AVENUE  
SPOKANE, WA 99204-7159  
(509) 624-3251

**MAILING ADDRESS**  
812 S WALNUT ST.  
SPOKANE, WA 99204

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
RECOVERY HOUSE

MARK BROWNLOW  
ADMINISTRATOR

BRANDY WOODS  
CLINICAL SUPERVISOR

---

**200118**      **SPOKANE COUNTY DETENTION SERVICES**  
1100 WEST MALLON AVENUE  
SPOKANE, WA 99260  
(509) 477-2278  
[WWW.SPOKANECOUNTY.ORG/351/DETENTION-SERVIC](http://WWW.SPOKANECOUNTY.ORG/351/DETENTION-SERVIC)

**MAILING ADDRESS**  
1100 WEST MALLON AVENUE  
SPOKANE, WA 99260

**CERTIFIED SERVICES**

KRISTINA RAY  
MENTAL HEALTH MANAGER

**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  
SCRBHCONTRACTS@SPOKANECOUNTY.ORG  
[WWW.SPOKANECOUNTY.ORG/3155](http://WWW.SPOKANECOUNTY.ORG/3155)

TONYA STERN  
ASSISTANT DIRECTOR

KIM LONGHOFER  
HUMAN SERVICES PROGRAM MANAGER

**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](http://WWW.SPOKANESCHOOLS.ORG)

DAVID CRUMP, PH.D  
CLINICAL DIRECTOR

GARY FROST  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

200 N BERNARD ST  
SPOKANE, WA 99201

**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

---

**011300****SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES**

1101 WEST COLLEGE AVENUE  
SPOKANE, WA 99201-2095  
(509) 324-1420

MISTY CHALLINOR  
ADMINISTRATOR

JENNIFER TIMONEY  
OTP PROGRAM MANAGER

**MAILING ADDRESS**

1101 WEST COLLEGE AVENUE  
SPOKANE, WA 99201-2095

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT  
OPIATE SUBSTITUTION TREATMENT

---

**012000****SPOKANE TREATMENT & RECOVERY SERVICES**

312 WEST 8TH AVENUE  
SPOKANE, WA 99204  
(509) 477-4631  
(509) 477-4650

BLAKE REDDING  
INTERIM DIRECTOR

ERIC DENO  
SUD CLINICAL SUPERVISOR

---

# SPOKANE

---

**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

---

**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**MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RESIDENTIAL TREATMENT FACILITY

---

## SPOKANE

---

<b>200281</b>	<b>SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER)</b> 3305 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224	RONDA HAIN SEER PROGRAM CONTACT
	<b>MAILING ADDRESS</b> 3305 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224	
	<b>CERTIFIED SERVICES</b>	<u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT INDIVIDUAL TREATMENT RECOVERY EMPLOYMENT SUPPORT
<b>200122</b>	<b>TAMARACK CENTER - CLIP</b> 2901 WEST ELLIOTT DRIVE SPOKANE, WA 99224	
	<b>MAILING ADDRESS</b> 2901 WEST ELLIOTT DRIVE SPOKANE, WA 99224	
	<b>CERTIFIED SERVICES</b>	<u>MENTAL HEALTH SERVICES:</u> CHILD LONG-TERM INPATIENT PROGRAM (CLIP)
<b>200123</b>	<b>TAMARACK CENTER - OUTPATIENT</b> 2901 WEST ELLIOTT DRIVE SPOKANE, WA 99224 (509) 326-8100 <a href="http://TAMARACK.ORG">TAMARACK.ORG</a>	TIM DAVIS EXECUTIVE DIRECTOR  ELLEN DAL PRA CLINICAL SUPERVISOR
	<b>MAILING ADDRESS</b> 2901 WEST ELLIOTT DRIVE SPOKANE, WA 99224	
	<b>CERTIFIED SERVICES</b>	<u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT DAY SUPPORT INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION
<b>200127</b>	<b>THE EMILY PROGRAM - SPOKANE</b> 2020 EAST 29TH AVENUE, SUITE 200 SPOKANE, WA 99203 (888) 364-5977 <a href="http://WWW.EMILYPROGRAM.COM">WWW.EMILYPROGRAM.COM</a>	KRISTA CROTTY SITE DIRECTOR
	<b>MAILING ADDRESS</b> 2020 EAST 29TH AVENUE, SUITE 200 SPOKANE, WA 99203	
	<b>CERTIFIED SERVICES</b>	<u>MENTAL HEALTH SERVICES:</u> DAY SUPPORT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION

---

# SPOKANE

---

046200

**THE HEALING LODGE - BUTTERFLY PELPALWICHIYA  
GIRLS CD**

5600 EAST 8TH AVENUE  
SPOKANE VALLEY, WA 99212-0220  
(509) 533-6910  
ADMIN@HEALINGLODGE.ORG  
[WWW.HEALINGLODGE.ORG](http://WWW.HEALINGLODGE.ORG)

REBECCA CROCKER  
EXECUTIVE DIRECTOR

KIPPY JONES  
SUD CLINICAL SUPERVISOR

**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

---

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](http://WWW.HEALINGLODGE.ORG)

REBECCA CROCKER  
EXECUTIVE DIRECTOR

DODDIE LAGERVALL  
SUD CLINICAL SUPERVISOR

**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

---

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](http://WWW.HEALINGLODGE.ORG)

REBECCA CROCKER  
EXECUTIVE DIRECTOR

STEPHANIE MCGREGOR  
SUD CLINICAL SUPERVISOR

**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

---

012400

**VETERANS AFFAIRS MEDICAL CENTER - SPOKANE**

4815 NORTH ASSEMBLY STREET  
SPOKANE, WA 99205-6197  
(509) 434-7014

PAUL NICOLAI, COORDINATOR  
SUBSTANCE ABUSE PROGRAMS

**MAILING ADDRESS**

4815 N ASSEMBLY ST - 116/668/SATP  
SPOKANE, WA 99205-6197

---

## SPOKANE

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**020000****YFA CONNECTIONS**

22 SOUTH THOR STREET  
SPOKANE, WA 99202  
(509) 532-2000

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

---

**200536****YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION**

930 NORTH MONROE STREET  
SPOKANE, WA 99201  
(509) 789-9297  
[WWW.YWCASPOKANE.ORG](http://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

---

**148100****ADEPT ASSESSMENT CENTER - COLVILLE**

218 B NORTH OAK STREET  
COLVILLE, WA 99114  
(509) 684-2349

SHANA WINDHORST  
ADMINISTRATOR

JAMIE ZBORAC  
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

---

**012501****NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH**

301 EAST CLAY AVENUE, ROOMS 201 & 216  
CHEWELAH, WA 99109  
(509) 935-4808  
[WWW.CO.STEVENS.WA.US/COUNSELING](http://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

---

**012500****NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - MAIN**

165 EAST HAWTHORNE AVENUE  
COLVILLE, WA 99114  
(509) 684-4597  
[WWW.CO.STEVENS.WA.US/COUNSELING](http://WWW.CO.STEVENS.WA.US/COUNSELING)

DAVID NIELSEN  
EXECUTIVE DIRECTOR

DAN PITMAN  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

165 E HAWTHORNE AVE  
COLVILLE, WA 99114

**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

---

**200512****NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T**

982 EAST COLUMBIA AVENUE  
COLVILLE, WA 99114  
(509) 684-4597  
BMICHAELSON@STEVENS COUNTYWA.GOV  
[WWW.CO.STEVENS.WA.US/COUNSELING/INDEX.HTM](http://WWW.CO.STEVENS.WA.US/COUNSELING/INDEX.HTM)

DAVID M. NIELSEN, PH.D.  
EXECUTIVE DIRECTOR

D. LYNNE GUHLKE  
MENTAL HEALTH CLINICAL DIRECTOR

**MAILING ADDRESS**

165 E HAWTHORNE AVE  
COLVILLE, WA 99114

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

---

## STEVENS

---

009900

**SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM**

6228 OLD SCHOOL ROAD  
WELLPINIT, WA 99040  
(509) 258-7502  
(800) 789-4282

BRENT POTTER  
HHS DIRECTOR

LINDA ANDERSON (PEND APPROVAL)  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 540  
WELLPINIT, WA 99040

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT  
LEVEL I OUTPATIENT

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](http://WWW.BHR.ORG)

LAURIE TEBO  
CEO

IAN HARREL  
COO/MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

3857 MARTIN WAY EAST  
OLYMPIA, WA 98506

---

# THURSTON

---

**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  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

---

**020100****BEHAVIORAL HEALTH RESOURCES - TUMWATER**

6128 CAPITOL BOULEVARD SE  
TUMWATER, WA 98501  
(360) 704-7170

LAURIE TEBO  
CEO

DANIELLE MURPHY  
RECOVERY SERVICES MANAGER

**MAILING ADDRESS**

6128 CAPITOL BLVD SE  
TUMWATER, WA 98501

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200016****CAPITAL RECOVERY CENTER**

1000 CHERRY STREET SE  
OLYMPIA, WA 98501  
(360) 464-3880  
(360) 357-2582

JAMES WRIGHT  
EXECUTIVE DIRECTOR

**MAILING ADDRESS**

1000 CHERRY STREET SE  
OLYMPIA, WA 98501

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

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](http://WWW.CCSWW.ORG)

MARY STONE SMITH  
VICE PRESIDENT

**MAILING ADDRESS**

1001 N J STREET  
TACOMA, WA 98403

---

# 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](http://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](http://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](http://WWW.COMMUNITYYOUTHSERVICES.ORG)

SCOTT HANAUER  
CEO

ALICIA FERRIS  
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

### **MAILING ADDRESS**

711 STATE AVE NE  
OLYMPIA, WA 98506

---

# THURSTON

---

**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

---

**200515****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](http://WWW.COMMUNITYYOUTHSERVICES.ORG)

SCOTT HANAUER  
CEO

DR. EKATERINA SHKURKIN  
PROGRAM DIRECTOR (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  
CRISIS STABILIZATION  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**012600****CRISIS CLINIC OF THURSTON AND MASON COUNTIES**

CONFIDENTIAL LOCATION  
(360) 586-2888  
(800) 627-2211  
[WWW.CRISIS-CLINIC.ORG](http://WWW.CRISIS-CLINIC.ORG)

CB BOWERS  
BOARD PRESIDENT

AMY SOHLER  
MH & SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 13453  
OLYMPIA, WA 98508-3453

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

INFORMATION AND CRISIS

MENTAL HEALTH SERVICES:

CRISIS TELEPHONE SUPPORT

---

**077400****DOC - CEDAR CREEK CORRECTIONS CENTER**

12200 BORDEAUX ROAD  
LITTLEROCK, WA 98556  
(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:

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

ROB LONG  
EXECUTIVE DIRECTOR

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](http://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**

34004 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@NWR2.COM  
[WWW.NWR2.COM](http://WWW.NWR2.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@NWR2.COM  
[WWW.NWR2.COM](http://WWW.NWR2.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

**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

# THURSTON

---

061600

**NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN**

2708 WESTMOOR COURT SOUTHWEST  
OLYMPIA, WA 98502  
(360) 943-8810  
INFO@NWRII.COM  
[WWW.NWRII.COM](http://WWW.NWRII.COM)

DENNIS NEAL  
ADMINISTRATOR

STANCIN KAHLER  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

2708 WESTMOOR COURT SOUTHWEST  
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

---

200527

**OLYMPIC HEALTH & RECOVERY SERVICES - MAIN**

612 WOODLAND SQUARE LOOP SE, SUITE 401  
LACEY, WA 98503  
(360) 867-2602  
(800) 658-4105  
INQUIRIES@TMBHO.ORG  
[WWW.TMBHO.ORG](http://WWW.TMBHO.ORG)

MARK FREEDMAN  
CEO

JESSICA SHOOK  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

612 WOODLAND SQUARE LOOP SE, SUITE 401  
LACEY, WA 98503

**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  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY PEER SUPPORT

---

200560

**OLYMPIC HEALTH & RECOVERY SERVICES - OLYMPIA**

3436 MARY ELDER ROAD NORTHEAST  
OLYMPIA, WA 98506  
(360) 754-1338  
INQUIRIES@TMBHO.ORG  
[WWW.TMBHO.ORG](http://WWW.TMBHO.ORG)

MARK FREEDMAN  
CEO

JESSICA SHOOK  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

612 WOODLAND SQUARE LP SE STE 401  
LACEY, WA 98503

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
CRISIS TELEPHONE SUPPORT

---

# THURSTON

---

140400

**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

---

152700

**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

---

200483

**PROVIDENCE HEALTH & SERVICES BEHAVIORAL  
HEALTH - CCC BRANCH**

225 STATE AVENUE NORTHEAST  
OLYMPIA, WA 98501  
(360) 486-6400  
TIMOTHY.LAROCQUE@PROVIDENCE.ORG  
[WWW.PROVIDENCE.ORG](http://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

