

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

February 2018

Referrals to Behavioral Health Services and Crisis Intervention:

- [Washington Recovery Help Line](#): 1-866-789-1511
- [Teen Link](#): 1-866-833-6546
- [Substance Abuse and Mental Health Services Administration Treatment Services Locator](#) A federal government website with information for buprenorphine for opioid addiction, methadone treatment programs, suicide prevention lifeline, 24/7 treatment referral line, disaster distress helpline, and more.

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



ADAMS

000100 **ADAMS COUNTY INTEGRATED HEALTH CARE SERVICES - OTHELLO MAIN**
425 EAST MAIN STREET, SUITE 600
OTHELLO, WA 99344
(509) 488-4074
(509) 488-5611
CCS@CO.ADAMS.WA.US
WWW.CO.ADAMS.WA.US

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

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

VICKI GUSE
ADMINISTRATOR

GLORIA OCHOA
SUD CLINICAL SUPERVISOR

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

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

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

CERTIFIED SERVICES

VICKI GUSE
ADMINISTRATOR

AMANDA ZEPEDA
MH CLINICAL SUPERVISOR

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

ASOTIN

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

MAILING ADDRESS
900 7TH ST
CLARKSTON, WA 99403

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

ASOTIN

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

BENTON

060500

ACTION COUNSELING - KENNEWICK

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

ROBERT LACK
ADMINISTRATOR

MAILING ADDRESS

PO BOX 5697
KENNEWICK, WA 99336

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

044400

ADVOCATES FOR WELLNESS, LLC

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

ROBERT L. WILKINSON
ADMINISTRATIVE DIRECTOR

MAILING ADDRESS

120 VISTA WAY
KENNEWICK, WA 99336

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

200147

CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA - RICHLAND

2139 VAN GIESEN STREET
RICHLAND, WA 99354
(509) 965-7100
WWW.CFCSYAKIMA.ORG

DARLENE DARNELL
INTERIM PRESIDENT & CEO

MAILING ADDRESS

5301 TIETON DR STE C
YAKIMA, WA 98908

BENTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200155

CHILD ENRICHMENT CENTER - MAIN

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

SARAH HAWS-TAYLOR
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

042800

CHOICES AND CHANGES, INC.

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

WILLIAM DENNETT
ADMINISTRATOR

MAILING ADDRESS

1236 COLUMBIA PARK TRAIL
RICHLAND, WA 99352

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

131700

FIRST STEP COMMUNITY COUNSELING SERVICES, LLC

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

ALYSSA GOMEZ
PROGRAM DIRECTOR/ADMINISTRATOR

CLIFTON WATSON JR.
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

161300

IDEAL BALANCE - KENNEWICK

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

PENNY S. BELL
ADMINISTRATOR

NAKIA BECERA
CLINICAL SUPERVISOR

MAILING ADDRESS

8514 W GAGE BLVD, STE G
KENNEWICK, WA 99336

BENTON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

200236**LOURDES COUNSELING CENTER - CULLUM HOUSE**

1175 CARONDELET DRIVE
RICHLAND, WA 99354

JOHN SERLE
CEO

DANA OTIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DRIVE
RICHLAND, WA 99354

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200237**LOURDES COUNSELING CENTER - E&T**

1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO

DANA OATIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DRIVE
RICHLAND, 99354

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

200428**LOURDES COUNSELING CENTER - KENNEWICK**

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

JOHN SERLE
CEO

DANA OATIS
OUTPATIENT DIRECTOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT

025202**LOURDES COUNSELING CENTER - MAIN**

1175 CARONDELET DRIVE
RICHLAND, WA 99354
(509) 943-9104
(509) 943-7215
LOURDESHEALTH.NET

JOHN SERLE
CEO

DAVID LOWE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

BENTON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200188**LOURDES COUNSELING CENTER - TRIAGE**

1175 CARONDELET DRIVE
RICHLAND, 99354

JOHN SERLE
CEO

DANA OATIS
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DRIVE
RICHLAND, 99354

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

TRIAGE - INVOLUNTARY

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

3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336
(509) 735-6446
WWW.LCSNW.ORG
WWW.LCSNW.ORG

SHARON GENTRY
DISTRICT DIRECTOR

ROCHELLE BRUNSDON
MH CLINICAL SUPERVISOR

MAILING ADDRESS

3321 WEST KENNEWICK AVENUE, SUITE 150
KENNEWICK, WA 99336

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

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

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

SHARON GENTRY
DISTRICT DIRECTOR

ROCHELLE BRUNSDON
CLINICAL SUPERVISOR

MAILING ADDRESS

3321 W KENNEWICK AVE
KENNEWICK, WA 99336

BENTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200470

MERIT RESOURCE SERVICES - KENNEWICK

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

DAVID L. WILSON
EXECUTIVE DIRECTOR

ANTHONY ESPARZA, SR.
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200321

RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON

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

KATIE KLUTE
DIRECTOR

MARY CORLEY
CLINICAL SUPERVISOR

MAILING ADDRESS

1950 KEENE ROAD, BUILDING G
RICHLAND, WA 99352

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200397

RELIANCE HEALTH SYSTEMS - NEUROPSYCH PROGRAM

1446 SPAULDING PARK, SUITE 303
RICHLAND, WA 99352
(509) 420-5060
INFO@RELIANCEHEALTHSYSTEMS.COM
WWW.RELIANCEHEALTHSYSTEMS.COM

KISHORE SHM VARADA
CHAIRMAN/CEO

LINDA ROBB
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1446 SPAULDING PARK, SUITE 303
RICHLAND, WA 99352

BENTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

168900

RELiance HEALTH SYSTEMS - SALUS HEALTH

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

KISHORE SHM VARADA
CHAIRMAN/CEO

MINGHUA ZHU
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1445 SPAULDING PARK
RICHLAND, WA 99352

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

105200

SOMERSET COUNSELING CENTER, LLC

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

JAIME CARSON
EXECUTIVE DIRECTOR

GARY L. SOMDAHL
CLINICAL SUPERVISOR

MAILING ADDRESS

1305 MANSFIELD ST STE 6
RICHLAND, WA 99352

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

155200

TRI-CITIES COMMUNITY HEALTH - KENNEWICK

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

DELL ANDERSON
DIRECTOR

HECTOR BOBBY GUZMAN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1452
PASCO, WA 99301

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200253

TRI-CITIES COMMUNITY HEALTH - RICHLAND

829 GOETHALS DRIVE
RICHLAND, WA 99352

DELL ANDERSON
DIRECTOR

MAILING ADDRESS

829 GOETHALS DRIVE
RICHLAND, WA 99352

BENTON

CERTIFIED SERVICES

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

CHELAN

200445

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

DARLENE DARNELL
PRESIDENT & CEO

SHAWN DE LANCY
PROGRAM MANAGER

MAILING ADDRESS

145 S WORTHEN ST
WENATCHEE, WA 98801

CERTIFIED SERVICES

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

200342

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

DARLENE DARNELL
PRESIDENT & CEO

ERIC SKANSGAARD
DIRECTOR OF COMMUNITY INTEGRATION

MAILING ADDRESS

145 S WORTHEN ST
WENATCHEE, WA 98801

CERTIFIED SERVICES

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

200149

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

DARLENE DARNELL
PRESIDENT & CEO

LOUANN PIERCE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5301 TIETON DR
YAKIMA, WA 98908

CHELAN

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200065**CHILDREN'S HOME SOCIETY OF WASHINGTON - WENATCHEE**

1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801
(509) 663-0034
JANICA.LOCKHART@CHS-WA.ORG
WWW.CHILDRENSHOMESOCIETY.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

KARIN POTTER
CLINICAL MANAGER

MAILING ADDRESS

1014 WALLA WALLA AVENUE
WENATCHEE, WA 98801

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

151900**COLUMBIA COUNSELING 607, LLC**

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

CHRISTINE BELLAMY
OWNER/ADMINISTRATOR

ANDRA DARLINGTON
CLINICAL SUPERVISOR

MAILING ADDRESS

610 N MISSION ST # 200
WENATCHEE, WA 98801

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200161**COLUMBIA VALLEY COMMUNITY HEALTH - CHELAN**

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

CAROL DIEDE
COO

MARY MEGAN KAPPLER
THERAPIST II

MAILING ADDRESS

600 ORONDO AVE STE 1
WENATCHEE, WA 98801

CHELAN

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200159

COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE EASY WAY

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

CAROL DIEDE
COO

MARY MEGAN KAPPLER
THERAPIST II

MAILING ADDRESS

600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200158

COLUMBIA VALLEY COMMUNITY HEALTH - WENATCHEE MAIN

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

CAROL DIEDE
COO

MARY MEGAN KAPPLER
MH CLINICAL SUPERVISOR

MAILING ADDRESS

600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200020

CRH CHRISTOPHER HOUSE, LLC

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

KEVIN COLWELL
ADMINISTRATOR

ALLISON NYSTROM
CLINICAL SUPERVISOR

MAILING ADDRESS

100 S CLEVELAND AVE
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

157200

NEW HOPE RECOVERY, LLC

238 NORTH CHELAN AVENUE
WENATCHEE, WA 98801
(509) 293-7724

RAYMOND MORRIS REGAN
ADMINISTRATOR

YVONNE REGAN
CLINICAL SUPERVISOR

CHELAN

MAILING ADDRESS

238 N CHELAN AVE
WENATCHEE, WA 98801

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

145900**SHIPOWICK-SMITH COUNSELING & POSITIVE LIVING CENTER**

326 NORTH MILLER STREET
WENATCHEE, WA 98801
(509) 667-0679

MELISSA PAYNE
ADMINISTRATOR

WAYNE HERSEL
CLINICAL SUPERVISOR

MAILING ADDRESS

326 N MILLER ST
WENATCHEE, WA 98801

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

000600**THE CENTER FOR ALCOHOL AND DRUG TREATMENT**

327 OKANOGAN AVENUE
WENATCHEE, WA 98801
(509) 662-9673

LORETTA STOVER
EXECUTIVE DIRECTOR

CHRISTOPHER TIPPETT
CLINICAL DIRECTOR

MAILING ADDRESS

327 OKANOGAN AVE
WENATCHEE, WA 98801

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

004800**THE SANCTUARY AT THE LAKE**

503 EAST HIGHLAND AVENUE
CHELAN, WA 98816
(509) 682-8524
(509) 682-6108

JANE JEDWABNY
PROGRAM DIRECTOR

KERRY HOUSDEN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 908
CHELAN, WA 98816

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

CLALLAM

162400**CEDAR GROVE COUNSELING, INC. - FORKS**

494 SOUTH FORKS AVENUE
FORKS, WA 98331
(360) 374-2134

GILL ORR
ADMINISTRATOR

CLALLAM

MAILING ADDRESS

221 N RACE ST
PORT ANGELES, WA 98362

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

050500**CEDAR GROVE COUNSELING, INC. - PORT ANGELES**

221 NORTH RACE STREET
PORT ANGELES, WA 98362
(360) 452-2443

GILL ORR
DIRECTOR

MAILING ADDRESS

221 NORTH RACE STREET
PORT ANGELES, WA 98362

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

169400**DOC - CLALLAM BAY CORRECTIONS CENTER**

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

DAWN WILLIAMS
ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123
OLYMPIA, WA 98504-4112

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL II INTENSIVE OUTPATIENT

076700**DOC - OLYMPIC CORRECTIONS CENTER**

11235 HOH MAINLINE ROAD
FORKS, WA 98331
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

022600**KLALLAM COUNSELING SERVICES**

933 EAST 1ST STREET
PORT ANGELES, WA 98362
(360) 452-4432

ANGELIQUE BERGLUND
TREATMENT MANAGER

MAILING ADDRESS

933 E 1ST ST
PORT ANGELES, WA 98362

CLALLAM

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

022800**MAKAH RECOVERY SERVICES**

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

GLEENDA BUTLER
INTERIM INTEGRATIVE HEALTH DIRECTOR

JESSIE PAQUE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 152
NEAH BAY, WA 98357-0152

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

086000**OLYMPIC PERSONAL GROWTH CENTER**

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

KRISTINA BULLINGTON
ADMINISTRATOR

ANDREW DALY
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 3175
SEQUIM, WA 98382

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200258**PENINSULA BEHAVIORAL HEALTH - ARLENE ENGEL**

HOME
138 WEST 2ND STREET
PORT ANGELES, WA 98362

WENDY SISK
CEO

MAILING ADDRESS

118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200261**PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY**

RESPIRE CENTER
112 EAST 8TH STREET
PORT ANGELES, WA 98362

WENDY SISK
CEO

CLALLAM

MAILING ADDRESS

118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200259**PENINSULA BEHAVIORAL HEALTH - HORIZON CENTER**

205 EAST 5TH STREET
PORT ANGELES, WA 98362

WENDY SISK
CEO

MAILING ADDRESS

118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

015000**PENINSULA BEHAVIORAL HEALTH - MAIN**

118 EAST 8TH STREET
PORT ANGELES, WA 98362
(360) 457-0431

WENDY SISK
CEO

STEPHANIE DILTZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

200260**PENINSULA BEHAVIORAL HEALTH - SEQUIM**

490 NORTH 5TH AVENUE
SEQUIM, WA 98382

WENDY SISK
CEO

CLALLAM

MAILING ADDRESS

118 E 8TH ST
PORT ANGELES, WA 98362

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

043600**QUILEUTE COUNSELING AND RECOVERY SERVICES**

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

ANDREW SHOGREN
HEALTH DIRECTOR

JANICE BARRERA
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 189
LA PUSH, WA 98350

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

155000**REFLECTIONS COUNSELING SERVICES GROUP**

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

G'NELL ASHLEY
ADMINISTRATOR

GLENDIA COLEMAN
PROGRAM DIRECTOR

MAILING ADDRESS

PO BOX 478
PORT ANGELES, WA 98362

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

158400**SPECIALTY SERVICES II, LLC**

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

LEAH SILVAS
ADMINISTRATOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

CLALLAM

177400

SPECIALTY SERVICES III, LLC

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

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
WITHDRAWAL MANAGEMENT

109800

TRILLIUM TREATMENT CENTER

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

LARRY SUTTON
ADMINISTRATOR

VICKIE SUTTON
CLINICAL SUPERVISOR

MAILING ADDRESS

528 W 8TH STREET
PORT ANGELES, WA 98362

CERTIFIED SERVICES

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

095600

TRUE STAR BEHAVIORAL HEALTH SERVICES

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

PETE PETERSON
JUVENILE SERVICES DIRECTOR

JULI LEONARD BUCHMANN
CLINICAL SUPERVISOR

MAILING ADDRESS

1912 W 18TH ST.
PORT ANGELES, WA 98363

CERTIFIED SERVICES

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

000800

WEST END OUTREACH SERVICES

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

TANYA MACNEIL
DIRECTOR

GARY WEBB
PROGRAM COORDINATOR

MAILING ADDRESS

530 BOGACHIEL WY
FORKS, WA 98331

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

CLARK

158100

AFFINITY COUNSELING AND TREATMENT

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

VANCOUVER, WA 98684
(360) 314-6507

WWW.AFFINITYCOUNSELING.NET

SHAHNA CREAGAN
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200344

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

2600 F STREET
VANCOUVER, WA 98663

(360) 448-7827

(888) 571-5088

APPOINTMENTS@APMENTALHEALTH.NET

WWW.APMENTALHEALTH.NET

SHEELA CHOPPALA-NESTOR
OWNER/ADMINISTRATOR

AMANDA RAGONESI, PH.D
CLINICAL SUPERVISOR

MAILING ADDRESS

2600 F STREET
VANCOUVER, WA 98663

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200530

BASICS NW, LLC - VANCOUVER

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

(360) 915-6868

PKLUS@BASICSNW.COM

WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

8282 28TH CT NE STE A
LACEY, WA 98516

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200146

CATHOLIC COMMUNITY SERVICES - VANCOUVER

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

(360) 567-2211

INFO@CCSWW.ORG

WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

DON KOENIG
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CLARK

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200438

CENTER FOR AUTISM AND RELATED DISORDERS

9901 NORTHEAST 7TH AVENUE, SUITE C-116
VANCOUVER, WA 98685
(360) 571-2432
(855) 345-2273
INFO@CENTERFORAUTISM.COM
WWW.CENTERFORAUTISM.COM

CANDICE POGGE
REGIONAL MANAGER

LAUREN MIZRAHI
CLINICAL MANAGER

MAILING ADDRESS

21600 OXNARD ST STE 1800
WOODLAND HILLS, CA 91367

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200369

CHILDREN'S CENTER - BATTLE GROUND

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

PAT BECKETT
EXECUTIVE DIRECTOR

PAULA DUNHAM
CLINICAL DIRECTOR

MAILING ADDRESS

13500 SE 7TH ST
VANCOUVER, WA 98683

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200026

CHILDREN'S CENTER - MAIN

13500 SOUTHEAST 7TH STREET
VANCOUVER, WA 98686
(360) 699-2244
MANAGEMENT@THECHILDRENSCENTER.ORG
WWW.THECHILDRENSCENTER.ORG

PAT BECKETT
EXECUTIVE DIRECTOR

MAILING ADDRESS

13500 SE 7TH STREET
VANCOUVER, WA 98686

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200071

CHILDREN'S HOME SOCIETY OF WASHINGTON - BATTLE GROUND

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

CLARK

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200068

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200069

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200066

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CLARK

CERTIFIED SERVICES

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

200526

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

DOUGLAS UY
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICES

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

200064

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

VANESSA GASTON
DEPARTMENT DIRECTOR

MAILING ADDRESS

PO BOX 5000
VANCOUVER, 98666-5000

CERTIFIED SERVICES

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

174800

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

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

KIM NUESSE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

CLARK

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

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

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

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

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

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

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

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CERTIFIED SERVICES

CRAIG PRIDEMORE
CEO

JEANNE HEHLEN
THERAPIST III - LEAD

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

089400 **COLUMBIA RIVER MENTAL HEALTH SERVICES - VANCOUVER MAIN**
6926 NORTHEAST FOURTH PLAIN BOULEVARD
VANCOUVER, WA 98661-7254
(360) 993-3000
(360) 993-3003

MAILING ADDRESS
PO BOX 1337
VANCOUVER, WA 98666-1337

CRAIG PRIDEMORE
CHIEF EXECUTIVE OFFICER

DOUG CHAPMAN
CLINICAL SUPERVISOR

CLARK

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:

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

068600**COLUMBIA TREATMENT SERVICES**

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

PAMELA PAPROCKI-SIMS
ADMINISTRATOR

TABITHA ZDUNICH
CDP

MAILING ADDRESS

7017 NE HIGHWAY 99 STE 114
VANCOUVER, WA 98665

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200302**COMMUNITY SERVICES NORTHWEST - 39TH STREET**

317 EAST 39TH STREET
VANCOUVER, WA 98663
(360) 397-8484

WWW.COMMUNITYSERVICESNW.ORG

JOHN "BUNK" MOREN
ADMINISTRATOR

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668-1845

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200139**COMMUNITY SERVICES NORTHWEST - BATTLE GROUND**

11117 NORTHEAST 189TH STREET
BATTLE GROUND, WA 98668
(360) 397-8484
(360) 397-8004

WWW.COMMUNITYSERVICESNW.ORG

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

MIKE MILLER
MH PROGRAM MANAGER

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

CLARK

056001

COMMUNITY SERVICES NORTHWEST - MAIN

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

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

JENNIFER HARDER
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668-1845

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200368

COMMUNITY SERVICES NORTHWEST - TOWN PLAZA

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

JOHN "BUNK" MOREN
EXECUTIVE DIRECTOR

MIKE MILLER
MH PROGRAM MANAGER

MAILING ADDRESS

PO BOX 1845
VANCOUVER, WA 98668

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200525

CONSUMER VOICES ARE BORN (CVAB) - REACH CENTER

1601 EAST FOURTH PLAIN BLVD, BLDG 17, SUITE A114
VANCOUVER, WA 98661
(360) 397-8050
(866) 944-2822
WWW.CVABONLINE.COM

BRAD BERRY
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 1707
VANCOUVER, WA 98668

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200133

CONSUMER VOICES ARE BORN (CVAB) - VAL OGDEN CENTER

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

BRAD BERRY
EXECUTIVE DIRECTOR

MACKENZIE DUNHAM
CLINICAL DIRECTOR

CLARK

MAILING ADDRESS

PO BOX 1707
VANCOUVER, WA 98668

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CLUBHOUSE
CRISIS PEER SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

128700**COWLITZ TRIBAL TREATMENT PROGRAM - VANCOUVER**

7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665
(360) 397-8228

SYBIL IVERSON
SUBSTANCE USE PROGRAM ADMINISTRATOR

CHELICIE KOLASKI
CLINICAL SUPERVISOR

MAILING ADDRESS

7700 NORTHEAST 26TH AVENUE
VANCOUVER, WA 98665

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200451**DAYBREAK YOUTH SERVICES - BRUSH PRAIRIE**

11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606
(360) 635-4120

WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

CHRISTINE GJESVOLD
MH CLINICAL SUPERVISOR

MAILING ADDRESS

11910 NORTHEAST 154TH STREET
BRUSH PRAIRIE, WA 98606

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

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

155400**DAYBREAK YOUTH SERVICES - VANCOUVER OUTPATIENT**

11818 SOUTHEAST MILL PLAIN BOULEVARD, SUITE 307
VANCOUVER, WA 98684
(360) 750-9635

WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

CHRISTINA GJESVOLD
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

960 E 3RD AVE
SPOKANE, WA 99202

CLARK

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

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

200466

DISCOVERY BEHAVIOR SOLUTIONS, LLC
CONFIDENTIAL LOCATION
(503) 462-5888
WWW.DISCOVERYBEHAVIORSOLUTIONS.COM

CARLA-MARIE MYERS
OWNER/CEO

MAILING ADDRESS**CERTIFIED SERVICES**

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

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

CLARK

CERTIFIED SERVICES

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

200415

FAMILY SOLUTIONS - MAIN STREET BRANCH

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

LISA CARPENTER
EXECUTIVE DIRECTOR

TRACY ARNEY
CLINICAL DIRECTOR

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

200074

INSTITUTE FOR FAMILY DEVELOPMENT - VANCOUVER

1313 NORTHEAST 134TH STREET, SUITE 220A
VANCOUVER, WA 98685

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES

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

085000

KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER

12607 EAST MILL PLAIN BOULEVARD
VANCOUVER, WA 98684-4098
(360) 418-6001

DAN P. RUSH
CLINICAL DIRECTOR

LINDA MADDEN
CLINICAL SUPERVISOR

CLARK

MAILING ADDRESS

12607 E MILL PLAIN BLVD
VANCOUVER, WA 98684-4098

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200306**LIFELINE CONNECTIONS - CAMAS**

329 NORTHEAST LECHNER STREET
CAMAS, WA 98607
(360) 397-8246
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

000900**LIFELINE CONNECTIONS - VANCOUVER 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

CLARK

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200086**LUTHERAN COMMUNITY SERVICES NORTHWEST - VANCOUVER**

3600 MAIN STREET
VANCOUVER, 98663

MAILING ADDRESS

3600 MAIN STREET
VANCOUVER, 98663

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200319**NAMI SOUTHWEST WASHINGTON - MAIN**

