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 COUNTY INTEGRATED HEALTH CARE SERVICES - OTHELLO MAIN
425 EAST MAIN STREET, SUITE 600
OTHELLO, WA 99344
(509) 488-4074
(509) 488-5611
CCS@CO.ADAMS.WA.US
WWW.CO.ADAMS.WA.US

VICKI GUSE
ADMINISTRATOR
GLORIA OCHOA
SUD CLINICAL SUPERVISOR

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

CERTIFIED SERVICES
MENTAL HEALTH 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
RECOVERY SUPPORT WRAPAROUND FACILITATION

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

VICKI GUSE
ADMINISTRATOR
AMANDA ZEPEDA
MH CLINICAL SUPERVISOR

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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:

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

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
<table>
<thead>
<tr>
<th>County</th>
<th>ZIP Code</th>
<th>Agency Name</th>
<th>Address</th>
<th>Primary Contact</th>
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<td>ACTION COUNSELING - KENNEWICK</td>
<td>4911 WEST CANAL DRIVE</td>
<td>ROBERT LACK ADMINISTRATOR</td>
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<tr>
<td>BENTON</td>
<td>06050</td>
<td>BOYER INVESTMENT</td>
<td>120 VISTA WAY</td>
<td>ROBERT L. WILKINSON ADMINISTRATIVE DIRECTOR</td>
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<td>SUBSTANCE USE DISORDER SERVICES:</td>
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<td>ADVOCATES FOR WELLNESS, LLC</td>
<td>120 VISTA WAY</td>
<td>DARLENE DARNELL INTERIM PRESIDENT &amp; CEO</td>
</tr>
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<td>044400</td>
<td>CATHOLIC CHARITIES OF THE DIOCESE</td>
<td>2139 VAN GIESEN STREET</td>
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<td>OF YAKIMA - RICHLAND</td>
<td>RICHLAND, WA 99354</td>
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<td>(509) 965-7100</td>
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<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
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<td>5301 TIETON DR STE C</td>
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<td>YAKIMA, WA 98908</td>
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</tbody>
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BENTON

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

200155
CHILD ENRICHMENT CENTER - MAIN
1950 KEENE ROAD, BUILDING L
RICHLAND, WA 99352
(509) 420-3442
CHILDRENENRICHMENTCENTER@GMAIL.COM
WWW.CHILDRENENRICHMENTCENTER.ORG

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

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

042800
CHOICES AND CHANGES, INC.
1236 COLUMBIA PARK TRAIL
RICHLAND, WA 99352
(509) 735-7899

MAILING ADDRESS
1236 COLUMBIA PARK TRAIL
RICHLAND, WA 99352

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

131700
FIRST STEP COMMUNITY COUNSELING SERVICES, LLC
415 NORTH MORAIN STREET, SUITES A, B, C, & D
KENNEWICK, WA 99336
(509) 735-6900

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

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

161300
IDEAL BALANCE - KENNEWICK
8514 WEST GAGE BOULEVARD, SUITES G AND C
KENNEWICK, WA 99336
(509) 440-3387

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

ADMINISTRATOR

SARAH HAWS-TAYLOR
ADMINISTRATOR

WILLIAM DENNETT
ADMINISTRATOR

SARA CLARK
DIRECTOR

CLIFTON WATSON JR.
CLINICAL SUPERVISOR

PENNY S. BELL
ADMINISTRATOR

NAKIA BECERA
CLINICAL SUPERVISOR
BENTON

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

200236
LOURDES COUNSELING CENTER - CULLUM HOUSE
208 CULLUM AVENUE
RICHLAND, WA 99352
(509) 946-5918
WWW.YOURLOURDES.COM

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
DANA OTIS
MH CLINICAL SUPERVISOR

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

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

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO
DANA OTIS
MH CLINICAL SUPERVISOR

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

200428
LOURDES COUNSELING CENTER - KENNEWICK
500 NORTH MORAIN STREET, SUITE 1250
KENNEWICK, WA 99336
(509) 943-9104
(509) 943-7215
LOURDESHEALTH.NET

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
TONY LARSON
CLINICAL SUPERVISOR

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

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

MAILING ADDRESS
1175 CARONDELET DR
RICHLAND, WA 99354

JOHN SERLE
CEO
DAVID LOWE
SUD CLINICAL SUPERVISOR
BENTON

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

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

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

MAILING ADDRESS
1175 CARONDELET DRIVE
RICHLAND, 99354

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- TRIAGE - INVOLUNTARY

200088
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK AVENUE
3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336
(509) 735-6446
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG

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

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

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

MAILING ADDRESS
3321 W KENNEWICK AVE
KENNEWICK, WA 99336

MAILING ADDRESS
3321 W KENNEWICK AVE
KENNEWICK, WA 99336

SHARON GENTRY
DISTRICT DIRECTOR
ROCHELLE BRUNSDON
CLINICAL SUPERVISOR
BENTON

CERTIFIED SERVICES

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

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

MAILING ADDRESS
PO BOX 997
SUNNYSIDE, WA 98944

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

DAVID L. WILSON
EXECUTIVE DIRECTOR
ANTHONY ESPARZA, SR.
SUD CLINICAL SUPERVISOR

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

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- 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

KATIE KLUTE
DIRECTOR
MARY CORLEY
CLINICAL SUPERVISOR

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

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

KISHORE SHM VARADA
CHAIRMAN/CEO
LINDA ROBB
MH CLINICAL SUPERVISOR
BENTON

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

168900
RELIANCE HEALTH SYSTEMS - SALUS HEALTH
1445 SPAULDING PARK
RICHLAND, WA 99352
(509) 420-0423
KISHORE SHM VARADA
CHAIRMAN/CEO
MINGHUA ZHU
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
1445 SPAULDING PARK
RICHLAND, WA 99352

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

105200
SOMERSET COUNSELING CENTER, LLC
1305 MANSFIELD STREET, SUITE 6
RICHLAND, WA 99352
(509) 942-1624
JAIME CARSON
EXECUTIVE DIRECTOR
GARY L. SOMDAHL
CLINICAL SUPERVISOR

MAILING ADDRESS
1305 MANSFIELD ST STE 6
RICHLAND, WA 99352

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

155200
TRI-CITIES COMMUNITY HEALTH - KENNEWICK
3180 WEST CLEARWATER AVENUE, SUITE E
KENNEWICK, WA 99336
(509) 543-8500
DELL ANDERSON
DIRECTOR
HECTOR BOBBY GUZMAN
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1452
PASCO, WA 99301

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

200253
TRI-CITIES COMMUNITY HEALTH - RICHLAND
829 GOETHALS DRIVE
RICHLAND, WA 99352
DELL ANDERSON
DIRECTOR

MAILING ADDRESS
829 GOETHALS DRIVE
RICHLAND, WA 99352
BENTON

CERTIFIED SERVICES

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

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

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

MAILING ADDRESS
1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801

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

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

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

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

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

MAILING ADDRESS
600 ORONDO AVE STE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS 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
<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
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<tbody>
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<td><strong>CHELAN</strong></td>
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<tr>
<td><strong>CERTIFIED SERVICES</strong></td>
<td><strong>MENTAL HEALTH SERVICES:</strong></td>
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<tr>
<td><strong>CASE MANAGEMENT</strong></td>
<td><strong>FAMILY THERAPY</strong></td>
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<td><strong>GROUP THERAPY</strong></td>
<td><strong>INDIVIDUAL TREATMENT</strong></td>
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<td><strong>PSYCHIATRIC MEDICATION</strong></td>
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<table>
<thead>
<tr>
<th>200159</th>
<th><strong>COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE EASY WAY</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>140 EASY WAY, WENATCHEE, WA 98801</td>
<td>CAROL DIEDE</td>
</tr>
<tr>
<td>(509) 662-6000</td>
<td>COO</td>
</tr>
<tr>
<td><a href="http://WWW.CVCH.ORG">WWW.CVCH.ORG</a></td>
<td>MARY MEGAN KAPPLER</td>
</tr>
<tr>
<td>THERAPIST II</td>
<td></td>
</tr>
<tr>
<td><strong>MAILING ADDRESS</strong></td>
<td>600 ORONDO AVENUE, SUITE 1, WENATCHEE, WA 98801</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>200158</th>
<th><strong>COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE MAIN</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>600 ORONDO AVENUE, SUITE 1, WENATCHEE, WA 98801</td>
<td>CAROL DIEDE</td>
</tr>
<tr>
<td>(509) 662-4296</td>
<td>COO</td>
</tr>
<tr>
<td><a href="mailto:BHEALTHASSISTANTS@CVCH.ORG">BHEALTHASSISTANTS@CVCH.ORG</a></td>
<td>MARY MEGAN KAPPLER</td>
</tr>
<tr>
<td><a href="http://WWW.CVCH.ORG">WWW.CVCH.ORG</a></td>
<td>MH CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>MAILING ADDRESS</strong></td>
<td>600 ORONDO AVENUE, SUITE 1, WENATCHEE, WA 98801</td>
</tr>
</tbody>
</table>

| **CERTIFIED SERVICES** | **MENTAL HEALTH SERVICES:** |
| **SUBSTANCE USE DISORDER SERVICES:** | **CASE MANAGEMENT** |
| ALCOHOL AND DRUG INFORMATION SCHOOL | **FAMILY THERAPY** |
| LEVEL I OUTPATIENT | **GROUP THERAPY** |
| LEVEL II INTENSIVE OUTPATIENT | **INDIVIDUAL TREATMENT** |
| **PSYCHIATRIC MEDICATION** | |

<table>
<thead>
<tr>
<th>200020</th>
<th><strong>CRH CHRISTOPHER HOUSE, LLC</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>100 &amp; 101 SOUTH CLEVELAND AVENUE, WENATCHEE, WA 98801</td>
<td>KEVIN COLWELL</td>
</tr>
<tr>
<td>(509) 888-0773</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td><a href="mailto:KARINA@CRHCHRISTOPHERHOUSE.COM">KARINA@CRHCHRISTOPHERHOUSE.COM</a></td>
<td>ALLISON NYSTROM</td>
</tr>
<tr>
<td><a href="http://WWW.CRHCHRISTOPHERHOUSE.COM">WWW.CRHCHRISTOPHERHOUSE.COM</a></td>
<td>CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td><strong>MAILING ADDRESS</strong></td>
<td>100 S CLEVELAND AVE, WENATCHEE, WA 98801</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>157200</th>
<th><strong>NEW HOPE RECOVERY, LLC</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>238 NORTH CHELAN AVENUE, WENATCHEE, WA 98801</td>
<td>RAYMOND MORRIS REGAN</td>
</tr>
<tr>
<td>(509) 293-7724</td>
<td>ADMINISTRATOR</td>
</tr>
<tr>
<td></td>
<td>YVONNE REGAN</td>
</tr>
<tr>
<td></td>
<td>CLINICAL SUPERVISOR</td>
</tr>
</tbody>
</table>
CHELAN

MAILING ADDRESS
238 N CHELAN AVE
WENATCHEE, WA 98801

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

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

MAILING ADDRESS
326 N MILLER ST
WENATCHEE, WA 98801

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

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

MAILING ADDRESS
327 OKANOGAN AVE
WENATCHEE, WA 98801

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

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

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

CLALLAM

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

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

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

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

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

MAILING ADDRESS
PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
CLALLAM

MAILING ADDRESS
221 N RACE ST
PORT ANGELES, WA 98362

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

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

MAILING ADDRESS
221 NORTH RACE STREET
PORT ANGELES, WA 98362

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

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

MAILING ADDRESS
PO BOX 41123
OLYMPIA, WA 98504-4112

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

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

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

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

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

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

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

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

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

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

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

MAILING ADDRESS
PO BOX 3175
SEQUIM, WA 98382

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

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

200261 PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY
RESPITE CENTER
112 EAST 8TH 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 Emergency Involuntary Detention
- Crisis Stabilization
- Group Therapy
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Medication Support
- Recovery Peer Support
- Residential Treatment Facility

---

**200259**

**Peninsula Behavioral Health - Horizon Center**
205 East 5th Street
Port Angeles, WA 98362

Wendy Sisk
CEO

---

**Mailing Address**

118 E 8th St
Port Angeles, WA 98362

**Certified Services**

**Mental Health Services:**
- Case Management
- Crisis Outreach
- Crisis Telephone Support
- Day Support
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Peer Support

---

**015000**

**Peninsula Behavioral Health - Main**
118 East 8th Street
Port Angeles, WA 98362
(360) 457-0431

Wendy Sisk
CEO

Stephanie Diltz
SUD Clinical Supervisor

---

**Mailing Address**

118 E 8th St
Port Angeles, WA 98362

**Certified Services**

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

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

---

**200260**

**Peninsula Behavioral Health - Sequim**
490 North 5th Avenue
Sequim, WA 98382

Wendy Sisk
CEO
CLALLAM

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

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

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

SHELLEY A. HUNTINGTON
ADMINISTRATOR

DALIS L. LAGROTTA
CLINICAL DIRECTOR

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

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

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

SHELLEY A. HUNTINGTON
ADMINISTRATOR

DALIS L. LAGROTTA
CLINICAL DIRECTOR

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

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

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

ANDREW SHOGREN
HEALTH DIRECTOR

JANICE BARRERA
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 189
LA PUSH, WA 98350

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

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
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION

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

G’NELL ASHLEY
ADMINISTRATOR

GLENDAY 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
(360) 477-4790
JOHN TAYLOR
ADMINISTRATOR
ANGELA MELLO
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- WITHDRAWAL MANAGEMENT

109800
TRILLIUM TREATMENT CENTER
528 WEST 8TH STREET
PORT ANGELES, WA 98362
(360) 457-9200
LARRY SUTTON
ADMINISTRATOR
VICKIE SUTTON
CLINICAL SUPERVISOR

MAILING ADDRESS
528 W 8TH STREET
PORT ANGELES, WA 98362

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

095600
TRUE STAR BEHAVIORAL HEALTH SERVICES
1912 WEST 18TH STREET
PORT ANGELES, WA 98363
(360) 417-2282
JODY JACOBSEN
ADMINISTRATOR
JULI LEONARD BUCHMANN
CLINICAL SUPERVISOR

MAILING ADDRESS
1912 W 18TH ST.
PORT ANGELES, WA 98363

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

000800
WEST END OUTREACH SERVICES
530 BOGACHIEL WAY
FORKS, WA 98331
(360) 374-6177
TANYA MACNEIL
DIRECTOR
GARY WEBB
PROGRAM COORDINATOR
CLALLAM

MAILING ADDRESS
530 BOGACHIEL WY
FORKS, WA 98331

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

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

CLARK

158100

AFFINITY COUNSELING AND TREATMENT
12503 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 119A
VANCOUVER, WA 98684
(360) 314-6507
WWW.AFFINITYCOUNSELING.NET

LAURA M. LEWIS
ADMINISTRATOR

SHAHNA CREAGAN
CLINICAL SUPERVISOR

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

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
  PROBLEM & PATHOLOGICAL GAMBLING

200344

ASSOCIATES FOR PSYCHIATRIC & MENTAL HEALTH, LLC
2600 F STREET
VANCOUVER, WA 98663
(360) 448-7827
(888) 571-5088
APPOINTMENTS@APMENTALHEALTH.NET
WWW.APMENTALHEALTH.NET

SHEELA CHOPPALA-NESTOR
OWNER/ADMINISTRATOR

AMANDA RAGONESI, PH.D
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 F STREET
VANCOUVER, WA 98663

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

200146

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

MARY STONE SMITH
VICE PRESIDENT

DON KOENIG
SITE DIRECTOR
CLARK

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

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

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

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

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

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

MAILING ADDRESS
13500 SE 7TH ST
VANCOUVER, WA 98683

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

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

MAILING ADDRESS
13500 SE 7TH STREET
VANCOUVER, WA 98686

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

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

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

MAILING ADDRESS
PO BOX 605
VANCOUVER, WA 98666

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

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

200526

CHOICE WELLNESS CENTERS, LLC
1610 C STREET, SUITE 102
VANCOUVER, WA 98663
(360) 787-2125
(866) 341-2041
ESTELA.CLEMENTE@CHOICEWELLNESSLLC.COM
WWW.CHOICEWELLNESSLLC.COM

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

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

200064

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

MAILING ADDRESS
PO BOX 5000
VANCOUVER, 98666-5000

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

174800

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

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
<table>
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<th>Location</th>
<th>Address 1</th>
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<th>Contact Info</th>
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</table>
| 200156   | COLUMBIA RIVER MENTAL HEALTH SERVICES - ELAHAN PLACE | 7415 NORTHEAST 94TH AVENUE VANCOUVER, WA 98662 | (360) 253-6019 | WWW.CRMHS.ORG | CRAIG PRIDEMORE  
|          |                              |                              | DOUG CHAPMAN  
|          |                              |                              | CLINICAL SUPERVISOR |
|          | MAILING ADDRESS              |                              |              | MENTAL HEALTH SERVICES: |
|          | PO BOX 1337                  |                              |              | CASE MANAGEMENT |
|          | VANCOUVER, WA 98666-1337     |                              |              | GROUP THERAPY |
|          | CERTIFIED SERVICES           |                              |              | INDIVIDUAL TREATMENT |
|          |                              |                              |              | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT |
|          |                              |                              |              | PSYCHIATRIC MEDICATION |
|          |                              |                              |              | RECOVERY MEDICATION SUPPORT |
|          |                              |                              |              | RECOVERY PEER SUPPORT |
|          |                              |                              |              | RESIDENTIAL TREATMENT FACILITY |
| 200157   | COLUMBIA RIVER MENTAL HEALTH SERVICES - ESTHER STREET | 1012 ESTHER STREET VANCOUVER, WA 98660 | (360) 993-3000 | WWW.CRMHS.ORG | CRAIG PRIDEMORE  
|          |                              |                              | DOUG CHAPMAN  
|          |                              |                              | CLINICAL SUPERVISOR |
|          | MAILING ADDRESS              |                              |              | MENTAL HEALTH SERVICES: |
|          | PO BOX 1337                  |                              |              | CASE MANAGEMENT |
|          | VANCOUVER, WA 98666-1337     |                              |              | GROUP THERAPY |
|          | CERTIFIED SERVICES           |                              |              | INDIVIDUAL TREATMENT |
|          | SUBSTANCE USE DISORDER SERVICES: |                              |              | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT |
|          | LEVEL I OUTPATIENT           |                              |              | PSYCHIATRIC MEDICATION |
|          |                              |                              |              | RECOVERY PEER SUPPORT |
|          |                              |                              |              | RESIDENTIAL TREATMENT FACILITY |
| 200453   | COLUMBIA RIVER MENTAL HEALTH SERVICES - HAZEL DELL | 9105 NORTHEAST HIGHWAY 99, SUITE 201A VANCOUVER, WA 98665 | (360) 579-9721 | WWW.CRMHS.ORG | CRAIG PRIDEMORE  
|          |                              |                              | JEANNE HEHLEN  
|          |                              |                              | THERAPIST III - LEAD |
|          | MAILING ADDRESS              |                              |              | MENTAL HEALTH SERVICES: |
|          | PO BOX 1337                  |                              |              | CASE MANAGEMENT |
|          | VANCOUVER, WA 98666-1337     |                              |              | FAMILY THERAPY |
|          | CERTIFIED SERVICES           |                              |              | GROUP THERAPY |
|          |                              |                              |              | INDIVIDUAL TREATMENT |
|          |                              |                              |              | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT |
|          |                              |                              |              | PSYCHIATRIC MEDICATION |
|          |                              |                              |              | RECOVERY PEER SUPPORT |
| 089400   | COLUMBIA RIVER MENTAL HEALTH SERVICES - VANCOUVER MAIN | 6936 NORTHEAST FOURTH PLAIN BOULEVARD VANCOUVER, WA 98661-7254 | (360) 993-3000 | WWW.CRMHS.ORG | CRAIG PRIDEMORE  
|          |                              |                              | DOUG CHAPMAN  
<p>|          |                              |                              | CLINICAL SUPERVISOR |
|          | MAILING ADDRESS              |                              |              | MENTAL HEALTH SERVICES: |
|          | PO BOX 1337                  |                              |              | CASE MANAGEMENT |
|          | VANCOUVER, WA 98666-1337     |                              |              | FAMILY THERAPY |
|          |                              |                              |              | GROUP THERAPY |
|          |                              |                              |              | INDIVIDUAL TREATMENT |
|          |                              |                              |              | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT |
|          |                              |                              |              | PSYCHIATRIC MEDICATION |
|          |                              |                              |              | RECOVERY PEER SUPPORT |</p>
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<tr>
<td>068600</td>
<td>COLUMBIA TREATMENT SERVICES</td>
<td>7017 NORTHEAST HIGHWAY 99, SUITE 114, VANCOUVER, WA 98665</td>
<td>(360) 694-7484</td>
<td></td>
<td>PAMELA PAPROCKI-SIMS</td>
<td>TABITHA ZDUNICH</td>
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<td>200302</td>
<td>COMMUNITY SERVICES NORTHWEST - 39TH STREET</td>
<td>317 EAST 39TH STREET, VANCOUVER, WA 98663</td>
<td>(360) 397-8484</td>
<td><a href="http://WWW.COMMUNITYSERVICESNW.ORG">WWW.COMMUNITYSERVICESNW.ORG</a></td>
<td>JOHN &quot;BUNK&quot; MOREN</td>
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<td>200139</td>
<td>COMMUNITY SERVICES NORTHWEST - BATTLE GROUND</td>
<td>11117 NORTHEAST 189TH STREET, BATTLE GROUND, WA 98668</td>
<td>(360) 397-8484, (360) 397-8004</td>
<td><a href="http://WWW.COMMUNITYSERVICESNW.ORG">WWW.COMMUNITYSERVICESNW.ORG</a></td>
<td>JOHN &quot;BUNK&quot; MOREN</td>
<td>MIKE MILLER</td>
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CLARK

056001
COMMUNITY SERVICES NORTHWEST - MAIN
1601 EAST FOURTH PLAIN BLVD., BLDG. 17, STE. B222
VANCOUVER, WA 98661
(360) 397-8484

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

JENNIFER HARDER
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668-1845

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

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

200368
COMMUNITY SERVICES NORTHWEST - TOWN PLAZA
5411 EAST MILL PLAIN BOULEVARD, SUITE 16
VANCOUVER, WA 98661
(360) 397-8484
WWW.COMMUNITYSERVICESNW.ORG

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

MIKE MILLER
MH PROGRAM MANAGER

MAILING ADDRESS
PO BOX 1845
VANCOUVER, WA 98668

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

200525
CONSUMER VOICES ARE BORN (CVAB) - REACH CENTER
1601 EAST FOURTH PLAIN BLVD, BLDG 17, SUITE A114
VANCOUVER, WA 98661
(360) 397-8050
(866) 944-2822
WWW.CVABONLINE.COM

BRAD BERRY
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM
CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 1707
VANCOUVER, WA 98668

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS PEER SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
200133  CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER
10201 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98662
(360) 397-8050
WWW.CVABONLINE.COM

MAILING ADDRESS
PO BOX 1707
VANCOUVER, WA 98668

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

128700  COWLITZ TRIBAL TREATMENT PROGRAM - VANCOUVER
7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665
(360) 397-8228

MAILING ADDRESS
7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT – CHILDREN
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

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

MAILING ADDRESS
11818 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 307
VANCOUVER, WA 98684

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT – CHILDREN
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY
CLARK

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

077500

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

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

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

200433

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

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS
1014 MAIN ST
VANCOUVER, WA 98660

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

200061

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

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

MAILING ADDRESS
1014 MAIN STREET
VANCOUVER, WA 98660

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

200415  FAMILY SOLUTIONS - MAIN STREET BRANCH
        1104 MAIN STREET, SUITE 500
        VANCOUVER, WA 98660
        (360) 695-1014
        LBROWN@FAMILY-SOLUTIONS.NET
        WWW.FAMILY-SOLUTIONS.NET
        LISA CARPENTER
        EXECUTIVE DIRECTOR
        TRACY ARNEY
        CLINICAL DIRECTOR

MAILING ADDRESS
        1014 MAIN ST
        VANCOUVER, WA 98660

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

173700  HELPING PROFESSIONALS WELLNESS CENTER, LLC -
        BATTLE GROUND
        1710 WEST MAIN STREET, SUITE 110
        BATTLE GROUND, WA 98604
        (360) 687-3222
        (360) 687-0693
        LAURIE ELLETT
        EXECUTIVE DIRECTOR

MAILING ADDRESS
        1710 W MAIN ST STE 110
        BATTLE GROUND, WA 98604

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

173800  HELPING PROFESSIONALS WELLNESS CENTER, LLC -
        HAZEL DELL
        9013 NORTHEAST HIGHWAY 99, SUITES Q &amp; V
        VANCOUVER, WA 98665
        (360) 687-0693
        LAURIE ELLETT
        EXECUTIVE DIRECTOR

MAILING ADDRESS
        1710 W MAIN ST STE 110
        BATTLE GROUND, WA 98604

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

200074  INSTITUTE FOR FAMILY DEVELOPMENT - VANCOUVER
        1313 NORTHEAST 134TH STREET, SUITE 220A
        VANCOUVER, WA 98685
        CHARLOTTE BOOTH
        EXECUTIVE DIRECTOR

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

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

085000
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER
12607 EAST MILL PLAIN BOULEVARD
VANCOUVER, WA 98684-4098
(360) 418-6001
DAN P. RUSH
CLINICAL DIRECTOR
LINDA MADDEN
CLINICAL SUPERVISOR

MAILING ADDRESS
12607 E MILL PLAIN BLVD
VANCOUVER, WA 98684-4098

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

200306
LIFELINE CONNECTIONS - CAMAS
329 NORTHEAST LECHNER STREET
CAMAS, WA 98607
(360) 397-8246
WWW.LIFELINECONNECTIONS.ORG
JARED SANFORD
CEO
BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1678
VANCOUVER, WA 98668

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

000900
LIFELINE CONNECTIONS - MAIN
1601 EAST FOURTH PLAIN BOULEVARD, BUILDING 17
VANCOUVER, WA 98661
(360) 397-8246
(800) 604-0025
INFO@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG
JARED SANFORD
CEO
BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1678
VANCOUVER, WA 98668-1678

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

172100
LIFELINE CONNECTIONS - VANCOUVER BRANCH
11719 NORTHEAST 95TH STREET, SUITE A
VANCOUVER, WA 98682
(360) 397-8246
INFO@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG
JARED SANFORD
CEO
BRANDY BRANCH
CCO/MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 1678
VANCOUVER, WA 98668
CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- RECOVERY EMPLOYMENT SUPPORT
- RECOVERY HOUSING SUPPORT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

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

M 200086

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

LCSNW@LCSNW.ORG
WWW.LCSNW.ORG/

MAILING ADDRESS
3600 MAIN STREET
VANCOUVER, WA 98663

CERTIFIED 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

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

200094

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

200568

REDWOOD RECOVERY CENTER, LLC
717 NORTHEAST 61ST STREET, SUITE 102
VANCOUVER, WA 98665
(360) 523-2997
HELLO@REDWOODRECOVERYCENTER.COM
WWW.REDWOODRECOVERYCENTER.COM

CRYSTAL KOSTRIVAS
ADMINISTRATOR

JESSE JAMES
CLINICAL DIRECTOR
CLARK

MAILING ADDRESS
717 NORTHEAST 61ST STREET, SUITE 102
VANCOUVER, WA 98665

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

200268
SEA MAR BEHAVIORAL HEALTH - VANCOUVER 109TH COURT
5501 NORTHEAST 109TH COURT, SUITE A-1
VANCOUVER, WA 98662
(360) 566-4432
CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

200269
SEA MAR BEHAVIORAL HEALTH - VANCOUVER FOURTH PLAIN
7803 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98662
CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

200339
SEA MAR BEHAVIORAL HEALTH - VANCOUVER MEDICAL
7410 DELAWARE LANE
VANCOUVER, WA 98664
(360) 566-4402
WWW.SEAMAR.ORG
CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
JENNIFER NAVARRO
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
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<td>4305 NORTH EAST THURSTON WAY, SUITE E&lt;br&gt;VANCOUVER, WA 98662</td>
<td>VANCOUVER, WA</td>
<td>(360) 213-1216&lt;br&gt;(800) 543-9905</td>
<td>CINDY NORDBERG</td>
<td>OUTPATIENT PROGRAM MANAGER</td>
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<tr>
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<td>LARRY LOMBARD</td>
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<td>VANCOUVER, WA</td>
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<td>DAVID WAYNE COLBY</td>
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<td>DAVE COLBY</td>
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**CLARK**

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

**Mailing Address**
PO BOX 2489
VANCOUVER, WA 98661

**Certified Services**

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**Mental Health Services:**

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**Telecare - Clark County E&T**
1601 EAST 4TH PLAIN BOULEVARD
VANCOUVER, WA 98861

<table>
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<th>Administrator: Lisa Clayton</th>
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**Mailing Address**
PO BOX 2489
VANCOUVER, WA 98668

**Certified Services**

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**The Recovery Village Ridgefield - Main**
888 SOUTH HILLHURST ROAD
RIDGEFIELD, WA 98642
(360) 887-6060
WWW.RIDGEFIELDRECOVERY.COM

<table>
<thead>
<tr>
<th>Director of Operations and Admin: Steven Hart</th>
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**Mailing Address**
100 SE 3RD AVE STE 1800
FORT LAUDERDALE, FL 33394

**Certified Services**

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**The Recovery Village Ridgefield - Vancouver**
5114 NORTHEAST 94TH AVENUE
VANCOUVER, WA 98662
(360) 326-1499
BSURLU@ADVANCEDRECOVERYSYSTEMS.COM
WWW.ADVANCEDRECOVERYSYSTEMS.COM

<table>
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<th>Director of Operations and Admin: Dallas Carroll</th>
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**Mailing Address**
100 SE 3RD AVE STE 1800
FT. LAUDERDALE, FL 33394
## CLARK

### 112000

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

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

### 001300

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

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

### 054100

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

**MAILING ADDRESS**  
7507 NE 51ST ST  
VANCOUVER, WA 98662

### COLUMBIA

### 001400

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

**MAILING ADDRESS**  
221 E WASHINGTON ST  
DAYTON, WA 99328
### CERTIFIED SERVICES
- **SUBSTANCE USE DISORDER SERVICES:**
  - Alcohol and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient

### MENTAL HEALTH SERVICES:
- Case Management
- Crisis Emergency Involuntary Detention
- Crisis Outreach
- Family Therapy
- Individual Treatment
- Less Restrictive Alternative (LRA) Support
- Psychiatric Medication
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

### COWLITZ

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<td>116600</td>
<td>A New Safehaven</td>
<td>1441 11TH Avenue, Longview, WA 98632-3818</td>
<td>(360) 577-4340</td>
<td>Debra Casserd-Johnson</td>
<td>Melody Lorenzo</td>
<td>Lauri Rowland</td>
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<tr>
<td>119300</td>
<td>Awakenings, Inc.</td>
<td>404 West Main Street, Kelso, WA 98632</td>
<td>(360) 423-2806</td>
<td>Meody Lorenzo</td>
<td>Grace Pyon</td>
<td>Lauri Rowland</td>
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<tr>
<td>178200</td>
<td>Choices</td>
<td>1839 1ST Avenue, Suite C, Longview, WA 98632</td>
<td>(360) 270-9874</td>
<td>Lauri Rowland</td>
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<td>200047</td>
<td>Columbia Wellness - Kelso 200 Academy</td>
<td>200 Academy Street, Kelso, WA 98626</td>
<td>(360) 423-0203</td>
<td>David McClay</td>
<td>Debra Perko</td>
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COWLITZ

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

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

200555
COLUMBIA WELLNESS - KELSO 210 ACADEMY
210 ACADEMY
KELSO, WA 98626
(360) 577-7442
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

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

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

20053
COLUMBIA WELLNESS - KELSO OAK
309 OAK STREET
KELSO, WA 98626
(360) 577-7442
WWW.COLUMBIAWELL.ORG

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

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

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

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

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

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

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

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

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

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

MAILING ADDRESS
921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
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

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
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY
COWLITZ

CERTIFIED SERVICES

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

200062
CORE HEALTH - MAIN
748 14TH AVENUE
LONGVIEW, WA 98632
(360) 562-7472
CAMERONC@CHOBLV.ORG
WWW.COREHEALTHSERVICES.ORG
FRANK MORRISON
CEO
KATIE ALLEN
MH CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 2394
LONGVIEW, WA 98632

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

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

015101
COWLITZ FAMILY HEALTH CENTER - BROADWAY CAMPUS
600 BROADWAY STREET
LONGVIEW, WA 98632
(360) 425-9600
DIAN COOPER
EXECUTIVE DIRECTOR
CRYSTAL RICH
CLINICAL SUPERVISOR

MAILING ADDRESS
1057 12TH AVENUE
LONGVIEW, WA 98632

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

102200
COWLITZ FAMILY HEALTH CENTER - GRADE STREET CAMPUS
621 GRADE STREET
KELSO, WA 98626
(360) 414-5508
DIAN COOPER
EXECUTIVE DIRECTOR
BRYAN KERR
CLINICAL SUPERVISOR

MAILING ADDRESS
1057 17TH AVENUE
LONGVIEW, WA 98632

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

MAILING ADDRESS
1057 12TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

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

MAILING ADDRESS
PO BOX 2429
LONGVIEW, WA 98632

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

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

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

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

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

MAILING ADDRESS
PO BOX 1447
CHEHALIS, WA 98532
COWLITZ

CERTIFIED SERVICES

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

084900
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE
- LONGVIEW/KELSO
1230 SEVENTH AVENUE
LONGVIEW, WA 98632
(360) 636-2400

MAILING ADDRESS
1230 SEVENTH AVE
LONGVIEW, WA 98632

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

200537
KELSO TREATMENT SOLUTIONS
305 PACIFIC AVENUE SOUTH, SUITE C
KELSO, WA 98626
(360) 425-5378
N/A
HTTP://WWW.ACADIAHEALTHCARE.COM

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

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

200371
LOVE OVERWHELMING
618 14TH AVENUE
LONGVIEW, WA 98632
(360) 749-8056
ADMIN@LOVEOVERWHELMING.ORG
WWW.LOVEOVERWHELMING.NET

MAILING ADDRESS
PO BOX 1670
LONGVIEW, WA 98632

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

200095
PEACEHEALTH ST. JOHN MEDICAL CENTER E&T
1615 DELAWARE STREET
LONGVIEW, WA 98632

MAILING ADDRESS
1615 DELAWARE STREET
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
- RECOVERY SUPPORT WRAPAROUND FACILITATION

DAN P. RUSH
CLINICAL DIRECTOR

THOMAS GATES
CLINICAL SUPERVISOR

NICOLE SMITH
CLINIC DIRECTOR

STEPHANIE WHITFIELD
CLINICAL SUPERVISOR

CHUCK HENDRICKSON
EXECUTIVE DIRECTOR

LAURA PATTERSON
CLINICAL DIRECTOR

KYLE RAHN
NETWORK DIRECTOR
## Cowlitz County

### Mailing Address
600 Broadway Street, Room #226
Longview, WA 98632

### Certified Services
- Mental Health Services:
  - Inpatient Evaluation and Treatment - Adult

### Sea Mar Behavioral Health - Kelso

- **Location:** 17010 Allen Street, Kelso, WA 98626
- **Contact:** (360) 261-7020
- **Email:** info@seamarchc.org
- **Website:** www.seamarchc.org

<table>
<thead>
<tr>
<th>Address</th>
<th>CAUDIA D‘ALLEGGRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
</tr>
<tr>
<td>Office</td>
<td>STEPHEN MAYNARD</td>
</tr>
<tr>
<td>Office</td>
<td>PROGRAM MANAGER/CLINICAL SUPERVISOR</td>
</tr>
</tbody>
</table>

### Strengthening Foundations LLC

- **Location:** 1338 Commerce Avenue, Suite 208
  Longview, WA 98632

<table>
<thead>
<tr>
<th>Address</th>
<th>LIBBY HEIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>CHIEF PROGRAM OFFICER</td>
</tr>
</tbody>
</table>