---

200098

**PROVIDENCE HEALTH & SERVICES BEHAVIORAL  
HEALTH - MAIN**

413 LILLY ROAD NE  
OLYMPIA, WA 98506

[HTTP://WASHINGTON.PROVIDENCE.ORG](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

---

## THURSTON

---

**176500**      **ROYAL LIFE CENTERS, LLC - HAVEN**  
8649 MARTIN WAY EAST  
LACEY, WA 98516  
(360) 515-0422  
ADMISSIONS@ROYALCENTERS.COM  
[WWW.ROYALLIFECENTERS.COM](http://WWW.ROYALLIFECENTERS.COM)

**MAILING ADDRESS**  
8649 MARTIN WAY E  
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**  
8645 MARTIN WAY EAST  
LACEY, WA 98516  
(360) 515-0070  
ADMISSIONS@ROYALCENTERS.COM  
[WWW.ROYALLIFECENTERS.COM](http://WWW.ROYALLIFECENTERS.COM)

**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

**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](http://WWW.SEAMARCHC.ORG)

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

**MENTAL HEALTH SERVICES:**  
ADMINISTRATOR  
CLINICAL SUPERVISOR

---

# THURSTON

---

**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

CLAUDIA D'ALLEGRI  
VP OF BEHAVIORAL HEALTH

JODI TAYLOR  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

8915 14TH AVE S  
SEATTLE, WA 98108

**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

---

**111900****SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES**

6700 MARTIN WAY EAST, SUITE 117  
OLYMPIA, WA 98516  
(360) 413-6910

MOLLY CARNEY  
EXECUTIVE DIRECTOR

JANICE CROLL  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1700 AIRPORT WY S  
SEATTLE, WA 98134-1618

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT  
OPIATE SUBSTITUTION TREATMENT

---

**015300****ST. PETER CHEMICAL DEPENDENCY CENTER**

4800 COLLEGE STREET SOUTHEAST  
LACEY, WA 98503  
(360) 456-7575  
(800) 332-0465

SUE BEALL  
ADMINISTRATOR

JOHN LANNING  
BEHAVIORAL HEALTH OUTPATIENT MANAGER

**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](http://WWW.TELECARECORP.COM)

JEFF LANDON  
ADMINISTRATOR

TYVONNE BERRING  
CLINICAL DIRECTOR

---

# THURSTON

---

**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](http://WWW.THERIGHTSTEPINC.COM)

JOSEPHINE KAIL-LEIBL  
ADMINISTRATOR

MIJA BRADSHAW  
INTERIM CLINICAL SUPERVISOR

**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

ERIN RIFFE  
ADMINISTRATOR

JACKIE YEE  
CLINICAL SUPERVISOR

**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

ERIN RIFFE  
ADMINISTRATOR

JACKIE YEE  
INTERM CLINICAL SUPERVISOR

**MAILING ADDRESS**

6005 TYEE DR SW  
TUMWATER, WA 98512

**CERTIFIED SERVICES****SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

## WAHIAKUM

---

**001502****WAHIAKUM COUNTY HEALTH AND HUMAN SERVICES**

42 ELOCHOMAN VALLEY ROAD  
CATHLAMET, WA 98612  
(360) 795-8630

CHRIS BISCHOFF  
DIRECTOR

DALLAS CARROLL  
CLINICAL SUPERVISOR

---

## WAHAKIYAKUM

---

**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](http://WWW.CHILDRENSHOMESOCIETY.ORG)

LIBBY HEIN  
CHIEF PROGRAM OFFICER

**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](http://WWW.COMPHC.ORG)

RON GENGLER  
ADMINISTRATOR

ANDREA RAY  
SUD CLINICAL SUPERVISOR

**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

DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

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

---

## 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](http://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:

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

---

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

---

# WHATCOM

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**147000****BRIDGES TREATMENT AND RECOVERY - FERNDALE**

6044 PORTAL WAY, SUITE 103  
FERNDALE, WA 98248  
(360) 714-8180  
(360) 393-4579

DYLAN BRASHEAR  
ADMINISTRATOR

CARI JONES  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

1221 FRASER ST, STE E-1  
BELLINGHAM, WA 98229

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**078600****CATHOLIC COMMUNITY SERVICES - BELLINGHAM**

**LAKEWAY DRIVE**  
515 LAKEWAY DRIVE  
BELLINGHAM, WA 98225  
(360) 676-2187

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:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION

---

**200138****CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN**

1133 RAILROAD AVENUE, SUITE 100  
BELLINGHAM, WA 98225  
(360) 676-2164  
[WWW.CCSWWW.ORG](http://WWW.CCSWWW.ORG)

WILL RICE  
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON  
REGIONAL CLINICAL DIRECTOR

**MAILING ADDRESS**

1133 RAILROAD AVENUE, SUITE 100  
BELLINGHAM, WA 98225

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

CASE MANAGEMENT  
FAMILY THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  
RECOVERY SUPPORT WRAPAROUND FACILITATION

---

**200336****COMPASS HEALTH - BELLINGHAM**

1216 BAY STREET  
BELLINGHAM, WA 98225  
(360) 752-4545  
[WWW.COMPASSHEALTH.ORG](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

ERIN WELLS  
CLINICAL SUPERVISOR

---

# 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](http://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](http://WWW.COMPASSHEALTH.ORG)

ANASTASIA ALLES  
CHIEF OPERATING OFFICER

CHRIS 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](http://WWW.DOC.WA.GOV)

DAWN WILLIAMS  
PROGRAM ADMINISTRATOR

BRYAN SMITH  
CLINICAL SUPERVISOR

---

# WHATCOM

---

**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

---

**200192****ENDLESS POTENTIAL, LLC**

2110 IRON STREET  
BELLINGHAM, WA 98225  
(360) 930-6063  
(360) 746-4092  
CONTACTUS@ENDLESSPOSTENTIALLLC.COM  
[WWW.ENDLESSPOTENTIALLLC.COM](http://WWW.ENDLESSPOTENTIALLLC.COM)

ROBYN NEWBERRY  
OWNER

**MAILING ADDRESS**

2110 IRON STREET  
BELLINGHAM, WA 98225

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**167100****LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER****- MAIN**

609 NORTHSHORE DRIVE  
BELLINGHAM, WA 98226  
(360) 676-6000

JENNY BILLINGS  
CEO

SUSAN CAVANAUGH  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

609 NORTHSHORE DRIVE  
BELLINGHAM, WA 98226

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

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 PEER SUPPORT

---

**200441****LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER****- SUNSET DUPLEX**

1727 EAST SUNSET DRIVE  
BELLINGHAM, WA 98226  
(360) 676-6000  
KAY.BURBIDGE@LWRTC.ORG  
[WWW.LWRTC.ORG](http://WWW.LWRTC.ORG)

JENNY BILLINGS  
CEO

TAWNA THOMAS  
MH CLINICAL SUPERVISOR

**MAILING ADDRESS**

609 NORTHSHORE DR  
BELLINGHAM, WA 98226

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

GROUP THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT

---

**022700****LUMMI COUNSELING SERVICES**

2616 KWINA ROAD  
BELLINGHAM, WA 98226  
(360) 312-2420  
(360) 380-6950

ROSALIE SCOTT  
PROGRAM MANAGER AMDINISTRATOR

HANK WHITTLESEY  
CLINICAL SUPERVISOR

---

# 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

ANNETTE SOLOMON  
ADMINISTRATOR

**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  
ANDEREA@DSHS.WA.GOV  
[WWW.NWRCWA.ORG](http://WWW.NWRCWA.ORG)

DAN MURPHY  
EXECUTIVE DIRECTOR

ROSANN MADSEN PAULEY  
QA, BH & CARE MANAGEMENT SUPERVISOR

**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](http://WWW.PACIFICNORTHWESTAUTISM.COM)

HEATHER DORN-DEASY  
DIRECTOR

**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

KAREN BRAY  
NURSE MANAGER BEHAVIORAL HEALTH

**MAILING ADDRESS**

BEHAVIORAL HEALTH UNIT  
BELLINGHAM, WA 98228-2620

---

# 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](http://WWW.SEAMARCHC.ORG)

CLAUDIA D'ALLEGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH

CHARLES WATRAS  
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

---

**095800**      **SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER**

1603 EAST ILLINOIS STREET  
BELLINGHAM, WA 98226  
(360) 647-4266

LESLIE BLAKE  
ADMINISTRATOR

DIONNEA ANDRICOS  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

8915 14TH AVE S  
SEATTLE, WA 98108

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
RECOVERY HOUSE  
YOUTH RESIDENTIAL

---

**200419**      **SENDAN CENTER**  
1616 CORNWALL AVENUE, SUITE 100  
BELLINGHAM, WA 98225  
(360) 305-3275  
[SENDANCENTER.COM](http://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](http://WWW.SUNRISECOMMUNITYLIVING.COM)

**MAILING ADDRESS**

PO BOX 2569  
EVERETT, WA 98213

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR

---

# WHATCOM

---

**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  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY PEER SUPPORT

---

**200073****UNITY CARE NORTHWEST - BELLINGHAM BRANCH**

1616 CORNWALL AVENUE, SUITE 205  
BELLINGHAM, WA 98225  
(360) 676-6177  
[WWW.UNITYCARENW.ORG](http://WWW.UNITYCARENW.ORG)

**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

---

**200310****UNITY CARE NORTHWEST - FERNDAL 5603 BRANCH**

5603 3RD AVENUE  
FERNDAL 5603, WA 98248  
(360) 752-7410  
[WWW.INTERFAITHCHC.ORG](http://WWW.INTERFAITHCHC.ORG)

**MAILING ADDRESS**

1616 CORNWALL AVE STE 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

---

**200404****UNITY CARE NORTHWEST - FERNDAL 5616 BRANCH**

5616 3RD AVENUE  
FERNDAL 5616, WA 98248

**MAILING ADDRESS**

1616 CORNWALL AVENUE, SUITE 205  
BELLINGHAM, WA 98225

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

CASE MANAGEMENT  
INDIVIDUAL TREATMENT

---

**200072****UNITY CARE NORTHWEST - MAIN**

220 UNITY STREET  
BELLINGHAM, WA 98225  
(360) 676-6177  
[WWW.UNITYCARENW.ORG](http://WWW.UNITYCARENW.ORG)

RANDY POLIDAN  
&#8206;DIRECTOR OF BEHAVIORAL HEALTH

---

## 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

DONALD E. STAAL  
ADMINISTRATOR

**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

MARY REED  
DETOX MANAGER

ROSE NESS  
PCN DIRECTOR

**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

JEAN IVERSON  
ADMINISTRATOR

DARCELL MEYERS & JERRY PASTORE  
CO-MGRS W/JEAN IVERSON

**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

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

---

# YAKIMA

---

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**050300****BARTH CLINIC - YAKIMA MAIN**

201 EAST LINCOLN AVENUE  
YAKIMA, WA 98901  
(509) 457-5653  
[WWW.BARTHCLINIC.COM](http://WWW.BARTHCLINIC.COM)

JAMES BARTH  
ADMINISTRATOR

MEGHAN TRAVERS  
CLINICAL SUPERVISOR

**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

---

**177100****BELIEVE IN RECOVERY, LLC - YAKIMA**

3907 CREEKSIDE LOOP, SUITE 110  
YAKIMA, WA 98902  
(509) 317-2140

VINCENT MARQUIS  
OWNER/ADMINISTRATOR

**MAILING ADDRESS**

3907 CREEKSIDE LP STE 110  
YAKIMA, WA 98902

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT

---

**200153****CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -  
YAKIMA D STREET**

303 EAST D STREET, SUITE 5  
YAKIMA, WA 98901  
(509) 965-7100  
[WWW.CFCSYAKIMA.ORG](http://WWW.CFCSYAKIMA.ORG)

DARLENE DARNELL  
INTERIM PRESIDENT & CEO

**MAILING ADDRESS**

5301 TIETON DR STE C  
YAKIMA, WA 98908

**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT

---

**200150****CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -  
YAKIMA KERN ROAD**

3801 KERN ROAD  
YAKIMA, WA 98902  
(509) 965-7100  
[WWW.CFCSYAKIMA.ORG](http://WWW.CFCSYAKIMA.ORG)

DARLENE DARNELL  
INTERIM PRESIDENT & CEO

**MAILING ADDRESS**

5301 TIETON DR STE C  
YAKIMA, WA 98908

---

# 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](http://WWW.CATHOLICCHARITIESCW.ORG)

DARLENE DARNELL  
PRESIDENT & CEO

CYRUS BRICEL  
ABA SUPERVISOR

### **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

STEPHEN A. YOUNKER, ED.D.  
DIRECTOR

THERESA RAWSON  
CLINICAL SUPERVISOR

### **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](http://WWW.CWCMH.ORG)

TIM SHIELDS  
ADMINISTRATOR

RON GENGLER  
COO/MH CLINICAL SUPERVISOR

### **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](http://WWW.CWCMH.ORG)

TYRA VILLAFAN  
DIRECTOR

HARRY KRAMER  
VICE PRESIDENT

### **MAILING ADDRESS**

PO BOX 959  
YAKIMA, WA 98907

## CERTIFIED SERVICES

### MENTAL HEALTH SERVICES:

COMPETENCY EVALUATION & RESTORATION TREATMENT

---

# YAKIMA

---

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](http://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