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

PEGGY MCCARTHY
EXECUTIVE DIRECTOR

JANET RAGAN, MA, LMHC
DIRECTOR OF BEHAVIORAL HEALTH SERVICES

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200094**PEACEHEALTH SOUTHWEST MEDICAL CENTER**

3400 MAIN STREET
VANCOUVER, WA 98663

VENNESSA LAKE
DIRECTOR SERVICE LINES

MAILING ADDRESS

3400 MAIN STREET
VANCOUVER, WA 98663

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

DAY SUPPORT
PSYCHIATRIC MEDICATION

CLARK

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

200337

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JENNIFER NAVARRO
MH CLINICAL SUPERVISOR

CLARK

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200309**SEA MAR BEHAVIORAL HEALTH - VANCOUVER****SALMON CREEK**

14508 NORTHEAST 20TH AVENUE
VANCOUVER, WA 98686
(360) 852-9070
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

BREANNA MOSKOVITZ
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

148800**SERENITY LANE - VANCOUVER**

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

CINDY NORDBERG
OUTPATIENT PROGRAM MANAGER

LARRY LOMBARD
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 8549
COBURG, OR 97408

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

002800**STARTING POINT, INC.**

801 GRAND BOULEVARD
VANCOUVER, WA 98661
(360) 696-2010

DAVID WAYNE COLBY
CLINICAL DIRECTOR

DAVE COLBY
CLINICAL SUPERVISOR

MAILING ADDRESS

801 GRAND BLVD
VANCOUVER, WA 98661

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

CLARK

200115

TCM TEAM

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

LISA CLAYTON
ADMINISTRATOR

CANDICE WEBB
TEAM LEAD

MAILING ADDRESS

PO BOX 2489
VANCOUVER, WA 98661

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200124

TELECARE - CLARK COUNTY E&T

1601 EAST 4TH PLAIN BOULEVARD
VANCOUVER, WA 98861

LISA CLAYTON
ADMINISTRATOR

MAILING ADDRESS

PO BOX 2489
VANCOUVER, WA 98668

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

177700

THE RECOVERY VILLAGE RIDGEFIELD

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

STEVEN HART
DIRECTOR OF OPERATIONS AND ADMIN

JOLENE FEENEY
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

112000

VANCOUVER TREATMENT SOLUTIONS

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

TAMRA KAWAMOTO
CLINIC DIRECTOR

SHELLY MORGAN
CLINICAL SUPERVISOR

MAILING ADDRESS

2009 NE 117TH ST STE 101
VANCOUVER, WA 98686

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

CLARK

001300 **VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)**
ST. JOHNS BOULEVARD & 4TH PLAIN BOULEVARD
VANCOUVER, WA 98661
(360) 690-1841

CHRIS ANDERSON
CO-ADMINISTRATOR/CLIN SUP

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

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

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

054100 **WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.**
7507 NORTHEAST 51ST STREET
VANCOUVER, WA 98662
(360) 906-1190
(503) 939-0350

DARYL E. QUICK
OWNER/ADMINISTRATOR

ROBERTA MORGAN
CD PROGRAM DIRECTOR

MAILING ADDRESS
7507 NE 51ST ST
VANCOUVER, WA 98662

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

COLUMBIA

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

DIMITA WARREN
CEO

PATRICK FLORES
SUD CLINICAL SUPERVISOR (INTERIM)

MAILING ADDRESS
221 E WASHINGTON ST
DAYTON, WA 99328

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

200521 **A FIRST PLACE - KELSO BRANCH**
210 ACADEMY STREET
KELSO, WA 98626
(360) 577-7442
WWW.AFIRSTPLACE.COM

CATHY LUDAHL
CEO

OLIVIA LOVELY
MH SUPERVISOR

MAILING ADDRESS
309 OAK ST
KELSO, WA 98626

COWLITZ

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

053500**A FIRST PLACE - MAIN**

309 OAK STREET
KELSO, WA 98626
(360) 577-7442
RPROBASCO@AFIRSTPLACE.COM
WWW.AFIRSTPLACE.COM

CATHY LUDAHL
ADMINISTRATOR/CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 1077
KELSO, WA 98626

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

116600**A NEW SAFEHAVEN**

1441 11TH AVENUE
LONGVIEW, WA 98632-3818
(360) 577-4340

DEBRA CASSERD-JOHNSON
ADMINISTRATOR

MAILING ADDRESS

1441 11TH AVENUE
LONGVIEW, WA 98632-3818

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

119300**AWAKENINGS, INC.**

404 WEST MAIN STREET
KELSO, WA 98632
(360) 423-2806

MELODY LORENZO
ADMINISTRATOR

GRACE PYON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

404 WEST MAIN STREET
KELSO, WA 98632

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

171400**BASICS NW, LLC - LONGVIEW**

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

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

COWLITZ

MAILING ADDRESS

1339 COMMERCE AVENUE, SUITE 204
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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

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

WWW.CHILDRENSHOMESOCITEY.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

MINDY DAVIS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 605
VANCOUVER, WA 98666

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

178200**CHOICES**

1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632
(360) 270-9874
LAURIR124@YAHOO.COM

LAURI ROWLAND
OWNER/ADMINISTRATOR

MAILING ADDRESS

1839 1ST AVENUE, SUITE C
LONGVIEW, WA 98632

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ASSESSMENT ONLY
DUI ASSESSMENT

200047**COLUMBIA WELLNESS - KELSO ACADEMY**

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

WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200504**COLUMBIA WELLNESS - KELSO PACIFIC**

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

WWW.COLUMBIAWELL.ORG

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

COWLITZ

MAILING ADDRESS

921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200042**COLUMBIA WELLNESS - LONGVIEW BRANCH**

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200043**COLUMBIA WELLNESS - LONGVIEW MAIN**

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

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

200046**COLUMBIA WELLNESS - WOODLAND**

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

DAVID MCCLAY
CEO

DEBRA PERKO
CHIEF CLINICAL OFFICER

COWLITZ

MAILING ADDRESS

921 14TH AVENUE
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200062**CORE HEALTH - MAIN**

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

FRANK MORRISON
CEO

KATIE ALLEN
MH CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 2394
LONGVIEW, WA 98632

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

015101**COWLITZ FAMILY HEALTH CENTER - BROADWAY
CAMPUS**

600 BROADWAY STREET
LONGVIEW, WA 98632
(360) 425-9600

DIAN COOPER
EXECUTIVE DIRECTOR

CRYSTAL RICH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 890
KELSO, WA 98626-0081

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

102200**COWLITZ FAMILY HEALTH CENTER - GRADE STREET
CAMPUS**

621 GRADE STREET
LONGVIEW, WA 98632
(360) 414-5508

DIAN COOPER
EXECUTIVE DIRECTOR

BRYAN KERR
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 890
KELSO, WA 98626-0081

COWLITZ

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

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

DIAN COOPER
EXECUTIVE DIRECTOR

RAMA MITCHELL
OPERATIONS/CAMPUS MANAGER

MAILING ADDRESS

PO BOX 890
KELSO, WA 98626-0081

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

120600**COWLITZ TRIBAL TREATMENT PROGRAM - MAIN**

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

SYBIL IVERSON
SUBSTANCE USE PROGRAM ADMINISTRATOR

DALLAS DE LA GRANGE
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 2429
LONGVIEW, WA 98632

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

078000**DOC - LONGVIEW WORK RELEASE**

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

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200511**GREAT RIVERS BEHAVIORAL HEALTH AGENCY -
LONGVIEW**

1338 COMMERCE AVENUE, SUITE 303
LONGVIEW, WA 98632
(360) 261-6930
INFO@GREATRIVERSBHO.ORG
WWW.GREATRIVERSBHO.ORG/BHA

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
CLINICAL SUPERVISOR

MAILING ADDRESS

1338 COMMERCE AVENUE, SUITE 303
LONGVIEW, WA 98632

COWLITZ

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

084900 KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE

- LONGVIEW/KELSO
1230 SEVENTH AVENUE
LONGVIEW, WA 98632
(360) 636-2400

DAN P. RUSH
CLINICAL DIRECTOR

THOMAS GATES
CLINICAL SUPERVISOR

MAILING ADDRESS

1230 SEVENTH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200537

KELSO TREATMENT SOLUTIONS

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

NICOLE SMITH
CLINIC DIRECTOR

DALLAS CARROL
CLINICAL SUPERVISOR

MAILING ADDRESS

305 PACIFIC AVENUE SOUTH, SUITE C
KELSO, WA 98626

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

200371

LOVE OVERWHELMING

304 COWLITZ WAY
KELSO, WA 98626
(360) 749-8056
ADMIN@LOVEOVERWHELMING.ORG
[WWW.LOVEOVERWHELMING.ORG](http://www.loveoverwhelming.org)

CHUCK HENDRICKSON
EXECUTIVE DIRECTOR

LAURA PATTERSON
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 1670
LONGVIEW, WA 98632

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT

200095

PEACEHEALTH ST. JOHN MEDICAL CENTER E&T

1615 DELAWARE STREET
LONGVIEW, WA 98632

KYLE RAHN
NETWORK DIRECTOR

COWLITZ

MAILING ADDRESS

600 BROADWAY STREET, ROOM #226
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

INPATIENT EVALUATION AND TREATMENT - ADULT

200374**SEA MAR BEHAVIORAL HEALTH - KELSO**

17010 ALLEN STREET
KELSO, WA 98626
(360) 261-7020
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

STEPHEN MAYNARD
PROGRAM MANAGER/CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200277**STRENGTHENING FOUNDATIONS LLC**

1338 COMMERCE AVENUE #208
LONGVIEW, WA 98632

MAILING ADDRESS

1104 D 15TH AVENUE #186
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

DOUGLAS

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

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

LIBBY HEIN
CHIEF PROGRAM OFFICER

KARIN POTTER
CHILD & FAMILY COUNSELING PROGRAM MANAGER

MAILING ADDRESS

1014 WALLA WALLA AVE
WENATCHEE, WA 98801

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

DOUGLAS

200160

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

CAROL DIEDE
COO

MARY MEGAN KAPPLER
THERAPIST II

MAILING ADDRESS

600 ORONDO AVENUE, SUITE 1
WENATCHEE, WA 98801

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

FERRY

126600

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

ALISON BALL
ADMINISTRATOR

CHARLENE SAM
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 150
NESPELEM, WA 99155

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

126800

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

ALISON BALL
ADMINISTRATOR

CHARLENE SAM
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 150
NESPELEM, WA 99155

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

001900

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

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1120
REPUBLIC, WA 99166

FERRY

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

FRANKLIN

149300

ASSESSMENT AND TREATMENT ASSOCIATES -

FRANKLIN COUNTY

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

STEVE UHRICH
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

158000

COMPREHENSIVE HEALTHCARE - PASCO

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

RON GENGLER
ADMINISTRATOR

ANDREA RAY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 99907

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

075800

DOC - COYOTE RIDGE CORRECTIONS CENTER

1301 NORTH EPHRATA AVENUE
CONNELL, WA 99326
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

FRANKLIN

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

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

524 EAST BRUNEAU AVENUE
KENNEWICK, WA 99336
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

177600**LOURDES COUNSELING CENTER - PASCO**

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

JOHN SERLE
CEO

DAVID LOWE
CLINICAL SUPERVISOR

MAILING ADDRESS

1175 CARONDELET DR
RICHLAND, WA 99354

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

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

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

DELL ANDERSON
DIRECTOR

HECTOR BOBBY GUZMAN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1452
PASCO, WA 99301

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

GARFIELD

014601**QUALITY BEHAVIORAL HEALTH - POMEROY**

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

CICILY ZORNES
EXECUTIVE DIRECTOR

DOROTHEA SKALICKY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

900 7TH ST
CLARKSTON, WA 99403

GARFIELD

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

GRANT

200455**AUTISM THERAPY SERVICES OF MOSES LAKE, LLC**

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

YVONNE REIGSTAD
EXECUTIVE DIRECTOR/ADMINISTRATOR

JESSIE HORWATH
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

MOSES LAKE, WA 98831-0214

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200212**GRANT INTEGRATED SERVICES - GRAND COULEE**

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

GAIL GOODWIN
ADMINISTRATOR

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200213**GRANT INTEGRATED SERVICES - MATTAWA**

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

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

GRANT

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

002200

GRANT INTEGRATED SERVICES - MOSES LAKE MAIN

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

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

NOEMI GARCIA
SUD MANAGER

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200214

GRANT INTEGRATED SERVICES - QUINCY

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

GAIL GOODWIN
ADMINISTRATOR

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

GRANT

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

MAILING ADDRESS
PO BOX 1057
MOSES LAKE, WA 98837

CERTIFIED SERVICES

GAIL GOODWIN
DIRECTOR OF MANAGEMENT SERVICES

LISA CORDOVA
DIRECTOR OF CLINICAL SERVICES

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

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

MAILING ADDRESS
PO BOX 111297
TACOMA, WA 98411

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

ANDREW TATUM
ADMINISTRATOR

ROBERT "JIM" LAGERQUIST
PROGRAM MANAGER

GRAYS HARBOR

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

MAILING ADDRESS
PO BOX 1077
KELSO, WA 98626

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

CATHY LUDAHL
CEO/CLINICAL DIRECTOR

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

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

BETTY KASSUHN
ADMINISTRATOR

GRAYS HARBOR

MAILING ADDRESS

914 EAST WISHKAH STREET #B
ABERDEEN, WA 98520

CERTIFIED SERVICESSUBSTANCE 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

LAURIE TEBO
CEO

MAILING ADDRESS

3857 MARTIN WAY E
OLYMPIA, WA 98506

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200032**BEHAVIORAL HEALTH RESOURCES - HOQUIAM**

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

LAURIE TEBO
CEO

MAILING ADDRESS

3857 MARTIN WAY E
OLYMPIA, 98506

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200396**CATHOLIC COMMUNITY SERVICES - ABERDEEN STATE STREET**

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

DENNY HUNTHAUSEN
DIRECTOR

GARY SANDWICK
CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

GRAYS HARBOR

200350 **CATHOLIC COMMUNITY SERVICES - ABERDEEN**
WISHKAH STREET
224 EAST WISHKAH STREET
ABERDEEN, WA 98520
(888) 322-7156
HEIDIW@CCSWW.ORG
WWW.CCSWW.ORG/FAMILYPRESERVATION

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR

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

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

MAILING ADDRESS
921 14TH AVE
LONGVIEW, WA 98632

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY

DAVID MCCLAY
CEO

DEBRA PERKO
MH CLINICAL SUPERVISOR

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

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

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

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

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

MOLLY CARNEY
EXECUTIVE DIRECTOR

SHANNON LINHOFF
CLINICAL SUPERVISOR

GRAYS HARBOR

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

200510**GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM**

3033-B INGRAM STREET
HOQUIAM, WA 98550
(360) 261-6930
(855) 303-4834
INFO@GREATRIVERSBHO.ORG
WWW.GREATRIVERSBHO.ORG/BHA

MAILING ADDRESS

3033-B INGRAM STREET
HOQUIAM, WA 98550

CERTIFIED SERVICES

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:

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

002500**HARBORCREST BEHAVIORAL HEALTH**

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

MAILING ADDRESS

1006 NORTH H ST
ABERDEEN, WA 98520

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

WILLIAM BONNES
DIRECTOR

ANGELA BRUMFIELD-LEAKS
CLINICAL SUPERVISOR

200484**LIFELINE CONNECTIONS - ABERDEEN**

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

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

GRAYS HARBOR

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

074000**NORTHWEST INDIAN TREATMENT CENTER**

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

STEPHANIE TOMPKINS
DIRECTOR

MICHAEL TISDALE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 477
ELMA, WA 98541

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

004500**QUINULT INDIAN NATION**

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

DAN OVERTON
BEHAVIORAL HEALTH MANAGER

ERNIE SANCHEZ
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 189
TAHOLA, WA 98587

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

137000**SEA MAR BEHAVIORAL HEALTH - ABERDEEN**

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200343**SEA MAR BEHAVIORAL HEALTH - ELMA**

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JODI TAYLOR
CLINICAL SUPERVISOR

GRAYS HARBOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

012701**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.
- ABERDEEN**

114 NORTH PARK STREET
ABERDEEN, WA 98520
(360) 533-4997

ANDREW TATUM
ADMINISTRATOR

BOBETTE WEBBER
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

096600**TRUE NORTH-ESD 113 - GRAYS HARBOR**

1700 CHERRY STREET
ABERDEEN, WA 98520
(360) 209-5420

ERIN RIFFE
ADMINISTRATOR

KATIE CUTSHAW
CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DRIVE SW
TUMWATER, WA 98512

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

009600**TSAPOWUM CHEHALIS TRIBAL BEHAVIORAL HEALTH**

420 HOWANUT ROAD
OAKVILLE, WA 98568
(360) 709-1733

CHARLENE ABRAHAMSON
DIRECTOR OF BEHAVIORAL HEALTH

MAILING ADDRESS

PO BOX 508
OAKVILLE, WA 98568

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

ISLAND

200465

COMPASS HEALTH - COUPEVILLE

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LEWIS (LOU) COX
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200224

COMPASS HEALTH - HARBOR STATION

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL MANAGER

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

086200

ISLAND ASSESSMENT & COUNSELING CENTER, INC. -

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

AMY HOFEDITZ
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

200233

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

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

STACEY HOTTER-KNIGHT
PRESIDENT

ADMIN@LEAPSANDBEYOND.COM

WWW.LEAPSANDBEYOND.COM

MAILING ADDRESS

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

ISLAND

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200345

L.E.A.P.S. AND BEYOND, INC. - OAK HARBOR BRANCH

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

STACEY HOTTER KNIGHT
PRESIDENT

MAILING ADDRESS

231 SE BARRINGTON DR STE 203
OAK HARBOR, WA 98277

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

DAY SUPPORT
INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200346

L.E.A.P.S. AND BEYOND, INC. - PORT ORCHARD

1730 POTTERY AVENUE, SUITE 100
PORT ORCHARD, WA 98366
(360) 240-0022
ADMIN@LEAPSANDBEYOND.COM
WWW.LEAPSANDBEYOND.COM

STACEY HOTTER KNIGHT
PRESIDENT

MAILING ADDRESS

231 SE BARRINGTON DR STE 203
OAK HARBOR, WA 98277

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

168300

NAVAL HOSPITAL SUBSTANCE ABUSE AND REHABILITATION PROGRAM (SARP)

3475 NORTH SARATOGA STREET R-52
OAK HARBOR, WA 98278
(360) 257-2394

STEVEN DAGGETT
ADMINISTRATOR/CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

163100

SEA MAR BEHAVIORAL HEALTH - OAK HARBOR

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

OSCAR RIVERA
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

ISLAND

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200380

SUNRISE SERVICES, INC. - COUPEVILLE

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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200383

SUNRISE SERVICES, INC. - OAK HARBOR

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

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

JEFFERSON

151100

BELIEVE IN RECOVERY, LLC - PORT TOWNSEND MAIN

211 TAYLOR STREET, SUITES 20 & 21
PORT TOWNSEND, WA 98368
(360) 385-1258

GABRHEA CAUDILL
ADMINISTRATOR

VINCENT MARQUIS
CLINICAL SUPERVISOR

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

JEFFERSON

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

MAILING ADDRESS
PO BOX 565
PORT TOWNSEND, WA 98368

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

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

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

MAILING ADDRESS
PO BOX 102
PORT TOWNSEND, WA 98368

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

CIHAN BEHLIVAN
EXECUTIVE DIRECTOR

KRIS LEE KAMPF
CLINICAL SUPERVISOR

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

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

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

TERESA WIRTH
ADMINISTRATOR

GLEEFORD KESSLER, JR.
PRESIDENT/CEO

KING

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

JAMES LAWRENCE
OWNER/ADMINISTRATOR

KING

MAILING ADDRESS

235 SW 153RD STREET
BURIEN, WA 98166

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

044000**A POSITIVE ALTERNATIVE, INC.**

4649 SUNNYSIDE AVENUE N, SUITE 200
SEATTLE, WA 98103
(206) 547-1955

CATHERINE TRESTRAIL
ADMINISTRATOR

AMY CONDON
CLINICAL SUPERVISOR

MAILING ADDRESS

4649 SUNNYSIDE AVE N, STE 200
SEATTLE, WA 98103

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

150100**A RENEWAL CENTER, LLC**

401 OLYMPIA AVENUE NE, SUITES 318 & AMP; 320
RENTON, WA 98056
(425) 227-0447
(206) 779-5805

DONNA WHITMIRE
ADMINISTRATOR

MAILING ADDRESS

533 REDMOND PL NE
RENTON, WA 98056

CERTIFIED SERVICESPROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200427**ADVANCED CREATIVE TREATMENT, INC.**

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

LINDSAY MORSE
ADMINISTRATOR

ALEX CASTILLO
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

10904 NE 39TH PL
BELLEVUE, WA 98004

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

041900**ALPHA RECOVERY CHOICES**

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

JEANNE POURROY-CARTER
ADMINISTRATOR

KING

MAILING ADDRESS

10614 BEARDSLEE BLVD STE D
BOTHELL, WA 98011

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

122500**ALTERNATIVE COUNSELING - KENT**

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

DWAYNE BROWN
ADMINISTRATOR

MAILING ADDRESS

19435 W VALLEY HWY S-109
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

019800**ALTERNATIVES, INC.**

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

JOSEPH WOLFE
DIRECTOR/ADMINISTRATOR

CRISTY CALDWELL
CLINICAL DIRECTOR

MAILING ADDRESS

3123 EASTLAKE AVENUE EAST, SUITE 100
SEATTLE, WA 98102

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

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

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200002**ANNARA COUNSELING SERVICES**

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

LYNN COLEMAN
EXECUTIVE DIRECTOR

SHERICE ARNOLD-ARRINGTON
MH CLINICAL SUPERVISOR

KING

MAILING ADDRESS

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

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

156400**ANTIOCH COUNSELING AND TREATMENT SERVICES**

12316 134TH COURT NE
REDMOND, WA 98052
(425) 284-2652
(425) 985-8770

ROBERT RIGG
EXECUTIVE DIRECTOR

MAILING ADDRESS

12316 134TH CT NE
REDMOND, WA 98052

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

200450**APPLE CONSULTING - BOTHELL**

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)

200004**APPLE CONSULTING - MAIN**

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

CHRIS JONES
DIRECTOR OF OPERATIONS

DR. ALLISON APPLE
EXECUTIVE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200422**ARK COUNSELING AND TREATMENT SERVICES**

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

ALVIN L. CURRIE
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 47055
SEATTLE, WA 98166

