

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

March 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

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

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

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

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

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

ALYSSA GOMEZ
PROGRAM DIRECTOR/ADMINISTRATOR

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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

200236**LOURDES COUNSELING CENTER - CULLUM HOUSE**

1175 CARONDELET DRIVE
RICHLAND, WA 99354

JOHN SERLE
CEO

DANA OTIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DRIVE
RICHLAND, WA 99354

CERTIFIED SERVICESMENTAL 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 SERVICESMENTAL 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

DANA OATIS
OUTPATIENT DIRECTOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

CERTIFIED SERVICESMENTAL 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

JOHN SERLE
CEO

DAVID LOWE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

BENTON

CERTIFIED SERVICESSUBSTANCE 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 SERVICESMENTAL 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

SHARON GENTRY
DISTRICT DIRECTOR

ROCHELLE BRUNSDON
MH CLINICAL SUPERVISOR

MAILING ADDRESS

3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336

CERTIFIED SERVICESMENTAL 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

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

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

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

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

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

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

DARLENE DARNELL
PRESIDENT & CEO

LOUANN PIERCE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5301 TIETON DR
YAKIMA, WA 98908

CHELAN

CERTIFIED SERVICESSUBSTANCE 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

LIBBY HEIN
CHIEF PROGRAM OFFICER

KARIN POTTER
CLINICAL MANAGER

MAILING ADDRESS

1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

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

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

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE 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

ANGELIQUE BERGLUND
TREATMENT MANAGER

MAILING ADDRESS

933 E 1ST ST
PORT ANGELES, WA 98362

CLALLAM

CERTIFIED SERVICESSUBSTANCE 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

GLEENDA BUTLER
INTERIM INTEGRATIVE HEALTH DIRECTOR

JESSIE PAQUE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 152
NEAH BAY, WA 98357-0152

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

PO BOX 3175
SEQUIM, WA 98382

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

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 SERVICESMENTAL 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

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

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

CLALLAM

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

PETE PETERSON
JUVENILE SERVICES DIRECTOR

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

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

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

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

200530

BASICS NW, LLC - VANCOUVER

11818 SE MILL PLAIN BOULEVARD, SUITE 203
VANCOUVER, WA 98684

(360) 915-6868

PKLUS@BASICSNW.COM

WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

8282 28TH CT NE STE A
LACEY, WA 98516

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200146

CATHOLIC COMMUNITY SERVICES - VANCOUVER

9300 NORTHEAST OAK VIEW DRIVE, SUITE B
VANCOUVER, WA 98662

(360) 567-2211

INFO@CCSWW.ORG

WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

DON KOENIG
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CLARK

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

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

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

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

200071

CHILDREN'S HOME SOCIETY OF WASHINGTON - BATTLE GROUND

701 EAST MAIN STREET
BATTLE GROUND, WA 98604
(360) 695-1325
WWW.CHILDRENSHOMESOCIETY.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

CLARK

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

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

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

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

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

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

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

JOHN "BUNK" MOREN
ADMINISTRATOR

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668-1845

CERTIFIED SERVICESMENTAL 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

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

MIKE MILLER
MH PROGRAM MANAGER

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668

CERTIFIED SERVICESMENTAL 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

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
PSYCHIATRIC MEDICATION

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

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

200133

CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER

10201 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98662
(360) 397-8050
WWW.CVABONLINE.COM

BRAD BERRY
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM
CLINICAL DIRECTOR

CLARK

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

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

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

CHRISTINA GJESVOLD
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

960 E 3RD AVE
SPOKANE, WA 99202

CLARK

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

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS

1014 MAIN ST
VANCOUVER, WA 98660

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200061**FAMILY SOLUTIONS - MAIN AGENCY**

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

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS

1014 MAIN STREET
VANCOUVER, WA 98660

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200415**FAMILY SOLUTIONS - MAIN STREET BRANCH**

1104 MAIN STREET, SUITE 500
VANCOUVER, WA 98660
(360) 695-1014
LBROWN@FAMILY-SOLUTIONS.NET
WWW.FAMILY-SOLUTIONS.NET

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

CLARK

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

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

CLARK

MAILING ADDRESS

12607 E MILL PLAIN BLVD
VANCOUVER, WA 98684-4098

CERTIFIED SERVICESSUBSTANCE 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

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICESSUBSTANCE 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

JARED SANFORD
CEO

BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668-1678

CERTIFIED SERVICESSUBSTANCE 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

JARED SANFORD
CEO

BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CLARK

CERTIFIED SERVICESSUBSTANCE 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/

MAILING ADDRESS

3600 MAIN STREET
VANCOUVER, WA 98663

CERTIFIED SERVICESMENTAL 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

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

VENNESSA LAKE
DIRECTOR SERVICE LINES

MENTAL HEALTH SERVICES:

DAY SUPPORT
PSYCHIATRIC MEDICATION

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

CLARK

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

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

200337

**SEA MAR BEHAVIORAL HEALTH - VANCOUVER
ORCHARDS**
11801 NORTHEAST 65TH STREET
VANCOUVER, WA 98662
(360) 566-4432
INFO@SEAMARCHC.ORG
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

CLARK

CERTIFIED SERVICESSUBSTANCE 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

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

BREANNA MOSKOVITZ
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

CERTIFIED SERVICESSUBSTANCE 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

LISA CLAYTON
ADMINISTRATOR

CANDICE WEBB
TEAM LEAD

CLARK

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
888 SOUTH HILLHURST ROAD
RIDGEFIELD, WA 98642
(360) 887-6060
WWW.RIDGEFIELDDRECOVERY.COM

STEVEN HART
DIRECTOR OF OPERATIONS AND ADMIN

JOLENE FEENEY
MH & SUD 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

STEVEN HART
DIRECTOR OF OPERATIONS AND ADMIN

DALLAS CARROLL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

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

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

CLARK

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

CERTIFIED SERVICESSUBSTANCE 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

COWLITZ

MAILING ADDRESS

1441 11TH AVENUE
LONGVIEW, WA 98632-3818

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

171400**BASICS NW, LLC - LONGVIEW**

1339 COMMERCE AVENUE, SUITE 204
LONGVIEW, WA 98632
(360) 915-6868
PKLUS@BASICSNW.COM
WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

1339 COMMERCE AVENUE, SUITE 204
LONGVIEW, WA 98632

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200235**CHILDREN'S HOME SOCIETY OF WASHINGTON -
WOODLAND**

1924 BELMONT LOOP #2
WOODLAND, WA 98674
(360) 695-1325
(360) 524-1210
WWW.CHILDRENSHOMESOCITEY.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

MINDY DAVIS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
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

COWLITZ

MAILING ADDRESS

1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ASSESSMENT ONLY
DUI ASSESSMENT

200047**COLUMBIA WELLNESS - KELSO 200 ACADEMY**

200 ACADEMY STREET
KELSO, WA 98626
(360) 423-0203

WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICESMENTAL 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

DAVID MCCLAY
CEO

DEBRA PERKO-KORNBERG
CHIEF CLINICAL OFFICER (MH CS)

MAILING ADDRESS

921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICESSUBSTANCE 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

DAVID MCCLAY
CEO

DEBRA PERKO-KORNBERG
CHIEF CLINICAL OFFICER (MH CS)

MAILING ADDRESS

921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200504**COLUMBIA WELLNESS - KELSO PACIFIC**

214 NORTH PACIFIC AVENUE NORTH
KELSO, WA 98626
(360) 423-0203

WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

COWLITZ

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

200042**COLUMBIA WELLNESS - LONGVIEW BRANCH**

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200043**COLUMBIA WELLNESS - LONGVIEW MAIN**

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**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

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

COWLITZ

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

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) 200-5419
CAMERONC@CHOBLV.ORG
WWW.COREHEALTHSERVICES.ORG

FRANK MORRISON
CEO

KATIE ALLEN
MH CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 2394
LONGVIEW, WA 98632

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

PO BOX 890
KELSO, WA 98626-0081

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

PO BOX 890
KELSO, WA 98626-0081

COWLITZ

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

015100**COWLITZ FAMILY HEALTH CENTER - TOUTLE RIVER
CAMPUS**

2232 SOUTH SILVER LAKE ROAD
CASTLE ROCK, WA 98611
(360) 274-3262

DIAN COOPER
EXECUTIVE DIRECTOR

RAMA MITCHELL
OPERATIONS/CAMPUS MANAGER

MAILING ADDRESS

PO BOX 890
KELSO, WA 98626-0081

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

120600**COWLITZ TRIBAL TREATMENT PROGRAM - MAIN**

1044 11TH AVENUE
LONGVIEW, WA 98632
(360) 575-3316

SYBIL IVERSON
SUBSTANCE USE PROGRAM ADMINISTRATOR

DALLAS DE LA GRANGE
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 2429
LONGVIEW, WA 98632

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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.GREATRIVERSBHO.ORG/BHA

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
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

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

DALLAS CARROL
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

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

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

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

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

RON GENGLER
ADMINISTRATOR

ANDREA RAY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 99907

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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

086300**DOC - TRI-CITIES WORK RELEASE**

524 EAST BRUNEAU AVENUE
KENNEWICK, WA 99336
(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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

177600**LOURDES COUNSELING CENTER - PASCO**

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

JOHN SERLE
CEO

DAVID LOWE
CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

900 7TH ST
CLARKSTON, WA 99403

GARFIELD

CERTIFIED SERVICESSUBSTANCE 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

MOSES LAKE, WA 98831-0214

CERTIFIED SERVICESMENTAL 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

GAIL GOODWIN
ADMINISTRATOR

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICESMENTAL 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

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

GRANT

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

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

NOEMI GARCIA
SUD MANAGER

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

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

GRANT

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

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

LISA CORDOVA
DIRECTOR OF CLINICAL 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

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

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

ANDREW TATUM
ADMINISTRATOR

ROBERT "JIM" LAGERQUIST
PROGRAM MANAGER

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

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

BETTY KASSUHN
ADMINISTRATOR

200033 **BEHAVIORAL HEALTH RESOURCES - ELMA**
573 EAST MAIN STREET
ELMA, WA 98541
(360) 704-7170
WWW.BHR.ORG

LAURIE TEBO
CEO

GRAYS HARBOR

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

LAURIE TEBO
CEO

MAILING ADDRESS

3857 MARTIN WAY E
OLYMPIA, 98506

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 & 206
ABERDEEN, WA 98520
(360) 612-3839
JENNYC@CCSWW.ORG
WWW.CCSWW.ORG

DENNY HUNTHAUSEN
DIRECTOR

GARY SANDWICK
CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
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

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

GRAYS HARBOR

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

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
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200393

COLUMBIA WELLNESS - HOQUIAM

615 8TH STREET
HOQUIAM, WA 98550
(800) 654-3837
(360) 532-8629
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

GRAYS HARBOR

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

200510

GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM

3033-B INGRAM STREET
HOQUIAM, WA 98550
(360) 261-6930
(855) 303-4834

INFO@GREATRIVERSBHO.ORG

WWW.GREATRIVERSBHO.ORG/BHA

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
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

WILLIAM BONNES
DIRECTOR

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

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

GRAYS HARBOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICESSUBSTANCE 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

074000**NORTHWEST INDIAN TREATMENT CENTER**

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

STEPHANIE TOMPKINS
DIRECTOR

MICHAEL TISDALE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 477
ELMA, WA 98541

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY HOUSE

004500**QUINULT INDIAN NATION**

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

DAN OVERTON
BEHAVIORAL HEALTH MANAGER

ERNIE SANCHEZ
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 189
TAHOLA, WA 98587

CERTIFIED SERVICESSUBSTANCE 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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE 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

GRAYS HARBOR

200343

SEA MAR BEHAVIORAL HEALTH - ELMA

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
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

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

CHARLENE ABRAHAMSON
DIRECTOR OF BEHAVIORAL HEALTH

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

200465

COMPASS HEALTH - COUPEVILLE

20 NORTHWEST 1ST STREET
COUPEVILLE, WA 98239
(360) 678-5555
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

32650 STATE ROUTE 20, BUILDING E
OAK HARBOR, WA 98277
(360) 678-5555
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

200233

L.E.A.P.S. AND BEYOND, INC. - MAIN

231 SOUTHEAST BARRINGTON DRIVE, SUITE 203
OAK HARBOR, WA 98277-3200

STACEY HOTTER-KNIGHT
PRESIDENT

ADMIN@LEAPSANDBEYOND.COM

WWW.LEAPSANDBEYOND.COM

MAILING ADDRESS

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

ISLAND

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
OAK HARBOR, WA 98277
(360) 240-0022
ADMIN@LEAPSANDBEYOND.COM
WWW.LEAPSANDBEYOND.COM

STACEY HOTTER KNIGHT
PRESIDENT

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
PORT ORCHARD, WA 98366
(360) 240-0022
ADMIN@LEAPSANDBEYOND.COM
WWW.LEAPSANDBEYOND.COM