### Douglas County

### Children’s Home Society of Washington - East Wenatchee

- **Location:** 220 Eastmont Avenue, Suite B, East Wenatchee, WA 98802
- **Contact:** (509) 663-0034
- **Email:** Janica.lockhart@chs-wa.org
- **Website:** www.chs-wa.org

<table>
<thead>
<tr>
<th>Address</th>
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<tbody>
<tr>
<td>Office</td>
<td>CHIEF PROGRAM OFFICER</td>
</tr>
<tr>
<td>Office</td>
<td>KARIN POTTER</td>
</tr>
<tr>
<td>Office</td>
<td>CHILD &amp; FAMILY COUNSELING PROGRAM MANAGER</td>
</tr>
</tbody>
</table>

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

DOUGLAS

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

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

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

FERRY

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

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155

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

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

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155

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

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

MAILING ADDRESS
PO BOX 1120
REPUBLIC, WA 99166

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

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

MAILING ADDRESS
PO BOX 1120
REPUBLIC, WA 99166

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

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

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

FRANKLIN

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

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

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

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

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

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

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

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

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

177600
LOURDES COUNSELING CENTER - PASCO
1020 SOUTH 7TH AVENUE
PASCO, WA 99301
(509) 547-9000
(509) 943-9104
LOURDESHEALTH.NET
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
CICILY ZORNES
EXECUTIVE DIRECTOR
DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
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
PO BOX 1775
MOSES LAKE, WA 98831-0214

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

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

200212
GRANT INTEGRATED SERVICES - GRAND COULEE
322 FORTUYN ROAD
GRAND COULEE, WA 99133
(509) 765-9239
WWW.GRANTCOUNTYWA.GOV

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
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RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

GAIL GOODWIN
ADMINISTRATOR
LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

200213
GRANT INTEGRATED SERVICES - MATTAWA
210 GOVERNMENT ROAD
MATTAWA, WA 99349
(509) 765-9239
WWW.GRANTCOUNTYWA.GOV

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
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RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

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

002200
GRANT INTEGRATED SERVICES - MOSES LAKE MAIN
840 EAST PLUM STREET
MOSES LAKE, WA 98837
(509) 765-9239
(509) 765-5402
WWW.GRANTCOUNTYWA.GOV

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES
NOEMI GARCIA
SUD MANAGER
GRANT

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
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RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

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

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
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RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

GAIL GOODWIN
ADMINISTRATOR
LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

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

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
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INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
GRANT

155300 SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.
- MOSES LAKE
104 WEST BROADWAY
MOSES LAKE, WA 98837
(509) 855-9494
JOEB.JOHNSON@STOPWA.COM
WWW.STOPWA.COM

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

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

GRAYS HARBOR

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

MAILING ADDRESS
914 EAST WISHKAH STREET #B
ABERDEEN, WA 98520

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

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

MAILING ADDRESS
3857 MARTIN WAY E
OLYMPIA, WA 98506

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

200032 BEHAVIORAL HEALTH RESOURCES - HOQUIAM
205 8TH STREET
HOQUIAM, 98550
(360) 704-7170
WWW.BHR.ORG

MAILING ADDRESS
3857 MARTIN WAY E
OLYMPIA, 98506

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

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#### 200396

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<tr>
<th>Catholic Community Services - Aberdeen State Street</th>
<th>Mary Stone Smith</th>
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<tr>
<td>403 West State Street, Suite 201 &amp; 206</td>
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</tr>
<tr>
<td>Aberdeen, WA 98520</td>
<td></td>
</tr>
<tr>
<td>(360) 612-3839</td>
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<tr>
<td><a href="mailto:nikkih@ccsww.org">nikkih@ccsww.org</a></td>
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**Mailing Address**

1001 N J Street
TACOMA, WA 98403

### 200350

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<tr>
<td>224 East Wishkah Street</td>
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<tr>
<td>(888) 322-7156</td>
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<tr>
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<td><a href="http://www.cccsww.org/familypreservation">www.cccsww.org/familypreservation</a></td>
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**Mailing Address**

1001 N J Street
TACOMA, WA 98403

### 200554

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<tr>
<th>Columbia Wellness - Aberdeen</th>
<th>David McClay</th>
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<tbody>
<tr>
<td>2700 Simpson Avenue, Suite 101</td>
<td>CEO</td>
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**Mailing Address**

921 14TH AVE
LONGVIEW, WA 98632
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200393
**Columbia Wellness - Hoquiam**
615 8th Street
Hoquiam, WA 98550
(800) 654-3837
(360) 532-8629
[www.columbiawell.org](http://www.columbiawell.org)

**Mailing Address**
921 14th Ave
Longview, WA 98632

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107500
**Doc - Stafford Creek Corrections Center**
191 Constantine Way
Aberdeen, WA 98520
(360) 725-8628

**Mailing Address**
PO Box 41123 (MS 41123)
Olympia, WA 98504-1123

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163700
**Evergreen Treatment Services - Grays Harbor Clinic**
804 Levee Street
Hoquiam, WA 98550
(360) 209-6339

**Mailing Address**
1700 Airport Way S
Seattle, WA 98134-1618

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200510  GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM  
3033-B INGRAM STREET  
HOQUIAM, WA 98550  
(360) 261-6930  
(855) 303-4834  
INFO@GREATRIVERSBHO.ORG  
WWW.CIHEALTHSERVICES.COM  
MARC BOLLINGER  
CEO/ADMINISTRATOR  
RON LEHTO  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 1447  
CHEHALIS, WA 98532  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT

002500  HARBORCREST BEHAVIORAL HEALTH  
1006 NORTH H STREET  
ABERDEEN, WA 98520  
(360) 533-8500  
(360) 537-6454  
MELANIE BRANDT  
CNO  
ANGELA BRUMFIELD-LEAKS  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
1006 NORTH H ST  
ABERDEEN, WA 98520  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT

200484  LIFELINE CONNECTIONS - ABERDEEN  
311 SOUTH I STREET  
ABERDEEN, WA 98520  
(360) 397-8246  
(800) 604-0025  
ADMISSIONS@LIFELINECONNECTIONS.ORG  
WWW.LIFELINECONNECTIONS.ORG  
JARED SANFORD  
CEO  
BRANDY BRANCH  
CCO / MH & SUD CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 1678  
VANCOUVER, WA 98668  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY HOUSING SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT
GRAYS HARBOR

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

MAILING ADDRESS  
PO BOX 477  
ELMA, WA 98541  

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

JUNE O'BRIEN  
DIRECTOR  

MICHAEL TISDALE  
CLINICAL SUPERVISOR  

---

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

MAILING ADDRESS  
PO BOX 289  
TAHOLAH, WA 98587  

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

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  

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  

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

CERTIFIED SERVICES

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

SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - ABERDEEN
012701
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

TRUE NORTH-ESD 113 - GRAYS HARBOR
096600
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

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

LEAH NICCOLOCCI
DIRECTOR

CHARLENE ABRAHAMSON
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 508
OAKVILLE, WA 98568

CERTIFIED SERVICES

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

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

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

TONY PRENTICE
ADMINISTRATOR

CRAIG ZAHN
CLINICAL SUPERVISOR
ISLAND

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

200465
COMPASS HEALTH - COUPEVILLE
20 NORTHWEST 1ST STREET
COUPEVILLE, WA 98239
(360) 678-5555
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

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

200224
COMPASS HEALTH - HARBOR STATION
230 SOUTHEAST CABOT DRIVE
OAK HARBOR, WA 98277
(360) 682-4100
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

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

086200
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - OAK HARBOR
520 EAST WHIDBEY AVENUE, SUITE 205
OAK HARBOR, WA 98277
(360) 675-5782

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

CERTIFIED SERVICES
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ALCOHOL AND DRUG INFORMATION SCHOOL
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<th>Contact Person</th>
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<tr>
<td><strong>STACEY HOTTER-KNIGHT</strong></td>
<td><strong>PRESIDENT</strong></td>
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</tr>
<tr>
<td>MAIN</td>
<td>231 SOUTHEAST BARRINGTON DRIVE, SUITE 203</td>
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<td><a href="mailto:ADMIN@LEAPSANDBEYOND.COM">ADMIN@LEAPSANDBEYOND.COM</a></td>
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**NAVAL HOSPITAL SUBSTANCE ABUSE AND REHABILITATION PROGRAM (SARP)**

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<tr>
<td></td>
<td>3475 NORTH SARATOGA STREET R-52</td>
<td>STEVEN DAGGETT</td>
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<td></td>
<td>OAK HARBOR, WA 98278</td>
<td>ADMINISTRATOR/CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td></td>
<td>(360) 257-2394</td>
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<tr>
<td><strong>163100</strong></td>
<td><strong>SEA MAR BEHAVIORAL HEALTH - OAK HARBOR</strong></td>
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<tr>
<td>31640 STATE ROUTE 20, SUITE 1</td>
<td>OAK HARBOR, WA 98277</td>
<td></td>
</tr>
<tr>
<td>(360) 679-7676</td>
<td>(</td>
<td>Claudia D'Allegri</td>
</tr>
<tr>
<td>Vice President of Behavioral Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Oscar Rivera</td>
<td></td>
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</tr>
<tr>
<td>Clinical Supervisor</td>
<td></td>
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<tr>
<td>8915 14TH AVE S</td>
<td>SEATTLE, WA 98108</td>
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<td><strong>200380</strong></td>
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<tr>
<td>107 SOUTH MAIN STREET</td>
<td>COUPEVILLE, WA 98239</td>
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</tr>
<tr>
<td>(360) 682-8154</td>
<td>(866) 533-1486</td>
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<tr>
<td><a href="mailto:Info@SunriseEmail.com">Info@SunriseEmail.com</a></td>
<td><a href="http://www.SunriseCommunityLiving.com">www.SunriseCommunityLiving.com</a></td>
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<tr>
<td>530 NORTHEAST MIDWAY BOULEVARD</td>
<td>OAK HARBOR, WA 98277</td>
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<tr>
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<td>211 TAYLOR STREET, SUITES 20 &amp; 21</td>
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<tr>
<td>(360) 385-1258</td>
<td>Gabrhea Caudill</td>
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<tr>
<td>Administrator</td>
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<tr>
<td>Vincent Marquis</td>
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JEFFERSON

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

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

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

MAILING ADDRESS
PO BOX 565
PORT TOWNSEND, WA 98368

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

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

MAILING ADDRESS
PO BOX 102
PORT TOWNSEND, WA 98368

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

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

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

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

### KING

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<th>Code</th>
<th>Business Name</th>
<th>Address</th>
<th>Contact Person</th>
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<tr>
<td>178000</td>
<td>2nd Chance Recovery Center, LLC</td>
<td>235 Southwest 153rd Street</td>
<td>James Lawrence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BURien, WA 98166</td>
<td>Owner/Administrator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(206) 242-4915</td>
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<tr>
<td></td>
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<td>235 SW 153RD STREET</td>
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<td>044000</td>
<td>A Positive Alternative, Inc.</td>
<td>4649 Sunnyside Avenue N, Suite 200</td>
<td>Catherine Trestrail</td>
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<td></td>
<td>SEATTLE, WA 98103</td>
<td>Administrator</td>
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<tr>
<td></td>
<td></td>
<td>(206) 547-1955</td>
<td>Amy Condon</td>
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<td>150100</td>
<td>A Renewal Center, LLC</td>
<td>401 Olympia Avenue NE, Suites 318 &amp; 320</td>
<td>Donna Whitmire</td>
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<td>(425) 227-0447</td>
<td>(206) 779-5805</td>
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<td>533 Redmond PL NE</td>
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<td>041900</td>
<td>Alpha Recovery Choices</td>
<td>10614 Beardslee Boulevard, Suite D</td>
<td>Jeanne Pourroy-Carter</td>
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<td>(888) 429-9399</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

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

DWAYNE BROWN
ADMINISTRATOR

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

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

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

JOSEPH WOLFE
DIRECTOR/ADMINISTRATOR
CRISTY CALDWELL
CLINICAL DIRECTOR

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

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

156400
ANTIOCH COUNSELING AND TREATMENT SERVICES
12316 134TH COURT NE
REDMOND, WA 98052
(425) 284-2852
(425) 985-8770

ROBERT RIGG
EXECUTIVE DIRECTOR

MAILING ADDRESS
12316 134TH CT NE
REDMOND, WA 98052

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

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

CHRIS JONES
DIRECTOR OF OPERATIONS
STEVEN MICHALSKI
CLINIC DIRECTOR

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

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

200422

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

MAILING ADDRESS
PO BOX 47055
SEATTLE, WA 98166

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

120700

ARMSTRONG ALCOHOL AND DRUG RECOVERY, LLC
625 STRANDER BOULEVARD, SUITE C
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
ACRSINFO@ACRS.ORG
WWW.ACRS.ORG

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

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

118700

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

STEVE UHRICH
EXECUTIVE DIRECTOR
SHARON FENTON
CLINICAL SUPERVISOR
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - BELLEVUE MAIN
1800 112TH AVENUE NORTHEAST, SUITE 150W
BELLEVUE, WA 98004
MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS
RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - KENT
841 CENTRAL AVENUE NORTH, SUITE C215
KENT, WA 98032
MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS
RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY

ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - SEATTLE
2111 NORTH NORTHGATE WAY, SUITE 212
SEATTLE, WA 98133
MICHAEL AIBINDER  
DIRECTOR OF OPERATIONS
RYAN NICHOLS  
DIRECTOR OF CHEMICAL DEPENDENCY
ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - WEST
4700 42ND AVENUE SOUTHWEST, SUITE 470
SEATTLE, WA 98116
(206) 935-1282
(800) 858-6702
STAFF@ABHC.COM
WWW.ABHC.COM

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

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS
RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

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

MAILING ADDRESS
2103 SOUTH ATLANTIC STREET
SEATTLE, WA 98144

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

HERERI CONTRERAS
PROGRAM DIRECTOR

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

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

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

ROBERT HAUPT
VICE PRESIDENT
SHANA HUIZENGA
CLINICAL DIRECTOR

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

MAILING ADDRESS
6957 CALIFORNIA AVE SW
SEATTLE, WA 98136

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

DIANNE HUTCHENSON
ADMINISTRATOR
OLIVETTE FOSTER
CLINICAL SUPERVISOR
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<td>BEHAVIORAL HEALTH WORKS, INC.</td>
<td>MONTE LIM</td>
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<td>6624 SOUTH 196TH STREET, SUITE U107</td>
<td>DIRECTOR OF ADMINISTRATION</td>
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<td></td>
<td>KENT, WA 98032</td>
<td>CHRISTOPHER ROBERTS</td>
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<td><a href="mailto:CARETEAM@BHWCARES.COM">CARETEAM@BHWCARES.COM</a></td>
<td><a href="http://WWW.BHWCARES.COM">WWW.BHWCARES.COM</a></td>
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<tr>
<td></td>
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| 005400 | CASCADE BEHAVIORAL HOSPITAL | MICHAEL URADNIK |
| | 12844 MILITARY ROAD SOUTH | CEO/ADMINISTRATOR |
| | TUKWILA, WA 98168 | DAN LABUDA |
| | (206) 244-0180 | SUD CLINICAL SUPERVISOR |
| | (206) 248-4550 | WWW.CASCADEBH.COM |
| | MAILING ADDRESS | 12844 MILITARY RD S |
| | | TUKWILA, WA 98168 |
| | CERTIFIED SERVICES | MENTAL HEALTH SERVICES: |
| | | INPATIENT EVALUATION AND TREATMENT - ADULT |
| | SUBSTANCE USE DISORDER SERVICES: | |
| | ALCOHOL AND DRUG INFORMATION SCHOOL | |
| | DUI ASSESSMENT | |
| | INTENSIVE INPATIENT | |
| | LEVEL I OUTPATIENT | |
| | LEVEL II INTENSIVE OUTPATIENT | |
| | WITHDRAWAL MANAGEMENT | |

| 173200 | CASTEELE, WILLIAMS & ASSOCIATES | JOHN L. CASTEELE, JR. |
| | COMPREHENSIVE BEHAVIORAL HEALTH, INC. - VASHON | EXECUTIVE DIRECTOR |
| | 9730 SOUTHWEST BANK ROAD, SUITE 107C | |
| | VASHON, WA 98070 | |
| | (253) 536-2881 | |
| | CWACOUNSELING@HOTMAIL.COM | |
| | MAILING ADDRESS | 711 S 25TH ST STE B |
| | | TACOMA, WA 98405 |
| | CERTIFIED SERVICES | MENTAL HEALTH SERVICES: |
| | | BRIEF INTERVENTION TREATMENT |
| | SUBSTANCE USE DISORDER SERVICES: | CASE MANAGEMENT |
| | ALCOHOL AND DRUG INFORMATION SCHOOL | FAMILY THERAPY |
| | DUI ASSESSMENT | GROUP THERAPY |
| | LEVEL I OUTPATIENT | INDIVIDUAL TREATMENT |
| | LEVEL II INTENSIVE OUTPATIENT | |
| | SCREENING AND BRIEF INTERVENTION | |

| 034300 | CATHOLIC COMMUNITY SERVICES - SEATTLE | MARY STONE SMITH |
| | 1902 SECOND AVENUE, SUITE 208 | VICE PRESIDENT |
| | SEATTLE, WA 98101 | |
| | (206) 956-9570 | JUNGWON YOON |
| | WWW.CCSWW.ORG | SUD CLINICAL SUPERVISOR |
| | MAILING ADDRESS | 1001 N J STREET |
| | | TACOMA, WA 98403 |
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

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

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

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

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155

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

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

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

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

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

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

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

MAILING ADDRESS
316 BROADWAY
SEATTLE, WA 98122

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

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

MAILING ADDRESS
BELLEGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

MARGARET FERRIS
DIRECTOR/CEO
KING

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT

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

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

ALICE COLEMAN
ADMINISTRATOR

MICHELLE BYRD
CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT

200063
COMMUNITY HOUSE MENTAL HEALTH
851 POPLAR PLACE SOUTH
SEATTLE, WA 98144
(206) 322-2387
(206) 586-8250
CSZALA@CHMHA.ORG
WWW.CHMHA.ORG

CHRISTOPHER SZALA
EXECUTIVE DIRECTOR

TAMMIE BAKER
CLINICAL DIRECTOR

MAILING ADDRESS
851 POPLAR PLACE SOUTH
SEATTLE, WA 98144

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

087600
COMMUNITY PSYCHIATRIC CLINIC - BELLTOWN
2329 FOURTH AVENUE
SEATTLE, WA 98121
(206) 461-3649
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
11000 LAKE CITY WAY NE
SEATTLE, WA 98125

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
COMMUNITY PSYCHIATRIC CLINIC - CAScade HALL
204 NORTHEAST 94TH STREET
SEATTLE, WA 98115
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG
DOUG CRANDALL
CHIEF EXECUTIVE OFFICER
LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

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

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

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

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

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
| 170800 | COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN | DOUG CRANDALL  
| | 10700 MERIDIAN AVENUE NORTH, SUITE G-11 | CHIEF EXECUTIVE OFFICER  
| | SEATTLE, WA 98133 | DAVID NEWMAN  
| | (206) 461-4544 | SUD PROGRAM MANAGER  
| | SLOPEZ@CPCWA.ORG |  
| | WWW.CPCWA.ORG |  
| MAILING ADDRESS | 11000 LAKE CITY WAY NE |  
| | SEATTLE, WA 98125 |  
| CERTIFIED SERVICES | SUBSTANCE USE DISORDER SERVICES: | MENTAL HEALTH SERVICES:  
| | LEVEL I OUTPATIENT | CASE MANAGEMENT  
| | LEVEL II INTENSIVE OUTPATIENT | CRISIS OUTREACH  
| | | FAMILY THERAPY  
| | | GROUP THERAPY  
| | | INDIVIDUAL TREATMENT  
| | | LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
| | | PSYCHIATRIC MEDICATION  
| | | RECOVERY EMPLOYMENT SUPPORT  
| | | RECOVERY HOUSING SUPPORT  
| | | RECOVERY PEER SUPPORT  

| 200567 | COMMUNITY PSYCHIATRIC CLINIC - SOUTH SEATTLE | DOUG CRANDALL  
| | 4636 EAST MARGINAL WAY SOUTH, SUITE B-130 | CEO  
| | SEATTLE, WA 98134 | ALICE NICHOLS  
| | (206) 461-3614 | CLINICAL DIRECTOR  
| | WWW.CPCWA.ORG |  
| MAILING ADDRESS | 11000 LAKE CITY WAY NE |  
| | SEATTLE, WA 98015 |  
| CERTIFIED SERVICES | MENTAL HEALTH SERVICES: |  
| | | CASE MANAGEMENT  
| | | CRISIS OUTREACH  
| | | FAMILY THERAPY  
| | | INDIVIDUAL TREATMENT  
| | | PSYCHIATRIC MEDICATION  
| | | RECOVERY PEER SUPPORT  
| | | RECOVERY SUPPORT WRAPAROUND FACILITATION  

| 200559 | COMMUNITY PSYCHIATRIC CLINIC - UNIVERSITY DISTRICT | DOUG CRANDALL  
| | 1415 NORTHEAST 43RD STREET | CEO  
| | SEATTLE, WA 98105 | ALICE NICHOLS  
| | (206) 461-3614 | CLINICAL DIRECTOR (MH CS)  
| | WWW.CPCWA.ORG |  
| MAILING ADDRESS | 11000 LAKE CITY WAY NE |  
| | SEATTLE, WA 98015 |  
| CERTIFIED SERVICES | SUBSTANCE USE DISORDER SERVICES: | MENTAL HEALTH SERVICES:  
| | LEVEL I OUTPATIENT | CASE MANAGEMENT  
| | | INDIVIDUAL TREATMENT  
| | | RECOVERY PEER SUPPORT  

| 087400 | COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE | DOUG CRANDALL  
| | 4120 STONE WAY NORTH | CHIEF EXECUTIVE OFFICER  
| | SEATTLE, WA 98103 | DAVID NEWMAN  
| | (206) 461-3707 | SUD CLINICAL SUPERVISOR  
| | SLOPEZ@CPCWA.ORG |  
| | WWW.CPCWA.ORG |  
| MAILING ADDRESS | 11000 LAKE CITY WAY NE |  
| | SEATTLE, WA 98125 |  
| CERTIFIED SERVICES | |  
| | | |
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

200366
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION
- KENT
8725 SOUTH 212TH STREET, BUILDING E
KENT, WA 98031
(425) 653-3016
SHANNON@CONNECTIONS-BEHAVIOR.COM
WWW.CONNECTIONS-BEHAVIOR.COM

MAILING ADDRESS
1003 7TH AVENUE
KIRKLAND, WA 98033

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

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

MAILING ADDRESS
1003 7TH AVENUE
KIRKLAND, WA 98033

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

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

200395
CONNECTIONS BEHAVIOR PLANNING & INTERVENTION
- SLATER PARK
11828 SLATER PARK AVENUE NE, SUITE 150
KIRKLAND, WA 98034
(425) 653-3016
SHANNON.S@CONNECTIONS-BEHAVIOR.COM
WWW.CONNECTIONS-BEHAVIOR.COM

MAILING ADDRESS
1003 7TH AVE
KIRKLAND, WA 98033

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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
200186  CONSEJO COUNSELING AND REFERRAL SERVICE - BELLEVUE  
13343 BEL-RED ROAD, SUITE 210  
BELLEVUE, WA 98007  
(425) 679-0801  
(206) 461-4880  
WWW.CONSEJONEW.CONSEJO.COUNSELING.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  
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.CONSEJO.COUNSELING.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  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  

003800  CONSEJO COUNSELING AND REFERRAL SERVICE - MAIN  
3808 SOUTH ANGELINE STREET  
SEATTLE, WA 98118  
(206) 461-4880  
MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR  
MARCOS SAURI  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
3808 S ANGELINE ST  
SEATTLE, WA 98118  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
CRISIS OUTREACH  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY PEER SUPPORT  

149500  CONSEJO KENT YOUTH OUTPATIENT SERVICES  
515 WEST HARRISON STREET, SUITE 109  
KENT, WA 98032  
(206) 461-4880  
MARIO E. PAREDES-JOVEL  
EXECUTIVE DIRECTOR  
MARCOS SAURI  
CLINICAL SUPERVISOR
MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

135400 CONSEJO YOUTH AND FAMILY SERVICES - SEATTLE
8615 14TH AVENUE SOUTH
SEATTLE, WA 98108
(206) 461-4980

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

MARCOS SAURI
CLINICAL SUPERVISOR

MAILING ADDRESS
3808 S ANGELINE
SEATTLE, WA 98118

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

158200 COWLITZ TRIBAL TREATMENT PROGRAM - SEATTLE
15455 65TH AVENUE SOUTH
TUKWILA, WA 98188
(206) 721-5170

ELIZABETH TAIL
PROGRAM DIRECTOR

LETHA FERNANDEZ
CLINICAL SUPERVISOR

MAILING ADDRESS
15455 65TH AVENUE SOUTH
TUKWILA, WA 98188

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

154100 CRISIS CLINIC
CONFIDENTIAL LOCATION
(866) 789-1511
(866) 833-6546

KATHLEEN SOUTHWICK
EXECUTIVE DIRECTOR

MAILING ADDRESS

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS

MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

113800 CTC COUNSELING SERVICES, LLC
12351 LAKE CITY WAY, SUITE 202
SEATTLE, WA 98125
(206) 957-0721
INFO@CTCCOUNSELINGSERVICES.COM
WWW.CTCCOUNSELINGSERVICES.COM

JESSICA RHODES
ADMINISTRATOR

CRYSTAL MAZAC
CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Certified Services</th>
<th>Substance Use Disorder Services:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and Drug Information School</td>
<td></td>
</tr>
<tr>
<td>DUI Assessment</td>
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<tr>
<td>Level I Outpatient</td>
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<tr>
<td>Level II Intensive Outpatient</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOC - Bishop Lewis Work Release</th>
<th>DAWN L. WILLIAMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>703 8th Avenue, Seattle, WA 98104</td>
<td></td>
</tr>
<tr>
<td>(360) 725-8628</td>
<td></td>
</tr>
<tr>
<td>Substance Abuse Administrator</td>
<td></td>
</tr>
<tr>
<td>Bryan Smith</td>
<td></td>
</tr>
<tr>
<td>Clinical Supervisor</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOC - Helen B. Ratcliffe Work Release</th>
<th>DAWN L. WILLIAMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1531 13th Avenue South, Seattle, WA 98114</td>
<td></td>
</tr>
<tr>
<td>(360) 725-8628</td>
<td></td>
</tr>
<tr>
<td>Substance Abuse Administrator</td>
<td></td>
</tr>
<tr>
<td>Bryan Smith</td>
<td></td>
</tr>
<tr>
<td>Clinical Supervisor</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOC - Reynolds Work Release</th>
<th>DAWN L. WILLIAMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>410 4th Avenue, Seattle, WA 98104</td>
<td></td>
</tr>
<tr>
<td>(360) 725-8628</td>
<td></td>
</tr>
<tr>
<td>Substance Abuse Administrator</td>
<td></td>
</tr>
<tr>
<td>Bryan Smith</td>
<td></td>
</tr>
<tr>
<td>Clinical Supervisor</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Downtown Emergency Service Center - Crisis Solutions Center</th>
<th>DANIEL MALONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1600 South Lane Street, Seattle, WA 98144</td>
<td></td>
</tr>
<tr>
<td>(206) 464-1570</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:Info@Desc.org">Info@Desc.org</a></td>
<td></td>
</tr>
<tr>
<td><a href="http://www.Desc.org">www.Desc.org</a></td>
<td></td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
</tr>
<tr>
<td>Graydon Andrus</td>
<td></td>
</tr>
<tr>
<td>Director of Clinical Programs (MH CS)</td>
<td></td>
</tr>
</tbody>
</table>

| Mailing Address | 515 Third Ave, Seattle, WA 98104 |
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

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

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

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

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

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

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

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

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

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

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

109700
EASTSIDE CENTER FOR FAMILY
2025 112TH AVENUE NE, SUITE 201
BELLEVUE, WA 98004
(425) 462-8558

LAURA HALFORD
ADMINISTRATOR

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

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

037201
EASTSIDE RECOVERY GROUP
1715 114TH AVENUE SE, SUITE 204
BELLEVUE, WA 98004
(425) 454-0839
INFO@EASTSIDERG.COM
WWW.EASTSIDERG.COM

JILL WEINSTEIN
ADMINISTRATOR

PAUL HUNZIKER
CLINICAL SUPERVISOR

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

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

200191
EASTSIDE SOCIAL SKILLS THERAPY, LLC
5436 232ND AVENUE SE
ISSAQAH, WA 98029
(206) 380-3009

MAILING ADDRESS
5436 232ND AVENUE SE
ISSAQAH, WA 98029

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

200048
EATING RECOVERY CENTER OF WASHINGTON - MAIN
1231 116TH AVENUE NORTHEAST
BELLEVUE, WA 98004
(425) 451-1134
INFO@EATINGRECOVERY.COM
WWW.EATINGRECOVERYCENTER.COM

LARA EFFLAND
EXECUTIVE CLINICAL DIRECTOR

MAILING ADDRESS
1231 116TH AVENUE NORTHEAST
BELLEVUE, WA 98004
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200531 EATING RECOVERY CENTER OF WASHINGTON - SEATTLE
901 BOREN AVENUE, SUITE 1800
SEATTLE, WA 98104
(425) 326-5300
(425) 214-9360
INFO@EATINGRECOVERY.COM
WWW.EATINGRECOVERYCENTER.COM

Mailing Address
1231 116TH AVE NE
BELLEVUE, WA 98004

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

200137 ENGAGE ABA LLC
CONFIDENTIAL LOCATION
(425) 761-5010
(206) 719-2506
AIDAN@ENGAGEABA.COM

Mailing Address
LEILA M. BARLOW
1200 WESTLAKE AVENUE N, SUITE 508
SEATTLE, WA 98109
(206) 402-4115

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

136100 EVERGREEN HEALTHCARE
11800 NORTHEAST 128TH STREET, 2ND FLOOR
KIRKLAND, WA 98034
(425) 899-6300
(800) 548-0558

LEAH JONES
CD SERVICES ADMINISTRATOR
TODD BELLER
CD CLINICAL SUPERVISOR
KING

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

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

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

MAILING ADDRESS
1700 AIRPORT WAY S
SEATTLE, WA 98134

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

KELLEY CRAIG
REACH CO-DIRECTOR
TRICIA HOWE
REACH SUPERVISOR

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

MAILING ADDRESS
1700 AIRPORT WAY S
SEATTLE, WA 98134

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

MOLLY CARNEY, PHD
EXECUTIVE DIRECTOR
SEAN SOTH
CLINICAL SUPERVISOR

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

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

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

MOLLY CARNEY
EXECUTIVE DIRECTOR
CAROL DAVIDSON
CLINICAL SUPERVISOR

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

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

MOLLY CARNEY
EXECUTIVE DIRECTOR
CAROL DAVIDSON
CLINICAL SUPERVISOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
OPIATE SUBSTITUTION TREATMENT

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

MAILING ADDRESS
33010 SE 99TH ST
SNOQUALMIE, WA 98065

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

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

MAILING ADDRESS
10200 NE 132ND ST
KIRKLAND, WA 98034

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

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

FOUNDATIONS FOR LEARNING AND BEHAVIOR, INC.
15600 REDMOND WAY, SUITE 205
REDMOND, WA 98052
PAUL JOHNSON
DIRECTOR

FRIENDS OF YOUTH - DUVALL
26420 NORTHEAST VIRGINIA STREET
DUVALL, WA 98019
(425) 844-9669
(425) 392-6367
TERRY POTTMeyer
PRESIDENT & CEO
LAUREN CHRISTENSON
CLINICAL SUPERVISOR

MAILING ADDRESS
15 S GRADY WAY, STE 249
RENTON, WA 98057

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

MAILING ADDRESS
14434 NORTHEAST 8TH STREET, SUITE 300
BELLEVUE, WA 98007

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

MAILING ADDRESS
PO BOX 2755
REDMOND, WA 98073-2755

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

MAILING ADDRESS
PO BOX 12
ISSAQAH, WA 98027

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
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<tr>
<td>040901</td>
<td>FRIENDS OF YOUTH - MAIN</td>
<td>414 FRONT STREET NORTH, ISSAQUAH, WA 98052</td>
<td>TERRY POTTMEY, PRESIDENT &amp; CEO</td>
<td>SUBSTANCE USE DISORDER SERVICES:</td>
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<tr>
<td></td>
<td></td>
<td>(425) 392-6367</td>
<td>MARIE C. MACCOY, CLINICAL SUPERVISOR</td>
<td>ALCOHOL AND DRUG INFORMATION SCHOOL</td>
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<td>MAILING ADDRESS</td>
<td>PO BOX 12, ISSAQUAH, WA 98027-2914</td>
<td>TERRY POTTMEY, PRESIDENT &amp; CEO</td>
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<td>170200</td>
<td>FRIENDS OF YOUTH - NORTH BEND</td>
<td>401 BALLARAT AVENUE NORTH, NORTH BEND, WA 98045</td>
<td>TERRY POTTMEY, PRESIDENT &amp; CEO</td>
<td>SUBSTANCE USE DISORDER SERVICES:</td>
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<td></td>
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<td>(425) 888-4151</td>
<td>LAUREN CHRISTENSON, CLINICAL SUPERVISOR</td>
<td>ALCOHOL AND DRUG INFORMATION SCHOOL</td>
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<td>TERRY POTTMEY, PRESIDENT &amp; CEO</td>
<td>MENTAL HEALTH SERVICES:</td>
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<tr>
<td>200060</td>
<td>FULL LIFE CARE</td>
<td>2600 SOUTH WALKER STREET, SEATTLE, WA 98144</td>
<td>CATHERINE FARR, DIRECTOR</td>
<td>MENTAL HEALTH SERVICES:</td>
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<tr>
<td></td>
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<td>(206) 224-3746</td>
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<tr>
<td>042400</td>
<td>FUTURE VISIONS PROGRAM, INC.</td>
<td>620 M STREET NE, SUITE 2, AUBURN, WA 98002</td>
<td>KAREN PARKER, PROGRAM COORDINATOR</td>
<td>SUBSTANCE USE DISORDER SERVICES:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(253) 735-2718</td>
<td>KAREN GARVIN, CLINICAL MANAGER</td>
<td>ALCOHOL AND DRUG INFORMATION SCHOOL</td>
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<td>MAILING ADDRESS</td>
<td>PO BOX 1980, AUBURN, WA 98071</td>
<td>KAREN PARKER, PROGRAM COORDINATOR</td>
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200217  HARBORVIEW MEDICAL CENTER - INPATIENT
325 9TH AVENUE
SEATTLE, WA 98104

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

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

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

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

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

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

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

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

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

MAILING ADDRESS
12838 SE 40TH PLACE
BELLEVUE, WA 98006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CLUBHOUSE
159400 HOPE + HELP
230 AUBURN WAY SOUTH #1B & 2B
AUBURN, WA 98002
(253) 333-2328
WWW.HH-C.NET

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

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

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

MAILING ADDRESS
PO BOX 75011
SEATTLE, WA 98175

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

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

LUDMILA MONICA NEGRILA
DIRECTOR

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

MAILING ADDRESS
3805 108TH AVE NE STE 204
BELLEVUE, WA 98004

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

LUDMILA MONICA NEGRILA
EXECUTIVE DIRECTOR/CLINICAL DIRECTOR

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)

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

JEN COLLADO
PROGRAM DIRECTOR

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE
2414 SW ANDOVER STREET, SUITE D-120
SEATTLE, WA 98106