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

120700**ARMSTRONG ALCOHOL AND DRUG RECOVERY, LLC**

625 STRANDER BOULEVARD, SUITE C
TUKWILA, WA 98188
(206) 575-1958

JAMES ARMSTRONG
PROGRAM ADMINISTRATOR

MAILING ADDRESS

625 STRANDER BLVD STE C
TUKWILA, WA 98188

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

100100**ASIAN COUNSELING AND REFERRAL SERVICE**

3639 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98144
(206) 695-7600

VICTOR LOO
DIRECTOR OF RECOVERY SERVICES

HARUMI HASHIMOTO
CLINICAL SUPERVISOR, REC SVCS

MAILING ADDRESS

3639 MARTIN LUTHER KING JR WY S
SEATTLE, WA 98144

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

118700**ASSESSMENT AND TREATMENT ASSOCIATES -****BELLEVUE MAIN**

13353 BEL-RED ROAD, SUITE 101
BELLEVUE, WA 98005
(877) 479-5993

STEVE UHRICH
EXECUTIVE DIRECTOR

SHARON FENTON
CLINICAL SUPERVISOR

MAILING ADDRESS

13353 BEL-RED RD STE 101
BELLEVUE, WA 98005

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

KING

081600

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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

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

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

149400

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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

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

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

092200

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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

MAILING ADDRESS
2111 N NORTHGATE WAY STE 212
SEATTLE, WA 98133

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

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

045600

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

MICHAEL AIBINDER
DIRECTOR OF OPERATIONS

RYAN NICHOLS
DIRECTOR OF CHEMICAL DEPENDENCY

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

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200027**ATLANTIC STREET CENTER**

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

HERERI CONTRERAS
PROGRAM DIRECTOR

MAILING ADDRESS

2103 SOUTH ATLANTIC STREET
SEATTLE, WA 98144

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200035**AUTISM SPECTRUM THERAPIES**

12729 NORTHUP WAY, SUITE 23
BELLEVUE, WA 98005
(866) 727-8274
WWW.AUTISMETHERAPIES.COM

ROBERT HAUPT
VICE PRESIDENT

SHANA HUIZENGA
CLINICAL DIRECTOR

MAILING ADDRESS

2550 N HOLLYWOOD WAY #102
BURBANK, CA 91505

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

101900**AVALON CENTER**

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

DIANNE HUTCHENSON
ADMINISTRATOR

OLIVETTE FOSTER
CLINICAL SUPERVISOR

MAILING ADDRESS

6957 CALIFORNIA AVE SW
SEATTLE, WA 98136

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT

200082**BASICS NW, LLC - BELLEVUE**

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

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

KING

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

MAILING ADDRESS
12844 MILITARY RD S
TUKWILA, WA 98168

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

MICHAEL URADNIK
CEO/ADMINISTRATOR

DAN LABUDA
SUD CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

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

MAILING ADDRESS
711 S 25TH ST STE B
TACOMA, WA 98405

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

JOHN CASTEELE
EXECUTIVE DIRECTOR

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

MAILING ADDRESS
1001 N J STREET
TACOMA, WA 98403

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

MARY STONE SMITH
VICE PRESIDENT

MATTHEW WILSON
SUD CLINICAL SUPERVISOR

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

MARY STONE SMITH
VICE PRESIDENT

KING

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200502**CENTER FOR AUTISM REHABILITATION & EVALUATION, LLC**

6624 SOUTH 196TH STREET, SUITE U107
KENT, WA 98032
(253) 246-7513
(425) 902-6248
ROBERTS@ABATHERAPYCARE.COM
WWW.AUTISMOTHERAPYCARE.COM

CHRISTOPHER ROBERTS
ADMINISTRATOR/OWNER

MAILING ADDRESS

6624 SOUTH 196TH STREET, SUITE U107
KENT, WA 98032

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

015900**CENTER FOR HUMAN SERVICES - MAIN**

17018 15TH AVENUE NE
SHORELINE, WA 98155-5126
(206) 362-7282

BERATTA GOMILLION
EXECUTIVE DIRECTOR

RAMONA K. GRAHAM
SUBSTANCE ABUSE DEPT. DIRECTOR

MAILING ADDRESS

17018 15TH AVENUE NE
SHORELINE, WA 98155-5126

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

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

200154**CENTER FOR HUMAN SERVICES - SHORELINE**

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

BERATTA GOMILLION
EXECUTIVE DIRECTOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

KING

200039

CHILDHAVEN - ELI CREEKMORE MEMORIAL

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

MARIA CHAVEZ WILCOX
PRESIDENT

TODD GEORGE
SR. PROGRAM DIRECTOR

MAILING ADDRESS

316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200038

CHILDHAVEN - MAIN

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

MARIA CHAVEZ WILCOX
PRESIDENT

TODD GEORGE
SR. PROGRAM DIRECTOR

MAILING ADDRESS

316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200040

CHILDHAVEN - PATRICK L. GOGERTY

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

MARIA CHAVEZ WILCOX
PRESIDENT

TODD GEORGE
SR. PROGRAM DIRECTOR

MAILING ADDRESS

316 BROADWAY
SEATTLE, WA 98122

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

072100

COASTAL TREATMENT SERVICES, INC. - MAIN

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

MARGARET FERRIS
DIRECTOR/CEO

MAILING ADDRESS

BELLEGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT

200262**COLEMAN'S FAMILY SERVICES LLC**

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

ALICE COLEMAN
ADMINISTRATOR

MICHELLE BYRD
CLINICAL SUPERVISOR

MAILING ADDRESS

15 SOUTH GRADY WAY, SUITE 305
RENTON, WA 98057

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

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 SERVICESMENTAL 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 GRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

11000 LAKE CITY WAY NE
SEATTLE, WA 98125

CERTIFIED SERVICESSUBSTANCE 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

KING

200293

COMMUNITY PSYCHIATRIC CLINIC - CASCADE HALL

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

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

MAILING ADDRESS

11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200292

COMMUNITY PSYCHIATRIC CLINIC - EL REY

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

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CHIEF EXECUTIVE OFFICER

LIZ QUAKENBUSH
HOUSING & RESIDENTIAL SERVICES DIVISION DIRECT

MAILING ADDRESS

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

117700

COMMUNITY PSYCHIATRIC CLINIC - LAKE CITY MAIN

11000 LAKE CITY WAY NORTHEAST, SUITE 200
SEATTLE, WA 98125
(206) 461-3614
SLOPEZ@CPCWA.ORG
WWW.CPCWA.ORG

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CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

11000 LAKE CITY WAY NE STE 200
SEATTLE, WA 98125

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

KING

170800

COMMUNITY PSYCHIATRIC CLINIC - MERIDIAN

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

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD PROGRAM MANAGER

MAILING ADDRESS

11000 LAKE CITY WAY NE
SEATTLE, WA 98125

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

087400

COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE

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

DOUG CRANDALL
CHIEF EXECUTIVE OFFICER

DAVID NEWMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

11000 LAKE CITY WAY NE
SEATTLE, WA 98125

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200366

CONNECTIONS BEHAVIOR PLANNING & INTERVENTION - KENT

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

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

MAILING ADDRESS

1003 7TH AVENUE
KIRKLAND, WA 98033

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

KING

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

CERTIFIED SERVICES

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

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

CERTIFIED SERVICES

SHANNON STARKWEATHER
OPERATIONS MANAGER

DR. PAUL MULLAN
SENIOR BCBA/OWNER

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.CONSEJOCOUNSELING.ORG

MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118

CERTIFIED SERVICES

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

TERESA VISPO-CUBA
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

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

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

MAILING ADDRESS
3808 S ANGELINE ST
SEATTLE, WA 98118

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

TERESA VISPO-CUBA
DEPUTY DIRECTOR OF INTEGRATED CLINICAL SERVICES

KING

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) 461-4880

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

MARCOS SAURI
CLINICAL SUPERVISOR

MAILING ADDRESS

3808 S ANGELINE
SEATTLE, WA 98118

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

KING

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

MAILING ADDRESS

12351 LAKE CITY WAY, SUITE 202
SEATTLE, WA 98125

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

077000

DOC - BISHOP LEWIS WORK RELEASE

703 8TH AVE
SEATTLE, WA 98104
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

KING

077200 **DOC - HELEN B. RATCLIFFE WORK RELEASE**
1531 13TH AVENUE SOUTH
SEATTLE, WA 98114
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

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

077300 **DOC - REYNOLDS WORK RELEASE**
410 4TH AVENUE
SEATTLE, WA 98104
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

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

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

125900 **DOORWAY TO RECOVERY - NORTH**
879 RAINIER AVENUE NORTH, SUITE A-103
RENTON, WA 98057
(206) 772-6260
(206) 772-6257

MELINDA BROUSSARD
ADMINISTRATOR

LESLIE THIEME
CLINICAL SUPERVISOR

MAILING ADDRESS
879 RAINIER AVE N, STE A-103
RENTON, WA 98057

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

200189 **DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER**
1600 SOUTH LANE STREET
SEATTLE, WA 98144
(206) 464-1570
INFO@DESC.ORG
WWW.DESC.ORG

DANIEL MALONE
EXECUTIVE DIRECTOR

GRAYDON ANDRUS
DIRECTOR OF CLINICAL PROGRAMS (MH CS)

MAILING ADDRESS
515 THIRD AVE
SEATTLE, WA 98104

KING

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

169200**DOWNTOWN EMERGENCY SERVICE CENTER - JAMES STREET**

216 JAMES STREET
SEATTLE, WA 98104
(206) 441-3041

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS

515 THIRD AVE
SEATTLE, WA 98104

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

097900**DOWNTOWN EMERGENCY SERVICE CENTER - MAIN**

515 THIRD AVENUE
SEATTLE, WA 98104
(206) 464-1570

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS

515 THIRD AVE
SEATTLE, WA 98104

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

169100**DOWNTOWN EMERGENCY SERVICE CENTER - WALL STREET**

222 WALL STREET, SUITE 100
SEATTLE, WA 98121
(206) 441-3041

DANIEL MALONE
EXECUTIVE DIRECTOR

JAIME (WALTER) MOSS
CD PROGRAM MANAGER

MAILING ADDRESS

515 THIRD AVE
SEATTLE, WA 98104

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

109700

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

LAURA HALFORD
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

037201

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

JILL WEINSTEIN
ADMINISTRATOR

PAUL HUNZIKER
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200191

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

MAILING ADDRESS

5436 232ND AVENUE SE
ISSAQUAH, WA 98029

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200048

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

LARA EFFLAND
EXECUTIVE CLINICAL DIRECTOR

MAILING ADDRESS

1231 116TH AVENUE NORTHEAST
BELLEVUE, WA 98004

KING

CERTIFIED SERVICES

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

200531

EATING RECOVERY CENTER OF WASHINGTON - SEATTLE

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

LARA EFFLAND
EXECUTIVE CLINICAL DIRECTOR

MAILING ADDRESS

1231 116TH AVE NE
BELLEVUE, WA 98004

CERTIFIED SERVICES

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

149600

EDGEWOOD SEATTLE ADDICTION SERVICES

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

COURTNEY STRONG
EXECUTIVE DIRECTOR

MAILING ADDRESS

1200 WESTLAKE AVENUE N, SUITE 508
SEATTLE, WA 98109

CERTIFIED SERVICES

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

200137

ENGAGE ABA LLC

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

LIZ BLUECHEL
DIRECTOR OF OPERATIONS

AIDEN VICKERS
OWNER/PROGRAM MANAGER

MAILING ADDRESS

CERTIFIED SERVICES

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

136100

EVERGREEN HEALTHCARE

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

LEAH JONES
CD SERVICES ADMINISTRATOR

TODD BELLER
CD CLINICAL SUPERVISOR

KING

MAILING ADDRESS

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

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200477**EVERGREEN TREATMENT SERVICES - REACH**

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

KELLEY CRAIG
REACH CO-DIRECTOR

TRICIA HOWE
REACH SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WAY S
SEATTLE, WA 98134

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

1412 SOUTHWEST 43RD STREET
RENTON, WA 98057
(425) 264-0750
WWW.EVERGREENTREATMENT.ORG

MOLLY CARNEY, PHD
EXECUTIVE DIRECTOR

SEAN SOTH
CLINICAL SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WAY S
SEATTLE, WA 98134

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

016300**EVERGREEN TREATMENT SERVICES - UNIT 1**

1700 AIRPORT WAY SOUTH
SEATTLE, WA 98134-1618
(206) 223-3644

MOLLY CARNEY
EXECUTIVE DIRECTOR

CAROL DAVIDSON
CLINICAL SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

016301**EVERGREEN TREATMENT SERVICES - UNIT 2**

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

MOLLY CARNEY
EXECUTIVE DIRECTOR

CAROL DAVIDSON
CLINICAL SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WAY S
SEATTLE, WA 98134-1618

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

101300**EVERGREEN TREATMENT SERVICES - UNIT 3**

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

MOLLY CARNEY
EXECUTIVE DIRECTOR

CAROL DAVIDSON
CLINICAL SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

OPIATE SUBSTITUTION TREATMENT

037000**EXODUS - YOUTH**

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

JAMIE BURTON
PROGRAM MANAGER

MELISSA HEPWORTH
CLINICAL SUPERVISOR

MAILING ADDRESS

33010 SE 99TH ST
SNOQUALMIE, WA 98065

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

118200**FAIRFAX BEHAVIORAL HEALTH - KIRKLAND ARTS**

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

DR. DEBBIE HOROWSKI
CLINICAL SERVICES DIRECTOR

ANTONIA MEJORADO
CD PROFESSIONAL LEAD

MAILING ADDRESS

10200 NE 132ND ST
KIRKLAND, WA 98034

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

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

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

RON ESCARDA
GROUP DIRECTOR NW REGION, CEO FAIRFAX HOSPITAL

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

MAILING ADDRESS

10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN

KING

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

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

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

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

KING

040901

FRIENDS OF YOUTH - MAIN

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

TERRY POTTMEYER
PRESIDENT & CEO

MARIE C. MACCOY
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12
ISSAQUAH, WA 98027-2914

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

170200

FRIENDS OF YOUTH - NORTH BEND

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

TERRY POTTMEYER
PRESIDENT & CEO

LAUREN CHRISTENSON
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12
ISSAQUAH, WA 98027

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200060

FULL LIFE CARE

2600 SOUTH WALKER STREET
SEATTLE, WA 98144
(206) 224-3746
WWW.FULLLIFECARE.ORG

NORA GIBSON
EXECUTIVE DIRECTOR

KRIS LAU
DIRECTOR

MAILING ADDRESS

2600 SOUTH WALKER STREET
SEATTLE, WA 98144

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

042400

FUTURE VISIONS PROGRAM, INC.

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

KAREN PARKER
PROGRAM COORDINATOR

KAREN GARVIN
CLINICAL MANAGER

MAILING ADDRESS

PO BOX 1980
AUBURN, WA 98071

CERTIFIED SERVICES

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

KING

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

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

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

BRIGITTE FOLZ
ADMINISTRATOR

ADRIANE TILLERY
CLINICAL SUPERVISOR

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

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

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

MAILING ADDRESS
325 9TH AVENUE
SEATTLE, WA 98104

CERTIFIED SERVICES

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

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

KAILEY FIEDLER
EXECUTIVE DIRECTOR

MAILING ADDRESS
12838 SE 40TH PLACE
BELLEVUE, WA 98006

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CLUBHOUSE

KING

159400

HOPE + HELP

230 AUBURN WAY SOUTH #1B & 2B
AUBURN, WA 98002
(253) 333-2328

GEORGE BRUMMELL
ADMINISTRATOR

CLAUDIA STEWARD
CLINICAL SUPERVISOR

MAILING ADDRESS

230 AUBURN WAY S #1B
AUBURN, WA 98002

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

178600

HOPE PLACE

3802 SOUTH OTHELLO STREET
SEATTLE, WA 98118
(206) 628-2008

JENNIFER MANLIEF
LEAD CASE MANAGER

DERYL DAVIS BELL
CLINICAL SUPERVISOR

MAILING ADDRESS

3802 S OTHELLO ST
SEATTLE, WA 98118

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

174700

HOTEL CALIFORNIA BY THE SEA

1601 114TH AVENUE SOUTHEAST
BELLEVUE, WA 98004
(800) 762-6717

WWW.HOTELCALIFORNIABYTHESEA.COM

GREG YANTZER
DIRECTOR OF OUTPATIENT SERVICES

DARREN BARRY
CLINICAL SUPERVISOR

MAILING ADDRESS

1601 114TH AVENUE SOUTHEAST
BELLEVUE, WA 98004

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200050

HUMANITY'S CHILDREN

451 SOUTHWEST 10TH STREET, #201
RENTON, WA 98057
(425) 429-0033

HERMANN BERLIN
DIRECTOR

RHODA BERLIN
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 75011
SEATTLE, WA 98175

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

KING

200051

IKRON CORPORATION GREATER SEATTLE - MAIN

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

LUDMILA MONICA NEGRILA
DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200220

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - BELLEVUE

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

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

JEN COLLADO
PROGRAM DIRECTOR

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200222

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE

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

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

DANETTE DARROW
PROGRAM DIRECTOR

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200077

INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY

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

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

KING

136000**INTEGRATIVE COUNSELING SERVICES**

701 NORTH 36TH STREET, SUITE 300
SEATTLE, WA 98103
(206) 216-5000

SCOTT REDING
ADMINISTRATOR

MAILING ADDRESS

701 N 36TH ST STE 300
SEATTLE, WA 98103

CERTIFIED SERVICES

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

004300**INTERCEPT ASSOCIATES**

30620 PACIFIC HIGHWAY SOUTH, SUITE 107
FEDERAL WAY, WA 98003
(253) 941-7555

NANCY STARK
DIRECTOR

ANNE NEARN
TREATMENT DIRECTOR

MAILING ADDRESS

30620 PACIFIC HWY S STE 107
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

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

129400**ISLAND ASSESSMENT & COUNSELING CENTER, INC. - SEATTLE**

4250 AURORA AVENUE NORTH, SUITE A106
SEATTLE, WA 98103
(206) 547-2171

AMY HOFEDITZ
ADMINISTRATOR

MAILING ADDRESS

4250 AURORA AVE N STE A106
SEATTLE, WA 98103

CERTIFIED SERVICES

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

103200**KENT TREATMENT SOLUTIONS**

21851 84TH AVE S, #101
KENT, WA 98032
(425) 687-7082

MICHAEL COURTOIS
CLINIC DIRECTOR

RAND JOHNSON
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

KING

016700

KENT YOUTH AND FAMILY SERVICES

232 2ND AVENUE SOUTH, SUITE 201
KENT, WA 98032
(253) 859-0300

MIKE HEINISCH
EXECUTIVE DIRECTOR

PAULA FREDERICK
DIRECTOR OF CLINICAL PROGRAMS

MAILING ADDRESS

232 2ND AVE S STE 201
KENT, WA 98032

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200226

KINDERING CENTER

16120 NORTHEAST 8TH STREET
BELLEVUE, WA 98008

MAILING ADDRESS

16120 NE 8TH STREET
BELLEVUE, WA 98008

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200227

KING COUNTY CRISIS & COMMITMENT SERVICES

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

KELLI NOMURA
KING COUNTY BHO ADMINISTRATOR

CHRISTINE PIATT
HOSPITAL PLACEMENT & DIVERSION SUPERVISOR

MAILING ADDRESS

401 5TH AVENUE, SUITE 400
SEATTLE, WA 98104

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
RECOVERY PEER SUPPORT

004404

KING COUNTY EMERGENCY SERVICE PATROL

1930 BOREN AVENUE
SEATTLE, WA 98121
(206) 205-1076
(206) 263-8961

DANIEL FLOYD
PROGRAM COORDINATOR

MAILING ADDRESS

1930 BOREN AVE
SEATTLE, WA 98121

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
EMERGENCY SERVICE PATROL

200228

KING COUNTY SEXUAL ASSAULT RESOURCE CENTER

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

DEANN YAMAMOTO
DEPUTY EXECUTIVE DIRECTOR

LARRAINE LYNCH
CLINICAL PROGRAM MANAGER

KING

MAILING ADDRESS

PO BOX 300
RENTON, WA 98057

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

155500**LA ESPERANZA HCS - BURIEN**

15405 1ST AVENUE SOUTH, SUITE 2
BURIEN, WA 98148
(206) 306-2690

ZOILA SARITAMA
ADMINISTRATOR

ALVIN CURRY
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

145500**LA FE - THE HOPE, LLC**

15 SOUTH GRADY WAY, SUITE 528
RENTON, WA 98057
(425) 793-9834

SONIA VARGAS
ADMINISTRATOR

ARMANDO H. VARGAS
CLINICAL SUPERVISOR

MAILING ADDRESS

15 S GRADY WY STE 436
RENTON, WA 98057

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

200232**LAKESIDE CENTER FOR AUTISM, LLC**

5150 VILLAGE PARK DRIVE SOUTHEAST
BELLEVUE, WA 98006
(425) 657-0620
INFO@I-CAN.CENTER
WWW.I-CAN.CENTER

DAN STACHELSKI
PRESIDENT/CEO

MAILING ADDRESS

5150 VILLAGE PARK DRIVE SE
BELLEVUE, WA 98006

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

009404**LAKESIDE-MILAM RECOVERY CENTERS, INC. - AUBURN**

721 45TH STREET NE, SUITE C
AUBURN, WA 98002-1303
(253) 859-6436

PAULETTE HARRIS
ADMINISTRATOR

APRIL STERLING
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

035104**LAKESIDE-MILAM RECOVERY CENTERS, INC. -
ISSAQUAH**

300 NORTHEAST GILMAN BOULEVARD, SUITE 200
ISSAQUAH, WA 98027
(425) 392-8468

CALVIN WALKER
ADMINISTRATOR

TOBY PETERSON
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

009402**LAKESIDE-MILAM RECOVERY CENTERS, INC. -
KIRKLAND**

6725 116TH AVENUE NE, SUITE 110
KIRKLAND, WA 98033-8455
(425) 822-5095

LISA LIERLEY
ADMINISTRATOR

JEFF STEVENS
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

004600**LAKESIDE-MILAM RECOVERY CENTERS, INC. -
KIRKLAND INPATIENT**

10322 NORTHEAST 132ND STREET
KIRKLAND, WA 98034-2829
(425) 823-3116
(800) 231-4303
HELP@LAKESIDEMILAM.COM
WWW.LAKESIDEMILAM.COM

ELIZABETH MELOENY
ADMINISTRATOR

DAVE RUDDUCK
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT

KING

009400

LAKESIDE-MILAM RECOVERY CENTERS, INC. - RENTON

1000 SW 7TH STREET, SUITE B
RENTON, WA 98057-5216
(206) 248-4358
HELP@LAKESIDEMILAM.COM
WWW.LAKESIDEMILAM.COM

DEENA DOLE
ADMINISTRATOR

JAY YOURGLISH
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98057-5216

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

091400

LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE EASTLAKE

2815 EASTLAKE AVENUE EAST, SUITE 100
SEATTLE, WA 98102-3086
(206) 341-9373

CATHERINE WERDEN
ADMINISTRATOR

DAN LABUDA
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

144400

LOVELAND ASSOCIATES

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

JILL LOVELAND
ADMINISTRATOR/OWNER

MAILING ADDRESS

4110 42ND AVE NE
SEATTLE, WA 98105

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT

200312

LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT

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

ANDREW KRITOVICH
CLINICAL DIRECTOR

MAILING ADDRESS

4040 S 188TH ST STE 200
SEATAC, WA 98188

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

KING

200084**LUTHERAN COMMUNITY SERVICES NORTHWEST - SEATAC MAIN**4040 SOUTH 188TH STREET, SUITE 200
SEATAC, WA 98188BETH FARMER
PROGRAM DIRECTOR**MAILING ADDRESS**4040 SOUTH 188TH STREET, SUITE 200
SEATAC, WA 98188**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