STACEY HOTTER KNIGHT
PRESIDENT

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
OAK HARBOR, WA 98278
(360) 257-2394

STEVEN DAGGETT
ADMINISTRATOR/CLINICAL SUPERVISOR

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

163100

SEA MAR BEHAVIORAL HEALTH - OAK HARBOR

31640 STATE ROUTE 20, SUITE 1
OAK HARBOR, WA 98277
(360) 679-7676

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

OSCAR RIVERA
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

ISLAND

CERTIFIED SERVICESSUBSTANCE 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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESSUBSTANCE 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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

211 TAYLOR ST STE 20
PORT TOWNSEND, WA 98368

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

JEFFERSON

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

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

MAILING ADDRESS
PO BOX 102
PORT TOWNSEND, WA 98368

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

CIHAN BEHLIVAN
EXECUTIVE DIRECTOR

KRIS LEE KAMPF
CLINICAL SUPERVISOR

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

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

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

TERESA WIRTH
ADMINISTRATOR

GLEEFORD KESSLER, JR.
PRESIDENT/CEO

KING

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

JAMES LAWRENCE
OWNER/ADMINISTRATOR

KING

MAILING ADDRESS

235 SW 153RD STREET
BURIEN, WA 98166

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESPROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200427**ADVANCED CREATIVE TREATMENT, INC.**

9834 18TH AVENUE SOUTHWEST
SEATTLE, WA 98106
(425) 985-3481
LINDSAY@ADVANCEDCREATIVETREATMENT.COM
WWW.ADVANCEDCREATIVETREATMENT.COM

LINDSAY MORSE
ADMINISTRATOR

ALEX CASTILLO
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

10904 NE 39TH PL
BELLEVUE, WA 98004

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

041900**ALPHA RECOVERY CHOICES**

10614 BEARDSLEE BOULEVARD, SUITE D
BOTHELL, WA 98011
(425) 483-4664
(888) 429-9399

JEANNE POURROY-CARTER
ADMINISTRATOR

KING

MAILING ADDRESS

10614 BEARDSLEE BLVD STE D
BOTHELL, WA 98011

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200459**AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
KING OUTPATIENT**

1550 4TH AVENUE SOUTH
SEATTLE, WA 98131
(206) 456-1860
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200002**ANNARA COUNSELING SERVICES**

10215 LAKE CITY WAY NE, SUITE H
SEATTLE, WA 98125
(206) 643-9622
(800) 833-6384
INFO@ANNARA.ORG
WWW.ANNARA.ORG

LYNN COLEMAN
EXECUTIVE DIRECTOR

SHERICE ARNOLD-ARRINGTON
MH CLINICAL SUPERVISOR

KING

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

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

CHRIS JONES
DIRECTOR OF OPERATIONS

STEVEN MICHALSKI
CLINIC DIRECTOR

MAILING ADDRESS

1240 116TH AVE NE STE 102
BELLEVUE, WA 98004

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200422**ARK COUNSELING AND TREATMENT SERVICES**

634 SOUTHWEST 149TH STREET
BURIEN, WA 98146
(206) 244-0733
ALVIN/CURRIE@YAHOO.COM

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

KING

MAILING ADDRESS

625 STRANDER BLVD STE C
TUKWILA, WA 98188

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

100100**ASIAN COUNSELING AND REFERRAL SERVICE**

3639 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98144
(206) 695-7600
ACRSINFO@ACRS.ORG
WWW.ACRS.ORG

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 SERVICESSUBSTANCE 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

MAILING ADDRESS

13353 BEL-RED RD STE 101
BELLEVUE, WA 98005

CERTIFIED SERVICESSUBSTANCE 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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

MAILING ADDRESS

1800 112TH AVE NE STE 150W
BELLEVUE, WA 98004

KING

CERTIFIED SERVICESSUBSTANCE 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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

MAILING ADDRESS

1800 112TH AVE NE STE 150W
BELLEVUE, WA 98004

CERTIFIED SERVICESSUBSTANCE 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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

MAILING ADDRESS

2111 N NORTHGATE WAY STE 212
SEATTLE, WA 98133

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

MAILING ADDRESS

4700 42ND AVE SW STE 480
SEATTLE, WA 98116

CERTIFIED SERVICESSUBSTANCE 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

HERERI CONTRERAS
PROGRAM DIRECTOR

KING

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.AUTISMETHERAPIES.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

200082**BASICS NW, LLC - BELLEVUE**

1414 116TH AVENUE NE, SUITE B
BELLEVUE, WA 98004
(360) 915-6868
WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

1414 116TH AVENUE NE, SUITE B
BELLEVUE, WA 98004

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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

MONTE LIM
DIRECTOR OF ADMINISTRATION

CHRISTOPHER ROBERTS
CLINICAL SUPERVISOR

MAILING ADDRESS

1301 E ORANGEWOOD AVE
ANAHEIM, CA 92805

KING

CERTIFIED SERVICES

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

MICHAEL URADNIK
CEO/ADMINISTRATOR

DAN LABUDA
SUD CLINICAL SUPERVISOR

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

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

JOHN L. CASTEELE, JR.
EXECUTIVE DIRECTOR

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

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

MARY STONE SMITH
VICE PRESIDENT

MATTHEW WILSON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

KING

200145

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

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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

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

200039

CHILDHAVEN - ELI CREEKMORE MEMORIAL
1035 SOUTHWEST 124TH STREET
SEATTLE, WA 98146
(253) 833-5908
(206) 248-4903
BETHANYL@CHILDHAVEN.ORG
WWW.CHILDHAVEN.ORG

JON BOTTEN
CEO

TODD GEORGE
SR. PROGRAM DIRECTOR

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

KING

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

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

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

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

KING

200063

COMMUNITY HOUSE MENTAL HEALTH

851 POPLAR PLACE SOUTH
SEATTLE, WA 98144
(206) 322-2387
(206) 586-8250
CSZALA@CHMHA.ORG
WWW.CHMHA.ORG

CHRISTOPHER SZALA
EXECUTIVE DIRECTOR

TAMMIE BAKER
CLINICAL DIRECTOR

MAILING ADDRESS

851 POPLAR PLACE SOUTH
SEATTLE, WA 98144

CERTIFIED SERVICES

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

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

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

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

200293

COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL

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

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

MAILING ADDRESS

11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200292

COMMUNITY PSYCHIATRIC CLINIC - EL REY

2119 SECOND AVENUE
SEATTLE, WA 98121
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

KING

MAILING ADDRESS

11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125-

CERTIFIED SERVICESMENTAL 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

DOUG CRANDALL
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SUD CLINICAL SUPERVISOR

MAILING ADDRESS

11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICESSUBSTANCE 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

170800**COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN**

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SEATTLE, WA 98133
(206) 461-4544
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG

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CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD PROGRAM MANAGER

MAILING ADDRESS

11000 LAKE CITY WAY NE
SEATTLE, WA 98125

CERTIFIED SERVICESSUBSTANCE 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

087400**COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE**

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SEATTLE, WA 98103
(206) 461-3707
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CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

KING

MAILING ADDRESS

11000 LAKE CITY WAY NE
SEATTLE, WA 98125

CERTIFIED SERVICESSUBSTANCE 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

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

MAILING ADDRESS

1003 7TH AVENUE
KIRKLAND, WA 98033

CERTIFIED SERVICESMENTAL 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

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

MAILING ADDRESS

1003 7TH AVENUE
KIRKLAND, WA 98033

CERTIFIED SERVICESMENTAL 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

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

MAILING ADDRESS

1003 7TH AVE
KIRKLAND, WA 98033

CERTIFIED SERVICESMENTAL 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

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

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

JESSICA RHODES
ADMINISTRATOR

CRYSTAL MAZAC
CLINICAL SUPERVISOR

KING

MAILING ADDRESS

12351 LAKE CITY WAY, SUITE 202
SEATTLE, WA 98125

CERTIFIED SERVICESSUBSTANCE 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 AVE
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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

DANIEL MALONE
EXECUTIVE DIRECTOR

GRAYDON ANDRUS
DIRECTOR OF CLINICAL PROGRAMS (MH CS)

KING

MAILING ADDRESS

515 THIRD AVE
SEATTLE, WA 98104

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

KING

MAILING ADDRESS

515 THIRD AVE
SEATTLE, WA 98104

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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
PAUL@EASTSIDERG.COM
WWW.EASTSIDERG.COM

JILL WEINSTEIN
ADMINISTRATOR

PAUL HUNZIKER
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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 SERVICESMENTAL 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

LARA EFFLAND
EXECUTIVE CLINICAL DIRECTOR

KING

MAILING ADDRESS

1231 116TH AVENUE NORTHEAST
BELLEVUE, WA 98004

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

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)

KING

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

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

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

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

KING

MAILING ADDRESS

1700 AIRPORT WAY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

101300**EVERGREEN TREATMENT SERVICES - UNIT 3**

ONE COMMUNITY LOCATION
SEATTLE, WA 98134
(206) 223-3644

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
[HTTP://WWW.FAIRFAXHOSPITAL.COM/](http://www.fairfaxhospital.com/)

RON ESCARDA
GROUP DIRECTOR NW REGION, CEO FAIRFAX HOSPITAL

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.COMPAUL 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.ORGSTEVEN 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

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

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

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 & 2B
AUBURN, WA 98002
(253) 333-2328

GEORGE BRUMMELL
ADMINISTRATOR

CLAUDIA STEWARD
CLINICAL SUPERVISOR

MAILING ADDRESS

230 AUBURN WAY S #1B
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

GREG YANTZER
DIRECTOR OF OUTPATIENT SERVICES

DARREN BARRY
CLINICAL SUPERVISOR

MAILING ADDRESS

1601 114TH AVENUE SOUTHEAST
BELLEVUE, WA 98004

CERTIFIED SERVICESSUBSTANCE 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 SERVICESMENTAL 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 & 102
BELLEVUE, WA 98004
(425) 242-1713
IKRONGREATERSEATTLE@IKRON.ORG
WWW.SEATTLE.IKRON.ORG

LUDMILA MONICA NEGRILA
DIRECTOR

MAILING ADDRESS

3805 108TH AVENUE NE, SUITES 204 & 102
BELLEVUE, WA 98004

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200539

IKRON CORPORATION GREATER SEATTLE - MERIDIAN CENTER

10303 MERIDIAN AVENUE NORTH, SUITE 204
SEATTLE, WA 98133
(206) 420-7949
(425) 242-1713
IKRONGREATERSEATTLE@IKRON.ORG
WWW.SEATTLE.IKRON.ORG

LUDMILA MONICA NEGRILA
EXECUTIVE DIRECTOR/CLINICAL DIRECTOR

MAILING ADDRESS

3805 108TH AVE NE STE 204
BELLEVUE, WA 98004

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200220

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - BELLEVUE

1800 112TH AVENUE NE, SUITE 260E
BELLEVUE, WA 98004
(425) 643-2133
(417) 830-4796
MWILSON@EMBASSYLLC.COM
WWW.IMAGINEBEHAVIOR.COM

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

JEN COLLADO
PROGRAM DIRECTOR

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200222

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE

2414 SW ANDOVER STREET, SUITE D-120
SEATTLE, WA 98106

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

DANETTE DARROW
PROGRAM DIRECTOR

KING

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200077**INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY**

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

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

136000**INTEGRATIVE COUNSELING SERVICES**

701 NORTH 36TH STREET, SUITE 300
SEATTLE, WA 98103
(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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

200226**KINDERING CENTER**

16120 NORTHEAST 8TH STREET
BELLEVUE, WA 98008

MAILING ADDRESS

16120 NE 8TH STREET
BELLEVUE, WA 98008

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200227**KING COUNTY CRISIS & COMMITMENT SERVICES**

401 5TH AVENUE, SUITE 400
SEATTLE, WA 98104
(206) 263-1438
DCHS@KINGCOUNTY.GOV
WWW.KINGCOUNTY.GOV

KELLI NOMURA
KING COUNTY BHO ADMINISTRATOR

CHRISTINE PIATT
HOSPITAL PLACEMENT & DIVERSION SUPERVISOR

MAILING ADDRESS

401 5TH AVENUE, SUITE 400
SEATTLE, WA 98104

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
RECOVERY PEER SUPPORT

KING

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

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

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

KING

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

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

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

ELIZABETH MELOENY
ADMINISTRATOR

DAVE RUDDUCK
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

KING

CERTIFIED SERVICESSUBSTANCE 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

DEENA DOLE
ADMINISTRATOR

JAY YOURGLISH
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98057-5216

CERTIFIED SERVICESSUBSTANCE 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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