MIKE NORTON  
ADMINISTRATOR

CINDY BROWN  
SUD CLINICAL SUPERVISOR

**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  
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

TIMOTHY SHIELDS  
DIRECTOR

BARBARA MYERS-MULL  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 959  
YAKIMA, WA 98907

**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](http://WWW.COMPHC.ORG)

RON GENGLER  
COO

**MAILING ADDRESS**

PO BOX 959  
YAKIMA, WA 98907

**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

---

# YAKIMA

---

014100

**MERIT RESOURCE SERVICES - SUNNYSIDE**

702 EAST FRANKLIN AVENUE  
SUNNYSIDE, WA 98944  
(509) 837-7700  
LORETTAO@MERITRESOURCES.ORG  
[WWW.MERITRESOURCES.ORG](http://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](http://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](http://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](http://WWW.MERITRESOURCES.ORG)

DAVID L. WILSON  
EXECUTIVE DIRECTOR

DAVID R. BURKETT  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 997  
SUNNYSIDE, WA 98944

---

# YAKIMA

---

**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

---

**014000****SUNDOWN M RANCH**

2280 SR 821  
SELAH, WA 98901  
(509) 457-0990

SCOTT MUNSON  
EXECUTIVE DIRECTOR

CHUCK BUTTREY  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 217  
SELAH, WA 98942

**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
RECOVERY HOUSE  
WITHDRAWAL MANAGEMENT  
YOUTH RESIDENTIAL  
YOUTH WITHDRAWAL MANAGEMENT

---

**152200****TRIUMPH TREATMENT SERVICES - BETH'S PLACE**

608 SUPERIOR LANE  
YAKIMA, WA 98902  
(509) 853-4176  
AVASQUEZ@TRIUMPHTX.ORG  
[WWW.TRIUMPHTX.ORG](http://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

---

**114900****TRIUMPH TREATMENT SERVICES - CASITA**

605 SUPERIOR LANE  
YAKIMA, WA 98902  
(509) 853-4174  
(509) 853-4173  
AVASQUEZ@TRIUMPHTX.ORG  
[WWW.TRIUMPHTX.ORG](http://WWW.TRIUMPHTX.ORG)

WALLY LEE  
CEO

TOM DAVIDSON  
EXECUTIVE CLINICAL DIRECTOR (SUD CS)

**MAILING ADDRESS**

PO BOX 2849  
YAKIMA, WA 98907-2849

---

# YAKIMA

---

**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

---

**166300****TRIUMPH TREATMENT SERVICES - INSPIRATIONS**

3300 ROOSEVELT AVENUE  
YAKIMA, WA 98902  
(509) 571-1455  
[WWW.TRIUMPHTX.ORG](http://WWW.TRIUMPHTX.ORG)

WALLY LEE  
CEO

DIANNE SNYDER  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 2849  
YAKIMA, WA 98907-2849

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT

---

**013901****TRIUMPH TREATMENT SERVICES - JAMES OLDHAM  
TREATMENT CENTER**

201 HIGHLAND DRIVE  
BUENA, WA 98921  
(509) 865-6705  
[WWW.TRIUMPHTX.ORG](http://WWW.TRIUMPHTX.ORG)

WALLY LEE  
CEO

**MAILING ADDRESS**

PO BOX 354  
BUENA, WA 98921

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
LONG-TERM RESIDENTIAL  
RECOVERY HOUSE

---

**013900****TRIUMPH TREATMENT SERVICES - MAIN**

120 SOUTH 3RD STREET  
YAKIMA, WA 98901  
(509) 248-1800  
CDAC@TRIUMPHTX.ORG  
[WWW.TRIUMPHTX.ORG](http://WWW.TRIUMPHTX.ORG)

WALLY LEE  
CEO

TOM DAVIDSON  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 2849  
YAKIMA, WA 98907-2849

**CERTIFIED SERVICES**

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

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

---

**013902****TRIUMPH TREATMENT SERVICES - RIEL HOUSE**

613 SUPERIOR LANE  
YAKIMA, WA 98902  
(509) 575-4810  
AVASQUEZ@TRIUMPHTX.ORG  
[WWW.TRIUMPHTX.ORG](http://WWW.TRIUMPHTX.ORG)

WALLY LEE  
CEO

TOM DAVIDSON  
EXECUTIVE CLINICAL DIRECTOR (SUD CS)

---

# YAKIMA

---

**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

---

# YAKIMA

---

**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

JANIS LUVAAS  
ADMINISTRATOR

RUDOLFO (RUDY) RAMIREZ  
CLINICAL SUPERVISOR

**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

---

**200284**

**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA**  
**KERN ROAD**  
3801 KERN ROAD  
YAKIMA, WA 98902

JANIS LUVAAS  
ADMINISTRATOR

**MAILING ADDRESS**

918 EAST MEAD AVENUE  
YAKIMA, WA 98903

**CERTIFIED SERVICES****MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

**200283**

**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA**  
**MAIN**  
918 EAST MEAD AVENUE  
YAKIMA, WA 98903

JANIS LUVAAS  
ADMINISTRATOR

**MAILING ADDRESS**

918 EAST MEAD AVENUE  
YAKIMA, WA 98903

---

## YAKIMA

---

### 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:

CRISIS TELEPHONE SUPPORT

## INDEX

<b><u>AGENCY NAME</u></b>	<b><u>AGENCY NUMBER</u></b>	<b><u>COUNTY</u></b>
2ND CHANCE RECOVERY CENTER, LLC	178000	KING
A CHANGE INTO RECOVERY, LLC	173500	PIERCE
A NEW SAFEHAVEN	116600	COWLITZ
A POSITIVE ALTERNATIVE, INC.	044000	KING
A RENEWAL CENTER, LLC	150100	KING
ABRACADABRA RECOVERY CENTER	148500	PIERCE
ACTION COUNSELING - ABERDEEN	200496	GRAYS HARBOR
ACTION COUNSELING - KENNEWICK	060500	BENTON
ACTION COUNSELING - PORT ORCHARD	119000	KITSAP
ADAMS COUNTY INTEGRATED HEALTH CARE SERVICES - OTHELLO MAIN	000100	ADAMS
ADAMS COUNTY INTEGRATED HEALTH CARE SERVICES - RITZVILLE	200323	ADAMS
ADEPT ASSESSMENT CENTER - COLVILLE	148100	STEVENS
ADEPT ASSESSMENT CENTER - DEER PARK	136500	SPOKANE
ADEPT ASSESSMENT CENTER - SPOKANE	107700	SPOKANE
ADONAI COUNSELING & EMPLOYMENT, INC.	200561	PIERCE
ADVOCATES FOR WELLNESS, LLC	044400	BENTON
AFFINITY COUNSELING AND TREATMENT	158100	CLARK
AGAPÉ UNLIMITED	027300	KITSAP
ALL ABOUT RECOVERY SERVICES	200503	SNOHOMISH
ALPHA RECOVERY CHOICES	041900	KING
ALPINE RECOVERY SERVICES, INC. - ARLINGTON	054400	SNOHOMISH
ALPINE RECOVERY SERVICES, INC. - LYNNWOOD	018500	SNOHOMISH
AL'TA COUNSELING AND TESTING	145100	PIERCE
ALTERNATIVE COUNSELING - KENT	122500	KING
ALTERNATIVE COUNSELING - SPANAWAY	134100	PIERCE
ALTERNATIVES PROFESSIONAL COUNSELING, INC.	089200	THURSTON
ALTERNATIVES, INC.	019800	KING
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CENTRALIA OUTPATIENT	200499	LEWIS
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CHEHALIS	146500	LEWIS
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - COZZA MAIN	096700	SPOKANE
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - FREELAND OUTPATIENT	200549	ISLAND
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - MISSION	134200	SPOKANE
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SNOHOMISH OUTPATIENT	200460	SNOHOMISH
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SPOKANE OUTPATIENT	177200	SPOKANE
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - STANWOOD OUTPATIENT	200550	SNOHOMISH
AMERICAN INDIAN COMMUNITY CENTER	110400	SPOKANE
ANTIOCH COUNSELING AND TREATMENT SERVICES	156400	KING
APPLE CONSULTING	200450	KING

APPLE VALLEY COUNSELING SERVICE	121400	YAKIMA
ARK COUNSELING AND TREATMENT SERVICES	200422	KING
ARMSTRONG ALCOHOL AND DRUG RECOVERY, LLC	120700	KING
ARMY SUBSTANCE ABUSE PROGRAM (ASAP)	073600	PIERCE
ASIAN COUNSELING AND REFERRAL SERVICE	100100	KING
ASIAN COUNSELING TREATMENT SERVICES (ACTS)	145700	PIERCE
ASIAN-AMERICAN CHEMICAL DEPENDENCY TREATMENT SERVICES	130100	SNOHOMISH
ASSESSMENT AND TREATMENT ASSOCIATES - BELLEVUE MAIN	118700	KING
ASSESSMENT AND TREATMENT ASSOCIATES - FRANKLIN COUNTY	149300	FRANKLIN
ASSESSMENT AND TREATMENT ASSOCIATES - MOUNTLAKE TERRACE	132500	SNOHOMISH
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - BELLEVUE MAIN	081600	KING
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - KENT	149400	KING
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - SEATTLE	092200	KING
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - WEST SEATTLE	045600	KING
ASSOCIATES FOR PSYCHIATRIC & MENTAL HEALTH, LLC	200344	CLARK
AT PARR OUTPATIENT SERVICES, LLC	129800	SPOKANE
ATLANTIC STREET CENTER	200027	KING
AUTISM OUTREACH OF WASHINGTON, INC.	200424	
AUTISM SPECTRUM THERAPIES	200035	KING
AUTISM THERAPY SERVICES OF MOSES LAKE, LLC	200455	GRANT
AVALON CENTER	101900	KING
AWAKENINGS, INC.	119300	COWLITZ
BALANCE SOCIAL SERVICES, LLC	149800	YAKIMA
BALANCED LIVING THERAPY, LLC	200558	SNOHOMISH
BALANCED PERSPECTIVES, INC.	144000	THURSTON
BARTH CLINIC - ELLENSBURG	200543	KITTITAS
BARTH CLINIC - YAKIMA MAIN	050300	YAKIMA
BASIC STEPS MENTAL HEALTH	200533	SNOHOMISH
BEHAVIORAL HEALTH RESOURCES - ELMA	200033	GRAYS HARBOR
BEHAVIORAL HEALTH RESOURCES - HOQUIAM	200032	GRAYS HARBOR
BEHAVIORAL HEALTH RESOURCES - MAIN	200028	THURSTON
BEHAVIORAL HEALTH RESOURCES - SHELTON	073000	MASON
BEHAVIORAL HEALTH RESOURCES - TUMWATER	020100	THURSTON
BEHAVIORAL HEALTH WORKS, INC.	200552	KING
BELAIR CLINIC	038600	WHATCOM
BELIEVE IN RECOVERY, LLC - PORT TOWNSEND MAIN	151100	JEFFERSON
BELIEVE IN RECOVERY, LLC - YAKIMA	177100	YAKIMA
BLUE MOUNTAIN COUNSELING OF COLUMBIA COUNTY	001400	COLUMBIA
BREAKTHROUGH RECOVERY GROUP	160200	SPOKANE
BRIDGES TREATMENT AND RECOVERY - BELLINGHAM	139900	WHATCOM
BRIDGES TREATMENT AND RECOVERY - FERNDALE	147000	WHATCOM

