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

October 2017

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.
ADAMS

000100

ADAMS COUNTY INTEGRATED HEALTH CARE
SERVICES - OTHELLO MAIN
425 EAST MAIN STREET, SUITE 600
OTHELLO, WA 99344
(509) 488-5611

VICKI GUSE
ADMINISTRATOR

GLORIA OCHOA
CLINICAL SUPERVISOR

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

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

200323

ADAMS COUNTY INTEGRATED HEALTH CARE
SERVICES - RITZVILLE
108 EAST MAIN STREET
RITZVILLE, WA 99169
(509) 659-4357
CCS@CO.ADAMS.WA.US
WWW.CO.ADAMS.WA.US/DEPARTMENTS/COUNSELING.ASP

VICKI GUSE
ADMINISTRATOR

PATRICE DIAL
MENTAL HEALTH CLINICAL SUPERVISOR

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

CERTIFIED SERVICES

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

ASOTIN

014600

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

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403
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
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

BENTON

060500 ACTION COUNSELING - KENNEWICK
4911 WEST CANAL DRIVE
KENNEWICK, WA 99336
(509) 735-7410

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

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

MAILING ADDRESS
5301 TIETON DR STE C
YAKIMA, WA 98908

DARLENE DARNELL
INTERIM PRESIDENT & CEO

ROBERT LACK
ADMINISTRATOR

ROBERT L. WILKINSON
ADMINISTRATIVE DIRECTOR
CERTIFIED SERVICES

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

BENTON

CHILD ENRICHMENT CENTER - MAIN
1950 KEENE STREET, BUILDING L
RICHLAND, WA 99352
(509) 420-3442
CHILDRENRICHMENTCENTER@GMAIL.COM
WWW.CHILDRENRICHMENTCENTER.ORG

MAILING ADDRESS
1430 OXFORD AVE
RICHLAND, WA 99352

CERTIFIED SERVICES

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

CHOICES AND CHANGES, INC.
1236 COLUMBIA PARK TRAIL
RICHLAND, WA 99352
(509) 735-7899

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

FIRST STEP COMMUNITY COUNSELING SERVICES, LLC
415 NORTH MORAIN STREET, SUITES A, B, C, & D
KENNEWICK, WA 99336
(509) 735-6900

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

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

MAILING ADDRESS
8514 W GAGE BLVD, STE G
KENNEWICK, WA 99336

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- INDIVIDUAL TREATMENT
- RECOVERY SUPPORT
- APPLIED BEHAVIOR ANALYSIS (ABA)
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

200236
LOURDES COUNSELING CENTER - CULLUM HOUSE
1175 CARONDELET DRIVE
RICHLAND, WA 99354

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, WA 99354

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

JOHN SERLE
CEO
DANA OTIS
MH CLINICAL SUPERVISOR

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

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

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

JOHN SERLE
CEO
DANA OATIS
MH CLINICAL SUPERVISOR

200428
LOURDES COUNSELING CENTER - KENNEWICK
500 NORTH MORAIN STREET, SUITE 1250
KENNEWICK, WA 99336
(509) 943-9104

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

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

JOHN SERLE
CEO
DANA OATIS
OUTPATIENT DIRECTOR

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

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

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

JOHN SERLE
CEO
DAVID LOWE
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

200188
LOURDES COUNSELING CENTER - TRIAGE
1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO
DANA OATIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
TRIAGE - INVOLUNTARY

200088
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK AVENUE
3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336
(509) 735-6446
WWW.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 SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200501
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK MORAIN
500 NORTH MORAIN STREET, SUITE 1200
KENNEWICK, WA 99336
(509) 735-6446
(800) 678-4876
WWW.LCSNW.ORG/CONTACT.HTML
WWW.LCSNW.ORG

SHARON GENTRY
DISTRICT DIRECTOR
ROCHELLE BRUNSDON
CLINICAL SUPERVISOR

MAILING ADDRESS
3321 W KENNEWICK AVE
KENNEWICK, WA 99336
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

MAILING ADDRESS
PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICES

CONTINUED ON NEXT PAGE...

200321
RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON
3104 WEST KENNEWICK AVENUE, SUITE C
KENNEWICK, WA 99336
(509) 619-0519
INFO@RECOVERYANDWELLNESS.ORG
WWW.RECOVERYANDWELLNESS.ORG

MAILING ADDRESS
3104 WEST KENNEWICK AVENUE, SUITE C
KENNEWICK, WA 99336

CERTIFIED SERVICES

CONTINUED ON NEXT PAGE...

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

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

CONTINUED ON NEXT PAGE...
<table>
<thead>
<tr>
<th>Certification Services</th>
<th>Mental Health Services:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>168900</strong> RELIANCE HEALTH SYSTEMS - SALUS HEALTH</td>
<td>FAMILY THERAPY</td>
</tr>
<tr>
<td>1445 SPAULDING PARK</td>
<td>GROUP THERAPY</td>
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<tr>
<td>RICHLAND, WA 99352</td>
<td>INDIVIDUAL TREATMENT</td>
</tr>
<tr>
<td>(509) 420-0423</td>
<td>PSYCHIATRIC MEDICATION</td>
</tr>
<tr>
<td><strong>Mailing Address</strong></td>
<td><strong>KISHORE SHM VARADA</strong></td>
</tr>
<tr>
<td>1445 SPAULDING PARK</td>
<td>CHAIRMAN/CEO</td>
</tr>
<tr>
<td>RICHLAND, WA 99352</td>
<td><strong>MINGHUA ZHU</strong></td>
</tr>
<tr>
<td><strong>SUD Clinical Supervisor</strong></td>
<td><strong>SU D CLINICAL SUPERVISOR</strong></td>
</tr>
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</table>

| **105200** SOMERSET COUNSELING CENTER, LLC | FAMILY THERAPY |
| 1305 MANSFIELD STREET, SUITE 6 | GROUP THERAPY |
| RICHLAND, WA 99352 | INDIVIDUAL TREATMENT |
| (509) 942-1624 | PSYCHIATRIC MEDICATION |
| **Mailing Address** | **JAIME CARSON** |
| 1305 MANSFIELD ST STE 6 | EXECUTIVE DIRECTOR |
| RICHLAND, WA 99352 | **GARY L. SOMDAHL** |
| **CLINICAL SUPERVISOR** | **CLINICAL SUPERVISOR** |

| **155200** TRI-CITIES COMMUNITY HEALTH - KENNEWICK | DELL ANDERSON |
| 3180 WEST CLEARWATER AVENUE, SUITE E | DIRECTOR |
| KENNEWICK, WA 99336 | **HECTOR BOBBY GUZMAN** |
| (509) 543-8500 | CLINICAL SUPERVISOR |
| **Mailing Address** | **MAILING ADDRESS** |
| PO BOX 1452 | **PO BOX 1452** |
| PASCO, WA 99301 | **PASCO, WA 99301** |

| **200253** TRI-CITIES COMMUNITY HEALTH - RICHLAND | DELL ANDERSON |
| 829 GOETHALS DRIVE | DIRECTOR |
| RICHLAND, WA 99352 | **MAILING ADDRESS** |
| 829 GOETHALS DRIVE | **MAILING ADDRESS** |
| RICHLAND, WA 99352 | **MAILING ADDRESS** |
BENTON

CERTIFIED SERVICES

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

CHELAN

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

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

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

200387
CHILD ENRICHMENT CENTER - CASHMERE
203 MISSION AVENUE, SUITE 118
CASHMERE, WA 98815
(509) 433-1995
CASHMEREOFFICE.CEC@GMAIL.COM
WWW.CHILDRENRICHTMENTCENTER.ORG

SARAH HAWS TAYLOR
CLINICAL DIRECTOR

ANNA PETERSON TROUTMAN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 417
CASHMERE, WA 98815

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
INDIVIDUAL TREATMENT
RECOVERY SUPPORT WRAPAROUND FACILITATION

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

KARIN POTTER
CLINICAL MANAGER

MAILING ADDRESS
1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801

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

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

CHRISTINE BELLAMY
OWNER/ADMINISTRATOR

ANDRA DARLINGTON
CLINICAL SUPERVISOR

MAILING ADDRESS
610 N MISSION ST # 200
WENATCHEE, WA 98801
<table>
<thead>
<tr>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>317 EAST JOHNSON AVENUE, CHELAN, WA 98816</td>
<td>(509) 662-6000</td>
<td><a href="http://WWW.CVCH.ORG">WWW.CVCH.ORG</a></td>
<td></td>
</tr>
<tr>
<td>140 EASY WAY, WENATCHEE, WA 98801</td>
<td>(509) 662-6000</td>
<td><a href="http://WWW.CVCH.ORG">WWW.CVCH.ORG</a></td>
<td></td>
</tr>
<tr>
<td>600 ORONDO AVENUE, SUITE 1, WENATCHEE, WA 98801</td>
<td>(509) 662-4296</td>
<td><a href="mailto:HEALTHASSISTANTS@CVCH.ORG">HEALTHASSISTANTS@CVCH.ORG</a></td>
<td></td>
</tr>
<tr>
<td>100 &amp; 101 SOUTH CLEVELAND AVENUE, WENATCHEE, WA 98801</td>
<td>(509) 888-0773</td>
<td><a href="mailto:KARINA@CRHCHRISTOPHERHOUSE.COM">KARINA@CRHCHRISTOPHERHOUSE.COM</a></td>
<td><a href="http://WWW.CRHCHRISTOPHERHOUSE.COM">WWW.CRHCHRISTOPHERHOUSE.COM</a></td>
</tr>
</tbody>
</table>

**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

**MAILING ADDRESS**

600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

**TIMOTHY HOEKSTRA**
BEHAVIORAL HEALTH DIRECTOR

**MARY MEGAN KAPPLER**
THERAPIST II

**KEVIN COLWELL**
ADMINISTRATOR

**ALLISON NYSTROM**
CLINICAL SUPERVISOR
CHELAN

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

MAILING ADDRESS
238 N CHELAN AVE
WENATCHEE, WA 98801

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

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

MELISSA PAYNE
ADMINISTRATOR
WAYNE HERSEL
CLINICAL SUPERVISOR

MAILING ADDRESS
326 N MILLER ST
WENATCHEE, WA 98801

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

000600 THE CENTER FOR ALCOHOL AND DRUG TREATMENT
327 OKANOGAN AVENUE
WENATCHEE, WA 98801
(509) 662-9673

LORETTA STOVER
EXECUTIVE DIRECTOR
CHRISTOPHER TIPPETT
CLINICAL DIRECTOR

MAILING ADDRESS
327 OKANOGAN AVE
WENATCHEE, WA 98801

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

004800 THE SANCTUARY AT THE LAKE
503 EAST HIGHLAND AVENUE
CHELAN, WA 98816
(509) 682-8524
(509) 682-6108

JANE JEDWABNY
PROGRAM DIRECTOR
KERRY HOUSDEN
CLINICAL SUPERVISOR
CHELAN

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

CLALLAM

169400

DOCS - CLALLAM BAY CORRECTIONS CENTER
1830 EAGLE CREST WAY
CLALLAM BAY, WA 98326
(360) 725-8602

DAWN WILLIAMS
ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123
OLYMPIA, WA 98504-4112

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

076700

DOCS - 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 SERVICES
SUBSTANCE USE DISORDER SERVICES:
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

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

022800

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

GLENDA BUTLER
INTERIM INTEGRATIVE HEALTH DIRECTOR

JESSIE PAQUE
CLINICAL SUPERVISOR

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

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

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

**Mailing Address**
PO BOX 3175
SEQUIM, WA 98382

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

**Administrator:** KRISTINA BULLINGTON
**Clinical Director:** ANDREW DALY

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

**Mailing Address**
118 E 8TH ST
PORT ANGELES, WA 98362

**Certified Services**
**MENTAL HEALTH SERVICES:**
- CASE MANAGEMENT
- CRISIS OUTREACH
- CRISIS TELEPHONE SUPPORT
- DAY SUPPORT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT

**CEO:** WENDY SISK

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

**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

**CEO:** WENDY SISK
CLALLAM

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
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

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
GLENDA 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

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
CLALLAM

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

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

MAILING ADDRESS
530 BOGACHIEL WY
FORKS, WA 98331

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
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
VANCOUVER, WA 98684
(360) 314-6507

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
**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  

**MAILING ADDRESS**  
2600 F STREET  
VANCOUVER, WA 98663  

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

**200146**  
**CATHOLIC COMMUNITY SERVICES - VANCOUVER**  
9300 NORTHEAST OAK VIEW DRIVE, SUITE B  
VANCOUVER, WA 98662  
(360) 567-2211  
INFO@CCSWW.ORG  
WWW.CCSWW.ORG  

**MAILING ADDRESS**  
5410 N 44TH ST  
TACOMA, WA 98407  

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

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

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

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

**116400**  
**CHANGEPOINT, INC.**  
10621 NORTHEAST COXLEY DRIVE, SUITE 106  
VANCOUVER, WA 98662  
(360) 604-0068  
(877) 253-5954  

**MAILING ADDRESS**  
10621 NE COXLEY DR., SUITE 106  
VANCOUVER, WA 98662  

**LINDA J. BRADSHAW**  
PROGRAM ADMINISTRATOR  

**JAMES SHERWOOD**  
CLINICAL DIRECTOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

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

MAILING ADDRESS
13500 SE 7TH ST
VANCOUVER, WA 98683

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

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

MAILING ADDRESS
13500 SE 7TH STREET
VANCOUVER, WA 98686

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

200071 CHILDREN'S HOME SOCIETY OF WASHINGTON - BATTLE GROUND
701 EAST MAIN STREET
BATTLE GROUND, WA 98604
(360) 695-1325
WWW.CHILDRENSHOMESOCIETY.ORG

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

MAILING ADDRESS
PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
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

MAILING ADDRESS
PO BOX 605
VANCOUVER, WA 98666

LIBBY HEIN
CHIEF PROGRAM OFFICER

---

200066
CHILDREN'S HOME SOCIETY OF WASHINGTON - WASHOUGAL
1702 C STREET
WASHOUGAL, WA 98671
(360) 695-1325
WWW.CHILDRENSHOMESOCIETY.ORG

MAILING ADDRESS
PO BOX 605
VANCOUVER, WA 98666

LIBBY HEIN
CHIEF PROGRAM OFFICER

---

200064
CLARK COUNTY DEPARTMENT OF COMMUNITY SERVICES
1601 EAST 4TH PLAIN BOULEVARD BUILDING 17, SUITE A-152
VANCOUVER, 98661

MARK MCCAULY
COUNTY ADMINISTRATOR

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
<table>
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<tr>
<th>Location</th>
<th>Address</th>
<th>Certified Services</th>
<th>Mailing Address</th>
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<tbody>
<tr>
<td><strong>COLUMBIA RIVER MENTAL HEALTH SERVICES - BATTLE GROUND</strong></td>
<td>20 NORTHWEST 20TH AVENUE&lt;br&gt;BATTLE GROUND, WA 98604&lt;br&gt;(360) 597-9731</td>
<td>SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;MENTAL HEALTH SERVICES:&lt;br&gt;CASE MANAGEMENT&lt;br&gt;FAMILY THERAPY&lt;br&gt;GROUP THERAPY&lt;br&gt;INDIVIDUAL TREATMENT&lt;br.LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY PEER SUPPORT</td>
<td>PO BOX 1337&lt;br&gt;VANCOUVER, WA 98666-1337</td>
<td>CRAIG PRIDEMORE&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;KIM NUESSE&lt;br&gt;CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>COLUMBIA RIVER MENTAL HEALTH SERVICES - ELAHAN PLACE</strong></td>
<td>7415 NORTHEAST 94TH AVENUE&lt;br&gt;VANCOUVER, WA 98662&lt;br&gt;(360) 253-6019&lt;br&gt;WWW.CRMHS.ORG</td>
<td>MENTAL HEALTH SERVICES:&lt;br&gt;CASE MANAGEMENT&lt;br&gt;GROUPTHHERAPY&lt;br&gt;INDIVIDUAL TREATMENT&lt;br.LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY MEDICATION SUPPORT&lt;br&gt;RECOVERY PEER SUPPORT&lt;br&gt;RESIDENTIAL TREATMENT FACILITY</td>
<td>PO BOX 1337&lt;br&gt;VANCOUVER, WA 98666-1337</td>
<td>CRAIG PRIDEMORE&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;DOUG CHAPMAN&lt;br&gt;CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>COLUMBIA RIVER MENTAL HEALTH SERVICES - ESTHER STREET</strong></td>
<td>1012 ESTHER STREET&lt;br&gt;VANCOUVER, WA 98660&lt;br&gt;(360) 993-3000&lt;br&gt;WWW.CRMHS.ORG</td>
<td>MENTAL HEALTH SERVICES:&lt;br&gt;CASE MANAGEMENT&lt;br&gt;INDIVIDUAL TREATMENT&lt;br.LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;RECOVERY EMPLOYMENT SUPPORT</td>
<td>PO BOX 1337&lt;br&gt;VANCOUVER, WA 98666-1337</td>
<td>CRAIG PRIDEMORE&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;DOUG CHAPMAN&lt;br&gt;CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>COLUMBIA RIVER MENTAL HEALTH SERVICES - HAZEL DELL</strong></td>
<td>9105A NORTHEAST HIGHWAY 99, SUITE 201&lt;br&gt;VANCOUVER, WA 98665&lt;br&gt;(360) 579-9721&lt;br&gt;WWW.CRMHS.ORG</td>
<td>MENTAL HEALTH SERVICES:&lt;br&gt;CASE MANAGEMENT&lt;br&gt;INDIVIDUAL TREATMENT&lt;br.LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;RECOVERY EMPLOYMENT SUPPORT</td>
<td>PO BOX 1337&lt;br&gt;VANCOUVER, WA 98666-1337</td>
<td>CRAIG PRIDEMORE&lt;br&gt;CEO&lt;br&gt;JEANNE HEHLEN&lt;br&gt;THERAPIST III - LEAD</td>
</tr>
</tbody>
</table>
CERTIFIED SERVICES

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

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES

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

068600

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

PAMELA PAPROCKI-SIMS
ADMINISTRATOR

TABITHA ZDUNICH
CDP

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

CERTIFIED SERVICES

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

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 SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
<table>
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<tr>
<th>Zip Code</th>
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<th>Address Details</th>
<th>Contact Person</th>
<th>Position</th>
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<tr>
<td>200139</td>
<td>COMMUNITY SERVICES NORTHWEST - BATTLE GROUND</td>
<td>11117 NORTHEAST 189TH STREET, BATTLE GROUND, WA 98668</td>
<td>JOHN &quot;BUNK&quot; MOREN</td>
<td>EXECUTIVE DIRECTOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(360) 397-8484</td>
<td>MIKE MILLER</td>
<td>MH PROGRAM MANAGER</td>
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<td><a href="http://www.communityservicesnw.org">www.communityservicesnw.org</a></td>
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<td>MAILING ADDRESS</td>
<td>PO BOX 1845</td>
<td>VANCOUVER, WA 98668</td>
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<td>056001</td>
<td>COMMUNITY SERVICES NORTHWEST - MAIN</td>
<td>1601 EAST FOURTH PLAIN BLVD., BLDG. 17, STE. B222, VANCOUVER, WA 98661</td>
<td>JOHN &quot;BUNK&quot; MOREN</td>
<td>EXECUTIVE DIRECTOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(360) 397-8484</td>
<td>JENNIFER HARDER</td>
<td>CLINICAL SUPERVISOR</td>
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<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>PO BOX 1845</td>
<td>VANCOUVER, WA 98668-1845</td>
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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

CLARK 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

MAILING ADDRESS
7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665

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

SYBIL IVerson
SUBSTANCE USE PROGRAM ADMINISTRATOR
CHELCIE KOLASKI
CLINICAL SUPERVISOR

200451
DAYBREAK YOUTH SERVICES - BRUSH PRAIRIE
11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606
(360) 635-4120
WWW.DAYBREAKYOUTHSERVICES.ORG

MAILING ADDRESS
11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- YOUTH RESIDENTIAL

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

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR
CHRISTINE GJESVOLD
MH CLINICAL SUPERVISOR

155400
DAYBREAK YOUTH SERVICES - VANCOUVER OUTPATIENT
11818 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 307
VANCOUVER, WA 98684
(360) 750-9635

MAILING ADDRESS
960 E 3RD AVENUE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

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

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR
CHRISTINA GJESVOLD
SUD CLINICAL SUPERVISOR
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<td>DISCOVERY BEHAVIOR SOLUTIONS, LLC</td>
<td>CONFIDENTIAL LOCATION</td>
<td>CLARK</td>
<td>WA</td>
<td>(503) 462-5888</td>
<td><a href="http://WWW.DISCOVERYBEHAVIORSOLUTIONS.COM">WWW.DISCOVERYBEHAVIORSOLUTIONS.COM</a></td>
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<tr>
<td>07750</td>
<td>DOC - LARCH CORRECTIONS CENTER</td>
<td>15314 NORTHEAST DOLE VALLEY ROAD</td>
<td>YACOLT</td>
<td>WA</td>
<td>(360) 725-8628</td>
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<td>20043</td>
<td>FAMILY SOLUTIONS - 114TH AVENUE BRANCH</td>
<td>2612 NORTHEAST 114TH AVENUE, SUITE 6</td>
<td>VANCOUVER</td>
<td>WA</td>
<td>(360) 695-1014</td>
<td><a href="mailto:LBROWN@FAMILY-SOLUTIONS.NET">LBROWN@FAMILY-SOLUTIONS.NET</a></td>
<td><a href="http://WWW.FAMILY-SOLUTIONS.NET">WWW.FAMILY-SOLUTIONS.NET</a></td>
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<tr>
<td>20006</td>
<td>FAMILY SOLUTIONS - MAIN AGENCY</td>
<td>1014 MAIN STREET</td>
<td>VANCOUVER</td>
<td>WA</td>
<td>(360) 695-1014</td>
<td><a href="mailto:LBROWN@FAMILY-SOLUTIONS.NET">LBROWN@FAMILY-SOLUTIONS.NET</a></td>
<td><a href="http://WWW.FAMILY-SOLUTIONS.NET">WWW.FAMILY-SOLUTIONS.NET</a></td>
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**MAILING ADDRESS**

**CERTIFIED SERVICES**

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

**DOC - LARCH CORRECTIONS CENTER**

- DAWN L. WILLIAMS
- PROGRAM ADMINISTRATOR
- BRYAN SMITH
- CLINICAL SUPERVISOR

- LEVEL II INTENSIVE OUTPATIENT
- LONG-TERM RESIDENTIAL

**FAMILY SOLUTIONS - 114TH AVENUE BRANCH**

- LISA CARPENTER
- EXECUTIVE DIRECTOR
- TRACY ARNEY
- CLINICAL DIRECTOR

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

**FAMILY SOLUTIONS - MAIN AGENCY**

- LISA CARPENTER
- EXECUTIVE DIRECTOR
- TRACY ARNEY
- CLINICAL DIRECTOR

- MENTAL HEALTH SERVICES:
  - CASE MANAGEMENT
  - FAMILY THERAPY
  - GROUP THERAPY
  - INDIVIDUAL TREATMENT
  - PSYCHIATRIC MEDICATION
  - RECOVERY PEER SUPPORT
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<td>LIFELINE CONNECTIONS - VANCOUVER MAIN</td>
<td>1601 EAST FOURTH PLAIN BOULEVARD, BUILDING 17 VANCOUVER, WA 98661</td>
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CERTIFIED SERVICES
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DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

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
RESIDENTIAL TREATMENT FACILITY

200086 LUTHERAN COMMUNITY SERVICES NORTHWEST - VANCOUVER
3600 MAIN STREET
VANCOUVER, 98663

MAILING ADDRESS
3600 MAIN STREET
VANCOUVER, 98663

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS TELEPHONE SUPPORT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200319 NAMI SOUTHWEST WASHINGTON - MAIN
5411 EAST MILL PLAIN BOULEVARD, SUITE 4
VANCOUVER, WA 98661
(360) 695-2823
MELINDA.M@NAMISWWA.ORG
WWW.NAMISWWA.ORG

PEGGY MCCARTHY
EXECUTIVE DIRECTOR

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

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

20094 PEACEHEALTH SOUTHWEST MEDICAL CENTER
3400 MAIN STREET
VANCOUVER, WA 98663

MAILING ADDRESS
3400 MAIN STREET
VANCOUVER, WA 98663

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
PSYCHIATRIC MEDICATION
SEA MAR BEHAVIORAL HEALTH - VANCOUVER 109TH COURT
5501 NORTHEAST 109TH COURT, SUITE A-1
VANCOUVER, WA 98662
(360) 566-4432

CLAUDIA D'ALLEGGRI
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

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

CLAUDIA D'ALLEGGRI
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

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

CLAUDIA D'ALLEGGRI
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

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

CLAUDIA D'ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JENNIFER NAVARRO
MH CLINICAL SUPERVISOR
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<td><strong>Mailing Address</strong></td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
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<td><strong>Certified Services</strong></td>
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<td><strong>Substance Use Disorder Services</strong></td>
<td>DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
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<td><strong>Mental Health Services</strong></td>
<td>Brief Intervention Treatment, Case Management, Family Therapy, Group Therapy, Individual Treatment, Psychiatric Medication</td>
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<tr>
<td><strong>Sea Mar Behavioral Health - Vancouver</strong></td>
<td>14508 NORTHEAST 20TH AVENUE, VANCOUVER, WA 98686</td>
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<td><strong>Mental Health Services</strong></td>
<td>BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
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<td><strong>Serenity Lane - Vancouver</strong></td>
<td>4305 NORTHEAST THURSTON WAY, SUITE E, VANCOUVER, WA 98662</td>
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<tr>
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<td>PO BOX 8549, COBURG, OR 97408</td>
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<td><strong>Substance Use Disorder Services</strong></td>
<td>ALCOHOL AND DRUG INFORMATION SCHOOL, DUI ASSESSMENT, LEVEL I OUTPATIENT, LEVEL II INTENSIVE OUTPATIENT</td>
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<td><strong>Mental Health Services</strong></td>
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<td><strong>Starting Point, Inc.</strong></td>
<td>801 GRAND BOULEVARD, VANCOUVER, WA 98661</td>
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<tr>
<td><strong>Mailing Address</strong></td>
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<td>ALCOHOL AND DRUG INFORMATION SCHOOL, DUI ASSESSMENT, LEVEL I OUTPATIENT, LEVEL II INTENSIVE OUTPATIENT</td>
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200115  TCM TEAM  
1601 EAST FOURTH PLAIN BOULEVARD  
VANCOUVER, WA 98661  
(360) 397-8474  
WWW.TELECARECORP.COM  

LISA CLAYTON  
ADMINISTRATOR  
CANDICE WEBB  
TEAM LEAD  

MAILING ADDRESS  
PO BOX 2489  
VANCOUVER, WA 98661  

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

200124  TELECARE - CLARK COUNTY E&T  
1601 EAST 4TH PLAIN BOULEVARD  
VANCOUVER, WA 98861  

LISA CLAYTON  
ADMINISTRATOR  

MAILING ADDRESS  
PO BOX 2489  
VANCOUVER, WA 98668  

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

177700  THE RECOVERY VILLAGE RIDGEFIELD  
888 SOUTH HILLHURST ROAD  
RIDGEFIELD, WA 98642  
(360) 887-6060  
WWW.RIDGEFIELDRECOVERY.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  

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

DIANNA MOTE  
CLINIC DIRECTOR  
SHELLY MORGAN  
CLINICAL SUPERVISOR  

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

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

054100 WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.
7507 NORTHEAST 51ST STREET
VANCOUVER, WA 98662
(360) 906-1190
(503) 939-0350
DARYL E. QUICK
OWNER/ADMINISTRATOR
ROBERTA MORGAN
CD PROGRAM DIRECTOR

MAILING ADDRESS
7507 NE 51ST ST
VANCOUVER, WA 98662

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

COLUMBIA

001400 BLUE MOUNTAIN COUNSELING OF COLUMBIA COUNTY
221 EAST WASHINGTON STREET
DAYTON, WA 99328
(509) 382-1164
(866) 382-1164
DIMITA WARREN
ADMINISTRATOR
PATRICK FLORES
SUD CLINICAL SUPERVISOR (INTERIM)

MAILING ADDRESS
221 E WASHINGTON ST
DAYTON, WA 99328

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
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