DUI ASSESSMENT

200312**LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT**

10803 SE KENT-KANGLEY ROAD, #101
KENT, WA 98030
(253) 487-7573
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG

ANDREW KRITOVICH
CLINICAL DIRECTOR

MAILING ADDRESS

4040 S 188TH ST STE 200
SEATAC, WA 98188

KING

CERTIFIED SERVICESMENTAL 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

LCSNW@LCSNW.ORG
WWW.LCSNW.ORG/

MAILING ADDRESS

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

CERTIFIED SERVICES

BETH FARMER
PROGRAM DIRECTOR

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

MAILING ADDRESS

2313 3RD AVE
SEATTLE, WA 98121

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

GREGG ALEX
EXECUTIVE DIRECTOR

MICHAEL LEWIS
CLINICAL SUPERVISOR

200089**MATUMAINI COUNSELING & COMMUNITY CENTER**

3714 SOUTH FERDINAND STREET
SEATTLE, WA 98118
(206) 708-1704

MAILING ADDRESS

PO BOX 66945
BURIEN, WA 98166

CERTIFIED SERVICES

JAMES NORRIS
EXECUTIVE DIRECTOR

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

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

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

MIRIAM MIYAKE
ADMINISTRATIVE DIRECTOR

ANGELA FRYE
CLINICAL SUPERVISOR

MAILING ADDRESS

2600 SW HOLDEN ST
SEATTLE, WA 98126

KING

CERTIFIED SERVICESSUBSTANCE 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

VICTOR PLACE
ADMINISTRATOR

TIM PRIMEAUX
CLINICAL SUPERVISOR

MAILING ADDRESS

2600 SW HOLDEN ST
SEATTLE, WA 98126

CERTIFIED SERVICESSUBSTANCE 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

JUDY HEALY
ADMINISTRATOR

MAILING ADDRESS

2600 SW HOLDEN ST
SEATTLE, WA 98126

CERTIFIED SERVICESMENTAL 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

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

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

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

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

DIANE BUFORD
CEO

MELANIE KEPLINGER
SUD CLINICAL SUPERVISOR

KING

MAILING ADDRESS

5019 GROVE ST STE 103A
MARYSVILLE, WA 98270

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR

MARK WALRATH
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE 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

SYLVIA FUERSTENBERG
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

SYLVIA FUERSTENBERG
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

GARY HEMMINGER
BRANCH MANAGER

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

MICHAEL PLAISANCE
EXECUTIVE DIRECTOR

MAILING ADDRESS

510 2ND AVENUE WEST
SEATTLE, WA 98119

CERTIFIED SERVICESSUBSTANCE 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

DEBBIE FARRAR
EXECUTIVE DIRECTOR

MAILING ADDRESS

19201 120TH AVENUE NE, SUITE 108
BOTHHELL, WA 98011

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

TAKANORI KOYAMA
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 88083
TUKWILA, WA 98138

CERTIFIED SERVICESMENTAL 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

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

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

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

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) 414-1974

MARCO SANCHEZ
MANAGER/PARTNER

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

156500

PIB-PROCESO, LLC - SEATTLE

1833 NORTH 105TH STREET, SUITE 101
SEATTLE, WA 98133
(206) 478-1191

MARCO SANCHEZ
MANAGER/PARTNER

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

096500

PIONEER COUNSELING SERVICES - SEATTLE

901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144
(206) 470-3856
WWW.PIONEERHUMANSERVICES.ORG

TONI LONG
DIRECTOR OF TREATMENT SERVICES

LESLIE CHRISTEN
CHEMICAL DEPENDENCY SUPERVISOR

MAILING ADDRESS

901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

128100

**PIONEER HUMAN SERVICES - CO-OCCURRING
RESIDENTIAL PROGRAM (CORP)**

11900 BEACON AVENUE SOUTH
SEATTLE, WA 98178
(206) 772-6900
WWW.PIONEERHUMANSERVICES.ORG

GEORGE CALDERON
DIRECTOR III

MAILING ADDRESS

11900 BEACON AVE S
SEATTLE, WA 98178

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

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

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

MAILING ADDRESS

4008 MARTIN LUTHER KING JR WAY S
SEATTLE, WA 98108

MAHNAZ ESHETU
EXECUTIVE DIRECTOR

MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

KING

CERTIFIED SERVICESMENTAL 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

MAHNAZ ESHETU
EXECUTIVE DIRECTOR

MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

MAILING ADDRESS

4008 MARTIN LUTHER KING JR WAY SOUTH
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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

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 SERVICESSUBSTANCE 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

COURTNEY GUTIERREZ
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 51241
SEATTLE, WA 98115

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

KAREN BRADY
CEO/EXECUTIVE DIRECTOR

RACHEL BARRETT
SENIOR DIRECTOR OF OP SERVICES

MAILING ADDRESS

2400 NE 95TH ST
SEATTLE, WA 98115-2499

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESMENTAL 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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CASSANDRA ELLSWORTH
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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

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**

1601 WEST MEEKER STREET
KENT, WA 98032
(206) 763-5277
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
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

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)

150200

SEATTLE CHILDREN'S HOSPITAL

4540 SAND POINT WAY NE, SUITE 200
SEATTLE, WA 98105
(206) 987-2028

MOLLY GOLDSWORTHY
MANAGER

KELLY KERBY
CLINICAL SUPERVISOR

MAILING ADDRESS

4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

200392

SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER

4909 25TH AVENUE NE
SEATTLE, WA 98105
(206) 987-8080
(866) 987-2000
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG
WWW.SEATTLECHILDRENS.ORG

ERIN EASLEY
DIRECTOR

RAPHAEL BERNIER
CLINICAL DIRECTOR

KING

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

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

LESLIE PIERSON
DIRECTOR, PSYCHIATRY

CAROL ROCKHILL
MEDICAL DIRECTOR

MAILING ADDRESS

4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200347**SEATTLE CHILDREN'S HOSPITAL - MAIN**

4800 SAND POINT WAY NE
SEATTLE, WA 98105
(206) 987-2164
(866) 987-2000
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG
WWW.SEATTLECHILDRENS.ORG

KATHY BREWER
MANAGER, INSURANCE PROCESSING/UTILIZATION REVIEW

DEBRA GUMBARDO
CHIEF PSYCHO-SOCIAL SERVICES

MAILING ADDRESS

4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200391**SEATTLE CHILDREN'S HOSPITAL - ODESSA BROWN
CHILDREN'S CLINIC**

2101 EAST YESLER WAY
SEATTLE, WA 98122
(206) 987-7210
(866) 987-2000
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG
WWW.SEATTLECHILDRENS.ORG

ARLESIA BAILEY
DIRECTOR

MARK FADOOL
CLINICAL DIRECTOR

MAILING ADDRESS

4800 SAND POINT WAY NE
SEATTLE, WA 98105

KING

CERTIFIED SERVICES

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

115200

SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES

1216 PINE STREET, SUITE 300
SEATTLE, WA 98101
(206) 323-1768
INFO@SEATTLECOUNSELING.ORG
WWW.SEATTLECOUNSELING.ORG

ANN MCGETTIGAN
EXECUTIVE DIRECTOR

PAT SOON
CLINICAL DIRECTOR

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

NICOLE NELSON
EXECUTIVE DIRECTOR

EMILY MARSH
CLINICAL SUPERVISOR

MAILING ADDRESS

210 SOUTH HUDSON STREET, SUITES 318 & 312
SEATTLE, WA 98134

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

009700

SHAMROCK GROUP, INC.

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

STEVEN E. SCHUMANN
ADMINISTRATOR

KING

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE 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

CERTIFIED SERVICESMENTAL 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

ANDREW TATUM
ADMINISTRATOR

LINDA IRISH
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICESSUBSTANCE 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

DANIELLE SAYEBROOK
OWNER

MAILING ADDRESS

11032 20TH AVENUE NE
SEATTLE, WA 98125

CERTIFIED SERVICESMENTAL 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

DANIELLE SAYEBROOK
OWNER

MAILING ADDRESS

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

KING

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

106400

SOUND MENTAL HEALTH - AUBURN

4238 AUBURN WAY NORTH
AUBURN, WA 98002
(253) 876-7600
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

ARDEN JAMES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

118300

SOUND MENTAL HEALTH - BELLEVUE BUILDING A

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

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
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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CARA GRESHAM
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

200442**SOUND MENTAL HEALTH - BROADWAY**

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

TERRY RICHARDSON
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

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
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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200272**SOUND MENTAL HEALTH - CAPITOL HILL NORTH**

122 16TH AVENUE EAST
SEATTLE, WA 98112
(206) 302-2800
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CHRISTINE ATIENZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

KING

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

200276**SOUND MENTAL HEALTH - REDMOND**

16225 NORTHEAST 87TH STREET, SUITE A-6
REDMOND, WA 98052
(425) 653-4960
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICESSUBSTANCE 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

KING

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

DENNIS MARCERON
PROGRAM MANAGER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200116

SOUTHEAST YOUTH AND FAMILY SERVICES

3722 SOUTH HUDSON STREET
SEATTLE, WA 98118
(206) 721-5542
WWW.SEYFS.ORG

ANTHONY AUSTIN
EXECUTIVE DIRECTOR

STEPHANIE MCWETHY
CLINICAL DIRECTOR

MAILING ADDRESS

3722 SOUTH HUDSON STREET
SEATTLE, WA 98118

KING

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)

200278 **SUM OF LEARNING**
2310 130TH AVENUE NE, BUILDING B, SUITE 100
BELLEVUE, WA 98005
(425) 954-7243
INFO@SUMOFLEARNING.COM
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

KING

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

5300 TALLMAN AVE NW
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

BRIAN LIVINGSTON
MD / CHIEF OPERATING OFFICER

HEATHER COLEMAN
NURSE EXECUTIVE

MAILING ADDRESS

5300 TALLMAN AVENUE NW
SEATTLE, WA 98107

CERTIFIED SERVICES

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

MONIQUE DESCHANE
SITE MANAGER

MAILING ADDRESS

1700 WESTLAKE AVE N, SUITE 650
SEATTLE, WA 98109

CERTIFIED SERVICES

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

JOANNA STAGG
SITE MANAGER

MAILING ADDRESS

1700 WESTLAKE AVENUE NORTH, SUITE 650
SEATTLE, WA 98109

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

KING

200447**THE EVERGREEN AT NORTHPOINT**
13037 NORTHEAST BEL RED ROAD, SUITE 102
BELLEVUE, WA 98005
(425) 285-7539
TMCCLURE@NORTHPOINTRECOVERY.COM
WWW.EVERGREENDRUGREHAB.COMTHOMAS HAMMAN
ADMINISTRATOR**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 OUTPATIENTMENTAL HEALTH SERVICES:CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

004000**THERAPEUTIC HEALTH SERVICES - BELLEVUE**
1412 140TH PLACE NORTHEAST
BELLEVUE, WA 98007
(425) 747-7892JEREMY PETERSON
BRANCH MANAGERNORMAN 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 TREATMENTMENTAL 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) 681-0011HOLLIE CHRISTIANCY
BRANCH MANAGERPHILIP 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 OUTPATIENTMENTAL 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) 723-1980RANDON AEA
BRANCH MANAGERNORMAN JOHNSON
EXECUTIVE DIRECTOR

KING

MAILING ADDRESS

5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118

CERTIFIED SERVICESSUBSTANCE 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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

KING

CERTIFIED SERVICESSUBSTANCE 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

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 SERVICESSUBSTANCE 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 401, 402, 505, 520
BELLEVUE, WA 98004
(425) 454-1199
INFO@THIRAHEALTH.COM
WWW.THIRAHEALTH.COM

DR. MERHI MOORE
CHIEF EXECUTIVE/MEDICAL OFFICER

MAILING ADDRESS

400 108TH AVE NE STE 402
BELLEVUE, WA 98004

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

KING

200131

TRANSITIONAL RESOURCES
2970 SOUTHWEST AVALON WAY
SEATTLE, WA 98126
(206) 883-2051
INFO@TRANSITIONALRESOURCES.ORG
WWW.TRANSITIONALRESOURCES.ORG

DARCELL SLOVEK-WALKER
CEO

JULIA WATKINS
CLINICAL DIRECTOR

MAILING ADDRESS
2970 SW AVALON WAY
SEATTLE, WA 98126

CERTIFIED SERVICES

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

200132

UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE
13470 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98178

MAILING ADDRESS
17701 108TH AVENUE SE, #336
RENTON, WA 98055

CERTIFIED SERVICES

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

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)

KING

091100

**VALLEY CITIES COUNSELING & CONSULTATION -
AUBURN**

2704 I STREET NE
AUBURN, WA 98002
(253) 833-7444

KENNETH TAYLOR
CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200517

**VALLEY CITIES COUNSELING & CONSULTATION -
AURORA CLINIC**

13555 WA-99
SEATTLE, WA 98133
(253) 833-7444
(206) 963-3145
WWW.VALLEYCITIES.ORG

KENNETH TAYLOR
CEO

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

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS 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