BRIDGEWAY TREATMENT SERVICES, LLC	113700	SNOHOMISH
BRIDGEWAYS	200014	SNOHOMISH
CAMAS PATH BHS	117400	SPOKANE
CANYON PARK TREATMENT SOLUTIONS	112100	SNOHOMISH
CAPITAL RECOVERY CENTER	200016	THURSTON
CASCADE BEHAVIORAL HOSPITAL	005400	KING
CASCADE MENTAL HEALTH CARE - CHEHALIS	155800	LEWIS
CASCADE MENTAL HEALTH CARE - MAIN	007400	LEWIS
CASCADE MENTAL HEALTH CARE - MORTON	200300	LEWIS
CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC	118600	KITSAP
CASTEELE, WILLIAMS & ASSOCIATES COMPREHENSIVE BEHAVIORAL HEALTH, INC. - MAIN	054700	PIERCE
CASTEELE, WILLIAMS & ASSOCIATES COMPREHENSIVE BEHAVIORAL HEALTH, INC. - VASHON	173200	KING
CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES	200491	SPOKANE
CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN	200017	SPOKANE
CATHOLIC CHARITIES COUNSELING PROGRAM - ST. ANNE'S	200457	SPOKANE
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - RICHLAND	200147	BENTON
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - WENATCHEE ELLIOT STREET	200445	CHELAN
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - WENATCHEE MOBILE OFFICE	200342	CHELAN
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - WENATCHEE WORTHEN STREET	200149	CHELAN
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA D STREET	200153	YAKIMA
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA KERN ROAD	200150	YAKIMA
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA MAIN	200152	YAKIMA
CATHOLIC COMMUNITY SERVICES - ABERDEEN STATE STREET	200396	GRAYS HARBOR
CATHOLIC COMMUNITY SERVICES - ABERDEEN WISHKAH STREET	200350	GRAYS HARBOR
CATHOLIC COMMUNITY SERVICES - BELLINGHAM LAKEWAY DRIVE	078600	WHATCOM
CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN	200138	WHATCOM
CATHOLIC COMMUNITY SERVICES - BREMERTON	200326	KITSAP
CATHOLIC COMMUNITY SERVICES - BURLINGTON	164800	SKAGIT
CATHOLIC COMMUNITY SERVICES - EVERETT AVENUE	200140	SNOHOMISH
CATHOLIC COMMUNITY SERVICES - EVERETT COLBY AVENUE	200141	SNOHOMISH
CATHOLIC COMMUNITY SERVICES - EVERETT WETMORE AVENUE	034400	SNOHOMISH
CATHOLIC COMMUNITY SERVICES - MARYSVILLE	085700	SNOHOMISH
CATHOLIC COMMUNITY SERVICES - OLYMPIA	200142	THURSTON
CATHOLIC COMMUNITY SERVICES - RUSTON	200489	PIERCE
CATHOLIC COMMUNITY SERVICES - SEATTLE	034300	KING
CATHOLIC COMMUNITY SERVICES - SHELTON	200340	MASON
CATHOLIC COMMUNITY SERVICES - TACOMA 14TH STREET	200144	PIERCE
CATHOLIC COMMUNITY SERVICES - TACOMA MAIN	200019	PIERCE
CATHOLIC COMMUNITY SERVICES - TUKWILA	200145	KING
CATHOLIC COMMUNITY SERVICES - UNIVERSITY PLACE	200143	PIERCE

CATHOLIC COMMUNITY SERVICES - VANCOUVER	200146	CLARK
CATHOLIC COMMUNITY SERVICES - YELM	104900	THURSTON
CEDAR GROVE COUNSELING, INC. - FORKS	162400	CLALLAM
CEDAR GROVE COUNSELING, INC. - PORT ANGELES	050500	CLALLAM
CENTER FOR ADDICTIONS RECOVERY AND EDUCATION (CARE)	096000	YAKIMA
CENTER FOR AUTISM AND RELATED DISORDERS	200438	CLARK
CENTER FOR COUNSELING & HEALTH RESOURCES	052300	SNOHOMISH
CENTER FOR HUMAN SERVICES - MAIN	015900	KING
CENTER FOR HUMAN SERVICES - MOUNTLAKE TERRACE	162600	SNOHOMISH
CENTER FOR HUMAN SERVICES - SHORELINE	200154	KING
CENTER FOR HUMAN SERVICES - SILVER LAKE	162500	SNOHOMISH
CHILD ENRICHMENT CENTER - MAIN	200155	BENTON
CHILDHAVEN - ELI CREEKMORE MEMORIAL	200039	KING
CHILDHAVEN - MAIN	200038	KING
CHILDHAVEN - PATRICK L. GOGERTY	200040	KING
CHILDREN'S CENTER - BATTLE GROUND	200369	CLARK
CHILDREN'S CENTER - MAIN	200026	CLARK
CHILDREN'S HOME SOCIETY OF WASHINGTON - BATTLE GROUND	200071	CLARK
CHILDREN'S HOME SOCIETY OF WASHINGTON - EAST WENATCHEE	200314	DOUGLAS
CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE COOK STREET	200299	SPOKANE
CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE MAIN	200070	SPOKANE
CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE WEST PLAINS	200313	SPOKANE
CHILDREN'S HOME SOCIETY OF WASHINGTON - VANCOUVER COLUMBIA STREET	200068	CLARK
CHILDREN'S HOME SOCIETY OF WASHINGTON - VANCOUVER MAIN	200069	CLARK
CHILDREN'S HOME SOCIETY OF WASHINGTON - WALLA WALLA	200067	WALLA WALLA
CHILDREN'S HOME SOCIETY OF WASHINGTON - WASHOUGAL	200066	CLARK
CHILDREN'S HOME SOCIETY OF WASHINGTON - WENATCHEE	200065	CHELAN
CHOICE WELLNESS CENTERS, LLC	200526	CLARK
CHOICES	178200	COWLITZ
CHOICES AND CHANGES, INC.	042800	BENTON
CHOICES ASSESSMENT AND RECOVERY, INC.	030000	SNOHOMISH
CLARK COUNTY DEPARTMENT OF COMMUNITY SERVICES	200064	CLARK
CLEARVIEW COUNSELING	121100	SNOHOMISH
COASTAL TREATMENT SERVICES, INC. - EVERETT ADIS	172400	SNOHOMISH
COASTAL TREATMENT SERVICES, INC. - MAIN	072100	KING
COLEMAN'S FAMILY SERVICES LLC	200262	KING
COLONIAL CLINIC	025500	SPOKANE
COLUMBIA COUNSELING 607, LLC	151900	CHELAN
COLUMBIA RIVER MENTAL HEALTH SERVICES - BATTLE GROUND	174800	CLARK
COLUMBIA RIVER MENTAL HEALTH SERVICES - ELAHAN PLACE	200156	CLARK
COLUMBIA RIVER MENTAL HEALTH SERVICES - ESTHER STREET	200157	CLARK

COLUMBIA RIVER MENTAL HEALTH SERVICES - HAZEL DELL	200453	CLARK
COLUMBIA RIVER MENTAL HEALTH SERVICES - VANCOUVER MAIN	089400	CLARK
COLUMBIA TREATMENT SERVICES	068600	CLARK
COLUMBIA VALLEY COMMUNITY HEALTH - CHELAN	200161	CHELAN
COLUMBIA VALLEY COMMUNITY HEALTH - EAST WENATCHEE	200160	DOUGLAS
COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE EASY WAY	200159	CHELAN
COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE MAIN	200158	CHELAN
COLUMBIA WELLNESS - ABERDEEN	200554	GRAYS HARBOR
COLUMBIA WELLNESS - HOQUIAM	200393	GRAYS HARBOR
COLUMBIA WELLNESS - KELSO 200 ACADEMY	200047	COWLITZ
COLUMBIA WELLNESS - KELSO 210 ACADEMY	200555	COWLITZ
COLUMBIA WELLNESS - KELSO OAK	200553	COWLITZ
COLUMBIA WELLNESS - KELSO PACIFIC	200504	COWLITZ
COLUMBIA WELLNESS - LONGVIEW BRANCH	200042	COWLITZ
COLUMBIA WELLNESS - LONGVIEW MAIN	200043	COWLITZ
COLUMBIA WELLNESS - WOODLAND	200046	COWLITZ
COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - INCHELIUM	126600	FERRY
COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - KELLER	126800	FERRY
COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - NESPELEM	007900	OKANOGAN
COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - OMAK	126700	OKANOGAN
COMMUNITY COUNSELING INSTITUTE, INC.	090800	PIERCE
COMMUNITY HOUSE MENTAL HEALTH	200063	KING
COMMUNITY PSYCHIATRIC CLINIC - BELLTOWN	087600	KING
COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL	200293	KING
COMMUNITY PSYCHIATRIC CLINIC - EL REY	200292	KING
COMMUNITY PSYCHIATRIC CLINIC - LAKE CITY MAIN	117700	KING
COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN	170800	KING
COMMUNITY PSYCHIATRIC CLINIC - SOUTH SEATTLE	200567	KING
COMMUNITY PSYCHIATRIC CLINIC - UNIVERSITY DISTRICT	200559	KING
COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE	087400	KING
COMMUNITY SERVICES NORTHWEST - 39TH STREET	200302	CLARK
COMMUNITY SERVICES NORTHWEST - BATTLE GROUND	200139	CLARK
COMMUNITY SERVICES NORTHWEST - MAIN	056001	CLARK
COMMUNITY SERVICES NORTHWEST - TOWN PLAZA	200368	CLARK
COMMUNITY YOUTH SERVICES - MAIN	200162	THURSTON
COMMUNITY YOUTH SERVICES - PEAR STREET	200163	THURSTON
COMMUNITY YOUTH SERVICES - SHELTON	200367	MASON
COMMUNITY YOUTH SERVICES - UNION AVENUE	200515	THURSTON
COMPASS HEALTH - AURORA HOUSE	200181	SNOHOMISH
COMPASS HEALTH - BAILEY CENTER	200176	SNOHOMISH
COMPASS HEALTH - BELLINGHAM	200336	WHATCOM

COMPASS HEALTH - COUPEVILLE	200465	ISLAND
COMPASS HEALTH - DAWSON PLACE	200177	SNOHOMISH
COMPASS HEALTH - EVERETT CHILD & FAMILY CLINIC	200359	SNOHOMISH
COMPASS HEALTH - EVERETT CHILDREN'S INTENSIVE SERVICES	200320	SNOHOMISH
COMPASS HEALTH - FEDERAL CAMPUS-BUILDING 4 WEST	166100	SNOHOMISH
COMPASS HEALTH - GREENHOUSE	200180	SNOHOMISH
COMPASS HEALTH - HARBOR STATION	200224	ISLAND
COMPASS HEALTH - HAVEN HOUSE	200308	SNOHOMISH
COMPASS HEALTH - LOPEZ ISLAND	147700	SAN JUAN
COMPASS HEALTH - LYNNWOOD ADULT SERVICES	200172	SNOHOMISH
COMPASS HEALTH - LYNNWOOD CHILD & FAMILY CLINIC	200173	SNOHOMISH
COMPASS HEALTH - MARYSVILLE ADULT SERVICES	200174	SNOHOMISH
COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC 1	200170	SNOHOMISH
COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC 2	200534	SNOHOMISH
COMPASS HEALTH - MT. VERNON ADULT SERVICES	200166	SKAGIT
COMPASS HEALTH - MT. VERNON CHILD & FAMILY CLINIC	200167	SKAGIT
COMPASS HEALTH - MT. VERNON PACT	200168	SKAGIT
COMPASS HEALTH - MUKILTEO E&T	200111	SNOHOMISH
COMPASS HEALTH - ORCAS ISLAND	147600	SAN JUAN
COMPASS HEALTH - SAN JUAN ISLAND	124600	SAN JUAN
COMPASS HEALTH - SMOKEY POINT CHILD & FAMILY CLINIC	200175	SNOHOMISH
COMPASS HEALTH - SNOHOMISH ADULT SERVICES	200169	SNOHOMISH
COMPASS HEALTH - SNOHOMISH TRIAGE	200114	SNOHOMISH
COMPASS HEALTH - WHATCOM COUNTY MCLEOD	200178	WHATCOM
COMPASS HEALTH - WHATCOM TRIAGE CENTER	200179	WHATCOM
COMPREHENSIVE HEALTHCARE - BRIDGES E&T	200013	YAKIMA
COMPREHENSIVE HEALTHCARE - CLE ELUM	200301	KITTITAS
COMPREHENSIVE HEALTHCARE - COMPETENCY RESTORATION CENTER	200354	YAKIMA
COMPREHENSIVE HEALTHCARE - DETOX & OUTPATIENT	049000	YAKIMA
COMPREHENSIVE HEALTHCARE - ELLENSBURG 4TH AVENUE	200023	KITTITAS
COMPREHENSIVE HEALTHCARE - ELLENSBURG PEARL STREET	167000	KITTITAS
COMPREHENSIVE HEALTHCARE - GOLDENDALE	115800	KLICKITAT
COMPREHENSIVE HEALTHCARE - MAIN	020500	YAKIMA
COMPREHENSIVE HEALTHCARE - PASCO	158000	FRANKLIN
COMPREHENSIVE HEALTHCARE - PATHWAYS	136300	YAKIMA
COMPREHENSIVE HEALTHCARE - SUNNYSIDE	125600	YAKIMA
COMPREHENSIVE HEALTHCARE - TWO RIVERS LANDING	146700	YAKIMA
COMPREHENSIVE HEALTHCARE - WALLA WALLA	166200	WALLA WALLA
COMPREHENSIVE HEALTHCARE - WHITE SALMON	115900	KLICKITAT
COMPREHENSIVE HEALTHCARE - YAKIMA 2ND AVENUE	200399	YAKIMA
COMPREHENSIVE LIFE RESOURCES - ADULT OUTPATIENT	200298	PIERCE