138600**MATT TALBOT CENTER**2313 THIRD AVENUE
SEATTLE, WA 98121
(206) 256-9865
(206) 256-9866GREGG ALEX
EXECUTIVE DIRECTORMICHAEL LEWIS
CLINICAL SUPERVISOR**MAILING ADDRESS**2313 3RD AVE
SEATTLE, WA 98121**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200090**MEIER CLINICS**22232 17TH AVENUE SE, SUITE 312
BOTHELL, WA 98021**MAILING ADDRESS**22232 17TH AVENUE SE, SUITE 312
BOTHELL, WA 98021**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

DAY SUPPORT

120800**MINDFUL ALTERNATIVES**12727 NORTHUP WAY, SUITE 19
BELLEVUE, WA 98005
(425) 454-0116
(206) 355-2508JOHN O'MALLEY
ADMINISTRATOR/OWNER**MAILING ADDRESS**12727 NORTHUP WAY, SUITE 19
BELLEVUE, WA 98005**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:DUI ASSESSMENT
LEVEL I OUTPATIENT

200243**MOSAIC CHILDREN'S THERAPY CLINIC**13010 NORTHEAST 20TH STREET, SUITE 300
BELLEVUE, WA 98005ANDREA DUFFIELD
CEO

KING

MAILING ADDRESS

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

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

043100**MOTIVATIONS**

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

JAMES R. FOUTS
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

022900**MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM**

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

MICHAEL P. CLARKE
ADMINISTRATOR

DAN CABLE
CLINICAL SUPERVISOR

MAILING ADDRESS

39015 172ND AVE SE
AUBURN, WA 98092

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

157000**MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH**

17500 SOUTHEAST 392ND STREET
AUBURN, WA 98092
(253) 804-8752

MICHAEL P. CLARKE
BEHAVIORAL HEALTH DIRECTOR

SABRINA DE LA FUENTE
YOUTH CD SUPERVISOR

MAILING ADDRESS

39015 172ND AVE SE
AUBURN, WA 98092

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200361**MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER**

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

PAM HAITHCOX EGGLESTON
ADMINISTRATOR

ANGELA NAYLOR
DIRECTOR

MAILING ADDRESS

202 NORTH DIVISION STREET
AUBURN, WA 98001

KING

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200247

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

KEN RYAN
PROGRAM SUPERVISOR

WWW.NAVOS.ORG

JOE TANGNEY
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

CERTIFIED SERVICES

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

075300

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

MIRIAM MIYAKE
ADMINISTRATIVE DIRECTOR

WWW.NAVOS.ORG

ANGELA FRYE
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

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

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

161000

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

VICTOR PLACE
ADMINISTRATOR

WWW.NAVOS.ORG

TIM PRIMEAUX
CLINICAL SUPERVISOR

MAILING ADDRESS
2600 SW HOLDEN ST
SEATTLE, WA 98126

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

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

KING

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	JUDY HEALY ADMINISTRATOR MENTAL HEALTH SERVICES: BRIEF INTERVENTION TREATMENT CASE MANAGEMENT CRISIS OUTREACH CRISIS TELEPHONE SUPPORT INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY MEDICATION SUPPORT
200231	NAVOS - CLIP 1033 SOUTHWEST 152ND STREET BURIEN, WA 98166 (206) 829-1100 WWW.NAVOS.ORG MAILING ADDRESS 2600 SW HOLDEN ST SEATTLE, WA 98126 CERTIFIED SERVICES	ELLIE CARRITHERS DIRECTOR OF RESIDENTIAL SERVICES MENTAL HEALTH SERVICES: CHILD LONG-TERM INPATIENT PROGRAM (CLIP)
200244	NAVOS - INPATIENT SERVICES 2600 SOUTHWEST HOLDEN STREET SEATTLE, WA 98126 WWW.NAVOS.ORG MAILING ADDRESS 2600 SW HOLDEN STREET SEATTLE, WA 98126 CERTIFIED SERVICES	TERRY MCINERNEY DIRECTOR OF NURSING MENTAL HEALTH SERVICES: INPATIENT EVALUATION AND TREATMENT - ADULT
200248	NAVOS - KENT 23960 35TH PLACE SOUTH KENT, WA 98032 WWW.NAVOS.ORG MAILING ADDRESS 2600 SW HOLDEN ST SEATTLE, WA 98126 CERTIFIED SERVICES	KEN RYAN PROGRAM SUPERVISOR ROGER BROWN CLINICAL SUPERVISOR 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

KING

172800

NAVOS - MAIN

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

MEGAN KELLY
CHIEF CLINICAL OFFICER

MAILING ADDRESS

2600 SOUTHWEST HOLDEN STREET
SEATTLE, WA 98126

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

178400

**NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC
- SEATTLE**

2366 EASTLAKE AVENUE EAST, SUITE 331
SEATTLE, WA 98102
(206) 407-3333
NEWLIFERECEPTIONNICOLE@OUTLOOK.COM
WWW.RECOVERNEWLIFE.COM

DIANE BUFORD
CEO

MELANIE KEPLINGER
SUD CLINICAL SUPERVISOR

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

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

015600**NEXUS YOUTH AND FAMILIES - AUBURN MAIN**

1000 AUBURN WAY SOUTH
AUBURN, WA 98002
(253) 939-2202
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG

SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR

MARK WALRATH
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200494**NEXUS YOUTH AND FAMILIES - ENUMCLAW 1029 COLE (CLOSED)**

1029 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
(253) 939-2202
LARAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG

SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR

GARY HEMMINGER
MH CLINICAL SUPERVISOR/INTERIM BH DIRECTOR

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

170100**NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE**

1356 COLE STREET
ENUMCLAW, WA 98022
(360) 825-4586
LAURAST@NEXUS4KIDS.ORG
WWW.NEXUS4KIDS.ORG

SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR

MARK WALRATH
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

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

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

SYLVIA FUERSTENBERG
EXECUTIVE DIRECTOR

MARK WALRATH
SUD CLINICAL SUPERVISOR

KING

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

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

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

GARY HEMMINGER
BRANCH MANAGER

MARK WALRATH
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1000 AUBURN WAY S
AUBURN, WA 98002

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

139500**NORTH STAR TREATMENT GROUP, LLC**

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

CRAIG S. ROCK
ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200495**NORTHBOUND TREATMENT SERVICES OF WASHINGTON, LLC**

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

MICHAEL PLAISANCE
EXECUTIVE DIRECTOR

MAILING ADDRESS

510 2ND AVENUE WEST
SEATTLE, WA 98119

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

118000**NORTHSHORE YOUTH AND FAMILY SERVICES**

19201 120TH AVENUE NE, SUITE 108
BOTHELL, WA 98011
(425) 485-6541
INFO@NORTHSHOREYOUTHANDFAMILYSERVICES.ORG
WWW.NORTHSHOREYOUTHANDFAMILYSERVICES.ORG

DEBBIE FARRAR
EXECUTIVE DIRECTOR

KING

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT

176100**NORTHSIDE COUNSELING, LLC**

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

MICHAEL VERANTH
EXECUTIVE DIRECTOR/OWNER

MAILING ADDRESS

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

CERTIFIED SERVICES

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

200250**NORTHWEST ABA - MAIN**

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

TAKANORI KOYAMA
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 88083
TUKWILA, WA 98138

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200251**NORTHWEST BEHAVIORAL ASSOCIATES**

3003 NORTHUP WAY, SUITE 200
BELLEVUE, 98004

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

KING

151800**NORTHWEST RECOVERY CENTERS, LLC**

17600 TALBOT ROAD SOUTH, SUITE 3
RENTON, WA 98055
(425) 254-2899

MICHAEL A. WEBSTER
OWNER/ADMINISTRATOR

MAILING ADDRESS

PO BOX 39199
LAKEWOOD, WA 98496

CERTIFIED SERVICES

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

003900**NORTHWEST RESOURCES ONE, LLC**

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

ARTHUR DAHLEN III
OWNER

PAUL HUNZIKER
CLINICAL SUPERVISOR

MAILING ADDRESS

33438 1ST WAY SOUTH
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

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

173900**NUA COUNSELING, PLLC**

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

ERIN LYNCH
ADMINISTRATOR

MAILING ADDRESS

2505 3RD AVENUE, SUITE 325
SEATTLE, WA 98121

CERTIFIED SERVICES

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

200091**OLIVE CREST**

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

FAITH KNOWLES
MENTAL HEALTH SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

KING

200092

OPAL CLINIC FOR EATING DISORDERS, PLLC

1100 NORTHEAST 45TH STREET, SUITE 600
SEATTLE, WA 98105
(206) 926-9087
WWW.OPALFOODANDBODY.COM

ALEXIA GIBLIN
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200254

ORGANIZATION FOR RESEARCH AND LEARNING

12430 83RD AVENUE SOUTH
SEATTLE, WA 98179
(206) 930-5556

MAILING ADDRESS

3815 S OTHELLO ST STE 100
SEATTLE, WA 98118

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200385

PACIFIC ISLAMIC COMMUNITY AND CULTURAL SERVICES

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

SYED J. MUSTAFA
ADMINISTRATOR

DEREK MURPHY
CLINICAL SUPERVISOR

MAILING ADDRESS

10634 EAST RIVERSIDE DRIVE, SUITE 300
BOTHELL, WA 98011

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

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

KING

156500**PIB-PROCESO, LLC - SEATTLE**
1833 NORTH 105TH STREET, SUITE 101
SEATTLE, WA 98133
(206) 478-1191MARCO SANCHEZ
MANAGER/PARTNER**MAILING ADDRESS**1833 N 105TH ST, STE 101
SEATTLE, WA 98133**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

096500**PIONEER COUNSELING SERVICES - SEATTLE**901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144
(206) 470-3856WWW.PIONEERHUMANSERVICES.ORGTONI LONG
DIRECTOR OF TREATMENT SERVICESLESLIE CHRISTEN
CHEMICAL DEPENDENCY SUPERVISOR**MAILING ADDRESS**901 RAINIER AVENUE SOUTH
SEATTLE, WA 98144**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENTMENTAL HEALTH SERVICES:CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

128100**PIONEER HUMAN SERVICES - CO-OCCURRING
RESIDENTIAL PROGRAM (CORP)**11900 BEACON AVENUE SOUTH
SEATTLE, WA 98178
(206) 772-6900WWW.PIONEERHUMANSERVICES.ORGGEORGE CALDERON
DIRECTOR III**MAILING ADDRESS**11900 BEACON AVE S
SEATTLE, WA 98178**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:

LONG-TERM RESIDENTIAL

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

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

KING

MAILING ADDRESS

PO BOX 891
RENTON, WA 98057

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

113500**RAGING RIVER RECOVERY CENTER**

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

KENDA ERICKSON
ADMINISTRATOR

MAILING ADDRESS

ATTN: KENDA ERICKSON
SNOQUALMIE, WA 98065

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200107**REFUGEE WOMEN'S ALLIANCE - KENT**

124 4TH AVENUE SOUTH, SUITE 230
KENT, WA 98030

WWW.REWA.ORG

MAHNAZ ESHETU
EXECUTIVE DIRECTOR

MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

MAILING ADDRESS

4008 MARTIN LUTHER KING JR WAY S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200106**REFUGEE WOMEN'S ALLIANCE - SEATAC**

16256 MILITARY ROAD SOUTH, SUITE 102
SEATAC, WA 98168
(206) 241-4659
MAHNAZ@REWA.ORG
WWW.REWA.ORG

MAHNAZ ESHETU
EXECUTIVE DIRECTOR

MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

MAILING ADDRESS

4008 MARTIN LUTHER KING JR WAY S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200105**REFUGEE WOMEN'S ALLIANCE - SEATTLE MAIN**

4008 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98108
(206) 721-0243
WWW.REWA.ORG

MAHNAZ ESHETU
EXECUTIVE DIRECTOR

MOLLY DONOVAN
DIRECTOR OF BEHAVIORAL HEALTH

KING

MAILING ADDRESS

4008 MARTIN LUTHER KING JR WAY SOUTH
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

017100**RENTON AREA YOUTH & FAMILY SERVICES**

1025 SOUTH THIRD STREET
RENTON, WA 98055
(425) 271-5600
WWW.RAYS.ORG

RICHARD BROOKS
EXECUTIVE DIRECTOR

DIPTI SARNAIK
MH CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1510
RENTON, WA 98057

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200372**ROOTS CLINIC AT ACADEMY FOR PRECISION
LEARNING**

5031 UNIVERSITY WAY NE, SUITE 105
SEATTLE, WA 98105
(206) 427-0115
INFO@APLSCHOOL.ORG
WWW.APLSCHOOL.ORG

COURTNEY GUTIERREZ
CLINICAL DIRECTOR

KING

MAILING ADDRESS

PO BOX 51241
SEATTLE, WA 98115

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

159100**RYTHER - BELLEVUE**

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

KAREN BRADY
CEO/EXECUTIVE DIRECTOR

YVETTE LUDVIK - JESSICA GLOVER
CLINICAL SUPERVISORS

MAILING ADDRESS

2400 NE 95TH ST
SEATTLE, WA 98115-2499

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

005500**RYTHER - MAIN**

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

KAREN BRADY
CEO/EXECUTIVE DIRECTOR

RACHEL BARRETT
SENIOR DIRECTOR OF OP SERVICES

MAILING ADDRESS

2400 NE 95TH ST
SEATTLE, WA 98115-2499

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

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

163800**SCHICK SHADEL HOSPITAL**

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

PHILIP HERINK
CEO/ADMINISTRATOR

ROMMARK MANLIMOS
CLINICAL SUPERVISOR

MAILING ADDRESS

12101 AMBAUM BLVD SW
SEATTLE, WA 98146

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

KING

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

KING

200401 **SEA MAR BEHAVIORAL HEALTH - KENT**
1601 WEST MEEKER STREET
KENT, WA 98032
(206) 763-5277
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SHANA WHITNEY
CLINICAL SUPERVISOR

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

121300 **SEA MAR BEHAVIORAL HEALTH - SEATTLE**
10001 17TH PLACE SOUTH
SEATTLE, WA 98168
(206) 766-6960

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MARCO MEDINA
CLINICAL SUPERVISOR

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

172300 **SEA MAR BEHAVIORAL HEALTH - TURNING POINT
RECOVERY**
113 23RD AVENUE SOUTH
SEATTLE, WA 98144
(206) 219-5980

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

200434 **SEA MAR BEHAVIORAL HEALTH - WHITE CENTER**
9650 15TH AVENUE SOUTHWEST
SEATTLE, WA 98106
(206) 763-5277
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

MAILING ADDRESS
8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

SARAH DAILEY
CLINICAL SUPERVISOR

KING

CERTIFIED SERVICES

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

017200

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

SHERI HEALEY
EXECUTIVE DIRECTOR

ANGELA GROUT
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 80864
SEATTLE, WA 98108

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
WITHDRAWAL MANAGEMENT

200270

SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC
4746 11TH AVENUE NE, SUITE 102
SEATTLE, WA 98105
(206) 535-8876

MARA OBLAK
PRESIDENT

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

CERTIFIED SERVICES

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

150200

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

MOLLY GOLDSWORTHY
MANAGER

KELLY KERBY
CLINICAL SUPERVISOR

MAILING ADDRESS
4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

200392

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

ERIN EASLEY
DIRECTOR

RAPHAEL BERNIER
CLINICAL DIRECTOR

MAILING ADDRESS
4800 SAND POINT WAY NE
SEATTLE, WA 98105

KING

CERTIFIED SERVICES

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

200390

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

LESLIE PIERSON
DIRECTOR, PSYCHIATRY

CAROL ROCKHILL
MEDICAL DIRECTOR

MAILING ADDRESS
4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES

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

200347

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

KATHY BREWER
MANAGER, INSURANCE PROCESSING/UTILIZATION REVIEW

DEBRA GUMBARDO
CHIEF PSYCHO-SOCIAL SERVICES

MAILING ADDRESS
4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES

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

200391

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

ARLESIA BAILEY
DIRECTOR

MARK FADOOL
CLINICAL DIRECTOR

MAILING ADDRESS
4800 SAND POINT WAY NE
SEATTLE, WA 98105

CERTIFIED SERVICES

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

KING

115200

**SEATTLE COUNSELING SERVICE FOR SEXUAL
MINORITIES**

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

ANN MCGETTIGAN
EXECUTIVE DIRECTOR

PAT SOON
CLINICAL DIRECTOR

MAILING ADDRESS

1216 PINE ST STE 300
SEATTLE, WA 98101

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

FAMILY THERAPY
GROUP THERAPY
RECOVERY PEER SUPPORT

005700

SEATTLE INDIAN HEALTH BOARD

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

SHAWNA FAY GALLAGHER
BEHAVIORAL HEALTH DIRECTOR

STEPHANIE TOMPKINS
BH ASSOCIATE DIRECTOR

MAILING ADDRESS

611 12TH AVE S
SEATTLE, WA 98114

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200242

SENECA FAMILY OF AGENCIES

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

NICOLE NELSON
EXECUTIVE DIRECTOR

EMILY MARSH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

009700

SHAMROCK GROUP, INC.

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

STEVEN E. SCHUMANN
ADMINISTRATOR

MAILING ADDRESS

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

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200109**SISTERS IN COMMON**

15 SOUTH GRADY WAY, SUITE 310
RENTON, WA 98055

MAILING ADDRESS

POST OFFICE BOX 1514
RENTON, WA 98057

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
INDIVIDUAL TREATMENT

200467**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.**

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

ANDREW TATUM
ADMINISTRATOR

LINDA IRISH
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200271**SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN**

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

DANIELLE SAYEBROOK
OWNER

MAILING ADDRESS

11032 20TH AVENUE NE
SEATTLE, WA 98125

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200425**SOUND EDUCATION & BEHAVIOR ASSOCIATES - THIRD AVENUE**

9714 3RD AVENUE NE, SUITE 206
SEATTLE, WA 98115
(206) 397-5196
INFO@SEBASEATTLE.COM
WWW.SEBASEATTLE.COM

DANIELLE SAYEBROOK
OWNER

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

KING

166900

SOUND FAMILY CENTER LLC17924 140TH AVENUE NORTHEAST, SUITE 230
WOODINVILLE, WA 98072
(425) 419-4800JOHN TYE
ADMINISTRATORKAELI E. CLARK
CLINICAL SUPERVISOR**MAILING ADDRESS**17924 140TH AVENUE NORTHEAST, SUITE 230
WOODINVILLE, WA 98072**CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

106400

SOUND MENTAL HEALTH - AUBURN4238 AUBURN WAY NORTH
AUBURN, WA 98002
(253) 876-7600
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORGKATRINA EGNER
CHIEF PROGRAMS OFFICERARDEN 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 GAMBLINGMENTAL 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 A14216 NORTHEAST 21ST STREET
BELLEVUE, WA 98007
(425) 653-4900
CLIENTFEEDBACK@SMH.ORG
WWW.SMH.ORGKATRINA EGNER
CHIEF PROGRAMS OFFICERTHERESA 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 OUTPATIENTMENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

KING

200274

SOUND MENTAL HEALTH - BELLEVUE BUILDING B

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CARA GRESHAM
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200442

SOUND MENTAL HEALTH - BROADWAY

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

TERRY RICHARDSON
MH CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

105900

SOUND MENTAL HEALTH - CAPITOL HILL MAIN

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

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

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

CHRISTINE ATIENZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

106500**SOUND MENTAL HEALTH - NORTHGATE**

9706 4TH AVENUE NE, SUITE 303
SEATTLE, WA 98115
(206) 302-2900

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

KING

200276

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

THERESA WINTHER
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

106200

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

200443

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

KATRINA EGNER
CHIEF PROGRAMS OFFICER

DENNIS MARCERON
PROGRAM MANAGER

MAILING ADDRESS

1600 E OLIVE ST
SEATTLE, WA 98122

KING

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200116

SOUTHEAST YOUTH AND FAMILY SERVICES

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

ANTHONY AUSTIN
EXECUTIVE DIRECTOR

STEPHANIE MCWETHY
CLINICAL DIRECTOR

MAILING ADDRESS

3722 SOUTH HUDSON STREET
SEATTLE, WA 98118

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200117

SOUTHWEST YOUTH AND FAMILY SERVICES

4555 DELRIDGE WAY SW
SEATTLE, WA 98106

MAILING ADDRESS

4555 DELRIDGE WAY SW
SEATTLE, WA 98106

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200052

STEPS, LLC

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

HEATHER SUAREZ
CO-OWNER/CONSULTANT

SHANE MIRAMONTEZ
CO-OWNER/CONSULTANT

MAILING ADDRESS

2366 EASTLAKE AVENUE EAST, SUITE 102
SEATTLE, WA 98102

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

KING

200278**SUM OF LEARNING**

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

IVY MAN SUM CHUNG
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE 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

5300 TALLMAN AVE NW
SEATTLE, WA 98107

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200394**SWEDISH MEDICAL CENTER, BALLARD BEHAVIORAL HEALTH**

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

BRIAN LIVINGSTON
MD / CHIEF OPERATING OFFICER

HEATHER COLEMAN
NURSE EXECUTIVE

MAILING ADDRESS

5300 TALLMAN AVENUE NW
SEATTLE, WA 98107

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

200386**THE EMILY PROGRAM - RTF**

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

MONIQUE DESCHANE
SITE DIRECTOR

KING

MAILING ADDRESS

1700 WESTLAKE AVE N, SUITE 650
SEATTLE, WA 98109

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200126**THE EMILY PROGRAM - SEATTLE**

1700 WESTLAKE AVENUE NORTH, SUITE 650
SEATTLE, 98109

JOANNA STAGG
SITE MANAGER

MAILING ADDRESS

1700 WESTLAKE AVENUE NORTH, SUITE 650
SEATTLE, 98109

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200447**THE EVERGREEN AT NORTHPOINT**

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

THOMAS HAMMAN
ADMINISTRATOR

MAILING ADDRESS

13037 NORTHEAST BEL RED ROAD, SUITE 102
BELLEVUE, WA 98005

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

004000**THERAPEUTIC HEALTH SERVICES - BELLEVUE**

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

JEREMY PETERSON
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

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

KING

150900

THERAPEUTIC HEALTH SERVICES - KENT

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

HOLLIE CHRISTIANCY
BRANCH MANAGER

PHILIP JONES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

24823 S PACIFIC HWY
KENT, WA 98032

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

083500

THERAPEUTIC HEALTH SERVICES - SEATTLE RAINIER AVENUE

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

RANDON AEA
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

5802 RAINIER AVENUE SOUTH
SEATTLE, WA 98118

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

104400

THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET

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

GEORGE CALDERON
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

1116 SUMMIT AVE
SEATTLE, WA 98101

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:

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

KING

015800

THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE

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

GEORGE CALDERON
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

ATTN: CYNTHIA M. DUAY
SEATTLE, WA 98101

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

016900

THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH & FAMILY

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

ROGER IINO
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

1901 MARTIN LUTHER KING JR WAY SOUTH
SEATTLE, WA 98144

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

015801

THERAPEUTIC HEALTH SERVICES - SHORELINE

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

BEN ROSS
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

KING

200330

THIRA HEALTH, LLC

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

DR. MERHI MOORE
CHIEF EXECUTIVE/MEDICAL OFFICER

MAILING ADDRESS

400 108TH AVE NE STE 402
BELLEVUE, WA 98004

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

005701

THUNDERBIRD - SEATTLE INDIAN HEALTH BOARD

9236 RENTON AVENUE SOUTH
SEATTLE, WA 98118
(206) 722-7152

SHAWNA FAY GALLAGHER
BEHAVIORAL HEALTH DIRECTOR

STEPHANIE TOMPKINS
BH ASSOCIATE DIRECTOR

MAILING ADDRESS

611 12TH AVENUE SOUTH
SEATTLE, WA 98114

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

200131

TRANSITIONAL RESOURCES

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

DARCELL SLOVEK-WALKER
CEO

JULIA WATKINS
CLINICAL DIRECTOR

MAILING ADDRESS

2970 SW AVALON WAY
SEATTLE, WA 98126

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200132

UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE

13470 MARTIN LUTHER KING JR. WAY SOUTH
SEATTLE, WA 98178

MAILING ADDRESS

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

KING

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

112700

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

WILLIAM E. SWAILES
ADMINISTRATOR

HEIDI ROBIN SWAILES
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1525
BELLEVUE, WA 98009-1525

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT

200471

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

ANNETTE ESTES
DIRECTOR

ASHLEY PENNEY
DIRECTOR OF ABA SERVICES

MAILING ADDRESS

BOX 357920
SEATTLE, WA 98195-7920

CERTIFIED SERVICES

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

200316

UW HARING CENTER
1981 NORTHEAST COLUMBIA ROAD
SEATTLE, WA 98195
(206) 543-4011
BETHM8@GMAIL.COM
WWW.HARINGCENTER.ORG

ILENE SCHWARTZ
DIRECTOR

TARA GOODINHO
CLINICAL SUPERVISOR

MAILING ADDRESS

1981 NE COLUMBIA ROAD
SEATTLE, WA 98195

CERTIFIED SERVICES

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

091100

VALLEY CITIES COUNSELING & CONSULTATION - AUBURN
2704 I STREET NE
AUBURN, WA 98002
(253) 833-7444

KENNETH TAYLOR
CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200517**VALLEY CITIES COUNSELING & CONSULTATION -****AURORA CLINIC**

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

KENNETH TAYLOR
CEO

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

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

LYNN ALLAR
MH CLINICAL SUPERVISOR/SITE DIRECTOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

090900**VALLEY CITIES COUNSELING & CONSULTATION - FEDERAL WAY**

33301 1ST WAY SOUTH, SUITE C-115
FEDERAL WAY, WA 98003
(253) 833-7444

KENNETH TAYLOR
CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 WEST GOWE STREET
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

REBEKAH POWERS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

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

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200523**VALLEY CITIES COUNSELING & CONSULTATION - PIKE PLACE CLINIC**

1537 WESTERN AVENUE
SEATTLE, WA 98101
(253) 833-7444
WWW.VALLEYCITIES.ORG

KENNETH TAYLOR
CEO

JESSICA WILLIAMS
CLINIC MANAGER (MH CS)

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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

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

KENNETH TAYLOR
CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

KING

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

174100**VALLEY CITIES COUNSELING & CONSULTATION -
SEATTLE RAINIER AVENUE**

8444 RAINIER AVENUE SOUTH
SEATTLE, WA 98118
(253) 833-7444

KENNETH TAYLOR
CEO

ROSE BALDRIDGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

325 W GOWE ST
KENT, WA 98032

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200134**VASHON YOUTH AND FAMILY SERVICES**

20110 VASHON HIGHWAY SW
VASHON, WA 98070

KATHLEEN JOHNSON
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 237
VASHON, WA 98070

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

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 SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

200148**WASHINGTON NATIONAL COUNSELING, LLC**

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

IFEANYI C. CHUKWU
PRESIDENT/CLINICAL DIRECTOR

KING

MAILING ADDRESS

PO BOX 8862
COVINGTON, WA 98042

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY

167200**YMCA OF GREATER SEATTLE**

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

MAILING ADDRESS

2100 24TH AVE S STE 260
SEATTLE, WA 98144

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT

ROGER IINO
ASSOCIATE EXECUTIVE DIRECTOR

STUART YOUNG
MH CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:

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

006500**YOUTH EASTSIDE SERVICES - BELLEVUE MAIN**

999 164TH AVENUE NORTHEAST
BELLEVUE, WA 98008
(425) 747-4937

MAILING ADDRESS

999 164TH AVENUE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

006501**YOUTH EASTSIDE SERVICES - KIRKLAND**

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

MAILING ADDRESS

999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

KING

073500

YOUTH EASTSIDE SERVICES - REDMOND

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

PATTI SKELTON-MCGOUGAN
EXECUTIVE DIRECTOR

KRISTIE NEKLASON
CLIN SUP / SUB AB PGM MGR

MAILING ADDRESS

999 164TH AVE NE
BELLEVUE, WA 98008

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

KITSAP

119000

ACTION COUNSELING - PORT ORCHARD

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

BETTY KASSUHN
ADMINISTRATOR

MAILING ADDRESS

729 PROSPECT ST STE 200
PORT ORCHARD, WA 98366

CERTIFIED SERVICES

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

027300

AGAPÉ UNLIMITED

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

SARA MAREZ-FIELDS
EXECUTIVE DIRECTOR

TODD BENSON
TREATMENT DIRECTOR

MAILING ADDRESS

4841 AUTO CENTER WAY, SUITE 101
BREMERTON, WA 98312

CERTIFIED SERVICES

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

118600

CASCADIA ADDICTION - BOUNTIFUL LIFE TREATMENT CENTER, LLC

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

LINDSY MCGOWAN-ANDERSON
ADMINISTRATOR

MIKE STONE
CLINICAL SUPERVISOR

MAILING ADDRESS

2817 WHEATON WAY, SUITE 205
BREMERTON, WA 98310

KITSAP

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200326**CATHOLIC COMMUNITY SERVICES - BREMERTON**

2625 WHEATON WAY, SUITE B
BREMERTON, WA 98310
(360) 792-2020
(888) 649-6732
DAVEK@CCSWW.ORG
WWW.CCSWW.ORG/FAMILYPRESERVATION

MARY STONE SMITH
VICE PRESIDENT

DAVE KUCKLICK
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

086500**DOC - PENINSULA WORK RELEASE**

1340 LLOYD PARK WAY
PORT ORCHARD, WA 98366
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200480**EAGLE HARBOR COUNSELING, LLC**

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

JULIA JENSINE
OWNER/ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

148700**HEALTHY WHOLE SOLUTIONS**

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

MICHELLE R. YORK
ADMINISTRATOR

MITCHELL R. BROWN
CLINICAL SUPERVISOR

MAILING ADDRESS

1014 BAY ST STE 24
PORT ORCHARD, WA 98366

KITSAP

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200079**INSTITUTE FOR FAMILY DEVELOPMENT - BREMERTON**

5610 KITSAP WAY, SUITE 315
BREMERTON, WA 98312

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

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

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

200230**KITSAP MENTAL HEALTH SERVICES - ADOLESCENT
INPATIENT**

5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

JOE ROSZAK
EXEC. DIR.

MAILING ADDRESS

5455 ALMIRA DRIVE NE
BREMERTON, WA 98311

CERTIFIED SERVICESMENTAL 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 SERVICESMENTAL 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

KITSAP

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

168700**KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD**

2535 MITCHELL ROAD SE
PORT ORCHARD, WA 98366
(360) 373-5031

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS

5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

174300**KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD**

900 SHERIDAN ROAD, SUITES 103 & 106
BREMERTON, WA 98310
(360) 373-5031

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS

5455 ALMIRA DR NE
BREMERTON, WA 98311

KITSAP

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

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

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

JOE ROSZAK
CEO

STACEY DEVENNEY
CHIEF CLINICAL DIRECTOR

MAILING ADDRESS

5455 ALMIRA DR NE
BREMERTON, WA 98311

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

006700**KITSAP RECOVERY CENTER - INPATIENT**

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

BERGEN STARKE
TREATMENT DIRECTOR

KENNETH WILSON
CLINICAL SUPERVISOR

MAILING ADDRESS

614 DIVISION ST MS-23
PORT ORCHARD, WA 98366

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

200505**KITSAP RECOVERY CENTER - OUTPATIENT**

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

BERGEN STARKE
ADMINISTRATOR

MAILING ADDRESS

614 DIVISION ST MS-23
PORT ORCHARD, WA 98366

CERTIFIED SERVICES

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

KITSAP

006900

NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)
ONE BOONE ROAD
BREMERTON, WA 98312
(360) 475-5350
(360) 475-5314

ANGELA MATTISON
PROGRAM DIRECTOR

JOHN T. VAUGHN
CLINICAL SUPERVISOR

MAILING ADDRESS

ONE BOONE ROAD ATTN: SARP
BREMERTON, WA 98312

CERTIFIED SERVICES

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

007000

OLALLA GUEST LODGE
12850 LALA COVE LANE SE
OLALLA, WA 98359
(253) 857-6201

CHRISTINE LYNCH
EXECUTIVE DIRECTOR

MELODY MCKEE
CLINICAL OPERATIONS MANAGER

MAILING ADDRESS

12850 LALA COVE LN SE
OLALLA, WA 98359

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

088800

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

JOLENE GEORGE (INTERIM ADMIN)
CHILD & FAMILY SVCS DIRECTOR

COURTNEY OLIVER
CLINICAL SUPERVISOR

MAILING ADDRESS

31912 LITTLE BOSTON RD NE
KINGSTON, WA 98346

CERTIFIED SERVICES

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

200108

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

ELLEN EPSTEIN
DIRECTOR

MAILING ADDRESS

1933 4TH STREET
BREMERTON, WA 98337

CERTIFIED SERVICES

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

110900

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

GRACE JONES
ADMINISTRATOR

KITSAP

MAILING ADDRESS

PO BOX 1228
SUQUAMISH, WA 98392

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200282**THE MARC - MILES ABA SERVICES - SILVERDALE**

3100 NORTHWEST BUCKLIN HILL ROAD, SUITE 224
SILVERDALE, WA 98383

MAILING ADDRESS

3100 NW BUCKLIN HILL ROAD, SUITE 224
SILVERDALE, WA 98383

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

042900**THE RIGHT CHOICE COUNSELING SERVICE, INC.**

1740 NORTHEAST RIDDELL ROAD, SUITE 170
BREMERTON, WA 98310
(360) 373-4077

W. KENT LOVELESS
ADMINISTRATOR

MAILING ADDRESS

1740 NE RIDDELL RD, STE 170
BREMERTON, WA 98310

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

006600**WEST SOUND TREATMENT CENTER - PORT ORCHARD**

1415 LUMSDEN ROAD
PORT ORCHARD, WA 98367
(360) 876-9430

ONDREA MCCOURRY
EXECUTIVE DIRECTOR

RONDA FISHER
CLINICAL SUPERVISOR

MAILING ADDRESS

1415 LUMSDEN RD
PORT ORCHARD, WA 98367

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

169700**WEST SOUND TREATMENT CENTER - POULSBO**

19351 8TH AVENUE NE, SUITE 204
POULSBO, WA 98370
(360) 598-3929

ONDREA MCCOURRY
EXECUTIVE DIRECTOR

DARCY ALLBEE
CLINICAL SUPERVISOR

MAILING ADDRESS

1415 LUMSDEN RD
PORT ORCHARD, WA 98367

KITSAP

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

KITTITAS

200543**BARTH CLINIC - ELLENSBURG**

1206 NORTH DOLARWAY ROAD, SUITE 118
ELLENSBURG, WA 98926
(877) 457-5657
(509) 457-5653
MEAGANTAKAMORI@BARTHCLINIC.COM
WWW.BARTHCLINIC.COM

JAMES BARTH
ADMINISTRATOR

LIZ RICH
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 1207
YAKIMA, WA 98907-1207

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200301**COMPREHENSIVE HEALTHCARE - CLE ELUM**

402 EAST 1ST STREET
CLE ELUM, WA 98922
(509) 674-2340
WWW.COMPHC.ORG

RON GENGLER
COO

MAILING ADDRESS

PO BOX 949
YAKIMA, WA 98907

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200023**COMPREHENSIVE HEALTHCARE - ELLENSBURG 4TH AVENUE**

220 WEST 4TH AVENUE
ELLENSBURG, WA 98926
(509) 925-9861

RON GENGLER
COO

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

KITTITAS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

167000

COMPREHENSIVE HEALTHCARE - ELLENSBURG PEARL STREET

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

RON GENGLER
ADMINISTRATOR

REBECCA TWOHY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INFORMATION AND CRISIS
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

164500

ELLIE LORENZ COUNSELING AND CONSULTING SERVICE

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

ELLIE LORENZ
OWNER/ADMINISTRATOR

MAILING ADDRESS

9325 UPPER PEOH POINT ROAD
CLE ELUM, WA 98922

CERTIFIED SERVICES

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

174000

MERIT RESOURCE SERVICES - ELLENSBURG

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

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1039
ELLENSBURG, WA 98926

KITTITAS

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

KLICKITAT

115800

COMPREHENSIVE HEALTHCARE - GOLDENDALE

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

RON GENGLER
ADMINISTRATOR

REBECCA TWOHY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

115900

COMPREHENSIVE HEALTHCARE - WHITE SALMON

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

RON GENGLER
ADMINISTRATOR

REBECCA TWOHY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

LEWIS

200499

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -

CENTRALIA OUTPATIENT

1723 KRESKY AVENUE
CENTRALIA, WA 98531-8985
(360) 559-6201
ADMISSIONS@ABHSINC.NET
WWW.ABHSINC.NET

TONY PRENTICE
ADMINISTRATOR

ANGELA MELLO
MH & SUD CLINICAL SUPERVISOR

LEWIS

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
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) 748-4776
(866) 729-8038
WWW.ABHSINC.NET

MARC MALMER
ADMINISTRATOR

CRAIG ZAHN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

155800**CASCADE MENTAL HEALTH CARE - CHEHALIS**

135 WEST MAIN STREET
CHEHALIS, WA 98532
(360) 748-4339
WWW.CASCADEMENTALHEALTH.ORG

RICHARD STRIDE
CEO

DAVID KING
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2428 REYNOLDS AVE
CENTRALIA, WA 98531

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

007400**CASCADE MENTAL HEALTH CARE - MAIN**

2428 WEST REYNOLDS AVENUE
CENTRALIA, WA 98531
(360) 330-9044
WWW.CASCADEMENTALHEALTH.ORG

RICHARD STRIDE
CEO

KAREN ROSE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2428 W REYNOLDS AVE
CENTRALIA, WA 98531-4554

LEWIS

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

200300**CASCADE MENTAL HEALTH CARE - MORTON**

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

WWW.CASCADEMENTALHEALTH.ORG

RICHARD STRIDE
CEO

MATT PATTEN
CCO/MH CLINICAL SUPERVISOR

MAILING ADDRESS

2428 REYNOLDS AVE
CENTRALIA, WA 98531

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200426**CORE HEALTH - CENTRALIA**

104 SOUTH ROCK STREET
CENTRALIA, WA 98531
(360) 200-5419
CAMERONC@CHOBLV.ORG

WWW.COREHEALTHSERVICES.ORG

FRANK MORRISON
CEO

KATIE ALLEN
MH CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 2394
LONGVIEW, WA 98632

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

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

200370**CORRECT CARE, LLC**

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

WWW.CORRECTCARERS.COM

RICHARD MIRAGLIA
ADMINISTRATOR

BEVERLY E. ALLEN
PSYCHIATRIST

LEWIS

MAILING ADDRESS

800 FAIRWAY DR STE 490
DEERFIELD BEACH, FL 33441

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

COMPETENCY EVALUATION & RESTORATION TREATMENT

200492**EUGENIA CENTER - CHEHALIS BRANCH**

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

NISTON FRANCO
EXECUTIVE DIRECTOR

ESMERALDA LYBRAND
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1371
CHEHALIS, WA 98532

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

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

054000**EUGENIA CENTER - CHEHALIS MAIN**

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

NISTON FRANCO
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 1371
CHEHALIS, WA 98532

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

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

LEWIS

200458 **GREAT RIVERS BEHAVIORAL HEALTH AGENCY - MAIN**
57 WEST MAIN STREET, SUITE 260
CHEHALIS, WA 98532
(360) 795-5955
(800) 392-6298
INFO@GREATRIVERSBHO.ORG
WWW.GREATRIVERSBHO.ORG/BHA

MAILING ADDRESS
PO BOX 1447
CHEHALIS, WA 98532

CERTIFIED SERVICES

MARC BOLLINGER
CEO/ADMINISTRATOR

TODD BRODERIUS
CLINICAL SUPERVISOR

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

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

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

DAVID REINKE
JUVENILE REHABILITATION COORDINATOR

SHIRLEY BIVINS
JUVENILE REHABILITATION COORDINATOR

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

MAILING ADDRESS
PO BOX 59
CHEHALIS, WA 98532

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

SCOTT M. DICKINSON
ADMINISTRATOR

UNKNOWN 11/5/09
CLINICAL SUPERVISOR

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

MAILING ADDRESS
6005 TYEE DR SW
TUMWATER, WA 98512

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERM CLINICAL SUPERVISOR

LEWIS

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

LINCOLN

007600**LINCOLN COUNTY ALCOHOL & DRUG CENTER**

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

DARREN MATTOZZI
EXECUTIVE DIRECTOR

SUSAN HATTEN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 152
DAVENPORT, WA 99122-0152

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

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

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

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1211 MERRIAM ST
DAVENPORT, WA 99122

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

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

MENTAL HEALTH SERVICES:

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

MASON

073000**BEHAVIORAL HEALTH RESOURCES - SHELTON**

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

LAURIE TEBO
CEO

DANIELLE MURPHY
RECOVERY SERVICES MANAGER

MAILING ADDRESS

3857 MARTIN WAY EAST
OLYMPIA, WA 98506

MASON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200340**CATHOLIC COMMUNITY SERVICES - SHELTON**

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

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200367**COMMUNITY YOUTH SERVICES - SHELTON**

601 WEST FRANKLIN STREET, SUITE G-201
SHELTON, WA 98584
(360) 943-0780
(888) 698-1816
TAY@COMMUNITYYOUTHSERVICES.ORG
WWW.COMMUNITYYOUTHSERVICES.ORG

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

MAILING ADDRESS

711 STATE AVE NE
OLYMPIA, WA 98506

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

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

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

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

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

JENNY RODRIGUEZ
REGIONAL DIRECTOR (MH & SUD CLINICAL SUPERVISOR)

MAILING ADDRESS

3808 S ANGELINE ST
SEATTLE, WA 98118

MASON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

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

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

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

DENNIS NEAL
ADMINISTRATOR

JENNIFER CASTANETO
SUD CLINICAL SUPERVISOR

MASON

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

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

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

DENESE LACLAIR
HEALTH CLINIC DIRECTOR

JARED LANGTON
BEHAVIORAL HEALTH SERVICES MANAGER

MAILING ADDRESS

N 80 TRIBAL CENTER RD
SHELTON, WA 98584

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

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

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

ANDREW TATUM
ADMINISTRATOR

CAROL NEWTON
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

037400**SQUAXIN ISLAND BEHAVIORAL HEALTH OUTPATIENT
PROGRAM**

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

GREG TWIDDY
BEHAVIORAL HEALTH MANAGER

MAILING ADDRESS

3760 SE OLD OLYMPIA HWY
SHELTON, WA 98584

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

MASON

168500

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

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

TYVONNE BERRING
ADMINISTRATOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

105800

TRUE NORTH-ESD 113 - MASON

807 WEST PINE STREET
SHELTON, WA 98584

(360) 427-2050

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERM CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

OKANOGAN

007900

**COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM -
NESPELEM**

21 COLVILLE STREET
NESPELEM, WA 99155
(509) 634-2600
(509) 634-2610

ALISON BALL
HEALTH SERVICES DIRECTOR

CHARLENE SAM
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 50
NESPELEM, WA 99155

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

126700

COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - OMAK

507 BENTON STREET
OMAK, WA 98841
(509) 422-7410
(800) 573-9343

ALISON BALL
ADMINISTRATOR

CHARLENE SAM
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 150
NESPELEM, WA 99155-0150

OKANOAGAN

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

007800**OKANOAGAN BEHAVIORAL HEALTHCARE, INC.**

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

JAMES "JIM" NOVELLI
CEO

BARNABY TENZIN DENISON
CLINICAL DIRECTOR (MH CLINICAL SUPERVISOR)

MAILING ADDRESS

1007 KOALA DR
OMAK, WA 98841

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

PACIFIC

173400**BASICS NW, LLC - RAYMOND**

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

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS

2570 OCEAN AVENUE
RAYMOND, WA 98577

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

153600**FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC**

25517 PARK AVENUE
OCEAN PARK, WA 98640
(800) 272-9199
(360) 665-4494
INFO@FREEBYTHESEA.COM
WWW.FREEBYTHESEA.COM

DAVID KRIGBAUM
ADMINISTRATOR

JENNIFER HARRIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 399
OCEAN PARK, WA 98640

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

PACIFIC

159500

KLEAN LONG BEACH WASHINGTON LLC
211 PIONEER ROAD WEST
LONG BEACH, WA 98631
(360) 642-3105
WWW.KLEANTREATMENTCENTERS.COM

LAURIE BECK
DIRECTOR OF OPERATIONS

GREGORY LIPPERT
CLINICAL SUPERVISOR

MAILING ADDRESS

211 PIONEER RD W
LONG BEACH, WA 98631

CERTIFIED SERVICES

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

200486

LIFELINE CONNECTIONS - SOUTH BEND
1006 ROBERT BUSH DRIVE WEST
SOUTH BEND, WA 98586
(360) 397-8246
(800) 604-0025
ADMISSIONS@LIFELINECONNECTIONS.ORG
WWW.LIFELINECONNECTIONS.ORG

JARED SANFORD
CEO

BRANDY BRANCH
CCO / MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1678
VANCOUVER, WA 98668

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:

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

052000

NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)
11 YOUTH CAMP LANE (MS: B25-2)
NASELLE, WA 98638-8600
(360) 484-3223