KENNETH TAYLOR
CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

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 EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

KING

200405

**VALLEY CITIES COUNSELING & CONSULTATION -
ENUMCLAW**
1335 COLE STREET
ENUMCLAW, WA 98022
(425) 336-4100
(253) 833-7444
WWW.VALLEYCITIES.ORG

KENNETH TAYLOR
CEO

LYNN ALLAR
MH CLINICAL SUPERVISOR/SITE DIRECTOR

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS 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

KENNETH TAYLOR
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

KENNETH TAYLOR
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

KING

200520 **VALLEY CITIES COUNSELING & CONSULTATION - LAKE CITY CLINIC**
12736 33RD AVENUE NORTHEAST
SEATTLE, WA 98125
(253) 833-7444
(206) 963-3145
WWW.VALLEYCITIES.ORG

KENNETH TAYLOR
CEO

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

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS 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

KENNETH TAYLOR
CEO

JESSICA WILLIAMS
CLINIC MANAGER (MH CS)

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS 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

KING

CERTIFIED SERVICESSUBSTANCE 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 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

CERTIFIED SERVICESSUBSTANCE 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
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 SERVICESSUBSTANCE 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
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200134**VASHON YOUTH AND FAMILY SERVICES**

20110 VASHON HIGHWAY SW
VASHON, WA 98070

KATHLEEN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 237
VASHON, WA 98070

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

KING

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

078300

WAPI COMMUNITY SERVICES
3722 SOUTH HUDSON STREET
SEATTLE, WA 98118
(206) 223-9578

AILEEN DE LEON
EXECUTIVE DIRECTOR

KALPANA SUNDARAM (PEND APPVL)
CLINICAL SUPERVISOR

MAILING ADDRESS

3722 S HUDSON ST
SEATTLE, WA 98118

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

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

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

006500 **YOUTH EASTSIDE SERVICES - BELLEVUE MAIN**
999 164TH AVENUE NORTHEAST
BELLEVUE, WA 98008
(425) 747-4937

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

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

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

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

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

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

KITSAP

119000 **ACTION COUNSELING - PORT ORCHARD**
729 PROSPECT STREET, SUITE 200
PORT ORCHARD, WA 98366
(360) 895-1307
(360) 649-7646

MAILING ADDRESS
729 PROSPECT ST STE 200
PORT ORCHARD, WA 98366

BETTY KASSUHN
ADMINISTRATOR

KITSAP

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MARY STONE SMITH
VICE PRESIDENT

DAVE KUCKLICK
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL 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

KITSAP

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200480**EAGLE HARBOR COUNSELING, LLC**

945 HILDEBRAND LANE NE, SUITE 232
BAINBRIDGE ISLAND, WA 98110
(425) 478-1000
JULIAJENSINE@GMAIL.COM
WWW.EAGLEHARBORCOUNSELING.COM

JULIA JENSINE
OWNER/ADMINISTRATOR

MAILING ADDRESS

945 HILDEBRAND LANE NE, SUITE 232
BAINBRIDGE ISLAND, WA 98110

CERTIFIED SERVICESSUBSTANCE 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

MICHELLE R. YORK
ADMINISTRATOR

MITCHELL R. BROWN
CLINICAL SUPERVISOR

MAILING ADDRESS

1014 BAY ST STE 24
PORT ORCHARD, WA 98366

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICESMENTAL 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

KITSAP

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

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

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

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

KITSAP

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
BREMERTON, WA 98310
(360) 373-5031

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS

5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

200338**KITSAP MENTAL HEALTH SERVICES - WHEATON WAY**

4040 WHEATON WAY, SUITES 108, 112, 204, 206, 210
BREMERTON, WA 98310
(360) 373-5031
WWW.KITSAPMENTALHEALTH.ORG

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS

5455 ALMIRA DR NE
BREMERTON, WA 98311

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

KITSAP

006700

KITSAP RECOVERY CENTER - INPATIENT

661 TAYLOR AVENUE
PORT ORCHARD, WA 98366
(360) 337-4625

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

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

CHRISTINE LYNCH
EXECUTIVE DIRECTOR

MELODY MCKEE
CLINICAL OPERATIONS MANAGER (SUD CS)

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

KITSAP

| | | |
|---------------|--|--|
| 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 |
| | MAILING ADDRESS 31912 LITTLE BOSTON RD NE KINGSTON, WA 98346 | COURTNEY OLIVER CLINICAL SUPERVISOR |
| | CERTIFIED SERVICES <u>SUBSTANCE USE DISORDER SERVICES:</u> 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 | <u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION |
| 110900 | SUQUAMISH TRIBE WELLNESS PROGRAM 18490 SUQUAMISH WAY, SUITE 107 SUQUAMISH, WA 98392 (360) 394-8558 WWW.SUQUAMISH.NSN.US | GRACE JONES ADMINISTRATOR |
| | MAILING ADDRESS PO BOX 1228 SUQUAMISH, WA 98392 | |
| | CERTIFIED SERVICES <u>SUBSTANCE USE DISORDER SERVICES:</u> DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT | <u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION |
| 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 | <u>MENTAL HEALTH SERVICES:</u> 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 |

KITSAP

MAILING ADDRESS

1740 NE RIDDELL RD, STE 170
BREMERTON, WA 98310

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

JAMES BARTH
ADMINISTRATOR

LIZ RICH
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 1207
YAKIMA, WA 98907-1207

CERTIFIED SERVICESSUBSTANCE 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

RON GENGLER
COO

KITTITAS

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

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

KITTITAS

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

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD 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

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

KLICKITAT

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

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

146500

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -

CHEHALIS

500 SOUTHEAST WASHINGTON AVENUE
CHEHALIS, WA 98532
(360) 266-5029
(866) 729-8038
WWW.AMERICANBEHAVIORALHEALTH.NET

TONY PRENTICE
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

RICHARD STRIDE
CEO

DAVID KING
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2428 REYNOLDS AVE
CENTRALIA, WA 98531

LEWIS

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

2428 W REYNOLDS AVE
CENTRALIA, WA 98531-4554

RICHARD STRIDE
CEO

KAREN ROSE
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

2428 REYNOLDS AVE
CENTRALIA, WA 98531

RICHARD STRIDE
CEO

MATT PATTEN
CCO/MH CLINICAL SUPERVISOR

CERTIFIED SERVICESSUBSTANCE 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

FRANK MORRISON
CEO

KATIE ALLEN
MH CLINICAL SUPERVISOR

LEWIS

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

RICHARD MIRAGLIA
ADMINISTRATOR

BEVERLY E. ALLEN
PSYCHIATRIST

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

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

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

LEWIS

172600

EUGENIA CENTER - MOSSYROCK

230 EAST STATE STREET
MOSSYROCK, WA 98564
(360) 983-3227
INFO@EUGENIACENTER.ORG
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

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.GREATRIVERSBHO.ORG/BHA

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
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

057200

GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT

375 SOUTHWEST 11TH STREET
CHEHALIS, WA 98532
(360) 740-3420

DAVID REINKE
JUVENILE REHABILITATION COORDINATOR

SHIRLEY BIVINS
JUVENILE REHABILITATION COORDINATOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL II INTENSIVE OUTPATIENT

057600

NEW DIRECTIONS COUNSELING - CHEHALIS

1956 NORTHEAST KRESKY ROAD
CHEHALIS, WA 98532
(360) 740-4380
(360) 740-1807

SCOTT M. DICKINSON
ADMINISTRATOR

UNKNOWN 11/5/09
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 59
CHEHALIS, WA 98532

LEWIS

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

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

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERM CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LINCOLN

007600**LINCOLN COUNTY ALCOHOL & DRUG CENTER**

505 1ST STREET
DAVENPORT, WA 99122
(509) 725-2111
WWW.CO.LINCOLN.WA.US

DARREN MATTOZZI
EXECUTIVE DIRECTOR

SUSAN HATTEN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 152
DAVENPORT, WA 99122-0152

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

160900**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT**

1211 MERRIAM STREET
DAVENPORT, WA 99122
(509) 725-3001
(888) 725-3001
WWW.CO.STEVENS.WA.US/COUNSELING

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1211 MERRIAM ST
DAVENPORT, WA 99122

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

MASON

073000

BEHAVIORAL HEALTH RESOURCES - SHELTON

110 WEST K STREET
SHELTON, WA 98584
(360) 426-1696
(360) 704-7170

LAURIE TEBO
CEO

DANIELLE MURPHY
RECOVERY SERVICES MANAGER

MAILING ADDRESS

3857 MARTIN WAY EAST
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200340

CATHOLIC COMMUNITY SERVICES - SHELTON

601 WEST FRANKLIN STREET
SHELTON, WA 98584
(888) 322-7156
HEIDIW@CCSWW.ORG
WWW.CCSWW.ORG/FAMILYPRESERVATION

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY 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

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

MASON

200488 **CONSEJO COUNSELING AND REFERRAL SERVICE - SHELTON**
627 WEST FRANKLIN STREET
SHELTON, WA 98584
(206) 461-4880
EXEC@CONSEJOCOUNSELING.ORG
WWW.CONSEJONEW.CONSEJOCOUNSELING.ORG

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

JENNY RODRIGUEZ
REGIONAL DIRECTOR (MH & SUD CLINICAL SUPERVISOR)

MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118

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

MASON

CERTIFIED SERVICESSUBSTANCE 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

DENNIS NEAL
ADMINISTRATOR

JENNIFER CASTANETO
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICESSUBSTANCE 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 551 TRIBAL CENTER ROAD
SHELTON, WA 98584
(360) 877-2008

DENESE LACLAIR
HEALTH CLINIC DIRECTOR

JARED LANGTON
BEHAVIORAL HEALTH SERVICES MANAGER

MAILING ADDRESS

N 80 TRIBAL CENTER RD
SHELTON, WA 98584

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MASON

CERTIFIED SERVICESSUBSTANCE 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

168500**TELECARE - MASON MOBILE OUTREACH & INTENSIVE
CASE MANAGEMENT TEAM**

601 WEST FRANKLIN STREET, SUITE B
SHELTON, WA 98584
(360) 462-3016
TELECARECORP.COM

TYVONNE BERRING
ADMINISTRATOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

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

OKANOGAN

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

007800

OKANOGAN BEHAVIORAL HEALTHCARE, INC.

1007 KOALA DRIVE
OMAK, WA 98841
(509) 826-6191
LAPPLE@OKBHC.ORG
WWW.OKBHC.ORG

JAMES "JIM" NOVELLI
CEO

BARNABY TENZIN DENISON
CLINICAL DIRECTOR (MH CLINICAL SUPERVISOR)

MAILING ADDRESS

1007 KOALA DR
OMAK, WA 98841

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

PACIFIC

173400

BASICS NW, LLC - RAYMOND

2570 OCEAN AVENUE
RAYMOND, WA 98577
(360) 915-6868
PKLUS@BASICSNW.COM
WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

2570 OCEAN AVENUE
RAYMOND, WA 98577

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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

SUSAN HARRIS
ADMINISTRATOR

JENNIFER HARRIS
SUD CLINICAL SUPERVISOR

PACIFIC

MAILING ADDRESS

PO BOX 399
OCEAN PARK, WA 98640

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RESIDENTIAL TREATMENT FACILITY

159500**KLEAN LONG BEACH WASHINGTON LLC**

211 PIONEER ROAD WEST
LONG BEACH, WA 98631
(360) 642-3105

WWW.KLEANTREATMENTCENTERS.COM

LAURIE BECK
DIRECTOR OF OPERATIONS

GREGORY LIPPERT
CLINICAL SUPERVISOR

MAILING ADDRESS

211 PIONEER RD W
LONG BEACH, WA 98631

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
WITHDRAWAL MANAGEMENT

200486**LIFELINE CONNECTIONS - SOUTH BEND**

1006 ROBERT BUSH DRIVE WEST
SOUTH BEND, WA 98586
(360) 397-8246
(800) 604-0025

ADMISSIONS@LIFELINECONNECTIONS.ORG

WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

PACIFIC

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

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

ROBERT CAETANO
CEO/FINANCE DIRECTOR

CHARLENE HAWLEY
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 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

ROBERT CAETANO
CEO/FINANCE DIRECTOR

CHARLENE HAWLEY
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 65
SOUTH BEND, WA 98586-0065

PACIFIC

CERTIFIED SERVICESSUBSTANCE 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 OUTREACH
DAY SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

PEND OREILLE

008100**PEND OREILLE COUNTY COUNSELING SERVICES -
MAIN**

105 SOUTH GARDEN AVENUE
NEWPORT, WA 99156
(509) 447-5651
(800) 404-5151
WWW.PENDOREILLE.ORG

ANNABELLE S. PAYNE
DIRECTOR

THERESA ALLEN
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

MAILING ADDRESS

PO BOX 5055
NEWPORT, WA 99156-5055

CERTIFIED SERVICESSUBSTANCE 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