COMPREHENSIVE LIFE RESOURCES - GIG HARBOR	200184	PIERCE
COMPREHENSIVE LIFE RESOURCES - MAIN	200182	PIERCE
COMPREHENSIVE LIFE RESOURCES - PARK PLACE RTF	200183	PIERCE
COMPREHENSIVE LIFE RESOURCES - SPANAWAY	200562	PIERCE
COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER	200297	PIERCE
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION - KENT	200366	KING
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION - MAIN	200185	KING
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION - SLATER PARK	200395	KING
CONSEJO COUNSELING AND REFERRAL SERVICE - BELLEVUE	200186	KING
CONSEJO COUNSELING AND REFERRAL SERVICE - LAKE CITY	200187	KING
CONSEJO COUNSELING AND REFERRAL SERVICE - MAIN	003800	KING
CONSEJO COUNSELING AND REFERRAL SERVICE - SHELTON	200488	MASON
CONSEJO COUNSELING AND REFERRAL SERVICE - TACOMA	124800	PIERCE
CONSEJO KENT YOUTH OUTPATIENT SERVICES	149500	KING
CONSEJO YOUTH AND FAMILY SERVICES - SEATTLE	135400	KING
CONSUMER VOICES ARE BORN (CVAB) - REACH CENTER	200525	CLARK
CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER	200133	CLARK
CONTACT COUNSELING	013400	WHATCOM
CORE HEALTH - CENTRALIA	200426	LEWIS
CORE HEALTH - MAIN	200062	COWLITZ
CORRECT CARE, LLC	200370	LEWIS
COURAGE TO CHANGE	163600	SPOKANE
COWLITZ FAMILY HEALTH CENTER - BROADWAY CAMPUS	015101	COWLITZ
COWLITZ FAMILY HEALTH CENTER - GRADE STREET CAMPUS	102200	COWLITZ
COWLITZ FAMILY HEALTH CENTER - TOUTLE RIVER CAMPUS	015100	COWLITZ
COWLITZ TRIBAL TREATMENT PROGRAM - MAIN	120600	COWLITZ
COWLITZ TRIBAL TREATMENT PROGRAM - SEATTLE	158200	KING
COWLITZ TRIBAL TREATMENT PROGRAM - VANCOUVER	128700	CLARK
CRH CHRISTOPHER HOUSE, LLC	200020	CHELAN
CRISIS CLINIC	154100	KING
CRISIS CLINIC OF THURSTON AND MASON COUNTIES	012600	THURSTON
CROSSROADS TREATMENT CENTER, INC.	150400	PIERCE
CTC COUNSELING SERVICES, LLC	113800	KING
CUBHOUSE	200481	SPOKANE
DAYBREAK YOUTH SERVICES - BRUSH PRAIRIE	200451	CLARK
DAYBREAK YOUTH SERVICES - SPOKANE INPATIENT	011601	SPOKANE
DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT	011600	SPOKANE
DAYBREAK YOUTH SERVICES - VANCOUVER OUTPATIENT	155400	CLARK
DIDGWALIC WELLNESS CENTER	200519	SKAGIT
DISCOVERY BEHAVIORAL HEALTHCARE	200081	JEFFERSON
DISCOVERY COUNSELING GROUP	166600	SPOKANE

DOC - AHTANUM VIEW WORK RELEASE	076500	YAKIMA
DOC - AIRWAY HEIGHTS CORRECTIONS CENTER	075700	SPOKANE
DOC - BELLINGHAM WORK RELEASE	019401	WHATCOM
DOC - BISHOP LEWIS WORK RELEASE	077000	KING
DOC - BROWNSTONE WORK RELEASE	076000	SPOKANE
DOC - CEDAR CREEK CORRECTIONS CENTER	077400	THURSTON
DOC - CLALLAM BAY CORRECTIONS CENTER	169400	CLALLAM
DOC - COYOTE RIDGE CORRECTIONS CENTER	075800	FRANKLIN
DOC - ELEANOR CHASE WORK RELEASE	026802	SPOKANE
DOC - HELEN B. RATCLIFFE WORK RELEASE	077200	KING
DOC - LARCH CORRECTIONS CENTER	077500	CLARK
DOC - LONGVIEW WORK RELEASE	078000	COWLITZ
DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN	125000	MASON
DOC - MONROE CORRECTIONS CENTER - MSU	076900	SNOHOMISH
DOC - MONROE CORRECTIONS CENTER - SOU (SPECIAL OFFENDER UNIT)	147200	SNOHOMISH
DOC - MONROE CORRECTIONS CENTER - WSR (WASHINGTON STATE REFORMATORY)	147300	SNOHOMISH
DOC - OLYMPIC CORRECTIONS CENTER	076700	CLALLAM
DOC - PENINSULA WORK RELEASE	086500	KITSAP
DOC - PROGRESS HOUSE WORK RELEASE	078100	PIERCE
DOC - REYNOLDS WORK RELEASE	077300	KING
DOC - STAFFORD CREEK CORRECTIONS CENTER	107500	GRAYS HARBOR
DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT	200513	THURSTON
DOC - TWIN RIVERS CORRECTIONS CENTER	076800	SNOHOMISH
DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON	077700	MASON
DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN - PURDY	077800	PIERCE
DOC - WASHINGTON STATE PENITENTIARY	075900	WALLA WALLA
DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER	200189	KING
DOWNTOWN EMERGENCY SERVICE CENTER - JAMES STREET	169200	KING
DOWNTOWN EMERGENCY SERVICE CENTER - MAIN	097900	KING
DOWNTOWN EMERGENCY SERVICE CENTER - WALL STREET	169100	KING
EAGLE HARBOR COUNSELING, LLC	200480	KITSAP
EASTERN STATE HOSPITAL	200563	SPOKANE
EASTSIDE CENTER FOR FAMILY	109700	KING
EASTSIDE RECOVERY GROUP	037201	KING
EASTSIDE SOCIAL SKILLS THERAPY, LLC	200191	KING
EATING RECOVERY CENTER OF WASHINGTON - MAIN	200048	KING
EATING RECOVERY CENTER OF WASHINGTON - SEATTLE	200531	KING
EDGEWOOD SEATTLE ADDICTION SERVICES	149600	KING
ELLIE LORENZ COUNSELING AND CONSULTING SERVICE	164500	KITTITAS
ENDLESS POTENTIAL, LLC	200192	WHATCOM
ENGAGE ABA LLC	200137	KING

EUGENIA CENTER - CHEHALIS BRANCH	200492	LEWIS
EUGENIA CENTER - CHEHALIS MAIN	054000	LEWIS
EUGENIA CENTER - MOSSYROCK	172600	LEWIS
EVERETT TREATMENT SERVICES	200452	SNOHOMISH
EVERGREEN HEALTHCARE	136100	KING
EVERGREEN RECOVERY CENTERS - BUILDING B	010802	SNOHOMISH
EVERGREEN RECOVERY CENTERS - BUILDING C	010801	SNOHOMISH
EVERGREEN RECOVERY CENTERS - EVERETT DETOX	089100	SNOHOMISH
EVERGREEN RECOVERY CENTERS - EVERETT OUTPATIENT	010803	SNOHOMISH
EVERGREEN RECOVERY CENTERS - LEGACY LODGE	200573	SKAGIT
EVERGREEN RECOVERY CENTERS - LYNNWOOD DETOX	162800	SNOHOMISH
EVERGREEN RECOVERY CENTERS - LYNNWOOD OUTPATIENT	133600	SNOHOMISH
EVERGREEN TREATMENT SERVICES - GRAYS HARBOR CLINIC	163700	GRAYS HARBOR
EVERGREEN TREATMENT SERVICES - REACH	200477	KING
EVERGREEN TREATMENT SERVICES - SOUTH KING COUNTY CLINIC	200408	KING
EVERGREEN TREATMENT SERVICES - UNIT 1	016300	KING
EVERGREEN TREATMENT SERVICES - UNIT 2	016301	KING
EVERGREEN TREATMENT SERVICES - UNIT 3	101300	KING
EVERGREENHEALTH RECOVERY CENTER, MONROE	011200	SNOHOMISH
EXCELSIOR YOUTH CENTER - MAIN	089300	SPOKANE
EXCELSIOR YOUTH CENTER - SPOKANE BRANCH	200478	SPOKANE
EXODUS - YOUTH	037000	KING
EXODUS COUNSELING AND TREATMENT SERVICES	122800	PIERCE
F.H. COUNSELING & ASSOCIATES PLCC	162100	PIERCE
FAIRFAX BEHAVIORAL HEALTH - EVERETT E&T	200194	SNOHOMISH
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND ARTS	118200	KING
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND E&T	200420	KING
FAIRFAX BEHAVIORAL HEALTH - MONROE E&T	200349	SNOHOMISH
FAMILY SOLUTIONS - 114TH AVENUE BRANCH	200433	CLARK
FAMILY SOLUTIONS - MAIN AGENCY	200061	CLARK
FAMILY SOLUTIONS - MAIN STREET BRANCH	200415	CLARK
FAMILY THERAPY & RECOVERY P.S.	165700	KING
FEAT OF WASHINGTON	200195	KING
FIRST STEP COMMUNITY COUNSELING SERVICES, LLC	131700	BENTON
FIRST THINGS FIRST 123, LLC	147500	THURSTON
FOLLMAN AGENCY	038000	SKAGIT
FOUNDATION FOR MULTICULTURAL SOLUTIONS	101700	PIERCE
FOUNDATIONS FOR LEARNING AND BEHAVIOR, INC.	200196	KING
FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC	153600	PACIFIC
FREEDOM RECOVERY, LLC	145800	THURSTON
FRIENDS OF YOUTH - DUVALL	170300	KING

FRIENDS OF YOUTH - MAIN	040901	KING
FRIENDS OF YOUTH - NORTH BEND	170200	KING
FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD	200430	SPOKANE
FRONTIER BEHAVIORAL HEALTH - BOONE	012200	SPOKANE
FRONTIER BEHAVIORAL HEALTH - CALISPEL E&T	200207	SPOKANE
FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY	200198	SPOKANE
FRONTIER BEHAVIORAL HEALTH - CORNERSTONE	200201	SPOKANE
FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB	200193	SPOKANE
FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&T	200208	SPOKANE
FRONTIER BEHAVIORAL HEALTH - HOWARD STREET	200199	SPOKANE
FRONTIER BEHAVIORAL HEALTH - HULSKAMP BUILDING	200200	SPOKANE
FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET	200418	SPOKANE
FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD	200429	SPOKANE
FRONTIER BEHAVIORAL HEALTH - MAIN	200197	SPOKANE
FRONTIER BEHAVIORAL HEALTH - NORTH PINES	200204	SPOKANE
FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE	200362	SPOKANE
FRONTIER BEHAVIORAL HEALTH - PACT	200202	SPOKANE
FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING	200203	SPOKANE
FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE	200360	SPOKANE
FRONTIER BEHAVIORAL HEALTH - SPRAGUE	200546	SPOKANE
FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES	200206	SPOKANE
FULL LIFE CARE	200060	KING
FUTURE VISIONS PROGRAM, INC.	042400	KING
GATEWAY COUNSELING SERVICES	038800	SPOKANE
GIG HARBOR COUNSELING	007001	PIERCE
GRANT INTEGRATED SERVICES - GRAND COULEE	200212	GRANT
GRANT INTEGRATED SERVICES - MATTAWA	200213	GRANT
GRANT INTEGRATED SERVICES - MOSES LAKE MAIN	002200	GRANT
GRANT INTEGRATED SERVICES - QUINCY	200214	GRANT
GRANT INTEGRATED SERVICES - ROYAL CITY	200215	GRANT
GRAY WOLF RANCH	200454	JEFFERSON
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM	200510	GRAYS HARBOR
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - LONGVIEW	200511	COWLITZ
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - MAIN	200458	LEWIS
GREATER LAKES MENTAL HEALTHCARE - 72ND STREET	200057	PIERCE
GREATER LAKES MENTAL HEALTHCARE - MAIN	200056	PIERCE
GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA	200482	PIERCE
GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE	200059	PIERCE
GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC	200364	PIERCE
GREATER LAKES RECOVERY CENTER E&T	200055	PIERCE
GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT	057200	LEWIS