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

DANETTE DARROW
PROGRAM DIRECTOR
<table>
<thead>
<tr>
<th>Area</th>
<th>Address</th>
<th>Services</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>KING</strong></td>
<td><strong>MAILING ADDRESS</strong>&lt;br&gt;5709 W SUNSET HWY STE 100&lt;br&gt;SPOKANE, WA 99224</td>
<td><strong>MENTAL HEALTH SERVICES:</strong>&lt;br&gt;RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</td>
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<td><strong>CERTIFIED SERVICES</strong></td>
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<td><strong>200077</strong>&lt;br&gt;INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY&lt;br&gt;34004 16TH AVENUE S., SUITE 200&lt;br&gt;FEDERAL WAY, WA 98003</td>
<td>CHARLOTTE BOOTH&lt;br&gt;EXECUTIVE DIRECTOR</td>
<td></td>
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<tr>
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<td><strong>MAILING ADDRESS</strong>&lt;br&gt;34004 16TH AVENUE S., SUITE 200&lt;br&gt;FEDERAL WAY, WA 98003</td>
<td><strong>MENTAL HEALTH SERVICES:</strong>&lt;br&gt;BRIEF INTERVENTION TREATMENT&lt;br&gt;CASE MANAGEMENT&lt;br&gt;FAMILY THERAPY&lt;br&gt;INDIVIDUAL TREATMENT</td>
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<td><strong>136000</strong>&lt;br&gt;INTEGRATIVE COUNSELING SERVICES&lt;br&gt;701 NORTH 36TH STREET, SUITE 300&lt;br&gt;SEATTLE, WA 98103</td>
<td>SCOTT REDING&lt;br&gt;ADMINISTRATOR</td>
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<td><strong>MAILING ADDRESS</strong>&lt;br&gt;701 N 36TH ST STE 300&lt;br&gt;SEATTLE, WA 98103</td>
<td><strong>SUBSTANCE USE DISORDER SERVICES:</strong>&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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<td><strong>004300</strong>&lt;br&gt;INTERCEPT ASSOCIATES&lt;br&gt;30620 PACIFIC HIGHWAY SOUTH, SUITE 107&lt;br&gt;FEDERAL WAY, WA 98003</td>
<td>NANCY STARK&lt;br&gt;DIRECTOR&lt;br&gt;ANNE NEARN&lt;br&gt;TREATMENT DIRECTOR</td>
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<td><strong>MAILING ADDRESS</strong>&lt;br&gt;30620 PACIFIC HWY S STE 107&lt;br&gt;FEDERAL WAY, WA 98003</td>
<td><strong>SUBSTANCE USE DISORDER SERVICES:</strong>&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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<td><strong>129400</strong>&lt;br&gt;ISLAND ASSESSMENT &amp; COUNSELING CENTER, INC. - SEATTLE&lt;br&gt;4250 AURORA AVENUE NORTH, SUITE A106&lt;br&gt;SEATTLE, WA 98103</td>
<td>AMY HOFEIDITZ&lt;br&gt;ADMINISTRATOR</td>
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<td><strong>MAILING ADDRESS</strong>&lt;br&gt;4250 AURORA AVE N STE A106&lt;br&gt;SEATTLE, WA 98103</td>
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<td><strong>KENT TREATMENT SOLUTIONS</strong></td>
<td>21851 84TH AVE S, #101</td>
<td>Michael Courtois (Clinic Director)</td>
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<td></td>
<td>KENT, WA 98032</td>
<td>Rand Johnson (Clinical Supervisor)</td>
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<td><strong>MAILING ADDRESS</strong></td>
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| **KENT YOUTH AND FAMILY SERVICES**       | 232 2ND AVENUE SOUTH, SUITE 201                     | Mike Heinisch (Executive Director)          |
|                                         | KENT, WA 98032                                       | Paula Frederick (Director of Clinical Programs)|
| **MAILING ADDRESS**                      | 232 2ND AVE S STE 201                               |                                              |
| **CERTIFIED SERVICES**                   | SUBSTANCE USE DISORDER SERVICES:                    |                                              |
|                                         | ALCOHOL AND DRUG INFORMATION SCHOOL                 |                                              |
|                                         | LEVEL I OUTPATIENT                                  |                                              |
|                                         | LEVEL II INTENSIVE OUTPATIENT                       |                                              |

| **KING COUNTY CRISIS & COMMITMENT SERVICES** | 401 5TH AVENUE, SUITE 400 | Kelli Nomura (King County BHO Administrator) |
|                                             | SEATTLE, WA 98104          | Christine Piatt (Hospital Placement & Diversion Supervisor) |
| **MAILING ADDRESS**                         | 401 5TH AVENUE, SUITE 400 |                                              |
| **CERTIFIED SERVICES**                      | MENTAL HEALTH SERVICES:  |                                              |
|                                         | CRISIS EMERGENCY INVOLUNTARY DETENTION               |                                              |
|                                         | CRISIS OUTREACH                                      |                                              |
|                                         | RECOVERY PEER SUPPORT                                |                                              |

| **KING COUNTY EMERGENCY SERVICE PATROL**   | 1930 BOREN AVENUE            | Daniel Floyd (Program Coordinator)         |
|                                           | SEATTLE, WA 98121            |                                              |
| **MAILING ADDRESS**                        | 1930 BOREN AVE               |                                              |
| **CERTIFIED SERVICES**                     | SUBSTANCE USE DISORDER SERVICES: |                                              |
|                                         | EMERGENCY SERVICE PATROL    |                                              |
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER
200 MILL AVENUE SOUTH, SUITE 10
RENTON, WA 98057
(425) 226-5062
DYAMAMOTO@KCSARC.ORG
WWW.KCSARC.ORG
DEANN YAMAMOTO
DEPUTY EXECUTIVE DIRECTOR
LARRAINE LYNCH
CLINICAL PROGRAM MANAGER

MAILING ADDRESS
PO BOX 300
RENTON, WA 98057

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

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

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

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

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

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

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
<table>
<thead>
<tr>
<th>Location</th>
<th>Administrator</th>
<th>Clinical Supervisor</th>
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<tbody>
<tr>
<td>Issaquah</td>
<td>Calvin Walker</td>
<td>Toby Peterson</td>
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<tr>
<td>Kirkland</td>
<td>Lisa Lierley</td>
<td>Jeff Stevens</td>
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<td>Kirkland Inpatient</td>
<td>Elizabeth Meloeny</td>
<td>Dave Rudduck</td>
</tr>
<tr>
<td>Renton</td>
<td>Deena Dole</td>
<td>Jay YourGLISH</td>
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**KING**

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<tr>
<th>Location</th>
<th>Address</th>
<th>Phone Numbers</th>
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<tbody>
<tr>
<td>Issaquah</td>
<td>300 Northeast Gilman Boulevard, Suite 200, Issaquah, WA 98027</td>
<td>(425) 392-8468, CALVIN WALKER, ADMINISTRATOR, TOBY PETERSON, CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>Kirkland</td>
<td>6725 116th Avenue NE, Suite 110, Kirkland, WA 98033-8455</td>
<td>(425) 822-5095, LISA LIERLEY, ADMINISTRATOR, JEFF STEVENS, CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>Kirkland Inpatient</td>
<td>10322 Northeast 132nd Street, Kirkland, WA 98034-2829</td>
<td>(425) 823-3116, (800) 231-4303, ELIZABETH MEOENY, ADMINISTRATOR, DAVE RUDDUCK, CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>Renton</td>
<td>1000 SW 7th Street, Suite B, Renton, WA 98057-5216</td>
<td>(206) 248-4358, DEENA DOLE, ADMINISTRATOR, JAY YOURGLISH, CLINICAL SUPERVISOR</td>
</tr>
</tbody>
</table>

**Mailing Address**

- Issaquah: 300 Northeast Gilman Boulevard, Suite 200, Issaquah, WA 98027
- Kirkland: 6725 116th Avenue NE, Suite 110, Kirkland, WA 98033-8455
- Kirkland Inpatient: 10322 Northeast 132nd Street, Kirkland, WA 98034-2829
- Renton: 1000 SW 7th Street, Suite B, Renton, WA 98057-5216

**Certified Services**

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

- Alcohol and Drug Information School
- DUI Assessment
- Level I Outpatient
- Level II Intensive Outpatient
- Intensive Inpatient
- Intensive Outpatient
- Withdrawal Management
- Youth Residential
- Youth Withdrawal Management

**Contact Information**

- Issaquah: HELP@LAKESIDEMILAM.COM, WWW.LAKESIDEMILAM.COM
- Kirkland: HELP@LAKESIDEMILAM.COM, WWW.LAKESIDEMILAM.COM
- Renton: HELP@LAKESIDEMILAM.COM, WWW.LAKESIDEMILAM.COM
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<th>Services</th>
</tr>
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<tr>
<td>LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE EASTLAKE</td>
<td>2815 EASTLAKE AVENUE EAST, SUITE 100</td>
<td>CERTIFIED SERVICES&lt;br&gt;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&lt;br&gt;CATHERINE WERDEN ADMINISTRATOR&lt;br&gt;DAN LABUDA CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>LIFELONG AIDS ALLIANCE</td>
<td>1016 EAST PIKE STREET, SUITE 300</td>
<td>CERTIFIED SERVICES&lt;br&gt;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;JOHN STREIMIKES SENIOR MANAGER OF CLINICAL SERVICES&lt;br&gt;ROBERT GIBBS, JR. CHEMICAL DEPENDENCY COUNSELOR</td>
</tr>
<tr>
<td>LOVELAND ASSOCIATES</td>
<td>2815 EASTLAKE AVENUE EAST</td>
<td>CERTIFIED SERVICES&lt;br&gt;SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;DUI ASSESSMENT&lt;br&gt;JILL LOVELAND ADMINISTRATOR/OWNER</td>
</tr>
<tr>
<td>LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT</td>
<td>10803 SOUTHEAST KENT-KANGLEY ROAD, #101</td>
<td>CERTIFIED SERVICES&lt;br&gt;SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;DUI ASSESSMENT&lt;br&gt;ANDREW KRITOVICH CLINICAL DIRECTOR</td>
</tr>
<tr>
<td>Zip Code</td>
<td>Agency Name</td>
<td>Address Details</td>
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<tr>
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<tr>
<td>200084</td>
<td>LUTHERAN COMMUNITY SERVICES NORTHWEST - SEATAC MAIN</td>
<td>4040 SOUTH 188TH STREET, SUITE 200 SEATAC, WA 98188</td>
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<tr>
<td></td>
<td></td>
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<tr>
<td>138600</td>
<td>MATT TALBOT CENTER</td>
<td>2313 THIRD AVENUE SEATTLE, WA 98121</td>
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<tr>
<td>200089</td>
<td>MATUMAINI COUNSELING &amp; COMMUNITY CENTER</td>
<td>3714 SOUTH FERDINAND STREET SEATTLE, WA 98118</td>
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<td>200090</td>
<td>MEIER CLINICS</td>
<td>22232 17TH AVENUE SE, SUITE 312 BOTHELL, WA 98021</td>
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<tr>
<td>Area of Service</td>
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<td>Address</td>
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<tr>
<td>MENTAL HEALTH SERVICES: DAY SUPPORT</td>
<td>MINDFUL ALTERNATIVES</td>
<td>12727 NORTHUP WAY, SUITE 19 BELLEVUE, WA 98005</td>
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<td>SUBSTANCE USE DISORDER SERVICES: DUI ASSESSMENT LEVEL I OUTPATIENT</td>
<td>MOSAIC CHILDREN’S THERAPY CLINIC</td>
<td>13010 NORTHEAST 20TH STREET, SUITE 300 BELLEVUE, WA 98005</td>
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<tr>
<td>SUBSTANCE USE DISORDER SERVICES: DUI ASSESSMENT LEVEL I OUTPATIENT</td>
<td>MOTIVATIONS</td>
<td>17311 135TH AVENUE NE, SUITE B-750 WOODINVILLE, WA 98072</td>
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<tr>
<td>SUBSTANCE USE DISORDER SERVICES: DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
<td>MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM</td>
<td>17813 SOUTHEAST 392ND STREET AUBURN, WA 98092</td>
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<tr>
<td>Location Code</td>
<td>Facility Name</td>
<td>Address Details</td>
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</tr>
</tbody>
</table>
| 15700 | MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH | 17500 SOUTHEAST 392ND STREET AUBURN, WA 98092 | MICHAEL P. CLARKE  
BEHAVIORAL HEALTH DIRECTOR  
SABRINA DE LA FUENTE  
YOUTH CD SUPERVISOR |
| 200361 | MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER | 202 NORTH DIVISION STREET AUBURN, WA 98001 | PAM HAITHCOX EGGLESTON  
ADMINISTRATOR  
ANGELA NAYLOR  
DIRECTOR |
| 200247 | NAVOS - AUBURN | 402 EAST MAIN STREET, SUITE 160 AUBURN, WA 98002 | KEN RYAN  
PROGRAM SUPERVISOR  
JOE TANGNEY  
CLINICAL SUPERVISOR |
| 075300 | NAVOS - BURIEN 136TH STREET | 1210 SOUTHWEST 136TH STREET BURIEN, WA 98166 | MIRIAM MIYAKE  
ADMINISTRATIVE DIRECTOR  
ANGELA FRYE  
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 TELEPHONE SUPPORT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  PSYCHIATRIC MEDICATION
  RECOVERY EMPLOYMENT SUPPORT
  RECOVERY MEDICATION SUPPORT
  RECOVERY PEER SUPPORT

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

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

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

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

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

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

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
<table>
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<tr>
<th>Service Area</th>
<th>Location</th>
<th>Contact Information</th>
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<td><strong>MENTAL HEALTH SERVICES:</strong></td>
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<tr>
<td><strong>CHILD LONG-TERM INPATIENT PROGRAM (CLIP)</strong></td>
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<td><strong>200244</strong></td>
<td>NAVOS - INPATIENT SERVICES</td>
<td>TERRY MCINERNEY&lt;br&gt;DIRECTOR OF NURSING&lt;br&gt;WWW.NAVOS.ORG&lt;br&gt;MEDICAL ADDRESS&lt;br&gt;2600 SW HOLDEN STREET&lt;br&gt;SEATTLE, WA 98126</td>
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<tr>
<td><strong>200248</strong></td>
<td>NAVOS - KENT</td>
<td>KEN RYAN&lt;br&gt;PROGRAM SUPERVISOR&lt;br&gt;WWW.NAVOS.ORG&lt;br&gt;MEDICAL ADDRESS&lt;br&gt;2600 SW HOLDEN ST&lt;br&gt;SEATTLE, WA 98126</td>
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<td>NAVOS - MAIN</td>
<td>MEGAN KELLY&lt;br&gt;CHIEF CLINICAL OFFICER&lt;br&gt;WWW.NAVOS.ORG&lt;br&gt;MEDICAL ADDRESS&lt;br&gt;2600 SOUTHWEST HOLDEN STREET&lt;br&gt;SEATTLE, WA 98126</td>
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<tr>
<td></td>
<td>NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC&lt;br&gt;- SEATTLE</td>
<td>DIANE BUFORD&lt;br&gt;CEO&lt;br&gt;WWW.RECOVERNEWLIFE.COM&lt;br&gt;MELANIE KEPLINGER&lt;br&gt;SUD CLINICAL SUPERVISOR&lt;br&gt;WWW.RECOVERNEWLIFE.COM&lt;br&gt;MELANIE KEPLINGER&lt;br&gt;SUD CLINICAL SUPERVISOR</td>
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</tbody>
</table>
MAILING ADDRESS
5019 GROVE ST STE 103A
MARYSVILLE, WA 98270

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

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

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

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

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

MAILING ADDRESS
9045 16TH AVE SW
SEATTLE, WA 98106

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

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

MAILING ADDRESS
1000 AUBURN WAY S
AUBURN, WA 98002

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

170100 NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE
1356 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG
SHELLY PRICCO
EXECUTIVE DIRECTOR
MARK WALRATH
SUD CLINICAL SUPERVISOR
KING

MAILING ADDRESS
1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

170000

NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET
847 BLAKE STREET
ENUMCLAW, WA 98022
(360) 825-4586
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG

MAILING ADDRESS
1000 AUBURN WAY S
AUBURN, WA 98002

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

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

200532

NEXUS YOUTH AND FAMILIES - MAPLE VALLEY
24930 224TH AVENUE SOUTHEAST
MAPLE VALLEY, WA 98038
(253) 939-2202
INFO@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG

MAILING ADDRESS
1000 AUBURN WAY S
AUBURN, WA 98002

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

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

139500

NORTH STAR TREATMENT GROUP, LLC
15 SOUTH GRADY WAY, SUITE 505
RENTON, WA 98057
(206) 241-1187

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

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

CRAIG S. ROCK
ADMINISTRATOR
<table>
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<tr>
<th>Zip Code</th>
<th>Organization Name</th>
<th>Address</th>
<th>City, State</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
<th>Executive Director</th>
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<tr>
<td>200495</td>
<td>NORTHBOUND TREATMENT SERVICES OF WASHINGTON, LLC</td>
<td>510 2ND AVENUE WEST, SEATTLE, WA 98119</td>
<td>SEATTLE, WA</td>
<td>(866) 311-0003</td>
<td><a href="mailto:MIKEP@LIVINGSOBER.COM">MIKEP@LIVINGSOBER.COM</a></td>
<td><a href="http://WWW.LIVINGSOBER.COM">WWW.LIVINGSOBER.COM</a></td>
<td>MICHAEL PLAISANCE</td>
</tr>
<tr>
<td>118000</td>
<td>NORTHSORE YOUTH AND FAMILY SERVICES</td>
<td>19201 120TH AVENUE NE, SUITE 108, BOTHELL, WA 98011</td>
<td>BOTHELL, WA</td>
<td>(425) 485-6541</td>
<td><a href="mailto:INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG">INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG</a></td>
<td><a href="http://WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG">WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG</a></td>
<td>DEBBIE FARRAR</td>
</tr>
<tr>
<td>176100</td>
<td>NORTHSIDE COUNSELING, LLC</td>
<td>1207 NORTH 200TH STREET, SUITE 213A, SHORELINE, WA 98133</td>
<td>SHORELINE, WA</td>
<td>(206) 533-8333</td>
<td><a href="mailto:MVERANTH12@GMAIL.COM">MVERANTH12@GMAIL.COM</a></td>
<td></td>
<td>MICHAEL VERANTH</td>
</tr>
<tr>
<td>200250</td>
<td>NORTHWEST ABA - MAIN</td>
<td>651 STRANDER BOULEVARD, SUITE 105, TUKWILA, WA 98188</td>
<td>TUKWILA, WA</td>
<td>(206) 226-1472</td>
<td><a href="mailto:INFO@NORTHWESTABA.COM">INFO@NORTHWESTABA.COM</a></td>
<td><a href="http://WWW.NORTHWESTABA.COM">WWW.NORTHWESTABA.COM</a></td>
<td>TAKANORI KOYAMA</td>
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<tr>
<td>200251</td>
<td>NORTHWEST BEHAVIORAL ASSOCIATES</td>
<td>3003 NORTHUP WAY, SUITE 200, BELLEVUE, WA 98004</td>
<td>BELLEVUE, WA</td>
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MAILING ADDRESS
3003 NORTHUP WAY, SUITE 200
BELLEVUE, 98004

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

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

MAILING ADDRESS
1550 NORTH 115TH STREET
SEATTLE, WA 98133

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

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

MAILING ADDRESS
PO BOX 39199
LAKEWOOD, WA 98496

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

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

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

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

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

MAILING ADDRESS
2505 3RD AVENUE, SUITE 325
SEATTLE, WA 98121
<table>
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<tr>
<th>Certification Area</th>
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<th>Contact Information</th>
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<tr>
<td>Substance Use Disorder Services</td>
<td>2500 116TH AVENUE NE, SUITE 1, BELLEVUE, WA 98004</td>
<td>(425) 462-1612, <a href="http://WWW.OLIVECREST.ORG/PN">WWW.OLIVECREST.ORG/PN</a></td>
</tr>
<tr>
<td>Faith Knowles, Mental Health Supervisor</td>
<td></td>
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<tr>
<td>Mailing Address</td>
<td>2500 116TH AVENUE NE, SUITE 1, BELLEVUE, WA 98004</td>
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<td>Opal Clinic for Eating Disorders, PLLC</td>
<td>1100 NORTHEAST 45TH STREET, SUITE 600, SEATTLE, WA 98105</td>
<td>(206) 926-9087, <a href="http://WWW.OPALFOODANDBODY.COM">WWW.OPALFOODANDBODY.COM</a></td>
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<tr>
<td>Alexia Gliblin, Executive Director</td>
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<tr>
<td>Mailing Address</td>
<td>1100 NE 45TH STREET, SUITE 600, SEATTLE, WA 98105</td>
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<tr>
<td>Organization for Research and Learning</td>
<td>12430 83RD AVENUE SOUTH, SEATTLE, WA 98179</td>
<td>(206) 930-5556</td>
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<td>Marian Martinez, Mental Health Supervisor</td>
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<tr>
<td>Mailing Address</td>
<td>3815 S OTHELLO ST STE 100, SEATTLE, WA 98118</td>
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<td>Pacific Islamic Community and Cultural Services</td>
<td>10634 EAST RIVERSIDE DRIVE, SUITE 300, BOTHELL, WA 98011</td>
<td>(425) 949-5779, <a href="mailto:SEAPICAS@AOL.COM">SEAPICAS@AOL.COM</a>, <a href="http://WWW.PICAS.ORG">WWW.PICAS.ORG</a></td>
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KING

165600  PIB-PROCESO, LLC - KENT
23830 PACIFIC HIGHWAY SOUTH, SUITES 323-325
KENT, WA 98032
(206) 414-1974
MARCO SANCHEZ
MANAGER/PARTNER

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

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

156500  PIB-PROCESO, LLC - SEATTLE
1833 NORTH 105TH STREET, SUITE 101
SEATTLE, WA 98133
(206) 478-1191
MARCO SANCHEZ
MANAGER/PARTNER

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

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

096500  PIONEER COUNSELING SERVICES - SEATTLE
901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144
(206) 470-3856
WWW.PIONEERHUMANSERVICES.ORG
BETH HAMMONDS
DIRECTOR
LESLIE CHRISTEN
CHEMICAL DEPENDENCY SUPERVISOR

MAILING ADDRESS
901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144

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

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

128100  PIONEER HUMAN SERVICES - CO-OCCURRING
RESIDENTIAL PROGRAM (CORP)
11900 BEACON AVENUE SOUTH
SEATTLE, WA 98178
(206) 772-6900
WWW.PIONEERHUMANSERVICES.ORG
GEORGE CALDERON
DIRECTOR III

MAILING ADDRESS
11900 BEACON AVE S
SEATTLE, WA 98178
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<td>113500</td>
<td>RAGING RIVER RECOVERY CENTER</td>
<td>9575 ETHAN WADE WAY SOUTHEAST, SNOQUALMIE, WA 98065</td>
<td>(425) 831-5425, (425) 831-5426, <a href="http://WWW.SNOQUALMIETRIBE.US">WWW.SNOQUALMIETRIBE.US</a></td>
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<td>REFUGEE WOMEN'S ALLIANCE - KENT</td>
<td>124 4TH AVENUE SOUTH, SUITE 230, KENT, WA 98030</td>
<td>MAHNAZ ESHETU, EXECUTIVE DIRECTOR</td>
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<td>REFUGEE WOMEN'S ALLIANCE - SEATAC</td>
<td>16256 MILITARY ROAD SOUTH, SUITE 102, SEATAC, WA 98168</td>
<td>MAHNAZ ESHETU, EXECUTIVE DIRECTOR</td>
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CERTIFIED SERVICES

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

200105
RE Refugee Women's Alliance - Seattle Main
4008 Martin Luther King Jr. Way South
Seattle, WA 98108
(206) 721-0243
WWW.REWA.ORG

MAHNAZ ESHETU
Executive Director

MOLLY DONOVAN
Director of Behavioral Health

MAILING ADDRESS
4008 Martin Luther King Jr Way South
Seattle, WA 98108

CERTIFIED 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

LINDSAY HOFFE
Clinical Director

DIPTI SARNAIK
MH Clinical Supervisor

MAILING ADDRESS
PO Box 1510
Renton, WA 98057

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT

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

005200
Residence XII - Kirkland
12029 113th Avenue NE
Kirkland, WA 98034
(425) 823-8844

LIZ M. BRAUN, PH.D.
CEO

CANDACE HUNSUCKER
Clinical Supervisor/Tx Dir

MAILING ADDRESS
12029 113th Ave NE
Kirkland, WA 98034

CERTIFIED SERVICES

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

117000
Riverton Place
3020 South 128th Street
Burien, WA 98168
(206) 242-5585

SCOTT CLEVELAND
Assistant Director

DERYL W. DAVIS-BELL
Clinical Supervisor

MAILING ADDRESS
3020 S 128th St
Burien, WA 98168
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200372
ROOTS CLINIC AT ACADEMY FOR PRECISION LEARNING
5031 UNIVERSITY WAY NE, SUITE 105
SEATTLE, WA 98105
(206) 427-0115
INFO@APLSCHOOL.ORG
WWW.APLSCHOOL.ORG

MAILING ADDRESS
PO BOX 51241
SEATTLE, WA 98115

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

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

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

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

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

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CASSANDRA ELLSWORTH
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR
MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

200401

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

Mailing Address
8915 14TH AVE S
SEATTLE, WA 98108

Mailing Address
8915 14TH AVE S
SEATTLE, WA 98108

Certified Services
Substance Use Disorder Services:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- YOUTH RESIDENTIAL

Mental Health Services:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION

121300

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

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

Certified Services
Substance Use Disorder Services:
- INTENSIVE INPATIENT

CLAUDIA D'ALLEGRI
VP, BEHAVIORAL HEALTH

MARCO MEDINA
CLINICAL SUPERVISOR

172300
<table>
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<tr>
<td>SEA MAR BEHAVIORAL HEALTH - WHITE CENTER</td>
<td>CLAUDIA D'ALLEGRI</td>
<td>(206) 763-5277</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
</tr>
<tr>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
<td>SARAH DAILEY</td>
<td><a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a>, <a href="http://WWW.SEAMARCHC.ORG">WWW.SEAMARCHC.ORG</a></td>
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<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
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<tr>
<td>SEADRUNAR</td>
<td>SHERI HEALEY</td>
<td>(206) 767-0244</td>
<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT, LONG-TERM RESIDENTIAL, RECOVERY HOUSE, WITHDRAWAL MANAGEMENT</td>
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<tr>
<td>10344 14TH AVENUE SOUTH, SEATTLE, WA 98168</td>
<td>ANGELA GROUT</td>
<td>Mailing Address</td>
<td>PO BOX 80864, SEATTLE, WA 98108</td>
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<td>SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC</td>
<td>MARA OBLAK</td>
<td>(206) 535-9876</td>
<td>MENTAL HEALTH SERVICES: RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</td>
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<tr>
<td>4746 11TH AVENUE NE, SUITE 102, SEATTLE, WA 98105</td>
<td>Mailing Address</td>
<td>4746 11TH AVENUE NE, SUITE 102, SEATTLE, WA 98105</td>
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<tr>
<td>SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER</td>
<td>ERIN EASLEY</td>
<td>(206) 987-8080, RAPHAEL BERNIER</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>4909 25TH AVENUE NE, SEATTLE, WA 98105</td>
<td>DIRECTOR, CLINICAL DIRECTOR</td>
<td><a href="mailto:FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG">FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG</a>, <a href="http://WWW.SEATTLECHILDRENS.ORG">WWW.SEATTLECHILDRENS.ORG</a></td>
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<tr>
<td>Mailing Address</td>
<td>4800 SAND POINT WAY NE, SEATTLE, WA 98105</td>
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<td><strong>Mental Health Services:</strong> BRIEF INTERVENTION TREATMENT, CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, PSYCHIATRIC MEDICATION</td>
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200390

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

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

LESLIE PIERSON
DIRECTOR, PSYCHIATRY

CAROL ROCKHILL
MEDICAL DIRECTOR

200347

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

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

KATHY BREWER
MANAGER, INSURANCE PROCESSING/UTILIZATION REVIEW

DEBRA GUMBARDO
CHIEF PSYCHO-SOCIAL SERVICES

200391

SEATTLE CHILDREN'S HOSPITAL - ODESSA BROWN CHILDREN'S CLINIC
2101 EAST YESLER WAY
SEATTLE, WA 98122
(206) 987-7210
(866) 987-2000
FAMILY.FEEDBACK@SEATTLECHILDRENS.ORG
WWW.SEATTLECHILDRENS.ORG

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

ARLELIA BAILEY
DIRECTOR

MARK FADOOL
CLINICAL DIRECTOR

115200

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

ANN MCGETTIGAN
EXECUTIVE DIRECTOR

PAT SOON
CLINICAL DIRECTOR
<table>
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<tr>
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<th>King</th>
</tr>
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<td><strong>KING</strong></td>
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<tr>
<td>1216 Pine St Ste 300</td>
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<td><strong>Certified Services</strong></td>
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<tr>
<td>611 12th Avenue South</td>
<td>Seattle, WA 98114</td>
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<tr>
<td>(206) 324-9360</td>
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<tr>
<td><strong>Mailing Address</strong></td>
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<tr>
<td>611 12th Ave S</td>
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<tr>
<td>210 South Hudson Street, Suites 312 &amp; 318</td>
<td>Seattle, WA 98134</td>
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<tr>
<td>(206) 832-8518</td>
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<tr>
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<tr>
<td>210 South Hudson Street, Suites 312 &amp; 318</td>
<td>Seattle, WA 98134</td>
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<td>Recovery Support Wraparound Facilitation</td>
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<td>10564 5th Avenue NE, Suite 301</td>
<td>Seattle, WA 98125</td>
</tr>
<tr>
<td>(206) 789-4784</td>
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</tr>
<tr>
<td><strong>Mailing Address</strong></td>
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<tr>
<td>10564 5th Avenue NE, Suite 301</td>
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<td><strong>Certified Services</strong></td>
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<td>15 South Grady Way, Suite 310</td>
<td>Renton, WA 98055</td>
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<tr>
<td>Post Office Box 1514</td>
<td>Renton, WA 98057</td>
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| 200467 | SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. | ANDREW TATUM  
- KENT  
1619 WEST JAMES STREET, SUITE A  
KENT, WA 98032  
(253) 234-1190  
WWW.STOPWA.COM  
MATERIAL ADDRESS  
PO BOX 111297  
TACOMA, WA 98411  
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  
- INDIVIDUAL TREATMENT  
| 200271 | SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN  
11032 20TH AVENUE NE  
SEATTLE, WA 98125  
(206) 397-5196  
INFO@SEBASEATTLE.COM  
WWW.SEBASEATTLE.COM  
MATERIAL ADDRESS  
11032 20TH AVENUE NE  
SEATTLE, WA 98125  
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  
MATERIAL ADDRESS  
9714 3RD AVENUE NE, SUITE 206  
SEATTLE, WA 98115  
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  
MATERIAL ADDRESS  
17924 140TH AVENUE NORTHEAST, SUITE 230  
WOODINVILLE, WA 98072  
CERTIFIED SERVICES  
- SUBSTANCE USE DISORDER SERVICES:  
  - LEVEL I OUTPATIENT  
|
KING

106400  SOUND MENTAL HEALTH - AUBURN  4238 AUBURN WAY NORTH  AUBURN, WA 98002  (253) 876-7600  CLIENTFEEDBACK@SMH.ORG  WWW.SMH.ORG

**KATRINA EGNER**
CHIEF PROGRAMS OFFICER

**ARDEN JAMES**
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**
1600 E OLIVE ST
SEATTLE, WA 98122

**CERTIFIED SERVICES**

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

**PROBLEM & PATHOLOGICAL GAMBLING SERVICES:**
PROBLEM & PATHOLOGICAL GAMBLING

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

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

**KATRINA EGNER**
CHIEF PROGRAMS OFFICER

**THERESA WINTHER**
MH & SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**
1600 E OLIVE ST
SEATTLE, WA 98122

**CERTIFIED SERVICES**

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

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

200274  SOUND MENTAL HEALTH - BELLEVUE BUILDING B  14270 NORTHEAST 21ST STREET  BELLEVUE, WA 98007  (425) 653-5000  CLIENTFEEDBACK@SMH.ORG  WWW.SMH.ORG

**KATRINA EGNER**
CHIEF PROGRAMS OFFICER

**CARA GRESHAM**
SUD CLINICAL SUPERVISOR

**MAILING ADDRESS**
1600 E OLIVE ST
SEATTLE, WA 98122
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**CERTIFIED SERVICES**
**SUBSTANCE USE DISORDER SERVICES:**
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

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

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

**MAILING ADDRESS**
1600 E OLIVE ST
SEATTLE, WA 98122

<table>
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**SOUND MENTAL HEALTH - CAPITOL HILL MAIN**
1600 EAST OLIVE STREET
SEATTLE, WA 98122
(206) 302-2200
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

**MAILING ADDRESS**
1600 E OLIVE ST
SEATTLE, WA 98122
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200272  
SOUD MENTAL HEALTH - CAPITOL HILL NORTH  
122 16TH AVENUE EAST  
SEATTLE, WA 98112  
(206) 302-2800  
CLIENTFEEDBACK@SMH.ORG  
WWW.SMH.ORG  
KATRINA EGNER  
CHIEF PROGRAMS OFFICER  
CHRISTINE ATIENZA  
SUD CLINICAL SUPERVISOR  
MAILING ADDRESS  
1600 E OLIVE ST  
SEATTLE, WA 98122  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  

106500  
SOUD MENTAL HEALTH - NORTHGATE  
9706 4TH AVENUE NE, SUITE 303  
SEATTLE, WA 98115  
(206) 302-2900  
KATRINA EGNER  
CHIEF PROGRAMS OFFICER  
MAILING ADDRESS  
1600 E OLIVE ST  
SEATTLE, WA 98122  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT  
PSYCHIATRIC MEDICATION  
RECOVERY EMPLOYMENT SUPPORT  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT
SOUND MENTAL HEALTH - REDMOND
16225 NORTHEAST 87TH STREET, SUITE A-6
REDMOND, WA 98052
(425) 653-4960
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORG

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

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

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

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

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122

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

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

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER
DENNIS MARCERON
PROGRAM MANAGER

MAILING ADDRESS
1600 E OLIVE ST
SEATTLE, WA 98122
### 200116

**Southeast Youth and Family Services**  
3722 South Hudson Street  
Seattle, WA 98118  
(206) 721-5542  
[www.seyfs.org](http://www.seyfs.org)

**Mailing Address**  
3722 South Hudson Street  
Seattle, WA 98118

**Certified Services**

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

**Executive Director**  
Anthony Austin

**Clinical Director**  
Stephanie McWethy

### 200117

**Southwest Youth and Family Services**  
4555 Delridge Way SW  
Seattle, WA 98106

**Mailing Address**  
4555 Delridge Way SW  
Seattle, WA 98106

**Certified Services**

- Mental Health Services:
  - Case Management
  - Crisis Outreach
  - Crisis Telephone Support
  - Family Therapy
  - Group Therapy
  - Individual Treatment

### 200052

**Steps, LLC**  
2366 Eastlake Avenue East, Suite 102  
Seattle, WA 98102  
(206) 829-9328

**Mailing Address**  
2366 Eastlake Avenue East, Suite 102  
Seattle, WA 98102

**Certified Services**

- Mental Health Services:
  - Recovery Support Applied Behavior Analysis (ABA)
200278  SUM OF LEARNING  
2310 130TH AVENUE NE, BUILDING B, SUITE 100  
BELLEVUE, WA 98005  
(425) 954-7243  
INFO@SUMOFLEARNING.COM  
WWW.SUMOFLEARNING.COM  