ANNABELLE S. PAYNE
DIRECTOR

THERESA ALLEN
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

MAILING ADDRESS

PO BOX 5055
NEWPORT, WA 99156-5055

CERTIFIED SERVICESSUBSTANCE 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

PIERCE

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

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

PIERCE

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MARY STONE SMITH
VICE PRESIDENT

DAVID KUCKLICK
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

PIERCE

200019 **CATHOLIC COMMUNITY SERVICES - TACOMA MAIN**
5410 NORTH 44TH STREET
TACOMA, WA 98407
(253) 759-9544
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
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

200144 **CATHOLIC COMMUNITY SERVICES - TACOMA YAKIMA AVENUE**
1323 SOUTH YAKIMA AVENUE
TACOMA, WA 98405
(253) 502-2603
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

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

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

PIERCE

MAILING ADDRESS

PO BOX 5305
TACOMA, WA 98415-0305

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200298**COMPREHENSIVE LIFE RESOURCES - ADULT
OUTPATIENT**

1305 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 396-5800

WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

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

200184**COMPREHENSIVE LIFE RESOURCES - GIG HARBOR**

5262 OLYMPIC DRIVE NW, SUITE A
GIG HARBOR, WA 98335
(253) 396-5800

WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200182**COMPREHENSIVE LIFE RESOURCES - MAIN**

1201 SOUTH PROCTOR STREET
TACOMA, WA 98405
(253) 396-5800

WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

PIERCE

CERTIFIED SERVICESSUBSTANCE 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

200183**COMPREHENSIVE LIFE RESOURCES - PARK PLACE RTF**

610 YAKIMA AVENUE
TACOMA, WA 98405
(253) 396-5881

ASTARKEY@CMHSHARE.ORG

WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF OUTPATIENT SERVICES (MH CS)

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESSUBSTANCE 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

200297**COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER**

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

WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

124800**CONSEJO COUNSELING AND REFERRAL SERVICE - TACOMA**

5915 ORCHARD STREET WEST, UNIT B
TACOMA, WA 98466
(253) 414-7461
(206) 461-4880

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

YVONNE ELMENDORF
CLINICAL SUPERVISOR

MAILING ADDRESS

5915 ORCHARD ST W UNIT B
TACOMA, WA 98466

PIERCE

CERTIFIED SERVICESSUBSTANCE 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.**

10828 GRAVELLY LAKE DRIVE SW, SUITE 204
LAKEWOOD, WA 98499
(253) 473-7474
WWW.CROSSROADSTREATMENT.ORG

JEREMIAH SAUCIER
ADMINISTRATOR

MAILING ADDRESS

10828 GRAVELLY LAKE DRIVE SW, SUITE 204
LAKEWOOD, WA 98499

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200057**GREATER LAKES MENTAL HEALTHCARE - 72ND STREET**

1415 EAST 72ND STREET, SUITE B
TACOMA, WA 98404
(253) 620-5800
WWW.GLMHC.ORG

TERRI CARD
PRESIDENT & CEO

CLAUDIA REYES GARZA
CLINICAL MANAGER

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

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

200364

GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC

113 170TH STREET SOUTH
SPANAWAY, WA 98387
(253) 535-1935
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

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 - MAIN

6424 NORTH 9TH STREET
TACOMA, WA 98406

JOSEPH LEROY
ADMINISTRATOR

PIERCE

MAILING ADDRESS

6424 NORTH 9TH STREET
TACOMA, WA 98406

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

FAMILY THERAPY
INDIVIDUAL TREATMENT

200403**HOPESPARKS - PUYALLUP**

1420 SOUTH MERIDIAN, SUITE B
PUYALLUP, WA 98371
(253) 845-0864
[HTTP://HOPESPARKS.ORG/](http://HOPESPARKS.ORG/)

JOSEPH LEROY
ADMINISTRATOR

MAILING ADDRESS

6424 N. 9TH STREET
TACOMA, WA 98406

CERTIFIED SERVICESMENTAL 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

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

RYAN HANNIG
PROGRAM DIRECTOR

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

STACEY HOTTER-KNIGHT
PRESIDENT

MAILING ADDRESS

OAK HARBOR, WA 98277

PIERCE

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

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 98402

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

ALI LYSE
DIRECTOR OF BUSINESS OPERATIONS

CHANTE STOECKLEY
BEHAVIORAL SUPERVISOR

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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

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

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

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

MAILING ADDRESS

325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200210

MULTICARE BEHAVIORAL HEALTH - PACT

4301 SOUTH PINE STREET, SUITE 21
TACOMA, WA 98409

CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS

325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

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 SERVICESSUBSTANCE 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

ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCICH
CD PROGRAM MANAGER

MAILING ADDRESS

325 E PIONEER AVE
PUYALLUP, WA 98372

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

TAKANORI KOYAMA
OWNER

MAILING ADDRESS

15445 53RD AVE S STE 110
TUKWILA, WA 98188

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

PIERCE

200431

NORTHWEST INTEGRATED HEALTH - LAKEWOOD

9720 SOUTH TACOMA WAY
LAKEWOOD, WA 98499
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

AMY CREASER
AGENCY ADMINISTRATOR

TANA RUSSELL
SUD CLINICAL MANAGER

MAILING ADDRESS

5929 WESTGATE BLVD STE A
TACOMA, WA 98406

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

STEPHANIE LUCAS
AGENCY ADMINISTRATOR

BRYAN 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

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

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

JALANE CHRISTIAN-STOKER
AVP, BEHAVIORAL HEALTH

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

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

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

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

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 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

JAMIE SELLAR
WESTERN REGIONAL CRISIS DIRECTOR

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

RICKY RORIE
PROGRAM DIRECTOR

KEN PIMPLETON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

PIERCE

CERTIFIED SERVICESSUBSTANCE 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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

MARCHE WARD
SUD CLINICAL SUPERVISOR

PIERCE

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200514**SEA MAR BEHAVIORAL HEALTH - TACOMA
HEALTHCARE FOR THE HOMELESS**

1307 SOUTH 11TH STREET
TACOMA, WA 98405
(253) 682-2180
(206) 764-6286
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CLARE WALSH
MH CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

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

052102**SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT -
TACOMA**

1415 CENTER STREET
TACOMA, WA 98409
(253) 280-9860
WWW.SEAMAR.ORG

MARCHE WARD
PROGRAM MANAGER

RODSLYN KENNEY
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

016500**SERENITY COUNSELING SERVICES**

5005 PACIFIC HIGHWAY EAST, SUITE 20
FIFE, WA 98424
(253) 922-6522
WWW.SERENITY-COUNSELING.COM

KAREN MYRICK
OWNER/ADMINISTRATOR

KEVIN CURRIE
CLINICAL DIRECTOR

MAILING ADDRESS

5005 PACIFIC HWY E, STE 20
FIFE, WA 98424

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS
3629 SOUTH D ST MS 501
TACOMA, WA 98418-6813

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

ANDY ROHR
ASSISTANT DIVISION DIRECTOR

AMANDA CRABTREE
SUD CLINICAL SUPERVISOR

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

MAILING ADDRESS
3901 SOUTH FIFE STREET, SUITE 301
TACOMA, WA 98409

CERTIFIED SERVICES

JAMES PRESSON
ADMINISTRATOR

AMY MATHESON
CLINICAL DIRECTOR

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

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

ELISIA YANASAK, PH.D
ADMINISTRATOR

CARL RIMMELE, PH.D
DIRECTOR

200508 **WESTERN STATE HOSPITAL**
9601 STEILACOOM BOULEVARD SOUTHWEST
LAKEWOOD, WA 98498

WWW.DSHS.WA.GOV/BHA/DIVISION-STATE-HOSPITALS/WESTE

MAILING ADDRESS
9601 STEILACOOM BLVD SW
LAKEWOOD, WA 98498

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY
SCREENING AND BRIEF INTERVENTION

KATHRIN CHRISTENSEN
SUD PROGRAM MANAGER

SAN JUAN

147700 **COMPASS HEALTH - LOPEZ ISLAND**
46 EADS LANE, SUITE D
LOPEZ ISLAND, WA 98261
(360) 378-2669

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

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

MENTAL HEALTH SERVICES:
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

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

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

160600 **THE CLEARING**
2687 WEST VALLEY ROAD
FRIDAY HARBOR, WA 98250
(425) 275-8600

MAILING ADDRESS
2687 WEST VALLEY RD
FRIDAY HARBOR, WA 98250

JOSEPH H. KOELZER, JR.
CEO

SCOTT JEFFREY ALPERT
CLINICAL SUPERVISOR

SAN JUAN

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

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

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

SKAGIT

200168

COMPASS HEALTH - MT. VERNON PACT

209 MILWAUKEE STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200519

DIDGWALIC WELLNESS CENTER

8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221
(360) 588-2800
DIDGWALIC@SWINOMISH.NSN.US
WWW.DIDGWALIC.COM

JOHN STEPHENS
PROGRAMS ADMINISTRATOR

DAWN LEE
DIDGWALIC PROGRAM DIRECTOR/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

038000

FOLLMAN AGENCY

910 SOUTH ANACORTES STREET
BURLINGTON, WA 98233
(360) 755-1125
FRONTDESK@FOLLMANAGENCY.COM
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

SKAGIT

CERTIFIED SERVICESSUBSTANCE 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.PIONEERHUMANSERVICES.ORG

MAILING ADDRESS

1960 THOMPSON DR
SEDRO WOOLLEY, WA 98284

ROBERT SULLIVAN
DIRECTOR III

TORY SANDOZ
CLINICAL PRACTICES MANAGER (SUD CS)

CERTIFIED SERVICESSUBSTANCE 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://PIONEERHUMANSERVICES.ORG/TREATMENT/CENTERS](http://PIONEERHUMANSERVICES.ORG/TREATMENT/CENTERS)

MAILING ADDRESS

201 LILA LN
BURLINGTON, WA 98233

ROBERT SULLIVAN
DIRECTOR

CERTIFIED SERVICESSUBSTANCE 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

WWW.SEAMAR.ORG

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

SKAGIT

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

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

BRIAN GRIFFITH
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

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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

SKAGIT

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

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

200279

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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

INFO@SUNRISEEMAIL.COM

WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

2500 E COLLEGE WAY
MOUNT VERNON, WA 98273

SKAGIT

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200384**SUNRISE SERVICES, INC. - SEDRO WOOLEY**

10210 COLLINS ROAD
SEDRO WOOLLEY, WA 98284

INFO@SUNRISEEMAIL.COM

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

MAILING ADDRESS

17337 RESERVATION ROAD
LA CONNER, WA 98257

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

JOHN STEPHENS
JSTEPHENS@SWINOMISH.NSN.US

DAWN LEE
PROGRAM/CLINICAL DIRECTOR

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

200307**TELECARE - NORTH SOUND EVALUATION & TREATMENT**

1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284
(360) 854-7400

MAILING ADDRESS

1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES

GREGG VON FEMPE
ADMINISTRATOR

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

071300**UNITED NORTHWEST RECOVERY CENTER**

605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284
(360) 856-6300

MAILING ADDRESS

605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284

BARBARA THOMPSON/COUSINS
DIRECTOR

SKAGIT

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

SNOHOMISH

054400

ALPINE RECOVERY SERVICES, INC. - ARLINGTON

16404 SMOKEY POINT BOULEVARD, SUITE 109
ARLINGTON, WA 98223
(360) 658-1388

LYNN DEE BAUER
ADMINISTRATOR

MAILING ADDRESS

16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

018500

ALPINE RECOVERY SERVICES, INC. - LYNNWOOD

4202 198TH STREET SW, SUITE 2
LYNNWOOD, WA 98036
(425) 778-1136

LYNN DEE BAUER
ADMINISTRATOR

MAYNARD KIELTY
TREATMENT DIRECTOR

MAILING ADDRESS

16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200460

**AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
SNOHOMISH OUTPATIENT**

8625 EVERGREEN WAY, SUITE 100
EVERETT, WA 98208
(425) 322-5581
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR

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

SNOHOMISH

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

MAGGIE ISHAQ
OWNER/DIRECTOR

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

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

125500

BOWEN RECOVERY CENTER

21818 66TH AVENUE WEST, SUITE 4
MOUNTLAKE TERRACE, WA 98043
(425) 787-5833

LINDA BOWEN
OWNER/ADMINISTRATOR

MAILING ADDRESS

21818 66TH AVE W STE 4
MOUNTLAKE TERRACE, WA 98043

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

SNOHOMISH

113700

BRIDGEWAY TREATMENT SERVICES, LLC

2013 19TH STREET
EVERETT, WA 98201
(425) 283-5315
INFO@BRIDGEWAYTREATMENT.COM
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