HAND IN HAND BEHAVIORAL CONSULTING LLC	200351	THURSTON
HARBORCREST BEHAVIORAL HEALTH	002500	GRAYS HARBOR
HARBORVIEW MEDICAL CENTER - INPATIENT	200217	KING
HARBORVIEW MEDICAL CENTER ADDICTIONS PROGRAM	098800	KING
HARBORVIEW MENTAL HEALTH SERVICES	200216	KING
HEALTHY WHOLE SOLUTIONS	148700	KITSAP
HELPING PROFESSIONALS WELLNESS CENTER, LLC - BATTLE GROUND	173700	CLARK
HELPING PROFESSIONALS WELLNESS CENTER, LLC - HAZEL DELL	173800	CLARK
HERO HOUSE	200049	KING
HOLISTIC RECOVERY FOR MOTHERS	200493	PIERCE
HOPE + HELP	159400	KING
HOPE PLACE	178600	KING
HOPESPARKS	200053	PIERCE
HOTEL CALIFORNIA BY THE SEA	174700	KING
HUMANITY'S CHILDREN	200050	KING
IDEAL BALANCE - KENNEWICK	161300	BENTON
IKRON CORPORATION GREATER SEATTLE - MAIN	200051	KING
IKRON CORPORATION GREATER SEATTLE - MERIDIAN CENTER	200539	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - BELLEVUE	200220	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - LAKEWOOD	200223	PIERCE
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - MOUNTLAKE	200221	SNOHOMISH
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE	200222	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SPOKANE MAIN	200219	SPOKANE
INNOVATION RESOURCE CENTER	154800	YAKIMA
INSTITUTE FOR FAMILY DEVELOPMENT - BREMERTON	200079	KITSAP
INSTITUTE FOR FAMILY DEVELOPMENT - EVERETT	200078	SNOHOMISH
INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY	200077	KING
INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA	200076	THURSTON
INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE	200080	SPOKANE
INSTITUTE FOR FAMILY DEVELOPMENT - VANCOUVER	200074	CLARK
INSTITUTE FOR FAMILY DEVELOPMENT - YAKIMA	200075	YAKIMA
INTEGRATIVE COUNSELING SERVICES	136000	KING
INTEGRITY SUPPORT SERVICES, LLC	153200	YAKIMA
INTERCEPT ASSOCIATES	004300	KING
ISABELLA HOUSE	019701	SPOKANE
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - OAK HARBOR	086200	ISLAND
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - SEATTLE	129400	KING
ISLAND CROSSING COUNSELING SERVICES	113900	SNOHOMISH
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - LONGVIEW/KELSO	084900	COWLITZ
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER	085000	CLARK
KAREN'S HOUSE	172200	SPOKANE

KELSO TREATMENT SOLUTIONS	200537	COWLITZ
KENT TREATMENT SOLUTIONS	103200	KING
KENT YOUTH AND FAMILY SERVICES	016700	KING
KING COUNTY CRISIS & COMMITMENT SERVICES	200227	KING
KING COUNTY EMERGENCY SERVICE PATROL	004404	KING
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER	200228	KING
KITSAP MENTAL HEALTH SERVICES - ADOLESCENT INPATIENT	200230	KITSAP
KITSAP MENTAL HEALTH SERVICES - ADULT INPATIENT	200229	KITSAP
KITSAP MENTAL HEALTH SERVICES - MAIN	018400	KITSAP
KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD	168700	KITSAP
KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD	174300	KITSAP
KITSAP MENTAL HEALTH SERVICES - WHEATON WAY	200338	KITSAP
KITSAP RECOVERY CENTER - INPATIENT	006700	KITSAP
KITSAP RECOVERY CENTER - OUTPATIENT	200505	KITSAP
KLALLAM COUNSELING SERVICES	022600	CLALLAM
KLEAN LONG BEACH WASHINGTON LLC	159500	PACIFIC
KWAWACHEE COUNSELING CENTER	008900	PIERCE
L.E.A.P.S. AND BEYOND, INC. - MAIN	200233	ISLAND
L.E.A.P.S. AND BEYOND, INC. - OAK HARBOR BRANCH	200345	ISLAND
L.E.A.P.S. AND BEYOND, INC. - PORT ORCHARD	200346	ISLAND
L.E.A.P.S. AND BEYOND, INC. - TACOMA	200538	PIERCE
LA ESPERANZA HCS - BURIEN	155500	KING
LA ESPERANZA HCS - LYNNWOOD	124500	SNOHOMISH
LA FE - THE HOPE, LLC	145500	KING
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER - MAIN	167100	WHATCOM
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER - SUNSET DUPLEX	200441	WHATCOM
LAKESIDE-MILAM RECOVERY CENTERS, INC. - AUBURN	009404	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS	009401	SNOHOMISH
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT	004603	SNOHOMISH
LAKESIDE-MILAM RECOVERY CENTERS, INC. - ISSAQUAH	035104	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - KIRKLAND	009402	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - KIRKLAND INPATIENT	004600	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP	035103	PIERCE
LAKESIDE-MILAM RECOVERY CENTERS, INC. - RENTON	009400	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE EASTLAKE	091400	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - TACOMA	004604	PIERCE
LIFELINE CONNECTIONS - ABERDEEN	200484	GRAYS HARBOR
LIFELINE CONNECTIONS - CAMAS	200306	CLARK
LIFELINE CONNECTIONS - MAIN	000900	CLARK
LIFELINE CONNECTIONS - SOUTH BEND	200486	PACIFIC
LIFELINE CONNECTIONS - VANCOUVER BRANCH	172100	CLARK

LIFELONG AIDS ALLIANCE	200565	KING
LINCOLN COUNTY ALCOHOL & DRUG CENTER	007600	LINCOLN
LOURDES COUNSELING CENTER - CULLUM HOUSE	200236	BENTON
LOURDES COUNSELING CENTER - E&T	200237	BENTON
LOURDES COUNSELING CENTER - KENNEWICK	200428	BENTON
LOURDES COUNSELING CENTER - MAIN	025202	BENTON
LOURDES COUNSELING CENTER - PASCO	177600	FRANKLIN
LOURDES COUNSELING CENTER - TRIAGE	200188	BENTON
LOVE OVERWHELMING	200371	COWLITZ
LOVELAND ASSOCIATES	144400	KING
LUMMI COUNSELING SERVICES	022700	WHATCOM
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK AVENUE	200088	BENTON
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK MORAIN	200501	BENTON
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT	200312	KING
LUTHERAN COMMUNITY SERVICES NORTHWEST - SEATAC MAIN	200084	KING
LUTHERAN COMMUNITY SERVICES NORTHWEST - SPOKANE	200087	SPOKANE
LUTHERAN COMMUNITY SERVICES NORTHWEST - VANCOUVER	200086	CLARK
MAGNOLIA BEHAVIOR THERAPY - DUPONT	200238	PIERCE
MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH	200352	SNOHOMISH
MAKAH RECOVERY SERVICES	022800	CLALLAM
MATT TALBOT CENTER	138600	KING
MATUMAINI COUNSELING & COMMUNITY CENTER	200089	KING
MAXIM HEALTHCARE SERVICES, INC.	200444	PIERCE
MEDTRIQ TREATMENT CENTER, LLC	200566	PIERCE
MEIER CLINICS	200090	KING
MERIT RESOURCE SERVICES - ELLENSBURG	174000	KITTITAS
MERIT RESOURCE SERVICES - KENNEWICK	200470	BENTON
MERIT RESOURCE SERVICES - SUNNYSIDE	014100	YAKIMA
MERIT RESOURCE SERVICES - TOPPENISH	014101	YAKIMA
MERIT RESOURCE SERVICES - WAPATO	083200	YAKIMA
MERIT RESOURCE SERVICES - YAKIMA	107800	YAKIMA
METROPOLITAN DEVELOPMENT COUNCIL - TACOMA E&T	200240	PIERCE
METROPOLITAN DEVELOPMENT COUNCIL - THE CENTER	018900	PIERCE
MINDFUL ALTERNATIVES	120800	KING
MOSAIC CHILDREN'S THERAPY CLINIC	200243	KING
MOTIVATIONS	043100	KING
MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM	022900	KING
MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH	157000	KING
MULTICARE BEHAVIORAL HEALTH - ADOLESCENT BEHAVIORAL HEALTH	200440	PIERCE
MULTICARE BEHAVIORAL HEALTH - ASIAN COUNSELING SERVICES	200209	PIERCE
MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER	200361	KING

MULTICARE BEHAVIORAL HEALTH - LUCKETT HOUSE	200211	PIERCE
MULTICARE BEHAVIORAL HEALTH - PACT	200210	PIERCE
MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN	152800	PIERCE
MULTICARE BEHAVIORAL HEALTH - TACOMA	160400	PIERCE
N.A.T.I.V.E. PROJECT	055600	SPOKANE
NAMI SOUTHWEST WASHINGTON - MAIN	200319	CLARK
NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)	052000	PACIFIC
NAVAL HOSPITAL SUBSTANCE ABUSE AND REHABILITATION PROGRAM (SARP)	168300	ISLAND
NAVOS - AUBURN	200247	KING
NAVOS - BURIEN 136TH STREET	075300	KING
NAVOS - BURIEN 152ND STREET	161000	KING
NAVOS - BURIEN 8TH AVENUE	200246	KING
NAVOS - CLIP	200231	KING
NAVOS - INPATIENT SERVICES	200244	KING
NAVOS - KENT	200248	KING
NAVOS - MAIN	172800	KING
NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)	006900	KITSAP
NEW DIRECTIONS COUNSELING - CHEHALIS	057600	LEWIS
NEW DIRECTIONS COUNSELING - SHELTON	051401	MASON
NEW FREEDOM RECOVERY CENTER, LLC	164000	PIERCE
NEW HOPE RECOVERY, LLC	157200	CHELAN
NEW HORIZON COUNSELING SERVICES	019702	SPOKANE
NEW HORIZON COUNSELING SERVICES - VALLEY OFFICE	011401	SPOKANE
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - MAIN	178300	SNOHOMISH
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - SEATTLE	178400	KING
NEW LIFE RECOVERY SOLUTIONS	142100	KING
NEW TRADITIONS	141600	KING
NEXUS YOUTH AND FAMILIES - AUBURN MAIN	015600	KING
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE	170100	KING
NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET	170000	KING
NEXUS YOUTH AND FAMILIES - MAPLE VALLEY	200532	KING
NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM	028100	THURSTON
NOOKSACK TRIBE'S GENESIS II	023000	WHATCOM
NORTH STAR TREATMENT GROUP, LLC	139500	KING
NORTHBOUND TREATMENT SERVICES OF WASHINGTON, LLC	200495	KING
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH	012501	STEVENS
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT	160900	LINCOLN
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - MAIN	012500	STEVENS
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - NINE MILE FALLS	200245	SPOKANE
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - REPUBLIC	001900	FERRY
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T	200512	STEVENS