IVY MAN SUM CHUNG  
EXECUTIVE DIRECTOR  

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

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

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

WILLIS LEACH  
ADMINISTRATOR  
ALVIN CURRIE  
TREATMENT DIRECTOR  

MAILING ADDRESS  
12650 FIRST AVE S  
SEATTLE, WA 98168  

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

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

VALERIE LYTLE  
ADMINISTRATOR & NURSE MANAGER  
STEVE MORRIS  
CLINICAL SUPERVISOR  

MAILING ADDRESS  
ATTN: CHIEF NURSING OFFICER  
SEATTLE, WA 98107  

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

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

BRIAN LIVINGSTON  
MD / CHIEF OPERATING OFFICER  
HEATHER COLEMAN  
NURSE EXECUTIVE  

MAILING ADDRESS  
ATTN: CHIEF NURSING OFFICER  
SEATTLE, WA 98107  

CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
INPATIENT EVALUATION AND TREATMENT - ADULT
<table>
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<tr>
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<th>Provider Name</th>
<th>Address</th>
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<tr>
<td>200572</td>
<td>Telecare - King County E&amp;T</td>
<td>33480 13TH PLACE SOUTH FEDERAL WAY, WA 98003</td>
<td>Tyvonne Berring</td>
<td>(253) 285-7101, (888) 249-2327, <a href="http://www.telegarecorp.com">www.telegarecorp.com</a></td>
</tr>
<tr>
<td>200386</td>
<td>The Emily Program - RTF</td>
<td>4 NICKERSON STREET, SUITE 300 SEATTLE, WA 98109</td>
<td>Rebecca May</td>
<td>(888) 364-5977, <a href="http://www.emilyprogram.com">www.emilyprogram.com</a></td>
</tr>
<tr>
<td>200126</td>
<td>The Emily Program - Seattle</td>
<td>1700 WESTLAKE AVENUE NORTH, SUITE 650 SEATTLE, WA 98109</td>
<td>Joanna Stagg</td>
<td>(888) 364-5977, <a href="http://www.emilyprogram.com">www.emilyprogram.com</a></td>
</tr>
<tr>
<td>200447</td>
<td>The Evergreen at Northpoint</td>
<td>13037 NORTHEAST BEL RED ROAD, SUITE 102 BELLEVUE, WA 98005</td>
<td>Thomas Hamman</td>
<td>(425) 285-7539, <a href="mailto:tmcclure@northpointrecovery.com">tmcclure@northpointrecovery.com</a>, <a href="http://www.evergreendrugrehab.com">www.evergreendrugrehab.com</a></td>
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</tbody>
</table>

**Certified Services**

**Mental Health Services:**
- Inpatient Evaluation and Treatment - Adult

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

**Mental Health Services:**
- Case Management
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Medication Support
- Residential Treatment Facility
004000  THERAPEUTIC HEALTH SERVICES - BELLEVUE
1412 140TH PLACE NORTHEAST
BELLEVUE, WA 98007
(425) 747-7892

MAILING ADDRESS
1116 SUMMIT AVENUE
SEATTLE, WA 98101

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

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

JEREMY PETERSON
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

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

MAILING ADDRESS
24823 S PACIFIC HWY
KENT, WA 98032

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

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

HOLLIE CHRISTIANCY
BRANCH MANAGER

PHILIP JONES
SUD CLINICAL SUPERVISOR

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

MAILING ADDRESS
5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118

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

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

RANDON AEA
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR
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<td>THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET</td>
<td>GEORGE CALDERON&lt;br&gt;BRANCH MANAGER&lt;br&gt;NORMAN JOHNSON&lt;br&gt;EXECUTIVE DIRECTOR</td>
</tr>
<tr>
<td></td>
<td>1305 SENECA STREET&lt;br&gt;SEATTLE, WA 98101&lt;br&gt;(206) 323-0934</td>
<td>SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;OPIATE SUBSTITUTION TREATMENT</td>
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<tr>
<td>Mailing Address</td>
<td>1116 SUMMIT AVE&lt;br&gt;SEATTLE, WA 98101</td>
<td>MENTAL HEALTH SERVICES:&lt;br&gt;BRIEF INTERVENTION TREATMENT&lt;br&gt;CASE MANAGEMENT&lt;br&gt;CRISIS TELEPHONE SUPPORT&lt;br&gt;FAMILY THERAPY&lt;br&gt;GROUP THERAPY&lt;br&gt;INDIVIDUAL TREATMENT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY EMPLOYMENT SUPPORT&lt;br&gt;RECOVERY PEER SUPPORT</td>
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| 015800 | THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE | GEORGE CALDERON<br>BRANCH MANAGER<br>NORMAN JOHNSON<br>EXECUTIVE DIRECTOR |
|        | 1116 SUMMIT AVENUE<br>SEATTLE, WA 98101<br>(206) 323-0930 | SUBSTANCE USE DISORDER SERVICES:<br>ALCOHOL AND DRUG INFORMATION SCHOOL<br>DUI ASSESSMENT<br>LEVEL I OUTPATIENT<br>LEVEL II INTENSIVE OUTPATIENT<br>OPIATE SUBSTITUTION TREATMENT |
| Mailing Address | ATTN: CYNTHIA M. DUAY<br>SEATTLE, WA 98101 | MENTAL HEALTH SERVICES:<br>BRIEF INTERVENTION TREATMENT<br>CASE MANAGEMENT<br>CRISIS TELEPHONE SUPPORT<br>FAMILY THERAPY<br>GROUP THERAPY<br>INDIVIDUAL TREATMENT<br>PSYCHIATRIC MEDICATION<br>RECOVERY EMPLOYMENT SUPPORT<br>RECOVERY PEER SUPPORT |

<p>| 016900 | THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH &amp; FAMILY | ROGER IINO&lt;br&gt;BRANCH MANAGER&lt;br&gt;NORMAN JOHNSON&lt;br&gt;EXECUTIVE DIRECTOR |
|        | 1901 MARTIN LUTHER KING JR WAY SOUTH&lt;br&gt;SEATTLE, WA 98144&lt;br&gt;(206) 322-7676 | SUBSTANCE USE DISORDER SERVICES:&lt;br&gt;LEVEL I OUTPATIENT&lt;br&gt;LEVEL II INTENSIVE OUTPATIENT |
| Mailing Address | 1901 MARTIN LUTHER KING JR WAY SOUTH&lt;br&gt;SEATTLE, WA 98144 | MENTAL HEALTH SERVICES:&lt;br&gt;CASE MANAGEMENT&lt;br&gt;CRISIS TELEPHONE SUPPORT&lt;br&gt;FAMILY THERAPY&lt;br&gt;GROUP THERAPY&lt;br&gt;INDIVIDUAL TREATMENT&lt;br&gt;PSYCHIATRIC MEDICATION&lt;br&gt;RECOVERY EMPLOYMENT SUPPORT&lt;br&gt;RECOVERY PEER SUPPORT&lt;br&gt;RECOVERY SUPPORT WRAPAROUND FACILITATION |</p>
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<td><strong>Opiate Substitution Treatment</strong></td>
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<table>
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<tr>
<th>200132</th>
<th>UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE</th>
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<tbody>
<tr>
<td></td>
<td>13470 MARTIN LUTHER KING JR. WAY SOUTH SEATTLE, WA 98178</td>
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| Mailing Address | 17701 108TH AVENUE SE, #336 RENTON, WA 98055 |

<table>
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<th>112700</th>
<th>UNITED TREATMENT AND THERAPY</th>
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<tr>
<td></td>
<td>12737 BEL-RED ROAD, SUITE 260 BELLEVUE, WA 98005</td>
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<td>(425) 688-0033</td>
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<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>PO BOX 1525 BELLEVUE, WA 98009-1525</th>
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<table>
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<tr>
<th>WILLIAM E. SWAILES</th>
<th>WILLIAM E. SWAILES</th>
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<tr>
<td>ADMINISTRATOR</td>
<td>CLINICAL SUPERVISOR</td>
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<tr>
<th>200316</th>
<th>UW HARING CENTER</th>
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<tbody>
<tr>
<td></td>
<td>1981 NORTHEAST COLUMBIA ROAD SEATTLE, WA 98195</td>
</tr>
<tr>
<td></td>
<td>(206) 543-4011 <a href="mailto:BETHM88@GMAIL.COM">BETHM88@GMAIL.COM</a> <a href="http://WWW.HARINGCENTER.ORG">WWW.HARINGCENTER.ORG</a></td>
</tr>
</tbody>
</table>

| Mailing Address | 1981 NE COLUMBIA ROAD SEATTLE, WA 98195 |

<table>
<thead>
<tr>
<th>ILENE SCHWARTZ</th>
<th>TARA GOODINOHO</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECTOR</td>
<td>CLINICAL SUPERVISOR</td>
</tr>
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<thead>
<tr>
<th>091100</th>
<th>VALLEY CITIES COUNSELING &amp; CONSULTATION - AUBURN</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>2704 1 STREET NE AUBURN, WA 98002</td>
</tr>
<tr>
<td></td>
<td>(253) 833-7444</td>
</tr>
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<table>
<thead>
<tr>
<th>SHEKH ALI</th>
<th>REBEKAH POWERS</th>
</tr>
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<tbody>
<tr>
<td>INTERIM CEO</td>
<td>SUD CLINICAL SUPERVISOR</td>
</tr>
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| Mailing Address | 325 W GOWE ST KENT, WA 98032 |

<p>| | |
|                 |                                |
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<tr>
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| **200517** | VALLEY CITIES COUNSELING & CONSULTATION - AURORA CLINIC | SHEKH ALI |
| | 13555 WA-99 | ACTING CEO |
| | SEATTLE, WA 98133 | HESUSA "SUSIE" KROLL |
| | (253) 833-7444 | REGIONAL OPERATIONS DIRECTOR (MH CS) |
| | (206) 963-3145 | |
| | WWW.VALLEYCITIES.ORG | |
| | MAILING ADDRESS | |
| | 325 W GOWE ST | |
| | KENT, WA 98032 | |

| **164700** | VALLEY CITIES COUNSELING & CONSULTATION - DES MOINES | SHEKH ALI |
| | 26401 PACIFIC HIGHWAY SOUTH | ACTING CEO |
| | DES MOINES, WA 98198 | ROSE BALDRIDGE |
| | (253) 833-7444 | SUD CLINICAL SUPERVISOR |
| | | |
| | MAILING ADDRESS | |
| | 325 W GOWE ST | |
| | KENT, WA 98032 | |

<p>| <strong>200405</strong> | VALLEY CITIES COUNSELING &amp; CONSULTATION - ENUMCLAW | SHEKH ALI |
| | 1335 COLE STREET | ACTING CEO |
| | ENUMCLAW, WA 98022 | LYNNE ALLAR |
| | (425) 336-4100 | MH CLINICAL SUPERVISOR/SITE DIRECTOR |
| | (253) 833-7444 | |
| | <a href="http://WWW.VALLEYCITIES.ORG">WWW.VALLEYCITIES.ORG</a> | |
| | MAILING ADDRESS | |
| | 325 W GOWE ST | |
| | KENT, WA 98032 | |</p>
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<tr>
<td>090900</td>
<td>VALLEY CITIES COUNSELING &amp; CONSULTATION - FEDERAL WAY</td>
<td>33301 1ST WAY SOUTH, SUITE C-115, FEDERAL WAY, WA 98003</td>
<td>(253) 833-7444, SHEKH ALI, ACTING CEO, REBEKAH POWERS, SUD CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>325 WEST GOWE STREET, KENT, WA 98032</td>
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<tr>
<td>091000</td>
<td>VALLEY CITIES COUNSELING &amp; CONSULTATION - KENT</td>
<td>325 WEST GOWE STREET, KENT, WA 98032</td>
<td>(253) 833-7444, SHEKH ALI, ACTING CEO, REBEKAH POWERS, SUD CLINICAL SUPERVISOR</td>
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<td>MAILING ADDRESS</td>
<td>325 W GOWE ST, KENT, WA 98032</td>
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<td>200520</td>
<td>VALLEY CITIES COUNSELING &amp; CONSULTATION - LAKE CITY CLINIC</td>
<td>12736 33RD AVENUE NORTHEAST, SEATTLE, WA 98125</td>
<td>(253) 833-7444, (206) 963-3145, SHEKH ALI, ACTING CEO, HESUSA &quot;SUSIE&quot; KROLL, REGIONAL OPERATIONS DIRECTOR (MH CS), <a href="http://WWW.VALLEYCITIES.ORG">WWW.VALLEYCITIES.ORG</a></td>
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<td>MAILING ADDRESS</td>
<td>325 W GOWE ST, KENT, WA 98032</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
- CRISIS PEER SUPPORT
- CRISIS STABILIZATION
- CRISIS TELEPHONE SUPPORT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

200523
VALLEY CITIES COUNSELING & CONSULTATION - PIKE PLACE CLINIC
1537 WESTERN AVENUE
SEATTLE, WA 98101
(253) 833-7444
WWW.VALLEYCITIES.ORG

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

SHEKH ALI
ACTING CEO
JESSICA WILLIAMS
CLINIC MANAGER (MH CS)

164600
VALLEY CITIES COUNSELING & CONSULTATION - RENTON
221 WELLS AVENUE SOUTH
RENTON, WA 98057
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

174600
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE MERIDIAN AVENUE
10521 MERIDIAN AVENUE NORTH
SEATTLE, WA 98133
(253) 833-7444

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

174100
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE RAINIER AVENUE
8444 RAINIER AVENUE SOUTH
SEATTLE, WA 98118
(253) 833-7444
KENNETH TAYLOR
CEO
ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
325 W GOWE ST
KENT, WA 98032

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

200134
VASHON YOUTH AND FAMILY SERVICES
20110 VASHON HIGHWAY SOUTHWEST
VASHON, WA 98070
(206) 463-5511
INFO@VYFS.ORG
WWW.VYFS.ORG
BARBARA GARRETT
DIRECTOR OF CLINICAL SERVICES
DIANE HOPKINS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 237
VASHON, WA 98070

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

006400
VETERANS ADMINISTRATION PUGET SOUND HEALTH CARE SYSTEM - SEATTLE
1660 SOUTH COLUMBIAN WAY
SEATTLE, WA 98108
(206) 764-2123
CARL RIMMELE, PH.D
DIRECTOR

MAILING ADDRESS
ATTN: BLAKE TODER
SEATTLE, WA 98108-1597

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT
## WAPI Community Services - Federal Way

**Address:**
28815 Pacific Highway South, Suite 7A  
Federal Way, WA 98003

**Contact:**
(844) 987-9274  
INFO@WAPISEATTLE.ORG  
WWW.WAPISEATTLE.ORG

**Executive Director:** Aileen De Leon  
**Clinical Director:** Chia-Chi Wang

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

## WAPI Community Services - Main

**Address:**
861 Poplar Place South  
Seattle, WA 98144

**Contact:**
(844) 987-9274  
INFO@WAPISEATTLE.ORG  
WWW.WAPISEATTLE.ORG

**Executive Director:** Aileen De Leon  
**Clinical Director:** Chia-Chi Wang

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

## Washington National Counseling, LLC

**Address:**
17121 Southeast 270th Place  
Covington, WA 98042

**Contact:**
(253) 631-1725  
WWW.WNC-COUNSELING.COM

**President/ Clinical Director:** Ifeanyi C. Chukwu

**Certified Services:**
- Mental Health Services:
  - Brief Intervention Treatment
  - Case Management
  - Family Therapy

## YMCA of Greater Seattle

**Address:**
2100 24th Avenue South, Suite 260  
Seattle, WA 98144

**Contact:**
(206) 382-5340  
WWW.SEATTLEYMCA.ORG

**Executive Director:** Roger Iino  
**Associate Executive Director:** Stuart Young  
**MH Clinical Supervisor:**

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

LYNN COLEMAN
EXECUTIVE DIRECTOR

SHERICE ARNOLD-ARRINGTON
MH CLINICAL SUPERVISOR

MAILING ADDRESS
10215 LAKE CITY WAY NE, SUITE H
SEATTLE, WA 98125

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

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

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MAILING ADDRESS
999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES
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

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008

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

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

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MAILING ADDRESS
999 164TH AVE NE
BELLEVUE, WA 98008
**KING**

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<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT</td>
<td>CASE MANAGEMENT</td>
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**KITSAP**

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<th>ZIP Codes</th>
<th>Organization</th>
<th>Address</th>
<th>Contact Information</th>
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<tr>
<td>119000</td>
<td>ACTION COUNSELING - PORT ORCHARD</td>
<td>729 PROSPECT STREET, SUITE 200 PORT ORCHARD, WA 98366</td>
<td>(360) 895-1307, (360) 649-7646</td>
</tr>
<tr>
<td></td>
<td>MAILING ADDRESS</td>
<td>729 PROSPECT ST STE 200 PORT ORCHARD, WA 98366</td>
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<tr>
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<td>CERTIFIED SERVICES</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DRI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
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<tr>
<td>027300</td>
<td>AGAPE UNLIMITED</td>
<td>4841 AUTO CENTER WAY, SUITE 101 BREMERTON, WA 98312</td>
<td>(360) 373-1529</td>
</tr>
<tr>
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<td>MAILING ADDRESS</td>
<td>4841 AUTO CENTER WAY, SUITE 101 BREMERTON, WA 98312</td>
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<tr>
<td>118600</td>
<td>CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC</td>
<td>2817 WHEATON WAY, SUITE 205 BREMERTON, WA 98310</td>
<td>(360) 373-0155</td>
</tr>
<tr>
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<td>MAILING ADDRESS</td>
<td>2817 WHEATON WAY, SUITE 205 BREMERTON, WA 98310</td>
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<tr>
<td>200326</td>
<td>CATHOLIC COMMUNITY SERVICES - BREMERTON</td>
<td>2625 WHEATON WAY, SUITE B BREMERTON, WA 98310</td>
<td>(360) 792-2020, (888) 649-6732, DA <a href="mailto:VEK@CCSWW.ORG">VEK@CCSWW.ORG</a></td>
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<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DRI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
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</tr>
</tbody>
</table>

**Contact Information**

- BETTY KASSUHN ADMINISTRATOR
- SARA MAREZ-FIELDS EXECUTIVE DIRECTOR
- TODD BENSON TREATMENT DIRECTOR
- LINDSY MCGOWAN-ANDERSON ADMINISTRATOR
- MIKE STONE CLINICAL SUPERVISOR
- MARY STONE SMITH VICE PRESIDENT
- DAVE KUCKLICK SITE DIRECTOR
Mailing Address
1001 N J STREET
TACOMA, WA 98403

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

086500
DOC - PENINSULA WORK RELEASE
1340 LLOYD PARK WAY
PORT ORCHARD, WA 98366
(360) 725-9629

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

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

200480
EAGLE HARBOR COUNSELING, LLC
600 WINSLOW WAY EAST, SUITE 232
BAINBRIDGE ISLAND, WA 98110
(425) 478-1000
EAGLEHARBORCOUNSELING@GMAIL.COM
WWW.EAGLEHARBORCOUNSELING.COM

Mailing Address
600 WINSLOW WAY EAST, SUITE 232
BAINBRIDGE ISLAND, WA 98110

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

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

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

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

---

200230  KITSAP MENTAL HEALTH SERVICES - ADOLESCENT INPATIENT
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

JOE ROSZAK
EXEC. DIR.

MAILING ADDRESS
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

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

---

200229  KITSAP MENTAL HEALTH SERVICES - ADULT INPATIENT
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

JOE ROSZAK
EXEC. DIR.

MAILING ADDRESS
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

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

---

018400  KITSAP MENTAL HEALTH SERVICES - MAIN
5455 ALMIRA DRIVE NE
BREMERTON, WA 98311
(360) 373-5031
WWW.KITSAPMENTALHEALTH.ORG

JOE ROSZAK
CEO
STACEY DEVENNEY
CCO (MH & SUD)

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY
KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD
2535 MITCHELL ROAD SE
PORT ORCHARD, WA 98366
(360) 373-5031
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

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

KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD
900 SHERIDAN ROAD, SUITES 103 & 106
BREMERTON, WA 98310
(360) 373-5031
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311

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

KITSAP MENTAL HEALTH SERVICES - WHEATON WAY
4040 WHEATON WAY, SUITES 108, 112, 204, 206, 210
BREMERTON, WA 98310
(360) 373-5031
WWW.KITSAPMENTALHEALTH.ORG
JOE ROSZAK
CEO
STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS
5455 ALMIRA DR NE
BREMERTON, WA 98311
### 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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<tr>
<th>Site Number</th>
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<th>Address</th>
<th>City, State ZIP</th>
<th>Phone Numbers</th>
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<tr>
<td>006700</td>
<td>KITSAP RECOVERY CENTER - INPATIENT</td>
<td>661 TAYLOR AVENUE</td>
<td>PORT ORCHARD, WA 98366</td>
<td>(360) 337-4625</td>
<td><a href="http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM">WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM</a></td>
<td>BERGEN STARKE: TREATMENT DIRECTOR; KENNETH WILSON: CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>200505</td>
<td>KITSAP RECOVERY CENTER - OUTPATIENT</td>
<td>1026 SIDNEY AVENUE</td>
<td>PORT ORCHARD, WA 98366</td>
<td>(360) 337-5725</td>
<td><a href="http://WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM">WWW.KITSAPGOV.COM/HS/KRC/RECOVERYCTR.HTM</a></td>
<td>BERGEN STARKE: ADMINISTRATOR</td>
</tr>
<tr>
<td>006900</td>
<td>NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)</td>
<td>ONE BOONE ROAD</td>
<td>BREMERTON, WA 98312</td>
<td>(360) 475-5350</td>
<td>(360) 475-5314</td>
<td>ANGELA MATTISON: PROGRAM DIRECTOR; JOHN T. VAUGHN: CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>007000</td>
<td>OLALLA GUEST LODGE</td>
<td>12850 LALA COVE LANE SE</td>
<td>OLALLA, WA 98359</td>
<td>(253) 857-6201</td>
<td>(800) 882-6201</td>
<td>CHRISTINE LYNCH: EXECUTIVE DIRECTOR; MELODY MCKEE: CLINICAL OPERATIONS MANAGER (SUD CS)</td>
</tr>
</tbody>
</table>
KITSAP

MAILING ADDRESS
12850 LALA COVE LN SE
OLALLA, WA 98359

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

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

088800
PORT GAMBLE S’KLALLAM RECOVERY CENTER
7550 LITTLE BOSTON ROAD NE
KINGSTON, WA 98346
(360) 297-6326

JOLENE GEORGE (INTERIM ADMIN)
CHILD & FAMILY SVCS DIRECTOR
COURTNEY OLIVER
CLINICAL SUPERVISOR

MAILING ADDRESS
31912 LITTLE BOSTON RD NE
KINGSTON, WA 98346

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

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

200108
RMH SERVICES
1933 4TH STREET
BREMERTON, WA 98337
(360) 479-4959
ELLENEPSTEIN@YAHOO.COM

ELLEN EPSTEIN
DIRECTOR

MAILING ADDRESS
1933 4TH STREET
BREMERTON, WA 98337

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

110900
SUQUAMISH TRIBE WELLNESS PROGRAM
18490 SUQUAMISH WAY, SUITE 107
SUQUAMISH, WA 98392
(360) 394-8558
WWW.SUQUAMISH.NSN.US

GRACE JONES
ADMINISTRATOR

MAILING ADDRESS
PO BOX 1228
SUQUAMISH, WA 98392

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
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<td>3100 NORTHWEST BUCKLIN HILL ROAD, SUITE 224 SILVERDALE, WA 98383</td>
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<td>THE RIGHT CHOICE COUNSELING SERVICE, INC.</td>
<td>1740 NORTHEAST RIDDELL ROAD, SUITE 170 BREMERTON, WA 98310</td>
<td>(360) 373-4077</td>
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<td>1740 NE RIDDELL RD, STE 170 BREMERTON, WA 98310</td>
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<td>1415 LUMSDEN ROAD PORT ORCHARD, WA 98367</td>
<td>(360) 876-9430</td>
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<td><strong>Phone</strong></td>
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<td><strong>(509) 457-5653</strong></td>
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<td><strong>Email</strong></td>
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<td><strong><a href="http://WWW.BARTHCLINIC.COM">WWW.BARTHCLINIC.COM</a></strong></td>
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167000

**COMPREHENSIVE HEALTHCARE - ELLENSBURG PEARL STREET**

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

**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

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164500

**ELLIE LORENZ COUNSELING AND CONSULTING SERVICE**

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

**MAILING ADDRESS**

9325 UPPER PEOH POINT ROAD
CLE ELUM, WA 98922

**CERTIFIED SERVICES**

**PROBLEM & PATHOLOGICAL GAMBLING SERVICES:**
- PROBLEM & PATHOLOGICAL GAMBLING

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174000

**MERIT RESOURCE SERVICES - ELLENSBURG**

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

**MAILING ADDRESS**

PO BOX 1039
ELLENSBURG, WA 98926

**CERTIFIED SERVICES**

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

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

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115800

**COMPREHENSIVE HEALTHCARE - GOLDENDALE**

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

**MAILING ADDRESS**

PO BOX 1039
GOLDENDALE, WA 98626

**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

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**KLICKITAT**
MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

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

115900
COMPREHENSIVE HEALTHCARE - WHITE SALMON
432 NORTHEAST TOHOMISH STREET
WHITE SALMON, WA 98672
(509) 493-3400

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

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

LEWIS

200499
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CENTRALIA OUTPATIENT
1723 KRESKY AVENUE
CENTRALIA, WA 98531-8985
(360) 559-6201
ADMISSIONS@ABHSINC.NET
WWW.ABHSINC.NET

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
146500
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - CHEHALIS
500 SOUTHEAST WASHINGTON AVENUE
CHEHALIS, WA 98532
(360) 266-5029
(866) 729-8038
WWW.AMERICANBEHAVIORALHEALTH.NET

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
SECURE WITHDRAWAL MANAGEMENT & STABILIZATION
WITHDRAWAL MANAGEMENT

MARC MALMER
ADMINISTRATOR
CRAIG ZAHN
CLINICAL SUPERVISOR

155800
CASCADE MENTAL HEALTH CARE - CHEHALIS
135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339
WWW.CASCADEMENTALHEALTH.ORG

MAILING ADDRESS
2428 REYNOLDS AVE
CENTRALIA, WA 98531

RICHARD STRIDE
CEO
DAVID KING
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
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

007400
CASCADE MENTAL HEALTH CARE - MAIN
2428 WEST REYNOLDS AVENUE
CENTRALIA, WA 98531
(360) 330-9044
WWW.CASCADEMENTALHEALTH.ORG

MAILING ADDRESS
2428 W REYNOLDS AVE
CENTRALIA, WA 98531-4554

RICHARD STRIDE
CEO
KAREN ROSE
SUD CLINICAL SUPERVISOR
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<td>228 West Main Street, Morton, WA 98336</td>
<td>CEO</td>
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<td>(360) 330-9044</td>
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<td>Substance Use Disorder Services:</td>
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<tr>
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<tr>
<th>200426</th>
<th>Core Health - Centralia</th>
<th>Frank Morrison</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>104 South Rock Street, Centralia, WA 98531</td>
<td>CEO</td>
</tr>
<tr>
<td></td>
<td>(360) 200-5419</td>
<td>Katie Allen</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Cameronc@chotblv.org">Cameronc@chotblv.org</a></td>
<td>MH Clinical Supervisor</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.Corehealthservices.org">www.Corehealthservices.org</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mailing Address</td>
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</tr>
<tr>
<td></td>
<td>PO Box 2394, Longview, WA 98632</td>
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<td>Certified Services</td>
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<tr>
<td>200370</td>
<td>Correct Care, LLC</td>
<td>Candice Noble</td>
</tr>
<tr>
<td></td>
<td>20311 Old Highway 9 SW, Centralia, WA 98531</td>
<td>Interim Program Administrator</td>
</tr>
<tr>
<td></td>
<td>(844) 552-4814</td>
<td>Beverly E. Allen</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Manfernandez@correctcarers.com">Manfernandez@correctcarers.com</a></td>
<td>Psychiatrist</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.correctcarers.com">www.correctcarers.com</a></td>
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<td>Individual Treatment</td>
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<td>Less Restrictive Alternative (LRA) Support</td>
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<td>Recovery Support Wraparound Facilitation</td>
</tr>
</tbody>
</table>
200492  EUGENIA CENTER - CHEHALIS BRANCH
151 NORTH MARKET BOULEVARD, BUILDING C
CHEHALIS, WA 98532
(360) 948-0203
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG
NISTON FRANCO
EXECUTIVE DIRECTOR
ESMERALDA LYBRAND
SUD CLINICAL SUPERVISOR

Mailing Address
PO BOX 1371
CHEHALIS, WA 98532

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

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
NISTON FRANCO
EXECUTIVE DIRECTOR

Mailing Address
PO BOX 1371
CHEHALIS, WA 98532

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

Mental Health Services:
Brief Intervention Treatment
Case Management
Family Therapy
Group Therapy
Individual Treatment
Psychiatric Medication
Recovery Peer Support

172600  EUGENIA CENTER - MOSSYROCK
230 EAST STATE STREET
MOSSYROCK, WA 98564
(360) 983-3227
INFO@EUGENIACENTER.ORG
WWW.EUGENIACENTER.ORG
NISTON FRANCO
EXECUTIVE DIRECTOR
ESMERALDA LYBRAND
SUD CLINICAL SUPERVISOR

Mailing Address
PO BOX 87
MOSSYROCK, WA 98564

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

Mental Health Services:
Brief Intervention Treatment
Case Management
Family Therapy
Group Therapy
Individual Treatment
Recovery Peer Support
200458  GREAT RIVERS BEHAVIORAL HEALTH AGENCY - MAIN  
57 WEST MAIN STREET, SUITE 260  
CHEHALIS, WA 98532  
(360) 795-5955  
(800) 392-6298  
INFO@GREATRIVERSBHO.ORG  
WWW.CIHEALTHSERVICES.COM  
MARC BOLLINGER  
CEO/ADMINISTRATOR  
RON LEHTO  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 1447  
CHEHALIS, WA 98532  
CERTIFIED SERVICES  
MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
CRISIS EMERGENCY INVOLUNTARY DETENTION  
CRISIS OUTREACH  
CRISIS PEER SUPPORT  
CRISIS STABILIZATION  
CRISIS TELEPHONE SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION  
RECOVERY MEDICATION SUPPORT  
RECOVERY PEER SUPPORT  
057200  GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT  
375 SOUTHWEST 11TH STREET  
CHEHALIS, WA 98532  
(360) 740-3420  
DAVID REINKE  
JUVENILE REHABILITATION COORDINATOR  
SHIRLEY BIVINS  
JUVENILE REHABILITATION COORDINATOR  
MAILING ADDRESS  
375 SW 11TH ST, MS. S21-5  
CHEHALIS, WA 98532  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
LEVEL II INTENSIVE OUTPATIENT  
057600  NEW DIRECTIONS COUNSELING - CHEHALIS  
1956 NORTHEAST KRESKY ROAD  
CHEHALIS, WA 98532  
(360) 740-4380  
(360) 740-1907  
SCOTT M. DICKINSON  
ADMINISTRATOR  
UNKNOWN 11/5/09  
CLINICAL SUPERVISOR  
MAILING ADDRESS  
PO BOX 59  
CHEHALIS, WA 98532  
CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
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
LEWIS

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

LINCOLN

007600
LINCOLN COUNTY ALCOHOL & DRUG CENTER
506 1ST STREET
DAVENPORT, WA 99122
(509) 725-2111
WWW.CO.LINCOLN.WA.US

MAILING ADDRESS
PO BOX 152
DAVENPORT, WA 99122-0152

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
COORDINATED CASE MANAGEMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

160900
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT
1211 MERRIAM STREET
DAVENPORT, WA 99122
(509) 725-3001
WWW.CO.STEVENS.WA.US/COUNSELING

MAILING ADDRESS
1211 MERRIAM ST
DAVENPORT, WA 99122

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

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

MASON

073000
BEHAVIORAL HEALTH RESOURCES - SHELTON
110 WEST K STREET
SHELTON, WA 98584
(360) 426-1696
(360) 704-7170

MAILING ADDRESS
3857 MARTIN WAY EAST
OLYMPIA, WA 98506

LAURIE TEBO
CEO
DANIELLE MURPHY
RECOVERY SERVICES MANAGER
<table>
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<tr>
<th>200340</th>
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<th>200367</th>
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<th>200488</th>
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<tr>
<td>601 WEST FRANKLIN STREET</td>
<td>MARY STONE SMITH</td>
<td>601 WEST FRANKLIN STREET, SUITE G-201</td>
<td>SCOTT HANAUER</td>
<td>MARIO E. PAREDES-JOVEL</td>
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<tr>
<td>SHELTEN, WA 98584</td>
<td>VICE PRESIDENT</td>
<td>SHELTEN, WA 98584</td>
<td>CEO</td>
<td>EXECUTIVE DIRECTOR</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:HEIDIW@CCSWW.ORG">HEIDIW@CCSWW.ORG</a></td>
<td>HEIDI WILLIAMS</td>
<td><a href="mailto:TAY@COMMUNITYYOUTHSERVICES.ORG">TAY@COMMUNITYYOUTHSERVICES.ORG</a></td>
<td>ALICIA FERRIS</td>
<td>JENNY RODRIGUEZ</td>
<td></td>
</tr>
<tr>
<td><a href="http://WWW.CCSWW.ORG/FAMILYPRESERVATION">WWW.CCSWW.ORG/FAMILYPRESERVATION</a></td>
<td>SITE DIRECTOR</td>
<td><a href="http://WWW.COMMUNITYYOUTHSERVICES.ORG">WWW.COMMUNITYYOUTHSERVICES.ORG</a></td>
<td>CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)</td>
<td>REGIONAL DIRECTOR (MH &amp; SUD CLINICAL SUPERVISOR)</td>
<td></td>
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<tr>
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<tr>
<td>1001 N J STREET</td>
<td></td>
<td>711 STATE AVE NE</td>
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<td>3808 S ANGELINE ST</td>
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<td>TACOMA, WA 98403</td>
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<td>OLYMPIA, WA 98506</td>
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### 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

### Mailing Address

- 1001 N J STREET
- TACOMA, WA 98403

### Contact Information

- (888) 322-7156
- HEIDIW@CCSWW.ORG
- WWW.CCSWW.ORG/FAMILYPRESERVATION
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT

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

125000
DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN
3420 NORTHEAST SAND HILL ROAD
BELFAIR, WA 98528
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

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

077700
DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON
2321 WEST DAYTON AIRPORT ROAD
SHELTON, WA 98584
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

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

051401
NEW DIRECTIONS COUNSELING - SHELTON
506 WEST FRANKLIN STREET
SHELTON, WA 98584
(360) 427-5232

SCOTT M. DICKINSON
ADMINISTRATOR
FRED DICKINSON
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 906
SHELTON, WA 98584

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

101500
NORTHWEST RESOURCES II, INC. - SHELTON
235 SOUTH 3RD STREET
SHELTON, WA 98584
(360) 426-0890
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR
JENNIFER CASTANETO
SUD CLINICAL SUPERVISOR
Mason

Mailing Address:
2708 Westmoor Ct SW
Olympia, WA 98502

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

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

048500
Skokomish H.O.P.E. Alcohol & Drug Program
North 100 Tribal Center Road
Shelton, WA 98584
(360) 877-2008
(360) 426-5755
www.skokomish.org/health-clinic

Deneese LaClair
Health Director
Petya Pacheva
Behavioral Health Program Manager

Mailing Address:
North 100 Tribal Center Road
Shelton, WA 98584

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

147800
Social Treatment Opportunity Programs II, Inc.
- Shelton
611 West Cota Street
Shelton, WA 98584
(360) 426-5654

Andrew Tatum
Administrator
Carol Newton
Clinical Supervisor

Mailing Address:
PO Box 111297
Tacoma, WA 98411

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

037400
Squaxin Island Behavioral Health Outpatient Program
3760 Southeast Old Olympic Highway
Shelton, WA 98584
(360) 426-1582
(360) 482-2674

Greg Twiddy
Behavioral Health Manager

Mailing Address:
3760 SE Old Olympia Hwy
Shelton, WA 98584

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

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

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

MAILING ADDRESS
PO BOX 14339
TUMWATER, WA 98511

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

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

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512

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

OKANOGAN

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

MAILING ADDRESS
PO BOX 50
NESPELEM, WA 99155

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

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

MAILING ADDRESS
PO BOX 150
NESPELEM, WA 99155-0150
OKANOGAN

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

OKANOGAN BEHAVIORAL HEALTHCARE, INC.
1007 KOALA DRIVE
OMAK, WA 98841
(509) 826-6191
LAPPLE@OKBH.C.ORG
WWW.OKBH.C.ORG

JAMES "JIM" NOVELLI
CEO
BARNABY TENZIN DENISON
CLINICAL DIRECTOR (MH CLINICAL SUPERVISOR)