SPENCER MOOERS
PROGRAM MANAGER

STEVE FOX
CD COORDINATOR

MAILING ADDRESS

11 YOUTH CAMP LN (MS: B25-2)
NASELLE, WA 98638-8600

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

112300

SHOALWATER BAY INDIAN TRIBE
2373 OLD TOKELAND ROAD, BUILDING E
TOKELAND, WA 98590
(360) 267-8126

KIM ZILLYETT-HARRIS
HEALTH DIRECTOR

LAURA HAMILTON
CD PROGRAM DIRECTOR

MAILING ADDRESS

PO BOX 130
TOKELAND, WA 98590

CERTIFIED SERVICES

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

PACIFIC

143100

TRUE NORTH-ESD 113 - PACIFIC

921 COMMERCIAL STREET
RAYMOND, WA 98577
(360) 942-2474

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERIM CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

134300

WILLAPA BEHAVIORAL HEALTH - LONG BEACH

2204 PACIFIC HIGHWAY NORTH
LONG BEACH, WA 98631
(360) 642-3787

ROBERT CAETANO
CEO/FINANCE DIRECTOR

CHARLENE HAWLEY
CLINICAL SUPERVISOR

MAILING ADDRESS

2204 PACIFIC HIGHWAY N
LONG BEACH, WA 98631

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

134400

WILLAPA BEHAVIORAL HEALTH - RAYMOND

300 OCEAN AVENUE
RAYMOND, WA 98577
(360) 942-2303

ROBERT CAETANO
CEO/FINANCE DIRECTOR

CHARLENE HAWLEY
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 65
SOUTH BEND, WA 98586-0065

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

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

PEND OREILLE

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)

PEND OREILLE

MAILING ADDRESS

PO BOX 5055
NEWPORT, WA 99156-5055

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

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

302 PARK STREET
METALINE FALLS, WA 99153
(509) 447-5651
WWW.PENDOREILLE.ORG

ANNABELLE S. PAYNE
DIRECTOR

THERESA ALLEN
CLINICAL DIRECTOR (MH/SUD CLINICAL SUPERVISOR)

MAILING ADDRESS

PO BOX 5055
NEWPORT, WA 99156-5055

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

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

PIERCE

173500**A CHANGE INTO RECOVERY, LLC**

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

DAVID A. HARRIS
ADMINISTRATOR

MAILING ADDRESS

719 E MAIN AVE, STE C
PUYALLUP, WA 98372

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

148500**ABRACADABRA RECOVERY CENTER**

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

JOHN DORMAN
ADMINISTRATOR

LESLIE J. THIEME
CLINICAL SUPERVISOR

MAILING ADDRESS

18407 PACIFIC AVE S
SPANAWAY, WA 98387

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

145100**AL'TA COUNSELING AND TESTING**

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

JEREMY WEKELL
ADMINISTRATOR

MAILING ADDRESS

702 BROADWAY STE 102
TACOMA, WA 98402

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

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

145700**ASIAN COUNSELING TREATMENT SERVICES (ACTS)**

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

TAE SON LEE
EXECUTIVE DIRECTOR

MAILING ADDRESS

8811 S TACOMA WAY, STE 106
LAKEWOOD, WA 98499

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

054700

**CASTEELE, WILLIAMS & ASSOCIATES
COMPREHENSIVE BEHAVIORAL HEALTH, INC.**
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
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200489

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

MARY STONE SMITH
VICE PRESIDENT

DAVID KUCKLICK
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200019

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

MARY STONE SMITH
VICE PRESIDENT

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

PIERCE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200144

CATHOLIC COMMUNITY SERVICES - TACOMA YAKIMA AVENUE

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

MARY STONE SMITH
VICE PRESIDENT

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200143

CATHOLIC COMMUNITY SERVICES - UNIVERSITY PLACE

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

MARY STONE SMITH
VICE PRESIDENT

TIFFANY RADONICH
SITE DIRECTOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

090800

COMMUNITY COUNSELING INSTITUTE, INC.

2502 TACOMA AVENUE
TACOMA, WA 98402
(253) 759-0852

WILLIAM H. JAMES, PH.D, CDP
EXECUTIVE DIRECTOR

TERI HANSEN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 5305
TACOMA, WA 98415-0305

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

PIERCE

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

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

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

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

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

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

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICES

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

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF ADULT SERVICES

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

MAILING ADDRESS
1201 S PROCTOR ST
TACOMA, WA 98405

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

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

KIM ZACHER
CEO

KATHY HAGEN
MH CLINICAL SUPERVISOR/DIRECTOR OF OP SERVICES

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

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

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF OUTPATIENT SERVICES (MH CS)

PIERCE

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200297**COMPREHENSIVE LIFE RESOURCES - WELLNESS CENTER**

1424 TACOMA AVENUE SOUTH
TACOMA, WA 98402
(253) 396-5800
WWW.COMPREHENSIVELIFERESOURCES.ORG

KIM ZACHER
CEO

KATHY HAGEN
DIRECTOR OF ADULT SERVICES

MAILING ADDRESS

1201 S PROCTOR ST
TACOMA, WA 98405

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

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

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

MARIO E. PAREDES-JOVEL
EXECUTIVE DIRECTOR

YVONNE ELMENDORF
CLINICAL SUPERVISOR

MAILING ADDRESS

5915 ORCHARD ST W UNIT B
TACOMA, WA 98466

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

150400**CROSSROADS TREATMENT CENTER, INC.**

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

JEREMIAH SAUCIER
ADMINISTRATOR

MAILING ADDRESS

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

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

078100**DOC - PROGRESS HOUSE WORK RELEASE**

5601 6TH AVENUE
TACOMA, WA 98406
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

077800**DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN - PURDY**

9601 BUJACICH ROAD NORTHWEST
GIG HARBOR, WA 98332
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

122800**EXODUS COUNSELING AND TREATMENT SERVICES**

918 ALDER AVENUE
SUMNER, WA 98390
(253) 891-2662

MARK A. WALRATH
ADMINISTRATOR

LINDA K. WALRATH
CLINICAL SUPERVISOR

MAILING ADDRESS

918 ALDER AVE
SUMNER, WA 98390

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

162100**F.H. COUNSELING & ASSOCIATES PLCC**

917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433
(253) 777-4772

LIBBY HAINES
ADMINISTRATOR

ALFREDA HAINES
CEO & CLINICAL SUPERVISOR

MAILING ADDRESS

917 PACIFIC AVENUE, SUITES 213-214
TACOMA, WA 98402-4433

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

101700**FOUNDATION FOR MULTICULTURAL SOLUTIONS**

2316 SOUTH STATE STREET, SUITE B
TACOMA, WA 98405
(253) 572-3214

PATRICIA NEAGLE
PROGRAM MANAGER

MAILING ADDRESS

2316 S STATE ST STE B
TACOMA, WA 98405

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

007001**GIG HARBOR COUNSELING**

5122 OLYMPIC DRIVE NW, SUITE A-105
GIG HARBOR, WA 98335
(253) 851-2552

CHRISTINE LYNCH
EXECUTIVE DIRECTOR

MELODY MCKEE
CLINICAL OPERATIONS MANAGER

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

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

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

TERRI CARD
PRESIDENT & CEO

CLAUDIA REYES GARZA
CLINICAL MANAGER

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200056**GREATER LAKES MENTAL HEALTHCARE - MAIN**

9330 59TH AVENUE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
[HTTP://WWW.GLMHC.ORG/](http://WWW.GLMHC.ORG/)

TERRI CARD
PRESIDENT & CEO

GLENN CZERWINSKI
VP OF CLINICAL OPERATIONS (MH CS)

PIERCE

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

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

200482**GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA**

9315 GRAVELLY LAKE DRIVE SOUTHWEST
LAKEWOOD, WA 98499
(253) 581-7020
WWW.GLMHC.ORG

TERRI CARD
PRESIDENT & CEO

DEANNA CARRON
MH CLINICAL SUPERVISOR

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200059**GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE**

9108 LAKEWOOD DRIVE SW
LAKEWOOD, WA 98499

TERRI CARD
PRESIDENT & CEO

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

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

200364**GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC**

113 170TH STREET SOUTH
SPANAWAY, WA 98387
(253) 535-1935
WWW.GLMHC.ORG

TERRI CARD
PRESIDENT & CEO

LATONYA LITTLETON
CLINICAL MANAGER

MAILING ADDRESS

9330 59TH AVE SW
LAKEWOOD, WA 98499

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
RECOVERY PEER SUPPORT

200055 **GREATER LAKES RECOVERY CENTER E&T**
14016 SOUTH A STREET
TACOMA, WA 98444

MAILING ADDRESS
14016 SOUTH A STREET
TACOMA, WA 98444

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200493 **HOLISTIC RECOVERY FOR MOTHERS**
2550 SOUTH G STREET
TACOMA, WA 98405
(253) 383-7710
(253) 257-7110
TREATMENT@NEWPHOEBEHOUSE.ORG
WWW.HOLISTICRECOVERYFORMOTHERS.ORG

MAILING ADDRESS
PO BOX 5245
TACOMA, WA 98415

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

NAOMI VILLANO
EXECUTIVE DIRECTOR

MELISSA LAWS
CLINICAL DIRECTOR (MH & SUD)

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

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

MAILING ADDRESS
6424 NORTH 9TH STREET
TACOMA, WA 98406

CERTIFIED SERVICES

JOSEPH LEROY
ADMINISTRATOR

MENTAL HEALTH SERVICES:
FAMILY THERAPY
INDIVIDUAL TREATMENT

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

MAILING ADDRESS
6424 N. 9TH STREET
TACOMA, WA 98406

JOSEPH LEROY
ADMINISTRATOR

PIERCE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
FAMILY THERAPY
INDIVIDUAL TREATMENT

200223

IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - LAKEWOOD

8815 SOUTH TACOMA WAY, SUITE 122
LAKEWOOD, WA 98499
(253) 682-0320
(253) 682-0353
INFO@IMAGINEBEHAVIOR.COM
WWW.IMAGINEBEHAVIOR.COM

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

RYAN HANNIG
PROGRAM DIRECTOR

MAILING ADDRESS

5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES

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

008900

KWAWACHEE COUNSELING CENTER

2209 EAST 32ND STREET, BLDG 4 TREATMENT SVCS
TACOMA, WA 98404-0188
(253) 593-0247

JENNIFER LAPOINTE
ACTING DIRECTOR/ADMINISTRATOR

SHAWN SEVERSE
CLINICAL SUPERVISOR

MAILING ADDRESS

2209 E 32ND ST
TACOMA, WA 98404-0188

CERTIFIED SERVICES

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

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

200538

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

7808 PACIFIC AVENUE, SUITE 9
TACOMA, WA 98418
(360) 240-0022
ADMIN@LEAPSANDBEYOND.COM
WWW.LEAPSANDBEYOND.COM

STACEY HOTTER-KNIGHT
PRESIDENT

MAILING ADDRESS

OAK HARBOR, WA 98277

CERTIFIED SERVICES

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

035103

LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP

405 WEST STEWART AVENUE, SUITE A
PUYALLUP, WA 98371-5164
(253) 840-8687

ALANA LEWIS
ADMINISTRATOR

PENNY SULLIVAN
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98034-2829

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

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

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

JAY YOURGLICH
ADMINISTRATOR

PEDRO RUIZ
CLINICAL SUPERVISOR

MAILING ADDRESS

10322 NE 132ND ST
KIRKLAND, WA 98402

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200238**MAGNOLIA BEHAVIOR THERAPY - DUPONT**

1570 WILMINGTON DRIVE, SUITE 220
DUPONT, WA 98327

MAILING ADDRESS

3214 W MCGRAW ST STE 212
SEATTLE, WA 98199

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200444**MAXIM HEALTHCARE SERVICES, INC.**

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

ALI LYSE
DIRECTOR OF BUSINESS OPERATIONS

CHANTE STOECKLEY
BEHAVIORAL SUPERVISOR

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

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

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 SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

PIERCE

018900

METROPOLITAN DEVELOPMENT COUNCIL - THE CENTER

721 FAWCETT AVENUE, SUITE 201
TACOMA, WA 98402
(253) 593-2740

ROBERTO TERRONES
PROGRAM DIRECTOR/ADMINISTRATOR

MAILING ADDRESS

721 FAWCETT AVE, SUITE 201
TACOMA, WA 98402

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

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

PIERCE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

200210

MULTICARE BEHAVIORAL HEALTH - PACT

4301 SOUTH PINE STREET, SUITE 21
TACOMA, WA 98409

CUSTOMERSERVICE@MULTICARE.ORG
WWW.MULTICARE.ORG

MAILING ADDRESS

325 EAST PIONEER AVENUE
PUYALLUP, WA 98372

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

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

152800

MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN

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

ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCICH
CD PROGRAM MANAGER

MAILING ADDRESS

325 E PIONEER AVE
PUYALLUP, WA 98372

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

160400

MULTICARE BEHAVIORAL HEALTH - TACOMA

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

ROBERT HAMILTON
PROGRAM MANAGER

JEFFERY PLANCICH
CD PROGRAM MANAGER

WWW.MULTICARE.ORG/BEHAVIORAL-HEALTH

PIERCE

MAILING ADDRESS

325 E PIONEER AVE
PUYALLUP, WA 98372

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

164000**NEW FREEDOM RECOVERY CENTER, LLC**

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

JASON JOHNSTONE
ADMINISTRATOR

ROB LONG
EXECUTIVE DIRECTOR & CLINICAL SUPERVISOR

MAILING ADDRESS

10215 214TH AVE E
BONNEY LAKE, WA 98391

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200378**NORTHWEST ABA - TACOMA**

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

TAKANORI KOYAMA
OWNER

MAILING ADDRESS

15445 53RD AVE S STE 110
TUKWILA, WA 98188

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

DAY SUPPORT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200431**NORTHWEST INTEGRATED HEALTH - LAKEWOOD**

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

AMY CREASER
AGENCY ADMINISTRATOR

KIMMY LAKE
SUD PROGRAM MANAGER

MAILING ADDRESS

5929 WESTGATE BLVD STE A
TACOMA, WA 98406

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

162000**NORTHWEST INTEGRATED HEALTH - MAIN**

3800 3RD STREET SOUTHEAST
PUYALLUP, WA 98374
(253) 503-0226
INFO@NWIH.ORG
WWW.NWIH.ORG

STEPHANIE LUCAS
AGENCY ADMINISTRATOR

KIMMY LAKE
SUD PROGRAM MANAGER

PIERCE

MAILING ADDRESS

5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

173000**NORTHWEST INTEGRATED HEALTH - TACOMA**

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

BRANDY KREBS
AGENCY ADMINISTRATOR

KIMMY LAKE
SUD PROGRAM MANAGER

MAILING ADDRESS

5929 WESTGATE BOULEVARD, SUITE A
TACOMA, WA 98406

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200097**PEARL STREET CENTER - CLIP**

815 SOUTH PEARL STREET
TACOMA, WA 98465
(253) 396-5805
WWW.COMPREHENSIVELIFERESOURCES.ORG

APRIL STALLINGS
PROGRAM DIRECTOR

DR. MIKE LAEDERICH
DIRECTOR

MAILING ADDRESS

815 SOUTH PEARL STREET
TACOMA, WA 98465

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

146100**PENINSULA COUNSELING, INC.**

3214 50TH STREET COURT NW, SUITE D-305
GIG HARBOR, WA 98335
(253) 851-4600

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

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

200331**PERCH BEHAVIORAL HEALTH**

CONFIDENTIAL LOCATION
(253) 312-8909

WILLIAM WALDO
DIRECTOR OF OPERATIONS

PIERCE

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

019100

PIERCE COUNTY ALLIANCE - MAIN

510 TACOMA AVENUE SOUTH
TACOMA, WA 98402-5416
(253) 572-4750

DR. TERREE SCHMIDT-WHELAN
EXECUTIVE DIRECTOR

SAMI FRENCH
MH CLINICAL SUPERVISOR

MAILING ADDRESS

510 TACOMA AVE S
TACOMA, WA 98402-5416

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

114000

PIONEER ADULT COUNSELING - TACOMA

758 ST. HELENS AVENUE
TACOMA, WA 98402
(253) 274-0484

JALANE CHRISTIAN-STOKER
AVP, BEHAVIORAL HEALTH

NANCY BLACKMAN
CLINICAL SUPERVISOR

MAILING ADDRESS

758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

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

MENTAL HEALTH SERVICES:

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

200544

PROSPERITY WELLNESS CENTER - GRAHAM

22007 MERIDIAN AVENUE EAST, SUITE A
GRAHAM, WA 98338
(253) 375-7530

WWW.PROSPERITYWELLNESSCENTER.COM

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

103700

PROSPERITY WELLNESS CENTER - MAIN

5001 112TH STREET EAST
TACOMA, WA 98446
(253) 531-2103
(253) 863-1380

WWW.PROSPERITYWELLNESSCENTER.COM

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

PIERCE

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

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

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RESIDENTIAL TREATMENT FACILITY

169800**PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES**

12201 PACIFIC AVENUE SOUTH
TACOMA, WA 98444
(253) 536-6425

WWW.PROSPERITYWELLNESSCENTER.COM

DAVID W. LAWS
OWNER/ADMINISTRATOR

MELISSA DEVEAU-LAWS
CLINICAL ADMINISTRATOR

MAILING ADDRESS

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

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

CRISIS PEER SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

052200**REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)**

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

CATHY J. PEARSON
DIRECTOR

MAILING ADDRESS

5501 6TH AVE
TACOMA, WA 98406-2697

CERTIFIED SERVICESSUBSTANCE 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 SERVICESMENTAL HEALTH SERVICES:

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

PIERCE

200103	RI INTERNATIONAL - CSU 2150 FREEMAN ROAD EAST FIFE, WA 98424 (253) 942-5644 MAILING ADDRESS 2701 N. 16TH ST. STE. 103 PHOENIX, AZ 85006 CERTIFIED SERVICES	DON JULIAN SAUCIER SUPPORT SERVICES COORDINATOR GRETCHEN MCCLELLAND RECOVERY SERVICES ADMINISTRATOR I <u>MENTAL HEALTH SERVICES:</u> CRISIS STABILIZATION UNIT
200102	RI INTERNATIONAL - E&T 2150 FREEMAN ROAD EAST FIFE, WA 98424 (253) 584-2300 WWW.RIINTERNATIONAL.COM MAILING ADDRESS 2701 N 16TH ST STE 103 PHOENIX, AZ 85006 CERTIFIED SERVICES	JAMIE SELLAR WESTERN REGIONAL CRISIS DIRECTOR <u>MENTAL HEALTH SERVICES:</u> INPATIENT EVALUATION AND TREATMENT - ADULT
176400	ROYAL LIFE CENTERS, LLC - PUGET SOUND 1723 BONNEY AVENUE SUMNER, WA 98390 (253) 750-3571 ADMISSIONS@ROYALCENTERS.COM WWW.ROYALLIFECENTERS.COM MAILING ADDRESS 8649 MARTIN WAY E LACEY, WA 98516 CERTIFIED SERVICES <u>SUBSTANCE USE DISORDER SERVICES:</u> INTENSIVE INPATIENT LEVEL II INTENSIVE OUTPATIENT WITHDRAWAL MANAGEMENT	RICKY RORIE PROGRAM DIRECTOR KEN PIMPLETON SUD CLINICAL SUPERVISOR <u>MENTAL HEALTH SERVICES:</u> 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	CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH <u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION

PIERCE

164100

SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN

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

CLAUDIA D'ALLEGRI
VP, BEHAVIORAL HEALTH

DEBBIE ANN REED
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

127100

SEA MAR BEHAVIORAL HEALTH - PUYALLUP

12812 101ST AVENUE COURT EAST, SUITE 202
PUYALLUP, WA 98373
(253) 864-4770

CLAUDIA D'ALLEGRI
ADMINISTRATOR

JENNY RODRIGUEZ
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

089900

SEA MAR BEHAVIORAL HEALTH - TACOMA

2121 SOUTH 19TH STREET
TACOMA, WA 98405
(253) 396-1634
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

MARCHE WARD
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200514

**SEA MAR BEHAVIORAL HEALTH - TACOMA
HEALTHCARE FOR THE HOMELESS**

1307 SOUTH 11TH STREET
TACOMA, WA 98405
(253) 682-2180
(206) 764-6286
INFO@SEAMARCHC.ORG
WWW.SEAMAR.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CLARE WALSH
MH CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

052102**SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA**

1415 CENTER STREET
TACOMA, WA 98409
(253) 280-9860
WWW.SEAMAR.ORG

MARCHE WARD
PROGRAM MANAGER

RODSLYN KENNEY
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

016500**SERENITY COUNSELING SERVICES**

5005 PACIFIC HIGHWAY EAST, SUITE 20
FIFE, WA 98424
(253) 922-6522
WWW.SERENITY-COUNSELING.COM

KAREN MYRICK
OWNER/ADMINISTRATOR

KEVIN CURRIE
CLINICAL DIRECTOR

MAILING ADDRESS

5005 PACIFIC HWY E, STE 20
FIFE, WA 98424

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

109600**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - PUYALLUP**

13921 MERIDIAN AVENUE EAST
PUYALLUP, WA 98373
(253) 770-4720

ANDREW TATUM
ADMINISTRATOR

JEFF WILSON
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

012702**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - TACOMA**

4301 SOUTH PINE STREET, SUITE 112
TACOMA, WA 98409
(253) 471-0890

ANDREW TATUM
PROGRAM DIRECTOR

STEVE SMITH
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

PIERCE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT

018902**TACOMA DETOXIFICATION CENTER**

721 SOUTH FAWCETT AVENUE, ROOM 100
TACOMA, WA 98402
(253) 593-2413

MARIAM SSEMAKULA
PROGRAM MANAGER

ROBERTO TERRONES
CLINICAL SUPERVISOR

MAILING ADDRESS

945 S FAWCETT AVE
TACOMA, WA 98402

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

111700**TACOMA TREATMENT SOLUTIONS**

9500 FRONT STREET, SUITE 100
LAKEWOOD, WA 98499
(253) 584-3996
(877) 830-7020

ANTHONY HANLEY
CLINIC DIRECTOR

KATHLYNN R. MILLER
CLINICAL SUPERVISOR

MAILING ADDRESS

9500 FRONT ST, STE 100
LAKEWOOD, WA 98499

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

019000**TACOMA-PIERCE COUNTY TREATMENT SERVICES**

3629 SOUTH D STREET
TACOMA, WA 98418
(253) 798-6527
WWW.TPCHD.ORG

ANDY ROHR
ASSISTANT DIVISION DIRECTOR

AMANDA CRABTREE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

3629 SOUTH D ST MS 501
TACOMA, WA 98418-6813

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

200535**TELECARE - COMMUNITY ALTERNATIVES TEAM**

3901 SOUTH FIFE STREET, SUITE 301
TACOMA, WA 98409
(253) 589-5334
MLORDS@TELECARECORP.COM
WWW.TELECARECORP.COM

JAMES PRESSON
ADMINISTRATOR

AMY MATHESON
CLINICAL DIRECTOR

MAILING ADDRESS

3901 SOUTH FIFE STREET, SUITE 301
TACOMA, WA 98409

PIERCE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
PSYCHIATRIC MEDICATION

200472

UNIVERSITY OF WASHINGTON AUTISM CENTER - TACOMA
1900 COMMERCE STREET, MDS-101
TACOMA, WA 98402
(253) 692-4711
(877) 408-8922
UWAUTISM@UW.EDU
WWW.UWAUTISM.ORG