COWLITZ

053500 A FIRST PLACE - MAIN
309 OAK STREET
KELSO, WA 98626
(360) 577-7442
RPROBASCO@AFIRSTPLACE.COM
WWW.AFIRSTPLACE.COM
CATHY LUDAHL
ADMINISTRATOR/CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 1077
KELSO, WA 98626

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 EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

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

119300
AWAKENINGS, INC.
404 WEST MAIN STREET
KELSO, WA 98632
(360) 423-2806

MAILING ADDRESS
404 WEST MAIN STREET
KELSO, WA 98632

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

MAILING ADDRESS
1339 COMMERCE AVENUE, SUITE 204
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL 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.CHILDRENSHOMESOCIETY.ORG

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

178200
CHOICES
1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632
(360) 270-9874
Laurir124@yahoo.com

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY
DUI ASSESSMENT

200047 COLUMBIA WELLNESS - KELSO ACADEMY
200 ACADEMY STREET
KELSO, WA 98626

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

200047 COLUMBIA WELLNESS - KELSO ACADEMY
200 ACADEMY STREET
KELSO, WA 98626

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

200504 COLUMBIA WELLNESS - KELSO PACIFIC
214 NORTH PACIFIC AVENUE NORTH
KELSO, WA 98626
(360) 423-0203
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

200042 COLUMBIA WELLNESS - LONGVIEW BRANCH
720 14TH AVENUE, SUITE 200
LONGVIEW, WA 98632
(360) 423-0203
WWW.COLUMBIAWELL.ORG

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR
COWLITZ

200043  COLUMBIA WELLNESS - LONGVIEW MAIN
921 14TH AVENUE
LONGVIEW, WA 98632
(360) 423-0203
WWW.COLUMBIAWELL.ORG

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

200046  COLUMBIA WELLNESS - WOODLAND
1251 LEWIS RIVER ROAD, SUITE A
WOODLAND, WA 98674
(360) 423-0203
WWW.COLUMBIAWELL.ORG

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
RESIDENTIAL TREATMENT FACILITY

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

200062  COMMUNITY HOUSE ON BROADWAY
748 14TH AVENUE
LONGVIEW, WA 98632
(360) 200-5419
CAMERONC@CHOBLV.ORG
WWW.COREHEALTHSERVICES.ORG

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

FRANK MORRISON
EXECUTIVE DIRECTOR

FAY SLUSHER
MH CLINICAL SUPERVISOR
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<td>015101</td>
<td>Cowlitz Family Health Center - Broadway Campus</td>
<td>600 Broadway Street, Longview, WA 98632</td>
<td>(360) 425-9600</td>
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<tr>
<td>102200</td>
<td>Cowlitz Family Health Center - Grade Street Campus</td>
<td>621 Grade Street, Longview, WA 98632</td>
<td>(360) 414-5508</td>
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<tr>
<td>015100</td>
<td>Cowlitz Family Health Center - Toutle River Campus</td>
<td>2232 South Silver Lake Road, Castle Rock, WA 98611</td>
<td>(360) 274-3262</td>
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<td>Rama Mitchell</td>
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<td>Operations/Campus Manager</td>
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<tr>
<td>120600</td>
<td>Cowlitz Tribal Treatment Program - Main</td>
<td>1044 11th Avenue, Longview, WA 98632</td>
<td>(360) 575-3316</td>
</tr>
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<td></td>
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<td>Sybil Iverson</td>
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<td>Clinical Supervisor</td>
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<td>Level II Intensive Outpatient</td>
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COWLITZ

078000

DOC - LONGVIEW WORK RELEASE
1821 FIRST AVENUE
LONGVIEW, WA 98632
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

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

200511

GREAT RIVERS BEHAVIORAL HEALTH AGENCY -
LONGVIEW
1338 COMMERCE AVENUE, SUITE 303
LONGVIEW, WA 98632
(360) 281-6930
INFO@GREATRIVERSBHO.ORG
WWW.GREATRIVERSBHO.ORG/BHA

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
CLINICAL SUPERVISOR

MAILING ADDRESS
1338 COMMERCE AVENUE, SUITE 303
LONGVIEW, WA 98632

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

200371

LOVE OVERWHELMING
304 COWLITZ WAY
KELSO, WA 98626
(360) 749-8056
ADMIN@LOVEOVERWHELMING.ORG
WWW.LOVEOVERWHELMING.ORG

CHUCK HENDRICKSON
EXECUTIVE DIRECTOR

LAURA PATTERSON
CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 42
KELSO, WA 98626
<table>
<thead>
<tr>
<th>Area</th>
<th>Service Provider</th>
<th>Address</th>
<th>Contact Person(s)</th>
</tr>
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<tbody>
<tr>
<td>Cowlitz</td>
<td>Certified Services</td>
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<td>MENTAL HEALTH SERVICES:</td>
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<td>INDIVIDUAL TREATMENT</td>
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<tr>
<td>200095</td>
<td>PeaceHealth St. John Medical Center E&amp;T</td>
<td>1615 Delaware Street, Longview, WA 98632</td>
<td>Kyle Rahn</td>
</tr>
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<td></td>
<td>Mailing Address</td>
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<td></td>
<td>600 Broadway Street, Room #226, Longview, WA 98632</td>
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<td>200374</td>
<td>Sea Mar Behavioral Health - Kelso</td>
<td>17010 Allen Street, Kelso, WA 98626</td>
<td>Claudia D'Allegri</td>
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<td>Mailing Address</td>
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<td>8915 14th Ave S, Seattle, WA 98108</td>
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<tr>
<td>200277</td>
<td>Strengthening Foundations LLC</td>
<td>1338 Commerce Avenue #208, Longview, WA 98632</td>
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<td>1104 D 15th Avenue #186, Longview, WA 98632</td>
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<tr>
<td>Douglas</td>
<td>Children's Home Society of Washington - East</td>
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<td>Mailing Address</td>
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<tr>
<td></td>
<td>220 Eastmont Avenue, Suite B, East Wenatchee, WA 98802</td>
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<td>509-663-0034</td>
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<td><a href="mailto:JANICA.LOCKHART@CHS-WA.ORG">JANICA.LOCKHART@CHS-WA.ORG</a></td>
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<td><a href="http://WWW.CHSENTERS.ORG">WWW.CHSENTERS.ORG</a></td>
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<tr>
<td></td>
<td>Libby Hein</td>
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<td>Chief Program Officer</td>
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<td></td>
<td>Karin Potter</td>
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<td>Child &amp; Family Counseling Program Manager</td>
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<td>200314</td>
<td>Children's Home Society of Washington - East</td>
<td>1014 Walla Walla Ave, Wenatchee, WA 98801</td>
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DOUGLAS

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

200160

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

TIMOTHY HOEKSTRA
BEHAVIORAL HEALTH DIRECTOR

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
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - REPUBLIC

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

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

MAILING ADDRESS
PO BOX 1120
REPUBLIC, WA 99166

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

ASSESSMENT AND TREATMENT ASSOCIATES - FRANKLIN COUNTY

STEVE UHRICH
EXECUTIVE DIRECTOR

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

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

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

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

COMPREHENSIVE HEALTHCARE - PASCO

MIKE NORTON
ADMINISTRATOR
ANDREA RAY
SUD CLINICAL SUPERVISOR

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

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
**FRANKLIN**

**075800**

**DOC - COYOTE RIDGE CORRECTIONS CENTER**

1301 N. 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

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

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 SERVICES**

SUBSTANCE 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

JOHN SERLE

CEO

DAVID LOWE

CLINICAL SUPERVISOR

**MAILING ADDRESS**

1175 CARONDELET DR

RICHLAND, WA 99354

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

---

**110300**

**TRI-CITIES COMMUNITY HEALTH - PASCO**

715 WEST COURT STREET

PASCO, WA 99301

(509) 545-6506

(509) 547-2204

DELL ANDERSON

DIRECTOR

HECTOR BOBBY GUZMAN

CLINICAL SUPERVISOR

**MAILING ADDRESS**

PO BOX 1452

PASCO, WA 99301

**CERTIFIED SERVICES**

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL

DUI ASSESSMENT

LEVEL I OUTPATIENT

LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT

GROUP THERAPY

INDIVIDUAL TREATMENT

LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT

PSYCHIATRIC MEDICATION
GARFIELD

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

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403

CICILY ZORNES
EXECUTIVE DIRECTOR
DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

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

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 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

MAILING ADDRESS
618 SOUTH ALDER STREET
MOSES LAKE, WA 98837

YVONNE REIGSTAD
EXECUTIVE DIRECTOR/ADMINISTRATOR
JESSIE HORWATH
DIRECTOR OF CLINICAL SERVICES

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

200212 GRANT MENTAL HEALTHCARE - GRAND COULEE
322 FORTUYN ROAD
GRAND COULEE, WA 99133
(509) 765-9239

MAILING ADDRESS
840 EAST PLUM STREET
MOSES LAKE, WA 98837

GAIL GOODWIN
ADMINISTRATOR
JUAN PADILLA
MH CLINICAL SUPERVISOR

CERTIFIED SERVICES
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 EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200213 GRANT MENTAL HEALTHCARE - MATTAWA
210 GOVERNMENT ROAD
MATTAWA, WA 99349
(509) 765-9239

GAIL GOODWIN
ADMINISTRATOR
JUAN PADILLA
MH CLINICAL SUPERVISOR
GRANT

MAILING ADDRESS
840 EAST PLUM STREET
MOSES LAKE, WA 98837

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

GRANT MENTAL HEALTHCARE - MOSES LAKE MAIN
840 EAST PLUM STREET
MOSES LAKE, WA 98837
(509) 765-9239
(509) 765-5402

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

HEATHER WEST
SUD CLINICAL SUPERVISOR

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

GRANT MENTAL HEALTHCARE - QUINCY
203 CENTRAL AVENUE SOUTH
QUINCY, WA 98848
(509) 765-9239

GAIL GOODWIN
ADMINISTRATOR

JUAN PADILLA
MH CLINICAL SUPERVISOR

MAILING ADDRESS
840 EAST PLUM STREET
MOSES LAKE, WA 98837

CERTIFIED SERVICES
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 EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
GRANT

200215  GRANT MENTAL HEALTHCARE - ROYAL CITY
130 CAMELIA STREET
ROYAL CITY, WA 99357
(509) 765-9239

GAIL GOODWIN
ADMINISTRATOR

JUAN PADILLA
MH CLINICAL SUPERVISOR

MAILING ADDRESS
840 EAST PLUM STREET
ROYAL CITY, WA 98837

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
RECOVERY EMPLOYMENT 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

ANDREW TATUM
ADMINISTRATOR

ROBERT "JIM" LAGERQUIST
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

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

GRAYS HARBOR

088400  A FIRST PLACE - ABERDEEN
2700 SIMPSON AVENUE, SUITE 101
ABERDEEN, WA 98520
(360) 577-7442
RPROBASCO@AFIRSTPLACE.COM
WWW.AFIRSTPLACE.COM

CATHY LUDAHL
CEO/CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 1077
KELSO, WA 98626

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 EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200496  ACTION COUNSELING - ABERDEEN
914 EAST WISHKAH STREET #B
ABERDEEN, WA 98520
(360) 532-0205
(360) 532-0316
ACTION914@GMAIL.COM
WWW.ALTERNATIVECOUNSELING.ORG

BETTY KASSUHN
ADMINISTRATOR
**200033**

**BEHAVIORAL HEALTH RESOURCES - ELMA**

573 EAST MAIN STREET  
ELMA, WA 98541  
(360) 704-7170  
WWW.BHR.ORG

**LAURIE TEBO**  
CEO

**MAILING ADDRESS**

3857 MARTIN WAY E  
OLYMPIA, WA 98506

**CERTIFIED SERVICES**

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

**200032**

**BEHAVIORAL HEALTH RESOURCES - HOQUIAM**

205 8TH STREET  
HOQUIAM, WA 98550  
(360) 704-7170  
WWW.BHR.ORG

**LAURIE TEBO**  
CEO

**MAILING ADDRESS**

3857 MARTIN WAY E  
OLYMPIA, WA 98506

**CERTIFIED SERVICES**

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

**200396**

**CATHOLIC COMMUNITY SERVICES - ABERDEEN STATE STREET**

403 WEST STATE STREET, SUITE 201 &AMP; 206  
ABERDEEN, WA 98520  
(360) 612-3839  
JENNYC@CCSWW.ORG  
WWW.CCSWW.ORG

**DENNY HUNTHAUSEN**  
DIRECTOR

**GARY SANDWICK**  
CLINICAL SUPERVISOR

**MAILING ADDRESS**

5410 N 44TH ST  
TACOMA, WA 98407

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY PEER SUPPORT
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<tr>
<td>200350</td>
<td>CATHOLIC COMMUNITY SERVICES - ABERDEEN</td>
<td>MARY STONE SMITH</td>
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<tr>
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<td>WISHKAH STREET</td>
<td>VICE PRESIDENT</td>
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<td></td>
<td>224 EAST WISHKAH STREET</td>
<td>HEIDI WILLIAMS</td>
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<tr>
<td></td>
<td>ABERDEEN, WA 98520</td>
<td>SITE DIRECTOR</td>
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<tr>
<td></td>
<td>(888) 322-7156</td>
<td><a href="http://WWW.CCSWW.ORG/FAMILY-PRESERVATION">WWW.CCSWW.ORG/FAMILY-PRESERVATION</a></td>
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<td></td>
<td>Mailing Address</td>
<td>5410 N 44TH ST</td>
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<td>200393</td>
<td>COLUMBIA WELLNESS - HOQUIAM</td>
<td>DAVID MCCLAY</td>
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<tr>
<td></td>
<td>615 8TH STREET</td>
<td>CEO</td>
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<tr>
<td></td>
<td>HOQUIAM, WA 98550</td>
<td>DEBRA PERKO</td>
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<tr>
<td></td>
<td>(800) 654-3837</td>
<td>MH CLINICAL SUPERVISOR</td>
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<tr>
<td></td>
<td>(360) 532-8629</td>
<td><a href="http://WWW.COLUMBIAWELL.ORG">WWW.COLUMBIAWELL.ORG</a></td>
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<td></td>
<td>Mailing Address</td>
<td>921 14TH AVE</td>
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<td>LONGVIEW, WA 98632</td>
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### Certified Services

**Substance Use Disorder Services:**
- Level I Outpatient
- Opiate Substitution Treatment

#### Great Rivers Behavioral Health Agency - Hoquiam

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<th>Phone Numbers</th>
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<tr>
<td>3033-B Ingram Street</td>
<td>(360) 261-6930 (855) 303-4834</td>
<td><a href="mailto:info@greatriversbho.org">info@greatriversbho.org</a></td>
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<td>Hoquiam, WA 98550</td>
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**Mailing Address**

3033-B Ingram Street
Hoquiam, WA 98550

#### Harborcrest Behavioral Health

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<tr>
<td>1006 North H Street</td>
<td>(360) 533-8500 (360) 537-6454</td>
<td><a href="mailto:william.bonnes@harborcrest.org">william.bonnes@harborcrest.org</a></td>
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<tr>
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**Mailing Address**

1006 North H St
Aberdeen, WA 98520

#### Lifeline Connections - Aberdeen

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<td>311 South I Street</td>
<td>(360) 397-8246 (800) 604-0025</td>
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**Mailing Address**

PO Box 1678
Vancouver, WA 98668
GRAYS HARBOR

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 MEDICATION SUPPORT
RECOVERY PEER SUPPORT

074000
NORTHWEST INDIAN TREATMENT CENTER
308 EAST YOUNG STREET
ELMA, WA 98541
(360) 482-2674

MAILING ADDRESS
PO BOX 477
ELMA, WA 98541

STEPHANIE TOMPKINS
DIRECTOR

MICHAEL TISDALE
CLINICAL SUPERVISOR

004500
QUINAULT INDIAN NATION
1505 KIA-OOK-WA
TAHOLA, WA 98587
(360) 276-8211

MAILING ADDRESS
PO BOX 189
TAHOLA, WA 98587

DAN OVERTON
BEHAVIORAL HEALTH MANAGER

ERNIE SANCHEZ
CLINICAL SUPERVISOR

137000
SEA MAR BEHAVIORAL HEALTH - ABERDEEN
1813 SUMNER AVENUE
ABERDEEN, WA 98520
(360) 538-1461
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
MH & SUD CLINICAL SUPERVISOR

200343
SEA MAR BEHAVIORAL HEALTH - ELMA
515 MAIN STREET
ELMA, WA 98541
(360) 861-9700
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
CLINICAL SUPERVISOR
GRAYS HARBOR

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
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<td>ANASTASIA ALLES</td>
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<td></td>
<td>ISLAND ASSESSMENT &amp; COUNSELING CENTER, INC. - OAK HARBOR</td>
<td>520 EAST WHIDBEY AVENUE, SUITE 205</td>
<td>OAK HARBOR</td>
<td>98277</td>
<td>(360) 675-5782</td>
<td></td>
<td>AMY HOFEDITZ</td>
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CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
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

200345
L.E.A.P.S. AND BEYOND, INC. - WHIDBEY AVENUE
675 EAST WHIDBEY AVENUE
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

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

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

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

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

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

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

200383
SUNRISE SERVICES, INC. - OAK HARBOR
530 NORTHEAST MIDWAY BOULEVARD
OAK HARBOR, WA 98277
(360) 720-2946
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

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

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

JEFFERSON

151100
BELIEVE IN RECOVERY, LLC - PORT TOWNSEND MAIN
211 TAYLOR STREET, SUITES 20 & 21
PORT TOWNSEND, WA 98368
(360) 385-1258

GABRIELE CAUDILL
ADMINISTRATOR

VINCENT MARQUIS
CLINICAL SUPERVISOR

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
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<td>DISCOVERY BEHAVIORAL HEALTHCARE</td>
<td>884 WEST PARK AVENUE</td>
<td>PORT TOWNSEND, WA 98368</td>
<td>(360) 385-0321</td>
<td><a href="mailto:INFO@DISCOVERYBH.ORG">INFO@DISCOVERYBH.ORG</a> <a href="http://WWW.DISCOVERYBH.ORG">WWW.DISCOVERYBH.ORG</a></td>
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<td>GRAY WOLF RANCH</td>
<td>3804 HASTINGS AVENUE WEST</td>
<td>PORT TOWNSEND, WA 98368</td>
<td>(800) 571-5505 (360) 385-5505</td>
<td><a href="mailto:JUDY@GRAYWOLFRANCH.COM">JUDY@GRAYWOLFRANCH.COM</a> <a href="http://WWW.GRAYWOLFRANCH.COM">WWW.GRAYWOLFRANCH.COM</a></td>
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<td>CIHAN BEHLIVAN EXECUTIVE DIRECTOR</td>
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<td>SAFE HARBOR RECOVERY CENTER, INC. FPC</td>
<td>686 LAKE STREET, SUITE 400</td>
<td>PORT TOWNSEND, WA 98368</td>
<td>(360) 385-3866</td>
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<td>TERESA WIRTH ADMINISTRATOR</td>
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<td>GLEEFORD KESSLER, JR. PRESIDENT/CEO</td>
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<tr>
<td><strong>KING</strong></td>
<td><strong>2ND CHANCE RECOVERY CENTER, LLC</strong></td>
<td>235 SOUTHWEST 153RD STREET</td>
<td>BURIEN, WA 98166</td>
<td>(206) 242-4915</td>
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KING

MAILING ADDRESS
235 SW 153RD STREET
BURIEN, WA 98166

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

044000

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

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

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

150100

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

MAILING ADDRESS
533 REDMOND PL NE
RENTON, WA 98056

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

200427

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

MAILING ADDRESS
10904 NE 39TH PL
BELLEVUE, WA 98004

CERTIFIED SERVICES
SUBSTANCE 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

MAILING ADDRESS
4649 SUNNYSIDE AVENUE N, SUITE 200
SEATTLE, WA 98103

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

CATHERINE TRESTRAIL
ADMINISTRATOR

AMY CONDON
CLINICAL SUPERVISOR

DONNA WHITMIRE
ADMINISTRATOR

LINDSAY MORSE
ADMINISTRATOR

ALEX CASTILLO
MH & SUD CLINICAL SUPERVISOR

JEANNE POURROY-CARTER
ADMINISTRATOR
MAILING ADDRESS
10614 BEARDSLEE BLVD STE D
BOTHELL, WA 98011

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

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

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

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

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

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

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

200459
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - KING OUTPATIENT
1550 4TH AVENUE SOUTH
SEATTLE, WA 98131
WWW.ABHSINC.NET

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

200002
ANNARA COUNSELING SERVICES
8309 5TH AVENUE NE, SUITE B-1
SEATTLE, WA 98115
(206) 643-9622
WWW.YOUGROWGIRL.ORG

MAILING ADDRESS
8309 5TH AVENUE NE, SUITE B-1
SEATTLE, WA 98115

JAMILA LYNN COLEMAN
FOUNDER/DIRECTOR

SHERICE ARNOLD-ARRINGTON
COUNSELING PROGRAM MANAGER
KING

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
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

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

200450

APPLE CONSULTING - BOTHELL
18311 BOTHELL-EVERETT HWY, BLDG 2, SUITE 260
BOTHELL, WA 98012
(425) 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)

200004

APPLE CONSULTING - MAIN
1240 116TH AVENUE NE, SUITE 102
BELLEVUE, WA 98004
(206) 437-5412
(206) 250-9014
ADMIN@APPLE-ASD.COM
WWW.APPLE-ASD.COM

CHRIS JONES
DIRECTOR OF OPERATIONS

DR. ALLISON APPLE
EXECUTIVE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS
1240 116TH AVENUE NE, SUITE 102
BELLEVUE, WA 98004

CERTIFIED SERVICES

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

200422

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

MAILING ADDRESS
PO BOX 47055
SEATTLE, WA 98166

ALVIN L. CURRIE
EXECUTIVE DIRECTOR
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

MAILING ADDRESS
625 STRANDER BLVD STE C
TUKWILA, WA 98188

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

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

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

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

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

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

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

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

081600	ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - Bellevue Main
1800 112TH AVENUE NORTHEAST, SUITE 150W
BELLEVUE, WA 98004
(425) 646-7279
(800) 858-6702
WWW.ABHC.COM

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 PEER SUPPORT

ADMINISTRATOR
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<td>149400</td>
<td>ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - KENT</td>
<td>841 CENTRAL AVENUE NORTH, SUITE C215</td>
<td>KENT, WA 98032</td>
<td>(425) 646-7279</td>
<td>ANNE R. MARKIEWICZ</td>
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<tr>
<td>092200</td>
<td>ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - SEATTLE</td>
<td>2111 NORTH NORTHGATE WAY, SUITE 212</td>
<td>SEATTLE, WA 98133-9018</td>
<td>(206) 781-2661</td>
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<td>045600</td>
<td>ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - WEST SEATTLE</td>
<td>4700 42ND AVENUE SOUTHWEST, SUITE 470</td>
<td>SEATTLE, WA 98116</td>
<td>(206) 935-1282</td>
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<td>200027</td>
<td>ATLANTIC STREET CENTER</td>
<td>2103 SOUTH ATLANTIC STREET</td>
<td>SEATTLE, WA 98144</td>
<td>(206) 329-2050</td>
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CERTIFIED SERVICES
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ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
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**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

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<th>200035</th>
<th><strong>AUTISM SPECTRUM THERAPIES</strong></th>
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<tr>
<td>12729 NORTHUP WAY, SUITE 23</td>
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<tr>
<td>BELLEVUE, WA 98005</td>
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<tr>
<td>(866) 727-8274</td>
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<td><a href="http://WWW.AUTISMTHERAPIES.COM">WWW.AUTISMTHERAPIES.COM</a></td>
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**MAILING ADDRESS**
2550 N HOLLYWOOD WAY #102
BURBANK, CA 91505

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
-RECOVERY SUPPORT

<table>
<thead>
<tr>
<th>200082</th>
<th><strong>BASICS NW, LLC - BELLEVUE</strong></th>
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<tr>
<td>1414 116TH AVENUE NE, SUITE B</td>
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<tr>
<td>BELLEVUE, WA 98004</td>
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<tr>
<td>(360) 915-8686</td>
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**MAILING ADDRESS**
1414 116TH AVENUE NE, SUITE B
BELLEVUE, WA 98004

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
-RECOVERY SUPPORT

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<tr>
<th>113700</th>
<th><strong>BRIDGEWAY TREATMENT SERVICES, LLC</strong></th>
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<tr>
<td>410 BELLEVUE WAY SE, SUITE 2</td>
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**MAILING ADDRESS**
410 BELLEVUE WAY SE STE 2
BELLEVUE, WA 98004

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
-RECOVERY SUPPORT

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<tr>
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**MAILING ADDRESS**
6957 CALIFORNIA AVE SW
SEATTLE, WA 98136

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
-RECOVERY SUPPORT

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BURBANK, CA 91505

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
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BELLEVUE, WA 98004

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**MAILING ADDRESS**
410 BELLEVUE WAY SE STE 2
BELLEVUE, WA 98004

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
-RECOVERY SUPPORT
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

112100
CANYON PARK TREATMENT SOLUTIONS
22026 20TH AVENUE SE, BUILDING L SUITE 101
BOTHELL, WA 98021
(425) 672-7293

STACY GARDEA
CLINIC DIRECTOR

MARIA UCHYTIL
CLINICAL SUPERVISOR

MAILING ADDRESS
22026 20TH AVE SE BLDG L STE 101
BOTHELL, WA 98021

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

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

005400
CASCADE BEHAVIORAL HOSPITAL
12844 MILITARY ROAD SOUTH
TUWKILA, 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
TUWKILA, 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 CASTEELE
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

034300
CATHOLIC COMMUNITY SERVICES - SEATTLE
1902 SECOND AVENUE, SUITE 208
SEATTLE, WA 98101-1155
(206) 956-9570
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

MATTHEW WILSON
SUD CLINICAL SUPERVISOR
### CERTIFIED SERVICES

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### 200145

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

**MAILING ADDRESS**  
5410 N 44TH ST  
TACOMA, WA 98407

**CERTIFIED SERVICES**

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### 200502

**CENTER FOR AUTISM REHABILITATION & EVALUATION, LLC - KENT**  
6624 SOUTH 196TH STREET, SUITE U107  
KENT, WA 98032  
(253) 246-7513  
(425) 902-6248  
ROBERTS@ABATHERAPYCARE.COM  
WWW.AUTISMTHERAPYCARE.COM

**MAILING ADDRESS**  
6624 SOUTH 196TH STREET, SUITE U107  
KENT, WA 98032

**CERTIFIED SERVICES**

<table>
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<th>RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</th>
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### 200357

**CENTER FOR AUTISM REHABILITATION & EVALUATION, LLC - MAIN**  
1600 DEXTER AVENUE NORTH, SUITE D1  
SEATTLE, WA 98109  
(206) 588-2087  
ROBERTS@ABATHERAPYCARE.COM  
WWW.AUTISMTHERAPYCARE.COM

**MAILING ADDRESS**  
1600 DEXTER AVENUE NORTH, SUITE D1  
SEATTLE, WA 98109

**CERTIFIED SERVICES**

<table>
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<th>RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</th>
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015900  CENTER FOR HUMAN SERVICES - MAIN  
17018 15TH AVENUE NE  
SHORELINE, WA 98155-5126  
(206) 362-7282  
BERATTA GOMILLION  
EXECUTIVE DIRECTOR  
RAMONA K. GRAHAM  
SUBSTANC 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  
1025 SOUTHWEST 124TH STREET  
SEATTLE, WA 98146  
(253) 833-5908  
(206) 248-4903  
BETHANYL@CHILDHAVEN.ORG  
WWW.CHILDHAVEN.ORG  
MARIA CHAVEZ WILCOX  
PRESIDENT  
TODD GEORGE  
SR. PROGRAM DIRECTOR  

MAILING ADDRESS  
316 BROADWAY  
SEATTLE, WA 98122  

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

200038  CHILDHAVEN - MAIN  
316 BROADWAY  
SEATTLE, WA 98122  
(206) 624-6477  
(206) 957-4815  
BETHANYL@CHILDHAVEN.ORG  
WWW.CHILDHAVEN.ORG  
MARIA CHAVEZ WILCOX  
PRESIDENT  
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  

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
BETHANY@CHILDHAVEN.ORG
WWW.CHILDHAVEN.ORG

MARIA CHAVEZ WILCOX
PRESIDENT

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

128100
CO-OCCURRING RESIDENTIAL PROGRAM (CORP)
11900 BEACON AVENUE SOUTH
SEATTLE, WA 98178
(206) 772-6900

GEORGE CALDERON
REGIONAL TREATMENT DIRECTOR

GRANT WEAVER
CLINICAL PRACTICES MANAGER

MAILING ADDRESS
11900 BEACON AVE S
SEATTLE, WA 98178

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

200262
COLEMAN'S FAMILY SERVICES LLC
15 SOUTH GRADY WAY, SUITE 305
RENTON, WA 98057
(425) 235-9386
WWW.COLEMANSFAMILYSERVICES.COM