MAILING ADDRESS
1007 KOALA DR
OMAK, WA 98841

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

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

PACIFIC

FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC
25517 PARK AVENUE
OCEAN PARK, WA 98640
(800) 272-3199
(360) 665-4494
INFO@FREEBYTHESEA.COM
WWW.FREEBYTHESEA.COM

SUSAN HARRIS
ADMINISTRATOR
JENNIFER HARRIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 399
OCEAN PARK, WA 98640

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
- PROBLEM & PATHOLOGICAL GAMBLING

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

KLEAN LONG BEACH WASHINGTON LLC
211 PIONEER ROAD WEST
LONG BEACH, WA 98631
(360) 642-3105
WWW.KLEANTREATMENTCENTERS.COM

LAURIE BECK
DIRECTOR OF OPERATIONS
GREGORY LIPPERT
CLINICAL SUPERVISOR

MAILING ADDRESS
211 PIONEER RD W
LONG BEACH, WA 98631
<table>
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<td>LIFELINE CONNECTIONS - SOUTH BEND</td>
<td>INTENSIVE INPATIENT, LEVEL II INTENSIVE OUTPATIENT, LONG-TERM RESIDENTIAL, WITHDRAWAL MANAGEMENT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>JARED SANFORD CEO, BRANDY BRANCH CCO/MH &amp; SUD CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT, FAMILY THERAPY, GROUP THERAPY, INDIVIDUAL TREATMENT, LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT, PSYCHIATRIC MEDICATION, RECOVERY EMPLOYMENT SUPPORT, RECOVERY HOUSING SUPPORT, RECOVERY MEDICATION SUPPORT, RECOVERY PEER SUPPORT</td>
</tr>
<tr>
<td>052000</td>
<td>NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)</td>
<td>LEVEL I OUTPATIENT</td>
</tr>
<tr>
<td></td>
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<td>SPENCER MOOERS PROGRAM MANAGER, STEVE FOX CD COORDINATOR</td>
</tr>
<tr>
<td>112300</td>
<td>SHOALWATER BAY INDIAN TRIBE</td>
<td>LEVEL I OUTPATIENT</td>
</tr>
<tr>
<td></td>
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<td>KIM ZILLYETT-HARRIS HEALTH DIRECTOR, LAURA HAMILTON CD PROGRAM DIRECTOR</td>
</tr>
<tr>
<td>143100</td>
<td>TRUE NORTH-ESD 113 - PACIFIC</td>
<td>LEVEL I OUTPATIENT</td>
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<tr>
<td></td>
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<td>ERIN RIFFE ADMINISTRATOR, JACKIE YEE INTERIM CLINICAL SUPERVISOR</td>
</tr>
</tbody>
</table>
### PACIFIC

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

<table>
<thead>
<tr>
<th>Site Code</th>
<th>Location Details</th>
<th>Contact Person(s)</th>
</tr>
</thead>
</table>
| 134300 | WILLAPA BEHAVIORAL HEALTH - LONG BEACH  
2204 PACIFIC HIGHWAY NORTH  
LONG BEACH, WA 98631  
(360) 642-3787 | ADAM R. MARQUIS  
CEO  
ELIZABETH LIMBOCKER  
MH CLINICAL SUPERVISOR |

**MAILING ADDRESS**  
2204 PACIFIC HIGHWAY N  
LONG BEACH, WA 98631

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

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

<table>
<thead>
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<th>Site Code</th>
<th>Location Details</th>
<th>Contact Person(s)</th>
</tr>
</thead>
</table>
| 134400 | WILLAPA BEHAVIORAL HEALTH - RAYMOND  
300 OCEAN AVENUE  
RAYMOND, WA 98577  
(360) 942-2303 | ADAM R. MARQUIS  
CEO  
ELIZABETH LIMBOCKER  
MH CLINICAL SUPERVISOR |

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

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

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

---

### PEND OREILLE

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

<table>
<thead>
<tr>
<th>Site Code</th>
<th>Location Details</th>
<th>Contact Person(s)</th>
</tr>
</thead>
</table>
| 008100 | PEND OREILLE COUNTY COUNSELING SERVICES - MAIN  
105 SOUTH GARDEN AVENUE  
NEWPORT, WA 99156  
(509) 447-5651  
(800) 404-5151  
WWW.PENDOREILLE.ORG | ANNABELLE S. PAYNE  
DIRECTOR  
THERESA ALLEN  
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR) |

**MAILING ADDRESS**  
PO BOX 5055  
NEWPORT, WA 99156-5055
PEND OREILLE

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

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

169000
PEND OREILLE COUNTY COUNSELING SERVICES - METALINE FALLS
302 PARK STREET
METALINE FALLS, WA 99153
(509) 447-5651
WWW.PENDOREILLE.ORG

MAILING ADDRESS
PO BOX 5055
NEWPORT, WA 99156-5055

ANNABELLE S. PAYNE
DIRECTOR

THERESA ALLEN
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

PIERCE

173500
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

DAVID A. HARRIS
ADMINISTRATOR

148500
ABRACADABRA RECOVERY CENTER
18407 PACIFIC AVENUE SOUTH
SPANAWAY, WA 98387
(253) 271-7615

MAILING ADDRESS
18407 PACIFIC AVE S
SPANAWAY, WA 98387

JOHN DORMAN
ADMINISTRATOR

LESLIE J. THIEME
CLINICAL SUPERVISOR
200561  
ADONAI COUNSELING & EMPLOYMENT, INC.  
4104 SOUTH M STREET  
TACOMA, WA 98418  
(253) 777-1434  
(253) 503-1572  
WWW.ADONAICOUNSELING.COM  
ARNITA JONES  
ADMINISTRATOR  
RUTH CURRAH  
MH CLINICAL SUPERVISOR  
Mailing Address:  
4104 SOUTH M STREET  
TACOMA, WA 98418  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Level I Outpatient  
Level II Intensive Outpatient  
Mental Health Services:  
Brief Intervention Treatment  
Family Therapy  
Group Therapy  
Individual Treatment  
Recovery Employment Support  

145100  
AL’TÀ COUNSELING AND TESTING  
702 BROADWAY, SUITE 102  
TACOMA, WA 98402  
(253) 365-2000  
JEREMY WEKELL  
ADMINISTRATOR  
Mailing Address:  
702 BROADWAY STE 102  
TACOMA, WA 98402  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Level I Outpatient  
Level II Intensive Outpatient  

134100  
ALTERNATIVE COUNSELING - SPANAWAY  
17002 PACIFIC AVENUE SOUTH  
SPANAWAY, WA 98387  
(253) 538-2323  
BETTY KASSUHN  
ADMINISTRATOR  
TORRI VOLEZ  
CLINICAL SUPERVISOR  
Mailing Address:  
POST OFFICE BOX 685  
SPANAWAY, WA 98387  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Level I Outpatient  
Level II Intensive Outpatient  

073600  
ARMY SUBSTANCE ABUSE PROGRAM (ASAP)  
BUILDING 2008B NORTH 3RD AVENUE  
JOINT BASE LEWIS-MCCHORD, WA 98433  
(253) 967-2202  
(253) 967-6765  
JOAN H. JOHNSON  
ASAP ADMINISTRATIVE OFFICER  
DR. JAMES TILLE  
CLINICAL SUPERVISOR  
Mailing Address:  
BOX 339500, MS: 85 (3RD AND LIGGETT)  
JOINT BASE LEWIS-MCCHORD, WA 98433  
Certified Services:  
Substance Use Disorder Services:  
Alcohol and Drug Information School  
DUI Assessment  
Level I Outpatient  
Level II Intensive Outpatient
ASIAN COUNSELING TREATMENT SERVICES (ACTS)
8811 SOUTH TACOMA WAY, SUITE 106
LAKEWOOD, WA 98499
(253) 302-3826
TAE SON LEE
EXECUTIVE DIRECTOR

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

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

MENTAL HEALTH SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

CASTEELE, WILLIAMS & ASSOCIATES
COMPREHENSIVE BEHAVIORAL HEALTH, INC. - MAIN
711 SOUTH 25TH STREET, SUITE B
TACOMA, WA 98405
(253) 536-2881
CWACOUNSELING@HOTMAIL.COM
JOHN L. CASTEELE, JR., PH.D.
EXECUTIVE DIRECTOR
LOUIS WESLEY HORTON
SUD CLINICAL SUPERVISOR

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

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

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

CATHOLIC COMMUNITY SERVICES - RUSTON
5219 NORTH SHIRLEY STREET, SUITE 002
RUSTON, WA 98407
(253) 507-7231
STEPHANIETH@CCSWW.ORG
WWW.CCSWW.ORG
MARY STONE SMITH
VICE PRESIDENT
DAVID KUCKLICK
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

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

CATHOLIC COMMUNITY SERVICES - TACOMA 14TH STREET
702 SOUTH 14TH STREET
TACOMA, WA 98405
(253) 502-2603
INFO@CCSWW.ORG
WWW.CCSWW.ORG
MARY STONE SMITH
VICE PRESIDENT

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403
<table>
<thead>
<tr>
<th>ZIP CODE</th>
<th>ORGANIZATION NAME</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>PHONE NUMBER</th>
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<th>WEBSITE</th>
<th>FIRST NAME</th>
<th>LAST NAME</th>
<th>TITLE</th>
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<tbody>
<tr>
<td>200019</td>
<td>CATHOLIC COMMUNITY SERVICES - TACOMA MAIN</td>
<td>5410 NORTH 44TH STREET</td>
<td>TACOMA</td>
<td>WA</td>
<td>(253) 759-9544</td>
<td><a href="mailto:INFO@CCSWW.ORG">INFO@CCSWW.ORG</a></td>
<td><a href="http://WWW.CCSWW.ORG">WWW.CCSWW.ORG</a></td>
<td>MARY STONE SMITH</td>
<td>SMITH</td>
<td>VICE PRESIDENT</td>
</tr>
<tr>
<td>200143</td>
<td>CATHOLIC COMMUNITY SERVICES - UNIVERSITY PLACE</td>
<td>7610 40TH STREET WEST, SUITE 300</td>
<td>UNIVERSITY PLACE</td>
<td>WA</td>
<td>(253) 830-6242</td>
<td><a href="mailto:CCSFAMILYPRESERVATIONINFO@CCSWW.ORG">CCSFAMILYPRESERVATIONINFO@CCSWW.ORG</a></td>
<td><a href="http://WWW.CCSWW.ORG">WWW.CCSWW.ORG</a></td>
<td>MARY STONE SMITH</td>
<td>SMITH</td>
<td>VICE PRESIDENT</td>
</tr>
<tr>
<td>090800</td>
<td>COMMUNITY COUNSELING INSTITUTE, INC.</td>
<td>2502 TACOMA AVENUE</td>
<td>TACOMA</td>
<td>WA</td>
<td>(253) 759-0852</td>
<td></td>
<td></td>
<td>WILLIAM H. JAMES, PH.D, CDP</td>
<td>JAMES</td>
<td>EXECUTIVE DIRECTOR</td>
</tr>
</tbody>
</table>

CERTIFIED SERVICES

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

MENTSAL 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

CERTIFIED SERVICES

MENTSAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS OUTREACH
- FAMILY THERAPY
- INDIVIDUAL TREATMENT
- PSYCHIATRIC MEDICATION
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

CERTIFIED SERVICES

MENTSAL HEALTH SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
PIERCE

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

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

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

200562
COMPREHENSIVE LIFE RESOURCES - SPANAWAY
201 160TH STREET SOUTH
SPANAWAY, WA 98387
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO
KATHY HAGEN
OUTPATIENT SERVICES DIRECTOR (MH CS)

MAILING ADDRESS
TACOMA, WA 98405

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

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

200297
COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER
1424 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO
KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

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

124800
CONSEJO COUNSELING AND REFERRAL SERVICE - TACOMA
5915 ORCHARD STREET WEST, UNIT B
TACOMA, WA 98466
(253) 414-7461
(206) 461-4880

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR
YVONNE ELMENDORF
CLINICAL SUPERVISOR

MAILING ADDRESS
5915 ORCHARD ST W UNIT B
TACOMA, WA 98466
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

150400
CROSSROADS TREATMENT CENTER, INC.
4928 109TH STREET SOUTHWEST
LAKEWOOD, WA 98499
(253) 473-7474
WWW.LILASAUCIER@CROSSROADSTREATMENT.ORG
WWW.CROSSROADSTREATMENT.ORG

MAILING ADDRESS
4928 109TH STREET SOUTHWEST
LAKEWOOD, WA 98499

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

078100
DOC - PROGRESS HOUSE WORK RELEASE
5601 6TH AVENUE
TACOMA, WA 98406
(360) 725-8628

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

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

077800
DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN - PURDY
9601 BLIJACICH ROAD NORTHWEST
GIG HARBOR, WA 98332
(360) 725-8628

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

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

122800
EXODUS COUNSELING AND TREATMENT SERVICES
918 ALDER AVENUE
SUMNER, WA 98390
(253) 891-2662

MARK A. WALRATH
ADMINISTRATOR
LINDA K. WALRATH
CLINICAL SUPERVISOR
PIERCE

MAILING ADDRESS
918 ALDER AVE
SUMNER, WA 98390

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

162100
F.H. COUNSELING & ASSOCIATES PLCC
917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433
(253) 777-4772

MAILING ADDRESS
917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433

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

101700
FOUNDATION FOR MULTICULTURAL SOLUTIONS
2316 SOUTH STATE STREET, SUITE B
TACOMA, WA 98405
(253) 572-3214

MAILING ADDRESS
2316 S STATE ST STE B
TACOMA, WA 98405

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

007001
GIG HARBOR COUNSELING
5122 OLYMPIC DRIVE NW, SUITE A-105
GIG HARBOR, WA 98335
(253) 851-2552

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

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

200057
GREATER LAKES MENTAL HEALTHCARE - 72ND STREET
1415 EAST 72ND STREET, SUITE B
TACOMA, WA 98404
(253) 620-5800
WWW.GLMHC.ORG

MAILING ADDRESS
9330 59TH AVE SW
LAKWOOD, WA 98499

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

CERTIFIED SERVICES

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

200056  GREATER LAKES MENTAL HEALTHCARE - MAIN
9330 59TH AVENUE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
HTTP://WWW.GLMHC.ORG/

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICES

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

200482  GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA
9315 GRAVELLY LAKE DRIVE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
WWW.GLMHC.ORG

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

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 MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200059  GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE
9108 LAKEWOOD DRIVE SW
LAKEWOOD, WA 98499

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICES

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

200056  GREATER LAKES MENTAL HEALTHCARE - MAIN
9330 59TH AVENUE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
HTTP://WWW.GLMHC.ORG/

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICES

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

200482  GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA
9315 GRAVELLY LAKE DRIVE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
WWW.GLMHC.ORG

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

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 MEDICATION SUPPORT
- RECOVERY PEER SUPPORT

200059  GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE
9108 LAKEWOOD DRIVE SW
LAKEWOOD, WA 98499

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499
CERTIFIED SERVICES

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

200364 GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC
113 170TH STREET SOUTH
SPANAWAY, WA 98387
(253) 535-1935
WWW.GLMHC.ORG

TERRI CARD
PRESIDENT & CEO
LATONYA LITTLETON
CLINICAL MANAGER

MAILING ADDRESS
9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICES

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

200055 GREATER LAKES RECOVERY CENTER E&T
14016 SOUTH A STREET
TACOMA, WA 98444

MAILING ADDRESS
14016 SOUTH A STREET
TACOMA, WA 98444

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200493 HOLISTIC RECOVERY FOR MOTHERS
2550 SOUTH G STREET
TACOMA, WA 98405
(253) 383-7710
(253) 257-7110
TREATMENT@NEWPHOEBEHOUSE.ORG
WWW.HOLISTICRECOVERYFORMOTHERS.ORG

NAOMI VILLANO
EXECUTIVE DIRECTOR
MELISSA LAWS
CLINICAL DIRECTOR (MH & SUD)

MAILING ADDRESS
PO BOX 5245
TACOMA, WA 98415

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

200053 HOPESPARKS
6424 NORTH 9TH STREET
TACOMA, WA 98406

JOSEPH LEROY
ADMINISTRATOR
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>PIERCE</td>
<td>6424 NORTH 9TH STREET, TACOMA, WA 98406</td>
<td>FAMILY THERAPY, INDIVIDUAL TREATMENT</td>
</tr>
<tr>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - LAKEWOOD</td>
<td>8815 SOUTH TACOMA WAY, SUITE 122, LAKEWOOD, WA 98499</td>
<td>DR. CHARNA MINTZ, EXECUTIVE DIRECTOR; RYAN HANNIG, PROGRAM DIRECTOR</td>
</tr>
<tr>
<td>200223</td>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - LAKEWOOD</td>
<td>MENTAL HEALTH SERVICES: FAMILY THERAPY, INDIVIDUAL TREATMENT</td>
</tr>
<tr>
<td>5709 W SUNSET HWY STE 100, SPOKANE, WA 99224</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - LAKEWOOD</td>
<td>8815 SOUTH TACOMA WAY, SUITE 122, LAKEWOOD, WA 98499</td>
<td><a href="mailto:INFO@IMAGINEBEHAVIOR.COM">INFO@IMAGINEBEHAVIOR.COM</a>, <a href="http://WWW.IMAGINEBEHAVIOR.COM">WWW.IMAGINEBEHAVIOR.COM</a></td>
</tr>
<tr>
<td>008900</td>
<td>KWAWACHEE COUNSELING CENTER</td>
<td>JENNIFER LAPointe, ACTING DIRECTOR/ADMINISTRATOR; SHAWN SEVERSE, CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>2209 EAST 32ND STREET, BLDG 4 TREATMENT SVCS, TACOMA, WA 98404-0188</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>200538</td>
<td>L.E.A.P.S. AND BEYOND, INC. - TACOMA</td>
<td>STACEY HOTTER-KNIGHT, PRESIDENT</td>
</tr>
<tr>
<td>7808 PACIFIC AVENUE, SUITE 9, TACOMA, WA 98418</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>035103</td>
<td>LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP</td>
<td>ALANA LEWIS, ADMINISTRATOR; PENNY SULLIVAN, CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>405 WEST STEWART AVENUE, SUITE A, PUYALLUP, WA 98371-5164</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>10322 NE 132ND ST, KIRKLAND, WA 98034-2829</td>
<td>MENTAL HEALTH SERVICES:</td>
<td></td>
</tr>
<tr>
<td>200223</td>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - LAKEWOOD</td>
<td></td>
</tr>
<tr>
<td>8815 SOUTH TACOMA WAY, SUITE 122, LAKEWOOD, WA 98499</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>008900</td>
<td>KWAWACHEE COUNSELING CENTER</td>
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</tr>
<tr>
<td>2209 EAST 32ND STREET, BLDG 4 TREATMENT SVCS, TACOMA, WA 98404-0188</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>200538</td>
<td>L.E.A.P.S. AND BEYOND, INC. - TACOMA</td>
<td></td>
</tr>
<tr>
<td>7808 PACIFIC AVENUE, SUITE 9, TACOMA, WA 98418</td>
<td>CERTIFIED SERVICES</td>
<td>MENTAL HEALTH SERVICES:</td>
</tr>
<tr>
<td>035103</td>
<td>LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP</td>
<td></td>
</tr>
</tbody>
</table>
### Certified Services

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

<table>
<thead>
<tr>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>004604</td>
<td>Lakeside-Milam Recovery Centers, Inc. - Tacoma</td>
</tr>
<tr>
<td></td>
<td>3315 South 23rd Street</td>
</tr>
<tr>
<td></td>
<td>Tacoma, WA 98405</td>
</tr>
<tr>
<td></td>
<td>(253) 272-2242</td>
</tr>
<tr>
<td></td>
<td>Jay Yourglič</td>
</tr>
<tr>
<td></td>
<td>Administrator</td>
</tr>
<tr>
<td></td>
<td>Pedro Ruiz</td>
</tr>
<tr>
<td></td>
<td>Clinical Supervisor</td>
</tr>
<tr>
<td></td>
<td>Mailing Address: 10322 NE 132nd St</td>
</tr>
<tr>
<td></td>
<td>Kirkland, WA 98034-2829</td>
</tr>
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<thead>
<tr>
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<tbody>
<tr>
<td>200238</td>
<td>Magnolia Behavior Therapy - Dupont</td>
</tr>
<tr>
<td></td>
<td>1570 Wilmington Drive, Suite 220</td>
</tr>
<tr>
<td></td>
<td>Dupont, WA 98327</td>
</tr>
<tr>
<td></td>
<td>Mailing Address: 3214 W McGraw St STE 212</td>
</tr>
<tr>
<td></td>
<td>Seattle, WA 98199</td>
</tr>
</tbody>
</table>

<table>
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<tr>
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<tbody>
<tr>
<td>200444</td>
<td>Maxim Healthcare Services, Inc.</td>
</tr>
<tr>
<td></td>
<td>Confidential Location</td>
</tr>
<tr>
<td></td>
<td>(253) 292-4354</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:STSWIESS@MAXHEALTH.COM">STSWIESS@MAXHEALTH.COM</a></td>
</tr>
<tr>
<td></td>
<td><a href="http://WWW.MAXHEALTH.COM/BEHAVIORAL">WWW.MAXHEALTH.COM/BEHAVIORAL</a></td>
</tr>
<tr>
<td></td>
<td>Ali Lyse</td>
</tr>
<tr>
<td></td>
<td>Director of Business Operations</td>
</tr>
<tr>
<td></td>
<td>Chante Stoekley</td>
</tr>
<tr>
<td></td>
<td>Behavioral Supervisor</td>
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</table>

<table>
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<tbody>
<tr>
<td>200566</td>
<td>Medtriq Treatment Center, LLC</td>
</tr>
<tr>
<td></td>
<td>2603 Bridgeport Way West, Suite F</td>
</tr>
<tr>
<td></td>
<td>University Place, WA 98466</td>
</tr>
<tr>
<td></td>
<td>(253) 666-6780</td>
</tr>
<tr>
<td></td>
<td><a href="http://WWW.MEDTRIQ.COM">WWW.MEDTRIQ.COM</a></td>
</tr>
<tr>
<td></td>
<td>Connie Thompson</td>
</tr>
<tr>
<td></td>
<td>Program Administrator</td>
</tr>
<tr>
<td></td>
<td>John Thompson</td>
</tr>
<tr>
<td></td>
<td>Program Director of Clinical Services (MH/SUD)</td>
</tr>
</tbody>
</table>

<table>
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<tr>
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<tr>
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<td>Substance Use Disorder Services:</td>
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<tr>
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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>
</tr>
</tbody>
</table>

### 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
WWW.MDC-HOPE.ORG

GREGORY KLEINER
VP HEALTH SERVICES

ROBERTO TERRONES
SUD CLINICAL SUPERVISOR

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

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

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

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

TIM HOLMES
PRESIDENT OF BEHAVIORAL HEALTH

ANGELA NAYLOR, RN
CHIEF NURSE EXECUTIVE

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

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

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

MAILING ADDRESS
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

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

200210
MULTICARE BEHAVIORAL HEALTH - PACT
4301 SOUTH PINE STREET, SUITE 21
TACOMA, WA 98409

CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
ROBERT HAMILTON
PROGRAM MANAGER
JEFFERY PLANCICH
CD PROGRAM MANAGER

152800
MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN
325 EAST PIONEER AVENUE
PUYALLUP, WA 98372
(253) 697-8507
(888) 910-6300

MAILING ADDRESS
325 E PIONEER AVE
PUYALLUP, WA 98372
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS 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

200378

NORTHWEST ABA - TACOMA
218 SOUTH 38TH STREET
TACOMA, WA 98418
(206) 313-8840
INFO@NORTHWESTABA.COM
WWW.NORTHWESTABA.COM

MAILING ADDRESS
15445 53RD AVE S STE 110
TUKWILA, WA 98188

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)
NORTHWEST INTEGRATED HEALTH - LAKEWOOD
9720 SOUTH TACOMA WAY
LAKEWOOD, WA 98499
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

AMY CREASER
AGENCY ADMINISTRATOR
TANA RUSSELL
SUD CLINICAL MANAGER

MAILING ADDRESS
5929 WESTGATE BLVD STE A
TACOMA, WA 98406

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

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

NORTHWEST INTEGRATED HEALTH - MAIN
3800 3RD STREET SOUTHEAST
PUYALLUP, WA 98374
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

STEPHANIE LUCAS
AGENCY ADMINISTRATOR
BRIAN BOX
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406

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

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

NORTHWEST INTEGRATED HEALTH - TACOMA
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

BRANDY KREBS
AGENCY ADMINISTRATOR
ANGELA FRYE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406

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

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

PEARL STREET CENTER - CLIP
815 SOUTH PEARL STREET
TACOMA, WA 98465
(253) 396-5805
WWW.COMPREHENSIVELIFERESOURCES.ORG

APRIL STALLINGS
PROGRAM DIRECTOR
DR. MIKE LAEDERICH
DIRECTOR

MAILING ADDRESS
815 SOUTH PEARL STREET
TACOMA, WA 98465
PIERCE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

146100

PENINSULA COUNSELING, INC.
3214 50TH STREET COURT NW, SUITE D-305
GIG HARBOR, WA 98335
B.B. BUSKIRK, DDS, MA, CDP
ADMINISTRATOR
(253) 851-4600

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

CERTIFIED SERVICES

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

200331

PERCH BEHAVIORAL HEALTH
CONFIDENTIAL LOCATION
WILLIAM WALDO
DIRECTOR OF OPERATIONS
(253) 312-8909

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
DR. TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR
SAMI FRENCH
MH CLINICAL SUPERVISOR
(253) 572-4750

MAILING ADDRESS
510 TACOMA AVE S
TACOMA, WA 98402-5416

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

114000

PIONEER ADULT COUNSELING - TACOMA
758 ST HELENS AVENUE
TACOMA, WA 98402
BRANDY OTO
DIRECTOR
NANCY BLACKMAN
CLINICAL SUPERVISOR
(253) 274-0484

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
PROSPERITY WELLNESS CENTER - GRAHAM
22007 MERIDIAN AVENUE EAST, SUITE A
GRAHAM, WA 98338
(253) 375-7530
WWW.PROSPERITYWELLNESSCENTER.COM

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

PROSPERITY WELLNESS CENTER - MAIN
5001 112TH STREET EAST
TACOMA, WA 98446
(253) 531-2103
(253) 863-1380
WWW.PROSPERITYWELLNESSCENTER.COM

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

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

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES
12201 PACIFIC AVENUE SOUTH
TACOMA, WA 98444
(253) 536-6425
WWW.PROSPERITYWELLNESSCENTER.COM

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)
5501 6TH AVENUE
TACOMA, WA 98406-2697
(253) 798-7900

MAILING ADDRESS
5501 6TH AVE
TACOMA, WA 98406-2697

CATHY J. PEARSON
DIRECTOR
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200104
RI INTERNATIONAL - COMMUNITY BUILDING
4210 20TH STREET EAST, SUITES B &C;
FIFE, WA 98424
(253) 235-5216
WWW.RIINTERNATIONAL.COM

AMANDA BESEL
RECOVERY SERVICES ADMINISTRATOR II

MAILING ADDRESS
2701 N 16TH ST STE 103
PHOENIX, AZ 85006

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

200103
RI INTERNATIONAL - CSU
2150 FREEMAN ROAD EAST
FIFE, WA 98424
(253) 942-5644

DON JULIAN SAUCIER
SUPPORT SERVICES COORDINATOR
GRETCHEN MCCLELLAND
RECOVERY SERVICES ADMINISTRATOR I

MAILING ADDRESS
2701 N. 16TH ST. STE. 103
PHOENIX, AZ 85006

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS STABILIZATION UNIT

200102
RI INTERNATIONAL - E&T
2150 FREEMAN ROAD EAST
FIFE, WA 98424
(253) 584-2300
WWW.RIINTERNATIONAL.COM

JULIAN SAUCIER
SUPPORT SERVICE COORDINATOR

MAILING ADDRESS
2701 N 16TH ST STE 103
PHOENIX, AZ 85006

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

176400
ROYAL LIFE CENTERS, LLC - PUGET SOUND
1723 BONNEY AVENUE
SUMNER, WA 98390
(253) 750-3571
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

PERMELIA FOSTER
PROGRAM DIRECTOR
KEN PIMPLETON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
8649 MARTIN WAY E
LACEY, WA 98516
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- WITHDRAWAL MANAGEMENT

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

200265
SEA MAR BEHAVIORAL HEALTH - GIG HARBOR
6659 KIMBALL DRIVE, SUITE C-301
GIG HARBOR, WA 98335
(253) 396-1634
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

164100
SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN
1119 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 246-6820

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

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'ALLEGGRI
VP OF BEHAVIORAL HEALTH

MARCHÉ WARD
SUD CLINICAL SUPERVISOR
PIERC

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 THERAPY
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

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

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CLARE WALSH
MH CLINICAL SUPERVISOR

052102
SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA
1415 CENTER STREET
TACOMA, WA 98409
(253) 280-9860
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

MARCHIE WARD
PROGRAM MANAGER

RODLYN KENNEY
CLINICAL SUPERVISOR

016500
SERENITY COUNSELING SERVICES
5005 PACIFIC HWY E, STE 20
FIFE, WA 98424
(253) 922-6522
WWW.SERENITY-COUNSELING.COM

MAILING ADDRESS
5005 PACIFIC HWY E, STE 20
FIFE, WA 98424

KAREN MYRICK
OWNER/ADMINISTRATOR

KEVIN CURRIE
CLINICAL DIRECTOR

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>Code</th>
<th>Location</th>
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<tr>
<td>109600</td>
<td>SOCIAL TREATMENT OPPORTUNITY</td>
<td>PUYALLUP, WA 98373</td>
<td>ANDREW TATUM ADMINISTRATOR JEFF WILSON PROGRAM MANAGER</td>
</tr>
<tr>
<td></td>
<td>PROGRAMS II, INC. - PUYALLUP</td>
<td></td>
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</tr>
<tr>
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<td>PO BOX 111297, TACOMA, WA 98411</td>
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<td>CERTIFIED SERVICES</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL</td>
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<td>SOCIAL TREATMENT OPPORTUNITY</td>
<td>TACOMA, WA 98409</td>
<td>ANDREW TATUM PROGRAM DIRECTOR STEVE SMITH PROGRAM MANAGER</td>
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<td>PROGRAMS II, INC. - TACOMA</td>
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<tr>
<td>018902</td>
<td>TACOMA DETOXIFICATION CENTER</td>
<td>TACOMA, WA 98402</td>
<td>MARIAM SSEMAKULA PROGRAM MANAGER ROBERTO TERRONES CLINICAL SUPERVISOR</td>
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<tr>
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<td>Mailing Address</td>
<td>945 S FAWCETT AVE, TACOMA, WA 98402</td>
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<tr>
<td>111700</td>
<td>TACOMA TREATMENT SOLUTIONS</td>
<td>LAKEWOOD, WA 98499</td>
<td>ANTHONY HANLEY CLINIC DIRECTOR KATHLYNN R. MILLER CLINICAL SUPERVISOR</td>
</tr>
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<tr>
<td></td>
<td>Mailing Address</td>
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<td>019000</td>
<td>TACOMA-PIERCE COUNTY TREATMENT SERVICES</td>
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<td></td>
<td>ALISA SOLBERG, Program Manager</td>
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<td>AMANDA CRABTREE, Clinical Supervisor</td>
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<td>200535</td>
<td>TELECARE - COMMUNITY ALTERNATIVES TEAM</td>
<td>Mental Health Services:</td>
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<td>TACOMA, WA 98409</td>
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<td>(253) 589-5334</td>
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<td><a href="mailto:MLORDS@TELECARECORP.COM">MLORDS@TELECARECORP.COM</a></td>
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<tr>
<td>010200</td>
<td>VETERANS ADMINISTRATION MEDICAL CENTER -</td>
<td>Substance Use Disorder Services:</td>
<td>ELISIA YANASK, PH.D, Administrator</td>
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<td>AMERICAN LAKE</td>
<td>Level II Intensive Outpatient</td>
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<td>Mailing Address</td>
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<td>CARL RIMMELE, PH.D, Director</td>
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<td>VA PUGET SOUND HEALTH CARE, AMERICAN LAKE</td>
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<td>TACOMA, WA 98493-5000</td>
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<td>200508</td>
<td>WESTERN STATE HOSPITAL</td>
<td>Substance Use Disorder Services:</td>
<td>KATHRIN CHRISTENSEN, SUD Program Manager</td>
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</table>

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

MAILING ADDRESS  
PO BOX 3810  
EVERETT, WA 98213-8810  

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

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

ANASTASIA ALLES  
CHIEF OPERATING OFFICER  
LUZELLEN SMITH  
PROGRAM MANAGER  

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

MAILING ADDRESS  
PO BOX 3810  
EVERETT, WA 98213-8810  

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

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

ANASTASIA ALLES  
CHIEF OPERATING OFFICER  
LUZELLEN SMITH  
PROGRAM MANAGER  

124600  COMPASS HEALTH - SAN JUAN ISLAND  
520 SPRING STREET  
FRIDAY HARBOR, WA 98250  
(360) 378-2669  
WWW.COMPASSHEALTH.ORG  

MAILING ADDRESS  
PO BOX 3810  
EVERETT, WA 98213-8810  

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

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

ANASTASIA ALLES  
CHIEF OPERATING OFFICER  
LUZELLEN SMITH  
PROGRAM MANAGER  

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

JOSEPH H. KOELZER, JR.  
CEO  
SCOTT JEFFREY ALPERT  
CLINICAL SUPERVISOR
SAN JUAN

MAILING ADDRESS
2687 WEST VALLEY RD
FRIDAY HARBOR, WA 98250

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

SKAGIT

164800

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

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

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

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

200166

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

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

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

200167

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

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

CERTIFIED SERVICES

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

200168

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

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

200519

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

JOHN STEPHENS
PROGRAMS ADMINISTRATOR

DAWN LEE
DIDGWALIC PROGRAM DIRECTOR/SPONSOR

MAILING ADDRESS
8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221

CERTIFIED SERVICES

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

200573

EVERGREEN RECOVERY CENTERS - LEGACY LODGE
1905 CONTINENTAL PLACE
MOUNT VERNON, WA 98273
(360) 755-6400
(360) 755-6388
NFRYAR@EVERGREENRC.ORG
WWW.EVERGREENRC.ORG

LINDA GRANT
CEO

ROBERT MCCULLOUGH
PROGRAM MANAGER (SUD CLINICAL SUPERVISOR)

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY
FOLLMAN AGENCY
910 S ANACORTES ST
BURLINGTON, WA 98233
(360) 755-1125
FRONDESK@FOLLMANAGENCY.COM
WWW.FOLLMANAGENCY.COM
KATHY A. FOLLMAN
ADMINISTRATOR
JAMES H. FOLLMAN
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
910 S ANACORTES ST
BURLINGTON, WA 98233-3010

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

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

PHOENIX RECOVERY SERVICES, LLC
1601 E COLLEGE WAY STE A
MOUNT VERNON, WA 98273
(360) 848-8437
CAROL HUNDAHL
ADMINISTRATOR
RACHEL ADAMS
CLINICAL SUPERVISOR

MAILING ADDRESS
1601 E COLLEGE WAY STE A
MOUNT VERNON, WA 98273

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

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

PIONEER CENTER NORTH
1960 THOMPSON DR
SEDRO WOOLLEY, WA 98284
(360) 856-3186
WWW.PIONEERHUMANSERVICES.ORG
ROBERT SULLIVAN
DIRECTOR III
TORY SANDOZ
CLINICAL PRACTICES MANAGER (SUD CS)