ANNETTE ESTES
DIRECTOR

ASHLEY PENNEY
DIRECTOR OF ABA SERVICES

MAILING ADDRESS

BOX 357920
SEATTLE, WA 98195-7920

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

010200

VETERANS ADMINISTRATION MEDICAL CENTER - AMERICAN LAKE
9600 VETERANS DRIVE
LAKEWOOD, WA 98493
(253) 582-8440

ELISIA YANASAK, PH.D
ADMINISTRATOR

CARL RIMMELE, PH.D
DIRECTOR

MAILING ADDRESS

ATTN: BLAKE TODER
SEATTLE, WA 98108-1597

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200508

WESTERN STATE HOSPITAL
9601 STEILACOOM BOULEVARD SOUTHWEST
LAKEWOOD, WA 98498

KATHRIN CHRISTENSEN
SUD PROGRAM MANAGER

WWW.DSHS.WA.GOV/BHA/DIVISION-STATE-HOSPITALS/WESTE

MAILING ADDRESS

9601 STEILACOOM BLVD SW
LAKEWOOD, WA 98498

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ASSESSMENT ONLY
SCREENING AND BRIEF INTERVENTION

SAN JUAN

147700

COMPASS HEALTH - LOPEZ ISLAND
46 EADS LANE, SUITE D
LOPEZ ISLAND, WA 98261
(360) 378-2669

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

SAN JUAN

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

147600**COMPASS HEALTH - ORCAS ISLAND**

1286 MOUNT BAKER ROAD, SUITE B-209
EASTSOUND, WA 98245
(360) 378-2669
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

124600**COMPASS HEALTH - SAN JUAN ISLAND**

520 SPRING STREET
FRIDAY HARBOR, WA 98250
(360) 378-2669

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

ANASTASIA ALLES
CHIEF OPERATING OFFICER

LUZELLEN SMITH
PROGRAM MANAGER

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

160600**THE CLEARING**

2687 WEST VALLEY ROAD
FRIDAY HARBOR, WA 98250
(425) 275-8600

MAILING ADDRESS

2687 WEST VALLEY RD
FRIDAY HARBOR, WA 98250

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

JOSEPH H. KOELZER, JR.
CEO

SCOTT JEFFREY ALPERT
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT

SKAGIT

164800

CATHOLIC COMMUNITY SERVICES - BURLINGTON

614 PETERSON ROAD
BURLINGTON, WA 98233
(360) 757-0131

DONNA WELLS
ADMINISTRATOR

LEX RIVERS
REGIONAL MANAGER

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200166

COMPASS HEALTH - MT. VERNON ADULT SERVICES

1100 SOUTH 2ND STREET
MOUNT VERNON, WA 98273
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200167

COMPASS HEALTH - MT. VERNON CHILD & FAMILY CLINIC

1005 SOUTH 3RD STREET
MOUNT VERNON, WA 98273
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

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

SKAGIT

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200519**DIDGWALIC WELLNESS CENTER**

8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221
(360) 588-2800
DIDGWALIC@SWINOMISH.NSN.US
WWW.DIDGWALIC.COM

JOHN STEPHENS
PROGRAMS ADMINISTRATOR

DAWN LEE
DIDGWALIC PROGRAMDIRECTOR/SPONSOR

MAILING ADDRESS

8212 SOUTH MARCH POINT ROAD
ANACORTES, WA 98221

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ASSESSMENT ONLY
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

038000**FOLLMAN AGENCY**

910 SOUTH ANACORTES STREET
BURLINGTON, WA 98233
(360) 755-1125
FRONTDESK@FOLLMANAGENCY.COM
WWW.FOLLMANAGENCY.COM

KATHY A. FOLLMAN
ADMINISTRATOR

JAMES H. FOLLMAN
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

910 S ANACORTES ST
BURLINGTON, WA 98233-3010

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

114600**PHOENIX RECOVERY SERVICES, LLC**

1601 EAST COLLEGE WAY, SUITE A
MOUNT VERNON, WA 98273
(360) 848-8437

CAROL HUNDAHL
ADMINISTRATOR

RACHEL ADAMS
CLINICAL SUPERVISOR

MAILING ADDRESS

1601 E COLLEGE WAY STE A
MOUNT VERNON, WA 98273

SKAGIT

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

005002**PIONEER CENTER NORTH**

1960 THOMPSON DRIVE
SEDRO WOOLLEY, WA 98284
(360) 856-3186

WWW.PIONEERHUMANSERVICES.ORG

MAILING ADDRESS

1960 THOMPSON DR
SEDRO WOOLLEY, WA 98284

ROBERT SULLIVAN
DIRECTOR III

TORY SANDOZ
CLINICAL PRACTICES MANAGER (SUD CS)

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

153000**PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER**

201 LILA LANE
BURLINGTON, WA 98233
(360) 757-7738
KIM.TISDEL@P-H-S.COM

[HTTP://PIONEERHUMANSERVICES.ORG/TREATMENT/CENTERS](http://PIONEERHUMANSERVICES.ORG/TREATMENT/CENTERS)

MAILING ADDRESS

201 LILA LN
BURLINGTON, WA 98233

ROBERT SULLIVAN
DIRECTOR

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS PEER SUPPORT
CRISIS STABILIZATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200264**SEA MAR BEHAVIORAL HEALTH - ANACORTES**

1004 M AVENUE, SUITE 107
ANACORTES, WA 98221

WWW.SEAMAR.ORG

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

SKAGIT

079300 **SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON**
1010 EAST COLLEGE WAY, SUITE 100
MOUNT VERNON, WA 98273
(360) 428-8912

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

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

JULIA LUGO
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200110 **SKAGIT REGIONAL HEALTH**
1415 EAST KINCAID STREET
MOUNT VERNON, WA 98274

MAILING ADDRESS
1415 EAST KINCAID STREET
MOUNT VERNON, WA 98274

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200363 **SUNRISE SERVICES, INC. - CONCRETE MAIN STREET**
45770 MAIN STREET
CONCRETE, WA 98237

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

175700 **SUNRISE SERVICES, INC. - CONCRETE SR 20**
44942 STATE ROUTE 20
CONCRETE, WA 98237
(360) 336-3762

MAILING ADDRESS
PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

SKAGIT

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200279**SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET**

1101 SOUTH 2ND STREET, SUITE A
MOUNT VERNON, WA 98273

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

156600**SUNRISE SERVICES, INC. - MOUNT VERNON COLLEGE WAY**

2500 EAST COLLEGE WAY
MOUNT VERNON, WA 98273
(360) 336-3762
(866) 634-3039

MAILING ADDRESS

2500 E COLLEGE WAY
MOUNT VERNON, WA 98273

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200384**SUNRISE SERVICES, INC. - SEDRO WOOLEY**

10210 COLLINS ROAD
SEDRO WOOLLEY, WA 98284

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

SKAGIT

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

123800

SWINOMISH WELLNESS PROGRAM

17337 RESERVATION ROAD
LA CONNER, WA 98257
(360) 466-7256
(360) 466-7233

JOHN STEPHENS
JSTEPHENS@SWINOMISH.NSN.US

DAWN LEE
PROGRAM/CLINICAL DIRECTOR

MAILING ADDRESS

17337 RESERVATION ROAD
LA CONNER, WA 98257

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200307

TELECARE - NORTH SOUND EVALUATION & TREATMENT

1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284
(360) 854-7400

GREGG VON FEMPE
ADMINISTRATOR

MAILING ADDRESS

1803 NORTH SOUND DRIVE
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

071300

UNITED NORTHWEST RECOVERY CENTER

605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284
(360) 856-6300

BARBARA THOMPSON/COUSINS
DIRECTOR

MAILING ADDRESS

605-B SUNSET PARK DRIVE
SEDRO WOOLLEY, WA 98284

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

126100

UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM

640 STATE ROUTE 20, SUITE A1
SEDRO WOOLLEY, WA 98284
(360) 854-7130

SUSAN DUNTHORNE
SOCIAL SERVICES COORDINATOR

S. GAYLE ROSE
TREATMENT SUPERVISOR

MAILING ADDRESS

25944 COMMUNITY PLAZA WY
SEDRO WOOLLEY, WA 98284

SKAGIT

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

SKAMANIA

010600

SKAMANIA COUNTY COMMUNITY HEALTH

710 SOUTHWEST ROCK CREEK DRIVE
STEVENSON, WA 98648
(509) 427-3850

KIRBY RICHARDS, LICSW
DIRECTOR

TAMARA CISSELL
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 369
STEVENSON, WA 98648

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT

SNOHOMISH

200503

ALL ABOUT RECOVERY SERVICES

1316 WALL STREET, SUITE 2C
EVERETT, WA 98201
(425) 212-9877

ELAINE DREGER
ADMINISTRATOR

JEANNE MARIE POURROY-CARTER
CLINICAL SUPERVISOR

MAILING ADDRESS

1316 WALL STREET, SUITE 2C
EVERETT, WA 98201

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

054400

ALPINE RECOVERY SERVICES, INC. - ARLINGTON

16404 SMOKEY POINT BOULEVARD, SUITE 109
ARLINGTON, WA 98223
(360) 658-1388

LYNN DEE BAUER
ADMINISTRATOR

MAILING ADDRESS

16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

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

SNOHOMISH

MAILING ADDRESS

16404 SMOKEY PT BLVD STE 109
ARLINGTON, WA 98223

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200460**AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -
SNOHOMISH OUTPATIENT**

8625 EVERGREEN WAY, SUITE 100
EVERETT, WA 98208
(425) 322-5581
WWW.ABHSINC.NET

JOHN TAYLOR
ADMINISTRATOR

ANGELA MELLO
CLINICAL DIRECTOR/SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

130100**ASIAN-AMERICAN CHEMICAL DEPENDENCY
TREATMENT SERVICES**

5116 196TH STREET SW, SUITE 101
LYNNWOOD, WA 98036
(425) 776-1290

TAE SON LEE
EXECUTIVE DIRECTOR

MAILING ADDRESS

5116 196TH ST SW STE 101
LYNNWOOD, WA 98036

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

132500**ASSESSMENT AND TREATMENT ASSOCIATES -
MOUNTLAKE TERRACE**

21907 64TH AVENUE W, SUITE 310
MOUNTLAKE TERRACE, WA 98043
(877) 479-5993

STEVE UHRICH
EXECUTIVE DIRECTOR

SHARON FENTON
CLINICAL SUPERVISOR

MAILING ADDRESS

13353 BEL-RED RD STE 101
BELLEVUE, WA 98005

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200533**BASIC STEPS MENTAL HEALTH**

12199 VILLAGE CENTER PLACE, SUITE 203
MUKILTEO, WA 98275
(425) 588-8438
JUDITH@BASICSTEPS.LIFE
WWW.BASICSTEPS.LIFE

JUDITH HOLTZ
ADMINISTRATOR

SCOTT ALPERT
CLINICAL DIRECTOR (MH & SUD)

SNOHOMISH

MAILING ADDRESS

12199 VILLAGE CENTER PLACE, SUITE 203
MUKILTEO, WA 98275

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

125500**BOWEN RECOVERY CENTER**

21818 66TH AVENUE WEST, SUITE 4
MOUNTLAKE TERRACE, WA 98043
(425) 787-5833

LINDA BOWEN
OWNER/ADMINISTRATOR

MAILING ADDRESS

21818 66TH AVE W STE 4
MOUNTLAKE TERRACE, WA 98043

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

113700**BRIDGEWAY TREATMENT SERVICES, LLC**

2013 19TH STREET
EVERETT, WA 98201
(425) 283-5315
INFO@BRIDGEWAYTREATMENT.COM
WWW.BRIDGEWAYTREATMENT.COM

MICHAEL F. MURRAY, JR.
ADMINISTRATOR

MAILING ADDRESS

2013 19TH STREET
EVERETT, WA 98201

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

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 SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

112100**CANYON PARK TREATMENT SOLUTIONS**

22026 20TH AVENUE SE, BUILDING L SUITE 101
BOTHELL, WA 98021
(425) 672-7293

JACE ANGELLY
CLINIC DIRECTOR

MARIA UCHYTIL
CLINICAL SUPERVISOR

SNOHOMISH

MAILING ADDRESS

22026 20TH AVE SE BLDG L STE 101
BOTHELL, WA 98021

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

200140**CATHOLIC COMMUNITY SERVICES - EVERETT AVENUE**

1918 EVERETT AVENUE
EVERETT, WA 98201
(425) 257-2111
WWW.CCSWW.ORG

WILL RICE
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON
REGIONAL CLINICAL DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICESMENTAL 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

WILL RICE
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON
REGIONAL CLINICAL DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

034400**CATHOLIC COMMUNITY SERVICES - EVERETT WETMORE AVENUE**

2610 WETMORE AVENUE
EVERETT, WA 98201
(425) 258-5270

DONNA WELLS
AGENCY DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVE STE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

SNOHOMISH

085700

CATHOLIC COMMUNITY SERVICES - MARYSVILLE

1227 2ND STREET
MARYSVILLE, WA 98270
(360) 651-2366

DONNA WELLS
AGENCY DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

052300

CENTER FOR COUNSELING & HEALTH RESOURCES

547 DAYTON STREET
EDMONDS, WA 98020
(425) 771-5166
WWW.APLACEOFHOPE.COM

BRIAN J. MURPHY
PROGRAM DIRECTOR

LAURA MINOR
TREATMENT DIRECTOR (SUD CS)

MAILING ADDRESS

PO BOX 700
EDMONDS, WA 98020

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

153800

CENTER FOR HUMAN SERVICES - EVERETT

3201 SMITH AVENUE
EVERETT, WA 98201
(206) 362-7282
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG

BERATTA GOMILLION
EXECUTIVE DIRECTOR

RAMONA GRAHAM
SUBSTANCE ABUSE DIRECTOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

162600

**CENTER FOR HUMAN SERVICES - MOUNTLAKE
TERRACE**

21907 64TH AVENUE WEST, SUITE 240
MOUNTLAKE TERRACE, WA 98043
(206) 362-7282

BERATTA GOMILLION
EXECUTIVE DIRECTOR

DANAE BERGMAN & SCOTT LINGLE
CLINICAL SUPERVISORS

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

126000**CENTER FOR HUMAN SERVICES - NORTSHORE 23RD**

22105 23RD DRIVE SE
BOTHHELL, WA 98021
(206) 362-7282
(206) 362-7152

BERATTA GOMILLION
EXECUTIVE DIRECTOR

RAMONA GRAHAM
CLINICAL SUPERVISOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155-5126

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

162500**CENTER FOR HUMAN SERVICES - SILVER LAKE**

10315 19TH AVENUE, UNIT 112
EVERETT, WA 98208
(206) 362-7282
(844) 778-5548
ADMIN@CHS-NW.ORG
WWW.CHS-NW.ORG

BERATTA GOMILLION
EXECUTIVE DIRECTOR

KATRINA HANAWALT
MENTAL HEALTH DIRECTOR

MAILING ADDRESS

17018 15TH AVE NE
SHORELINE, WA 98155

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

030000**CHOICES ASSESSMENT AND RECOVERY, INC.**

11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204
(425) 512-8564

MARIA OVERTON
ADMINISTRATOR

ANTHONY EPPERSON
CLINICAL SUPERVISOR

MAILING ADDRESS

11627 AIRPORT ROAD, SUITE A
EVERETT, WA 98204

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

121100**CLEARVIEW COUNSELING**

1106 COLUMBIA AVENUE
MARYSVILLE, WA 98270
(360) 653-0374

SCOTT WYKES
EXECUTIVE DIRECTOR

SNOHOMISH

MAILING ADDRESS

1106 COLUMBIA AVE
MARYSVILLE, WA 98270

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

172400**COASTAL TREATMENT SERVICES, INC. - EVERETT ADIS**

2520 COLBY AVENUE, SUITE 111
EVERETT, WA 98201
(425) 646-4406

MARGARET FERRIS
ADMINISTRATOR

MAILING ADDRESS

BELLEGROVE PROFESSIONAL BUILDING
BELLEVUE, WA 98004

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL

200181**COMPASS HEALTH - AURORA HOUSE**

20903 70TH AVENUE WEST
EDMONDS, WA 98026
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200176**COMPASS HEALTH - BAILEY CENTER**

3322 BROADWAY
EVERETT, WA 98201
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

DANIELLE BLACKWELL
PROGRAM MANAGER

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200177**COMPASS HEALTH - DAWSON PLACE**

1509 CALIFORNIA STREET
EVERETT, WA 98201
(425) 349-6700

WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

SNOHOMISH

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT

200359**COMPASS HEALTH - EVERETT CHILD & FAMILY CLINIC**

4526 FEDERAL AVENUE, BUILDING 9
EVERETT, WA 98203
(425) 349-8300
(425) 349-8304
HEATHER.FENNELL@COMPASSH.ORG
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200320**COMPASS HEALTH - EVERETT CHILDREN'S INTENSIVE SERVICES**

4526 FEDERAL AVENUE, BUILDING 1
EVERETT, WA 98203
(425) 349-6200
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATIONS OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

166100**COMPASS HEALTH - FEDERAL CAMPUS-BUILDING 4 WEST**

4526 FEDERAL AVENUE, BUILDING 4 WEST
EVERETT, WA 98213
(425) 349-6200
(425) 349-7479
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHARISSA WESTERGARD
DIRECTOR

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT

SNOHOMISH

200180 **COMPASS HEALTH - GREENHOUSE**
2735 10TH STREET
EVERETT, WA 98201
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200308 **COMPASS HEALTH - HAVEN HOUSE**
2613 WEST MARINE VIEW DRIVE
EVERETT, WA 98201
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
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

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

SNOHOMISH

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200174

COMPASS HEALTH - MARYSVILLE ADULT SERVICES

4308 76TH STREET NE
MARYSVILLE, WA 98270
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

200170

COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC

1
1022 WEST MAIN STREET
MONROE, WA 98272
(425) 349-6700
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

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

200534

COMPASS HEALTH - MONROE CHILD & FAMILY CLINIC

2
1016 WEST MAIN STREET
MONROE, WA 98272
(425) 349-8810
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

FRAN DUCKWORTH
PROGRAM MANAGER

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

SNOHOMISH

200111 **COMPASS HEALTH - MUKILTEO E&T**
10710 MUKILTEO SPEEDWAY
MUKILTEO, WA 98275
(425) 349-6200
[HTTP://WWW.COMPASSHEALTH.ORG/CONTACT-US/FEEDBACK-S](http://www.compasshealth.org/contact-us/feedback-s)
[HTTP://WWW.COMPASSHEALTH.ORG/](http://www.compasshealth.org/)

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

TOM SEBASTIAN
CEO

CHRIS STARETS-FOOTE
PROGRAM DIRECTOR

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200175 **COMPASS HEALTH - SMOKEY POINT CHILD & FAMILY CLINIC**
3320 173RD PLACE NE #F1
ARLINGTON, WA 98223
(425) 349-6700
[WWW.COMPASSHEALTH.ORG](http://www.compasshealth.org)

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200169 **COMPASS HEALTH - SNOHOMISH ADULT SERVICES**
221 AVENUE B
SNOHOMISH, WA 98290
(425) 349-6700
[WWW.COMPASSHEALTH.ORG](http://www.compasshealth.org)

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT

200114 **COMPASS HEALTH - SNOHOMISH TRIAGE**
3322 BROADWAY
EVERETT, WA 98201

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

TOM SEBASTIAN
CEO

CHRIS STARETS-FOOTE
PROGRAM DIRECTOR

MENTAL HEALTH SERVICES:
TRIAGE - VOLUNTARY

SNOHOMISH

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

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

147300 **DOC - MONROE CORRECTIONS CENTER - WSR
(WASHINGTON STATE REFORMATORY)**
16700 177TH AVENUE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

076800 **DOC - TWIN RIVERS CORRECTIONS CENTER**
16774 170TH DRIVE SOUTHEAST
MONROE, WA 98272
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

200452 **EVERETT TREATMENT SERVICES**
7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203
(425) 347-9070
EVERETT.TREATMENT_ETTS@HOTMAIL.COM
WWW.EVERETTSTREATMENTSERVICES.COM

MARGARET SPENCER
ADMINISTRATOR

ROBERT FROMM
CLINICAL SUPERVISOR

SNOHOMISH

MAILING ADDRESS

7207 EVERGREEN WAY, SUITE M
EVERETT, WA 98203

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

010802**EVERGREEN RECOVERY CENTERS - BUILDING B**

2601 SUMMIT AVENUE, BUILDING B
EVERETT, WA 98201
(425) 258-2407
ASKUS@EVERGREENMANOR.ORG
WWW.EVERGREENMANOR.ORG

LINDA GRANT
CEO

DALLARIE HORNE-MOSBY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

010801**EVERGREEN RECOVERY CENTERS - BUILDING C**

2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407

LINDA GRANT
EXECUTIVE DIRECTOR

JULIA LUGO
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

089100**EVERGREEN RECOVERY CENTERS - EVERETT DETOX**

2601 SUMMIT AVENUE, BUILDING C
EVERETT, WA 98201
(425) 258-2407
(425) 258-3255

LINDA GRANT
EXECUTIVE DIRECTOR

JIM UPTON
DETOX/HOUSING MANAGER

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

010803**EVERGREEN RECOVERY CENTERS - EVERETT
OUTPATIENT**

2732 GRAND AVENUE
EVERETT, WA 98201
(425) 259-5842

LINDA GRANT
EXECUTIVE DIRECTOR

DANIELLE SHANDERA
CLINICAL MANAGER

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

162800**EVERGREEN RECOVERY CENTERS - LYNNWOOD****DETOX**

20508 56TH AVENUE WEST
LYNNWOOD, WA 98036
(425) 678-1390
CHAYES@EVERGREENRC.ORG
WWW.EVERGREENMANOR.ORG

SCOTT JOHNSON
DIRECTOR OF DETOX SERVICES

ROBERT MCCULLOUGH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

133600**EVERGREEN RECOVERY CENTERS - LYNNWOOD****OUTPATIENT**

3810 196TH STREET SW, SUITE 11
LYNNWOOD, WA 98036
(425) 248-4900

LINDA GRANT
EXECUTIVE DIRECTOR

ROBERT MCCULLOUGH
SUD CLINICAL SUPERVISOR/PROGRAM MANAGER

MAILING ADDRESS

PO BOX 12598
EVERETT, WA 98206-2598

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

011200**EVERGREENHEALTH RECOVERY CENTER, MONROE**

17880 147TH STREET SE
MONROE, WA 98272
(360) 794-1405

DAVID ANDERSON
MANAGER

MAILING ADDRESS

PO BOX 646
MONROE, WA 98272-0646

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

200194**FAIRFAX BEHAVIORAL HEALTH - EVERETT E&T**

916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

MAILING ADDRESS

916 PACIFIC AVENUE, 7TH FLOOR
EVERETT, WA 98201

SNOHOMISH

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200349 **FAIRFAX BEHAVIORAL HEALTH - MONROE E&T**
14701 179TH AVENUE SE
MONROE, WA 98272
(425) 821-2000
(800) 435-7221
JO-ELLEN.WATSON@UHSINC.COM
[HTTP://WWW.FAIRFAXHOSPITAL.COM/](http://www.fairfaxhospital.com/)