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

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

SNOHOMISH

200141

CATHOLIC COMMUNITY SERVICES - EVERETT COLBY AVENUE
2722 COLBY AVENUE, SUITE 610
EVERETT, WA 98201
(360) 676-2164
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

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

BRIAN J. MURPHY
PROGRAM DIRECTOR

LAURA MINOR
TREATMENT DIRECTOR (SUD CS)

MAILING ADDRESS

PO BOX 700
EDMONDS, WA 98020

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

153800**CENTER FOR HUMAN SERVICES - EVERETT**

3201 SMITH AVENUE
EVERETT, WA 98201
(206) 362-7282
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG

BERATTA GOMILLION
EXECUTIVE DIRECTOR

RAMONA GRAHAM
SUBSTANCE ABUSE DIRECTOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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 SERVICESSUBSTANCE 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

126000**CENTER FOR HUMAN SERVICES - NORTHSHORE 23RD**

22105 23RD DRIVE SE
BOTHELL, WA 98021
(206) 362-7282
(206) 362-7152

BERATTA GOMILLION
EXECUTIVE DIRECTOR

RAMONA GRAHAM
CLINICAL SUPERVISOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155-5126

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

162500**CENTER FOR HUMAN SERVICES - SILVER LAKE**

10315 19TH AVENUE, UNIT 112
EVERETT, WA 98208
(206) 362-7282
(844) 778-5548
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG

BERATTA GOMILLION
EXECUTIVE DIRECTOR

KATRINA HANAWALT
MENTAL HEALTH DIRECTOR

SNOHOMISH

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

BELLEGGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL

200181**COMPASS HEALTH - AURORA HOUSE**

20903 70TH AVENUE WEST
EDMONDS, WA 98026
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS 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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MARGARET SPENCER
ADMINISTRATOR

ROBERT FROMM
CLINICAL SUPERVISOR

MAILING ADDRESS

7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

010802

EVERGREEN RECOVERY CENTERS - BUILDING B
2601 SUMMIT AVENUE, BUILDING B
EVERETT, WA 98201
(425) 258-2407
ASKUS@EVERGREENMANOR.ORG
WWW.EVERGREENMANOR.ORG

LINDA GRANT
CEO

DALLARIE HORNE-MOSBY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

162800**EVERGREEN RECOVERY CENTERS - LYNNWOOD
DETOX**

20508 56TH AVENUE WEST
LYNNWOOD, WA 98036
(425) 678-1390
CHAYES@EVERGREENRC.ORG
WWW.EVERGREENMANOR.ORG

SCOTT JOHNSON
DIRECTOR OF DETOX SERVICES

ROBERT MCCULLOUGH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

SNOHOMISH

133600 **EVERGREEN RECOVERY CENTERS - LYNNWOOD
OUTPATIENT**
3810 196TH STREET SW, SUITE 11
LYNNWOOD, WA 98036
(425) 248-4900

LINDA GRANT
EXECUTIVE DIRECTOR

ROBERT MCCULLOUGH
SUD CLINICAL SUPERVISOR/PROGRAM MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

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

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

DAVID ANDERSON
MANAGER

MAILING ADDRESS
PO BOX 646
MONROE, WA 98272-0646

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

200194 **FAIRFAX BEHAVIORAL HEALTH - EVERETT E&T**
916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

MAILING ADDRESS
916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200349 **FAIRFAX BEHAVIORAL HEALTH - MONROE E&T**
14701 179TH AVENUE SE
MONROE, WA 98272
(425) 821-2000
(800) 435-7221
JO-ELLEN.WATSON@UHSINC.COM
[HTTP://WWW.FAIRFAXHOSPITAL.COM/](http://www.fairfaxhospital.com/)

RICHARD GEIGER
CEO

DR. SAMIR AZIZ
MEDICAL DIRECTOR

MAILING ADDRESS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

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**
21123 SMOKEY POINT BOULEVARD
ARLINGTON, WA 98223
(360) 652-9640

KELLY CAMPBELL
INTERIM ADMINISTRATOR

JACKIE ROTH
CLINICAL SUPERVISOR

MAILING ADDRESS
21123 SMOKEY POINT BLVD
ARLINGTON, WA 98223

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
OPIATE SUBSTITUTION TREATMENT

200303 **KINDERING - BOTHELL**
19801 NORTH CREEK PARKWAY, SUITE 200
BOTHELL, 98011
(425) 747-4004
INFO@KINDERING.ORG
WWW.KINDERING.ORG

LISA GREENWALD
CHIEF PROGRAM OFFICER

SHAFAER CRISSEY
EARLY CHILDHOOD SPECIAL EDUCATOR AND ABA CLINICAL

MAILING ADDRESS
19801 NORTH CREEK PARKWAY, SUITE 200
BOTHELL, 98011

CERTIFIED SERVICES

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

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

SNOHOMISH

MAILING ADDRESS

20815 67TH AVE W STE 201
LYNNWOOD, WA 98036

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICESSUBSTANCE 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

MAUREEN FLOREA
ADMINISTRATOR

TOM BLANFORD
CLINICAL SUPERVISOR

MAILING ADDRESS

9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204

CERTIFIED SERVICESSUBSTANCE 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

RALPH PAMPINO
CEO

MAILING ADDRESS

3214 W MCGRAW ST STE 212
SEATTLE, WA 98199

CERTIFIED SERVICESMENTAL 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

DIANE BUFORD
CEO

MELANIE KEPLINGER
CLINICAL SUPERVISOR

SNOHOMISH

MAILING ADDRESS

5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270

CERTIFIED SERVICESSUBSTANCE 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

MAILING ADDRESS

2722 COLBY AVE STE 515
EVERETT, WA 98201

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

KIMBERLY SLICK
ADMINISTRATOR/EXECUTIVE DIRECTOR

MAILING ADDRESS

722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

SNOHOMISH

200373

REHAB WITHOUT WALLS, INC.
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036
(425) 712-0802
ANGIE.HENDRICK@RESCARE.COM
WWW.REHABWITHOUTWALLS.COM/BMAC

MICHAEL MCCORMICK
EXECUTIVE DIRECTOR

ELLIS "GRANT" THOMPSON
DIRECTOR OF CLINICAL MANAGEMENT

MAILING ADDRESS
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036

CERTIFIED SERVICES

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

164400

RYTHER - MUKILTEO
315 LINCOLN AVE, SUITE C1
MUKILTEO, WA 98275
(206) 525-5050

KAREN BRADY
CEO/EXECUTIVE DIRECTOR

YVETTE LUDVIK - JESSICA GLOVER
CLINICAL SUPERVISORS

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-SUIATTLE 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

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

SNOHOMISH

| | | |
|--------|--|---|
| 200334 | SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY 1920 100TH STREET, SUITE A2 EVERETT, WA 98208 (425) 312-0277 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 | <u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION |
| 139100 | SEA MAR BEHAVIORAL HEALTH - LYNNWOOD 4111 ALDERWOOD MALL BOULEVARD LYNNWOOD, WA 98036 (425) 977-2560 INFO@SEAMARCHC.ORG WWW.SEAMAR.ORG | CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH KATHERINE SCOTT DAVIS MH CLINICAL SUPERVISOR |
| | MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108 | |
| | CERTIFIED SERVICES <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> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT |
| 104600 | SEA MAR BEHAVIORAL HEALTH - MONROE 14090 FRYELANDS BOULEVARD SE, SUITE 347 MONROE, WA 98272 (360) 805-3122 INFO@SEAMARCHC.ORG WWW.SEAMAR.ORG | CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH ELIANA HAFFNER SUD CLINICAL SUPERVISOR |
| | MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108 | |
| | CERTIFIED SERVICES <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> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT |
| 146200 | SMOKEY POINT BEHAVIORAL HOSPITAL 3955 156TH STREET NORTHEAST MARYSVILLE, WA 98271 (844) 202-5555 KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.COM WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM | MATT CROCKETT CEO CHRISTINE COSTELLO DIRECTOR OF CLINICAL SERVICES (MH CLIN SUP) |

SNOHOMISH

MAILING ADDRESS

3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN

200112**SNOHOMISH COUNTY HUMAN SERVICES**

3000 ROCKERFELLER AVENUE
EVERETT, WA 98201
(425) 388-7402

[HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-
MENTAL-](http://snohomishcountywa.gov/427/community-mental-)

KEN STARK
ADMINISTRATOR

MAILING ADDRESS

300 ROCKERFELLER AVE, MS 305
EVERETT, WA 98201

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION

081300**STILLAGUAMISH TRIBE OF INDIANS**

17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

TODD REDD
ADMINISTRATOR

MAILING ADDRESS

17014 59TH AVE NE
ARLINGTON, WA 98223

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

SNOHOMISH

200381 **SUNRISE SERVICES, INC. - EVERETT BROADWAY**
1520 BROADWAY
EVERETT, WA 98201
(425) 493-5870
(877) 493-5890
INFO@SUNRISEEMAIL.COM
SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

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

168100 **SUNRISE SERVICES, INC. - EVERETT MAIN**
1021 NORTH BROADWAY
EVERETT, WA 98201
(425) 493-5800

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

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

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

200324 **SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE**
6505 218TH STREET SW, SUITES 6 & 7
MOUNTLAKE TERRACE, WA 98043

INFO@SUNRISEEMAIL.COM
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:
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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

SNOHOMISH

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

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

SNOHOMISH

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

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

SPOKANE

CERTIFIED SERVICESSUBSTANCE 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

ARLENE COOK
ADMINISTRATOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
SECURE WITHDRAWAL MANAGEMENT &
STABILIZATION
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

134200**AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
MISSION**

12715 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 232-5766
(866) 729-8038

ANGELA MELLO
DIRECTOR OF CLIENT SERVICES

DEXTER BAKER, CARRIE SUAZO
CLINICAL SUPERVISORS

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SPOKANE

110400

AMERICAN INDIAN COMMUNITY CENTER

610 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207
(509) 535-0886
(800) 578-0886
LINDAL@AICCINC.ORG
WWW.AICCINC.ORG

FRANCIS R. DEVEREAUX
EXECUTIVE DIRECTOR

CAROL GRABOWSKI
CLINICAL SUPERVISOR

MAILING ADDRESS

610 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

129800

AT PARR OUTPATIENT SERVICES, LLC

124 EAST AUGUSTA AVENUE, SUITE 100
SPOKANE, WA 99207
(509) 325-0777

KIMBERLEY A. PARR
ADMINISTRATOR

MAILING ADDRESS

124 E. AUGUSTA AVENUE, 100
SPOKANE, WA 99207-2481

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

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)

JESSICA PAKOOTAS
CAMAS PATH EXECUTIVE DIRECTOR

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

SPOKANE

200491

CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES

2911 WEST FORT WRIGHT DRIVE
SPOKANE, WA 99210
(509) 358-4250
MIRWIN@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESSPOKANE.ORG

PAMELA BROWN
DIRECTOR

JEFF BRENO
ASSISTANT DIRECTOR

MAILING ADDRESS

2911 WEST FORT WRIGHT DRIVE
SPOKANE, WA 99210

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200017

CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN

12 EAST 5TH AVENUE
SPOKANE, WA 99210
(509) 358-4250
DEVELOPMENT@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESSPOKANE.ORG

ROB MCCANN
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 2253
SPOKANE, WA 99210

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

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC STAPLETON
CLINICAL SUPERVISOR

MAILING ADDRESS

2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

SPOKANE

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

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

200313

**CHILDREN'S HOME SOCIETY OF WASHINGTON -
SPOKANE WEST PLAINS**

8727 WEST HIGHWAY 2
SPOKANE, WA 99224
(509) 747-4174
WWW.CHS-WA.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC DOTSON
CLINICAL SUPERVISOR

MAILING ADDRESS

2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

025500

COLONIAL CLINIC

910 NORTH WASHINGTON STREET, SUITE 210
SPOKANE, WA 99201
(509) 327-9831

THOMAS HUSTON STOLZ
TREATMENT DIRECTOR

PATRICK HENNESSY
CLINICAL SUPERVISOR

MAILING ADDRESS

910 N WASHINGTON ST., STE 210
SPOKANE, WA 99201

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

163600

COURAGE TO CHANGE

13015 WEST 14TH AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 863-4233
WWW.COURAGETOCHANGEWESTPLAINS.COM

ANGELA SILVA
DIRECTOR OF TREATMENT

MELISSA HURT-MORAN
DIRECTOR OF OPERATIONS

SPOKANE

MAILING ADDRESS

PO BOX 212
MEDICAL LAKE, WA 99022

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200481**CUBHOUSE**

14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 477-4631

WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR

COLIN HUSFLOEN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

RECOVERY HOUSE

MENTAL HEALTH SERVICES:

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

011601**DAYBREAK YOUTH SERVICES - SPOKANE INPATIENT**

628 SOUTH COWLEY STREET
SPOKANE, WA 99202
(509) 624-3227
(509) 927-1688

WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

LISA BROOKS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT – CHILDREN
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