MAILING ADDRESS
1960 THOMPSON DR
SEDRO WOOLLEY, WA 98284

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

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

PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER
201 LILA LANE
BURLINGTON, WA 98233
(360) 757-7738
KIM.TISDEL@P-H-S.COM
HTTP://PIONEERHUMANSERVICES.ORG/TREATMENT/CENTERS
ROBERT SULLIVAN
DIRECTOR
SKAGIT

MAILING ADDRESS
201 LILA LN
BURLINGTON, WA 98233

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

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

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JULIA LUGO
CLINICAL SUPERVISOR

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
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GROUP THERAPY
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PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200551
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON
HWY 99
2203 OLD HIGHWAY 99 SOUTH
MOUNT VERNON, WA 98273
(360) 542-8810
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

BRIAN GRIFFITH
CLINICAL SUPERVISOR

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

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

200110
SKAGIT REGIONAL HEALTH
1415 EAST KINCAID STREET
MOUNT VERNON, WA 98274

MAILING ADDRESS
1415 EAST KINCAID STREET
MOUNT VERNON, WA 98274

CERTIFIED SERVICES

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

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:
  INPATIENT EVALUATION AND TREATMENT - ADULT

175700
SUNRISE SERVICES, INC. - CONCRETE SR 20
44942 STATE ROUTE 20
CONCRETE, WA 98237
(360) 336-3762

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR
SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES
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

SUBSTANCE USE DISORDER SERVICES:
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT
  SCREENING AND BRIEF INTERVENTION
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<td>SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET</td>
<td>HOLLY MORGAN</td>
<td>HOLLY MORGAN</td>
<td>(360) 336-3762 (866) 634-3039</td>
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<td>1101 SOUTH 2ND STREET, SUITE A</td>
<td>EXECUTIVE ADMINISTRATOR</td>
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<td><a href="mailto:INFO@SUNRISEEMAIL.COM">INFO@SUNRISEEMAIL.COM</a></td>
<td>MH &amp; SUD CLINICAL DIRECTOR</td>
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<td><a href="http://WWW.SUNRISECOMMUNITYLIVING.COM">WWW.SUNRISECOMMUNITYLIVING.COM</a></td>
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<td>HOLLY MORGAN</td>
<td>JOHN STEPHENS</td>
<td>(360) 466-7256 (360) 466-7233</td>
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<td>EXECUTIVE ADMINISTRATOR</td>
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SKAGIT

MAILING ADDRESS
17337 RESERVATION ROAD
LA CONNER, WA 98257

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

200307
TELECARE - NORTH SOUND EVALUATION & TREATMENT
1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284
(360) 854-7400

MAILING ADDRESS
1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284

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

071300
UNITED NORTHWEST RECOVERY CENTER
605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284
(360) 856-6300

MAILING ADDRESS
605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284

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

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

MAILING ADDRESS
25944 COMMUNITY PLAZA WY
SEDRO WOOLLEY, WA 98284

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

SKAMANIA

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

MAILING ADDRESS
PO BOX 369
STEVENSON, WA 98648

CERTIFIED SERVICES
SKAMANIA

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

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

SNOHOMISH

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

ELAINE DREGER
ADMINISTRATOR

JEANNE MARIE POURROY-CARTER
CLINICAL SUPERVISOR

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

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

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

LYNN DEE BAUER
ADMINISTRATOR

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

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

018500
ALPINE RECOVERY SERVICES, INC. - LYNNWOOD
4202 198TH STREET SW, SUITE 2
LYNNWOOD, WA 98036
(425) 778-1136

LYNN DEE BAUER
ADMINISTRATOR

MAYNARD KIELTY
TREATMENT DIRECTOR

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

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

200460
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SNOHOMISH OUTPATIENT
8825 EVERGREEN WAY, SUITE 100
EVERETT, WA 98208
(425) 322-5581
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR
SNOHOMISH

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

200550
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
STANWOOD OUTPATIENT
7208 267TH STREET NORTHWEST, SUITE A100
STANWOOD, WA 98292
(360) 502-4090
WWW.AMERICANBEHAVIORALHEALTHSYSTEMS.ORG

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

130100
ASIAN-AMERICAN CHEMICAL DEPENDENCY
TREATMENT SERVICES
5116 196TH STREET SW, SUITE 101
LYNNWOOD, WA 98036
(425) 776-1290

MAILING ADDRESS
5116 196TH ST SW STE 101
LYNNWOOD, WA 98036

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

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

132500
ASSESSMENT AND TREATMENT ASSOCIATES -
MOUNTLAKE TERRACE
21907 64TH AVENUE W, SUITE 310
MOUNTLAKE TERRACE, WA 98043
(877) 479-5993

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

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

STEVE UHRICH
EXECUTIVE DIRECTOR

SHARON FENTON
CLINICAL SUPERVISOR

200558
BALANCED LIVING THERAPY, LLC
7500 212TH STREET SOUTHWEST, SUITE 205
EDMONDS, WA 98026
(425) 977-4988
WWW.BALANCEDLIVINGTHERAPY.COM

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

MAGGIE ISHAQ
OWNER/DIRECTOR
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<td>11370</td>
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<td>BRIDGEWAY TREATMENT SERVICES, LLC</td>
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**SNOHOMISH**

**Mailing Address**

7500 212TH STREET SOUTHWEST, SUITE 205
EDMONDS, WA 98026

**Certified Services**

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

**Mental Health Services:**
- BRIEF INTERVENTION TREATMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

**20053**

**Basic Steps Mental Health**

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

**Mailing Address**

12199 VILLAGE CENTER PLACE, SUITE 203
MUKILTEO, WA 98275

**Certified Services**

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

**Mental Health Services:**
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

**11370**

**Bridgeway Treatment Services, LLC**

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

**Mailing Address**

2013 19TH STREET
EVERETT, WA 98201

**Certified Services**

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

**Mental Health Services:**
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

**200014**

**Bridgeways**

5801 23RD DRIVE WEST, SUITE 104
EVERETT, WA 98203
(425) 513-8213
DONNA KONICKI
CEO

**Mailing Address**

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

**Certified Services**

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

**112100**

**Canyon Park Treatment Solutions**

22026 20TH AVENUE SE, BUILDING L SUITE 101
BOTHILL, WA 98021
(425) 672-7293
JACE ANGELLY
CLINIC DIRECTOR
MARIA UCHYTIL
CLINICAL SUPERVISOR
SNOHOMISH

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

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

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

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

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

CERTIFIED SERVICES

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

034400
CATHOLIC COMMUNITY SERVICES - EVERETT WETMORE AVENUE
2610 WETMORE AVENUE
EVERETT, WA 98201
(425) 258-5270

MAILING ADDRESS
1133 RAILROAD AVE STE 100
BELLINGHAM, WA 98225-5054

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
085700  CATHOLIC COMMUNITY SERVICES - MARYSVILLE
1227 2ND STREET
MARYSVILLE, WA 98270
(360) 651-2366

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
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

052300  CENTER FOR COUNSELING & HEALTH RESOURCES
547 DAYTON STREET
EDMONDS, WA 98020
(425) 771-5166
WWW.APLACEOFHOPE.COM

MAILING ADDRESS
PO BOX 700
EDMONDS, WA 98020

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

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

162600  CENTER FOR HUMAN SERVICES - MOUNTLAKE TERRACE
21907 64TH AVENUE WEST, SUITE 240
MOUNTLAKE TERRACE, WA 98043
(206) 362-7282

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155

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

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

162500  CENTER FOR HUMAN SERVICES - SILVER LAKE
10315 19TH AVENUE, UNIT 112
EVERETT, WA 98208
(206) 362-7282
(844) 778-5548
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG

MAILING ADDRESS
17018 15TH AVE NE
SHORELINE, WA 98155
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<td>030000</td>
<td><strong>CHOICES ASSESSMENT AND RECOVERY, INC.</strong></td>
<td>11627 AIRPORT ROAD, SUITE A, EVERETT, WA 98204</td>
<td>(425) 512-8564</td>
<td>MARIA OVERTON</td>
<td>ANTHONY EPPERSON</td>
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<td>121100</td>
<td><strong>CLEARVIEW COUNSELING</strong></td>
<td>1106 COLUMBIA AVENUE, MARYSVILLE, WA 98270</td>
<td>(360) 653-0374</td>
<td>SCOTT WYKES</td>
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<td>172400</td>
<td><strong>COASTAL TREATMENT SERVICES, INC. - EVERETT ADIS</strong></td>
<td>2520 COLBY AVENUE, SUITE 111, EVERETT, WA 98201</td>
<td>(425) 646-4406</td>
<td>MARGARET FERRIS</td>
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<td>200181</td>
<td><strong>COMPASS HEALTH - AURORA HOUSE</strong></td>
<td>20903 70TH AVENUE WEST, EDMONDS, WA 98026</td>
<td>(425) 349-6700</td>
<td>ANASTASIA ALLES</td>
<td>CHRIS STARERS-FOOTE</td>
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<td><strong>200176</strong> Compass Health - Bailey Center</td>
<td>Mentally 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>3322 Broadway, Everett, WA 98201</td>
<td>Anastasia Alles, Chief Operating Officer</td>
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<tr>
<td>(425) 349-6700</td>
<td>Danielle Blackwell, Program Manager</td>
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<td>mailing address</td>
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<td>PO Box 3810, Everett, WA 98213-8810</td>
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| **200177** Compass Health - Dawson Place    | Mentally Health Services: Case Management, Crisis Outreach, Crisis Stabilization, Family Therapy, Group Therapy, Individual Treatment, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Housing Support, Recovery Medication Support, Recovery Peer Support |
| 1509 California Street, Everett, WA 98201   | Anastasia Alles, Chief Operating Officer                                  |
| (425) 349-6700                               | Erin Wells, Clinical Supervisor                                           |
| mailing address                              |                                                                          |
| PO Box 3810, Everett, WA 98213-8810          |                                                                          |

<p>| <strong>200359</strong> Compass Health - Everett Child &amp; Family Clinic | Mentally Health Services: Case Management, Family Therapy, Group Therapy, Individual Treatment, Less Restrictive Alternative (LRA) Support |
| 4526 Federal Avenue, Building 9, Everett, WA 98203    | Anastasia Alles, Chief Operating Officer                                  |
| (425) 349-8300 (425) 349-8304                       | Erin Wells, Clinical Supervisor                                           |
| <a href="http://HEATHER.FENNELL@COMPASSH.ORG">HEATHER.FENNELL@COMPASSH.ORG</a> |                                                            |
| mailing address                              |                                                                          |
| PO Box 3810, Everett, WA 98213-8810                |                                                                          |</p>
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<td>COMPASS HEALTH - Everett Children's Intensive Services</td>
<td>4526 Federal Avenue, Building 1</td>
<td>(425) 349-6200</td>
<td>ANASTASIA ALLES</td>
<td>CHIEF OPERATIONS OFFICER</td>
<td>PO BOX 3810</td>
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<td>COMPASS HEALTH - Federal Campus-Building 4 West</td>
<td>4526 Federal Avenue, Building 4 West Everett, WA 98213</td>
<td>(425) 349-6200</td>
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<td>COMPASS HEALTH - Greenhouse</td>
<td>2735 10th Street</td>
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<td>ANASTASIA ALLES</td>
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<td>COMPASS HEALTH - Haven House</td>
<td>2613 West Marine View Drive</td>
<td>(425) 349-6700</td>
<td>ANASTASIA ALLES</td>
<td>CHIEF OPERATIONS OFFICER</td>
<td>PO BOX 3810</td>
<td>MENTAL HEALTH SERVICES:</td>
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<td>EVERETT, WA 98213-8810</td>
<td>CASE MANAGEMENT</td>
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<td>GROUP THERAPY</td>
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<td>INDIVIDUAL TREATMENT</td>
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<td>PSYCHIATRIC MEDICATION</td>
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<td>RESIDENTIAL TREATMENT FACILITY</td>
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SNOHOMISH

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

200172
COMPASS HEALTH - LYNNWOOD ADULT SERVICES
4807 196TH STREET SW, SUITE 220
LYNNWOOD, WA 98036
(425) 349-6700
WWW.COMPASSHEALTH.ORG

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

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

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

200174
COMPASS HEALTH - MARYSVILLE ADULT SERVICES
4308 76TH STREET NE
MARYSVILLE, WA 98270
(425) 349-6700
WWW.COMPASSHEALTH.ORG

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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
200170
COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC
1
1022 WEST MAIN STREET
MONROE, WA 98272
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

200175
COMPASS HEALTH - SMOKEY POINT CHILD & FAMILY CLINIC
3320 173RD PLACE NE #F1
ARLINGTON, WA 98223
(425) 349-6700
WWW.COMPASSHEALTH.ORG

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

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

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER
FRAN DUCKWORTH
PROGRAM MANAGER

200111
COMPASS HEALTH - MUKILTEO E&T
10710 MUKILTEO SPEEDWAY
MUKILTEO, WA 98275
(425) 349-6200
HTTP://WWW.COMPASSHEALTH.ORG/CONTACT-US/FEEDBACK-S
HTTP://WWW.COMPASSHEALTH.ORG/

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

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

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

200169
COMPASS HEALTH - SNOHOMISH ADULT SERVICES
221 AVENUE B
SNOHOMISH, WA 98290
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER
ERIN WELLS
CLINICAL SUPERVISOR

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

CERTIFIED SERVICES

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

200114
COMPASS HEALTH - SNOHOMISH TRIAGE
3322 BROADWAY
EVERETT, WA 98201

TOM SEBASTIAN
CEO
CHRIS STARETS-FOOTE
PROGRAM DIRECTOR

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
TRIAGE - VOLUNTARY

076900
DOC - MONROE CORRECTIONS CENTER - MSU
16700 177TH AVENUE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

CERTIFIED SERVICES

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

147200
DOC - MONROE CORRECTIONS CENTER - SOU
(SPECIAL OFFENDER UNIT)
16730 177TH AVENUE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

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

147300

DOC - MONROE CORRECTIONS CENTER - WSR
(WASHINGTON STATE REFORMATORY)
16708 177TH AVENUE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

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

076800

DOC - TWIN RIVERS CORRECTIONS CENTER
16774 170TH DRIVE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

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

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

200452

EVERETT TREATMENT SERVICES
7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203
(425) 347-9070
EVERETT.TREATMENT_ETS@HOTMAIL.COM
WWW.EVERETTTREATMENTSERVICES.COM

MARGARET SPENCER
ADMINISTRATOR
ROBERT FROMM
CLINICAL SUPERVISOR

MAILING ADDRESS
7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203

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

010802

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

LINDA GRANT
CEO
DALLARIE HORNE-MOSBY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 12598
EVERETT, WA 98206-2598
### Certified Services

**Substance Use Disorder Services:**
- Intensive Inpatient
- Long-Term Residential

**Mental Health Services:**
- Case Management
- Group Therapy
- Individual Treatment
- Residential Treatment Facility

### 010801

**Evergreen Recovery Centers - Building C**

2601 Summit Avenue, Building C  
Everett, WA 98201  
(425) 258-2407

**Mailing Address**

PO Box 12598  
Everett, WA 98206-2598

**Certified Services**

**Substance Use Disorder Services:**
- Intensive Inpatient
- Long-Term Residential

**Executive Director:**  
Linda Grant

**Clinical Supervisor:**  
Julia Lugo

### 089100

**Evergreen Recovery Centers - Everett Detox**

2601 Summit Avenue, Building C  
Everett, WA 98201  
(425) 258-2407  
(425) 258-3255

**Mailing Address**

PO Box 12598  
Everett, WA 98206-2598

**Certified Services**

**Substance Use Disorder Services:**
- Withdrawal Management

**Executive Director:**  
Linda Grant

**Detox/Housing Manager:**  
Jim Upton

### 010803

**Evergreen Recovery Centers - Everett Outpatient**

2732 Grand Avenue  
Everett, WA 98201  
(425) 259-5842

**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

**Executive Director:**  
Linda Grant

**Clinical Manager:**  
Danielle Shandera

### 162800

**Evergreen Recovery Centers - Lynnwood Detox**

20508 56th Avenue West  
Lynnwood, WA 98036  
(425) 678-1390

**Mailing Address**

PO Box 12598  
Everett, WA 98206

**Certified Services**

**Substance Use Disorder Services:**
- Withdrawal Management

**Director of Detox Services:**  
Scott Johnson

**Clinical Supervisor:**  
Robert McCullough
**SNOHOMISH**

133600  **EVERGREEN RECOVERY CENTERS - LYNNWOOD OUTPATIENT**  
4230 198TH STREET SOUTHWEST  
LYNNWOOD, WA  98036  
(425) 248-4900  
[WWW.EVERGREENRC.ORG](http://WWW.EVERGREENRC.ORG)  

**MAILING ADDRESS**  
PO BOX 12598  
EVERETT, WA  98206-2598  

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

**LINDA GRANT**  
EXECUTIVE DIRECTOR  
ROBERT MCCULLOUGH  
SUD CLINICAL SUPERVISOR/PROGRAM MANAGER

---

011200  **EVERGREENHEALTH RECOVERY CENTER, MONROE**  
17880 147TH STREET SE  
MONROE, WA  98272  
(360) 794-1405  

**MAILING ADDRESS**  
PO BOX 646  
MONROE, WA  98272-0646  

**CERTIFIED SERVICES**  
**MENTAL HEALTH SERVICES:**  
DUI ASSESSMENT  
INTENSIVE INPATIENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
WITHDRAWAL MANAGEMENT

**ERIC JAMES BRITT**  
EXECUTIVE DIRECTOR  
DAVID ANDERSON  
CLINICAL SUPERVISOR

---

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

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

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

---

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

**MAILING ADDRESS**  
10200 NORTHEAST 132ND STREET  
KIRKLAND, WA  98034

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

**RICHARD GEIGER**  
CEO  
DR. SAMIR AZIZ  
MEDICAL DIRECTOR
<table>
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<tr>
<th>Area Number</th>
<th>Organization Name and Address</th>
<th>Contact Person</th>
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<td>200221</td>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - MOUNTLAKE 6505 218TH STREET SW, SUITE 9 MOUNTLAKE TERRACE, WA 98043</td>
<td>DR. CHARNA MINTZ EXECUTIVE DIRECTOR DANETTE DARROW PROGRAM DIRECTOR</td>
<td>MENTAL HEALTH SERVICES: RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)</td>
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<tr>
<td>200078</td>
<td>INSTITUTE FOR FAMILY DEVELOPMENT - EVERETT 14 EAST CASINO ROAD, BUILDING D EVERETT, WA 98208</td>
<td>CHARLOTTE BOOTH EXECUTIVE DIRECTOR</td>
<td></td>
</tr>
<tr>
<td>113900</td>
<td>ISLAND CROSSING COUNSELING SERVICES 5700 172ND STREET NE ARLINGTON, WA 98223 (360) 652-9640 <a href="http://WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP">WWW.STILLAGUAMISH.COM/ISLANDCROSSING.ASP</a></td>
<td>KELLY CAMPBELL ADMINISTRATOR JACKIE ROTH CLINICAL SUPERVISOR</td>
<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT OPIATE SUBSTITUTION TREATMENT</td>
</tr>
<tr>
<td>124500</td>
<td>LA ESPERANZA HCS - LYNNWOOD 20815 67TH AVENUE WEST, SUITE 201 LYNNWOOD, WA 98036 (425) 248-4534 (425) 248-4535</td>
<td>ZOILA SARITAMA ADMINISTRATOR ALVIN CURRY CLINICAL SUPERVISOR</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
</tr>
<tr>
<td>009401</td>
<td>LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS 7935 LAKE BALLINGER WAY EDMONDS, WA 98026-9166 (425) 670-3664</td>
<td>MARY KAY OSHMAN ADMINISTRATOR CATHY WERDEN CLINICAL SUPERVISOR</td>
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SNOHOMISH

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

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

004603

LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204
(425) 267-9573
WWW.LAKESIDEMILAM.COM

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

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

200352

MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH
2621 BICKFORD AVENUE, SUITE C-D
SNOHOMISH, WA 98290
(206) 453-4882
WWW.MAGNOLIABEHIORHERAPY.COM

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

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

178300

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

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

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

114400

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

KIMBERLI MCCABE
ADMINISTRATOR
SNOHOMISH

MAILING ADDRESS
2722 COLBY AVE STE 515
EVERETT, WA 98201

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

035700 PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES
916 PACIFIC AVENUE
EVERETT, WA 98206
(425) 258-7390
(425) 258-7798

MAILING ADDRESS
PO BOX 1067
EVERETT, WA 98206

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

164200 RECOVERY MATTERS, LLC
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290
(360) 568-9396
RECOVERYMATTERS@OUTLOOK.COM
WWW.RECOVERYMATTERSLLC.COM

MAILING ADDRESS
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290

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

200373 REHAB WITHOUT WALLS, INC.
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036
(425) 712-0802
ANGIE.HENDRICK@RESCARE.COM
WWW.REHABWITHOUTWALLS.COM/BMAC

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

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

166400 RYTHER - MUKILTEO
315 LINCOLN AVE, SUITE C1
MUKILTEO, WA 98275
(206) 525-5050

KAREN BRADY
CEO/EXECUTIVE DIRECTOR
YVETTE LUDVIK - JESSICA GLOVER
CLINICAL SUPERVISORS
SNOHOMISH

MAILING ADDRESS
2400 NE 95TH ST
SEATTLE, WA 98115

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

MENTAL HEALTH SERVICES:

SUD SERVICES:

HARRIET YURCHAK, BSW, RC
CLINICAL DIRECTOR
LYNDEE RETZLAFF
CD TREATMENT SUPERVISOR

144800
SAUK-SUIATTLE INDIAN TRIBE
5318 CHIEF BROWN LANE
DARRINGTON, WA 98241
(360) 436-2842
(360) 436-2212

MAILING ADDRESS
5318 CHIEF BROWN LN
DARRINGTON, WA 98241

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

052101
SEA MAR BEHAVIORAL HEALTH - EVERETT
5007 CLAREMONT WAY
EVERETT, WA 98203
(425) 609-5505
(425) 347-5415
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

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

MENTAL HEALTH SERVICES:

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
ELIANA HAFFNER
SUD CLINICAL SUPERVISOR

200334
SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY
1920 100TH STREET, SUITE A2
EVERETT, WA 98208
(425) 312-0277
WWW.SEAMAR.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

CLAUDIA D’ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH
SUSAN "NIKKI" GOLDEN
CLINICAL SUPERVISOR
<table>
<thead>
<tr>
<th>Code</th>
<th>Location</th>
<th>Address</th>
<th>Contact Person</th>
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<tr>
<td>139100</td>
<td>SEA MAR BEHAVIORAL HEALTH - LYNNWOOD</td>
<td>4111 ALDERWOOD MALL BOULEVARD, LYNNWOOD, WA 98036</td>
<td>CLAUDIA D’ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td><a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
<td><a href="http://WWW.SEVERMAR.ORG">WWW.SEVERMAR.ORG</a></td>
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<tr>
<td></td>
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<td>KATHERINE SCOTT DAVIS</td>
<td>MH CLINICAL SUPERVISOR</td>
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<td>SEATTLE, WA 98108</td>
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<td>SEA MAR BEHAVIORAL HEALTH - MONROE</td>
<td>14090 FRYELANDS BOULEVARD SE, SUITE 347, MONROE, WA 98272</td>
<td>CLAUDIA D’ALLEGRI</td>
<td>VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
<td><a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
<td><a href="http://WWW.SEVERMAR.ORG">WWW.SEVERMAR.ORG</a></td>
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<td>ELIANA HAFFNER</td>
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<td>SEATTLE, WA 98108</td>
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<td>146200</td>
<td>SMOKEY POINT BEHAVIORAL HOSPITAL</td>
<td>3955 156TH STREET NORTHEAST, MARYSVILLE, WA 98271</td>
<td>MATT CROCKETT</td>
<td>CEO</td>
<td><a href="mailto:KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.COM">KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.COM</a></td>
<td><a href="http://WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM">WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM</a></td>
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<tr>
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<td>CHRISTINE COSTELLO</td>
<td>DIRECTOR OF CLINICAL SERVICES (MH CLIN SUP)</td>
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<td>200112</td>
<td>SNOHOMISH COUNTY HUMAN SERVICES</td>
<td>3000 ROCKEFELLER AVENUE, EVERETT, WA 98201</td>
<td>KEN STARK</td>
<td>ADMINISTRATOR</td>
<td><a href="HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL">HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL</a></td>
<td><a href="http://WWW.SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL">WWW.SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL</a></td>
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**CERTIFIED SERVICES**
- Substance Use Disorder Services:
  - Alcohol and Drug Information School
  - DUI Assessment
  - Level I Outpatient
  - Level II Intensive Outpatient

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

MAILING ADDRESS
300 ROCKEFELLER AVE, MS 305
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION

081300
STILLAGUAMISH TRIBE OF INDIANS
17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

MAILING ADDRESS
17014 59TH AVE NE
ARLINGTON, WA 98223

CERTIFIED SERVICES
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
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

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

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

MAILING ADDRESS  
PO BOX 2569  
EVERETT, WA 98213  

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

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

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR  

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR  

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

INFO@SUNRISEEMAIL.COM  
WWW.SUNRISECOMMUNITYLIVING.COM  

MAILING ADDRESS  
PO BOX 2569  
EVERETT, WA 98213  

CERTIFIED SERVICES  
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  

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR  

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR  

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  

HOLLY MORGAN  
EXECUTIVE ADMINISTRATOR  

SHAWN (SHAMORA) BEARWOOD  
MH & SUD CLINICAL DIRECTOR  

200121  SWEDISH EDMONDS E&T  
21601 76TH AVENUE WEST  
EDMONDS, WA 98026  
(425) 640-4090  

SARAH ZABEL  
CHIEF OPERATING OFFICER
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<td>200135</td>
<td>VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES</td>
<td>2802 BROADWAY, EVERETT, WA 98201</td>
<td>(425) 609-2210</td>
<td>PHIL D. SMITH, PRESIDENT/CEO</td>
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<td>36070</td>
<td>TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES</td>
<td>2821 MISSION HILL ROAD, TULALIP, WA 98270</td>
<td>(360) 716-4400</td>
<td>CAROLYN (INTERIM), ADMINISTRATOR</td>
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<td>98204</td>
<td>THERAPEUTIC HEALTH SERVICES - EVERETT</td>
<td>9930 EVERGREEN WAY, BUILDING Z150, EVERETT, WA 98204</td>
<td>(425) 347-5121</td>
<td>MARLI BRICKER, BRANCH MANAGER; NORMAN JOHNSON, EXECUTIVE DIRECTOR</td>
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<td>98275</td>
<td>THE JUANITA CENTER LLC</td>
<td>627 5TH STREET, SUITE 100A, MUKILTEO, WA 98275</td>
<td>(425) 328-9528</td>
<td>G. RAYMOND MCCULLOUGH, ADMINISTRATOR/DIRECTOR</td>
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<tr>
<td>21601</td>
<td>SNOHOMISH</td>
<td>21601 76TH AVENUE WEST, EDMONDS, WA 98026</td>
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**CERTIFIED SERVICES:**

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

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

- **ALCOHOL AND DRUG INFORMATION SCHOOL**

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

MAILING ADDRESS
2802 BROADWAY
EVERETT, WA 98201

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

SPOKANE

136500
ADEPT ASSESSMENT CENTER - DEER PARK
104 WEST CRAWFORD STREET
DEER PARK, WA 99006
(509) 276-2797
SHANA WINDHORST
ADMINISTRATOR
JAMIE ZABORAC
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 117
DEER PARK, WA 99006

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

107700
ADEPT ASSESSMENT CENTER - SPOKANE
1321 NORTH ASH STREET
SPOKANE, WA 99201
(509) 327-3120
(509) 327-3163
SHANA WINDHORST
ADMINISTRATOR
JAMIE ZABORAC
CLINICAL SUPERVISOR

MAILING ADDRESS
1321 N ASH ST
SPOKANE, WA 99201

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

096700
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - COZZA MAIN
44 EAST COZZA DRIVE
SPOKANE, WA 99208
(509) 325-6800
(866) 729-8038
WWW.AMERICANBEHAVIORALHEALTH.NET

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
SECURE WITHDRAWAL MANAGEMENT & STABILIZATION
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY
AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - MISSION
12715 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 232-5766
(866) 729-8038

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

ANGELA MELLO
DIRECTOR OF CLIENT SERVICES
DEXTER BAKER, CARRIE SUAZO
CLINICAL SUPERVISORS

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. - SPOKANE OUTPATIENT
715 EAST SPRAGUE AVENUE #107
SPOKANE, WA 99202
(509) 232-5766

MAILING ADDRESS
PO BOX 141106
SPOKANE VALLEY, WA 99214

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

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

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

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

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

AT PARR OUTPATIENT SERVICES, LLC
124 EAST AUGUSTA AVENUE, SUITE 100
SPOKANE, WA 99207
(509) 325-0777

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
160200  BREAKTHROUGH RECOVERY GROUP
11711 EAST SPRAGUE AVENUE, SUITE D4
SPOKANE VALLEY, WA 99206
(509) 927-6838
LISA PARKER
ADMINISTRATOR
ANDREA FORAN
CLINICAL SUPERVISOR

MAILING ADDRESS
11711 E SPRAGUE AVE STE D4
SPOKANE VALLEY, WA 99206

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

117400  CAMAS PATH BHS
934 SOUTH GARFIELD ROAD
AIRWAY HEIGHTS, WA 99001
(509) 789-7630
ALEXANDRIA DESAUTEL
HEALTH CARE ADMINISTRATOR
SHELLEY ETHRINGTON
CLINICAL SUPERVISOR

MAILING ADDRESS
934 S GARFIELD RD
AIRWAY HEIGHTS, WA 99001

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

200491  CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES
1960 NORTH HOLY NAMES COURT, FLOOR 3
SPOKANE, WA 99224
(509) 358-4250
(509) 242-2308
MIRWIN@CCSPokane.ORG
WWW.CATHOLICCHARITIESSPokane.ORG

MAILING ADDRESS
1960 NORTH HOLY NAMES COURT, FLOOR 3
SPOKANE, WA 99224

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

200017  CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN
12 EAST 5TH AVENUE
SPOKANE, WA 99210
(509) 358-4250
DEVELOPMENT@CCSPokane.ORG
WWW.CATHOLICCHARITIESSPokane.ORG

MAILING ADDRESS
PO BOX 2253
SPOKANE, WA 99210

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

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

200457
CATHOLIC CHARITIES COUNSELING PROGRAM - ST. ANNE'S
25 WEST 5TH AVENUE
SPOKANE, WA 99210
(509) 358-4250
MIRWIN@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESPOKANE.ORG

JERRY SCHWAB
DIRECTOR

JEFF BRENO
ASSISTANT DIRECTOR

MAILING ADDRESS
25 WEST 5TH AVENUE
SPOKANE, WA 99210

CERTIFIED SERVICES

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

200299
CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE COOK STREET
4001 NORTH COOK STREET
SPOKANE, WA 99207
(509) 747-4174
WWW.CHILDRENSHOMESOCIETY.ORG
WWW.CHS-WA.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC STAPLETON
CLINICAL SUPERVISOR

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

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

200070
CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE MAIN
2323 NORTH DISCOVERY PLACE
SPOKANE VALLEY, WA 99216
(509) 747-4174
WWW.CHS-WA.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC DOTSON
CLINICAL SUPERVISOR

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
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<th>ADDRESS</th>
<th>CITY, STATE ZIP</th>
<th>PHONE</th>
<th>WEBSITE</th>
<th>PRIMARY OFFICER</th>
<th>DEPARTMENT/ROLE</th>
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<tr>
<td>200313</td>
<td>CHILDREN'S HOME SOCIETY OF WASHINGTON - SPOKANE WEST PLAINS</td>
<td>8727 WEST HIGHWAY 2 SPokane, WA 99224</td>
<td>SPOKANE, WA</td>
<td>(509) 747-4174</td>
<td><a href="http://WWW.CHS-WA.ORG">WWW.CHS-WA.ORG</a></td>
<td>LIBBY HEIN</td>
<td>CHIEF PROGRAM OFFICER</td>
<td>2323 N DISCOVERY PLACE SPOKANE VALLEY, WA 99216</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT RECOVERY PEER SUPPORT</td>
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<td>025500</td>
<td>COLONIAL CLINIC</td>
<td>910 NORTH WASHINGTON STREET, SUITE 210 SPOKANE, WA 99201</td>
<td>SPOKANE, WA</td>
<td>(509) 327-9831</td>
<td></td>
<td>THOMAS HUSTON STOLZ</td>
<td>TREATMENT DIRECTOR</td>
<td>910 N WASHINGTON ST., STE 210 SPOKANE, WA 99201</td>
<td>SUBSTANCE USE DISORDER SERVICES: ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT MENTAL HEALTH SERVICES: FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT</td>
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<tr>
<td>163600</td>
<td>COURAGE TO CHANGE</td>
<td>13015 WEST 14TH AVENUE AIRWAY HEIGHTS, WA 99001</td>
<td>AIRWAY HEIGHTS, WA</td>
<td>(509) 863-4233</td>
<td><a href="http://WWW.COURAGETOCHANGEWESTPLAINS.COM">WWW.COURAGETOCHANGEWESTPLAINS.COM</a></td>
<td>ANGELA SILVA</td>
<td>DIRECTOR OF TREATMENT</td>
<td>PO BOX 212 MEDICAL LAKE, WA 99022</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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<td>200481</td>
<td>CUBHOUSE</td>
<td>14819 EAST MISSION AVENUE SPOKANE VALLEY, WA 99216</td>
<td>SPOKANE VALLEY, WA</td>
<td>(509) 477-4631</td>
<td><a href="http://WWW.SPOKANERECOVERY.ORG">WWW.SPOKANERECOVERY.ORG</a></td>
<td>BLAKE REDDING</td>
<td>INTERIM EXECUTIVE DIRECTOR</td>
<td>14819 EAST MISSION AVENUE SPOKANE VALLEY, WA 99216</td>
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<td>COLIN HUSFLOEN</td>
<td>SUD CLINICAL SUPERVISOR</td>
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CERTIFIED SERVICES
MENTAL HEALTH SERVICES:

SUBSTANCE USE DISORDER SERVICES:
RECOVERY HOUSE

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

MENTAL HEALTH SERVICES:

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
YOUTH RESIDENTIAL

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

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

DISCOVERY COUNSELING GROUP

MELISSA MACE
EXECUTIVE DIRECTOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:

MAILING ADDRESS
222 W MISSION AVE, SUITE 30
SPOKANE, WA 99201
(509) 413-1193

MAILING ADDRESS
222 W MISSION AVE, SUITE 30
SPOKANE, WA 99201

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202
SPOKANE

075700  DOC - AIRWAY HEIGHTS CORRECTIONS CENTER
11929 WEST SPRAGUE AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 244-6700

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

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

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

076000  DOC - BROWNSTONE WORK RELEASE
223 SOUTH BROWNE STREET
SPOKANE, WA 99201
(360) 725-8423
COURTNEY.EVENSEN@DOC.WA.GOV
WWW.DOC.WA.GOV

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

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

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

026802  DOC - ELEANOR CHASE WORK RELEASE
427 WEST 7TH AVENUE
SPOKANE, WA 99204
(360) 725-8628

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

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

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR
BRYAN SMITH
CLINICAL SUPERVISOR

200563  EASTERN STATE HOSPITAL
850 WEST MAPLE
MEDICAL LAKE, WA 99022
WWW.DSHS.WA.GOV/BHA

MAILING ADDRESS
PO BOX 800
MEDICAL LAKE, WA 99022

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY

JANE SCHOLLMEYER
APU ADMIN DIRECTOR & TX MALL/REHAB DIRECTOR

089300  EXCELSIOR YOUTH CENTER - MAIN
3754 WEST INDIAN TRAIL ROAD
SPokane, WA 99208
(509) 328-7041
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

MAILING ADDRESS
PO BOX 800
MEDICAL LAKE, WA 99022

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:

ANDREW HILL
CEO
MELISSA MELSON
SUD CLINICAL SUPERVISOR
SPOKANE

MAILING ADDRESS
3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSE
RECOVERY HOUSING SUPPORT
YOUTH RESIDENTIAL

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

200478
EXCELSIOR YOUTH CENTER - SPOKANE BRANCH
2911 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224
(509) 328-7041
(800) 466-5574
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

MAILING ADDRESS
3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

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

200430
FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD
505 NORTH ARGONNE ROAD, SUITE B206
SPOKANE VALLEY, WA 99212
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

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

012200  FRONTIER BEHAVIORAL HEALTH - BOONE
127 WEST BOONE AVENUE
SPOKANE, WA 99201
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202-1586

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIEGTE
SUD CLINICAL SUPERVISOR

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

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

200207  FRONTIER BEHAVIORAL HEALTH - CALISPEL E&T
1401 NORTH CALISPEL STREET
SPOKANE, WA 99201

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

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

200198  FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY
131 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

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

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
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PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
SPOKANE

200201  FRONTIER BEHAVIORAL HEALTH - CORNERSTONE
17 EAST FIRST AVENUE
SPOKANE, WA 99202
WWW.FBHWA.ORG
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

JEFF THOMAS
CEO/ADMINISTRATOR
KEITH BRYANT
MH & SUD CLINICAL SUPERVISOR

200193  FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB
2102 EAST SPRAGUE AVENUE
SPOKANE, WA 99202
MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CLUBHOUSE
CRISIS OUTREACH
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT

JEFF THOMAS
CEO/ADMINISTRATOR

200208  FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&T
505 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207
MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

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

JEFF THOMAS
CEO/ADMINISTRATOR

200199  FRONTIER BEHAVIORAL HEALTH - HOWARD STREET
7 SOUTH HOWARD STREET, SUITE 321
SPOKANE, WA 99201
(509) 838-4651
WWW.FBHWA.ORG
MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR
NATHAN MRAZ
SUD CLINICAL SUPERVISOR
CERTIFIED SERVICES

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

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

200200 FRONTIER BEHAVIORAL HEALTH - HULSKAMP BUILDING
103 EAST FIRST AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

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

200418 FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET
400 SOUTH JEFFERSON STREET, SUITE 114
SPOKANE, WA 99204
(509) 838-4651
WWW.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
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
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<th>Provider</th>
<th>Address</th>
<th>Phone</th>
<th>Website</th>
<th>CEO/ Administrator</th>
<th>Clinical Supervisor</th>
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<td><strong>FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD</strong>&lt;br&gt;5901 NORTH LIDGERWOOD STREET, SUITE 115&lt;br&gt;SPOKANE, WA 99208&lt;br&gt;(509) 838-4651&lt;br&gt;WWW.FBHWA.ORG</td>
<td>JEFF THOMAS&lt;br&gt;CEO/ADMINISTRATOR</td>
<td>AILEEN HETRICK&lt;br&gt;MH CLINICAL SUPERVISOR</td>
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| **FRONTIER BEHAVIORAL HEALTH - MAIN**<br>107 SOUTH DIVISION STREET<br>SPOKANE, WA 99202<br>(509) 838-4651<br>WWW.FBHWA.ORG | JEFF THOMAS<br>CEO/ADMINISTRATOR | STEFANIE TIETGE<br>SUD CLINICAL SUPERVISOR | |
| **MAILING ADDRESS**<br>107 SOUTH DIVISION STREET<br>SPOKANE, WA 99202 | | | |
| **CERTIFIED SERVICES** | **MENTAL HEALTH SERVICES:** | | |
| SUBSTANCE USE DISORDER SERVICES: | BRIEF INTERVENTION TREATMENT | | |
| LEVEL I OUTPATIENT | CASE MANAGEMENT | | |
| LEVEL II INTENSIVE OUTPATIENT | 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 - NORTH PINES**<br>317 NORTH PINES ROAD<br>SPOKANE VALLEY, WA 99206<br>(509) 838-4651<br>WWW.FBHWA.ORG | JEFF THOMAS<br>CEO/ADMINISTRATOR | NATHAN MRAZ<br>SUD CLINICAL SUPERVISOR | |
| **MAILING ADDRESS**<br>107 S DIVISION ST<br>SPOKANE, WA 99202 | | | |
CERTIFIED SERVICES

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

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

200362
FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE
124 EAST PACIFIC AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

PAT ANTHONY
MH CLINICAL SUPERVISOR

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

200202
FRONTIER BEHAVIORAL HEALTH - PACT
505 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIEGTE
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
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CRISIS PEER SUPPORT
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LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
### FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING

**Address:** 5125 NORTH MARKET STREET, SPOKANE, WA 99217  
**Phone:** (509) 838-4651  
**Website:** [WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)  
**CEO/Administrator:** JEFF THOMAS  
**SUD Clinical Supervisor:** NATHAN MRAZ  

**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

### FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE

**Address:** 124 EAST SHORT AVENUE, SPOKANE, WA 99202  
**Phone:** (509) 838-4651  
**Website:** [WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)  
**CEO/Administrator:** JEFF THOMAS  
**MH Clinical Supervisor:** NATHAN CORDUAN  

**Mailing Address:** 107 S DIVISION ST, SPOKANE, WA 99202  

**CERTIFIED SERVICES**

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

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

### FRONTIER BEHAVIORAL HEALTH - SPRAGUE AVENUE

**Address:** 2118 EAST SPRAGUE AVENUE, SPOKANE, WA 99202  
**Phone:** (509) 838-4651  
**Website:** [WWW.FBHWA.ORG](http://WWW.FBHWA.ORG)  
**CEO:** JEFF THOMAS  
**MH Clinical Supervisor:** SHANNON SCHOONVER  

**Mailing Address:** 107 S DIVISION ST, SPOKANE, WA 99202
<table>
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<td>200206</td>
<td>FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES</td>
<td>1401 NORTH CALISPEL STREET</td>
<td>SPOKANE, WA 99201</td>
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<td>038800</td>
<td>GATEWAY COUNSELING SERVICES</td>
<td>140 SOUTH ARTHUR STREET, SUITE 665</td>
<td>SPOKANE, WA 99202</td>
<td>(509) 532-8855</td>
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<td>200219</td>
<td>IMAGINE BEHAVIORAL &amp; DEVELOPMENTAL SERVICES - SPOKANE MAIN</td>
<td>5709 WEST SUNSET HIGHWAY, SUITE 100</td>
<td>SPOKANE, WA 99224</td>
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<td>200080</td>
<td>INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE</td>
<td>720 WEST BOONE AVENUE, SUITE 101</td>
<td>SPOKANE, WA 99201</td>
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<td>019701</td>
<td>Mental Health Services: Brief Intervention Treatment, Case Management, Crisis Outreach, Crisis Telephone Support, Individual Treatment, Less Restrictive Alternative (LRA) Support, Recovery Peer Support, Recovery Support Wraparound Facilitation</td>
<td>Isabella House, 2308 West 3rd Avenue, Spokane, WA 99201</td>
<td>Art Jacobs, Administrator; Fariba Nikdel, SUD Clinical Supervisor</td>
<td></td>
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<tr>
<td>172200</td>
<td>Mental Health Services: Case Management, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Medication Support, Residential Treatment Facility</td>
<td>Karen's House, 4324 North Jefferson Street, Spokane, WA 99205</td>
<td>Blake Redding, Interim Executive Director; Christina MacLachlan, SUD Clinical Supervisor</td>
<td></td>
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<tr>
<td>200087</td>
<td>Mental Health Services: Family Therapy, Group Therapy, Individual Treatment, Less Restrictive Alternative (LRA) Support, Psychiatric Medication, Recovery Medication Support, Residential Treatment Facility</td>
<td>Lutheran Community Services Northwest - Spokane, 210 West Sprague Avenue, Spokane, WA 99201</td>
<td>Heike Lake, Area Director; Sharon O'Brien, Program Supervisor</td>
<td></td>
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</tbody>
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SPokane

Certified Services

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

N ATIVE. Project
1803 west Maxwell Avenue
Spokane, wa 99201-2831
(509) 325-5502
Toni Lodge
Executive Director

Mail Address
1803 west Maxwell Avenue
Spokane, wa 99201-2831

055600

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

New Horizon Counseling Services
701 east 3rd Avenue
Spokane, Wa 99202
(509) 838-6092
Www.newhorizoncarecenters.org
Alice Buckles
Program Administrator

Mail Address
PO Box 4627
Spokane, Wa 99220-0627

019702

Mental Health Services:
- Brief Intervention Treatment
- Case Management
- Individual Treatment
- Psychiatric Medication

New Horizon Counseling Services - Valley Office
15407 east Mission Avenue, Suite 100
Spokane Valley, Wa 99037
(509) 927-1543
Alice Buckles
Program Administrator

Mail Address
PO Box 4627
Spokane, Wa 99220-0627

011401
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
DAVID NIelsen
EXECUTIVE DIRECTOR
DAN PITMAN
SUD CLINICAL SUPERVISOR
Mailing Address:
5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026

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

NORTHWEST AUTISM CENTER - SPOKANE BRANCH
825 HAWTHORNE ROAD
SPOKANE, 99218
(509) 777-3309
(509) 777-3553
JIDE@NWAUTISM.ORG
WWW.NWTAUTISM.ORG
JIM MATTHEWS
PROGRAM MANAGER
DANA STEVENS
DIRECTOR OF CLINICAL SERVICES
Mailing Address:
825 HAWTHORNE ROAD
SPOKANE, 99218

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

NORTHWEST AUTISM CENTER - SPOKANE MAIN
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202
(509) 328-1582
INFO@NWAUTISM.ORG
HTTP://SANDBOX.NWTAUTISM.ORG
ADAM KOGLER
OPERATIONS AND FINANCIAL OFFICER
Mailing Address:
528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202

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

PARTNERS WITH FAMILIES AND CHILDREN
1321 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(509) 473-4810
WWW.PARTNERSWITHFAMILIES.ORG
CAROL P LISCHKE
EXECUTIVE DIRECTOR
KOLLEEN SEWARD
SUD CLINICAL SUPERVISOR
Mailing Address:
1321 W BROADWAY AVE
SPOKANE, WA 99201
### PASSAGES FAMILY SUPPORT

**Address:**
1002 North Superior Street
SPOKANE, WA 99202

**Phone:**
(509) 892-9241

**Email:**
INFORMATION@PASSAGESFS.ORG
WWW.PASSAGES-SPOKANE.ORG

---

### PATHWAYS OF WASHINGTON, INC.

**Address:**
1050 North Argonne Road, Suite 100
SPOKANE VALLEY, WA 99212

**Phone:**
(509) 209-8990

**Email:**
PHSWA@PATHWAYS.COM
WWW.PATHWAYS.COM

---

### PIONEER CENTER EAST

**Address:**
3400 West Garland Avenue
SPOKANE, WA 99205

**Phone:**
(509) 325-2355

**Email:**
TENVILLE.LIGHTFOOT@PATHWAYS.COM
KEITH.BRYANT@PATHWAYS.COM

---
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

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

KATRINA BRYANT
DIRECTOR

CARA STRANGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
910 West Boone Avenue, Suite 201
Spokane, WA 99201

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 Helen's Ave
Tacoma, WA 98402

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
- Level I Outpatient

NANCY BLACKMAN
CLINICAL MANAGER

200100
PROVIDENCE SACRED HEART MEDICAL CENTER - E&T
101 West 8th Avenue
Spokane, WA 99204

MAILING ADDRESS
101 West 8th Avenue
Spokane, WA 99204

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- Inpatient Evaluation and Treatment - Adult
- Inpatient Evaluation and Treatment – Children

200099
PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT
101 West 8th Avenue
Spokane, WA 99204

MAILING ADDRESS
101 West 8th Avenue
Spokane, WA 99204
CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

PSYCHIATRIC MEDICATION

200528 PSYCHIATRIC SOLUTIONS
1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216
(509) 863-9779
SUPPORT@PSYCHSOLUTIONS.COM
WWW.PSYCHSOLUTIONS.COM

MAILING ADDRESS
1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

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
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<tr>
<td>200388</td>
<td>SOAR BEHAVIOR SERVICES</td>
<td>CONFIDENTIAL LOCATION</td>
<td>(509) 999-5657</td>
<td><a href="mailto:INFO@SOARBEHAVIOR.COM">INFO@SOARBEHAVIOR.COM</a></td>
<td><a href="http://WWW.SOARBEHAVIOR.COM">WWW.SOARBEHAVIOR.COM</a></td>
<td>JAMES MATTHEWS, CLINICAL DIRECTOR</td>
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<tr>
<td>120300</td>
<td>SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.</td>
<td>104 SOUTH FREYA STREET BLUE FLAG BUILDING, SUITE 206, SPOKANE, WA 99202</td>
<td>(509) 927-3668</td>
<td></td>
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<td>ANDREW TATUM, ADMINISTRATOR; BRAD BRESOLIN, CLINICAL SUPERVISOR</td>
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<td>012102</td>
<td>SPARC - CHRISTOPH HOUSE</td>
<td>1403 WEST 7TH AVENUE, SPOKANE, WA 99204-7159</td>
<td>(509) 624-3251</td>
<td></td>
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<td>GEORGE FELDMILLER, INTERIM DIRECTOR; BRANDY WOODS, CLINICAL SUPERVISOR</td>
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<td>165900</td>
<td>SPARC - DELANEY HOUSE</td>
<td>1501 WEST 8TH AVENUE, SPOKANE, WA 99204</td>
<td>(509) 624-7456</td>
<td></td>
<td></td>
<td>GEORGE FELDMILLER, INTERIM DIRECTOR; CAROL GRABOWSKI, CLINICAL SUPERVISOR</td>
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SPokane

012101 SPARC - OUT PATIENT SERVICES
1508 WEST SIXTH AVENUE
SPOKANE, WA 99204-7159
(509) 624-5228
SISADMIN@SPARCOP.ORG
WWW.SPARCOP.ORG

GEORGE FELDMILLER
INTERIM DIRECTOR
BRANDY WOODS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
812 S WALNUT ST
SPOKANE, WA 99204

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

165800 SPARC - SHAW HOUSE
1509 WEST 8TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-7456

GEORGE FELDMILLER
INTERIM DIRECTOR
CAROL GRABOWSKI
CLINICAL SUPERVISOR

MAILING ADDRESS
812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

012100 SPARC - WESTBROOK HOUSE
1404 WEST 8TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-3251

MARK BROWNLOW
ADMINISTRATOR
BRANDY WOODS
CLINICAL SUPERVISOR

MAILING ADDRESS
812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
RECOVERY HOUSE

200118 SPOKANE COUNTY DETENTION SERVICES
1100 WEST MALLON AVENUE
SPOKANE, WA 99260
(509) 477-2278
WWW.SPOKANECOUNTY.ORG/351/DETENTION-SERVICES

KRISTINA RAY
MENTAL HEALTH MANAGER

MAILING ADDRESS
1100 WEST MALLON AVENUE
SPOKANE, WA 99260

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT

200119 SPOKANE COUNTY JUVENILE COURT SERVICES
902 NORTH ADAMS STREET
SPOKANE, WA 99260

BONNIE BUSH
ADMINISTRATOR
SPOKANE

MAILING ADDRESS
902 NORTH ADAMS STREET
SPOKANE, WA 99260

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

200120 SPOKANE COUNTY SUPPORTIVE LIVING PROGRAM
327 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4388
SCRBHOCOUNTTRACTS@SPOKANE COUNTY.ORG
WWW.SPOKANE COUNTY.ORG/3155

TONYA STERN
ASSISTANT DIRECTOR

KIM LONGHOFER
HUMAN SERVICES PROGRAM MANAGER

MAILING ADDRESS
327 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- RECOVERY HOUSING SUPPORT
- RECOVERY PEER SUPPORT

136200 SPOKANE PUBLIC SCHOOLS - DISTRICT 81
200 NORTH BERNARD STREET
SPOKANE, WA 99201
(509) 354-7946
KEVINMOR@SPOKANESCHOOLS.ORG
WWW.SPOKANESCHOOLS.ORG

DAVID CRUMP, PH.D
CLINICAL DIRECTOR

GARY FROST
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
200 N BERNARD ST
SPOKANE, WA 99201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

011300 SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES
1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095
(509) 324-1420

MISTY CHALLINOR
ADMINISTRATOR

JENNIFER TIMONEY
OTP PROGRAM MANAGER

MAILING ADDRESS
1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095

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

012000 SPOKANE TREATMENT & RECOVERY SERVICES
312 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4631
(509) 477-4650

BLAKE REDDING
INTERIM DIRECTOR

ERIC DENO
SUD CLINICAL SUPERVISOR
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<th>ZIP CODE</th>
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<th>ADDRESS</th>
<th>CITY</th>
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<th>PHONE 2</th>
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<th>SUPERVISOR</th>
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<tr>
<td>200280</td>
<td>SUNSHINE BEHAVIORAL HEALTH</td>
<td>1102 SOUTH RAYMOND ROAD</td>
<td>SPOKANE</td>
<td>WA</td>
<td>(509) 892-4342</td>
<td></td>
<td>RON SIMPSON</td>
<td>ADMINISTRATOR</td>
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<tr>
<td>083800</td>
<td>SUN RAY COURT</td>
<td>518 SOUTH BROWNE STREET</td>
<td>SPOKANE</td>
<td>WA</td>
<td>(509) 456-5465</td>
<td></td>
<td>THOMAS L. COOK</td>
<td>BRANCH ADMINISTRATOR</td>
</tr>
<tr>
<td>154200</td>
<td>SPOKANE TREATMENT SOLUTIONS</td>
<td>15812 EAST INDIANA AVENUE, SUITE 100</td>
<td>SPOKANE VALLEY</td>
<td>WA</td>
<td>(877) 418-8103 (509) 795-3133</td>
<td></td>
<td>MARK-ERIK DIBIASE</td>
<td>CLINIC DIRECTOR DAVID P. ROBINSON</td>
</tr>
<tr>
<td>200280</td>
<td>SUNSHINE BEHAVIORAL HEALTH</td>
<td>1102 SOUTH RAYMOND ROAD</td>
<td>SPOKANE</td>
<td>WA</td>
<td>(509) 892-4342</td>
<td></td>
<td>RON SIMPSON</td>
<td>ADMINISTRATOR</td>
</tr>
</tbody>
</table>

**SPOKANE**

**MAILING ADDRESS**
PO BOX 2845
SPOKANE, WA 99220-2845

**CERTIFIED SERVICES**
SUBSTANCE USE DISORDER SERVICES:
- EMERGENCY SERVICE PATROL
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- WITHDRAWAL MANAGEMENT
- YOUTH WITHDRAWAL MANAGEMENT

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

154200

**SPOKANE TREATMENT SOLUTIONS**
15812 EAST INDIANA AVENUE, SUITE 100
SPOKANE VALLEY, WA 99216
(877) 418-8103 (509) 795-3133

**MARK-ERIK DIBIASE**
CLINIC DIRECTOR

**DAVID P. ROBINSON**
CLINICAL SUPERVISOR

**MAILING ADDRESS**
15812 E INDIANA AVE, STE 100
SPOKANE VALLEY, WA 99216

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

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

083800

**SUN RAY COURT**
518 SOUTH BROWNE STREET
SPOKANE, WA 99202
(509) 456-5465

**THOMAS L. COOK**
BRANCH ADMINISTRATOR

**MAILING ADDRESS**
PO BOX 4627
SPOKANE, WA 99220-0627

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

200280

**SUNSHINE BEHAVIORAL HEALTH**
1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206
(509) 892-4342

**RON SIMPSON**
ADMINISTRATOR

**MAILING ADDRESS**
1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206

**CERTIFIED SERVICES**
MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY MEDICATION SUPPORT
- RESIDENTIAL TREATMENT FACILITY
<table>
<thead>
<tr>
<th>Location</th>
<th>Provider Name</th>
<th>Address</th>
<th>Contact Information</th>
<th>Services</th>
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</thead>
</table>
| SPOKANE  | SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER) | 3305 WEST FORT GEORGE WRIGHT DRIVE, SPOKANE, WA 99224 | | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
INDIVIDUAL TREATMENT  
RECOVERY EMPLOYMENT SUPPORT |
| Tamarack Center - CLIP | | 2901 WEST ELLIOTT DRIVE, SPOKANE, WA 99224 | | MENTAL HEALTH SERVICES:  
CHILD LONG-TERM INPATIENT PROGRAM (CLIP) |
| Tamarack Center - Outpatient | | 2901 WEST ELLIOTT DRIVE, SPOKANE, WA 99224 | TIM DAVIS  
EXECUTIVE DIRECTOR  
ELLEN DAL PRA  
CLINICAL SUPERVISOR | MENTAL HEALTH SERVICES:  
CASE MANAGEMENT  
DAY SUPPORT  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION |
| The Emily Program - Spokane | | 2020 EAST 29TH AVENUE, SUITE 200, SPOKANE, WA 99203 | KRISTA CROTTY  
SITE DIRECTOR | MENTAL HEALTH SERVICES:  
DAY SUPPORT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT  
PSYCHIATRIC MEDICATION |
046200  THE HEALING LODGE - BUTTERFLY PELPALWICHIYA GIRLS CD  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220  (509) 533-6910  ADMIN@HEALINGLODGE.ORG  WWW.HEALINGLODGE.ORG  REBECCA CROCKER  EXECUTIVE DIRECTOR  KIPPY JONES  SUD CLINICAL SUPERVISOR  MAILING ADDRESS  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- YOUTH RESIDENTIAL

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

150500  THE HEALING LODGE - CEDAR BOYS COD  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220  (509) 533-6910  ADMIN@HEALINGLODGE.ORG  WWW.HEALINGLODGE.ORG  REBECCA CROCKER  EXECUTIVE DIRECTOR  DODDIE LAGERVALL  SUD CLINICAL SUPERVISOR  MAILING ADDRESS  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- YOUTH RESIDENTIAL

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

150600  THE HEALING LODGE - SAGE BOYS CD  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220  (509) 533-6910  ADMIN@HEALINGLODGE.ORG  WWW.HEALINGLODGE.ORG  REBECCA CROCKER  EXECUTIVE DIRECTOR  STEPHANIE MCGREGOR  SUD CLINICAL SUPERVISOR  MAILING ADDRESS  5600 EAST 8TH AVENUE  SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- INTENSIVE INPATIENT
- YOUTH RESIDENTIAL

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

012400  VETERANS AFFAIRS MEDICAL CENTER - SPOKANE  4815 NORTH ASSEMBLY STREET  SPOKANE, WA 99205-6197  (509) 434-7014  PAUL NICOLAI, COORDINATOR  SUBSTANCE ABUSE PROGRAMS  MAILING ADDRESS  4815 N ASSEMBLY ST - 116/668/SATP  SPOKANE, WA 99205-6197
SPOKANE

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

020000

YFA CONNECTIONS
22 SOUTH THOR STREET
SPOKANE, WA 99202
(509) 532-2000

THOMAS MURPHY
ADMINISTRATOR

TOM BRYANT
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 3344
SPOKANE, WA 99220-3344

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

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

200536

YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION
930 NORTH MONROE STREET
SPOKANE, WA 99201
(509) 789-9297
WWW.YWCASPOKANE.ORG

MARGARET CURTIN REY-BEAR
CLINICAL DIRECTOR

MAILING ADDRESS
930 NORTH MONROE STREET
SPOKANE, WA 99201

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

STEVENS

148100

ADEPT ASSESSMENT CENTER - COLVILLE
218 B NORTH OAK STREET
COLVILLE, WA 99114
(509) 684-2349

SHANA WINDHORST
ADMINISTRATOR

JAMIE ZABORAC
CLINICAL SUPERVISOR

MAILING ADDRESS
218 B NORTH OAK ST.
COLVILLE, WA 99114

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

012501

NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH
301 EAST CLAY AVENUE, ROOMS 201 &AMP; 216
CHEWELAH, WA 99109
(509) 935-4808
WWW.CO.STEVENS.WA.US/COUNSELING

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR
STEVENS

MAILING ADDRESS
PO BOX 905
CHEWELAH, WA 99109-0905

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

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

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

200512 NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T
982 EAST COLUMBIA AVENUE
COLVILLE, WA 99114
(509) 684-4597
BMICHAELSON@STEVENSCOUNTYWA.GOV
WWW.CO.STEVENSWA.US/COUNSELING/INDEX.HTM

MAILING ADDRESS
165 E HAWTHORNE AVE
COLVILLE, WA 99114

DAVID M. NIELSEN, PH.D.
EXECUTIVE DIRECTOR

D. LYNNE GUHLKE
MENTAL HEALTH CLINICAL DIRECTOR

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

009900  SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM  BRENT POTTER  HHS DIRECTOR
6228 OLD SCHOOL ROAD  LINDA ANDERSON (PEND APPROVAL)  CLINICAL SUPERVISOR
WELLPINIT, WA 99040
(509) 258-7502
(800) 789-4282

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.  NOUNOUCHE CHORLEY  CLINICAL DIRECTOR
203 4TH AVENUE EAST, SUITES 301-304  OLYMPIA, WA 98501
(360) 357-7986

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.  ROBERT SHOPE
2413 PACIFIC AVENUE SE, SUITE B  OLYMPIA, WA 98501
(360) 352-1052

MAILING ADDRESS
PO BOX 4141
OLYMPIA, WA 98501

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

200028  BEHAVIORAL HEALTH RESOURCES - MAIN  LAURIE TEBO  CEO
3857 MARTIN WAY EAST  IAN HARREL  COO/MH CLINICAL SUPERVISOR
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 IN VolUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

020100 BEHAVIORAL HEALTH RESOURCES - TUMWATER
6128 CAPITOL BOULEVARD SE
TUMWATER, WA 98501
(360) 704-7170

MAILING ADDRESS
6128 CAPITOL BLVD SE
TUMWATER, WA 98501

LAURIE TEBO
CEO

DANIELLE MURPHY
RECOVERY SERVICES MANAGER

200016 CAPITAL RECOVERY CENTER
1000 CHERRY STREET SE
OLYMPIA, WA 98501
(360) 464-3880
(360) 357-2582

MAILING ADDRESS
1000 CHERRY STREET SE
OLYMPIA, WA 98501

MARY STONE SMITH
VICE PRESIDENT

200142 CATHOLIC COMMUNITY SERVICES - OLYMPIA
1011 10TH AVENUE SOUTHEAST
OLYMPIA, WA 98501
(360) 878-8248
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403
### Certified Services

#### Mental Health Services:
- Case Management
- Crisis Outreach
- Crisis Stabilization
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

#### Catholic Community Services - Yelm

- **Address:** 715 East Yelm Avenue, Suite 8, Yelm, WA 98597
- **Phone:** (360) 878-8248, (888) 322-7156
- **Email:** stephanieth@ccsww.org
- **Website:** www.ccsww.org

#### Mailing Address

1001 N J Street
Tacoma, WA 98403

#### Certified Services

#### Mental Health Services:
- Case Management
- Crisis Outreach
- Crisis Stabilization
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

#### Community Youth Services - Main

- **Address:** 711 State Avenue Northeast, Olympia, WA 98506
- **Phone:** (360) 943-0780
- **Email:** www.communityyouthservices.org

#### Mailing Address

711 State Avenue Northeast
Olympia, WA 98506

#### Certified Services

#### Substance Use Disorder Services:
- Level I Outpatient
- Recovery Employment Support
- Recovery Housing Support
- Screening and Brief Intervention

#### Mental Health Services:
- Brief Intervention Treatment
- Case Management
- Crisis Outreach
- Crisis Stabilization
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Employment Support
- Recovery Housing Support
- Recovery Peer Support
- Recovery Support Wraparound Facilitation

#### Community Youth Services - Pear Street

- **Address:** 520 Pear Street Southeast, Olympia, WA 98501
- **Phone:** (360) 943-0780
- **Email:** www.communityyouthservices.org

#### Mailing Address

711 State Ave NE
Olympia, WA 98506

#### Certified Services

#### Mental Health Services:
- Case Management
- Crisis Outreach
- Crisis Stabilization
- Day Support
- Family Therapy
- Group Therapy
- Individual Treatment
- Psychiatric Medication
- Recovery Peer Support
- Recovery Support Wraparound Facilitation
THURSTON

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

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

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

SCOTT HANAUER
CEO

DR. EKATERINA SHKURKIN
PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

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

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

CB BOWERS
BOARD PRESIDENT

AMY SOHLER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 13453
OLYMPIA, WA 98508-3453

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS

MENTAL HEALTH SERVICES:
CRISIS TELEPHONE SUPPORT

DOC - CEDAR CREEK CORRECTIONS CENTER
12200 BORDEAUX ROAD
LITTLE ROCK, WA 98556
(360) 725-8628

DAWN L. WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT
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<tr>
<th>Code</th>
<th>Name</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Phone</th>
<th>Email</th>
<th>Website</th>
<th>Role</th>
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</thead>
<tbody>
<tr>
<td>200513</td>
<td>DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT</td>
<td>7345 LINDERSON WAY SOUTHWEST TUMWATER, WA 98501</td>
<td>TUMWATER, WA 98501</td>
<td>(360) 725-8602 (360) 725-8603</td>
<td></td>
<td></td>
<td>DAWN WILLIAMS PROGRAM ADMINISTRATOR BRYAN SMITH CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>147500</td>
<td>FIRST THINGS FIRST 123, LLC</td>
<td>1905 4TH AVENUE EAST, SUITE B OLYMPIA, WA 98506</td>
<td>OLYMPIA, WA 98506</td>
<td>(360) 338-0600 (360) 951-1797</td>
<td></td>
<td></td>
<td>ANGIE M. CHAMBERS ADMINISTRATOR DARRELL R. CHAMBERS CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>145800</td>
<td>FREEDOM RECOVERY, LLC</td>
<td>715 EAST YELM AVENUE, SUITE 6 YELM, WA 98597</td>
<td>YELM, WA 98597</td>
<td>(253) 961-0116</td>
<td><a href="mailto:ROBLONG.FRC@COMCAST.NET">ROBLONG.FRC@COMCAST.NET</a></td>
<td></td>
<td>ROB LONG EXECUTIVE DIRECTOR JASON JOHNSTONE CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>200351</td>
<td>HAND IN HAND BEHAVIORAL CONSULTING LLC</td>
<td>1800 COOPER POINT ROAD, SUITE 21 OLYMPIA, WA 98502</td>
<td>OLYMPIA, WA 98502</td>
<td>(360) 810-1547</td>
<td><a href="mailto:CWOLFF@HANDINHANDBC.COM">CWOLFF@HANDINHANDBC.COM</a> <a href="http://WWW.HANDINHANDBC.COM">WWW.HANDINHANDBC.COM</a></td>
<td></td>
<td>LAURA CAMPBELL MEMBER/OWNER</td>
</tr>
<tr>
<td>200076</td>
<td>INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA</td>
<td>204 QUINCE STREET, SUITE 200 OLYMPIA, WA 98506</td>
<td>OLYMPIA, WA 98506</td>
<td></td>
<td></td>
<td></td>
<td>CHARLOTTE BOOTH EXECUTIVE DIRECTOR</td>
</tr>
</tbody>
</table>
THURSTON

MAILING ADDRESS
3400 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

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

028100
NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM
FRONTAGE ROAD - NISQUALLY RESERVATION
OLYMPIA, WA 98513
(360) 413-2727

SHARLAINE LACLAIR
INTERIM CEO

MAILING ADDRESS
4820 SHE-NAH-NUM DR SE
OLYMPIA, WA 98513

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

160800
NORTHWEST RESOURCES II, INC. - LACEY
3773-A MARTIN WAY E, SUITE 105
LACEY, WA 98506
(360) 688-7312
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

MAILING ADDRESS
2708 WESTMOOR CT SW
OLYMPIA, WA 98502

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

162700
NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH
200 LILLY ROAD NORTHEAST, SUITE C
OLYMPIA, WA 98506
(360) 918-8336
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

MAILING ADDRESS
2708 WESTMOOR CT SW
OLYMPIA, WA 98502

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

 mail contact information and services listed.
061600  NORTWEST RESOURCES II, INC. - OLYMPIA MAIN
2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502
(360) 943-8810
INFO@NWRII.COM
WWW.NWRII.COM
DENNIS NEAL
ADMINISTRATOR
STANCIN KAHLER
SUD CLINICAL SUPERVISOR
MAILING ADDRESS
2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200527  OLYMPIC HEALTH & RECOVERY SERVICES - MAIN
612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503
(360) 867-2602
(800) 658-4105
INQUIRIES@TMBHO.ORG
WWW.TMBHO.ORG
MARK FREEDMAN
CEO
JESSICA SHOOK
CLINICAL SUPERVISOR
MAILING ADDRESS
612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

200560  OLYMPIC HEALTH & RECOVERY SERVICES - OLYMPIA
3436 MARY ELDER ROAD NORTHEAST
OLYMPIA, WA 98506
(360) 754-1338
INQUIRIES@TMBHO.ORG
WWW.TMBHO.ORG
MARK FREEDMAN
CEO
JESSICA SHOOK
CLINICAL SUPERVISOR
MAILING ADDRESS
612 WOODLAND SQUARE LP SE STE 401
LACEY, WA 98503
CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
<table>
<thead>
<tr>
<th>Code</th>
<th>Name</th>
<th>Address</th>
<th>Phone Number</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>140400</td>
<td>PIERCE COUNTY ALLIANCE - THURSTON COUNTY DRUG COURT</td>
<td>2400 BRISTOL COURT SW, SUITE B, OLYMPIA, WA 98502</td>
<td>(360) 357-2482</td>
<td>SUBSTANCE USE DISORDER SERVICES: LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT</td>
</tr>
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<td></td>
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<td></td>
<td>TERREE SCHMIDT-WHELAN ADMINISTRATOR JAMES BOYLE CLINICAL SUPERVISOR</td>
</tr>
<tr>
<td>152700</td>
<td>PINNACLE PEAK INSTITUTE, INC.</td>
<td>1822 BLACK LAKE BOULEVARD, SUITE 101, OLYMPIA, WA 98512</td>
<td>(360) 515-0791 (360) 704-0086</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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<td>JOHN THOMPSON ADMINISTRATOR</td>
</tr>
<tr>
<td>200483</td>
<td>PROVIDENCE HEALTH &amp; SERVICES BEHAVIORAL HEALTH - CCC BRANCH</td>
<td>225 STATE AVENUE NORTHEAST, OLYMPIA, WA 98501</td>
<td>(360) 486-6400</td>
<td>SUBSTANCE USE DISORDER SERVICES: CASE MANAGEMENT GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION</td>
</tr>
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<td>SUE BEALL SWR DIRECTOR BH SERVICES GEORGE CHAPPELL MEDICAL DIRECTOR</td>
</tr>
<tr>
<td>200098</td>
<td>PROVIDENCE HEALTH &amp; SERVICES BEHAVIORAL HEALTH - MAIN</td>
<td>413 LILLY RD NE, OLYMPIA, WA 98506</td>
<td><a href="HTTP://WASHINGTON.PROVIDENCE.ORG">HTTP://WASHINGTON.PROVIDENCE.ORG</a></td>
<td>SUBSTANCE USE DISORDER SERVICES: CASE MANAGEMENT INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION</td>
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<td>MENTAL HEALTH SERVICES:</td>
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<td>CASE MANAGEMENT GROUP THERAPY INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION</td>
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<tr>
<td>Location</td>
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</tr>
<tr>
<td>ROYAL LIFE CENTERS, LLC - HAVEN</td>
<td>8649 Martin Way E, Lacey, WA 98516</td>
<td><strong>CERTIFIED SERVICES</strong>&lt;br&gt;Substance Use Disorder Services:&lt;br&gt;- Intensive Inpatient&lt;br&gt;- Withdrawal Management&lt;br&gt;&lt;br&gt;Mental Health Services:&lt;br&gt;- Case Management&lt;br&gt;- Less Restrictive Alternative (LRA) Support&lt;br&gt;- Psychiatric Medication&lt;br&gt;- Recovery Medication Support&lt;br&gt;- Residential Treatment Facility&lt;br&gt;<strong>Mailing Address</strong>&lt;br&gt;8649 Martin Way E&lt;br&gt;Lacey, WA 98516&lt;br&gt;<strong>Admissions</strong>&lt;br&gt;<a href="mailto:Admissions@RoyalCenters.com">Admissions@RoyalCenters.com</a>&lt;br&gt;www.RoyallifeCenters.com&lt;br&gt;&lt;br&gt;<strong>Program Director</strong>&lt;br&gt;Teresa Rorie&lt;br&gt;&lt;br&gt;<strong>SUD Clinical Supervisor</strong>&lt;br&gt;Brandy Mcbride</td>
<td></td>
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</tr>
<tr>
<td>ROYAL LIFE CENTERS, LLC - OLYMPIC</td>
<td>8645 Martin Way E, Lacey, WA 98516</td>
<td><strong>CERTIFIED SERVICES</strong>&lt;br&gt;Substance Use Disorder Services:&lt;br&gt;- DUI Assessment&lt;br&gt;- Level I Outpatient&lt;br&gt;- Level II Intensive Outpatient&lt;br&gt;&lt;br&gt;Mental Health Services:&lt;br&gt;- Individual Treatment&lt;br&gt;<strong>Mailing Address</strong>&lt;br&gt;8645 Martin Way E&lt;br&gt;Lacey, WA 98516&lt;br&gt;<strong>Admissions</strong>&lt;br&gt;<a href="mailto:Admissions@RoyalCenters.com">Admissions@RoyalCenters.com</a>&lt;br&gt;www.RoyallifeCenters.com&lt;br&gt;&lt;br&gt;<strong>Program Director</strong>&lt;br&gt;Teresa Rorie&lt;br&gt;&lt;br&gt;<strong>SUD Clinical Supervisor</strong>&lt;br&gt;Brandy Mcbride</td>
<td></td>
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</tr>
<tr>
<td>SEA MAR BEHAVIORAL HEALTH - OLYMPIA</td>
<td>3030 Limited Lane NW, Olympia, WA 98502</td>
<td><strong>Vice President of Behavioral Health</strong>&lt;br&gt;Claudia D'Allegri&lt;br&gt;&lt;br&gt;<strong>Mailing Address</strong>&lt;br&gt;8915 14th Ave S&lt;br&gt;Seattle, WA 98108&lt;br&gt;<strong>Certified Services</strong>&lt;br&gt;- Brief Intervention Treatment&lt;br&gt;- Case Management&lt;br&gt;- Group Therapy&lt;br&gt;- Less Restrictive Alternative (LRA) Support&lt;br&gt;- Psychiatric Medication</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| SEA MAR BEHAVIORAL HEALTH - TUMWATER | 6334-6336 Littlerock Road SW, Tumwater, WA 98512 | **Administrator**<br>Claudia D'Allegri<br><br>**Clinical Supervisor**<br>Jared Langton<br><br>**Mailing Address**<br>8915 14th Ave S<br>Seattle, WA 98108
THURSTON