ALICE COLEMAN
ADMINISTRATOR

MICHELLE BYRD
CLINICAL SUPERVISOR

MAILING ADDRESS
15 SOUTH GRADY WAY, SUITE 305
RENTON, WA 98057

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

087600
COMMUNITY PSYCHIATRIC CLINIC - BELLTOWN
2329 FOURTH AVENUE
SEATTLE, WA 98121
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
11000 LAKE CITY WAY NE
SEATTLE, WA 98125
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<th>Address</th>
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<tr>
<td>200293</td>
<td>COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL&lt;br&gt;204 NORTHEAST 94TH STREET&lt;br&gt;SEATTLE, WA 98115&lt;br&gt;(206) 461-3614&lt;br&gt;<a href="mailto:SLOPEZ@CPCWA.ORG">SLOPEZ@CPCWA.ORG</a>&lt;br&gt;WWW.CPCWA.ORG</td>
<td>DOUG CRANDALL&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;LIZ QUAKENBUSH&lt;br&gt;HOUSING &amp; RESIDENTIAL SERVICES DIVISION DIRECT</td>
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<td><strong>MAILING ADDRESS</strong></td>
<td>11000 LAKE CITY WAY NE STE 200&lt;br&gt;SEATTLE, WA 98125</td>
<td><strong>CERTIFIED SERVICES</strong>&lt;br&gt;CASE MANAGEMENT&lt;br&gt;GROUP THERAPY&lt;br&gt;LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY MEDICATION SUPPORT&lt;br&gt;RECOVERY PEER SUPPORT&lt;br&gt;RESIDENTIAL TREATMENT FACILITY</td>
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<td>COMMUNITY PSYCHIATRIC CLINIC - EL REY&lt;br&gt;2119 SECOND AVENUE&lt;br&gt;SEATTLE, WA 98121&lt;br&gt;(206) 461-3614&lt;br&gt;<a href="mailto:SLOPEZ@CPCWA.ORG">SLOPEZ@CPCWA.ORG</a>&lt;br&gt;WWW.CPCWA.ORG</td>
<td>DOUG CRANDALL&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;LIZ QUAKENBUSH&lt;br&gt;HOUSING &amp; RESIDENTIAL SERVICES DIVISION DIRECT</td>
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</tr>
<tr>
<td>117700</td>
<td>COMMUNITY PSYCHIATRIC CLINIC - LAKE CITY MAIN&lt;br&gt;11000 LAKE CITY WAY NE, SUITE 200&lt;br&gt;SEATTLE, WA 98125&lt;br&gt;(206) 461-3614&lt;br&gt;<a href="mailto:SLOPEZ@CPCWA.ORG">SLOPEZ@CPCWA.ORG</a>&lt;br&gt;WWW.CPCWA.ORG</td>
<td>DOUG CRANDALL&lt;br&gt;CHIEF EXECUTIVE OFFICER&lt;br&gt;DAVID NEWMAN&lt;br&gt;SUD CLINICAL SUPERVISOR</td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
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

170800
COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN
10700 MERIDIAN AVENUE NORTH, SUITE G-11
SEATTLE, WA 98133
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG
DOUG CRANDALL
CHIEF EXECUTIVE OFFICER
DAVID NEWMAN
SUD PROGRAM MANAGER

MAILING ADDRESS
11000 LAKE CITY WAY NE
SEATTLE, WA 98125-6748

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

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

087400
COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE
4120 STONE WAY NORTH
SEATTLE, WA 98103
(206) 461-3707
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:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

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

200185
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION
- MAIN
1003 7TH AVENUE
KIRKLAND, WA 98033
(425) 658-3016
SHANNON.S@CONNECTIONS-BEHAVIOR.COM
WWW.CONNECTIONS-BEHAVIOR.COM

SHANNON STARKWEATHER
OPERATIONS MANAGER
DR. PAUL MULLAN
SENIOR BCBA/OWNER

MAILING ADDRESS
1003 7TH AVENUE
KIRKLAND, WA 98033

CERTIFIED SERVICES

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 SERVICES

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

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR
TERESA VISPO-CUBA
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

MAILING ADDRESS
3808 S ANGELINE ST
SEATLE, WA 98118

CERTIFIED 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

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR
TERESA VISPO-CUBA
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118
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<td><strong>003800 CONSEJO COUNSELING AND REFERRAL SERVICE - MAIN</strong></td>
<td>3808 SOUTH ANGELINE STREET SEATTLE, WA 98118</td>
<td>(206) 461-4880 MARIO E. PAREDES-JOVEL EXECUTIVE DIRECTOR MARCOS SAURI CLINICAL SUPERVISOR</td>
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<td>Mailing Address</td>
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<tr>
<td><strong>149500 CONSEJO KENT YOUTH OUTPATIENT SERVICES</strong></td>
<td>515 WEST HARRISON STREET, SUITE 109 KENT, WA 98032</td>
<td>(206) 461-4880 MARIO E. PAREDES-JOVEL EXECUTIVE DIRECTOR MARCOS SAURI CLINICAL SUPERVISOR</td>
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<td><strong>135400 CONSEJO YOUTH AND FAMILY SERVICES - SEATTLE</strong></td>
<td>8615 14TH AVENUE SOUTH SEATTLE, WA 98108</td>
<td>(206) 461-4880 MARIO E. PAREDES-JOVEL EXECUTIVE DIRECTOR MARCOS SAURI CLINICAL SUPERVISOR</td>
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<td>Mailing Address</td>
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154100  CRISIS CLINIC
CONFIDENTIAL LOCATION
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
JESSICA RHODES
ADMINISTRATOR

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

077000  DOC - BISHOP LEWIS WORK RELEASE
703 8TH AVE
SEATTLE, WA 98104
DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

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

077200  DOC - HELEN B. RATCLIFFE WORK RELEASE
1531 13TH AVENUE SOUTH
SEATTLE, WA 98114
DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

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

077300  DOC - REYNOLDS WORK RELEASE
410 4TH AVENUE
SEATTLE, WA 98104
DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
### DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER

<table>
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<tr>
<th>Address</th>
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| 1600 SOUTH LANE STREET                       | DANIEL MALONE
| SEATTLE, WA 98144                            | EXECUTIVE DIRECTOR                                        |
| (206) 464-1570                               | GRAYDON ANDRUS
| INFO@DESC.ORG                                | DIRECTOR OF CLINICAL PROGRAMS (MH CS)                     |
| WWW.DESC.ORG                                 |                                                          |
| **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

### DOWNTOWN EMERGENCY SERVICE CENTER - JAMES STREET

<table>
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<th>Address</th>
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| 216 JAMES STREET                             | DANIEL MALONE
| SEATTLE, WA 98104                            | EXECUTIVE DIRECTOR                                        |
| (206) 441-3041                               | JAIME (WALTER) MOSS                                      |
| CD PROGRAM MANAGER                           |                                                          |

**MAILING ADDRESS**

<p>| 515 THIRD AVE                                |                                                          |
| SEATTLE, WA 98104                            |                                                          |</p>
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<th>Area Code</th>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

037201 EASTSIDE RECOVERY GROUP
1715 114TH AVENUE SE, SUITE 204
BELLEVUE, WA 98004
(425) 454-0839
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 SERVICES
SUBSTANCE 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 SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200048 EATING RECOVERY CENTER OF WASHINGTON
1231 116TH AVENUE NE
BELLEVUE, WA 98004
(425) 451-1134
WWW.EATINGRECOVERYCENTERWA.COM

LARA EFFLAND
EXECUTIVE CLINICAL DIRECTOR
LISA GERAUD
SENIOR CLINICAL DIRECTOR

MAILING ADDRESS
1231 116TH AVENUE NE
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

149600 EDGEWOOD SEATTLE ADDICTION SERVICES
1200 WESTLAKE AVENUE N, SUITE 508
SEATTLE, WA 98109
(206) 402-4115

MAILING ADDRESS
1200 WESTLAKE AVENUE N, SUITE 508
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
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<tr>
<td>200137</td>
<td>Engage ABA LLC</td>
<td>Confidential Location</td>
<td>(425) 781-5010</td>
<td><a href="mailto:Aidan@EngageABA.com">Aidan@EngageABA.com</a></td>
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<tr>
<td></td>
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<td>(206) 719-2506</td>
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<td></td>
<td></td>
<td></td>
<td>Liz Bluechel, Director of Operations</td>
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<td>Aiden Vickers, Owner/Program Manager</td>
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<tr>
<td>136100</td>
<td>Evergreen Healthcare</td>
<td>11800 Northeast 128th Street, 2nd Floor</td>
<td>(425) 899-6300</td>
<td>Leah Jones, CD Services Administrator</td>
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<tr>
<td></td>
<td></td>
<td>Kirkland, WA 98034</td>
<td>(800) 548-0558</td>
<td>Todd Beller, CD Clinical Supervisor</td>
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<td>200477</td>
<td>Evergreen Treatment Services - Reach</td>
<td>2133 3rd Avenue, Suite 116</td>
<td>(206) 432-3574</td>
<td><a href="mailto:Mail@etsreach.org">Mail@etsreach.org</a>, <a href="http://www.etsreach.org">www.etsreach.org</a></td>
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<td>Seattle, WA 98121</td>
<td>(206) 223-3644</td>
<td>Kelsey Craig, Reach Co-Director</td>
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<td>Tricia Howe, Reach Supervisor</td>
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<td>200408</td>
<td>Evergreen Treatment Services - South King County Clinic</td>
<td>1412 Southwest 43rd Street</td>
<td>(425) 264-0750</td>
<td>Molly Carney, PhD, Executive Director</td>
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<td>Renton, WA 98057</td>
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<td>Sean Soth, Clinical Supervisor</td>
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<tr>
<td>EVERGREEN TREATMENT SERVICES - UNIT 1</td>
<td>1700 AIRPORT WAY SOUTH</td>
<td>SEATTLE, WA 98134-1618</td>
<td>(206) 223-3644</td>
<td>MOLLY CARNEY</td>
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<td>EVERGREEN TREATMENT SERVICES - UNIT 2</td>
<td>1740 AIRPORT WAY SOUTH</td>
<td>SEATTLE, WA 98134-1618</td>
<td>(206) 903-1898</td>
<td>MOLLY CARNEY</td>
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<td>EVERGREEN TREATMENT SERVICES - UNIT 3</td>
<td>ONE COMMUNITY LOCATION</td>
<td>SEATTLE, WA 98134</td>
<td>(206) 223-3644</td>
<td>MOLLY CARNEY</td>
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<td>EXODUS - YOUTH</td>
<td>33010 SOUTHEAST 99TH STREET</td>
<td>SNOQUALMIE, WA 98065</td>
<td>(425) 831-2623</td>
<td>JAMIE BURTON</td>
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<td>FAIRFAX BEHAVIORAL HEALTH - KIRKLAND ARTS</td>
<td>10200 NORTHEAST 132ND STREET</td>
<td>KIRKLAND, WA 98034</td>
<td>(425) 821-2000</td>
<td>DR. DEBBIE HOROWSKI</td>
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<td>MAILING ADDRESS</td>
<td>10200 NE 132ND ST</td>
<td>KIRKLAND, WA 98034</td>
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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/

MAILING ADDRESS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

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

165700  FAMILY THERAPY & RECOVERY P.S.
15 SOUTH GRADY WAY, SUITE 249
RENTON, WA 98057
(253) 220-9452
(253) 208-6393
PAUL.HUNZIKER@GMAIL.COM
WWW.FAMILYTHERAPYRECOVERY.COM

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 OUTPATIENT

MENTAL HEALTH SERVICES:
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200195  FEAT OF WASHINGTON
14434 NORTHEAST 8TH STREET, SUITE 300
BELLEVUE, WA 98007
(425) 223-5126
(425) 502-5060
INFO@FEATWA.ORG
WWW.FEATWA.ORG

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 98052

MAILING ADDRESS
PO BOX 2755
REDMOND, WA 98073-2755

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
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<td>170300</td>
<td>FRIENDS OF YOUTH - DUVALL</td>
<td>26420 NORTHEAST VIRGINIA STREET</td>
<td>(425) 844-3669, (425) 392-6367</td>
<td>TEDDY POTTMEYER, LAUREN CHRISTENSON</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT</td>
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<td>040901</td>
<td>FRIENDS OF YOUTH - MAIN</td>
<td>414 FRONT STREET NORTH</td>
<td>(425) 392-6367</td>
<td>TERRY POTTMEYER, MARIE C. MACCOY</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT</td>
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<tr>
<td>170200</td>
<td>FRIENDS OF YOUTH - NORTH BEND</td>
<td>401 BALLARAT AVENUE NORTH</td>
<td>(425) 888-4151</td>
<td>TERRY POTTMEYER, LAUREN CHRISTENSON</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT</td>
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<td>200060</td>
<td>FULL LIFE CARE</td>
<td>2600 SOUTH WALKER STREET</td>
<td>(206) 224-3746</td>
<td>NORA GIBSON, KRIS LAU</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, GROUP THERAPY, INDIVIDUAL TREATMENT</td>
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042400  FUTURE VISIONS PROGRAM, INC.
620 M STREET NE, SUITE 2
AUBURN, WA 98002
(253) 735-2718

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

KAREN PARKER
PROGRAM COORDINATOR
KAREN GARVIN
CLINICAL MANAGER

200217  HARBORVIEW MEDICAL CENTER - INPATIENT
325 9TH AVENUE
SEATTLE, WA 98104

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

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

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

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

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

BRIGITTE FOLZ
ADMINISTRATOR
ADRIANE TILLERY
CLINICAL SUPERVISOR

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
<table>
<thead>
<tr>
<th>King County</th>
<th>Address</th>
<th>Executive Director</th>
<th>Address</th>
<th>Director of Outpatient Services</th>
<th>Clinical Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>200049</td>
<td>HERO HOUSE &lt;br&gt;12838 SE 40TH PLACE &lt;br&gt;BELLEVUE, WA 98006 &lt;br&gt;(425) 614-1282 &lt;br&gt;<a href="mailto:KAILEYF@HEROHOUSE.ORG">KAILEYF@HEROHOUSE.ORG</a> &lt;br&gt;WWW.HEROHOUSE.ORG</td>
<td>KAILEY FIEDLER &lt;br&gt;EXECUTIVE DIRECTOR</td>
<td>MAILING ADDRESS 12838 SE 40TH PLACE &lt;br&gt;BELLEVUE, WA 98006</td>
<td></td>
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</tr>
<tr>
<td>159400</td>
<td>HOPE + HELP &lt;br&gt;230 AUBURN WAY SOUTH #1B &amp; 2B &lt;br&gt;AUBURN, WA 98002 &lt;br&gt;(253) 333-2328</td>
<td>GEORGE BRUMMELL &lt;br&gt;ADMINISTRATOR</td>
<td>MAILING ADDRESS 230 AUBURN WAY S #1B &lt;br&gt;AUBURN, WA 98002</td>
<td>CLAUDIA STEWARD &lt;br&gt;CLINICAL SUPERVISOR</td>
<td></td>
</tr>
<tr>
<td>178600</td>
<td>HOPE PLACE &lt;br&gt;3802 SOUTH OTHELLO STREET &lt;br&gt;SEATTLE, WA 98118 &lt;br&gt;(206) 628-2008</td>
<td>VANESSA CEDERGREEN MAUGA &lt;br&gt;ADMINISTRATOR</td>
<td>MAILING ADDRESS 3802 S OTHELLO ST &lt;br&gt;SEATTLE, WA 98118</td>
<td>DERYL DAVIS BELL &lt;br&gt;CLINICAL SUPERVISOR</td>
<td></td>
</tr>
<tr>
<td>174700</td>
<td>HOTEL CALIFORNIA BY THE SEA &lt;br&gt;1300 114TH AVENUE SE #101 &lt;br&gt;BELLEVUE, WA 98004 &lt;br&gt;(800) 762-6717</td>
<td>GREG YANTZER &lt;br&gt;DIRECTOR OF OUTPATIENT SERVICES</td>
<td>MAILING ADDRESS 1300 114TH AVE SE #101 &lt;br&gt;BELLEVUE, WA 98004</td>
<td>DARREN BARRY &lt;br&gt;CLINICAL SUPERVISOR</td>
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</table>

**CERTIFIED SERVICES**

**HERO HOUSE**  
MENTAL HEALTH SERVICES: CLUBHOUSE

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

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

**HOTEL CALIFORNIA BY THE SEA**  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT
KING

200050  
HUMANITY'S CHILDREN  
451 SOUTHWEST 10TH STREET, #201  
RENTON, WA 98057

MAILING ADDRESS  
POST OFFICE BOX 75011  
SEATTLE, WA 98175

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

200051  
IKRON CORPORATION - GREATER SEATTLE  
3805 108TH AVENUE NE, SUITES 204 &AMP; 102  
BELLEVUE, WA 98004  
(425) 242-1713  
IKRONGREATERSEATTLE@IKRON.ORG  
WWW.SEATTLE.IKRON.ORG

MAILING ADDRESS  
3805 108TH AVENUE NE, SUITES 204 &AMP; 102  
BELLEVUE, WA 98004

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
DAY SUPPORT  
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

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

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

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

INTEGRA HEALTH
1215 120TH AVENUE NE, SUITE 201
BELLEVUE, WA 98005
JILL FRANKOUSKY OWNER/CEO
JOSEPH WANER SUBSTANCE USE DISORDER CLINICAL SUPERVISOR

Mailing Address
1215 120TH AVENUE NE, SUITE 201
BELLEVUE, WA 98005

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

Mailing Address
701 N 36TH ST STE 300
SEATTLE, WA 98103

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

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

Mailing Address
30620 PACIFIC HWY S STE 107
FEDERAL WAY, WA 98003

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
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<th>Zip Code</th>
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<tr>
<td>12940</td>
<td>SEATTLE</td>
<td>ISLAND ASSESSMENT &amp; COUNSELING CENTER, INC. - 4250 AURORA AVENUE NORTH, SUITE A106 SEATTLE, WA 98103 (206) 547-2171</td>
<td><strong>ADMINISTRATOR</strong> AMY HOFEDITZ</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mailing Address</td>
<td>4250 AURORA AVE N STE A106 SEATTLE, WA 98103</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
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<td>Level II Intensive Outpatient</td>
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<td>20025</td>
<td>KIRKLAND</td>
<td>JIGSAW JUNCTION</td>
<td>11415 NORTHEAST 128TH STREET, SUITE 40 KIRKLAND, WA 98034</td>
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<tr>
<td></td>
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<td>Mailing Address</td>
<td>11415 NE 128TH STREET, SUITE 40 KIRKLAND, WA 98034</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
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<td>10320</td>
<td>KENT</td>
<td>KENT TREATMENT SOLUTIONS</td>
<td>21851 84TH AVE S, #101 KENT, WA 98032</td>
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<td></td>
<td></td>
<td>(425) 687-7082</td>
<td><strong>CLINIC DIRECTOR</strong> MICHAEL COURTOIS</td>
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<td><strong>CLINICAL SUPERVISOR</strong> RAND JOHNSON</td>
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<td>21851 84TH AVE S, #101 KENT, WA 98032</td>
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<td>Opiate Substitution Treatment</td>
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<td>01670</td>
<td>KENT</td>
<td>KENT YOUTH AND FAMILY SERVICES</td>
<td>232 2ND AVENUE SOUTH, SUITE 201 KENT, WA 98032</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(253) 859-0300</td>
<td><strong>EXECUTIVE DIRECTOR</strong> MIKE HEINISC</td>
</tr>
<tr>
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<td></td>
<td></td>
<td><strong>DIRECTOR OF CLINICAL PROGRAMS</strong> PAULA FREDERICK</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mailing Address</td>
<td>232 2ND AVENUE S STE 201 KENT, WA 98032</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
<td>Substance Use Disorder Services:</td>
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<td>Alcohol and Drug Information School</td>
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<td>Level II Intensive Outpatient</td>
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<td>20026</td>
<td>BELLEVUE</td>
<td>KINDERING CENTER</td>
<td>16120 NORTHEAST 8TH STREET BELLEVUE, WA 98008</td>
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</table>
KING

MAILING ADDRESS
16120 NE 8TH STREET
BELLEVUE, WA 98008

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

200227
KING COUNTY CRISIS & COMMITMENT SERVICES
401 5TH AVENUE, SUITE 400
SEATTLE, 98104
BRAD FINEGOOD

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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH

004404
KING COUNTY EMERGENCY SERVICE PATROL
1930 BOREN AVENUE
SEATTLE, WA 98121
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

MAILING ADDRESS
PO BOX 300
RENTON, WA 98057

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

155500
LA ESPERANZA HCS - BURIEN
15405 1ST AVENUE SOUTH, SUITE 2
BURIEN, WA 98148
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

200232 LAKESIDE CENTER FOR AUTISM
1871 NORTHWEST GILMAN BOULEVARD, SUITE 2
ISSAQUAH, WA 98027
MAILING ADDRESS
1871 NW GILMAN BOULEVARD, SUITE 2
ISSAQUAH, WA 98027
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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

041100 LAKESIDE-MILAM RECOVERY CENTERS, INC. - BURIEN/ADOLESCENT IIP
12845 AMBAUM BOULEVARD SW
SEATTLE, WA 98146-4118
(206) 241-0890
(425) 823-3116
ELIZABETH MELOENY
ADMINISTRATOR
ABIGAIL GAUSE
CLINICAL SUPERVISOR
MAILING ADDRESS
10322 NE 132ND ST
KIRKLAND, WA 98034-2829
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT
035104  LAKESIDE-MILAM RECOVERY CENTERS, INC. -  
ISSAQUAH  
300 NORTHEAST GILMAN BOULEVARD, SUITE 200  
ISSAQUAH, WA 98027  
(425) 392-8468  
KEVIN MARKHAM  
MARKHAM  
ADMINISTRATOR  
TOBY PETERSON  
CLINICAL SUPERVISOR  
Mailing Address:  
10322 NE 132ND STREET  
ISSAQUAH, WA 98027  
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  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Intensive Inpatient  
Level I Outpatient  
Level II Intensive Outpatient  
Withdrawal Management  
Youth Residential  
Youth Withdrawal Management

009400  LAKESIDE-MILAM RECOVERY CENTERS, INC. -  
RENTON  
1000 SW 7TH STREET, SUITE B  
RENTON, WA 98057-5216  
(206) 248-4358  
HELP@LAKESIDEMILAM.COM  
WWW.LAKESIDEMILAM.COM  
H. LUANNE DALNS-MOHLER  
ADMINISTRATOR  
JAY YOURGLISH  
CLINICAL SUPERVISOR  
Mailing Address:  
10322 NE 132ND ST  
KIRKLAND, WA 98057-5216  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Withdrawal Management
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

09140

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

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

200234

LEAPS FORWARD, LLC
CONFIDENTIAL LOCATION
(206) 214-7516
KERIDHONDT@LEAPSFORWARD.COM
WWW.LEAPSFORWARD.COM

MAILING ADDRESS

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

144400

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

MAILING ADDRESS
4110 42ND AVE NE
SEATTLE, WA 98105

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

200312

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

MAILING ADDRESS
4040 S 188TH ST STE 200
SEATAC, WA 98188

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
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<th>Zip Code</th>
<th>Name</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Phone Numbers</th>
<th>Services</th>
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<td>200084</td>
<td>Lutheran Community Services Northwest - Seatac Main</td>
<td>4040 South 188th Street, Suite 200</td>
<td>Seatac, WA 98188</td>
<td></td>
<td>Mental Health Services: Case Management, Group Therapy, Individual Treatment, Psychiatric Medication</td>
</tr>
<tr>
<td>138600</td>
<td>Matt Talbot Center</td>
<td>2313 Third Avenue</td>
<td>Seattle, WA 98121</td>
<td>(206) 256-9865, (206) 256-9866</td>
<td>Substance Use Disorder Services: Level I Outpatient, Level II Intensive Outpatient</td>
</tr>
<tr>
<td>200089</td>
<td>Matumaini Counseling &amp; Community Center</td>
<td>3714 South Ferdinand Street</td>
<td>Seattle, WA 98118</td>
<td>(206) 708-1704</td>
<td>Mental Health Services: Case Management, Family Therapy, Group Therapy, Individual Treatment</td>
</tr>
<tr>
<td>200090</td>
<td>Meier Clinics</td>
<td>22232 17th Avenue SE, Suite 312</td>
<td>Bothell, WA 98021</td>
<td></td>
<td>Mental Health Services: Day Support</td>
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<tr>
<td>120800</td>
<td>Mindful Alternatives</td>
<td>12727 Northup Way, Suite 19</td>
<td>Bellevue, WA 98005</td>
<td>(425) 454-0116, (206) 355-2508</td>
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<tr>
<td>Zip Code</td>
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<td>City, State, Zip</td>
<td>Contact Person</td>
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<td>200243</td>
<td>MOSAIC CHILDREN'S THERAPY CLINIC</td>
<td>13010 NORTHEAST 20TH STREET, SUITE 300 BELLEVUE, WA 98005</td>
<td>ANDREA DUFFIELD</td>
<td>CEO</td>
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<tr>
<td>022900</td>
<td>MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM</td>
<td>17813 SOUTHEAST 392ND STREET AUBURN, WA 98092</td>
<td>MICHAEL P. CLARKE</td>
<td>ADMINISTRATOR</td>
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<td>(253) 804-8752</td>
<td>DAN CABLE</td>
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<td>MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH</td>
<td>17500 SOUTHEAST 392ND STREET AUBURN, WA 98092</td>
<td>MICHAEL P. CLARKE</td>
<td>BEHAVIORAL HEALTH DIRECTOR</td>
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<td>SABRINA DE LA FUENTE</td>
<td>YOUTH CD SUPERVISOR</td>
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<td>MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER</td>
<td>202 NORTH DIVISION STREET AUBURN, WA 98001</td>
<td>PAM HAITHCOX EGGLESTON</td>
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<td>(253) 545-2050</td>
<td>ANGELA NAYLOR</td>
<td>DIRECTOR</td>
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<td><a href="mailto:CUSTOMERSERVICE@MULTICARE.ORG">CUSTOMERSERVICE@MULTICARE.ORG</a></td>
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<td><a href="http://WWW.MULTICARE.ORG">WWW.MULTICARE.ORG</a></td>
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KING

200247  NAVOS - AUBURN
402 EAST MAIN STREET, SUITE 160
AUBURN, WA 98002

KEN RYAN
PROGRAM SUPERVISOR

WWW.NAVOS.ORG

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

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

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

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

VICTOR PLACE
ADMINISTRATOR

TIM PRIMEAUX
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
200246  NAVOS - BURIEN 8TH AVE  
15035 8TH AVENUE SOUTH  
BURIEN, WA 98148  
JUDY HEALY  
ADMINISTRATOR  
WWW.NAVOS.ORG  
MAILING ADDRESS  
2600 SW HOLDEN ST  
SEATTLE, WA 98126  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS TELEPHONE SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  

200231  NAVOS - CLIP  
1033 SOUTHWEST 152ND STREET  
BURIEN, WA 98166  
(206) 829-1100  
WWW.NAVOS.ORG  
MAILING ADDRESS  
2600 SW HOLDEN ST  
SEATTLE, WA 98126  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)  

200244  NAVOS - INPATIENT SERVICES  
2600 SOUTHWEST HOLDEN STREET  
SEATTLE, WA 98126  
TERRY MCINERNEY  
DIRECTOR OF NURSING  
WWW.NAVOS.ORG  
MAILING ADDRESS  
2600 SW HOLDEN STREET  
SEATTLE, WA 98126  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT  

200248  NAVOS - KENT  
23960 35TH PLACE SOUTH  
KENT, WA 98032  
KEN RYAN  
PROGRAM SUPERVISOR  
WWW.NAVOS.ORG  
MAILING ADDRESS  
2600 SW HOLDEN ST  
SEATTLE, WA 98126  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS TELEPHONE SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT
172800  NAVOS - MAIN
2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126
(206) 933-7263
WWW.NAVOS.ORG