011600**DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT**

200 NORTH MULLAN ROAD, SUITE 120
SPOKANE VALLEY, WA 99206
(509) 927-1688

WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

DAWN FLEES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

960 E 3RD AVE
SPOKANE, WA 99202

SPOKANE

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

161800**DIRKERS & ASSOCIATES BEHAVIORAL HEALTH**

611 EAST 2ND AVENUE, SUITE B
SPOKANE, WA 99202
(509) 822-7395
DIRKERSANDASSOCIATES@GMAIL.COM
DIRKERSANDASSOCIATES.COM

CHRISTOPHER DAVID DIRKERS
ADMINISTRATOR/OWNER

KIM STANKOVICH
CLINICAL SUPERVISOR

MAILING ADDRESS

611 EAST 2ND AVENUE, SUITE B
SPOKANE, WA 99202

CERTIFIED SERVICES

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

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 SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

075700**DOC - AIRWAY HEIGHTS CORRECTIONS CENTER**

11929 WEST SPRAGUE AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 244-6700

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

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

076000**DOC - BROWNSTONE WORK RELEASE**

223 SOUTH BROWNE STREET
SPOKANE, WA 99201
(360) 725-8423
COURTNEY.EVERSON@DOC.WA.GOV
WWW.DOC.WA.GOV

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

026802**DOC - ELEANOR CHASE WORK RELEASE**

WEST 427 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

089300**EXCELSIOR YOUTH CENTER - MAIN**

3754 WEST INDIAN TRAIL ROAD
SPOKANE, WA 99208
(509) 328-7041
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

ANDREW HILL
CEO

MELISSA MELSON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICESSUBSTANCE 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

ANDREW HILL
CEO

SARA SCHUMACHER
VP BH SERVICES (MH CLINICAL SUPERVISOR)

MAILING ADDRESS

3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

SPOKANE

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

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

012200

FRONTIER BEHAVIORAL HEALTH - BOONE

127 WEST BOONE AVENUE
SPOKANE, WA 99201
(509) 838-4651
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

SPOKANE

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

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

200193**FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB**

2102 EAST SPRAGUE AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES**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

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

INPATIENT EVALUATION AND TREATMENT - ADULT

SPOKANE

200199

FRONTIER BEHAVIORAL HEALTH - HOWARD STREET

7 SOUTH HOWARD STREET, SUITE 321
SPOKANE, WA 99201
(509) 838-4651
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

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

200201

FRONTIER BEHAVIORAL HEALTH - IOP SERVICES

17 EAST FIRST AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

SPOKANE

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.FBHWA.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

200429

FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD

5901 NORTH LIDGERWOOD STREET, SUITE 115
SPOKANE, WA 99208
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

AILEEN HETRICK
MH CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

SPOKANE

200197

FRONTIER BEHAVIORAL HEALTH - MAIN

107 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
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

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

200362

FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE

124 EAST PACIFIC AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

PAT ANTHONY
MH CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

SPOKANE

CERTIFIED SERVICESSUBSTANCE 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

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIETGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICESSUBSTANCE 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

200203**FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING**

5125 NORTH MARKET STREET
SPOKANE, WA 99217
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICESSUBSTANCE 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

200360 **FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE**
124 EAST SHORT AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

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

200206 **FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES**
1401 NORTH CALISPEL STREET
SPOKANE, WA 99201

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

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

NEAL HAYDEN
ADMINISTRATOR/OWNER

KIMBERLY STANKOVICH
CLINICAL SUPERVISOR

200219 **IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SPOKANE MAIN**
5709 WEST SUNSET HIGHWAY, SUITE 100
SPOKANE, WA 99224

MAILING ADDRESS
5709 WEST SUNSET HIGHWAY, SUITE 100
SPOKANE, WA 99224

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

RICK JUSTUS
PROGRAM DIRECTOR

SPOKANE

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

MAILING ADDRESS

34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

019701

ISABELLA HOUSE

2308 WEST 3RD AVENUE
SPOKANE, WA 99201
(509) 624-1244

ART JACOBS
ADMINISTRATOR

FARIBA NIKDEL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

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

172200

KAREN'S HOUSE

4324 NORTH JEFFERSON STREET
SPOKANE, WA 99205
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR

CHRISTINA MACLACHLAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

4324 N JEFFERSON ST
SPOKANE, WA 99205

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

RECOVERY HOUSE

MENTAL HEALTH SERVICES:

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

200087

LUTHERAN COMMUNITY SERVICES NORTHWEST - SPOKANE

210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201
(509) 797-8224
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG

HEIKE LAKE
AREA DIRECTOR

SHARON O'BRIEN
PROGRAM SUPERVISOR

SPOKANE

MAILING ADDRESS

210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

055600**N.A.T.I.V.E. PROJECT**

1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831
(509) 325-5502

TONI LODGE
EXECUTIVE DIRECTOR

CLAIRE ABERASTURI
BEHAVIORAL HEALTH DIRECTOR (MH & SUD CS)

MAILING ADDRESS

1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831

CERTIFIED SERVICES**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

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

SPOKANE

CERTIFIED SERVICESSUBSTANCE 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

200245**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - NINE MILE FALLS**

5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026
(509) 465-2200

WWW.CO.STEVENS.WA.US/COUNSELING

MAILING ADDRESS

5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026

CERTIFIED SERVICES

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD 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
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

MAILING ADDRESS

825 HAWTHORNE ROAD
SPOKANE, 99218

CERTIFIED SERVICES

JIM MATTHEWS
PROGRAM MANAGER

DANA STEVENS
DIRECTOR OF CLINICAL 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)

MAILING ADDRESS

528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202

CERTIFIED SERVICES

ADAM KOGLER
OPERATIONS AND FINANCIAL OFFICER

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

SPOKANE

098700

PARTNERS WITH FAMILIES AND CHILDREN

1321 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(509) 473-4810
WWW.PARTNERSWITHFAMILIES.ORG

CAROL PLISCHKE
EXECUTIVE DIRECTOR

KOLLEEN SEWARD
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1321 W BROADWAY AVE
SPOKANE, WA 99201

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

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 102
SPOKANE VALLEY, WA 99212
(509) 209-8990
PHSWA@PATHWAYS.COM
WWW.PATHWAYS.COM

AMIKA TANIGUCHI
STATE DIRECTOR

MARK MCENDERFER
TEAM LEAD

MAILING ADDRESS

1050 NORTH ARGONNE ROAD, SUITE 102
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

SPOKANE

MAILING ADDRESS

PO BOX 9838
SPOKANE, WA 99209

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

NANCY BLACKMAN
CLINICAL MANAGER

[HTTP://PIONEERHUMANSERVICES.ORG](http://pioneerhumanservices.org)

MAILING ADDRESS

758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICESSUBSTANCE 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 SERVICESMENTAL 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

SPOKANE

MAILING ADDRESS

101 WEST 8TH AVENUE
SPOKANE, WA 99204

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

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

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

TERESA RORIE
PROGRAM DIRECTOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

SPOKANE

CERTIFIED SERVICESSUBSTANCE 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

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 SERVICESSUBSTANCE 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

MARK BROWNLOW
ADMINISTRATOR

BRANDY WOODS
CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
RECOVERY HOUSE

165900**SPARC - DELANEY HOUSE**

1501 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 624-7456

MARK BROWNLOW
ADMINISTRATOR

CAROL GRABOWSKI
CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICESSUBSTANCE 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

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

MARK BROWNLOW
ADMINISTRATOR

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

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

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

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

JULIE ALBRIGHT
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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESMENTAL HEALTH SERVICES:

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

SPOKANE

| | | |
|---------------|---|--|
| 200281 | SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER) 3305 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 | RONDA HAIN SEER PROGRAM CONTACT |
| | MAILING ADDRESS 3305 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 | |
| | CERTIFIED SERVICES | <u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT INDIVIDUAL TREATMENT RECOVERY EMPLOYMENT SUPPORT |
| 200122 | TAMARACK CENTER - CLIP 2901 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 | |
| | MAILING ADDRESS 2901 W. FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 | |
| | CERTIFIED SERVICES | <u>MENTAL HEALTH SERVICES:</u> CHILD LONG-TERM INPATIENT PROGRAM (CLIP) |
| 200123 | TAMARACK CENTER - OUTPATIENT 2901 WEST FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 (509) 326-8100 TAMARACK.ORG | TIM DAVIS EXECUTIVE DIRECTOR ELLEN DAL PRA CLINICAL SUPERVISOR |
| | MAILING ADDRESS 2901 W. FORT GEORGE WRIGHT DRIVE SPOKANE, WA 99224 | |
| | CERTIFIED SERVICES | <u>MENTAL HEALTH SERVICES:</u> CASE MANAGEMENT DAY SUPPORT INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION |
| 200127 | THE EMILY PROGRAM - SPOKANE 2020 EAST 29TH AVENUE, SUITE 200 SPOKANE, WA 99203 (888) 364-5977 WWW.EMILYPROGRAM.COM | KRISTA CROTTY SITE DIRECTOR |
| | MAILING ADDRESS 2020 EAST 29TH AVENUE, SUITE 200 SPOKANE, WA 99203 | |
| | CERTIFIED SERVICES | <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

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

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MARGARET CURTIN REY-BEAR
CLINICAL DIRECTOR

MAILING ADDRESS

930 NORTH MONROE STREET
SPOKANE, WA 99201

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

STEVENS

MAILING ADDRESS

PO BOX 905
CHEWELAH, WA 99109-0905

CERTIFIED SERVICESSUBSTANCE 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

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

165 E HAWTHORNE AVE
COLVILLE, WA 99114

CERTIFIED SERVICESSUBSTANCE 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

DAVID M. NIELSEN, PH.D.
EXECUTIVE DIRECTOR

D. LYNNE GUHLKE
MENTAL HEALTH CLINICAL DIRECTOR

MAILING ADDRESS

165 E HAWTHORNE AVE
COLVILLE, WA 99114

CERTIFIED SERVICESMENTAL 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

200009 **BASICS NW, LLC - MAIN**
8282 28TH COURT NE, SUITE A & AMP; C
LACEY, WA 98516
(360) 915-6868
WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS
8282 28TH COURT NE, SUITE A
LACEY, WA 98516

THURSTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200028

BEHAVIORAL HEALTH RESOURCES - MAIN

3857 MARTIN WAY EAST
OLYMPIA, WA 98506
(360) 704-7170
COMMUNITYRELATIONS@BHR.ORG
WWW.BHR.ORG

LAURIE TEBO
CEO

IAN HARREL
COO/MH CLINICAL SUPERVISOR

MAILING ADDRESS

3857 MARTIN WAY EAST
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
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

THURSTON

200142

CATHOLIC COMMUNITY SERVICES - OLYMPIA

1011 10TH AVENUE SOUTHEAST
OLYMPIA, WA 98501
(360) 878-8248
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

104900

CATHOLIC COMMUNITY SERVICES - YELM

715 EAST YELM AVENUE, SUITE 8
YELM, WA 98597
(360) 878-8248
(888) 322-7156
STEPHANIETH@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200162

COMMUNITY YOUTH SERVICES - MAIN

711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

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

THURSTON

200163 **COMMUNITY YOUTH SERVICES - PEAR STREET**
520 PEAR STREET SOUTHEAST
OLYMPIA, WA 98501
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

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

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

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

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

SCOTT HANAUER
CEO

DR. EKATERINA SHKURKIN
PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)

012600 **CRISIS CLINIC OF THURSTON AND MASON COUNTIES**
CONFIDENTIAL LOCATION
(360) 586-2888
(800) 627-2211
WWW.CRISIS-CLINIC.ORG

MAILING ADDRESS
PO BOX 13453
OLYMPIA, WA 98508-3453

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS

MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

CB BOWERS
BOARD PRESIDENT

AMY SOHLER
MH & SUD CLINICAL SUPERVISOR

077400 **DOC - CEDAR CREEK CORRECTIONS CENTER**
12200 BORDEAUX ROAD
LITTLEROCK, WA 98556
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

THURSTON

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

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

LAURA CAMPBELL
MEMBER/OWNER

MAILING ADDRESS

PO BOX 6286
OLYMPIA, WA 98507

THURSTON

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

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@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

162700

NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH

200 LILLY ROAD NORTHEAST, SUITE C
OLYMPIA, WA 98506
(360) 918-8336
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

DUANE PRICE
MH CLINICAL SUPERVISOR

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

THURSTON

CERTIFIED SERVICESSUBSTANCE 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

061600**NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN**

2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502
(360) 943-8810
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

STANCIN KAHLER
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502

CERTIFIED SERVICESSUBSTANCE 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**

612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503
(360) 867-2602
(800) 658-4105
INQUIRIES@TMBHO.ORG
WWW.TMBHO.ORG