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

176000
SEA MAR BEHAVIORAL HEALTH - YELM
202 CULLENS STREET NW
YELM, WA 98597
(206) 764-4714

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

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

111900
SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES
6700 MARTIN WAY EAST, SUITE 117
OLYMPIA, WA 98516
(360) 413-6910

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

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
- SCREENING AND BRIEF INTERVENTION

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
- PROBLEM & PATHOLOGICAL GAMBLING

200041
TELECARE - THURSTON MASON CRISIS TRIAGE
3285 FERGUSON STREET SW
TUMWATER, WA 98512
(360) 943-1907
MFERGUSON@TELECARECORP.COM
WWW.TELECARECORP.COM

JEFF LANDON
ADMINISTRATOR

TYVONNE BERRING
CLINICAL DIRECTOR
### THURSTON

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>Certifed Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO BOX 14339, TUMWATER, WA 98511</td>
<td>MENTAL HEALTH SERVICES: CRISIS EMERGENCY INVOLUNTARY DETENTION INPATIENT EVALUATION AND TREATMENT - ADULT</td>
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#### 200500 TELECARE - THURSTON MASON E&T

<table>
<thead>
<tr>
<th>Address</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>3436 MARY ELDER ROAD NORTHEAST, OLYMPIA, WA 98506</td>
<td>HOLLY BORSO ADMINISTRATOR</td>
</tr>
<tr>
<td>(360) 528-2590 <a href="mailto:MROSS@TELECARECORP.COM">MROSS@TELECARECORP.COM</a> <a href="http://WWW.TELECARECORP.COM">WWW.TELECARECORP.COM</a></td>
<td>KRISTIANN SMITH INTERIM CLINICAL DIRECTOR</td>
</tr>
<tr>
<td>PO BOX 14339, TUMWATER, WA 98511-4339</td>
<td>MENTAL HEALTH SERVICES: INPATIENT EVALUATION AND TREATMENT - ADULT</td>
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#### 200509 TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM

<table>
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<tbody>
<tr>
<td>3436 MARY ELDER ROAD NORTHEAST, SUITE A, OLYMPIA, WA 98506</td>
<td>PAM EGGLESTON INTERIM ADMINISTRATOR</td>
</tr>
<tr>
<td>(360) 528-2590 <a href="http://WWW.TELECARECORP.COM">WWW.TELECARECORP.COM</a></td>
<td>KRISTIANN SMITH CLINICAL DIRECTOR</td>
</tr>
<tr>
<td>PO BOX 14339, TUMWATER, WA 98511-4339</td>
<td>MENTAL HEALTH SERVICES: CASE MANAGEMENT CRISIS STABILIZATION GROUP THERAPY RECOVERY MEDICATION SUPPORT RECOVERY PEER SUPPORT RESIDENTIAL TREATMENT FACILITY</td>
</tr>
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#### 200498 TELECARE - THURSTON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM

<table>
<thead>
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<tbody>
<tr>
<td>908 5TH AVENUE SOUTHEAST, OLYMPIA, WA 98501</td>
<td>TYVONNE BERRING ADMINISTRATOR</td>
</tr>
<tr>
<td>(360) 754-2426 <a href="http://WWW.TELECARECORP.COM">WWW.TELECARECORP.COM</a></td>
<td></td>
</tr>
<tr>
<td>PO BOX 14339, TUMWATER, WA 98511-4339</td>
<td>MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT CASE MANAGEMENT CRISIS OUTREACH CRISIS PEER SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT</td>
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#### 200128 THE EMILY PROGRAM - LACEY

<table>
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<th>Address</th>
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<tbody>
<tr>
<td>673 WOODLAND SQUARE LOOP SE, SUITE 330, LACEY, WA 98503</td>
<td>STACEY SCHILTER-PISANO SITE MANAGER</td>
</tr>
<tr>
<td>(888) 364-5977 <a href="http://WWW.EMILYPROGRAM.COM">WWW.EMILYPROGRAM.COM</a></td>
<td></td>
</tr>
</tbody>
</table>
**THURSTON**

**MAILING ADDRESS**
673 WOODLAND SQUARE LOOP SE, SUITE 330
LACEY, WA 98503

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

**051400 THE RIGHT STEP, INC.**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503
(360) 923-9585
WWW.THERIGHTSTEPINC.COM

**MAILING ADDRESS**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

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

**099600 TRUE NORTH-ESD 113 - TUMWATER MAIN**
6005 TYEE DRIVE SW
TUMWATER, WA 98512
(360) 464-6870
(360) 464-6873

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

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

**105700 TRUE NORTH-ESD 113 - YELM**
1315 YELM HIGHWAY
YELM, WA 98597
(360) 458-6233

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

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

**WAHKIAKUM**

**001502 WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

**MAILING ADDRESS**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612

**CERTIFIED SERVICES**
WASHOE COUNTY 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

**MAILING ADDRESS**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612

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

**051400 THE RIGHT STEP, INC.**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503
(360) 923-9585
WWW.THERIGHTSTEPINC.COM

**MAILING ADDRESS**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

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

**099600 TRUE NORTH-ESD 113 - TUMWATER MAIN**
6005 TYEE DRIVE SW
TUMWATER, WA 98512
(360) 464-6870
(360) 464-6873

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

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

**105700 TRUE NORTH-ESD 113 - YELM**
1315 YELM HIGHWAY
YELM, WA 98597
(360) 458-6233

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

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

**WAHKIAKUM**

**001502 WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

**MAILING ADDRESS**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612

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

**051400 THE RIGHT STEP, INC.**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503
(360) 923-9585
WWW.THERIGHTSTEPINC.COM

**MAILING ADDRESS**
3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

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

**099600 TRUE NORTH-ESD 113 - TUMWATER MAIN**
6005 TYEE DRIVE SW
TUMWATER, WA 98512
(360) 464-6870
(360) 464-6873

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

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

**105700 TRUE NORTH-ESD 113 - YELM**
1315 YELM HIGHWAY
YELM, WA 98597
(360) 458-6233

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

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

**WAHKIAKUM**

**001502 WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

**MAILING ADDRESS**
42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612

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

MAILING ADDRESS
42 ELOCHOMAN VALLEY RD
CATHLAMET, WA 98612

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

MENTAL HEALTH SERVICES:
- CASE MANAGEMENT
- CRISIS EMERGENCY INVOLUNTARY DETENTION
- CRISIS OUTREACH
- DAY SUPPORT
- INDIVIDUAL TREATMENT
- LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
- PSYCHIATRIC MEDICATION
- RECOVERY EMPLOYMENT SUPPORT

WALLA WALLA

CHILDREN’S HOME SOCIETY OF WASHINGTON - WALLA WALLA

200067
1612 PENNY LANE
WALLA WALLA, WA 99362
(509) 529-2130
WWW.CHILDRENSHOMESOCIETY.ORG

MAILING ADDRESS
1612 PENNY LANE
WALLA WALLA, WA 99362

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

COMPREHENSIVE HEALTHCARE - WALLA WALLA

166200
1520 KELLY PLACE, SUITE 234
WALLA WALLA, WA 99362
(509) 524-2920
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
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 MEDICATION SUPPORT
- RECOVERY PEER SUPPORT
- RECOVERY SUPPORT WRAPAROUND FACILITATION

DOC - WASHINGTON STATE PENITENTIARY

075900
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:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

107400 SERENITY POINT COUNSELING SERVICES, LLC
919 SOUTH 2ND AVENUE
WALLA WALLA, WA 99362
(509) 529-6036
(509) 529-6037
SERENITYPOINTCOUNSELING.COM
WWW.SERENITYPOINTCOUNSELING.COM

MAILING ADDRESS
919 S 2ND AVE
WALLA WALLA, WA 99362

CERTIFIED SERVICES

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

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

013100 VETERANS ADMINISTRATION MEDICAL CENTER - WALLA WALLA
77 WAINWRIGHT DRIVE, BUILDING 143
WALLA WALLA, WA 99362
(509) 525-5200

BOBI GOODSON
SUPERVISOR OF RECOVERY/MH SVCS

KATHY WIKMAN
SENIOR ADDICTION THERAPIST

MAILING ADDRESS
77 WAINWRIGHT DR, BLDG 143, OFFICE 203
WALLA WALLA, WA 99362

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT

WHATCOM

038600 BELAIR CLINIC
1130 NORTH STATE STREET
BELLINGHAM, WA 98225
(360) 676-4485

NICOLE WHIPPLE
ADMINISTRATOR

LUZELLEN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
1130 NORTH STATE STREET
BELLINGHAM, WA 98225

CERTIFIED SERVICES

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

139900 BRIDGES TREATMENT AND RECOVERY - BELLINGHAM
1221 FRASER STREET, SUITE E-1
BELLINGHAM, WA 98229
(360) 714-8180

DYLAN BRASHEAR
ADMINISTRATOR

CARI JONES
CLINICAL SUPERVISOR

MAILING ADDRESS
1221 FRASER ST STE E-1
BELLINGHAM, WA 98229
**WHATCOM**

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

---

**147000**
**BRIDGES TREATMENT AND RECOVERY - FERNADE**
6044 PORTAL WAY, SUITE 103
FERNADE, WA 98248
(360) 714-8180
(360) 393-4579

**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

**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

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**200138**
**CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN**
1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-2164
WWW.CCSWW.ORG

**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

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**200336**
**COMPASS HEALTH - BELLINGHAM**
1216 BAY STREET
BELLINGHAM, WA 98225
(360) 752-4545
WWW.COMPASSHEALTH.ORG

**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

---

**DYLAN BRASHEAR**
ADMINISTRATOR

**CARI JONES**
CLINICAL SUPERVISOR

**DONNA WELLS**
AGENCY DIRECTOR

**WILL RICE**
REGIONAL CHIEF OF OPERATIONS

**KATHY MCNAUGHTON**
REGIONAL CLINICAL DIRECTOR

**ANASTASIA ALLES**
CHIEF OPERATING OFFICER

**ERIN WELLS**
CLINICAL SUPERVISOR
### WHATCOM

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

#### CERTIFIED SERVICES

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<th>200178</th>
<th>COMPASS HEALTH - WHATCOM COUNTY MCLEOD</th>
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<td>3645 EAST MCLEOD ROAD</td>
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<tr>
<td>BELLINGHAM, WA 98226</td>
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<tr>
<td>(360) 676-2220</td>
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<tr>
<td><a href="http://WWW.COMPASSHEALTH.ORG">WWW.COMPASSHEALTH.ORG</a></td>
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<td>ANASTASIA ALLES</td>
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#### MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

#### CERTIFIED SERVICES

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<th>200179</th>
<th>COMPASS HEALTH - WHATCOM TRIAGE CENTER</th>
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<tr>
<td>BELLINGHAM, WA 98226</td>
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<tr>
<td>(425) 349-6700</td>
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<tr>
<td><a href="http://WWW.COMPASSHEALTH.ORG">WWW.COMPASSHEALTH.ORG</a></td>
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<td>CHRIS STARERS-FOOTE</td>
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#### MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

#### CERTIFIED SERVICES

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<tr>
<td>BELLINGHAM, WA 98225</td>
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</tr>
<tr>
<td>(360) 671-3277</td>
<td></td>
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<tr>
<td>JOHN CHAMBERS</td>
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<td>ADMINISTRATOR</td>
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#### MAILING ADDRESS
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225

#### CERTIFIED SERVICES

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<td>(360) 676-2150</td>
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<td>DAWN WILLIAMS</td>
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<td>PROGRAM ADMINISTRATOR</td>
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<td>BRYAN SMITH</td>
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#### CONTACT COUNSELING
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225
(360) 671-3277

#### SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
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
BELLEINGHAM, WA 98225
(360) 930-6063
(360) 746-4092
CONTACTUS@ENDLESSPOSTENTIALLLC.COM
WWW.ENDLESSPOTENTIALLLC.COM

MAILING ADDRESS
2110 IRON STREET
BELLEINGHAM, WA 98225

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

167100
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- MAIN
609 NORTHSHORE DRIVE
BELLEINGHAM, WA 98226
(360) 676-6000

MAILING ADDRESS
609 NORTHSHORE DRIVE
BELLEINGHAM, 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
BELLEINGHAM, WA 98226
(360) 676-6000

MAILING ADDRESS
609 NORTHSHORE DR
BELLEINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

200441
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER
- SUNSET DUPLEX
1727 EAST SUNSET DRIVE
BELLEINGHAM, WA 98226
(360) 676-6000
KAY.BURBIDGE@LWRTC.ORG
WWW.LWRTC.ORG

MAILING ADDRESS
609 NORTHSHORE DR
BELLEINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

022700
LUMMI COUNSELING SERVICES
2616 KWINA ROAD
BELLEINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

MAILING ADDRESS
2616 KWINA ROAD
BELLEINGHAM, WA 98226

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT

ROBYN NEWBERRY
OWNER

JENNY BILLINGS
CEO
SUSAN CAVANAUGH
CLINICAL SUPERVISOR

JENNY BILLINGS
CEO
TAWNA THOMAS
MH CLINICAL SUPERVISOR

ROSALIE SCOTT
PROGRAM MANAGER ADMINISTRATOR
HANK WHITTLESEY
CLINICAL SUPERVISOR
WHATCOM

MAILING ADDRESS
2616 KWINA ROAD
BELLINGHAM, WA 98226

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

023000
NOOKSACK TRIBE'S GENESIS II
6750 MISSION ROAD
EVERSON, WA 98247
(360) 966-7704
ANNETTE SOLOMON
ADMINISTRATOR

MAILING ADDRESS
PO BOX 157
DEMING, WA 98244

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

200456
NORTHWEST REGIONAL COUNCIL
600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-6749
(800) 585-6749
ANDEREA@DSHS.WA.GOV
WWW.NWRCWA.ORG
DAN MURPHY
EXECUTIVE DIRECTOR
ROSANN MADSEN PAULEY
QA, BH & CARE MANAGEMENT SUPERVISOR

MAILING ADDRESS
600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225

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

200255
PACIFIC NORTHWEST AUTISM
4370 CORDATA PARKWAY
BELLINGHAM, WA 98226
(360) 348-6414
PACIFICNORTHWESTAUTISM@GMAIL.COM
WWW.PACIFICNORTHWESTAUTISM.COM
HEATHER DORN-DEASY
DIRECTOR

MAILING ADDRESS
4152 MERIDIAN ST #105-146
BELLINGHAM, WA 98226

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

200096
PEACEHEALTH ST. JOSEPH MEDICAL CENTER E&T
2901 SQUALICUM PARKWAY
BELLINGHAM, WA 98225
(360) 788-6408
KAREN BRAY
NURSE MANAGER BEHAVIORAL HEALTH

MAILING ADDRESS
BEHAVIORAL HEALTH UNIT
BELLINGHAM, WA 98228-2620
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<tr>
<td>052100</td>
<td>3350 AIRPORT WAY, BELLINGHAM, WA 98226</td>
<td>CLAUDIA D'ALLEGRI, VICE PRESIDENT OF BEHAVIORAL HEALTH</td>
</tr>
<tr>
<td></td>
<td>(360) 734-5458</td>
<td>CHARLES WATRAS, SUD CLINICAL SUPERVISOR</td>
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<tr>
<td></td>
<td><a href="mailto:INFO@SEAMARCHC.ORG">INFO@SEAMARCHC.ORG</a></td>
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<tr>
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<td>MAILING ADDRESS</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
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<td><strong>SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER</strong></td>
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<td>095800</td>
<td>1603 EAST ILLINOIS STREET, BELLINGHAM, WA 98226</td>
<td><strong>INTENSIVE INPATIENT</strong></td>
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<td>(360) 647-4266</td>
<td><strong>RECOVERY HOUSE</strong></td>
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<td>Mailing Address</td>
<td>8915 14TH AVE S, SEATTLE, WA 98108</td>
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<td><strong>BRIEF INTERVENTION TREATMENT</strong></td>
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<td>(360) 305-3275</td>
<td><strong>CASE MANAGEMENT</strong></td>
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<td>SENDANCENTER.COM</td>
<td><strong>FAMILY THERAPY</strong></td>
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<td>1616 CORNWALL AVENUE, SUITE 100, BELLINGHAM, WA 98225</td>
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<td><strong>SUNRISE SERVICES, INC. - BELLINGHAM</strong></td>
<td><strong>GROUP THERAPY</strong></td>
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<td><a href="http://WWW.SUNRISECOMMUNITYLIVING.COM">WWW.SUNRISECOMMUNITYLIVING.COM</a></td>
<td><strong>RECOVERY PEER SUPPORT</strong></td>
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CERTIFIED SERVICES

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

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

200073
UNITY CARE NORTHWEST - BELLINGHAM BRANCH
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225
(360) 676-6177
WWW.UNITYCARENW.ORG

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
(360) 676-6177
WWW.UNITYCARENW.ORG

RANDY POLIDAN
&@206;DIRECTOR OF BEHAVIORAL HEALTH
WHATCOM

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

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

131800
WATERFRONT COUNSELING IN BLAINE
228 CHERRY STREET
BLAINE, WA 98230
(360) 332-1000

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 INTEGRATIVE OUTPATIENT

119600
WHATCOM COMMUNITY DETOX
2030 DIVISION STREET
BELLINGHAM, WA 98226
(360) 676-2020

MAILING ADDRESS
2030 DIVISION ST
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

WHITMAN

075500
PALOUSE RECOVERY CENTER, LLC
1240 SOUTHEAST BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163
(509) 334-0718

MAILING ADDRESS
1240 SE BISHOP BLVD STE P
PULLMAN, WA 99163

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

013800
PALOUSE RIVER COUNSELING CENTER - MAIN
340 NORTHEAST MAPLE STREET
PULLMAN, WA 99163
(509) 334-1133

MAILING ADDRESS
1240 SE BISHOP BLVD STE P
PULLMAN, WA 99163

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

MIKE BERNEY
DIRECTOR
MARK ZEIGLER
CLINICAL DIRECTOR
WHITMAN

MAILING ADDRESS
340 NE MAPLE ST
PULLMAN, WA 99163

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

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

200256
PALOUSE RIVER COUNSELING CENTER - PULLMAN
400 NORTHEAST MAIDEN LANE
PULLMAN, WA 99163

MIKE BERNEY
DIRECTOR

MAILING ADDRESS
340 NE MAPLE STREET
PULLMAN, WA 99163

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

YAKIMA

121400
APPLE VALLEY COUNSELING SERVICE
611 WEST A STREET
YAKIMA, WA 98902
(509) 452-1000
(877) 452-2827

WILLIAM ELLIS
ADMINISTRATOR
CHARLOTTE MANTOOTH-SEIP
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 639
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

149800
BALANCE SOCIAL SERVICES, LLC
1400 SUMMITVIEW AVENUE, SUITE 106
YAKIMA, WA 98902
(509) 453-1702

JOE CERVANTES
ADMINISTRATOR
HECTOR MADRID
CLINICAL SUPERVISOR

MAILING ADDRESS
1400 SUMMITVIEW AVE, SUITE 106
YAKIMA, WA 98902-2902
<table>
<thead>
<tr>
<th>Code</th>
<th>Facility Name - City/State</th>
<th>Phone</th>
<th>Website</th>
<th>Certified Services</th>
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<tr>
<td>050300</td>
<td>BARTH CLINIC - YAKIMA MAIN</td>
<td>(509) 457-5653</td>
<td><a href="http://WWW.BARTHCLINIC.COM">WWW.BARTHCLINIC.COM</a></td>
<td>Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
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<tr>
<td>177100</td>
<td>BELIEVE IN RECOVERY, LLC - YAKIMA</td>
<td>(509) 317-2140</td>
<td></td>
<td>Substance Use Disorder Services: Alcohol and Drug Information School, DUI Assessment, Level I Outpatient, Level II Intensive Outpatient</td>
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<tr>
<td>200153</td>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA KERN ROAD</td>
<td>(509) 965-7100</td>
<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
<td>Mental Health Services: Brief Intervention Treatment, Case Management, Family Therapy, Group Therapy, Individual Treatment</td>
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<tr>
<td>200150</td>
<td>CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - YAKIMA KERN ROAD</td>
<td>(509) 965-7100</td>
<td><a href="http://WWW.CFCSYAKIMA.ORG">WWW.CFCSYAKIMA.ORG</a></td>
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<td>Location</td>
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<td>Contact Person(s)</td>
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<td>CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -</td>
<td>DARLENE DARNELL, PRESIDENT &amp; CEO</td>
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<td>YAKIMA MAIN</td>
<td>CYRUS BRICEL, ABA SUPERVISOR</td>
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<tr>
<td></td>
<td>5301 Tieton Drive, Suite C</td>
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<td>Yakima, WA 98908</td>
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049000  COMPREHENSIVE HEALTHCARE - DETOX & OUTPATIENT
505 SOUTH 4TH AVENUE
YAKIMA, WA 98902
(509) 248-1200

MIGUEL MESSINA
ADMINISTRATOR

MARCY TREAT
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  DUI ASSESSMENT
  INFORMATION AND CRISIS
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT
  SCREENING AND BRIEF INTERVENTION
  WITHDRAWAL MANAGEMENT
  YOUTH WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  CASE MANAGEMENT
  CRISIS EMERGENCY INVOLUNTARY DETENTION
  CRISIS OUTREACH
  CRISIS STABILIZATION
  CRISIS TELEPHONE SUPPORT
  DAY SUPPORT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  PSYCHIATRIC MEDICATION
  RECOVERY EMPLOYMENT SUPPORT
  RECOVERY MEDICATION SUPPORT
  RECOVERY PEER SUPPORT

020500  COMPREHENSIVE HEALTHCARE - MAIN
402 SOUTH 4TH AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.COMPHC.ORG

RON GENGLER
COO

MIGUEL MESSINA
VICE PRESIDENT/SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT
  OPIATE SUBSTITUTION TREATMENT
  SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  CASE MANAGEMENT
  CRISIS EMERGENCY INVOLUNTARY DETENTION
  CRISIS OUTREACH
  DAY SUPPORT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  PSYCHIATRIC MEDICATION
  RECOVERY EMPLOYMENT SUPPORT
  RECOVERY MEDICATION SUPPORT
  RECOVERY PEER SUPPORT
  RECOVERY SUPPORT WRAPAROUND FACILITATION

136300  COMPREHENSIVE HEALTHCARE - PATHWAYS
307 WEST WALNUT STREET
YAKIMA, WA 98902
(509) 453-4274
(509) 453-4301

SHAWNA STONEKING
DIRECTOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907
YAKIMA

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

125600
COMPREHENSIVE HEALTHCARE - SUNNYSIDE
1319 SAUL ROAD
SUNNYSIDE, WA 98944
(509) 837-2089

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

MIKE NORTON
ADMINISTRATOR
CINDY BROWN
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

146700
COMPREHENSIVE HEALTHCARE - TWO RIVERS
LANDING
504 SOUTH 3RD AVENUE
YAKIMA, WA 98902
(509) 469-3727
(509) 575-4084

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

TIMOTHY SHIELDS
DIRECTOR
BARBARA MYERS-MULL
SUD CLINICAL SUPERVISOR

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)
INPATIENT EVALUATION AND TREATMENT – CHILDREN

200399
COMPREHENSIVE HEALTHCARE - YAKIMA 2ND AVENUE
206 SOUTH 2ND AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.COMPHC.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
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014100  MERIT RESOURCE SERVICES - SUNNYSIDE
702 EAST FRANKLIN AVENUE  DAVID L. WILSON
SUNNYSIDE, WA 98944  EXECUTIVE DIRECTOR
(509) 837-7700  ANTHONY ESARZA
LORETTA@MERITRESOURCES.ORG  SUD CLINICAL SUPERVISOR
WWW.MERITRESOURCES.ORG

MAILING ADDRESS
PO BOX 997  SUNNYSIDE, WA 98944

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:  MENTAL HEALTH SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL  BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT  CASE MANAGEMENT
LEVEL I OUTPATIENT  FAMILY THERAPY
LEVEL II INTENSIVE OUTPATIENT  GROUP THERAPY
SCREENING AND BRIEF INTERVENTION  INDIVIDUAL TREATMENT

014101  MERIT RESOURCE SERVICES - TOPPENISH
321 WEST FIRST AVENUE  DAVID L. WILSON
TOPPENISH, WA 98948  EXECUTIVE DIRECTOR
(509) 865-5233  JILL B. STANTON
LORETTA@MERITRESOURCES.ORG  CLINICAL SUPERVISOR
WWW.MERITRESOURCES.ORG

MAILING ADDRESS
PO BOX 997  SUNNYSIDE, WA 98944

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:  MENTAL HEALTH SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL  BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT  CASE MANAGEMENT
LEVEL I OUTPATIENT  FAMILY THERAPY
LEVEL II INTENSIVE OUTPATIENT  GROUP THERAPY
SCREENING AND BRIEF INTERVENTION  INDIVIDUAL TREATMENT

083200  MERIT RESOURCE SERVICES - WAPATO
312 WEST 2ND STREET  DAVID L. WILSON
WAPATO, WA 98951  EXECUTIVE DIRECTOR
(509) 877-7271  JILL B. STANTON
LORETTA@MERITRESOURCES.ORG  CLINICAL SUPERVISOR
WWW.MERITRESOURCES.ORG

MAILING ADDRESS
PO BOX 997  SUNNYSIDE, WA 98944

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:  MENTAL HEALTH SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL  BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT  CASE MANAGEMENT
LEVEL I OUTPATIENT  FAMILY THERAPY
LEVEL II INTENSIVE OUTPATIENT  GROUP THERAPY
SCREENING AND BRIEF INTERVENTION  INDIVIDUAL TREATMENT

107800  MERIT RESOURCE SERVICES - YAKIMA
315 NORTH 2ND STREET  DAVID L. WILSON
YAKIMA, WA 98901  EXECUTIVE DIRECTOR
(509) 469-9366  DAVID R. BURKETT
LORETTA@MERITRESOURCES.ORG  CLINICAL SUPERVISOR
WWW.MERITRESOURCES.ORG

MAILING ADDRESS
PO BOX 997  SUNNYSIDE, WA 98944

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:  MENTAL HEALTH SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL  BRIEF INTERVENTION TREATMENT
DUI ASSESSMENT  CASE MANAGEMENT
LEVEL I OUTPATIENT  FAMILY THERAPY
LEVEL II INTENSIVE OUTPATIENT  GROUP THERAPY
SCREENING AND BRIEF INTERVENTION  INDIVIDUAL TREATMENT
CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- SCREENING AND BRIEF INTERVENTION
MENTAL HEALTH SERVICES:
- BRIEF INTERVENTION TREATMENT
- CASE MANAGEMENT
- FAMILY THERAPY
- GROUP THERAPY
- INDIVIDUAL TREATMENT

014000
SUNDOWN M RANCH
2280 SR 821
SELAH, WA 98901
(509) 457-0990

MAILING ADDRESS
PO BOX 217
SELAH, WA 98942

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
- ALCOHOL AND DRUG INFORMATION SCHOOL
- DUI ASSESSMENT
- INTENSIVE INPATIENT
- LEVEL I OUTPATIENT
- LEVEL II INTENSIVE OUTPATIENT
- RECOVERY HOUSE
- WITHDRAWAL MANAGEMENT
- YOUTH RESIDENTIAL
- YOUTH WITHDRAWAL MANAGEMENT

152200
TRIUMPH TREATMENT SERVICES - BETH'S PLACE
608 SUPERIOR LANE
YAKIMA, WA 98902
(509) 853-4176
AVASQUEZ@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

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

MAILING ADDRESS
PO BOX 2849
YAKIMA, WA 98907-2849

WALLY LEE
CEO
TOM DAVIDSON
EXECUTIVE CLINICAL DIRECTOR (SUD CS)
<table>
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<tr>
<th>Address</th>
<th>Website</th>
<th>CEO</th>
<th>Clinical Supervisor</th>
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| 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:  
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 |

| 013901 TRIUMPH TREATMENT SERVICES - JAMES OLDHAM  
TREATMENT CENTER  
201 HIGHLAND DRIVE  
BUENA, WA 98921  
(509) 865-6705  
WWW.TRIUMPHTX.ORG | WALLY LEE  
CEO | |
| **MAILING ADDRESS**  
PO BOX 354  
BUENA, WA 98921 | | |
| | CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
INTENSIVE INPATIENT  
LONG-TERM RESIDENTIAL  
RECOVERY HOUSE |

| 013900 TRIUMPH TREATMENT SERVICES - MAIN  
120 SOUTH 3RD STREET  
YAKIMA, WA 98901  
(509) 248-1800  
CDAC@TRIUMPHTX.ORG  
WWW.TRIUMPHTX.ORG | WALLY LEE  
CEO | TOM DAVIDSON  
SUD CLINICAL SUPERVISOR |
| **MAILING ADDRESS**  
PO BOX 2849  
YAKIMA, WA 98907-2849 | | |
| | CERTIFIED SERVICES  
SUBSTANCE USE DISORDER SERVICES:  
ALCOHOL AND DRUG INFORMATION SCHOOL  
DUI ASSESSMENT  
LEVEL I OUTPATIENT  
LEVEL II INTENSIVE OUTPATIENT  
RECOVERY HOUSING SUPPORT  
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:  
PROBLEM & PATHOLOGICAL GAMBLING |
| | MENTAL HEALTH SERVICES:  
BRIEF INTERVENTION TREATMENT  
CASE MANAGEMENT  
FAMILY THERAPY  
GROUP THERAPY  
INDIVIDUAL TREATMENT |

| 013902 TRIUMPH TREATMENT SERVICES - RIEL HOUSE  
613 SUPERIOR LANE  
YAKIMA, WA 98902  
(509) 575-4810  
AVASQUEZ@TRIUMPHTX.ORG  
WWW.TRIUMPHTX.ORG | WALLY LEE  
CEO | TOM DAVIDSON  
EXECUTIVE CLINICAL DIRECTOR (SUD CS) |
MAILING ADDRESS
PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

107000
VETERANS ADMINISTRATION - YAKIMA SUBSTANCE ABUSE OUTREACH
310 NORTH 5TH AVENUE
YAKIMA, WA 98902
(509) 457-2736

MAILING ADDRESS
77 WAINWRIGHT DR (CD TRTMT UNIT)
WALLA WALLA, WA 99362

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

BOBI GOODSON
ADMINISTRATOR

MOUTH WIKMAN
SENIOR ADDICTION THERAPIST

014200
YAKAMA NATION TIINÁWIT PROGRAM
20 GUNNYON ROAD
TOPPENISH, WA 98948
(509) 865-5121

MAILING ADDRESS
PO BOX 367
TOPPENISH, WA 98948

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

ANITA MENDOZA
ADMINISTRATOR/PROGRAM DIRECTOR

ERIC JOHNSON
CLINICAL SUPERVISOR

200285
YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW
1000 WALLACE WAY
GRANDVIEW, WA 98930

MAILING ADDRESS
918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200286
YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH
510 WEST 1ST AVENUE
TOPPENISH, WA 98948

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

JANIS LUVAAS
ADMINISTRATOR

JANIS LUVAAS
ADMINISTRATOR
YAKIMA

MAILING ADDRESS
918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
  PSYCHIATRIC MEDICATION

---

050001
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
12TH AVENUE
307 SOUTH 12TH AVENUE, SUITE 4B
YAKIMA, WA 98902
(509) 575-8457

JANIS LUVAAS
ADMINISTRATOR
RUDOLFO (RUDY) RAMIREZ
CLINICAL SUPERVISOR

MAILING ADDRESS
307 S. 12TH AVE, STE B
YAKIMA, WA 98902

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
  DUI ASSESSMENT
  LEVEL I OUTPATIENT
  LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT

---

200284
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
KERN ROAD
3801 KERN ROAD
YAKIMA, WA 98902

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
918 EAST MEAD AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES
MENTAL HEALTH SERVICES:
  BRIEF INTERVENTION TREATMENT
  FAMILY THERAPY
  GROUP THERAPY
  INDIVIDUAL TREATMENT
  RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

---

200283
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA
MAIN
918 EAST MEAD AVENUE
YAKIMA, WA 98903

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS
918 EAST MEAD AVENUE
YAKIMA, WA 98903
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

YAKIMA VALLEY MEMORIAL HOSPITAL E&T
2811 Tieton Drive
Yakima, WA 98902

JOHN SEE
PSYCHIATRIC SERVICES, INPATIENT NURSE MANAGER

MAILING ADDRESS
2811 Tieton Drive
Yakima, WA 98902

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- INPATIENT EVALUATION AND TREATMENT - ADULT

AUTISM OUTREACH OF WASHINGTON, INC.
CONFIDENTIAL LOCATION
(619) 795-9925
INFO@AUTISMOUTREACHSOCAL.COM

PATRICK BUNT
PRESIDENT

ABIGAIL BUNT
EXECUTIVE DIRECTOR

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

PROTOCALL SERVICES, INC.
621 Southwest Alder Street, Suite 400
Portland, OR 97205

MAILING ADDRESS
621 SW Alder Street, Suite 400
Portland, OR 97205

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
- CRISIS TELEPHONE SUPPORT
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