NORTHSHORE YOUTH AND FAMILY SERVICES	118000	KING
NORTHSIDE COUNSELING, LLC	176100	KING
NORTHWEST ABA - MAIN	200250	KING
NORTHWEST ABA - TACOMA	200378	PIERCE
NORTHWEST AUTISM CENTER - SPOKANE BRANCH	200305	SPOKANE
NORTHWEST AUTISM CENTER - SPOKANE MAIN	200249	SPOKANE
NORTHWEST BEHAVIORAL ASSOCIATES	200251	KING
NORTHWEST HOSPITAL E&T - SEATTLE	200252	KING
NORTHWEST INDIAN TREATMENT CENTER	074000	GRAYS HARBOR
NORTHWEST INTEGRATED HEALTH - LAKEWOOD	200431	PIERCE
NORTHWEST INTEGRATED HEALTH - MAIN	162000	PIERCE
NORTHWEST INTEGRATED HEALTH - TACOMA	173000	PIERCE
NORTHWEST RECOVERY CENTERS, LLC	151800	KING
NORTHWEST REGIONAL COUNCIL	200456	WHATCOM
NORTHWEST RESOURCES II, INC. - LACEY	160800	THURSTON
NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH	162700	THURSTON
NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN	061600	THURSTON
NORTHWEST RESOURCES II, INC. - SHELTON	101500	MASON
NORTHWEST RESOURCES ONE, LLC	003900	KING
NUA COUNSELING, PLLC	173900	KING
OKANOGAN BEHAVIORAL HEALTHCARE, INC.	007800	OKANOGAN
OLALLA GUEST LODGE	007000	KITSAP
OLIVE CREST	200091	KING
OLYMPIC HEALTH & RECOVERY SERVICES - MAIN	200527	THURSTON
OLYMPIC HEALTH & RECOVERY SERVICES - OLYMPIA	200560	THURSTON
OLYMPIC PERSONAL GROWTH CENTER	086000	CLALLAM
OPAL CLINIC FOR EATING DISORDERS, PLLC	200092	KING
ORGANIZATION FOR RESEARCH AND LEARNING	200254	KING
PACIFIC ISLAMIC COMMUNITY AND CULTURAL SERVICES	200385	KING
PACIFIC NORTHWEST AUTISM	200255	WHATCOM
PALOUSE RECOVERY CENTER, LLC	075500	WHITMAN
PALOUSE RIVER COUNSELING CENTER - MAIN	013800	WHITMAN
PALOUSE RIVER COUNSELING CENTER - PULLMAN	200256	WHITMAN
PARTNERS WITH FAMILIES AND CHILDREN	098700	SPOKANE
PASSAGES FAMILY SUPPORT	200093	SPOKANE
PATHWAYS OF WASHINGTON, INC.	200355	SPOKANE
PEACEHEALTH SOUTHWEST MEDICAL CENTER	200094	CLARK
PEACEHEALTH ST. JOHN MEDICAL CENTER E&T	200095	COWLITZ
PEACEHEALTH ST. JOSEPH MEDICAL CENTER E&T	200096	WHATCOM
PEARL STREET CENTER - CLIP	200097	PIERCE
PEND OREILLE COUNTY COUNSELING SERVICES - MAIN	008100	PEND OREILLE

PEND OREILLE COUNTY COUNSELING SERVICES - METALINE FALLS	169000	PEND OREILLE
PENINSULA BEHAVIORAL HEALTH - ARLENE ENGEL HOME	200258	CLALLAM
PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY RESPITE CENTER	200261	CLALLAM
PENINSULA BEHAVIORAL HEALTH - HORIZON CENTER	200259	CLALLAM
PENINSULA BEHAVIORAL HEALTH - MAIN	015000	CLALLAM
PENINSULA BEHAVIORAL HEALTH - SEQUIM	200260	CLALLAM
PENINSULA COUNSELING	169500	CLALLAM
PENINSULA COUNSELING, INC.	146100	PIERCE
PERCH BEHAVIORAL HEALTH	200331	PIERCE
PHOENIX RECOVERY SERVICES, LLC	114600	SKAGIT
PIB-PROCESO, LLC - KENT	165600	KING
PIB-PROCESO, LLC - SEATTLE	156500	KING
PIERCE COUNTY ALLIANCE - MAIN	019100	PIERCE
PIERCE COUNTY ALLIANCE - THURSTON COUNTY DRUG COURT	140400	THURSTON
PINNACLE PEAK INSTITUTE, INC.	152700	THURSTON
PIONEER ADULT COUNSELING - TACOMA	114000	PIERCE
PIONEER CENTER EAST	111600	SPOKANE
PIONEER CENTER NORTH	005002	SKAGIT
PIONEER COUNSELING SERVICES - SEATTLE	096500	KING
PIONEER COUNSELING SERVICES - SPOKANE	172900	SPOKANE
PIONEER HUMAN SERVICES - CO-OCCURRING RESIDENTIAL PROGRAM (CORP)	128100	KING
PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER	153000	SKAGIT
PIONEER HUMAN SERVICES - SPOKANE RESIDENTIAL REENTRY CENTER	200439	SPOKANE
PORT GAMBLE S'KLALLAM RECOVERY CENTER	088800	KITSAP
PORT GARDNER BAY RECOVERY, INC.	114400	SNOHOMISH
PROGRAMA SER	200529	KING
PROSPERITY WELLNESS CENTER - GRAHAM	200544	PIERCE
PROSPERITY WELLNESS CENTER - MAIN	103700	PIERCE
PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES	169800	PIERCE
PROTOCOL SERVICES, INC.	200101	
PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - CCC BRANCH	200483	THURSTON
PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - MAIN	200098	THURSTON
PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES	035700	SNOHOMISH
PROVIDENCE SACRED HEART MEDICAL CENTER - E&T	200100	SPOKANE
PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT	200099	SPOKANE
PSYCHIATRIC SOLUTIONS	200528	SPOKANE
QUALITY BEHAVIORAL HEALTH - CLARKSTON	014600	ASOTIN
QUALITY BEHAVIORAL HEALTH - POMEROY	014601	GARFIELD
QUILEUTE COUNSELING AND RECOVERY SERVICES	043600	CLALLAM
QUINAULT INDIAN NATION	004500	GRAYS HARBOR
RAGING RIVER RECOVERY CENTER	113500	KING

RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON	200321	BENTON
RECOVERY MATTERS, LLC	164200	SNOHOMISH
REDWOOD RECOVERY CENTER, LLC	200568	CLARK
REFLECTIONS COUNSELING SERVICES GROUP	155000	CLALLAM
REFUGEE WOMEN'S ALLIANCE - KENT	200107	KING
REFUGEE WOMEN'S ALLIANCE - SEATAC	200106	KING
REFUGEE WOMEN'S ALLIANCE - SEATTLE MAIN	200105	KING
REHAB WITHOUT WALLS, INC.	200373	SNOHOMISH
RELIANCE HEALTH SYSTEMS - NEUROPSYCH PROGRAM	200397	BENTON
RELIANCE HEALTH SYSTEMS - SALUS HEALTH	168900	BENTON
REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)	052200	PIERCE
RENTON AREA YOUTH & FAMILY SERVICES	017100	KING
RESIDENCE XII - KIRKLAND	005200	KING
RI INTERNATIONAL - COMMUNITY BUILDING	200104	PIERCE
RI INTERNATIONAL - CSU	200103	PIERCE
RI INTERNATIONAL - E&T	200102	PIERCE
RIVERSIDE RECOVERY CENTER, INC.	035100	SPOKANE
RIVERTON PLACE	117000	KING
RMH SERVICES	200108	KITSAP
ROOTS CLINIC AT ACADEMY FOR PRECISION LEARNING	200372	KING
ROYAL LIFE CENTERS, LLC - CASCADE	176600	SPOKANE
ROYAL LIFE CENTERS, LLC - HAVEN	176500	THURSTON
ROYAL LIFE CENTERS, LLC - OLYMPIC	176800	THURSTON
ROYAL LIFE CENTERS, LLC - PUGET SOUND	176400	PIERCE
ROYAL LIFE CENTERS, LLC - SPOKANE DETOX	176700	SPOKANE
RYTHER - BELLEVUE	159100	KING
RYTHER - MAIN	005500	KING
RYTHER - MUKILTEO	166400	SNOHOMISH
SAFE HARBOR RECOVERY CENTER, INC. FPC	081000	JEFFERSON
SAUK-SUIATTLE INDIAN TRIBE	144800	SNOHOMISH
SCHICK SHADEL HOSPITAL	163800	KING
SEA MAR BEHAVIORAL HEALTH - ABERDEEN	137000	GRAYS HARBOR
SEA MAR BEHAVIORAL HEALTH - ANACORTES	200264	SKAGIT
SEA MAR BEHAVIORAL HEALTH - BELLEVUE	200239	KING
SEA MAR BEHAVIORAL HEALTH - BELLEVUE CHILD & FAMILY	200353	KING
SEA MAR BEHAVIORAL HEALTH - BELLINGHAM	052100	WHATCOM
SEA MAR BEHAVIORAL HEALTH - DES MOINES	200435	KING
SEA MAR BEHAVIORAL HEALTH - ELMA	200343	GRAYS HARBOR
SEA MAR BEHAVIORAL HEALTH - EVERETT	052101	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY	200334	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - FEDERAL WAY	137900	KING

SEA MAR BEHAVIORAL HEALTH - GIG HARBOR	200265	PIERCE
SEA MAR BEHAVIORAL HEALTH - KELSO	200374	COWLITZ
SEA MAR BEHAVIORAL HEALTH - KENT	200401	KING
SEA MAR BEHAVIORAL HEALTH - LYNNWOOD	139100	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - MONROE	104600	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON	079300	SKAGIT
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON HWY 99	200551	SKAGIT
SEA MAR BEHAVIORAL HEALTH - OAK HARBOR	163100	ISLAND
SEA MAR BEHAVIORAL HEALTH - OLYMPIA	200267	THURSTON
SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN	164100	PIERCE
SEA MAR BEHAVIORAL HEALTH - PUYALLUP	127100	PIERCE
SEA MAR BEHAVIORAL HEALTH - SEATTLE	121300	KING
SEA MAR BEHAVIORAL HEALTH - TACOMA	089900	PIERCE
SEA MAR BEHAVIORAL HEALTH - TACOMA HEALTHCARE FOR THE HOMELESS	200514	PIERCE
SEA MAR BEHAVIORAL HEALTH - TUMWATER	110200	THURSTON
SEA MAR BEHAVIORAL HEALTH - TURNING POINT RECOVERY	172300	KING
SEA MAR BEHAVIORAL HEALTH - VANCOUVER 109TH COURT	200268	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER FOURTH PLAIN	200269	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER MEDICAL	200339	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER ORCHARDS	200337	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER SALMON CREEK	200309	CLARK
SEA MAR BEHAVIORAL HEALTH - WHITE CENTER	200434	KING
SEA MAR BEHAVIORAL HEALTH - YELM	176000	THURSTON
SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA	052102	PIERCE
SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER	095800	WHATCOM
SEADRUNAR	017200	KING
SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC	200270	KING
SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER	200392	KING
SEATTLE CHILDREN'S HOSPITAL - BELLEVUE PSYCHIATRY AT OVERLAKE	200390	KING
SEATTLE CHILDREN'S HOSPITAL - MAIN	200347	KING
SEATTLE CHILDREN'S HOSPITAL - ODESSA BROWN CHILDREN'S CLINIC	200391	KING
SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES	115200	KING
SEATTLE INDIAN HEALTH BOARD	005700	KING
SENDAN CENTER	200419	WHATCOM
SENECA FAMILY OF AGENCIES	200242	KING
SERENITY COUNSELING SERVICES	016500	PIERCE
SERENITY LANE - VANCOUVER	148800	CLARK
SERENITY POINT COUNSELING SERVICES, LLC	107400	WALLA WALLA
SHAMROCK GROUP, INC.	009700	KING
SHIPOWICK-SMITH COUNSELING & POSITIVE LIVING CENTER	145900	CHELAN
SHOALWATER BAY INDIAN TRIBE	112300	PACIFIC