MAILING ADDRESS
2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126

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

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

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

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

142100  NEW LIFE RECOVERY SOLUTIONS
12330 NORTHEAST 8TH STREET, SUITE 100
BELLEVUE, WA 98005
(425) 454-2238
(206) 617-6611
WWW.RECOVERNEWLIFE.COM

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

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

141600  NEW TRADITIONS
9045 16TH AVENUE SW
SEATTLE, WA 98106
(206) 762-7207
(206) 767-8011
WWW.RECOVERNEWLIFE.COM

MAILING ADDRESS
9045 16TH AVENUE SW
SEATTLE, WA 98106

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

SHINO HARADA  EXEC DIRECTOR
KING

MAILING ADDRESS
9045 16TH AVE SW
SEATTLE, WA 98106

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

015600
NEXUS YOUTH AND FAMILIES - AUBURN MAIN
1000 AUBURN WAY SOUTH
AUBURN, WA 98002
(253) 939-2202
LARAST@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:
LEVEL I OUTPATIENT

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

200494
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1029 COLE
1029 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
(253) 939-2202
LARAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG
SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR
GARY HEMMINGER
MH CLINICAL SUPERVISOR/INTERIM BH DIRECTOR

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
INDIVIDUAL TREATMENT

170100
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE
1356 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
LARAST@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:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
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<td>NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET</td>
<td>847 BLAKE STREET, ENUMCLAW, WA 98022</td>
<td>(360) 825-4586, <a href="mailto:LAURAST@NEXUS4KIDS.ORG">LAURAST@NEXUS4KIDS.ORG</a>, <a href="http://WWW.NEXUS4KIDS.ORG">WWW.NEXUS4KIDS.ORG</a></td>
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<td></td>
<td>NORTH STAR TREATMENT GROUP, LLC</td>
<td>1S SOUTH GRADY WAY, SUITE 505, RENTON, WA 98057</td>
<td>(206) 241-1187, CRAIG S. ROCK, ADMINISTRATOR</td>
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<td>506 2ND AVENUE WEST, SUITE 200, SEATTLE, WA 98119</td>
<td>(866) 311-0003, <a href="mailto:MIKEP@LIVINGSOBER.COM">MIKEP@LIVINGSOBER.COM</a>, <a href="http://WWW.LIVINGSOBER.COM">WWW.LIVINGSOBER.COM</a></td>
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<td>NORTHSHORE YOUTH AND FAMILY SERVICES</td>
<td>19201 120TH AVENUE NE, SUITE 108, BOTHELL, WA 98011</td>
<td>(425) 485-6541, <a href="mailto:INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG">INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG</a>, <a href="http://WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG">WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG</a></td>
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<td>DEBBIE FARRAR</td>
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<tr>
<td>King</td>
<td>176100</td>
<td>SHORELINE, WA 98133</td>
<td>(206) 533-8333</td>
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<td>200250</td>
<td>TUKWILA, WA 98188</td>
<td>(206) 313-8840</td>
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<td>151800</td>
<td>RENTON, WA 98055</td>
<td>(425) 254-2899</td>
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<tr>
<td>Substance Use Disorder Services</td>
<td>Northwest Resources One, LLC</td>
<td>33438 1st Way South, Federal Way, WA 98003</td>
<td>(206) 824-9273</td>
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<tr>
<td>Substance Use Disorder Services</td>
<td>Nua Counseling, PLLC</td>
<td>2505 3rd Avenue, Suite 325, Seattle, WA 98121</td>
<td>(206) 905-4667</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>Olive Crest</td>
<td>2500 116th Avenue NE, Suite 1, Bellevue, WA 98004</td>
<td>(425) 462-1612</td>
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<tr>
<td></td>
<td>Opal Clinic for Eating Disorders, PLLC</td>
<td>1100 Northeast 45th Street, Suite 600, Seattle, WA 98105</td>
<td>(206) 926-9087</td>
</tr>
</tbody>
</table>
CERTIFIED SERVICES

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

ORGANIZATION FOR RESEARCH AND LEARNING
12430 83RD AVENUE SOUTH
SEATTLE, 98179

MAILING ADDRESS
12430 83RD AVENUE SOUTH
SEATTLE, 98179

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

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

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

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

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

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

CERTIFIED SERVICES

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

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

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

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
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

TONI LONG
DIRECTOR

LESLEY CHRISTEN
CHEMICAL DEPENDENCY SUPERVISOR

020332  POSITIVE BEHAVIOR SUPPORTS CORPORATION
1100 DEXTER AVENUE, SUITE 100
SEATTLE, WA 98109
(855) 832-6727
BPICARDEL-SIMENS@TEAMPBS.COM
WWW.TEAMPBS.COM

MAILING ADDRESS
1100 DEXTER AVENUE, SUITE 100
SEATTLE, WA 98109

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

DR. JOSLYN CYNKUS MINTZ
ADMINISTRATOR, CLINICAL SUPER., AND REGIONAL COORD

095900  PROGRAMA S.E.R.
901 SOUTH 3RD STREET
RENTON, WA 98057
(206) 387-1240

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

MIGUEL OROZCO-DELGADO, CDC
ADMINISTRATOR

MIGUEL OROZCO-DELGADO
CLINICAL SUPERVISOR

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

MAILING ADDRESS
ATTN: KENDA ERICKSON
SNOQUALMIE, WA 98065

KENDA ERICKSON
ADMINISTRATOR
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
MAHNAZ ESHETU
EXECUTIVE DIRECTOR
MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

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

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

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

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

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

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

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

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

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

MAILING ADDRESS
PO BOX 1510
RENTON, WA 98057

RICHARD BROOKS
EXECUTIVE DIRECTOR
DIPTI SARNAIK
MH CLINICAL SUPERVISOR
<table>
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<td>005200</td>
<td>Residence XII - Kirkland</td>
<td>12029 113th Avenue NE Kirkland, WA 98034</td>
<td>(425) 823-8844</td>
<td>Liz M. Braun, PH.D.</td>
<td>Candace Hunsucker</td>
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<tr>
<td>117000</td>
<td>Riverton Place</td>
<td>3020 South 128th Street Burien, WA 98168</td>
<td>(206) 242-5585</td>
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<td>200372</td>
<td>Roots Clinic at Academy for Precision Learning</td>
<td>5031 University Way NE, Suite 105 Seattle, WA 98105</td>
<td>(206) 427-0115</td>
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<tr>
<td>159100</td>
<td>Rhyth - Bellevue</td>
<td>14715 Bel-Red Road, Suite 100 Bellevue, WA 98007</td>
<td>(206) 525-5050</td>
<td>Karen Brady</td>
<td>Yvette Ludvik - Jessica Glover</td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

005500
Ryther - Main
2400 Northeast 95th Street
Seattle, WA 98115-2499
(206) 525-5050

Mailing Address
2400 NE 95th St
Seattle, WA 98115-2499

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

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Psychiatric Medication

163800
Schick Shadel Hospital
12101 Ambaum Boulevard SW
Seattle, WA 98146
(206) 244-8100

Mailing Address
12101 Ambaum Blvd SW
Seattle, WA 98146

Certified Services
Substance Use Disorder Services:
Intensive Inpatient
Withdrawal Management

200239
Sea Mar Behavioral Health - Bellevue
12835 Bel-Red Road, Building 100, Suite 145
Bellevue, WA 98005
(206) 764-4714

Mailing Address
8915 14TH Ave S
Seattle, WA 98108

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

200353
Sea Mar Behavioral Health - Bellevue Child & Family
1811 156th Avenue NE
Bellevue, WA 98007
(425) 460-7125
www.seamar.org

Mailing Address
8915 14TH Ave S
Seattle, WA 98108

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

Claudia D’Allegri
Claudia D’Allegri
Vice President of Behavioral Health
Vice President of Behavioral Health

Cassandra Ellsworth
Cassandra Ellsworth
Clinical Supervisor
Clinical Supervisor
### SEA MAR BEHAVIORAL HEALTH - DES MOINES

**Address:** 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  

### SEA MAR BEHAVIORAL HEALTH - FEDERAL WAY

**Address:** 31405 18th Avenue South  
FEDERAL WAY, WA 98003  
(253) 681-6640  
INFO@SEAMARCHC.ORG  
WWW.SEAMARCHC.ORG  

**CLAUDIA D’ALLEGRI**  
VICE PRESIDENT OF BEHAVIORAL HEALTH  

**SHANA WHITNEY**  
CLINICAL SUPERVISOR  

**MAILING ADDRESS**  
8915 14th Ave S  
SEATTLE, WA 98108  

### SEA MAR BEHAVIORAL HEALTH - KENT

**Address:** 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  

### MENTAL HEALTH SERVICES:

- Brief Intervention Treatment
- Case Management
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Less Restrictive Alternative (LRA) Support
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<td>10001 17TH PLACE SOUTH SEATTLE, WA 98168</td>
<td>(206) 766-6960</td>
<td>CLAUDIA D’ALLEGGI VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
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<td>SEA MAR BEHAVIORAL HEALTH - TURNING POINT RECOVERY</td>
<td>113 23RD AVENUE SOUTH SEATTLE, WA 98144</td>
<td>(206) 219-5980</td>
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<td>9650 15TH AVENUE SOUTHWEST SEATTLE, WA 98106</td>
<td>(206) 763-3277</td>
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<td>017200</td>
<td>SEADRUNAR</td>
<td>10344 14TH AVENUE SOUTH SEATTLE, WA 98168</td>
<td>(206) 767-0244</td>
<td>SHERI HEALLEY EXECUTIVE DIRECTOR</td>
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<td>Mailing Address</td>
<td>PO BOX 80864 SEATTLE, WA 98108</td>
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<td>ANGELA GROUT CLINICAL SUPERVISOR</td>
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<td>200270</td>
<td>SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC</td>
<td>4746 11TH AVENUE NE, SUITE 102</td>
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<td>150200</td>
<td>SEATTLE CHILDREN'S HOSPITAL</td>
<td>4540 SAND POINT WAY NE, SUITE 200</td>
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<td>SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER</td>
<td>4909 25TH AVENUE NE</td>
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<td>200390</td>
<td>SEATTLE CHILDREN'S HOSPITAL - BELLEVUE PSYCHIATRY AT OVERLAKE</td>
<td>1135 116TH AVENUE NE</td>
<td>BELLEVUE, WA 98004</td>
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| Service Area | Name | Address | Phone | Email | Website | Manager | Primary Service GitHub
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<td>MAIN</td>
<td>SEATTLE CHILDREN'S HOSPITAL</td>
<td>4800 SAND POINT WAY NE, SEATTLE, WA 98105</td>
<td>(206) 987-2164</td>
<td><a href="mailto:FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG">FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG</a></td>
<td><a href="http://www.seattlechildrens.org">www.seattlechildrens.org</a></td>
<td>KATHY BREWER</td>
<td>MANAGER, INSURANCE PROCESSING/UTILIZATION REVIEW</td>
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<td>(866) 987-2000</td>
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<td>DEBRA GUMBARDO</td>
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<td>PSYCHIATRIC MEDICATION</td>
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| | SEATTLE CHILDREN'S HOSPITAL - ODESSA BROWN CHILDREN'S CLINIC | 2101 EAST YESLER WAY, SEATTLE, WA 98122 | (206) 987-7210 | FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG | www.seattlechildrens.org | ARLESIA BAILEY | DIRECTOR |
| | | | (866) 987-2000 | | | MARK FADOOL | CLINICAL DIRECTOR |
| | MAILING ADDRESS | 4800 SAND POINT WAY NE, SEATTLE, WA 98105 | | | | | |
| | CERTIFIED SERVICES | | | | | | MENTAL HEALTH SERVICES: |
| | | | | | | | BRIEF INTERVENTION TREATMENT |
| | | | | | | | CASE MANAGEMENT |
| | | | | | | | FAMILY THERAPY |
| | | | | | | | GROUP THERAPY |
| | | | | | | | INDIVIDUAL TREATMENT |
| | | | | | | | PSYCHIATRIC MEDICATION |

| | SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES | 1216 PINE STREET, SUITE 300, SEATTLE, WA 98101 | (206) 323-1768 | INFO@SEATTLECOUNSELING.ORG | www.seattlecounseling.org | ANN MCCGETTIGAN | 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 |

<p>| | SEATTLE INDIAN HEALTH BOARD | 611 12TH AVENUE SOUTH, SEATTLE, WA 98114 | (206) 324-9360 | | | THOMAS ASHLEY | BEHAVIORAL HEALTH DIRECTOR |
| | | | | | | | AIDA MONTALVO | CLINICAL SUPERVISOR |
| | MAILING ADDRESS | 611 12TH AVE S, SEATTLE, WA 98114 | | | | | |</p>
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<td>SENECA FAMILY OF AGENCIES</td>
<td>210 SOUTH HUDSON STREET, SUITES 312 &amp; 318</td>
<td>(206) 832-8518</td>
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<td>SEATTLE, WA 98134</td>
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<td>SHAMROCK GROUP, INC.</td>
<td>10564 5TH AVENUE NE, SUITE 301</td>
<td>(206) 789-4784</td>
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<tr>
<td>SEATTLE, WA 98125</td>
<td>STEVEN E. SCHUMANN</td>
<td>ADMINISTRATOR</td>
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<td>MAILING ADDRESS</td>
<td>10564 5TH AVENUE NE, SUITE 301</td>
<td>SEATTLE, WA 98125</td>
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<td>15 SOUTH GRADY WAY, SUITE 310</td>
<td>ANDREW TATUM</td>
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<td>RENTON, WA 98055</td>
<td>LINDA IRISH</td>
<td>PROGRAM MANAGER</td>
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<tr>
<td>SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - KENT</td>
<td>1019 WEST JAMES STREET, SUITE A</td>
<td>(253) 234-1190</td>
</tr>
<tr>
<td>KENT, WA 98032</td>
<td><a href="http://WWW.STOPWA.COM">WWW.STOPWA.COM</a></td>
<td>ANDREW TATUM</td>
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<td>MAILING ADDRESS</td>
<td>PO BOX 111297</td>
<td>TACOMA, WA 98411</td>
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KING

CERTIFIED SERVICES

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

---

200271

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

MAILING ADDRESS
11032 20TH AVENUE NE
SEATTLE, WA 98125

CERTIFIED SERVICES

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

---

200425

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

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

CERTIFIED SERVICES

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

---

166900

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

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

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
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200257
SOUND MENTAL HEALTH - AVONDALE
11629 AVONDALE ROAD
REDMOND, WA 98052
(425) 653-5070
WWW.SMH.ORG

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

KATRINA EGNER
CHIEF PROGRAMS OFFICER
DEBORAH PARKS
DIRECTOR OF SUBACUTE SERVICES

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

118300
SOUND MENTAL HEALTH - BELLEVUE BUILDING A
14216 NORTHEAST 21ST STREET
BELLEVUE, WA 98007
(425) 653-4900
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

KATRINA EGNER
CHIEF PROGRAMS OFFICER
THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

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
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
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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

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
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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

Mailing Address:
1600 E OLIVE ST
SEATTLE, WA 98122

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

200275

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

Mailing Address:
1600 E OLIVE ST
SEATTLE, WA 98122

CHRISTINE ATIENZA
SUD CLINICAL SUPERVISOR

200275

SOUND MENTAL HEALTH - MADISON
2719 EAST MADISON STREET, SUITE 200
SEATTLE, WA 98112
(206) 302-2600
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER

Mailing Address:
1600 E. OLIVE STREET
SEATTLE, WA 98112

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

Mailing Address:
1600 E. OLIVE STREET
SEATTLE, WA 98112

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

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

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

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

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

200276
SOUND MENTAL HEALTH - REDMOND
16225 NORTHEAST 87TH STREET, SUITE A-6
REDMOND, WA 98052
(425) 653-4960
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

KATRINA EGNER
CHIEF PROGRAMS OFFICER
THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
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<td>CLEVELAND, OH 44105</td>
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<td>4555 DELRIDGE WAY SW SEATTLE, WA 98106</td>
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<td><strong>200052 STEPS, LLC</strong></td>
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<tr>
<td>2366 EASTLAKE AVENUE EAST, SUITE 102</td>
<td>SEATTLE, WA 98102</td>
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<tr>
<td>(206) 829-9328</td>
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<tr>
<td>HEATHER SUAREZ</td>
<td>CO-OWNER/CONSULTANT</td>
</tr>
<tr>
<td>SHANE MIRAMONTEZ</td>
<td>CO-OWNER/CONSULTANT</td>
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<tr>
<td>2310 130TH AVENUE NE, BUILDING B, SUITE 103</td>
<td>BELLEVUE, WA 98005</td>
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<tr>
<td>(425) 954-7243</td>
<td><a href="mailto:INFO@SUMOFLEARNING.COM">INFO@SUMOFLEARNING.COM</a></td>
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<td><strong>006100 SUNRISE CENTERS</strong></td>
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<tr>
<td>12650 FIRST AVENUE SOUTH</td>
<td>SEATTLE, WA 98168</td>
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<td>(206) 248-3006</td>
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<tr>
<td>WILLIS LEACH</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td>ALVIN CURRIE</td>
<td>TREATMENT DIRECTOR</td>
</tr>
<tr>
<td><strong>MAILING ADDRESS</strong></td>
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<td>12650 FIRST AVE S</td>
<td>SEATTLE, WA 98168</td>
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<td>LEVEL II INTENSIVE OUTPATIENT</td>
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<td><strong>044901 SWEDISH MEDICAL CENTER - BALLARD</strong></td>
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</tr>
<tr>
<td>5300 TALLMAN AVENUE NW</td>
<td>SEATTLE, WA 98107</td>
</tr>
<tr>
<td>(206) 781-6209</td>
<td></td>
</tr>
<tr>
<td>VALERIE LYTLE</td>
<td>ADMINISTRATOR &amp; NURSE MANAGER</td>
</tr>
<tr>
<td>STEVE MORRIS</td>
<td>CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>MAILING ADDRESS</strong></td>
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</tr>
<tr>
<td>5300 TALLMAN AVE NW</td>
<td>SEATTLE, WA 98107</td>
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</tbody>
</table>
## CERTIFIED SERVICES

**SUBSTANCE USE DISORDER SERVICES:**

- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- WITHDRAWAL MANAGEMENT

### 200394

**SWEDISH MEDICAL CENTER, BALLARD BEHAVIORAL HEALTH**

5300 TALLMAN AVENUE NW  
SEATTLE, WA 98107  
(206) 320-2230  
SMC-CLINQUALITYINVESTIGATIONS@SWEDISH.ORG  
WWW.SWEDISH.ORG

**MAILING ADDRESS**

5300 TALLMAN AVENUE NW  
SEATTLE, WA 98107

### 200386

**THE EMILY PROGRAM - RTF**

4 NICKERSON STREET, SUITE 300  
SEATTLE, WA 98109  
(888) 364-5977  
WWW.EMILYPROGRAM.COM

**MAILING ADDRESS**

2265 COMO AVE  
ST PAUL, MN 55108

### 200126

**THE EMILY PROGRAM - SEATTLE**

1700 WESTLAKE AVENUE NORTH, SUITE 650  
SEATTLE, 98109

**MAILING ADDRESS**

1700 WESTLAKE AVENUE NORTH, SUITE 650  
SEATTLE, 98109

### 200447

**THE EVERGREEN AT NORTHPOINT**

13037 NORTHEAST BEL RED ROAD, SUITE 102  
BELLEVUE, WA 98005  
(425) 285-7539  
TMCCCLURE@NORTHPOINTRECOVERY.COM  
WWW.EVERGREENDRUGREHAB.COM

**MAILING ADDRESS**

1700 WESTLAKE AVENUE NORTH, SUITE 650  
SEATTLE, 98109

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**

- INPATIENT EVALUATION AND TREATMENT - ADULT

### Brian Livingston

**MD / CHIEF OPERATING OFFICER**

### Heather Coleman

**NURSE EXECUTIVE**

### Monique Deschane

**SITE DIRECTOR**

### Joanna Stagg

**SITE MANAGER**

### Christopher Gloor

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

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

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

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

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

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

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

MAILING ADDRESS
24823 S PACIFIC HWY
KENT, WA 98032

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

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

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

MAILING ADDRESS
5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118

RANDON AEA
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR
<table>
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<td>(206) 323-0934</td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

THERAPEUTIC HEALTH SERVICES - SHORELINE
16715 AURORA AVENUE NORTH, SUITE 102
SHORELINE, WA 98133
(206) 546-9766

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

015801

THIRA HEALTH, LLC
400 108TH AVENUE NE, SUITES 402, 420, 505, 520
BELLEVUE, WA 98004
(425) 454-1199
INFO@THIRAHEALTH.COM
WWW.THIRAHEALTH.COM

MAILING ADDRESS
400 108TH AVE NE STE 402
WA

200330

THUNDERBIRD - SEATTLE INDIAN HEALTH BOARD
9236 RENTON AVENUE SOUTH
SEATTLE, WA 98118
(206) 722-7152

MAILING ADDRESS
611 12TH AVENUE SOUTH
SEATTLE, WA 98114

005701
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

200471  
UNIVERSITY OF WASHINGTON AUTISM CENTER - MAIN  
1701 NORTHEAST COLUMBIA ROAD  
SEATTLE, WA 98195  
(206) 221-6806  
(877) 408-8922  
UWAUTISM@UW.EDU  
WWW.UWAUTISM.ORG

ANNETTE ESTES  
DIRECTOR  
ASHLEY PENNEY  
DIRECTOR OF ABA SERVICES

MAILING ADDRESS  
BOX 357920  
SEATTLE, WA 98195-7920

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

200316  
UW HARING CENTER  
1981 NORTHEAST COLUMBIA ROAD  
SEATTLE, WA 98195  
(206) 543-4011  
BETHHM8@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 1 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) 833-4744
(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
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
200405

KING

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
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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:
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200518

VALLEY CITIES COUNSELING & CONSULTATION - GREENWOOD CLINIC
415 NORTH 85TH STREET
SEATTLE, WA 98103
(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
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MENTAL HEALTH SERVICES:
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RECOVERY SUPPORT WRAPAROUND FACILITATION

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
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DUI ASSESSMENT
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RECOVERY SUPPORT WRAPAROUND FACILITATION

VALLEY CITIES COUNSELING & CONSULTATION - RENTON
221 WELLS AVENUE SOUTH
RENTON, WA 98057
(253) 833-7444
KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICES
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VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE
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
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<td>VETERANS ADMINISTRATION PUGET SOUND HEALTH CARE SYSTEM - SEATTLE</td>
<td>1660 SOUTH COLUMBIAN WAY SEATTLE, WA 98108</td>
<td>(206) 764-2123</td>
<td>CARL RIMMELE, PH.D</td>
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<td>WAPI COMMUNITY SERVICES</td>
<td>3722 SOUTH HUDSON STREET SEATTLE, WA 98118</td>
<td>(206) 223-9578</td>
<td>AILEEN DE LEON</td>
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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

WASHINGTON NATIONAL COUNSELING, LLC
17121 SOUTHEAST 270TH PLACE
COVINGTON, WA 98042
(253) 631-1725
WWW.WNC-COUNSELING.COM

MAILING ADDRESS
PO BOX 8862
COVINGTON, WA 98042

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

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

MAILING ADDRESS
2100 24TH AVE S STE 260
SEATTLE, WA 98144

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

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

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

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
KING

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

073500
YOUTH EASTSIDE SERVICES - REDMOND
15600 REDMOND WAY, SUITE 102
REDMOND, WA 98052
(425) 869-6036
(425) 747-4937

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

200288
YWCA OF KING COUNTY
1118 FIFTH AVENUE
SEATTLE, WA 98101

MAILING ADDRESS
1118 FIFTH AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

KITSAP

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

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

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

027300
AGAPE UNLIMITED
4841 AUTO CENTER WAY, SUITE 101
BREMERTON, WA 98312
(360) 373-1529

MAILING ADDRESS
4841 AUTO CENTER WAY, SUITE 101
BREMERTON, WA 98312

EXECUTIVE DIRECTOR

SARA MAREZ-FIELDS
EXECUTIVE DIRECTOR

TODD BENSON
TREATMENT DIRECTOR
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<td>CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC</td>
<td>2817 WHEATON WAY, SUITE 205 BREMERTON, WA 98310</td>
<td>(360) 373-0155</td>
<td>LINDSY MCGOWAN-ANDERSON ADMINISTRATOR MIKE STONE CLINICAL SUPERVISOR</td>
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<td>CATHOLIC COMMUNITY SERVICES - BREMERTON</td>
<td>2625 WHEATON WAY, SUITE B BREMERTON, WA 98310</td>
<td>(360) 792-2020 (888) 649-6732 <a href="mailto:DAVEK@CCSWW.ORG">DAVEK@CCSWW.ORG</a></td>
<td>MARY STONE SMITH VICE PRESIDENT DAVE KUCKLICK SITE DIRECTOR</td>
<td><a href="http://WWW.CCSWW.ORG/FAMILYPRESERVATION">WWW.CCSWW.ORG/FAMILYPRESERVATION</a></td>
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<td>DOC - PENINSULA WORK RELEASE</td>
<td>1340 LLOYD PARK WAY PORT ORCHARD, WA 98366</td>
<td>(360) 725-8628</td>
<td>DAWN L. WILLIAMS SUBSTANCE ABUSE ADMINISTRATOR BRYAN SMITH CLINICAL SUPERVISOR</td>
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200480  EAGLE HARBOR COUNSELING, LLC  
945 HILDEBRAND LANE NE, SUITE 232  
BAINBRIDGE ISLAND, WA 98110  
(425) 478-1000  
JULIAJENSINE@GMAIL.COM  
WWW.EAGLEHARBORCOUNSELING.COM  

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

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

200190  EASTER SEALS OLYMPIC PENINSULA AUTISM CENTER (CLOSED)  
3100 BUCKLIN HILL ROAD, SUITE 215  
SILVERDALE, WA 98383  
(360) 337-2222  
WWW.WA.EASTERSEALS.COM  

MAILING ADDRESS  
3100 BUCKLIN HILL ROAD, SUITE 215  
SILVERDALE, WA 98383  

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

148700  HEALTHY WHOLE SOLUTIONS  
1014 BAY STREET, SUITE 24  
PORT ORCHARD, WA 98366  
(360) 602-0022  

MAILING ADDRESS  
1014 BAY ST STE 24  
PORT ORCHARD, WA 98366  

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

200079  INSTITUTE FOR FAMILY DEVELOPMENT - BREMERTON  
5610 KITSAP WAY, SUITE 315  
BREMERTON, WA 98312  
CHARLOTTE BOOTH  
EXECUTIVE DIRECTOR  

MAILING ADDRESS  
5610 KITSAP WAY, SUITE 315  
BREMERTON, WA 98312  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
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<td>(360) 373-5031</td>
<td>STACEY DEVENNEY</td>
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<td><a href="http://WWW.KITSAPMENTALHEALTH.ORG">WWW.KITSAPMENTALHEALTH.ORG</a></td>
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<td>JOE ROSZAK</td>
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<td></td>
<td>2535 MITCHELL ROAD SE</td>
<td>CEO</td>
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<td>PORT ORCHARD, WA 98366</td>
<td>STACEY DEVENNEY</td>
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<td></td>
<td>(360) 373-5031</td>
<td>CHIEF CLINICAL DIRECTOR</td>
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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