MARK FREEDMAN
CEO

JESSICA SHOOK
CLINICAL MANAGER/SUPERVISOR

MAILING ADDRESS

612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503

CERTIFIED SERVICESMENTAL 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

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

THURSTON

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

SUE BEALL
SWR DIRECTOR BH SERVICES

GEORGE CHAPPELL
MEDICAL DIRECTOR

MAILING ADDRESS

413 LILLY RD NE
OLYMPIA, WA 98506

CERTIFIED SERVICESMENTAL 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 SERVICESMENTAL HEALTH SERVICES:

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

176500**ROYAL LIFE CENTERS, LLC - HAVEN**

8649 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0422
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

RICKY RORIE
PROGRAM DIRECTOR

BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

THURSTON

CERTIFIED SERVICESSUBSTANCE 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

RICKY RORIE
PROGRAM DIRECTOR

BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8649 MARTIN WAY EAST
LACEY, WA 98516

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT

200267**SEA MAR BEHAVIORAL HEALTH - OLYMPIA**

3030 LIMITED LANE NW
OLYMPIA, WA 98502

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL 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 LITTLEROCK ROAD SW
TUMWATER, WA 98512
(360) 704-7590
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
ADMINISTRATOR

JARED LANGTON
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE 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

THURSTON

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MARISSA ELLIOT
START-UP ADMINISTRATOR

TYVONNE BERRING
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICESMENTAL 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

PAM EGGLESTON
INTERIM ADMINISTRATOR

KRISTIANN SMITH
INTERIM CLINICAL DIRECTOR

THURSTON

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

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

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

STACEY SCHILTER-PISANO
SITE MANAGER

MAILING ADDRESS

673 WOODLAND SQUARE LOOP S.E., 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

JOSEPHINE KAIL-LEIBL
ADMINISTRATOR

MIJA BRADSHAW
INTERIM CLINICAL SUPERVISOR

THURSTON

MAILING ADDRESS

3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200130**THURSTON COUNTY E&T CENTER**

3436 MARY ELDER ROAD NE
OLYMPIA, WA 98506

MAILING ADDRESS

3436 MARY ELDER ROAD NE
OLYMPIA, WA 98506

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

ANNA GAVISHORA
DIRECTOR-WAHIAKUM COUNTY H&HS

DALLAS CARROLL
CLINICAL SUPERVISOR

MAILING ADDRESS

42 ELOCHOMAN VALLEY RD
CATHLAMET, WA 98612

WAHAKIYAKUM

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

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 98362
(509) 524-2920
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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

WALLA WALLA

107400

SERENITY POINT COUNSELING SERVICES, LLC

919 SOUTH 2ND AVENUE
WALLA WALLA, WA 99362
(509) 529-6036
(509) 529-6037
SERENITYPOINTCOUNSELING.COM
WWW.SERENITYPOINTCOUNSELING.COM

PATRICK C. FLORES
ADMINISTRATOR

PATRICK C. FLORES, LICSW/CDP
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

919 S 2ND AVE
WALLA WALLA, WA 99362

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
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

CERTIFIED SERVICES

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

WHATCOM

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

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CRISIS OUTREACH
CRISIS PEER SUPPORT

WHATCOM

200178

COMPASS HEALTH - WHATCOM COUNTY MCLEOD

3645 EAST MCLEOD ROAD
BELLINGHAM, WA 98226
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
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

200179

COMPASS HEALTH - WHATCOM TRIAGE CENTER

2030 DIVISION STREET
BELLINGHAM, WA 98226
(425) 349-6700
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

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:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WHATCOM

200192 **ENDLESS POTENTIAL, LLC**
2110 IRON STREET
BELLINGHAM, WA 98225
(360) 930-6063
(360) 746-4092
CONTACTUS@ENDLESSPOSTENTIALLLC.COM
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 NORTHSORE DRIVE
BELLINGHAM, WA 98226
(360) 676-6000

JENNY BILLINGS
CEO

SUSAN CAVANAUGH
CLINICAL SUPERVISOR

MAILING ADDRESS
609 NORTHSORE 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

JENNY BILLINGS
CEO

TAWNA THOMAS
MH CLINICAL SUPERVISOR

MAILING ADDRESS
609 N SHORE 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

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

WHATCOM

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.NWRCA.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

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

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CHARLES WATRAS
SUD CLINICAL SUPERVISOR

WHATCOM

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

MAILING ADDRESS

1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225

CERTIFIED SERVICESMENTAL 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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESSUBSTANCE 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

WHATCOM

200073 **UNITY CARE NORTHWEST - BELLINGHAM BRANCH**
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

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 - FERNDALE 5603 BRANCH**
5603 3RD AVENUE
FERNDALE, WA 98248
(360) 752-7410
WWW.INTERFAITHCHC.ORG

CINDY PAFFUMI
BEHAVIORAL HEALTH DIRECTOR

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 - FERNDALE 5616 BRANCH**
5616 3RD AVENUE
FERNDALE, 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

RANDY POLIDAN
‎DIRECTOR OF BEHAVIORAL HEALTH

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

WHATCOM

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

MAILING ADDRESS

340 NE MAPLE ST
PULLMAN, WA 99163

WHITMAN

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

YAKIMA

050300

BARTH CLINIC - YAKIMA MAIN

201 EAST LINCOLN AVENUE
YAKIMA, WA 98901
(509) 457-5653
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

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

DARLENE DARNELL
INTERIM PRESIDENT & CEO

MAILING ADDRESS

5301 TIETON DR STE C
YAKIMA, WA 98908

CERTIFIED SERVICES

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

YAKIMA

200152

**CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
YAKIMA MAIN**
5301 TIETON DRIVE, SUITE C
YAKIMA, WA 98908
(509) 965-7100
WWW.CFCSYAKIMA.ORG

DARLENE DARNELL
INTERIM PRESIDENT & CEO

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

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

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

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

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 SERVICESSUBSTANCE 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 SOUTH
SUNNYSIDE, WA 98944
(509) 837-2089

MIKE NORTON
ADMINISTRATOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA

CERTIFIED SERVICESSUBSTANCE 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 SERVICESMENTAL 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

RON GENGLER
COO

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICESMENTAL 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

DAVID L. WILSON
EXECUTIVE DIRECTOR

ANTHONY ESPARZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

014101

MERIT RESOURCE SERVICES - TOPPENISH

321 WEST FIRST AVENUE
TOPPENISH, WA 98948
(509) 865-5233
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

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

083200

MERIT RESOURCE SERVICES - WAPATO

312 WEST 2ND STREET
WAPATO, WA 98951
(509) 877-7271
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
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

107800

MERIT RESOURCE SERVICES - YAKIMA

315 NORTH 2ND STREET
YAKIMA, WA 98901
(509) 469-9366
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

YAKIMA

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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

WALLY LEE
CEO

TOM DAVIDSON
EXECUTIVE CLINICAL DIRECTOR (SUD CS)

MAILING ADDRESS

PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICESSUBSTANCE 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

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

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

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**

102 SOUTH NACHES AVENUE
YAKIMA, WA 98901
(509) 248-1800
CDAC@TRIUMPHTX.ORG
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

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 INDIAN NATION COMPREHENSIVE****ALCOHOLISM PROGRAM**

20 GUNNYON ROAD
TOPPENISH, WA 98948
(509) 865-5121
Eric

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

YAKIMA

200286

YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH

510 WEST 1ST AVENUE
TOPPENISH, WA 98948

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS

918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

050001

**YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
12TH AVENUE**

307 SOUTH 12TH AVENUE, SUITE 4B
YAKIMA, WA 98902
(509) 575-8457

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

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

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| <u>AGENCY NAME</u> | <u>AGENCY NUMBER</u> | <u>COUNTY</u> |
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| 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 |
| ADVANCED CREATIVE TREATMENT, INC. | 200427 | KING |
| 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. - KING OUTPATIENT | 200459 | KING |
| 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 INDIAN COMMUNITY CENTER | 110400 | SPOKANE |
| ANNARA COUNSELING SERVICES | 200002 | KING |
| ANTIOCH COUNSELING AND TREATMENT SERVICES | 156400 | KING |
| APPLE CONSULTING | 200450 | KING |

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| 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 |
| BASICS NW, LLC - BELLEVUE | 200082 | KING |
| BASICS NW, LLC - LONGVIEW | 171400 | COWLITZ |
| BASICS NW, LLC - MAIN | 200009 | THURSTON |
| BASICS NW, LLC - RAYMOND | 173400 | PACIFIC |
| BASICS NW, LLC - VANCOUVER | 200530 | CLARK |
| 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 |

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| BELIEVE IN RECOVERY, LLC - YAKIMA | 177100 | YAKIMA |
| BLUE MOUNTAIN COUNSELING OF COLUMBIA COUNTY | 001400 | COLUMBIA |
| BOWEN RECOVERY CENTER | 125500 | SNOHOMISH |
| 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 |

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| CATHOLIC COMMUNITY SERVICES - SEATTLE | 034300 | KING |
| CATHOLIC COMMUNITY SERVICES - SHELTON | 200340 | MASON |
| CATHOLIC COMMUNITY SERVICES - TACOMA MAIN | 200019 | PIERCE |
| CATHOLIC COMMUNITY SERVICES - TACOMA YAKIMA AVENUE | 200144 | 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 - EVERETT | 153800 | SNOHOMISH |
| CENTER FOR HUMAN SERVICES - MAIN | 015900 | KING |
| CENTER FOR HUMAN SERVICES - MOUNTLAKE TERRACE | 162600 | SNOHOMISH |
| CENTER FOR HUMAN SERVICES - NORTHSHORE 23RD | 126000 | 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 |
| CHILDREN'S HOME SOCIETY OF WASHINGTON - WOODLAND | 200235 | COWLITZ |
| 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 |

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| CLEARVIEW COUNSELING | 121100 | SNOHOMISH |
| COASTAL TREATMENT SERVICES, INC. - EVERETT ADIS | 172400 | SNOHOMISH |
| COASTAL TREATMENT SERVICES, INC. - MAIN | 072100 | 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 - 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 |

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| 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 |
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| COMPREHENSIVE HEALTHCARE - GOLDENDALE | 115800 | KLICKITAT |
| COMPREHENSIVE HEALTHCARE - MAIN | 020500 | YAKIMA |
| COMPREHENSIVE HEALTHCARE - PASCO | 158000 | FRANKLIN |
| COMPREHENSIVE HEALTHCARE - PATHWAYS | 136300 | YAKIMA |

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| 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 - 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 |

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| DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT | 011600 | SPOKANE |
| DAYBREAK YOUTH SERVICES - VANCOUVER OUTPATIENT | 155400 | CLARK |
| DIDGWALIC WELLNESS CENTER | 200519 | SKAGIT |
| DIRKERS & ASSOCIATES BEHAVIORAL HEALTH | 161800 | SPOKANE |
| 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 - TRI-CITIES WORK RELEASE | 086300 | FRANKLIN |
| 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 |
| EASTSIDE CENTER FOR FAMILY | 109700 | KING |
| EASTSIDE RECOVERY GROUP | 037201 | KING |
| EASTSIDE SOCIAL SKILLS THERAPY, LLC | 200191 | KING |

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| 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 - 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 |

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| 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 - 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 - IOP SERVICES | 200201 | 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 - 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 |

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| 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 - MAIN | 200053 | PIERCE |
| HOPESPARKS - PUYALLUP | 200403 | 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 |

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| 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 |
| KINDERING - BOTHELL | 200303 | SNOHOMISH |
| KINDERING CENTER | 200226 | 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 |

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| 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 |
| 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 |
| 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 |

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| 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 |

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| 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 | 200527 | 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 |

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| 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, 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 |

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| QUILEUTE COUNSELING AND RECOVERY SERVICES | 043600 | CLALLAM |
| QUINULT INDIAN NATION | 004500 | GRAYS HARBOR |
| RAGING RIVER RECOVERY CENTER | 113500 | KING |
| RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON | 200321 | BENTON |
| RECOVERY MATTERS, LLC | 164200 | SNOHOMISH |
| 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 |

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| 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 | 150200 | 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 |

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| 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 |

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| 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 |

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| 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 - 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 | 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 |
| THURSTON COUNTY E&T CENTER | 200130 | THURSTON |
| TRANSITIONAL RESOURCES | 200131 | KING |
| TRI-CITIES COMMUNITY HEALTH - KENNEWICK | 155200 | BENTON |

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| 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 |

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| 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 |
| WAHIAKUM COUNTY HEALTH AND HUMAN SERVICES | 001502 | WAHIAKUM |
| WAPI COMMUNITY SERVICES | 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 INDIAN NATION COMPREHENSIVE ALCOHOLISM 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 |
| YFA CONNECTIONS | 020000 | SPOKANE |
| YMCA OF GREATER SEATTLE | 167200 | 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 |