SISTERS IN COMMON	200109	KING
SKAGIT REGIONAL HEALTH	200110	SKAGIT
SKAMANIA COUNTY COMMUNITY HEALTH	010600	SKAMANIA
SKOKOMISH H.O.P.E. ALCOHOL & DRUG PROGRAM	048500	MASON
SMOKEY POINT BEHAVIORAL HOSPITAL	146200	SNOHOMISH
SNOHOMISH COUNTY HUMAN SERVICES	200112	SNOHOMISH
SOAR BEHAVIOR SERVICES	200388	SPOKANE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - ABERDEEN	012701	GRAYS HARBOR
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - KENT	200467	KING
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - MOSES LAKE	155300	GRANT
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - PUYALLUP	109600	PIERCE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - SHELTON	147800	MASON
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - SPOKANE	120300	SPOKANE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - TACOMA	012702	PIERCE
SOMERSET COUNSELING CENTER, LLC	105200	BENTON
SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN	200271	KING
SOUND EDUCATION & BEHAVIOR ASSOCIATES - THIRD AVENUE	200425	KING
SOUND FAMILY CENTER LLC	166900	KING
SOUND MENTAL HEALTH - AUBURN	106400	KING
SOUND MENTAL HEALTH - BELLEVUE BUILDING A	118300	KING
SOUND MENTAL HEALTH - BELLEVUE BUILDING B	200274	KING
SOUND MENTAL HEALTH - BROADWAY	200442	KING
SOUND MENTAL HEALTH - CAPITOL HILL MAIN	105900	KING
SOUND MENTAL HEALTH - CAPITOL HILL NORTH	200272	KING
SOUND MENTAL HEALTH - NORTHGATE	106500	KING
SOUND MENTAL HEALTH - REDMOND	200276	KING
SOUND MENTAL HEALTH - SOUTHCENTER	106200	KING
SOUND MENTAL HEALTH - TUKWILA	200443	KING
SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES	111900	THURSTON
SOUTHEAST YOUTH AND FAMILY SERVICES	200116	KING
SOUTHWEST YOUTH AND FAMILY SERVICES	200117	KING
SPARC - CHRISTOPH HOUSE	012102	SPOKANE
SPARC - DELANEY HOUSE	165900	SPOKANE
SPARC - OUTPATIENT SERVICES	012101	SPOKANE
SPARC - SHAW HOUSE	165800	SPOKANE
SPARC - WESTBROOK HOUSE	012100	SPOKANE
SPECIALTY SERVICES II, LLC	158400	CLALLAM
SPECIALTY SERVICES III, LLC	177400	CLALLAM
SPOKANE COUNTY DETENTION SERVICES	200118	SPOKANE
SPOKANE COUNTY JUVENILE COURT SERVICES	200119	SPOKANE
SPOKANE COUNTY SUPPORTIVE LIVING PROGRAM	200120	SPOKANE

SPOKANE PUBLIC SCHOOLS - DISTRICT 81	136200	SPOKANE
SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES	011300	SPOKANE
SPOKANE TREATMENT & RECOVERY SERVICES	012000	SPOKANE
SPOKANE TREATMENT SOLUTIONS	154200	SPOKANE
SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM	009900	STEVENS
SQUAXIN ISLAND BEHAVIORAL HEALTH OUTPATIENT PROGRAM	037400	MASON
ST. PETER CHEMICAL DEPENDENCY CENTER	015300	THURSTON
STARTING POINT, INC.	002800	CLARK
STEPS, LLC	200052	KING
STILLAGUAMISH TRIBE OF INDIANS	081300	SNOHOMISH
STRENGTHENING FOUNDATIONS LLC	200277	COWLITZ
SUM OF LEARNING	200278	KING
SUN RAY COURT	083800	SPOKANE
SUNDOWN M RANCH	014000	YAKIMA
SUNRISE CENTERS	006100	KING
SUNRISE SERVICES, INC. - BELLINGHAM	200317	WHATCOM
SUNRISE SERVICES, INC. - CONCRETE MAIN STREET	200363	SKAGIT
SUNRISE SERVICES, INC. - CONCRETE SR 20	175700	SKAGIT
SUNRISE SERVICES, INC. - COUPEVILLE	200380	ISLAND
SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY	174400	SNOHOMISH
SUNRISE SERVICES, INC. - EVERETT BROADWAY	200381	SNOHOMISH
SUNRISE SERVICES, INC. - EVERETT MAIN	168100	SNOHOMISH
SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET	200279	SKAGIT
SUNRISE SERVICES, INC. - MOUNT VERNON COLLEGE WAY	156600	SKAGIT
SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE	200324	SNOHOMISH
SUNRISE SERVICES, INC. - OAK HARBOR	200383	ISLAND
SUNRISE SERVICES, INC. - SEDRO WOOLEY	200384	SKAGIT
SUNRISE SERVICES, INC. - STANWOOD	200318	SNOHOMISH
SUNSHINE BEHAVIORAL HEALTH	200280	SPOKANE
SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER)	200281	SPOKANE
SUQUAMISH TRIBE WELLNESS PROGRAM	110900	KITSAP
SWEDISH EDMONDS E&T	200121	SNOHOMISH
SWEDISH MEDICAL CENTER - BALLARD	044901	KING
SWEDISH MEDICAL CENTER, BALLARD BEHAVIORAL HEALTH	200394	KING
SWINOMISH WELLNESS PROGRAM	123800	SKAGIT
TACOMA DETOXIFICATION CENTER	018902	PIERCE
TACOMA TREATMENT SOLUTIONS	111700	PIERCE
TACOMA-PIERCE COUNTY TREATMENT SERVICES	019000	PIERCE
TAMARACK CENTER - CLIP	200122	SPOKANE
TAMARACK CENTER - OUTPATIENT	200123	SPOKANE
TCM TEAM	200115	CLARK

TELECARE - CLARK COUNTY E&T	200124	CLARK
TELECARE - COMMUNITY ALTERNATIVES TEAM	200535	PIERCE
TELECARE - KING COUNTY E&T	200572	KING
TELECARE - MASON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM	168500	MASON
TELECARE - NORTH SOUND EVALUATION & TREATMENT	200307	SKAGIT
TELECARE - THURSTON MASON CRISIS TRIAGE	200041	THURSTON
TELECARE - THURSTON MASON E&T	200500	THURSTON
TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM	200509	THURSTON
TELECARE - THURSTON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM	200498	THURSTON
THE CENTER FOR ALCOHOL AND DRUG TREATMENT	000600	CHELAN
THE CLEARING	160600	SAN JUAN
THE EMILY PROGRAM - LACEY	200128	THURSTON
THE EMILY PROGRAM - RTF	200386	KING
THE EMILY PROGRAM - SEATTLE	200126	KING
THE EMILY PROGRAM - SPOKANE	200127	SPOKANE
THE EVERGREEN AT NORTHPOINT	200447	KING
THE HEALING LODGE - BUTTERFLY PELPALWICHIYA GIRLS CD	046200	SPOKANE
THE HEALING LODGE - CEDAR BOYS COD	150500	SPOKANE
THE HEALING LODGE - SAGE BOYS CD	150600	SPOKANE
THE JUANITA CENTER LLC	148000	SNOHOMISH
THE MARC - MILES ABA SERVICES - SILVERDALE	200282	KITSAP
THE RECOVERY VILLAGE RIDGEFIELD - MAIN	177700	CLARK
THE RECOVERY VILLAGE RIDGEFIELD - VANCOUVER	200556	CLARK
THE RIGHT CHOICE COUNSELING SERVICE, INC.	042900	KITSAP
THE RIGHT STEP, INC.	051400	THURSTON
THE SANCTUARY AT THE LAKE	004800	CHELAN
THERAPEUTIC HEALTH SERVICES - BELLEVUE	004000	KING
THERAPEUTIC HEALTH SERVICES - EVERETT	111200	SNOHOMISH
THERAPEUTIC HEALTH SERVICES - KENT	150900	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE RAINIER AVENUE	083500	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET	104400	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE	015800	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH & FAMILY	016900	KING
THERAPEUTIC HEALTH SERVICES - SHORELINE	015801	KING
THIRA HEALTH, LLC	200330	KING
THUNDERBIRD - SEATTLE INDIAN HEALTH BOARD	005701	KING
TRANSITIONAL RESOURCES	200131	KING
TRI-CITIES COMMUNITY HEALTH - KENNEWICK	155200	BENTON
TRI-CITIES COMMUNITY HEALTH - PASCO	110300	FRANKLIN
TRI-CITIES COMMUNITY HEALTH - RICHLAND	200253	BENTON
TRILLIUM TREATMENT CENTER	109800	CLALLAM

TRIUMPH TREATMENT SERVICES - BETH'S PLACE	152200	YAKIMA
TRIUMPH TREATMENT SERVICES - CASITA	114900	YAKIMA
TRIUMPH TREATMENT SERVICES - INSPIRATIONS	166300	YAKIMA
TRIUMPH TREATMENT SERVICES - JAMES OLDHAM TREATMENT CENTER	013901	YAKIMA
TRIUMPH TREATMENT SERVICES - MAIN	013900	YAKIMA
TRIUMPH TREATMENT SERVICES - RIEL HOUSE	013902	YAKIMA
TRUE NORTH-ESD 113 - GRAYS HARBOR	096600	GRAYS HARBOR
TRUE NORTH-ESD 113 - LEWIS	101800	LEWIS
TRUE NORTH-ESD 113 - MASON	105800	MASON
TRUE NORTH-ESD 113 - PACIFIC	143100	PACIFIC
TRUE NORTH-ESD 113 - TUMWATER MAIN	099600	THURSTON
TRUE NORTH-ESD 113 - YELM	105700	THURSTON
TRUE STAR BEHAVIORAL HEALTH SERVICES	095600	CLALLAM
TSAPOWUM CHEHALIS TRIBAL BEHAVIORAL HEALTH	009600	GRAYS HARBOR
TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES	024000	SNOHOMISH
UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE	200132	KING
UNITED NORTHWEST RECOVERY CENTER	071300	SKAGIT
UNITED TREATMENT AND THERAPY	112700	KING
UNITY CARE NORTHWEST - BELLINGHAM BRANCH	200073	WHATCOM
UNITY CARE NORTHWEST - FERNDALE 5603 BRANCH	200310	WHATCOM
UNITY CARE NORTHWEST - FERNDALE 5616 BRANCH	200404	WHATCOM
UNITY CARE NORTHWEST - MAIN	200072	WHATCOM
UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM	126100	SKAGIT
UW HARING CENTER	200316	KING
VALLEY CITIES COUNSELING & CONSULTATION - AUBURN	091100	KING
VALLEY CITIES COUNSELING & CONSULTATION - AURORA CLINIC	200517	KING
VALLEY CITIES COUNSELING & CONSULTATION - DES MOINES	164700	KING
VALLEY CITIES COUNSELING & CONSULTATION - ENUMCLAW	200405	KING
VALLEY CITIES COUNSELING & CONSULTATION - FEDERAL WAY	090900	KING
VALLEY CITIES COUNSELING & CONSULTATION - KENT	091000	KING
VALLEY CITIES COUNSELING & CONSULTATION - LAKE CITY CLINIC	200520	KING
VALLEY CITIES COUNSELING & CONSULTATION - PIKE PLACE CLINIC	200523	KING
VALLEY CITIES COUNSELING & CONSULTATION - RENTON	164600	KING
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE MERIDIAN AVENUE	174600	KING
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE RAINIER AVENUE	174100	KING
VANCOUVER TREATMENT SOLUTIONS	112000	CLARK
VASHON YOUTH AND FAMILY SERVICES	200134	KING
VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)	001300	CLARK
VETERANS ADMINISTRATION - YAKIMA SUBSTANCE ABUSE OUTREACH	107000	YAKIMA
VETERANS ADMINISTRATION MEDICAL CENTER - AMERICAN LAKE	010200	PIERCE
VETERANS ADMINISTRATION MEDICAL CENTER - WALLA WALLA	013100	WALLA WALLA

VETERANS ADMINISTRATION PUGET SOUND HEALTH CARE SYSTEM - SEATTLE	006400	KING
VETERANS AFFAIRS MEDICAL CENTER - SPOKANE	012400	SPOKANE
VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES	200135	SNOHOMISH
WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES	001502	WAHKIAKUM
WAPI COMMUNITY SERVICES - FEDERAL WAY	200574	KING
WAPI COMMUNITY SERVICES - MAIN	078300	KING
WASHINGTON NATIONAL COUNSELING, LLC	200148	KING
WATERFRONT COUNSELING IN BLAINE	131800	WHATCOM
WEST END OUTREACH SERVICES	000800	CLALLAM
WEST SOUND TREATMENT CENTER - PORT ORCHARD	006600	KITSAP
WEST SOUND TREATMENT CENTER - POULSBO	169700	KITSAP
WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.	054100	CLARK
WESTERN STATE HOSPITAL	200508	PIERCE
WHATCOM COMMUNITY DETOX	119600	WHATCOM
WILLAPA BEHAVIORAL HEALTH - LONG BEACH	134300	PACIFIC
WILLAPA BEHAVIORAL HEALTH - RAYMOND	134400	PACIFIC
YAKAMA NATION TIINÁWIT PROGRAM	014200	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW	200285	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH	200286	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA 12TH AVENUE	050001	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA KERN ROAD	200284	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA MAIN	200283	YAKIMA
YAKIMA VALLEY MEMORIAL HOSPITAL E&T	200287	YAKIMA
YFA CONNECTIONS	020000	SPOKANE
YMCA OF GREATER SEATTLE	167200	KING
YOU GROW GIRL!	200002	KING
YOUTH EASTSIDE SERVICES - BELLEVUE MAIN	006500	KING
YOUTH EASTSIDE SERVICES - KIRKLAND	006501	KING
YOUTH EASTSIDE SERVICES - REDMOND	073500	KING
YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION	200536	SPOKANE