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
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<td>661 TAYLOR AVENUE</td>
<td>PORT ORCHARD, WA 98366</td>
<td>(360) 337-4625</td>
<td>BERGEN STARKE TREATMENT DIRECTOR</td>
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<td>1026 SIDNEY AVENUE</td>
<td>PORT ORCHARD, WA 98366</td>
<td>(360) 337-5725</td>
<td>BERGEN STARKE ADMINISTRATOR</td>
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<td><a href="http://www.kitsapgov.com/hs/krc/recoveryctr.htm">www.kitsapgov.com/hs/krc/recoveryctr.htm</a></td>
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<td>MAILING ADDRESS</td>
<td>614 DIVISION ST MS-23</td>
<td>PORT ORCHARD, WA 98366</td>
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<td>CERTIFIED SERVICES</td>
<td>SUBSTANCE USE DISORDER SERVICES:</td>
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<td>LEVEL I OUTPATIENT</td>
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<td>LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>007000</td>
<td>OLLALLA GUEST LODGE</td>
<td>12850 LALA COVE LANE SE</td>
<td>OLALLA, WA 98359</td>
<td>(253) 857-6201</td>
<td>CHRISTINE LYNCH EXECUTIVE DIRECTOR</td>
</tr>
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<td><a href="http://www.kitsapgov.com/hs/krc/recoveryctr.htm">www.kitsapgov.com/hs/krc/recoveryctr.htm</a></td>
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<td>MELODY MCKEE CLINICAL OPERATIONS MANAGER</td>
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<td>MAILING ADDRESS</td>
<td>12850 LALA COVE LN SE</td>
<td>OLALLA, WA 98359</td>
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<td>CERTIFIED SERVICES</td>
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<td>WITHDRAWAL MANAGEMENT</td>
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<tr>
<td>088800</td>
<td>PORT GAMBLE S'KLALLAM RECOVERY CENTER</td>
<td>7550 LITTLE BOSTON ROAD NE</td>
<td>KINGSTON, WA 98346</td>
<td>(360) 297-6326</td>
<td>JOLENE GEORGE (INTERIM ADMIN) CHILD &amp; FAMILY SVCS DIRECTOR</td>
</tr>
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<td><a href="http://www.kitsapgov.com/hs/krc/recoveryctr.htm">www.kitsapgov.com/hs/krc/recoveryctr.htm</a></td>
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<td>COURTNEY OLIVER CLINICAL SUPERVISOR</td>
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<td>MAILING ADDRESS</td>
<td>31912 LITTLE BOSTON RD NE</td>
<td>KINGSTON, WA 98346</td>
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<td>DUI ASSESSMENT</td>
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<td>LEVEL I OUTPATIENT</td>
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<td>LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>200108</td>
<td>RMH SERVICES</td>
<td>1933 4TH STREET</td>
<td>BREMERTON, WA 98337</td>
<td>(360) 479-4959</td>
<td>ELLEN EPSTEIN DIRECTOR</td>
</tr>
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<td><a href="http://www.ellenepstein@yahoo.com">www.ellenepstein@yahoo.com</a></td>
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<td>MAILING ADDRESS</td>
<td>1933 4TH STREET</td>
<td>BREMERTON, WA 98337</td>
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</tbody>
</table>
KITSAP

CERTIFIED SERVICES

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

110900
SUQUAMISH TRIBE WELLNESS PROGRAM
18490 SQUAMISH 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

MENTAL HEALTH SERVICES:
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

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

042900
THE RIGHT CHOICE COUNSELING SERVICE, INC.
1740 NORTHEAST RIDDELL ROAD, SUITE 170
BREMERTON, WA 98310
(360) 373-4077

W. KENT LOVELESS
ADMINISTRATOR

MAILING ADDRESS
1740 NE RIDDELL RD, STE 170
BREMERTON, WA 98310

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT

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
KITSAP

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

169700
WEST SOUND TREATMENT CENTER - POULSBO
19351 8TH AVENUE NE, SUITE 204
POULSBO, WA 98370
(360) 598-3929
ONDREA MCCOURRY
EXECUTIVE DIRECTOR
DARCY ALLBEE
CLINICAL SUPERVISOR

MAILING ADDRESS
1415 LUMSDEN RD
PORT ORCHARD, WA 98367

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

KITTITAS

200301
COMPREHENSIVE HEALTHCARE - CLE ELUM
402 EAST 1ST STREET
CLE ELUM, WA 98922
(509) 674-2340
WWW.COMPHC.ORG
HARRY KRAMER
VICE PRESIDENT
RON GENGLER
COO/MH CLINICAL SUPERVISOR

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
RICK WEAVER
PRESIDENT/CEO
RON GENGLER
COO/MH CLINICAL SUPERVISOR

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

MIKE NORTON
ADMINISTRATOR

REBECCA TWOHY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

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

164500
ELLIE LORENZ COUNSELING AND CONSULTING SERVICE
514 EAST 3RD STREET
CLE ELUM, WA 98922
(509) 260-0068

ELLIE LORENZ
OWNER/ADMINISTRATOR

MAILING ADDRESS
9325 UPPER PEOH POINT ROAD
CLE ELUM, WA 98922

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

174000
MERIT RESOURCE SERVICES - ELLENSBURG
507 NANUM STREET, ROOM 30
ELLENSBURG, WA 98926
(509) 925-9821
LORETTA@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 997
SUNNYSIDE, WA 98944
KITTITAS

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

161700
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.
- ELLENSBURG
1206 NORTH DOLARWAY ROAD, SUITE 118
ELLENSBURG, WA 98926
(509) 925-7867
ANDREW TATUM
ADMINISTRATOR
BRANDY MCBRIDE
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 111297
ELLENSBURG, WA 98926

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

KLLUKTAT

115800
COMPREHENSIVE HEALTHCARE - GOLDFANALE
112 WEST MAIN STREET
GOLDFANALE, WA 98620
(509) 773-5801
MIKE NORTON
ADMINISTRATOR
REBECCA TOWHY
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
MIKE NORTON
ADMINISTRATOR
REBECCA TOWHY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INFORMATION AND CRISIS
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

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

LEWIS

146500
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CHEHALIS
500 SOUTHEAST WASHINGTON AVENUE
CHEHALIS, WA 98532
(360) 748-4776
(866) 729-8038
WWW.ABHSINC.NET

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
WITHDRAWAL MANAGEMENT

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

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

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

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

200300
CASCADE MENTAL HEALTH CARE - MORTON
228 WEST MAIN STREET
MORTON, WA 98356
(360) 330-9044
WWW.CASCADEMENTALHEALTH.ORG

RICHARD STRIDE
CEO

MATT PATTEN
CCO/MH CLINICAL SUPERVISOR
LEWIS

MAILING ADDRESS
2428 REYNOLDS AVE
CENTRALIA, WA 98531

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

COMMUNITY ALLIED BEHAVIORAL HEALTH, INC.
135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339

MAILING ADDRESS
135 WEST MAIN STREET
CHEHALIS, WA 98532

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

COMMUNITY ALLIED BEHAVIORAL HEALTH, INC.
135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339

MAILING ADDRESS
135 WEST MAIN STREET
CHEHALIS, WA 98532

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

155800

COMMUNITY ALLIED BEHAVIORAL HEALTH, INC.
135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339

MAILING ADDRESS
135 WEST MAIN STREET
CHEHALIS, WA 98532

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

155800

COMMUNITY ALLIED BEHAVIORAL HEALTH, INC.
135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339

MAILING ADDRESS
135 WEST MAIN STREET
CHEHALIS, WA 98532

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

200370

CORRECT CARE, LLC
20311 OLD HIGHWAY 9 SW
CENTRALIA, WA 98531
(844) 552-4814
MANFERNANDEZ@CORRECTCARERS.COM
WWW.CORRECTCARERS.COM

MAILING ADDRESS
800 FAIRWAY DR STE 490
DEERFIELD BEACH, FL 33441

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

200370

CORRECT CARE, LLC
20311 OLD HIGHWAY 9 SW
CENTRALIA, WA 98531
(844) 552-4814
MANFERNANDEZ@CORRECTCARERS.COM
WWW.CORRECTCARERS.COM

MAILING ADDRESS
800 FAIRWAY DR STE 490
DEERFIELD BEACH, FL 33441

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

200492

EUGENIA CENTER - CHEHALIS BRANCH
151 NORTH MARKET BOULEVARD, BUILDING C
CHEHALIS, WA 98532
(360) 948-0203
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG

MAILING ADDRESS
PO BOX 1371
CHEHALIS, WA 98532

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

MAILING ADDRESS
PO BOX 1371
CHEHALIS, WA 98532

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
COMPETENCY EVALUATION & RESTORATION TREATMENT

054000

EUGENIA CENTER - CHEHALIS MAIN
121 NORTHWEST CHEHALIS AVENUE
CHEHALIS, WA 98532
(360) 740-9767
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG

MAILING ADDRESS
PO BOX 1371
CHEHALIS, WA 98532

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
COMPETENCY EVALUATION & RESTORATION TREATMENT

054000

EUGENIA CENTER - CHEHALIS MAIN
121 NORTHWEST CHEHALIS AVENUE
CHEHALIS, WA 98532
(360) 740-9767
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG

MAILING ADDRESS
PO BOX 1371
CHEHALIS, WA 98532

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
COMPETENCY EVALUATION & RESTORATION TREATMENT
LEWIS

MAILING ADDRESS
PO BOX 1371
CHEHALIS, WA 98532

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

172600
EUGENIA CENTER - MOSSYROCK
230 EAST STATE STREET
MOSSYROCK, WA 98564
(360) 345-1777
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG

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

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

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

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

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

SHIRLEY BIVENS
JUVENILE REHABILITATION COORDINATOR

SHIRLEY BIVINS
JUVENILE REHABILITATION COORDINATOR
## LEWIS

### 05760

**NEW DIRECTIONS COUNSELING - CHEHALIS**  
1956 NORTHEAST KRESKY ROAD  
CHEHALIS, WA 98532  
(360) 740-4380  
(360) 740-1807  
SCOTT M. DICKINSON  
ADMINISTRATOR  
UNKOWN 11/5/09  
CLINICAL SUPERVISOR

**MAILING ADDRESS**  
PO BOX 59  
CHEHALIS, WA 98532

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

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

## LINCOLN

### 00760

**LINCOLN COUNTY ALCOHOL & DRUG CENTER**  
505 1ST STREET  
DAVENPORT, WA 99122  
(509) 725-2111  
WWW.CO.LINCOLN.WA.US  
DARREN MATTOZZI  
EXECUTIVE DIRECTOR  
SUSAN HATTEN  
CLINICAL SUPERVISOR

**MAILING ADDRESS**  
PO BOX 152  
DAVENPORT, WA 99122-0152

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

### 160900

**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT**  
1211 MERRIAM STREET  
DAVENPORT, WA 99122  
(509) 725-3001  
(888) 725-3001  
WWW.CO.STEVENS.WA.US/COUNSELING  
DAVID NIELSEN  
EXECUTIVE DIRECTOR  
DAN PITMAN  
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**  
1211 MERRIAM ST  
DAVENPORT, WA 99122
<table>
<thead>
<tr>
<th>Address</th>
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| **LINCOLN**
| | CERTIFIED SERVICES |
| | SUBSTANCE USE DISORDER SERVICES: |
| | ALCOHOL AND DRUG INFORMATION SCHOOL |
| | DUI ASSESSMENT |
| | LEVEL I OUTPATIENT |
| | LEVEL II INTENSIVE OUTPATIENT |
| | MENTAL HEALTH SERVICES: |
| | BRIEF INTERVENTION TREATMENT |
| | CASE MANAGEMENT |
| | CRISIS EMERGENCY INVOLUNTARY DETENTION |
| | CRISIS OUTREACH |
| | CRISIS PEER SUPPORT |
| | CRISIS STABILIZATION |
| | CRISIS TELEPHONE SUPPORT |
| | DAY SUPPORT |
| | FAMILY THERAPY |
| | GROUP THERAPY |
| | INDIVIDUAL TREATMENT |
| | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT |
| | PSYCHIATRIC MEDICATION |
| | RECOVERY EMPLOYMENT SUPPORT |
| | RECOVERY MEDICATION SUPPORT |
| | RECOVERY PEER SUPPORT |
| | RECOVERY SUPPORT WRAPAROUND FACILITATION |
| **MASON**
| | 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 |
| | RECOVERY SUPPORT WRAPAROUND FACILITATION |
| | CATHOLIC COMMUNITY SERVICES - SHELTON |
| | 601 WEST FRANKLIN STREET |
| | SHELTON, WA 98584 |
| | (888) 322-7156 |
| | HEIDIW@CCSWW.ORG |
| | WWW.CCSWW.ORG/FAMILYPRESERVATION |
| | LAURIE TEBO |
| | CEO |
| | DANIELLE MURPHY |
| | RECOVERY SERVICES MANAGER |
| | MAILING ADDRESS |
| | 5410 N 44TH ST |
| | TACOMA, WA 98407 |
| | CURTIS COMMUNITY SERVICES |
| | 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) |
MASON

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

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

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

DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN
3420 NORTHEAST SAND HILL ROAD
BELFAIR, WA 98528
(360) 725-8628

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

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

DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON
W. 2321 DAYTON AIRPORT ROAD
SHELTON, WA 98584
(360) 725-8628

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

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR
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<td><strong>NEW DIRECTIONS COUNSELING - SHELTON</strong></td>
<td>506 WEST FRANKLIN STREET</td>
<td>(360) 427-5232</td>
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<td>Scott M. Dickinson Administrator</td>
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<td><strong>ALCOHOL AND DRUG INFORMATION SCHOOL</strong></td>
<td>235 SOUTH 3RD STREET</td>
<td>(360) 426-0890</td>
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<td><strong>SKOKOMISH H.O.P.E. ALCOHOL &amp; DRUG PROGRAM</strong></td>
<td>NORTH 551 TRIBAL CENTER ROAD</td>
<td>(360) 877-2008</td>
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<td>Mailing Address: N 80 TRIBAL CENTER RD</td>
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<td>Edward Fox Health Director</td>
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<td>Jared Langton Behavioral Health Services Manager</td>
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<td><strong>SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.</strong></td>
<td>611 WEST COTA STREET</td>
<td>(360) 426-5654</td>
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<td>Andrew Tatum Administrator</td>
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<td>Carol Newton Clinical Supervisor</td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

037400
SQUAXIN ISLAND BEHAVIORAL HEALTH OUTPATIENT PROGRAM
3760 SOUTHEAST OLD OLYMPIC HIGHWAY
SHELTON, WA 98584
(360) 426-1582
(360) 482-2674

MAILING ADDRESS
3760 SE OLD OLYMPIA HWY
SHELTON, WA 98584

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

MENTAL HEALTH SERVICES:

GREG TWIDDY BEHAVIORAL HEALTH MANAGER

168500
TELECARE - MASON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM
601 WEST FRANKLIN STREET, SUITE B
SHELTON, WA 98584
(360) 462-3016
TELECARECORP.COM

MAILING ADDRESS
PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

TYVONNE BERRING ADMINISTRATOR

105800
TRUE NORTH-ESD 113 - MASON
807 WEST PINE STREET
SHELTON, WA 98584
(360) 427-2050

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512

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

ERIN RIFFE ADMINISTRATOR
JACKIE YEE INTERM CLINICAL SUPERVISOR
OKANOGAN

007900  COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - NESPELEM
21 COLVILLE STREET
NESPELEM, WA 99155
(509) 634-2600
(509) 634-2610

MAILING ADDRESS
PO BOX 50
NESPELEM, WA 99155

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

ALISON BALL
HEALTH SERVICES DIRECTOR
CHARLENE SAM
CLINICAL SUPERVISOR

126700  COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - OMAK
507 BENTON STREET
OMAK, WA 98841
(509) 422-7410
(800) 573-9343

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155-0150

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

ALISON BALL
ADMINISTRATOR
CHARLENE SAM
CLINICAL SUPERVISOR

007800  OKANOGAN BEHAVIORAL HEALTHCARE, INC.
1007 KOALA DRIVE
OMAK, WA 98841
(509) 826-6191
AAABRAHAMSON@OKBHC.ORG
WWW.OKBHC.ORG

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:
CASE MANAGEMENT
CRISIS EMERGENCY IN VOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

LISA APPLE
INTERIM CEO
BARNABY DENISON
CLINICAL DIRECTOR (MH CLINICAL SUPERVISOR)

PACIFIC

173400  BASICS NW, LLC - RAYMOND
2570 OCEAN AVENUE
RAYMOND, WA 98577
(360) 915-6868
PKLUS@BASICSNW.COM
WWW.BASICSNW.COM

MAILING ADDRESS
2570 OCEAN AVENUE
RAYMOND, WA 98577

MATTHEW WOODARD
CEO
TIMOTHY GULICK
CLINICAL DIRECTOR
<table>
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<tr>
<th>153600</th>
<th><strong>FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC</strong></th>
<th><strong>MARGARET KURIBAUM</strong></th>
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<tr>
<td>25517 PARK AVENUE</td>
<td><strong>ADMINISTRATOR</strong></td>
<td><strong>JENNIFER HARRIS</strong></td>
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<tr>
<td>OCEAN PARK, WA 98640</td>
<td></td>
<td><strong>SUD CLINICAL SUPERVISOR</strong></td>
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<tr>
<td>(800) 272-3199</td>
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<tr>
<td>(360) 665-4494</td>
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<tr>
<td><a href="mailto:INFO@FREEBYTHESEA.COM">INFO@FREEBYTHESEA.COM</a></td>
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<td><a href="http://WWW.FREEBYTHESEA.COM">WWW.FREEBYTHESEA.COM</a></td>
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</table>

**MAILING ADDRESS**

PO BOX 399
OCEAN PARK, WA 98640

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**

- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

**SUBSTANCE USE DISORDER SERVICES:**

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

**PROBLEM & PATHOLOGICAL GAMBLING SERVICES:**

- PROBLEM & PATHOLOGICAL GAMBLING


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<th><strong>KLEAN LONG BEACH WASHINGTON LLC</strong></th>
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<tr>
<td>211 PIONEER ROAD WEST</td>
<td><strong>EXECUTIVE DIRECTOR</strong></td>
<td><strong>GREGORY LIPPERT</strong></td>
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<tr>
<td>LONG BEACH, WA 98631</td>
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<td><strong>CLINICAL SUPERVISOR</strong></td>
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<tr>
<td>(360) 642-3105</td>
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<td><a href="http://WWW.KLEANTREATMENTCENTERS.COM">WWW.KLEANTREATMENTCENTERS.COM</a></td>
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**MAILING ADDRESS**

211 PIONEER RD W
LONG BEACH, WA 98631

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**

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

**SUBSTANCE USE DISORDER SERVICES:**

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


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<tr>
<td>1006 ROBERT BUSH DRIVE WEST</td>
<td><strong>CEO</strong></td>
<td><strong>BRANDY BRANCH</strong></td>
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<td>SOUTH BEND, WA 98586</td>
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<td><strong>CCO / MH &amp; SUD CLINICAL SUPERVISOR</strong></td>
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<tr>
<td>(360) 397-8246</td>
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<td>(800) 604-0025</td>
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**MAILING ADDRESS**

PO BOX 1678
VANCOUVER, WA 98668

**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

**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 MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
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<td>NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)</td>
<td>11 YOUTH CAMP LANE (MS: B25-2) NASELLE, WA 98638-8600</td>
<td>SPENCER MOOERS PROGRAM MANAGER</td>
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<td>SHOALWATER BAY INDIAN TRIBE</td>
<td>2373 OLD TOKELAND ROAD, BUILDING E TOKELAND, WA 98590</td>
<td>KIM ZILLYETT-HARRIS HEALTH DIRECTOR</td>
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<td>921 COMMERCIAL STREET RAYMOND, WA 98577</td>
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<td>WILLAPA BEHAVIORAL HEALTH - LONG BEACH</td>
<td>2204 PACIFIC HIGHWAY NORTH LONG BEACH, WA 98631</td>
<td>ROBERT CAETANO CEO/FINANCE DIRECTOR</td>
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### PACIFIC

**WILLAPA BEHAVIORAL HEALTH - RAYMOND**

- **Address:** 300 Ocean Avenue, Raymond, WA 98577
- **Phone:** (360) 942-2303

**Mailing Address:**

PO Box 65, South Bend, WA 98586-0065

**Certified Services:**

- **Substance Use Disorder Services:**
  - Alcohol and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient
- **Problem & Pathological Gambling Services:**
  - Problem & Pathological Gambling

**Mental Health Services:**

- **Case Management**
- **Crisis Outreach**
- **Day Support**
- **Individual Treatment**
- **Less Restrictive Alternative (LRA) Support**
- **Psychiatric Medication**
- **Recovery Medication Support**
- **Recovery Peer Support**
- **Recovery Support Wraparound Facilitation**

---

### PEND OREILLE

**PEND OREILLE COUNTY COUNSELING SERVICES - MAIN**

- **Address:** 105 South Garden Avenue, Newport, WA 99156
- **Phone:** (509) 447-5651
- **Toll Free:** (800) 404-5151

**Mail Address:**

PO Box 5055, Newport, WA 99156-5055

**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**
- **Less Restrictive Alternative (LRA) Support**
- **Psychiatric Medication**
- **Recovery Peer Support**
- **Recovery Support Wraparound Facilitation**

---

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

- **Address:** 302 Park Street, Metaline Falls, WA 99153
- **Phone:** (509) 447-5651

**Mail Address:**

PO Box 5055, Newport, WA 99156-5055

**Certified Services:**

- **Substance Use Disorder Services:**
  - DUI Assessment
  - Level I Outpatient
A CHANGE INTO RECOVERY, LLC
719 EAST MAIN AVENUE, SUITE C
PUYALLUP, WA 98372
(253) 841-8165
(253) 841-4818

MAILING ADDRESS
719 E MAIN AVE, STE C
PUYALLUP, WA 98372

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

A FRESH BEGINNING
10202 PACIFIC AVENUE, SUITE 101
TACOMA, WA 98444
(253) 473-1844
ACHANGECOUNSELINGSERVICES@GMAIL.COM

MAILING ADDRESS
10202 PACIFIC AVENUE, SUITE 101
TACOMA, WA 98444

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

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

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

AL'TA COUNSELING AND TESTING
702 BROADWAY, SUITE 102
TACOMA, WA 98402
(253) 365-2000

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
PIERCE

13410
ALTERNATIVE COUNSELING - SPANAWAY
17002 PACIFIC AVENUE SOUTH
SPANAWAY, WA 98387
(253) 538-2323

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

BETTY KASSUHN
ADMINISTRATOR
TORRI VOLEZ
CLINICAL SUPERVISOR

145700
ASIAN COUNSELING TREATMENT SERVICES (ACTS)
8811 SOUTH TACOMA WAY, SUITE 106
LAKEWOOD, WA 98499
(253) 302-3826

MAILING ADDRESS
8811 S TACOMA WAY, STE 106
LAKEWOOD, WA 98499

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
TAE SON LEE
EXECUTIVE DIRECTOR

054700
CASTEELE, WILLIAMS & ASSOCIATES
COMPREHENSIVE BEHAVIORAL HEALTH, INC.
711 SOUTH 25TH STREET, SUITE B
TACOMA, WA 98405
(253) 536-2881
CWACOUNSELING@HOTMAIL.COM

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

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

JOHN L. CASTEELE, JR., PH.D.
EXECUTIVE DIRECTOR
LOUIS WESLEY HORTON
CLINICAL SUPERVISOR

200489
CATHOLIC COMMUNITY SERVICES - RUSTON
5219 NORTH SHIRLEY STREET, SUITE 002
RUSTON, WA 98407
(253) 507-7231
STEPHANIETH@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
5410 N 44TH ST
TACOMA, WA 98407

MARY STONE SMITH
VICE PRESIDENT
DAVID KUCKLICK
SITE DIRECTOR/CLINICAL SUPERVISOR
PIERCER CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200143 CATHOLIC COMMUNITY SERVICES - TACOMA J STREET
1001 NORTH J STREET
TACOMA, WA 98403
(253) 830-6242
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
5410 N 44TH ST
TACOMA, WA 98407

MARY STONE SMITH
VICE PRESIDENT

CERTIFIED SERVICES

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

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

MAILING ADDRESS
5410 NORTH 44TH STREET
TACOMA, WA 98407

MARY STONE SMITH
VICE PRESIDENT

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
5410 N 44TH ST
TACOMA, WA 98407

MARY STONE SMITH
VICE PRESIDENT

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT
088000  CHI YOU CENTER  
4301 SOUTH PINE STREET, SUITE 30-07  
TACOMA, WA 98409  
(206) 356-6934  
JAMES A. MCMURRAY, CDP  
ADMINISTRATOR  
HYUN S. HWANG, CDP  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
3543 OLYMPIC BLVD W  
UNIVERSITY PLACE, WA 98466  

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

090800  COMMUNITY COUNSELING INSTITUTE, INC.  
2502 TACOMA AVENUE  
TACOMA, WA 98402  
(253) 759-0852  
WILLIAM H. JAMES, PH.D, CDP  
EXECUTIVE DIRECTOR  
TERI HANSEN  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
PO BOX 5305  
TACOMA, WA 98415-0305  

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

200298  COMPREHENSIVE LIFE RESOURCES - ADULT OUTPATIENT  
1305 TACOMA AVENUE SOUTH  
TACOMA, WA 98402  
(253) 396-5800  
WWW.COMPREHENSIVELIFERESOURCES.ORG  
KIM ZACHER  
CEO  
KATHY HAGEN  
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES  

MAILING ADDRESS  
1201 S PROCTOR ST  
TACOMA, WA 98405  

CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
SCREENING AND BRIEF INTERVENTION  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  

200184  COMPREHENSIVE LIFE RESOURCES - GIG HARBOR  
5262 OLYMPIC DRIVE NW, SUITE A  
GIG HARBOR, WA 98335  
(253) 396-5800  
WWW.COMPREHENSIVELIFERESOURCES.ORG  
KIM ZACHER  
CEO  
KATHY HAGEN  
DIRECTOR OF ADULT SERVICES  

MAILING ADDRESS  
1201 S PROCTOR ST  
TACOMA, WA 98405
CERTIFIED SERVICES

MENTAL 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

CERTIFIED SERVICES

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

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

200183
COMPREHENSIVE LIFE RESOURCES - PARK PLACE RTF
610 YAKIMA AVENUE
TACOMA, WA 98405
(253) 396-5800
ASTARKEY@CMHSHARE.ORG
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF OUTPATIENT SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS STABILIZATION
- GROUP THERAPY
- 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 SERVICES

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY PEER SUPPORT
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<td>(253) 414-7461</td>
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<td>MARIO E. PAREDES-JOVEL</td>
<td>YVONNE ELMENDORF</td>
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<td>10828 Gravelly Lake Drive SW, Suite 204</td>
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<td>Lakewood, WA 98499</td>
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<td>(253) 473-7474</td>
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<td>JEREMIAH SAUCIER</td>
<td>ERIN TAYLOR</td>
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<td>Tacoma, WA 98406</td>
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<td>(360) 725-8628</td>
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<tr>
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<td>DAWN L. WILLIAMS</td>
<td>BRYAN SMITH</td>
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<td>SUBSTANCE ABUSE ADMINISTRATOR</td>
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<td>9601 Bujacich Road Northwest</td>
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<td>Gig Harbor, WA 98332-8300</td>
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PIERCERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

137600 DOORWAY TO RECOVERY - LAKEWOOD
3888 STEILACOOM BOULEVARD SW
LAKEWOOD, WA 98498
(253) 983-1303
LON BROUSSARD
ADMINISTRATOR
LESLEI J. THIEME
CLINICAL SUPERVISOR
MAILING ADDRESS
879 RAINIER AVE N STE A-103
RENTON, WA 98057

122800 EXODUS COUNSELING AND TREATMENT SERVICES
918 ALDER AVENUE
SUMNER, WA 98390
(253) 891-2662
MARK A. WALRATH
ADMINISTRATOR
LINDA K. WALRATH
CLINICAL SUPERVISOR
MAILING ADDRESS
918 ALDER AVE
SUMNER, WA 98390

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

101700 FOUNDATION FOR MULTICULTURAL SOLUTIONS
2316 SOUTH STATE STREET, SUITE B
TACOMA, WA 98405
(253) 572-3214
PATRICIA NEAGLE
PROGRAM MANAGER
MAILING ADDRESS
2316 S STATE ST STE B
TACOMA, WA 98405
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

GIG HARBOR COUNSELING
5122 OLYMPIC DRIVE NW, SUITE A-105
GIG HARBOR, WA 98335
(253) 851-2552
CHRISTINE LYNCH
EXECUTIVE DIRECTOR
MELODY MCKEE
CLINICAL OPERATIONS MANAGER

MAILING ADDRESS
5122 OLYMPIC DR NW STE A-105
GIG HARBOR, WA 98335

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

GREATER LAKES MENTAL HEALTHCARE - 72ND STREET
1415 EAST 72ND STREET
TACOMA, WA 98404
TERRI CARD
PRESIDENT & CEO

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

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

GREATER LAKES MENTAL HEALTHCARE - MAIN
9330 59TH AVENUE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
HTTP://WWW.GLMHC.ORG/
TERRI CARD
PRESIDENT & CEO
LYNNE PLA
MENTAL HEALTH CLINICAL SUPERVISOR

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

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

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

GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA
9315 GRAVELLY LAKE DRIVE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
WWW.GLMHC.ORG
TERRI CARD
PRESIDENT & CEO
DEANNA CARRON
MH CLINICAL SUPERVISOR
PIERCE

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 LAKWOOD DRIVE SW
LAKEWOOD, WA 98499

TERRI CARD
PRESIDENT & CEO

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

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
CLINIC MANAGER

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
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

MAILING ADDRESS
PO BOX 5245
TACOMA, WA 98415

EXECUTIVE DIRECTOR
NAOMI VILLANO

CLINICAL DIRECTOR (MH & SUD)
MELISSA LAWS

Mental Health Services:
Case Management
Group Therapy
Individual Treatment

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

200053 HOPESPARKS - MAIN
6424 NORTH 9TH STREET
TACOMA, WA 98406

ADMINISTRATOR
JOSEPH LEROY

Mailing Address
6424 NORTH 9TH STREET
TACOMA, WA 98406

Mental Health Services:
Family Therapy
Individual Treatment

200403 HOPESPARKS - PUYALLUP
1420 SOUTH MERIDIAN, SUITE B
PUYALLUP, WA 98371
(253) 845-0864
HTTP://HOPESPARKS.ORG/

ADMINISTRATOR
JOSEPH LEROY

Mailing Address
6424 N. 9TH STREET
TACOMA, WA 98406

Mental Health Services:
Family Therapy
Individual Treatment

200223 IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - LAKewood
8815 SOUTH TACOMA WAY, SUITE 122
Lakewood, WA 98499
(253) 682-0320
(253) 682-0353
INFO@IMAGINEBEHAVIOR.COM
WWW.IMAGINEBEHAVIOR.COM

Executive Director
DR. CHARNA MINTZ

Program Director
RYAN HANNIG

Mailing Address
5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

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

008900 KWAWACHEE COUNSELING CENTER
2209 EAST 32ND STREET, BLDG 4 TREATMENT S VCS
TACOMA, WA 98404-0188
(253) 593-0247

Acting Director/Administrator
JENNIFER LAPointE

Clinical Supervisor
SHAWN SEVERSE
PIERCE

MAILING ADDRESS
2209 E 32ND ST
TACOMA, WA 98404-0188

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

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT

03510
LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLU
405 WEST STEWART AVENUE, SUITE A
PUYALLUP, WA 98371-5164
(253) 840-8687

DEENA DOLE
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

00460
LAKESIDE-MILAM RECOVERY CENTERS, INC. - TACOMA
3315 SOUTH 23RD STREET
TACOMA, WA 98405
(253) 272-2242

RODNEY EHLI
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

20023
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)

20044
MAXIM HEALTHCARE SERVICES, INC.
CONFIDENTIAL LOCATION
(253) 292-4354
STSWIENS@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)

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

ROBERTO TERRONES
PROGRAM DIRECTOR/ADMINISTRATOR

MAILING ADDRESS
721 FAWCETT AVE, SUITE 201
TACOMA, WA 98402

CERTIFIED SERVICES

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

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

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

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
PIERCE

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

200440
MULTICARE BEHAVIORAL HEALTH - MARY BRIDGE
ADOLESCENT
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
MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT – CHILDREN

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

MAILING ADDRESS
325 E PIONEER AVE
PUYALLUP, WA 98372

ROBERT HAMILTON
PROGRAM MANAGER

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

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

160400
MULTICARE BEHAVIORAL HEALTH - TACOMA
2201 SOUTH 19TH STREET, SUITE 104
TACOMA, WA 98405
(253) 697-8507
(253) 697-8494
TIM.HOLMES@MULTICARE.ORG
WWW.MULTICARE.ORG/BEHAVIORAL-HEALTH

MAILING ADDRESS
325 E PIONEER AVE
PUYALLUP, WA 98372

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

164000
NEW FREEDOM RECOVERY CENTER, LLC
10215 214TH AVENUE EAST
BONNEY LAKE, WA 98391
(253) 862-7374

MAILING ADDRESS
10215 214TH AVE E
BONNEY LAKE, WA 98391

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

200431
NORTHWEST INTEGRATED HEALTH - LAKEWOOD
9720 SOUTH TACOMA WAY
LAKEWOOD, WA 98499
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

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

ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCICH
CD PROGRAM MANAGER

JASON JOHNSTONE
ADMINISTRATOR

ROB LONG
EXECUTIVE DIRECTOR & CLINICAL SUPERVISOR

DEREK MURPHY
COO

KIMMY LAKE
SUD PROGRAM MANAGER
<table>
<thead>
<tr>
<th>Code</th>
<th>Address</th>
<th>Director</th>
<th>Program Director</th>
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<td>NORTHWEST INTEGRATED HEALTH - MAIN</td>
<td>DEREK MURPHY</td>
<td>KIMMY LAKE</td>
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<td>3800 3RD STREET SOUTHEAST</td>
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<td>173000</td>
<td>NORTHWEST INTEGRATED HEALTH - TACOMA</td>
<td>DEREK MURPHY</td>
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<td>200097</td>
<td>PEARL STREET CENTER - CLIP</td>
<td>APRIL STALLINGS</td>
<td>DR. MIKE LAEDERICH</td>
<td>MENTAL HEALTH SERVICES:</td>
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<td></td>
<td>815 SOUTH PEARL STREET</td>
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<td>CHILD LONG-TERM INPATIENT PROGRAM (CLIP)</td>
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<td>TACOMA, WA 98465</td>
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<td>(253) 396-5805</td>
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<td><a href="http://WWW.COMPREHENSIVELIFERESOURCES.ORG">WWW.COMPREHENSIVELIFERESOURCES.ORG</a></td>
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<td>146100</td>
<td>PENINSULA COUNSELING, INC.</td>
<td>B.B. BUSKIRK, DDS, MA, CDP</td>
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<td>3214 50TH STREET COURT NW, SUITE D-305</td>
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<td>(253) 851-4600</td>
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<td>GIG HARBOR, WA 98335</td>
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</tbody>
</table>
PIERCE

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

200463  PIERCE COUNTY ALLIANCE - TACOMA CJC
OUTPATIENT
1016 SOUTH 28TH STREET
TACOMA, WA 98409
(253) 572-4750
RHEAPT@P-C-A.ORG
WWW.PIERCECOUNTYALLIANCE.ORG
TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR
CARLINE ROADS
CLINICAL COORDINATOR/SUPERVISOR

MAILING ADDRESS
510 TACOMA AVE S
TACOMA, WA 98402

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

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

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
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<th>Code</th>
<th>Facility Name</th>
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<td>Mailing Address</td>
<td>11012 CANYON RD E STE 8-385</td>
<td>Puyallup, WA 98373</td>
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<td>MELISSA LAWS</td>
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<td>Prosperity Wellness Center - Outpatient Services</td>
<td>12201 PACIFIC AVENUE SOUTH</td>
<td>Tacoma, WA 98444</td>
<td>(253) 536-6425</td>
<td>Melissa Laws</td>
<td>DUI Assessment, Level I Outpatient, Level II Intensive Outpatient, Brief Intervention Treatment, Group Therapy, Individual Treatment, Family Therapy, Crisis Peer Support, Individual Treatment</td>
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<td>Remann Hall Alcohol/Drug Development Program (RHADD)</td>
<td>5501 - 6TH AVENUE</td>
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<td>(253) 988-7900</td>
<td>Cathy J. Pearson</td>
<td>DUI Assessment, Level I Outpatient, Level II Intensive Outpatient, Brief Intervention Treatment, Crisis Peer Support, Group Therapy, Individual Treatment, Family Therapy</td>
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<td>200102</td>
<td>RI International - E&amp;T</td>
<td>9601 STEILACOM BOULEVARD SW, BUILDING 27</td>
<td>Lakewood, WA 98498</td>
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<td>Jamie Sellar</td>
<td>Inpatient Evaluation and Treatment - Adult</td>
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<td>Mailing Address</td>
<td>2701 N. 16TH ST, STE. 103</td>
<td>Phoenix, AZ 85006</td>
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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  
MAILING ADDRESS  
2701 N. 16TH ST. STE. 103  
PHOENIX, AZ 85006  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CRISIS STABILIZATION UNIT  

176400  ROYAL LIFE CENTERS, LLC - PUGET SOUND  
1723 BONNEY AVENUE  
SUMNER, WA 98390  
(253) 750-3571  
ADMISSIONS@ROYALCENTERS.COM  
WWW.ROYALLIFECENTERS.COM  
RONDA FISHER  
PROGRAM DIRECTOR  
BRANDY MCBRIDE  
SUD CLINICAL SUPERVISOR  
MAILING ADDRESS  
8649 MARTIN WAY E  
LACEY, WA 98516  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
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’ALLEGGRI  
VICE PRESIDENT OF BEHAVIORAL HEALTH  
MAILING ADDRESS  
8915 14TH AVE S  
SEATTLE, WA 98108  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION
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| 16410         | **SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN**  
1119 TACOMA AVENUE SOUTH  
TACOMA, WA 98402  
(253) 246-6820  
CLAUDIA D'ALLEGRI  
VP, BEHAVIORAL HEALTH  
DEBBIE ANN REED  
CLINICAL SUPERVISOR  
**MAILING ADDRESS**  
8915 14TH AVE S  
SEATTLE, WA 98108  
**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT |
| 127100        | **SEA MAR BEHAVIORAL HEALTH - PUYALLUP**  
12812 101ST AVENUE COURT EAST, SUITE 202  
PUYALLUP, WA 98373  
(253) 864-4770  
CLAUDIA D'ALLEGRI  
ADMINISTRATOR  
JENNY RODRIGUEZ  
CLINICAL SUPERVISOR  
**MAILING ADDRESS**  
8915 14TH AVE S  
SEATTLE, WA 98108  
**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT |
| 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  
MARCHÉ WARD  
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 |
| 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
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<tbody>
<tr>
<td>052102</td>
<td>SEA MAR Residential Alcohol/Drug Treatment - Tacoma</td>
<td>1415 Center Street, Tacoma, WA 98409</td>
<td>(253) 280-9860</td>
<td><a href="http://www.seamar.org">www.seamar.org</a></td>
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<td>MARCHE WARD</td>
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<tr>
<td>016500</td>
<td>Serenity Counseling Services</td>
<td>5005 Pacific Highway East, Suite 20, Fife, WA 98424</td>
<td>(253) 922-6522</td>
<td><a href="http://www.serenity-counseling.com">www.serenity-counseling.com</a></td>
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<td>109600</td>
<td>Social Treatment Opportunity Programs II, Inc. - Puyallup</td>
<td>13921 Meridian Avenue East, Puyallup, WA 98373</td>
<td>(253) 770-4720</td>
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<td>012702</td>
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<td>4301 South Pine Street, Suite 112, Tacoma, WA 98409</td>
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<td>721 SOUTH FAWCETT AVENUE, ROOM 100</td>
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<td>(253) 593-2413</td>
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<td>LAKEWOOD, WA 98499</td>
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<td>(253) 584-3996</td>
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<td>3629 SOUTH D STREET</td>
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<td>TACOMA, WA 98418</td>
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<td>(253) 798-6527</td>
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<td>PO BOX 8867</td>
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<td>STEILACOOM, WA 98388-0670</td>
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PIERCEN

200472  UNIVERSITY OF WASHINGTON AUTISM CENTER - TACOMA
1900 COMMERCE STREET, MDS-101
TACOMA, WA 98402
(253) 692-4711
(877) 408-8922
UWAITISM@UW.EDU
WWW.UWAITISM.ORG

ANNETTE ESTES
DIRECTOR

ASHLEY PENNEY
DIRECTOR OF ABA SERVICES

MAILING ADDRESS
BOX 357920
SEATTLE, WA 98195-7920

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

010200  VETERANS ADMINISTRATION MEDICAL CENTER - AMERICAN LAKE
9600 VETERANS DRIVE
LAKEWOOD, WA 98493
(253) 582-8440

ELISIA YANASAK, PH.D
ADMINISTRATOR

CARL RIMMELE, PH.D
DIRECTOR

MAILING ADDRESS
VA MEDICAL CENTER - AMERICAN LAKE
TACOMA, WA 98493-5000

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

SAN JUAN

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

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

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

147600  COMPASS HEALTH - ORCAS ISLAND
1286 MOUNT BAKER ROAD, SUITE B-209
EASTSOUND, WA 98245
(360) 378-2669
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810
SAN JUAN

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER
LUZELLEN SMITH
PROGRAM MANAGER

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

SKAGIT

200011
BLUE WATER BEHAVIORAL CONSULTING
2405 28TH STREET
ANACORTES, WA 98221
(360) 333-5684
WWW.BLUEWATERABA.COM

MAILING ADDRESS
2405 28TH STREET
ANACORTES, WA 98221

RACHEL WAGNER
OWNER, EXECUTIVE DIRECTOR

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

164800
CATHOLIC COMMUNITY SERVICES - BURLINGTON
614 PETERSON ROAD
BURLINGTON, WA 98233
(360) 757-0131

DONNA WELLS
ADMINISTRATOR
LEX RIVERS
REGIONAL MANAGER
SKAGIT

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

COMPASS HEALTH - MT. VERNON ADULT SERVICES
1100 SOUTH 2ND STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

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

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

COMPASS HEALTH - MT. VERNON CHILD & FAMILY CLINIC
1005 SOUTH 3RD STREET
MOUNT VERNON, WA 98273
(425) 349-6700
WWW.COMPASSHEALTH.ORG

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

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

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

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR
# SKAGIT

## CERTIFIED SERVICES

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<tr>
<th>SUBSTANCE USE DISORDER SERVICES</th>
<th>MENTAL HEALTH SERVICES</th>
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<td>CASE MANAGEMENT</td>
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<td>LEVEL II INTENSIVE OUTPATIENT</td>
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### FOLLMAN AGENCY

<table>
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<tr>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
</tr>
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<tbody>
<tr>
<td>910 SOUTH ANACORTES STREET</td>
<td>(360) 755-1125</td>
<td><a href="mailto:FRONTDESK@FOLLMANAGENCY.COM">FRONTDESK@FOLLMANAGENCY.COM</a></td>
<td><a href="http://WWW.FOLLMANAGENCY.COM">WWW.FOLLMANAGENCY.COM</a></td>
</tr>
<tr>
<td>BURLINGTON, WA 98233</td>
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### MAILING ADDRESS

<table>
<thead>
<tr>
<th>Address</th>
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<tbody>
<tr>
<td>910 S ANACORTES ST</td>
<td>(360) 755-1125</td>
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<tr>
<td>BURLINGTON, WA 98233-3010</td>
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### CERTIFIED SERVICES

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### Mailing Address

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<tr>
<td>910 S ANACORTES ST</td>
<td>(360) 755-1125</td>
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### Folman Agency

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<tbody>
<tr>
<td>KATHY A. FOLLMAN</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td>JAMES H. FOLLMAN</td>
<td>MH &amp; SUD CLINICAL SUPERVISOR</td>
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### Phoenix Recovery Services, LLC

<table>
<thead>
<tr>
<th>Address</th>
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<tbody>
<tr>
<td>1601 EAST COLLEGE WAY, SUITE A</td>
<td>(360) 848-8437</td>
<td></td>
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<tr>
<td>MOUNT VERNON, WA 98273</td>
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### Mailing Address

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<tr>
<td>1601 E COLLEGE WAY STE A</td>
<td>(360) 848-8437</td>
</tr>
<tr>
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### Certified Services

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### Pioneer Center North

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<tr>
<th>Address</th>
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<tr>
<td>1960 THOMPSON DRIVE</td>
<td>(360) 856-3186</td>
<td></td>
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<tr>
<td>SEDRO WOOLLEY, WA 98284</td>
<td></td>
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### Mailing Address

<table>
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<tr>
<th>Address</th>
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<tbody>
<tr>
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<td>(360) 856-3186</td>
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<tr>
<td>SEDRO WOOLLEY, WA 98284</td>
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### Certified Services

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### Personnel

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<tr>
<td>CAROL HUNDAHL</td>
<td>ADMINISTRATOR</td>
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<td>RACHEL ADAMS</td>
<td>CLINICAL SUPERVISOR</td>
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### Pioneer Center North

<table>
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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>ROBERT SULLIVAN</td>
<td>DIRECTOR III</td>
</tr>
<tr>
<td>TORY SANDOZ</td>
<td>CLINICAL PRACTICES MANAGER</td>
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SKAGIT

153000  PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER
201 LILA LANE
BURLINGTON, WA 98233
(360) 757-7738

ROBERT SULLIVAN
DIRECTOR

MAILING ADDRESS
201 LILA LN
BURLINGTON, WA 98233

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS STABILIZATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200264  SEA MAR BEHAVIORAL HEALTH - ANACORTES
1004 M AVENUE, SUITE 107
ANACORTES, WA 98221

WWW.SEAMAR.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

079300  SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON
1010 EAST COLLEGE WAY, SUITE 100
MOUNT VERNON, WA 98273
(360) 428-8912

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

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

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
SKAGIT

200363  SUNRISE SERVICES, INC. - CONCRETE MAIN STREET
45770 MAIN STREET
CONCRETE, WA 98237

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

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

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

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

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

### 156600

**SUNRISE SERVICES, INC. - MOUNT VERNON COLLEGE WAY**  
2500 EAST COLLEGE WAY  
MOUNT VERNON, WA 98273  
(360) 336-3782  
(866) 634-3039  

**HOLLY MORGAN**  
EXECUTIVE ADMINISTRATOR  

**SHAWN (SHAMORA) BEARWOOD**  
MH & SUD CLINICAL DIRECTOR  

**MAILING ADDRESS**  
2500 E COLLEGE WAY  
MOUNT VERNON, WA 98273  

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

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

### 200384

**SUNRISE SERVICES, INC. - SEDRO WOOLEY**  
10210 COLLINS ROAD  
SEDRO WOOLLEY, WA 98284  
INFO@SUNRISEEMAIL.COM  
WWW.SUNRISECOMMUNITYLIVING.COM  

**HOLLY MORGAN**  
EXECUTIVE ADMINISTRATOR  

**SHAWN (SHAMORA) BEARWOOD**  
MH & SUD CLINICAL DIRECTOR  

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

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

### 123800

**SWINOMISH WELLNESS PROGRAM**  
17337 RESERVATION ROAD  
LA CONNER, WA 98257  
(360) 466-7256  
(360) 466-7233  

**JOHN STEPHENS**  
JSTEPHENS@SWINOMISH.NSN.US  

**DAWN LEE**  
PROGRAM/CLINICAL DIRECTOR  

**MAILING ADDRESS**  
17337 RESERVATION ROAD  
LA CONNER, WA 98257  

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

### 200307

**TELECARE - NORTH SOUND EVALUATION & TREATMENT**  
1803 NORTH SOUND DRIVE  
SEDRO WOOLLEY, WA 98284  
(360) 854-7400  

**GREGG VON FEMPE**  
ADMINISTRATOR  

**MAILING ADDRESS**  
1803 NORTH SOUND DRIVE  
SEDRO WOOLLEY, WA 98284  

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

126100  UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM  
       640 STATE ROUTE 20, SUITE A1  
       SEDRO WOOLLEY, WA 98284  
       (360) 854-7130  

       SUSAN DUNTHORNE  
       SOCIAL SERVICES COORDINATOR  

       S. GAYLE ROSE  
       TREATMENT SUPERVISOR  

       MAILING ADDRESS  
       25944 COMMUNITY PLAZA WY  
       SEDRO WOOLLEY, WA 98284  

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

SKAMANIA

010600  SKAMANIA COUNTY COMMUNITY HEALTH  
       710 SOUTHWEST ROCK CREEK DRIVE  
       STEVENSON, WA 98648  
       (509) 427-3850  

       KIRBY RICHARDS, LICSW  
       DIRECTOR  

       TAMARA CISSELL  
       CLINICAL SUPERVISOR  

       MAILING ADDRESS  
       PO BOX 369  
       STEVENSON, WA 98648  

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

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

SNOHOMISH

200503  ALL ABOUT RECOVERY SERVICES  
       1316 WALL STREET, SUITE 2C  
       EVERETT, WA 98201  
       (425) 212-9877  

       ELAINE DREGER  
       ADMINISTRATOR  

       JEANNE MARIE POURROY-CARTER  
       CLINICAL SUPERVISOR  

       MAILING ADDRESS  
       1316 WALL STREET, SUITE 2C  
       EVERETT, WA 98201  

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

054400  ALPINE RECOVERY SERVICES, INC. - ARLINGTON  
       16404 SMOKEY POINT BOULEVARD, SUITE 109  
       ARLINGTON, WA 98223  
       (360) 658-1388  

       LYNN DEE BAUER  
       ADMINISTRATOR  

       MAILING ADDRESS  
       16404 SMOKEY PT BLVD STE 109  
       ARLINGTON, WA 98223
SNOHOMISH

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

132500 ASSESSMENT AND TREATMENT ASSOCIATES - MOUNTLAKE TERRACE
21907 64TH AVENUE W, SUITE 310
MOUNTLAKE TERRACE, WA 98043
(877) 479-5993
STEVE UHRICH
EXECUTIVE DIRECTOR
SHARON FENTON
CLINICAL SUPERVISOR
MAILING ADDRESS
13353 BEL-RED RD STE 101
BELLEVUE, WA 98005
SNOHOMISH

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

125500
BOWEN RECOVERY CENTER
21818 66TH AVENUE WEST, SUITE 4
MOUNTLAKE TERRACE, WA 98043
(425) 787-5833

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

LINDA BOWEN
OWNER/ADMINISTRATOR

200014
BRIDGEWAYS
5801 23RD DRIVE WEST, SUITE 104
EVERETT, WA 98203
(425) 513-8213

MAILING ADDRESS
5801 23RD DRIVE WEST, SUITE 104
EVERETT, WA 98203

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY PEER SUPPORT

DONNA KONICKI
CEO

200140
CATHOLIC COMMUNITY SERVICES - EVERETT AVENUE
1918 EVERETT AVENUE
EVERETT, WA 98201
(425) 257-2111
WWW.CCSWW.ORG

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

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

WILL RICE
REGIONAL CHIEF OF OPERATIONS
KATHY MCNAUGHTON
REGIONAL CLINICAL DIRECTOR

200141
CATHOLIC COMMUNITY SERVICES - EVERETT COLBY AVENUE
2722 COLBY AVENUE, SUITE 610
EVERETT, WA 98201
(360) 676-2164
WWW.CCSWW.ORG

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225

WILL RICE
REGIONAL CHIEF OF OPERATIONS
KATHY MCNAUGHTON
REGIONAL CLINICAL DIRECTOR
### SNOHOMISH

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<tr>
<td><strong>WETMORE AVENUE</strong></td>
<td><strong>2610 WETMORE AVENUE</strong></td>
<td>AGENCY DIRECTOR</td>
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<tr>
<td><strong>EVERETT, WA 98201</strong></td>
<td><strong>EVERETT, WA 98201</strong></td>
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<tr>
<td>(425) 258-5270</td>
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**MAILING ADDRESS**

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

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<tr>
<td><strong>1227 2ND STREET</strong></td>
<td><strong>1227 2ND STREET</strong></td>
<td>AGENCY DIRECTOR</td>
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<td><strong>MARYSVILLE, WA 98270</strong></td>
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<tr>
<td>(360) 651-2366</td>
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**MAILING ADDRESS**

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

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<th>CENTER FOR COUNSELING &amp; HEALTH RESOURCES</th>
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**MAILING ADDRESS**

PO BOX 700
EDMONDS, WA 98020

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<td><strong>EVERETT, WA 98201</strong></td>
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<tr>
<td>(206) 362-7292</td>
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**ADMIN@CHS-NW.ORG**

**WWW.CHSM-NW.ORG**

**RAMONA GRAHAM**

**SUBSTANCE ABUSE DIRECTOR**
MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155

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

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

12600 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 SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

030000 CHOICES ASSESSMENT AND RECOVERY, INC.
11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204
(425) 512-8564

MARIA OVERTON
ADMINISTRATOR
ANTHONY EPPERSON
CLINICAL SUPERVISOR

MAILING ADDRESS
11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204

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

121100 CLEARVIEW COUNSELING
1106 COLUMBIA AVENUE
MARYSVILLE, WA 98270
(360) 653-0374

SCOTT WYKES
EXECUTIVE DIRECTOR
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<td>17240</td>
<td>Coastal Treatment Services, Inc. - Everett ADIS</td>
<td>2520 Colby Avenue, Suite 111, Everett, WA 98201</td>
<td>Margaret Ferris</td>
<td>DUI Assessment</td>
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<tr>
<td>200181</td>
<td>Compass Health - Aurora House</td>
<td>20903 70th Avenue West, Edmonds, WA 98026</td>
<td>Anastasia Alles</td>
<td>Mental Health Services: Case Management, Group Therapy, Individual Treatment, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Medication Support, Residential Treatment Facility</td>
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<tr>
<td>200176</td>
<td>Compass Health - Bailey Center</td>
<td>3322 Broadway, Everett, WA 98201</td>
<td>Anastasia Alles</td>
<td>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</td>
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<td>200177</td>
<td>Compass Health - Dawson Place</td>
<td>1509 California Street, Everett, WA 98201</td>
<td>Anastasia Alles</td>
<td>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</td>
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SNOHOMISH

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

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

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
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
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
200180  COMPASS HEALTH - GREENHOUSE
2735 10TH STREET
EVERETT, WA 98201
(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
CERTIFIED SERVICES
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
ANASTASIA ALLES
CHIEF OPERATING OFFICER
CHRIS STARERS-FOOTE
CLINICAL SUPERVISOR
MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810
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
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<td>4308 76TH STREET NE MARYSVILLE, WA 98270</td>
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<td>(425) 349-6700</td>
<td><a href="http://www.compasshealth.org">www.compasshealth.org</a></td>
<td>ANASTASIA ALLES</td>
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<td>1022 WEST MAIN STREET MONROE, WA 98272</td>
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<td>(425) 349-6700</td>
<td><a href="http://www.compasshealth.org">www.compasshealth.org</a></td>
<td>ANASTASIA ALLES</td>
<td>ERIN WELLS</td>
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<td>200111</td>
<td>COMPASS HEALTH - MUKILTEO E&amp;T</td>
<td>10710 MUKILTEO SPEEDWAY MUKILTEO, WA 98275</td>
<td>MUKILTEO</td>
<td>(425) 349-6200</td>
<td><a href="http://www.compasshealth.org/contact-us/feedback">http://www.compasshealth.org/contact-us/feedback</a></td>
<td>TOM SEBASTIAN</td>
<td>CHRIS STARETS-FOOTE</td>
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<tr>
<td>200175</td>
<td>COMPASS HEALTH - SMOKEY POINT CHILD &amp; FAMILY CLINIC</td>
<td>3320 173RD PLACE NE #F1 ARLINGTON, WA 98223</td>
<td>ARLINGTON</td>
<td>(425) 349-6700</td>
<td><a href="http://www.compasshealth.org">www.compasshealth.org</a></td>
<td>ANASTASIA ALLES</td>
<td>ERIN WELLS</td>
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<td>CHIEF OPERATING OFFICER</td>
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### SNOHOMISH

**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

---

**COMPASS HEALTH - SNOHOMISH ADULT SERVICES**  
221 AVENUE B  
SNOHOMISH, WA 98290  
(425) 349-6700  
WWW.COMPASSHEALTH.ORG

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

**CERTIFIED SERVICES**

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

---

**COMPASS HEALTH - SNOHOMISH TRIAGE**  
3322 BROADWAY  
EVERETT, WA 98201

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

**CERTIFIED SERVICES**

MENTAL HEALTH SERVICES:
- TRIAGE - VOLUNTARY

---

**DOC - MONROE CORRECTIONS CENTER - MSU**  
16700 17TH AVENUE SE  
MONROE, WA 98272-0777  
(360) 725-8628

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

**CERTIFIED SERVICES**

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

---

**DOC - MONROE CORRECTIONS CENTER - SOU SPECIAL OFFENDER UNIT**  
16730 17TH AVENUE S.E.  
MONROE, WA 98272-0777  
(360) 725-8628

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

**CERTIFIED SERVICES**

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

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<td><strong>147300</strong></td>
<td>DOC - MONROE CORRECTIONS CENTER - WSR (WASHINGTON STATE REFORMATORY)</td>
<td>DAWN L. WILLIAMS</td>
<td>SUBSTANCE ABUSE ADMINISTRATOR</td>
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<td><strong>010802</strong></td>
<td>EVERGREEN RECOVERY CENTERS - BUILDING B</td>
<td>LINDA GRANT</td>
<td>CEO</td>
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<tr>
<td></td>
<td>2601 SUMMIT AVENUE, BUILDING B</td>
<td>DALLARIE HORNE-MOSBY</td>
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CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

010801
EVERGREEN RECOVERY CENTERS - BUILDING C
2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407

LINDA GRANT
EXECUTIVE DIRECTOR

JULIA LUGO
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

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

089100
EVERGREEN RECOVERY CENTERS - EVERETT DETOX
2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407
(425) 258-3255

LINDA GRANT
EXECUTIVE DIRECTOR

JIM UPTON
DETOX/HOUSING MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

010803
EVERGREEN RECOVERY CENTERS - EVERETT OUTPATIENT
2732 GRAND AVENUE
EVERETT, WA 98201
(425) 259-5842

LINDA GRANT
EXECUTIVE DIRECTOR

DANIELLE SHANDERA
CLINICAL MANAGER

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598

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

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

162800
EVERGREEN RECOVERY CENTERS - LYNNWOOD DETOX
20508 56TH AVENUE WEST
LYNNWOOD, WA 98036
(425) 678-1390
CHAYES@EVERGREENRC.ORG
WWW.EVERGREENMANOR.ORG

SCOTT JOHNSON
DIRECTOR OF DETOX SERVICES

ROBERT MCCULLOUGH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT
<table>
<thead>
<tr>
<th>Code</th>
<th>Location</th>
<th>Address</th>
<th>Contact</th>
<th>Director(s)</th>
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<tr>
<td>133600</td>
<td>EVERGREEN RECOVERY CENTERS - LYNNWOOD</td>
<td>3810 196TH STREET SW, SUITE 11, LYNNWOOD, WA 98036</td>
<td>(425) 248-4900</td>
<td>LINDA GRANT (EXECUTIVE DIRECTOR), ROBERT MCCULLOUGH (SUD CLINICAL SUPERVISOR/PROGRAM MANAGER)</td>
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<tr>
<td>011200</td>
<td>EVERGREEN HEALTH RECOVERY CENTER, MONROE</td>
<td>17880 147TH STREET SE, MONROE, WA 98272</td>
<td>(360) 794-1405</td>
<td>DAVID ANDERSON (MANAGER)</td>
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<tr>
<td>200194</td>
<td>FAIRFAX BEHAVIORAL HEALTH - EVERETT E&amp;T</td>
<td>916 PACIFIC AVENUE, 7TH FLOOR, EVERETT, WA 98201</td>
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<td>FAIRFAX BEHAVIORAL HEALTH - MONROE E&amp;T</td>
<td>14701 179TH AVENUE SE, MONROE, WA 98272</td>
<td>(425) 821-2000, (800) 435-7221</td>
<td>RICHARD GEIGER (CEO), DR. SAMIR AZIZ (MEDICAL DIRECTOR)</td>
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**CERTIFIED SERVICES**

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

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

**CERTIFIED SERVICES**

**MENTAL HEALTH SERVICES:**
- INPATIENT EVALUATION AND TREATMENT - ADULT
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<td>DR. CHARNA MINTZ EXECUTIVE DIRECTOR</td>
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<td>DANETTE DARROW PROGRAM DIRECTOR</td>
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<td>CHARLOTTE BOOTH EXECUTIVE DIRECTOR</td>
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<td>ALVIN CURRY CLINICAL SUPERVISOR</td>
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SNOHOMISH

MAILING ADDRESS
20815 67TH AVE W STE 201
LYNNWOOD, WA 98036

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

009401
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS
7935 LAKE BALLINGER WAY
EDMONDS, WA 98026-9166
(425) 670-3664
MARY KAY OSHMAN
ADMINISTRATOR
CATHY WERDEN
CLINICAL SUPERVISOR

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

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

004603
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204
(425) 267-9573
MAUREEN FLOREA
ADMINISTRATOR
TOM BLANFORD
CLINICAL SUPERVISOR

MAILING ADDRESS
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204

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

200352
MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH
2621 BICKFORD AVENUE, SUITE C-D
SNOHOMISH, WA 98290
(206) 453-4882
RALPH PAMPINO
CEO

MAILING ADDRESS
3214 W MCGRAW ST STE 212
SEATTLE, WA 98199

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

178300
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - MAIN
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270
(206) 407-3333
(360) 618-6685
NEWLIFERECOVERY@HOTMAIL.COM
WWW.RECOVERNEWLIFE.COM

DIANE BUFORD
CEO
MELANIE KEPLINGER
CLINICAL SUPERVISOR
SNOHOMISH

MAILING ADDRESS
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270

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

114400
PORT GARDNER BAY RECOVERY, INC.
2722 COLBY AVENUE, SUITE 515
EVERETT, WA 98201
(425) 252-4656

MAILING ADDRESS
2722 COLBY AVE STE 515
EVERETT, WA 98201

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

035700
PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES
916 PACIFIC AVENUE
EVERETT, WA 98206
(425) 258-7390
(425) 258-7798

MAILING ADDRESS
PO BOX 1067
EVERETT, WA 98206

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

164200
RECOVERY MATTERS, LLC
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290
(360) 568-9396
RECOVERYMATTERS@OUTLOOK.COM
WWW.RECOVERYMATTERSLLC.COM

MAILING ADDRESS
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290

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

**EXECUTIVE DIRECTOR**  
MICHAEL MCCORMICK  
ELLIS “GRANT” THOMPSON  
**DIRECTOR OF CLINICAL MANAGEMENT**

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

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

---

**166400 RYTHEM - MUKILTEO**  
315 LINCOLN AVE, SUITE C1  
MUKILTEO, WA 98275  
(206) 525-5050  

**CEO/EXECUTIVE DIRECTOR**  
KAREN BRADY  
**CLINICAL SUPERVISORS**  
YVETTE LUDVIK - JESSICA GLOVER

**MAILING ADDRESS**  
2400 NE 95TH ST  
SEATTLE, WA 98115

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

**CLINICAL DIRECTOR**  
HARRIET YURCHAK, BSW, RC  
**CD TREATMENT SUPERVISOR**  
LYNDEE RETZLAFF

**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  

**VICE PRESIDENT OF BEHAVIORAL HEALTH**  
CLAUDIA D’ALLEGRI  
**CLINICAL SUPERVISOR**  
ELIANA HAFNNER

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

**CERTIFIED SERVICES**  
SUBSTANCE USE DISORDER SERVICES:  
MENTAL HEALTH SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT
<table>
<thead>
<tr>
<th>Site ID</th>
<th>Location</th>
<th>Address</th>
<th>Contact Person</th>
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</thead>
<tbody>
<tr>
<td>200334</td>
<td>SNOHOMISH</td>
<td>SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD &amp; FAMILY</td>
<td>CLAUDIA D'ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
<td>(253) 312-0277</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
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<tr>
<td>200335</td>
<td>SNOHOMISH</td>
<td>SEA MAR BEHAVIORAL HEALTH - EVERETT IOP</td>
<td>CLAUDIA D'ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
<td>(253) 312-0277</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT, PSYCHIATRIC MEDICATION</td>
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<tr>
<td>139100</td>
<td>SNOHOMISH</td>
<td>SEA MAR BEHAVIORAL HEALTH - LYNNWOOD</td>
<td>CLAUDIA D'ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
<td>(253) 977-2560</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT, PSYCHIATRIC MEDICATION</td>
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<tr>
<td>104600</td>
<td>SNOHOMISH</td>
<td>SEA MAR BEHAVIORAL HEALTH - MONROE</td>
<td>CLAUDIA D'ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
<td>(360) 805-3122</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL, DUI ASSESSMENT, LEVEL I OUTPATIENT, LEVEL II INTENSIVE OUTPATIENT</td>
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SNOHOMISH

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
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
KMERCIE@SMOKEYPOINTBEHAVIORALHOSPITAL.COM
WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM

MAILING ADDRESS
3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT – CHILDREN

200112
SNOHOMISH COUNTY HUMAN SERVICES
3000 ROCKFELLER AVENUE
EVERETT, WA 98201
(425) 388-7402
HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-

MAILING ADDRESS
300 ROCKFELLER AVE, MS 305
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION

081300
STILLAGUAMISH TRIBE OF INDIANS
17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

MAILING ADDRESS
17014 59TH AVE NE
ARLINGTON, WA 98223

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

081300
STILLAGUAMISH TRIBE OF INDIANS
17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

MAILING ADDRESS
17014 59TH AVE NE
ARLINGTON, WA 98223

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

174400
SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY
1718 BROADWAY
EVERETT, WA 98201
(425) 595-5200

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
EXECUTIVE ADMINISTRATOR
SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR
SNOHOMISH

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

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

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

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

CERTIFIED SERVICES
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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

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

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

200324
SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE
6505 218TH STREET SW, SUITES 6 &AMP; 7
MOUNTLAKE TERRACE, WA 98043
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR
SNOHOMISH

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

200318  SUNRISE SERVICES, INC. - STANWOOD
9527 271ST STREET NW
STANWOOD, WA 98292
(360) 926-8490
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

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

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

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

MAILING ADDRESS
21601 76TH AVENUE WEST
EDMONDS, WA 98026

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

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

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

MAILING ADDRESS
PO BOX 491
MUKILTEO, WA 98275

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

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

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

MAILING ADDRESS
PO BOX 491
MUKILTEO, WA 98275

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

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

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

MAILING ADDRESS
PO BOX 491
MUKILTEO, WA 98275

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

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

MAILING ADDRESS
PO BOX 491
MUKILTEO, WA 98275

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

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

TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES
2821 MISSION HILL ROAD
TULALIP, WA 98270
(360) 716-4400
(360) 716-4343

CARRIE JONES (INTERIM)
ADMINISTRATOR
GINA SKINNER
CDP CLINICAL SUPERVISOR

MAILING ADDRESS
2821 MISSION HILL RD
TULALIP, WA 98270

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

MENTAL HEALTH SERVICES:
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION

VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES
2802 BROADWAY
EVERETT, WA 98201

MAILING ADDRESS
2802 BROADWAY
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CRISIS TELEPHONE SUPPORT

YWCA OF SNOHOMISH COUNTY - EVERETT
3301 BROADWAY
EVERETT, WA 98201

MAILING ADDRESS
3301 BROADWAY
EVERETT, WA 98201

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

YWCA OF SNOHOMISH COUNTY - LYNNWOOD
19703 68TH STREET
LYNNWOOD, WA 98036

MARY ANN DILLON
SENIOR REGIONAL DIRECTOR
SNOHOMISH

MAILING ADDRESS
3301 BROADWAY
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

SPOKANE

051201

ABSTEMIOUS OUTPATIENT CLINIC, INC.
10525 EAST MAIN AVENUE
SPOKANE VALLEY, WA 99206
(509) 927-7814

Mailing Address
10525 EAST MAIN AVENUE
SPOKANE VALLEY, WA 99206

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

Ron Phelps
Executive Director
Kim Putney
Clinical Supervisor

107700

ADEPT ASSESSMENT CENTER - SPOKANE
1321 NORTH ASH STREET
SPOKANE, WA 99201
(509) 327-3120
(509) 327-3163

Mailing Address
1321 N ASH ST
SPOKANE, WA 99201

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

Shana Windhorst
Administrator
Jamie Zaborac
Clinical Supervisor

096700

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - COZZA MAIN
44 EAST COZZA DRIVE
SPOKANE, WA 99208
(509) 325-6800
(866) 729-8038
WWW.ABHSINC.NET

Mailing Address
PO BOX 141108
SPOKANE VALLEY, WA 99214

Certified Services
Substance Use Disorder Services:
DUI Assessment
Intensive Inpatient
Level I Outpatient
Level II Intensive Outpatient
Long-Term Residential
Recovery House
Withdrawal Management

Mental Health Services:
Case Management
Family Therapy
Group Therapy
Individual Treatment
Residential Treatment Facility
SPOKANE

134200  AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - MISSION
12715 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 232-5766
(866) 729-8038

JOHN TAYLOR
ADMINISTRATOR
DEXTER BAKER, CARRIE SUAZO
CLINICAL SUPERVISORS

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

177200  AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SPOKANE OUTPATIENT
715 EAST SPRAGUE AVENUE #107
SPOKANE, WA 99202
(509) 232-5766

JOHN TAYLOR
ADMINISTRATOR
ANGELA MELLO
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

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 E. 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:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

ALCOHOL AND DRUG INFORMATION SCHOOL

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<th>Location</th>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
<th>Contact Person</th>
<th>Position</th>
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<tbody>
<tr>
<td>SPOKANE</td>
<td>BREAKTHROUGH RECOVERY GROUP</td>
<td>11711 EAST SPRAGUE AVENUE, SUITE D4&lt;br&gt;SPOKANE VALLEY, WA 99206</td>
<td>(509) 927-6838</td>
<td></td>
<td></td>
<td>LISA PARKER</td>
<td>ADMINISTRATOR&lt;br&gt;ANDREA FORAN&lt;br&gt;CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>11711 E SPRAGUE AVE STE D4&lt;br&gt;SPOKANE VALLEY, WA 99206</td>
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<td>SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;ALCOHOL AND DRUG INFORMATION SCHOOL&lt;br&gt;DUI ASSESSMENT&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>CAMAS PATH BHS - AIRWAY HEIGHTS</td>
<td>934 SOUTH GARFIELD ROAD&lt;br&gt;AIRWAY HEIGHTS, WA 99001</td>
<td>(509) 789-7630</td>
<td></td>
<td>KELLI GEORGE</td>
<td>CLINICAL MANAGER&lt;br&gt;SHELLEY ETHRINGTON&lt;br&gt;CLINICAL SUPERVISOR</td>
<td></td>
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<tr>
<td></td>
<td>Mailing Address</td>
<td>934 S GARFIELD RD&lt;br&gt;AIRWAY HEIGHTS, WA 99001</td>
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<td>Certified Services</td>
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<td>SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;DUI ASSESSMENT&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES</td>
<td>2911 WEST FORT WRIGHT DRIVE&lt;br&gt;SPOKANE, WA 99210</td>
<td>(509) 358-4250</td>
<td><a href="mailto:MIRWIN@CCSPOKANE.ORG">MIRWIN@CCSPOKANE.ORG</a>&lt;br&gt;WWW.CATHOLICCHARITIESSPOKANE.ORG</td>
<td>JERRY SCHWAB</td>
<td>DIRECTOR&lt;br&gt;JEFF BRENO&lt;br&gt;ASSISTANT DIRECTOR</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td>2911 WEST FORT WRIGHT DRIVE&lt;br&gt;SPOKANE, WA 99210</td>
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<td>Certified Services</td>
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<td>MENTAL HEALTH SERVICES:&lt;br&gt;BRIEF INTERVENTION TREATMENT&lt;br&gt;CASE MANAGEMENT&lt;br&gt;FAMILY THERAPY&lt;br&gt;GROUP THERAPY&lt;br&gt;INDIVIDUAL TREATMENT</td>
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<td>CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN</td>
<td>12 EAST 5TH AVENUE&lt;br&gt;SPOKANE, WA 99210</td>
<td>(509) 358-4250</td>
<td><a href="mailto:DEVELOPMENT@CCSPOKANE.ORG">DEVELOPMENT@CCSPOKANE.ORG</a>&lt;br&gt;WWW.CATHOLICCHARITIESSPOKANE.ORG</td>
<td>ROB MCCANN</td>
<td>EXECUTIVE DIRECTOR</td>
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<tr>
<td></td>
<td>Mailing Address</td>
<td>PO BOX 2253&lt;br&gt;SPOKANE, WA 99210</td>
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</table>
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

CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE COOK STREET
4001 North Cook Street
Spokane, WA 99207
(509) 747-4174
WWW.CHILDERNSHOMESOCIETY.ORG
WWW.CHS-WA.ORG

Libby Hein
Chief Program Officer
Eric Stapleton
Clinical Supervisor

Mailing Address
2323 N Discovery Place
Spokane Valley, WA 99216

Certified Services
Mental Health Services:
- Brief Intervention Treatment
- Case Management
- Family Therapy
- Group Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support

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

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
SPOKANE

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

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

MAILING ADDRESS
PO BOX 212
MEDICAL LAKE, WA 99022

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

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 SERVICES
SUBSTANCE USE DISORDER SERVICES:
- RECOVERY HOUSE

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
SPOKANE

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
YOUTH RESIDENTIAL

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

DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT
200 NORTH MULLAN ROAD, SUITE 120
SPOKANE VALLEY, WA 99206
(509) 927-1688
WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR
DAWN FLEES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

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

DISCOVERY COUNSELING GROUP
222 WEST MISSION AVENUE, SUITE 30
SPOKANE, WA 99201
(509) 413-1193

MELISSA MACE
EXECUTIVE DIRECTOR
JADE BRUNNEMANN, CP60367103
ADIS INSTRUCTOR

MAILING ADDRESS
222 W MISSION AVE, SUITE 30
SPOKANE, WA 99201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
075700  DOC - AIRWAY HEIGHTS CORRECTIONS CENTER  
11929 WEST SPRAGUE AVENUE  
AIRWAY HEIGHTS, WA 99001-6710  
(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:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
LONG-TERM RESIDENTIAL  

076000  DOC - BROWNSTONE WORK RELEASE  
223 SOUTH BROWNE STREET  
SPOKANE, WA 99201  
(360) 725-8423  
COURTNEY.EVERSON@DOC.WA.GOV  
WWW.DOC.WA.GOV  

DAWN L. WILLIAMS  
SUBSTANCE ABUSE ADMINISTRATOR  

BRYAN SMITH  
CLINICAL SUPERVISOR  

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

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

026802  DOC - ELEANOR CHASE WORK RELEASE  
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 SERVICES  
SUBSTANCE 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  

SCOTT DAVIS  
COO (SUD CLINICAL SUPERVISOR)  

MAILING ADDRESS  
3754 W INDIAN TRAIL RD  
SPOKANE, WA 99208
<table>
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<td><strong>MENTAL HEALTH SERVICES:</strong></td>
<td><strong>CASE MANAGEMENT</strong>&lt;br&gt;<strong>CRISIS OUTREACH</strong>&lt;br&gt;<strong>CRISIS PEER SUPPORT</strong>&lt;br&gt;<strong>CRISIS TELEPHONE SUPPORT</strong>&lt;br&gt;<strong>DAY SUPPORT</strong>&lt;br&gt;<strong>FAMILY THERAPY</strong>&lt;br&gt;<strong>GROUP THERAPY</strong>&lt;br&gt;<strong>INDIVIDUAL TREATMENT</strong>&lt;br&gt;<strong>LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT</strong>&lt;br&gt;<strong>PSYCHIATRIC MEDICATION</strong>&lt;br&gt;<strong>RECOVERY MEDICATION SUPPORT</strong>&lt;br&gt;<strong>RECOVERY PEER SUPPORT</strong>&lt;br&gt;<strong>RECOVERY SUPPORT WRAPAROUND FACILITATION</strong>&lt;br&gt;<strong>RESIDENTIAL TREATMENT FACILITY</strong></td>
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<td><strong>200478 EXCELSIOR YOUTH CENTER - SPOKANE BRANCH</strong></td>
<td><strong>ANDREW HILL</strong>&lt;br&gt;CEO&lt;br&gt;<strong>SARA SCHUMACHER</strong>&lt;br&gt;VP BH SERVICES (MH CLINICAL SUPERVISOR)</td>
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<td><strong>Mailing Address</strong></td>
<td>3754 W INDIAN TRAIL RD&lt;br&gt;SPOKANE, WA 99208</td>
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<td><strong>200430 FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD</strong></td>
<td><strong>JEFF THOMAS</strong>&lt;br&gt;CEO&lt;br&gt;<strong>JANNO SCHEER</strong>&lt;br&gt;WISE SUPERVISOR II</td>
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<td><strong>Mailing Address</strong></td>
<td>107 S DIVISION ST&lt;br&gt;SPOKANE, WA 99202</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
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<td><strong>012200 FRONTIER BEHAVIORAL HEALTH - BOONE</strong></td>
<td><strong>JEFF THOMAS</strong>&lt;br&gt;CEO/ADMINISTRATOR&lt;br&gt;<strong>STEFANIE TIEGTE</strong>&lt;br&gt;SUD CLINICAL SUPERVISOR</td>
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<td><strong>Mailing Address</strong></td>
<td>127 WEST BOONE AVENUE&lt;br&gt;SPOKANE, WA 99201</td>
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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

FRONTIER BEHAVIORAL HEALTH - CALISPEL E&T
1401 NORTH CALISPEL STREET
SPOKANE, WA 99201

JEFF THOMAS
CEO/ADMINISTRATOR

200207

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

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

FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY
131 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

200198

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
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FAMILY THERAPY
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LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB
2102 EAST SPRAGUE AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

200193
SPOKANE

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

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

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 TELEPHONE SUPPORT
- CRISIS STABILIZATION
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION
FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD
5901 NORTH LIDGERWOOD STREET, SUITE 115
SPOKANE, WA 99208
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

AILEEN HETRICK
MH CLINICAL SUPERVISOR

FRONTIER BEHAVIORAL HEALTH - MAIN
107 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIEGTE
SUD CLINICAL SUPERVISOR

FRONTIER BEHAVIORAL HEALTH - NORTH PINES
317 NORTH PINES ROAD
SPOKANE VALLEY, WA 99206
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS 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
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
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MENTAL HEALTH SERVICES:
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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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
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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 TITGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
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SPOKANE

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

Neale 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

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

Dr. Charna Mintz
Executive Director
Rick Justus
Program Director

200080
INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE
720 WEST BOONE AVENUE, SUITE 101
SPOKANE, WA 99201

Mailing Address
720 WEST BOONE AVENUE, SUITE 101
SPOKANE, WA 99201

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

Charlotte Booth
Executive Director

019701
ISABELLA HOUSE
2308 WEST 3RD AVENUE
SPOKANE, WA 99201
(509) 624-1244

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
- Recovery Medication Support
- Residential Treatment Facility

Art Jacobs
Administrator
Fariba Nikdel
SUD Clinical Supervisor
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<td>4324 NORTH JEFFERSON STREET</td>
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<td>210 WEST SPRAGUE AVENUE</td>
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<td><a href="mailto:LCSNW@LCSNW.ORG">LCSNW@LCSNW.ORG</a></td>
<td>(509) 797-8224</td>
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<td>(509) 325-5502</td>
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<td>ALICE BUCKLES</td>
<td><a href="http://WWW.NEWHORIZONCARECENTERS.ORG">WWW.NEWHORIZONCARECENTERS.ORG</a></td>
<td>(509) 838-6092</td>
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NEW HORIZON COUNSELING SERVICES - VALLEY
OFFICE
15407 EAST MISSION AVENUE, SUITE 100
SPOKANE VALLEY, WA 99037
(509) 927-1543

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:

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

ALICE BUCKLES
PROGRAM ADMINISTRATOR
BRADLEY EYLAR
CLINICAL SUPERVISOR

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

DAVID NIELSEN
EXECUTIVE DIRECTOR
DAN PITMAN
SUD CLINICAL SUPERVISOR

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

JIM MATTHEWS
PROGRAM MANAGER
DANA STEVENS
DIRECTOR OF CLINICAL SERVICES
CERTIFIED SERVICES

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

200249
NORTHWEST AUTISM CENTER - SPOKANE MAIN
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202
(509) 328-1582
INFO@NWAUTISM.ORG
HTTP://SANDBOX.NWAUTISM.ORG

MAILING ADDRESS
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202

ADAM KOGLER
OPERATIONS AND FINANCIAL OFFICER

CERTIFIED SERVICES

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

098700
PARTNERS WITH FAMILIES AND CHILDREN
1321 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(509) 473-4810
WWW.PARTNERSWITHFAMILIES.ORG

MAILING ADDRESS
1321 W BROADWAY AVE
SPOKANE, WA 99201

CAROL PLISCHKE
EXECUTIVE DIRECTOR

KOLLEEN SEWARD
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES

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

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

200093
PASSAGES FAMILY SUPPORT
1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202
(509) 892-9241
INFORMATION@PASSAGESFS.ORG
WWW.PASSAGES-SPOKANE.ORG

MAILING ADDRESS
1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202

REBECCA BATES
EXECUTIVE DIRECTOR

MISTY SOUTHALL
CLINICAL SUPERVISOR

CERTIFIED SERVICES

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

MAILING ADDRESS
1050 NORTH ARGONNE ROAD, SUITE 102
SPOKANE VALLEY, WA 99212

AMIKA TANIGUCHI
STATE DIRECTOR

MARK MCENDERFER
TEAM LEAD
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

HARRY ROSENKRANTZ
DIRECTOR
KEITH BRYANT
CLINICAL PRACTICES MANAGER

MAILING ADDRESS
PO BOX 9838
SPOKANE, WA 99209

CERTIFIED SERVICES

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

172900
PIONEER COUNSELING SERVICES - SPOKANE
910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201
(509) 325-7232

KATRINA HENDRICKSON
DIRECTOR
CARA STRANGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201

CERTIFIED SERVICES

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

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

200439
PIONEER HUMAN SERVICES - SPOKANE RESIDENTIAL REENTRY CENTER
925 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(253) 274-0484
HTTP://PIONEERHUMANSERVICES.ORG

MAILING ADDRESS
758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

200100
PROVIDENCE SACRED HEART MEDICAL CENTER - E&T
101 WEST 8TH AVENUE
SPOKANE, WA 99204
SPOKANE

MAILING ADDRESS
101 WEST 8TH AVENUE
SPOKANE, WA 99204

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

200099
PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT
101 WEST 8TH AVENUE
SPOKANE, WA 99204

MAILING ADDRESS
101 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
PSYCHIATRIC MEDICATION

035100
RIVERSIDE RECOVERY CENTER, INC.
3710 NORTH MONROE STREET
SPOKANE, WA 99205
(509) 328-5234

MAILING ADDRESS
3710 N MONROE ST
SPOKANE, WA 99205

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

176600
ROYAL LIFE CENTERS, LLC - CASCADE
14525 NORTH NEWPORT HIGHWAY
MEAD, WA 99021
(509) 340-9643
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

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

176700
ROYAL LIFE CENTERS, LLC - SPOKANE DETOX
524 EAST FRANCIS AVENUE
SPOKANE, WA 99208
(509) 919-4150
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

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

200388
SOAR BEHAVIOR SERVICES
CONFIDENTIAL LOCATION
(509) 999-5657
INFO@SOARBEHAVIOR.COM
WWW.SOARBEHAVIOR.COM

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 BLG., SUITE 206
SPOKANE, WA 99202
(509) 927-3668
ANDREW TATUM
ADMINISTRATOR
BRAD BRESOLIN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

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

012102
SPARC - CHRISTOPH HOUSE
1403 WEST 7TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-3251
MARK BROWNLOW
ADMINISTRATOR
BRANDY WOODS
CLINICAL SUPERVISOR

MAILING ADDRESS
812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
RECOVERY HOUSE

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 SERVICES
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<td>1509 WEST 8TH AVENUE</td>
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<td>200118</td>
<td>SPOKANE COUNTY DETENTION SERVICES</td>
<td>1100 WEST MALLON AVENUE</td>
<td>SPOKANE, WA 99260</td>
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<td>KRISTINA RAY</td>
<td>MENTAL HEALTH MANAGER</td>
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<td>200119</td>
<td>SPOKANE COUNTY JUVENILE COURT SERVICES</td>
<td>902 NORTH ADAMS STREET</td>
<td>SPOKANE, WA 99260</td>
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<td>BONNIE BUSH</td>
<td>ADMINISTRATOR</td>
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</tr>
</tbody>
</table>
### 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  
[Website](http://www.spokeancounty.org/3155)

**Mailing Address**
327 West 8th Avenue  
SPOKANE, WA 99204

**Certified Services**
MENTAL HEALTH SERVICES:
- Case Management

---

**136200**

**Spokane Public Schools - District 81**
200 North Bernard Street  
SPOKANE, WA 99201  
(509) 354-7946  
KEVINMOR@SPOKANESCHOOLS.ORG  
[Website](http://www.spokeanschools.org)

**Mailing Address**
200 N Bernard St  
SPOKANE, WA 99201

**Certified Services**
MENTAL HEALTH SERVICES:
- Case Management

---

**011300**

**Spokane Regional Health District Treatment Services**
1101 West College Avenue  
SPOKANE, WA 99201-2095  
(509) 324-1420

**Mailing Address**
1101 West College Avenue  
SPOKANE, WA 99201-2095

**Certified Services**
MENTAL HEALTH SERVICES:
- Brief Intervention Treatment
- Case Management
- Family Therapy
- Group Therapy
- Individual Treatment

---

**012000**

**Spokane Treatment & Recovery Services**
312 West 8th Avenue  
SPOKANE, WA 99204  
(509) 477-4631  
(509) 477-4650

**Mailing Address**
312 West 8th Avenue  
SPOKANE, WA 99204

**Certified Services**
MENTAL HEALTH SERVICES:
- Brief Intervention Treatment
- Case Management
- Family Therapy
- Individual Treatment

**Substance Use Disorder Services**
- Level I Outpatient
- Opiate Substitution Treatment
MAILING ADDRESS
PO BOX 2845
SPOKANE, WA 99220-2845

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- EMERGENCY SERVICE PATROL
- LEVEL I 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 DIBIAE
CLINIC DIRECTOR
DAVID P. ROBINSON
CLINICAL SUPERVISOR

MAILING ADDRESS
15812 E INDIANA AVE, STE 100
SPOKANE VALLEY, WA 99216

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

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

083800
SUN RAY COURT
518 SOUTH BROWNE STREET
SPOKANE, WA 99202
(509) 456-5465

THOMAS L. COOK
BRANCH ADMINISTRATOR

MAILING ADDRESS
PO BOX 4627
SPOKANE, WA 99220-0627

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

200280
SUNSHINE BEHAVIORAL HEALTH
1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206
(509) 892-4342

RON SIMPSON
ADMINISTRATOR

MAILING ADDRESS
1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RESIDENTIAL TREATMENT FACILITY
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046200  THE HEALING LODGE - BUTTERFLY PELPALWİCHİYA 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

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
SPOKANE

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

STEVENS

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

MAILING ADDRESS
PO BOX 905
CHEWELAH, WA 99109-0905

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS 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

MAILING ADDRESS
165 E HAWTHORNE AVE
COLVILLE, WA 99114

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
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GROUP THERAPY
INDIVIDUAL TREATMENT
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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@STEVENSCOUNTYWA.GOV
WWW.CO.STEVENSWA.US/COUNSELING/index.htm

DAVID M. NIELSEN, PH.D.
EXECUTIVE DIRECTOR
D. LYNN GUHLKE
MENTAL HEALTH CLINICAL DIRECTOR

MAILING ADDRESS
165 E HAWTHORNE AVE
COLVILLE, WA 99114

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

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 & C
LACEY, WA 98516
(360) 915-8868
WWW.BASICSNW.COM

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

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

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  BHR RECOVERY SERVICES - TUMWATER
6128 CAPITOL BOULEVARD S.E.
TUMWATER, WA 98501
(360) 704-7170

MAILING ADDRESS
6128 CAPITOL BLVD SE
TUMWATER, WA 98501

CERTIFIED SERVICES

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

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<td>200016</td>
<td>CAPITAL RECOVERY CENTER</td>
<td>1000 CHERRY STREET SE OLYMPIA, WA 98501</td>
<td>(360) 464-3880 (360) 357-2582</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT DAY SUPPORT GROUP THERAPY INDIVIDUAL TREATMENT RECOVERY PEER SUPPORT</td>
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<td>1011 10TH AVENUE SOUTHEAST OLYMPIA, WA 98501</td>
<td>(360) 878-8248</td>
<td>MARY STONE SMITH VICE PRESIDENT</td>
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<td>CATHOLIC COMMUNITY SERVICES - YELM</td>
<td>715 EAST YELM AVENUE, SUITE 8 YELM, WA 98597</td>
<td>(360) 878-8248 (888) 322-7156</td>
<td>MARY STONE SMITH VICE PRESIDENT</td>
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<td>711 STATE AVENUE NORTHEAST OLYMPIA, WA 98506</td>
<td>(360) 943-0780</td>
<td>SCOTT HANAUER CEO</td>
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<td>ALICIA FERRIS CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)</td>
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### THURSTON

**MAILING ADDRESS**
711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506

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### 200163

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

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<th>Scott Hanauer</th>
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<tr>
<td>CEO</td>
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<tr>
<td>Alicia Ferris</td>
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### 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

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<tr>
<th>Scott Hanauer</th>
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<tbody>
<tr>
<td>CEO</td>
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<tr>
<td>Dr. Ekaterina Shkurkin</td>
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<td>PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)</td>
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### 200515

**COMMUNITY YOUTH SERVICES - UNION AVENUE**
505 UNION AVENUE SOUTHEAST, 1ST FLOOR
OLYMPIA, WA 98501
(360) 943-0780
(360) 918-7860
TAY@COMMUNITYYOUTHSERVICES.ORG
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<td>Dr. Ekaterina Shkurkin</td>
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<td>PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)</td>
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### 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

### 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
<table>
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<tr>
<th>Location</th>
<th>Name</th>
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<th>Services</th>
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<tr>
<td>THURSTON</td>
<td>CRISIS CLINIC OF THURSTON AND MASON COUNTIES</td>
<td>(360) 586-2800, (360) 586-2898</td>
<td>SUBSTANCE USE DISORDER SERVICES: INFORMATION AND CRISIS</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>PO BOX 13453, OLYMPIA, WA 98508-3453</td>
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<tr>
<td></td>
<td>EXECUTIVE DIRECTOR</td>
<td>ROWEN O’NEILL</td>
<td></td>
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<tr>
<td></td>
<td>BOARD PRESIDENT</td>
<td>KELLY OLSON</td>
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<tr>
<td>CRISIS CLINIC OF THURSTON AND MASON COUNTIES</td>
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<tr>
<td>077400</td>
<td>DOC - CEDAR CREEK CORRECTIONS CENTER</td>
<td>12200 BORDEAUX ROAD, LITTLEROCK, WA 98556, (360) 725-8628</td>
<td>SUBSTANCE ABUSE ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>PO BOX 41123 (MS 41123), OLYMPIA, WA 98504-1123</td>
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<tr>
<td></td>
<td>CLINICAL SUPERVISOR</td>
<td>BRYAN SMITH</td>
<td></td>
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<td>DOC - CEDAR CREEK CORRECTIONS CENTER</td>
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<td>200513</td>
<td>DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT</td>
<td>7345 LINDERSON WAY SOUTHWEST, TUMWATER, WA 98501, (360) 725-8602, (360) 725-8603</td>
<td>PROGRAM ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>PO BOX 41123 (MS 41123), OLYMPIA, WA 98504-1123</td>
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<td>CLINICAL SUPERVISOR</td>
<td>BRYAN SMITH</td>
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<td>DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT</td>
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<tr>
<td>147500</td>
<td>FIRST THINGS FIRST 123, LLC</td>
<td>1905 4TH AVENUE EAST, SUITE B, OLYMPIA, WA 98506, (360) 338-0600, (360) 951-1797</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>1910 4TH AVE E, PMB 42, OLYMPIA, WA 98506</td>
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<tr>
<td></td>
<td>CLINICAL SUPERVISOR</td>
<td>DARRELL R. CHAMBERS</td>
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<tr>
<td>FIRST THINGS FIRST 123, LLC</td>
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<tr>
<td>145800</td>
<td>FREEDOM RECOVERY, LLC</td>
<td>715 EAST YELM AVENUE, SUITE 6, YELM, WA 98597, (253) 961-0116</td>
<td>EXECUTIVE DIRECTOR</td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
<td><a href="mailto:ROBLONG.FRC@COMCAST.NET">ROBLONG.FRC@COMCAST.NET</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CLINICAL SUPERVISOR</td>
<td>JASON JOHNSTONE</td>
<td></td>
</tr>
</tbody>
</table>
THURSTON

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

MAILING ADDRESS
PO BOX 6286
OLYMPIA, WA 98507

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

200076
INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA
204 QUINCE STREET, SUITE 200
OLYMPIA, WA 98506

MAILING ADDRESS
204 QUINCE STREET, SUITE 200
OLYMPIA, WA 98506

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

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

LAURA CAMPBELL
MEMBER/OWNER

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

JOHN SIMMONS
CEO

KELLY KNITTLE
SUD CLINICAL SUPERVISOR

DENNIS NEAL
ADMINISTRATOR
THURSTON

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

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

061600
NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN
2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502
(360) 943-8810
INFO@NWRII.COM
WWW.NWRII.COM

MAILING ADDRESS
2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502

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

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

150700
OLYMPIA SCHOOL DISTRICT STUDENT ASSISTANCE
PROGRAMS
1113 LEGION WAY SE
OLYMPIA, WA 98501
(360) 596-8547

MAILING ADDRESS
1113 LEGION WAY SE
OLYMPIA, WA 98501

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

JEFF CARPENTER
PROGRAM ADMINISTRATOR
CINDY MITCHELL
CLINICAL SUPERVISOR
<table>
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<tr>
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<td>2400 BRISTOL COURT SW, SUITE B</td>
</tr>
<tr>
<td></td>
<td>OLYMPIA, WA 98502</td>
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<tr>
<td></td>
<td>(360) 357-2482</td>
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<td>TERREE SCHMIDT-WHELAN</td>
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<td>ADMINISTRATOR</td>
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<td>JAMES BOYLE</td>
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**MAILING ADDRESS**
2400 BRISTOL CT SW STE B
OLYMPIA, WA 98502

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

<table>
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<tr>
<th>152700</th>
<th>PINNACLE PEAK INSTITUTE, INC.</th>
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<tr>
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<td>1822 BLACK LAKE BOULEVARD, SUITE 101</td>
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<tr>
<td></td>
<td>OLYMPIA, WA 98512</td>
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<tr>
<td></td>
<td>(360) 515-0791</td>
</tr>
<tr>
<td></td>
<td>(360) 704-0086</td>
</tr>
<tr>
<td></td>
<td>JOHN THOMPSON</td>
</tr>
<tr>
<td></td>
<td>ADMINISTRATOR</td>
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</table>

**MAILING ADDRESS**
1822 BLACK LAKE BLVD, STE 101
OLYMPIA, WA 98512

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

<table>
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<th>PROVIDENCE HEALTH &amp; SERVICES BEHAVIORAL HEALTH - CCC BRANCH</th>
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<tr>
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<tr>
<td></td>
<td>(360) 486-6400</td>
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<tr>
<td></td>
<td><a href="mailto:TIMOTHY.LAROCQUE@PROVIDENCE.ORG">TIMOTHY.LAROCQUE@PROVIDENCE.ORG</a></td>
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<td><a href="http://WWW.PROVIDENCE.ORG">WWW.PROVIDENCE.ORG</a></td>
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<tr>
<td></td>
<td>SUE BEALL</td>
</tr>
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<td>SWR DIRECTOR BH SERVICES</td>
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<td>GEORGE CHAPPELL</td>
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<td>MEDICAL DIRECTOR</td>
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**MAILING ADDRESS**
225 STATE AVENUE NORTHEAST
OLYMPIA, WA 98501

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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<tr>
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<td>413 LILLY ROAD NE</td>
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<tr>
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<td>OLYMPIA, WA 98506</td>
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<td><a href="HTTP://WASHINGTON.PROVIDENCE.ORG">HTTP://WASHINGTON.PROVIDENCE.ORG</a></td>
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**MAILING ADDRESS**
413 LILLY ROAD NE
OLYMPIA, WA 98506

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
ROYAL LIFE CENTERS, LLC - HAVEN
8649 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0422
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

KAYLA CONNELLY
CLINICAL DIRECTOR
BRANDY McBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

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

ROYAL LIFE CENTERS, LLC - OLYMPIC
8645 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0070
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

KAYLA CONNELLY
ADMINISTRATOR/CLINICAL DIRECTOR
BRANDY McBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8649 MARTIN WAY EAST
LACEY, WA 98516

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT

SEA MAR BEHAVIORAL HEALTH - OLYMPIA
3030 LIMITED LANE NW
OLYMPIA, WA 98502

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

SEA MAR BEHAVIORAL HEALTH - TUMWATER
6334-6336 LITTLEROCK ROAD SW
TUMWATER, WA 98512
(360) 570-8258

CLAUDIA D’ALLEGRI
ADMINISTRATOR
JARED LANGTON
CLINICAL SUPERVISOR

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

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

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

176000
SEA MAR BEHAVIORAL HEALTH - YELM
202 CULLENS STREET NW
YELM, WA 98597
(206) 764-4714

MAILING ADDRESS
8915 14TH AVE S
SEALEASE, WA 98108

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

111900
SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES
6700 MARTIN WAY EAST, SUITE 117
OLYMPIA, WA 98516
(360) 413-6910

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

OPIATE SUBSTITUTION TREATMENT

015300
ST. PETER CHEMICAL DEPENDENCY CENTER
4800 COLLEGE STREET SOUTHEAST
LACEY, WA 98503
(360) 456-7575
(800) 332-0465

MAILING ADDRESS
4800 COLLEGE ST SE
LACEY, WA 98503

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

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

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
- PROBLEM & PATHOLOGICAL GAMBLING

MARISSA ELLIOT
START-UP ADMINISTRATOR

TYVONNE BERRING
CLINICAL DIRECTOR
THURSTON

MAILING ADDRESS
PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
INPATIENT EVALUATION AND TREATMENT - ADULT

200500
TELECARE - THURSTON MASON E&T
3436 MARY ELDER ROAD NORTHEAST
OLYMPIA, WA 98506
(360) 528-2590
MROSS@TELECARECORP.COM
WWW.TELECARECORP.COM

PAM EGGLESTON
INTERIM ADMINISTRATOR
KRISTIANN SMITH
INTERIM CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 14339
TUMWATER, WA 98511-4339

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

200509
TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM
3436 MARY ELDER ROAD NORTHEAST, SUITE A
OLYMPIA, WA 98506
(360) 528-2590
WWW.TELECARECORP.COM

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

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

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

---

**105700**

**TRUE NORTH-ESD 113 - YELM**
1315 YELM HIGHWAY
YELM, WA 98597

(360) 458-6233

**ERIN RIFFE**
ADMINISTRATOR

**JACKIE YEE**
INTERM CLINICAL SUPERVISOR

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

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

---

# WAHKIAKUM

**001502**

**WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

**ANNA GAVISHORA**
DIRECTOR-WAHKIAKUM COUNTY H&HS

**DALLAS CARROLL**
CLINICAL SUPERVISOR

**MAILING ADDRESS**
42 ELOCHOMAN VALLEY RD
CATHLAMET, WA 98612
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

WALLA WALLA

200067
CHILDREN'S HOME SOCIETY OF WASHINGTON - WALLA WALLA
1612 PENNY LANE
WALLA WALLA, WA 99362
(509) 529-2130
WWW.CHILDRENSHOMESOCIETY.ORG

MAILING ADDRESS
1612 PENNY LANE
WALLA WALLA, WA 99362

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
LIBBY HEIN
CHIEF PROGRAM OFFICER

166200
COMPREHENSIVE HEALTHCARE - WALLA WALLA
1520 KELLY PLACE, SUITE 234
WALLA WALLA, WA 99362
(509) 524-2320
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

MENTAL HEALTH SERVICES:
MIKE NORTON
VICE PRESIDENT
ANDREA RAY
SUD CLINICAL SUPERVISOR

075900
DOC - WASHINGTON STATE PENITENTIARY
1313 NORTH 13TH STREET
WALLA WALLA, WA 99362
(360) 725-8628

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR
WALLA WALLA

168600
JUBILEE LEADERSHIP ACADEMY
29 JUBILEE CIRCLE
PRESCOTT, WA 99348
(509) 749-2103

MAILING ADDRESS
29 JUBILEE CIRCLE
PRESCOTT, WA 99348

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

MENTAL HEALTH SERVICES:
RICHARD GRIFFIN
EXECUTIVE DIRECTOR
TODD WAGNER
CLINICAL DIRECTOR

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

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

WHATCOM

038600
BELAIR CLINIC
1130 NORTH STATE STREET
BELLINGHAM, WA 98225
(360) 676-4485

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

MAILING ADDRESS
1221 FRASER ST STE E-1
BELLINGHAM, WA 98229
WHATCOM

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

147000
BRIDGES TREATMENT AND RECOVERY - FERNDALE
6044 PORTAL WAY, SUITE 103
FERNDALE, WA 98248
(360) 714-8180
(360) 393-4579
DYLAN BRASHEAR
ADMINISTRATOR
CARI JONES
CLINICAL SUPERVISOR

MAILING ADDRESS
1221 FRASER ST, STE E-1
BELLINGHAM, WA 98229

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

078600
CATHOLIC COMMUNITY SERVICES - BELLINGHAM
LAKEWAY DRIVE
515 LAKEWAY DRIVE
BELLINGHAM, WA 98225
(360) 676-2187
DONNA WELLS
AGENCY DIRECTOR

MAILING ADDRESS
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

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

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

200138
CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-2164
WWW.CCSWW.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
| 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:  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
| 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  
| SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
| 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  
|
WHATCOM

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

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

200192 ENDLESS POTENTIAL, LLC
2110 IRON STREET
BELLINGHAM, WA 98225
(360) 930-6063
(360) 746-4092
CONTACTUS@ENDLESSPOSTENTIALLLC.COM
WWW.ENDLESSPOTENTIALLLC.COM

MAILING ADDRESS
2110 IRON STREET
BELLINGHAM, WA 98225

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

167100 LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- MAIN
609 NORTHSHORE DRIVE
BELLINGHAM, WA 98226
(360) 676-6000

MAILING ADDRESS
609 NORTHSHORE DRIVE
BELLINGHAM, WA 98226

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

167100 LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- SUNSET DUPLEX
1727 EAST SUNSET DRIVE
BELLINGHAM, WA 98226
(360) 676-6000
KAY.BURBIDGE@LWRTC.ORG
WWW.LWRTC.ORG

MAILING ADDRESS
609 N SHORE DR
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

022700 LUMMI COUNSELING SERVICES
2616 KWINA ROAD
BELLINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

MAILING ADDRESS
2110 IRON STREET
BELLINGHAM, WA 98225

CONTACTUS@ENDLESSPOSTENTIALLLC.COM
WWW.ENDLESSPOTENTIALLLC.COM

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

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

MAILING ADDRESS
609 N SHORE DR
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

MAILING ADDRESS
609 N SHORE DR
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

022700 LUMMI COUNSELING SERVICES
2616 KWINA ROAD
BELLINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

MAILING ADDRESS
2616 KWINA ROAD
BELLINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
GROUP THERAPY
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT

022700 LUMMI COUNSELING SERVICES
2616 KWINA ROAD
BELLINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

MAILING ADDRESS
2616 KWINA ROAD
BELLINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
GROUP THERAPY
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
WHATCOM

MAILING ADDRESS
2616 KWINA ROAD
BELLINGHAM, WA 98226

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

023000
NOOKSACK TRIBE’S GENESIS II
6750 MISSION ROAD
EVERSON, WA 98247
(360) 966-7704
ANNETTE SOLOMON
ADMINISTRATOR

MAILING ADDRESS
PO BOX 157
DEMING, WA 98244

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

200456
NORTHWEST REGIONAL COUNCIL
600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-6749
(800) 585-6749
ANDEREA@DSHS.WA.GOV
WWW.NWRCWA.ORG
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

MAILING ADDRESS
BEHAVIORAL HEALTH UNIT
BELLINGHAM, WA 98228-2620
WHATCOM

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

052100
SEA MAR BEHAVIORAL HEALTH - BELLINGHAM
3350 AIRPORT WAY
BELLINGHAM, WA 98226
(360) 734-5458
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CHARLES WATRAS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

095800
SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER
1603 EAST ILLINOIS STREET
BELLINGHAM, WA 98226
(360) 647-4266

LESLIE BLAKE
ADMINISTRATOR

DIONNEA ANDRICOS
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

200419
SENDAN CENTER
1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 305-3275
SENDANCENTER.COM

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225

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

200317
SUNRISE SERVICES, INC. - BELLINGHAM
1515 CORNWALL AVENUE
BELLINGHAM, WA 98225
(360) 746-7200
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213
WHATCOM

CERTIFIED SERVICES

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

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

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

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

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
&8206;DIRECTOR OF BEHAVIORAL HEALTH
WHATCOM

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

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

WATERFRONT COUNSELING IN BLAINE
228 CHERRY STREET
BLAINE, WA 98230
(360) 332-1000

MAILING ADDRESS
PO BOX 463
CUSTER, WA 98240

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

WHITMAN

PALOUSE RECOVERY CENTER, LLC - PULLMAN
1240 SOUTHEAST BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163
(509) 334-0718

MAILING ADDRESS
1240 SE BISHOP BLVD STE P
PULLMAN, WA 99163

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

PALOUSE RIVER COUNSELING CENTER - MAIN
340 NORTHEAST MAPLE STREET
PULLMAN, WA 99163
(509) 334-1133

MAILING ADDRESS
1240 SE BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163

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

013800

075500
WHITMAN

MAILING ADDRESS
340 NE MAPLE ST
PULLMAN, WA 99163

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

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

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
MENTSAL HEALTH SERVICES:
- CASE MANAGEMENT
- DAY SUPPORT
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200256

YAKIMA

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - YAKIMA OUTPATIENT
916 NORTH 16TH AVENUE, SUITE 102
YAKIMA, WA 98902
(509) 902-1091
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR

MAILING ADDRESS
PO BOX 141108
SPOKANE VALLEY, WA 99214

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

121400

APPLE VALLEY COUNSELING SERVICE
611 WEST A STREET
YAKIMA, WA 98902
(509) 452-1000
(877) 452-2827

WILLIAM ELLIS
ADMINISTRATOR

CHARLOTTE MANTOO SEIP
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 639
YAKIMA, WA 98907
YAKIMA

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

050300  BARTH CLINIC - YAKIMA MAIN
201 EAST LINCOLN AVENUE
YAKIMA, WA 98901
(509) 457-5653
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

MAILING ADDRESS
5301 TIETON DR STE C
YAKIMA, WA 98908

DARLENE DARNELL
INTERIM PRESIDENT & CEO
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

MAILING ADDRESS
5301 TIENTON DR STE C
YAKIMA, WA 98908

CERTIFIED SERVICES

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

200152
CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA MAIN
5301 TIENTON DRIVE, SUITE C
YAKIMA, WA 98908
(509) 965-7100
WWW.CFCSYAKIMA.ORG

MAILING ADDRESS
5301 TIENTON 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

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 98909
(509) 575-4084
WWW.CWCMH.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98909

CERTIFIED SERVICES

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

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

200354

COMPREHENSIVE HEALTHCARE - COMPETENCY RESTORATION CENTER
1500 PACIFIC AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.CWCMH.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
COMPETENCY EVALUATION & RESTORATION TREATMENT

049000

COMPREHENSIVE HEALTHCARE - DETOX & OUTPATIENT
505 SOUTH 4TH AVENUE
YAKIMA, WA 98902
(509) 248-1200

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

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
(509) 575-4084

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

JEREMY BEUS
DIRECTOR OF PROGRAM DEVELOPMENT

HARRY KRAMER
VICE PRESIDENT

MIKE NORTON
ADMINISTRATOR

MARCY TREAT
SUD CLINICAL SUPERVISOR

RICK WEAVER
PRESIDENT/CEO

JUDY NEWLAND
SUD CLINICAL SUPERVISOR
YAKIMA

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

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

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

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

125600
COMPREHENSIVE HEALTHCARE - SUNNYSIDE
1319 SAUL ROAD SOUTH
SUNNYSIDE, WA 98944
(509) 837-2089

MIKE NORTON
ADMINISTRATOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA

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

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

146700
COMPREHENSIVE HEALTHCARE - TWO RIVERS
LANDING
504 SOUTH 3RD AVENUE
YAKIMA, WA 98902
(509) 469-3727
(509) 575-4084

TIMOTHY SHIELDS
DIRECTOR

BARBARA MYERS-MULL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907
<table>
<thead>
<tr>
<th>ZIP CODE</th>
<th>ORGANIZATION NAME AND ADDRESS</th>
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<td>(509) 575-4084</td>
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<td>076500</td>
<td>DOC - AHTANUM VIEW WORK RELEASE</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT DAY SUPPORT GROUP THERAPY RECOVERY EMPLOYMENT SUPPORT RECOVERY MEDICATION SUPPORT</td>
<td>(360) 725-8628</td>
<td>PO BOX 41123 (MS 41123), OLYMPIA, WA 98504-1123</td>
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<td>INNOVATION RESOURCE CENTER</td>
<td>SUBSTANCE USE DISORDER SERVICES: DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
<td>(509) 836-2400</td>
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<td>153200</td>
<td>INTEGRITY SUPPORT SERVICES, LLC</td>
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<td>(509) 469-9366</td>
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<td><a href="mailto:LORETTAO@MERITRESOURCES.ORG">LORETTAO@MERITRESOURCES.ORG</a></td>
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<td><strong>MAILING ADDRESS</strong></td>
<td><strong>DAVID L. WILSON</strong></td>
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<tr>
<td>PO BOX 997</td>
<td><strong>EXECUTIVE DIRECTOR</strong></td>
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<td>SUNNYSIDE, WA 98944</td>
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<td><strong>GEORGE DAVIS</strong></td>
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<td><strong>NUEVA VIDA COUNSELING SERVICES, LLC</strong></td>
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<td><strong>SUNSET M RANCH</strong></td>
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<td>2280 SR 821</td>
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<tr>
<td>SELAH, WA 98901</td>
<td><strong>CHUCK BUTTREY</strong></td>
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<tr>
<td>(509) 457-0990</td>
<td><strong>CLINICAL SUPERVISOR</strong></td>
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<tr>
<td>PO BOX 217</td>
<td><strong>TOM DAVIDSON</strong></td>
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<tr>
<td>SELAH, WA 98942</td>
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<tr>
<td><strong>TRIUMPH TREATMENT SERVICES - BETH'S PLACE</strong></td>
<td><strong><a href="mailto:AVASQUEZ@TRIUMPHTX.ORG">AVASQUEZ@TRIUMPHTX.ORG</a></strong></td>
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<tr>
<td>608 SUPERIOR LANE</td>
<td><strong><a href="http://WWW.TRIUMPHTX.ORG">WWW.TRIUMPHTX.ORG</a></strong></td>
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<tr>
<td>YAKIMA, WA 98902</td>
<td><strong><a href="mailto:AVASQUEZ@TRIUMPHTX.ORG">AVASQUEZ@TRIUMPHTX.ORG</a></strong></td>
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<tr>
<td>(509) 853-4176</td>
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<td><strong>TOM DAVIDSON</strong></td>
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<td><strong>EXECUTIVE CLINICAL DIRECTOR (SUD CS)</strong></td>
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</tbody>
</table>
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

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

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
YAKIMA

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:

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)

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

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

020285  YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW
1000 WALLACE WAY
GRANDVIEW, WA 98930

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
918 EAST MEADE AVENUE
YAKIMA, WA 98903
YAKIMA

CERTIFIED SERVICES

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

200286
YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH
510 WEST 1ST AVENUE
TOPPENISH, WA 98948
JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES

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

050001
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
12TH AVENUE
307 SOUTH 12TH AVENUE, SUITE 4B
YAKIMA, WA 98902
(509) 575-8457
JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
307 S. 12TH AVE, STE B
YAKIMA, WA 98902

CERTIFIED SERVICES

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 MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200283
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
MAIN
918 EAST MEADE AVENUE
YAKIMA, WA 98903
JANIS LUVAAS
ADMINISTRATOR
### Mailing Address

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<td>918</td>
<td>918 E. MEAD AVENUE, YAKIMA, WA 98903</td>
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#### Certified Services

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

---

### 200287

**YAKIMA VALLEY MEMORIAL HOSPITAL E&T**

<table>
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<td>2811 TIETON DRIVE, YAKIMA, WA 98902</td>
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#### Certified Services

- **Mental Health Services:**
  - Inpatient Evaluation and Treatment - Adult

---

### 200424

**AUTISM OUTREACH OF WASHINGTON, INC.**

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<tr>
<td>CONFIDENTIAL LOCATION</td>
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<tr>
<td>(619) 795-9525</td>
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<tr>
<td><a href="mailto:INFO@AUTISMOUTREACHSOCAL.COM">INFO@AUTISMOUTREACHSOCAL.COM</a></td>
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<tbody>
<tr>
<td>PATRICK BUNT</td>
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<tr>
<td>ABIGAIL BUNT</td>
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#### Certified Services

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

---

### 200101

**PROTOCOL SERVICES, INC.**

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<tr>
<td>621 SOUTHWEST ALDER STREET, SUITE 400, PORTLAND, OR 97205</td>
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#### Certified Services

- **Mental Health Services:**
  - Crisis Telephone Support
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<td>2ND CHANCE RECOVERY CENTER, LLC</td>
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<td>KING</td>
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<td>A CHANGE INTO RECOVERY, LLC</td>
<td>173500</td>
<td>PIERCE</td>
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<td>GRAYS HARBOR</td>
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<td>COWLITZ</td>
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