RICHARD GEIGER
CEO

DR. SAMIR AZIZ
MEDICAL DIRECTOR

MAILING ADDRESS
10200 NORTHEAST 132ND STREET
KIRKLAND, WA 98034

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200221 **IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - MOUNTLAKE**
6505 218TH STREET SW, SUITE 9
MOUNTLAKE TERRACE, WA 98043

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

DANETTE DARROW
PROGRAM DIRECTOR

MAILING ADDRESS
5709 W SUNSET HWY STE 100
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200078 **INSTITUTE FOR FAMILY DEVELOPMENT - EVERETT**
14 EAST CASINO ROAD, BUILDING D
EVERETT, WA 98208

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS
34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

113900 **ISLAND CROSSING COUNSELING SERVICES**
21123 SMOKEY POINT BOULEVARD
ARLINGTON, WA 98223
(360) 652-9640

KELLY CAMPBELL
INTERIM ADMINISTRATOR

JACKIE ROTH
CLINICAL SUPERVISOR

MAILING ADDRESS
21123 SMOKEY POINT BLVD
ARLINGTON, WA 98223

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
OPIATE SUBSTITUTION TREATMENT

SNOHOMISH

200303 **KINDERING - BOTHELL**
19801 NORTH CREEK PARKWAY, SUITE 200
BOTHELL, 98011
(425) 747-4004
INFO@KINDERING.ORG
WWW.KINDERING.ORG

LISA GREENWALD
CHIEF PROGRAM OFFICER

SHAFER CRISSEY
EARLY CHILDHOOD SPECIAL EDUCATOR AND ABA CLINICAL

MAILING ADDRESS
19801 NORTH CREEK PARKWAY, SUITE 200
BOTHELL, 98011

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

124500 **LA ESPERANZA HCS - LYNNWOOD**
20815 67TH AVENUE WEST, SUITE 201
LYNNWOOD, WA 98036
(425) 248-4534
(425) 248-4535

ZOILA SARITAMA
ADMINISTRATOR

ALVIN CURRY
CLINICAL SUPERVISOR

MAILING ADDRESS
20815 67TH AVE W STE 201
LYNNWOOD, WA 98036

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

009401 **LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS**
7935 LAKE BALLINGER WAY
EDMONDS, WA 98026-9166
(425) 670-3664

MARY KAY OSHMAN
ADMINISTRATOR

CATHY WERDEN
CLINICAL SUPERVISOR

MAILING ADDRESS
10322 NE 132ND ST
KIRKLAND, WA 98034-2829

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

004603 **LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT**
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204
(425) 267-9573
WWW.LAKESIDEMILAM.COM

MAUREEN FLOREA
ADMINISTRATOR

TOM BLANFORD
CLINICAL SUPERVISOR

MAILING ADDRESS
9930 EVERGREEN WAY, SUITE 103
EVERETT, WA 98204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SNOHOMISH

200352 **MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH**
2621 BICKFORD AVENUE, SUITE C-D
SNOHOMISH, WA 98290
(206) 453-4882
WWW.MAGNOLIABEHAVIORTHERAPY.COM

MAILING ADDRESS
3214 W MCGRAW ST STE 212
SEATTLE, WA 98199

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

178300 **NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC**
- MAIN
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270
(206) 407-3333
(360) 618-6685
NEWLIFERECOVERY@HOTMAIL.COM
WWW.RECOVERNEWLIFE.COM

MAILING ADDRESS
5019 GROVE STREET, SUITE 103A
MARYSVILLE, WA 98270

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

DIANE BUFORD
CEO

MELANIE KEPLINGER
CLINICAL SUPERVISOR

114400 **PORT GARDNER BAY RECOVERY, INC.**
2722 COLBY AVENUE, SUITE 515
EVERETT, WA 98201
(425) 252-4656

MAILING ADDRESS
2722 COLBY AVE STE 515
EVERETT, WA 98201

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

KIMBERLI MCCABE
ADMINISTRATOR

035700 **PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL**
HEALTH SERVICES
916 PACIFIC AVENUE
EVERETT, WA 98206
(425) 258-7390
(425) 258-7798

MAILING ADDRESS
PO BOX 1067
EVERETT, WA 98206

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

KRISTEN HOPSTAD
MANAGER

TIFFANIE DAER
CLINICAL SUPERVISOR

SNOHOMISH

164200

RECOVERY MATTERS, LLC
722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290
(360) 568-9396
RECOVERYMATTERS@OUTLOOK.COM
WWW.RECOVERYMATTERSLLC.COM

KIMBERLY SLICK
ADMINISTRATOR/EXECUTIVE DIRECTOR

MAILING ADDRESS

722 AVENUE D, SUITE 5
SNOHOMISH, WA 98290

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200373

REHAB WITHOUT WALLS, INC.
20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036
(425) 712-0802
ANGIE.HENDRICK@RESCARE.COM
WWW.REHABWITHOUTWALLS.COM/BMAC

MICHAEL MCCORMICK
EXECUTIVE DIRECTOR

ELLIS "GRANT" THOMPSON
DIRECTOR OF CLINICAL MANAGEMENT

MAILING ADDRESS

20818 44TH AVENUE W, SUITE 270
LYNNWOOD, WA 98036

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

166400

RYTHER - MUKILTEO
315 LINCOLN AVE, SUITE C1
MUKILTEO, WA 98275
(206) 525-5050

KAREN BRADY
CEO/EXECUTIVE DIRECTOR

YVETTE LUDVIK - JESSICA GLOVER
CLINICAL SUPERVISORS

MAILING ADDRESS

2400 NE 95TH ST
SEATTLE, WA 98115

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

144800

SAUK-SUIATTL INDIAN TRIBE
5318 CHIEF BROWN LANE
DARRINGTON, WA 98241
(360) 436-2842
(360) 436-2212

HARRIET YURCHAK, BSW, RC
CLINICAL DIRECTOR

LYNDEE RETZLAFF
CD TREATMENT SUPERVISOR

MAILING ADDRESS

5318 CHIEF BROWN LN
DARRINGTON, WA 98241

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SNOHOMISH

052101	SEA MAR BEHAVIORAL HEALTH - EVERETT 5007 CLAREMONT WAY EVERETT, WA 98203 (425) 609-5505 (425) 347-5415	CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH ELIANA HAFFNER CLINICAL SUPERVISOR
	MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108	
	CERTIFIED SERVICES <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT	<u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT
200334	SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY 1920 100TH STREET, SUITE A2 EVERETT, WA 98208 (425) 312-0277 WWW.SEAMAR.ORG	CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH SUSAN "NIKKI" GOLDEN CLINICAL SUPERVISOR
	MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108	
	CERTIFIED SERVICES	<u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT FAMILY THERAPY GROUP THERAPY INDIVIDUAL TREATMENT PSYCHIATRIC MEDICATION
139100	SEA MAR BEHAVIORAL HEALTH - LYNNWOOD 4111 ALDERWOOD MALL BOULEVARD LYNNWOOD, WA 98036 (425) 977-2560 INFO@SEAMARCHC.ORG WWW.SEAMARCHC.ORG	CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH
	MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108	
	CERTIFIED SERVICES <u>SUBSTANCE USE DISORDER SERVICES:</u> ALCOHOL AND DRUG INFORMATION SCHOOL DUI ASSESSMENT LEVEL I OUTPATIENT LEVEL II INTENSIVE OUTPATIENT	<u>MENTAL HEALTH SERVICES:</u> BRIEF INTERVENTION TREATMENT CASE MANAGEMENT INDIVIDUAL TREATMENT LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT PSYCHIATRIC MEDICATION RECOVERY PEER SUPPORT
104600	SEA MAR BEHAVIORAL HEALTH - MONROE 14090 FRYELANDS BOULEVARD SE, SUITE 347 MONROE, WA 98272 (360) 805-3122 INFO@SEAMARCHC.ORG WWW.SEAMARCHC.ORG	CLAUDIA D'ALLEGRI VICE PRESIDENT OF BEHAVIORAL HEALTH ELIANA HAFFNER SUD CLINICAL SUPERVISOR
	MAILING ADDRESS 8915 14TH AVE S SEATTLE, WA 98108	

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

146200**SMOKEY POINT BEHAVIORAL HOSPITAL**

3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271
(844) 202-5555
KMERCIER@SMOKEYPOINTBEHAVIORALHOSPITAL.CO
M
WWW.SMOKEYPOINTBEHAVIORALHOSPITAL.COM

MATT CROCKETT
CEO

CHRISTINE COSTELLO
DIRECTOR OF CLINICAL SERVICES (MH CLIN SUP)

MAILING ADDRESS

3955 156TH STREET NORTHEAST
MARYSVILLE, WA 98271

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN

200112**SNOHOMISH COUNTY HUMAN SERVICES**

3000 ROCKERFELLER AVENUE
EVERETT, WA 98201
(425) 388-7402
[HTTP://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-](http://SNOHOMISHCOUNTYWA.GOV/427/COMMUNITY-MENTAL-)

KEN STARK
ADMINISTRATOR

MAILING ADDRESS

300 ROCKERFELLER AVE, MS 305
EVERETT, WA 98201

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION

081300**STILLAGUAMISH TRIBE OF INDIANS**

17014 59TH AVENUE NE
ARLINGTON, WA 98223
(360) 435-3985

TODD REDD
ADMINISTRATOR

MAILING ADDRESS

17014 59TH AVE NE
ARLINGTON, WA 98223

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

174400**SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY**

1718 BROADWAY
EVERETT, WA 98201
(425) 595-5200

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

SNOHOMISH

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200381**SUNRISE SERVICES, INC. - EVERETT BROADWAY**

1520 BROADWAY
EVERETT, WA 98201
(425) 493-5870
(877) 493-5890
INFO@SUNRISEEMAIL.COM
SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

168100**SUNRISE SERVICES, INC. - EVERETT MAIN**

1021 NORTH BROADWAY
EVERETT, WA 98201
(425) 493-5800

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200324**SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE**

6505 218TH STREET SW, SUITES 6 & 7
MOUNTLAKE TERRACE, WA 98043

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

SNOHOMISH

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200318

SUNRISE SERVICES, INC. - STANWOOD

9527 271ST STREET NW
STANWOOD, WA 98292
(360) 926-8490
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200121

SWEDISH EDMONDS E&T

21601 76TH AVENUE WEST
EDMONDS, WA 98026
(425) 640-4090

MAILING ADDRESS

21601 76TH AVENUE WEST
EDMONDS, WA 98026

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

148000

THE JUANITA CENTER LLC

627 5TH STREET, SUITE 100A
MUKILTEO, WA 98275
(425) 328-9528

G. RAYMOND MCCULLOUGH
ADMINISTRATOR/DIRECTOR

MAILING ADDRESS

PO BOX 491
MUKILTEO, WA 98275

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

111200

THERAPEUTIC HEALTH SERVICES - EVERETT

9930 EVERGREEN WAY, BUILDING Z150
EVERETT, WA 98204
(425) 347-5121

MARLI BRICKER
BRANCH MANAGER

NORMAN JOHNSON
EXECUTIVE DIRECTOR

SNOHOMISH

MAILING ADDRESS

1116 SUMMIT AVENUE
SEATTLE, WA 98101

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

024000**TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES**

2821 MISSION HILL ROAD
TULALIP, WA 98270
(360) 716-4400
(360) 716-4343

CARRIE JONES (INTERIM)
ADMINISTRATOR

GINA SKINNER
CDP CLINICAL SUPERVISOR

MAILING ADDRESS

2821 MISSION HILL RD
TULALIP, WA 98270

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200135**VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES**

2802 BROADWAY
EVERETT, WA 98201
(425) 609-2210

PHIL D. SMITH
PRESIDENT/CEO

MAILING ADDRESS

2802 BROADWAY
EVERETT, WA 98201

CERTIFIED SERVICESMENTAL 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

SPOKANE

107700

ADEPT ASSESSMENT CENTER - SPOKANE

1321 NORTH ASH STREET
SPOKANE, WA 99201
(509) 327-3120
(509) 327-3163

SHANA WINDHORST
ADMINISTRATOR

JAMIE ZBORAC
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.ABHSINC.NET

ANGELA MELLO
DIRECTOR OF CLIENT SERVICES

LAURA LONG
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

134200

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -

MISSION

12715 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 232-5766
(866) 729-8038

ANGELA MELLO
DIRECTOR OF CLIENT SERVICES

DEXTER BAKER, CARRIE SUAZO
CLINICAL SUPERVISORS

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
RESIDENTIAL TREATMENT FACILITY

177200

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -

SPOKANE OUTPATIENT

715 EAST SPRAGUE AVENUE #107
SPOKANE, WA 99202
(509) 232-5766

ROSE MEAD
ADMINISTRATOR

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

SPOKANE

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

110400**AMERICAN INDIAN COMMUNITY CENTER**

610 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207
(509) 535-0886
(800) 578-0886
LINDAL@AICCINC.ORG
WWW.AICCINC.ORG

FRANCIS R. DEVEREAUX
EXECUTIVE DIRECTOR

CAROL GRABOWSKI
CLINICAL SUPERVISOR

MAILING ADDRESS

610 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

129800**AT PARR OUTPATIENT SERVICES, LLC**

124 EAST AUGUSTA AVENUE, SUITE 100
SPOKANE, WA 99207
(509) 325-0777

KIMBERLEY A. PARR
ADMINISTRATOR

MAILING ADDRESS

124 E. AUGUSTA AVENUE, 100
SPOKANE, WA 99207-2481

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

160200**BREAKTHROUGH RECOVERY GROUP**

11711 EAST SPRAGUE AVENUE, SUITE D4
SPOKANE VALLEY, WA 99206
(509) 927-6838

LISA PARKER
ADMINISTRATOR

ANDREA FORAN
CLINICAL SUPERVISOR

MAILING ADDRESS

11711 E SPRAGUE AVE STE D4
SPOKANE VALLEY, WA 99206

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

117400**CAMAS PATH BHS**

934 SOUTH GARFIELD ROAD
AIRWAY HEIGHTS, WA 99001
(509) 789-7630
[HTTPS://WWW.KALISPELTRIBE.COM](https://www.kalispeltribe.com)

MELISSA HURT MORAN
CHEMICAL DEPENDENCY CLINICAL MANAGER

SHELLEY ETHRINGTON
CLINICAL SUPERVISOR

MAILING ADDRESS

934 S GARFIELD RD
AIRWAY HEIGHTS, WA 99001

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200491**CATHOLIC CHARITIES COUNSELING PROGRAM - HOLY NAMES**

2911 WEST FORT WRIGHT DRIVE
SPOKANE, WA 99210
(509) 358-4250
MIRWIN@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESSPOKANE.ORG

JERRY SCHWAB
DIRECTOR

JEFF BRENO
ASSISTANT DIRECTOR

MAILING ADDRESS

2911 WEST FORT WRIGHT DRIVE
SPOKANE, WA 99210

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

200017**CATHOLIC CHARITIES COUNSELING PROGRAM - MAIN**

12 EAST 5TH AVENUE
SPOKANE, WA 99210
(509) 358-4250
DEVELOPMENT@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESSPOKANE.ORG

ROB MCCANN
EXECUTIVE DIRECTOR

MAILING ADDRESS

PO BOX 2253
SPOKANE, WA 99210

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200457**CATHOLIC CHARITIES COUNSELING PROGRAM - ST. ANNE'S**

25 WEST 5TH AVENUE
SPOKANE, WA 99210
(509) 358-4250
MIRWIN@CCSPOKANE.ORG
WWW.CATHOLICCHARITIESSPOKANE.ORG

JERRY SCHWAB
DIRECTOR

JEFF BRENO
ASSISTANT DIRECTOR

MAILING ADDRESS

25 WEST 5TH AVENUE
SPOKANE, WA 99210

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

SPOKANE

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

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC STAPLETON
CLINICAL SUPERVISOR

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

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC DOTSON
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT

200313 **CHILDREN'S HOME SOCIETY OF WASHINGTON -
SPOKANE WEST PLAINS**
8727 WEST HIGHWAY 2
SPOKANE, WA 99224
(509) 747-4174
WWW.CHS-WA.ORG

MAILING ADDRESS
2323 N DISCOVERY PLACE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

LIBBY HEIN
CHIEF PROGRAM OFFICER

ERIC DOTSON
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT

025500 **COLONIAL CLINIC**
910 NORTH WASHINGTON STREET, SUITE 210
SPOKANE, WA 99201
(509) 327-9831

MAILING ADDRESS
910 N WASHINGTON ST., STE 210
SPOKANE, WA 99201

THOMAS HUSTON STOLZ
TREATMENT DIRECTOR

PATRICK HENNESSY
CLINICAL SUPERVISOR

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

163600**COURAGE TO CHANGE**

13015 WEST 14TH AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 863-4233
WWW.COURAGETOCHANGEWESTPLAINS.COM

ANGELA SILVA
DIRECTOR OF TREATMENT

MELISSA HURT-MORAN
DIRECTOR OF OPERATIONS

MAILING ADDRESS

PO BOX 212
MEDICAL LAKE, WA 99022

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200481**CUBHOUSE**

14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR

COLIN HUSFLOEN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

14819 EAST MISSION AVENUE
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

RECOVERY HOUSE

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

011601**DAYBREAK YOUTH SERVICES - SPOKANE INPATIENT**

628 SOUTH COWLEY STREET
SPOKANE, WA 99202
(509) 624-3227
(509) 927-1688
WWW.DAYBREAKYOUTHSERVICES.ORG

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

LISA BROOKS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
INPATIENT EVALUATION AND TREATMENT – CHILDREN
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

SPOKANE

011600 **DAYBREAK YOUTH SERVICES - SPOKANE OUTPATIENT**
200 NORTH MULLAN ROAD, SUITE 120
SPOKANE VALLEY, WA 99206
(509) 927-1688
WWW.DAYBREAKYOUTHSERVICES.ORG

MAILING ADDRESS
960 E 3RD AVE
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

ANNETTE KLINEFELTER
EXECUTIVE DIRECTOR

DAWN FLEES
SUD CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY SUPPORT WRAPAROUND FACILITATION

161800 **DIRKERS & ASSOCIATES BEHAVIORAL HEALTH**
611 EAST 2ND AVENUE, SUITE B
SPOKANE, WA 99202
(509) 822-7395
DIRKERSANDASSOCIATES@GMAIL.COM
DIRKERSANDASSOCIATES.COM

MAILING ADDRESS
611 EAST 2ND AVENUE, SUITE B
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

CHRISTOPHER DAVID DIRKERS
ADMINISTRATOR/OWNER

KIM STANKOVICH
CLINICAL SUPERVISOR

166600 **DISCOVERY COUNSELING GROUP**
222 WEST MISSION AVENUE, SUITE 30
SPOKANE, WA 99201
(509) 413-1193

MAILING ADDRESS
222 W MISSION AVE, SUITE 30
SPOKANE, WA 99201

CERTIFIED SERVICES

MELISSA MACE
EXECUTIVE DIRECTOR

JADE BRUNNEMANN, CP60367103
ADIS INSTRUCTOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

075700 **DOC - AIRWAY HEIGHTS CORRECTIONS CENTER**
11929 WEST SPRAGUE AVENUE
AIRWAY HEIGHTS, WA 99001
(509) 244-6700

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

SPOKANE

076000

DOC - BROWNSTONE WORK RELEASE

223 SOUTH BROWNE STREET
SPOKANE, WA 99201
(360) 725-8423
COURTNEY.EVERSON@DOC.WA.GOV
WWW.DOC.WA.GOV

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

026802

DOC - ELEANOR CHASE WORK RELEASE

WEST 427 7TH AVENUE
SPOKANE, WA 99204
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

089300

EXCELSIOR YOUTH CENTER - MAIN

3754 WEST INDIAN TRAIL ROAD
SPOKANE, WA 99208
(509) 328-7041
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

ANDREW HILL
CEO

MELISSA MELSON
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSE
RECOVERY HOUSING SUPPORT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

200478

EXCELSIOR YOUTH CENTER - SPOKANE BRANCH

2911 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224
(509) 328-7041
(800) 466-5574
CONTACT@4EYC.ORG
WWW.EXCELSIORYOUTHCENTER.COM

ANDREW HILL
CEO

SARA SCHUMACHER
VP BH SERVICES (MH CLINICAL SUPERVISOR)

SPOKANE

MAILING ADDRESS

3754 W INDIAN TRAIL RD
SPOKANE, WA 99208

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200430**FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD**

505 NORTH ARGONNE ROAD, SUITE B206
SPOKANE VALLEY, WA 99212
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO

JANNO SCHEER
WISE SUPERVISOR II

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

012200**FRONTIER BEHAVIORAL HEALTH - BOONE**

127 WEST BOONE AVENUE
SPOKANE, WA 99201
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIETGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202-1586

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

SPOKANE

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

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200193

FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB

2102 EAST SPRAGUE AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CLUBHOUSE
CRISIS OUTREACH
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT

200208

FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&T

505 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99207

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

SPOKANE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

200199

FRONTIER BEHAVIORAL HEALTH - HOWARD STREET

7 SOUTH HOWARD STREET, SUITE 321
SPOKANE, WA 99201
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200200

FRONTIER BEHAVIORAL HEALTH - HULSKAMP BUILDING

103 EAST FIRST AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200201

FRONTIER BEHAVIORAL HEALTH - IOP SERVICES

17 EAST FIRST AVENUE
SPOKANE, WA 99202

JEFF THOMAS
CEO/ADMINISTRATOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

SPOKANE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200418

FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET

400 SOUTH JEFFERSON STREET, SUITE 114
SPOKANE, WA 99204
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO

TERESA HAEG
WISE SUPERVISOR II

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200429

FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD

5901 NORTH LIDGERWOOD STREET, SUITE 115
SPOKANE, WA 99208
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

AILEEN HETRICK
MH CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SPOKANE

200197

FRONTIER BEHAVIORAL HEALTH - MAIN

107 SOUTH DIVISION STREET
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIETGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200204

FRONTIER BEHAVIORAL HEALTH - NORTH PINES

317 NORTH PINES ROAD
SPOKANE VALLEY, WA 99206
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200362

FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE

124 EAST PACIFIC AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

PAT ANTHONY
MH CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

SPOKANE

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200202**FRONTIER BEHAVIORAL HEALTH - PACT**

505 EAST NORTH FOOTHILLS DRIVE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

STEFANIE TIETGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200203**FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING**

5125 NORTH MARKET STREET
SPOKANE, WA 99217
(509) 838-4651
WWW.FBHWA.ORG

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN MRAZ
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

SPOKANE

200360 **FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE**
124 EAST SHORT AVENUE
SPOKANE, WA 99202
(509) 838-4651
WWW.FBHWA.ORG

MAILING ADDRESS
107 S DIVISION ST
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

JEFF THOMAS
CEO/ADMINISTRATOR

NATHAN CORDUAN
MH CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200206 **FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES**
1401 NORTH CALISPEL STREET
SPOKANE, WA 99201

MAILING ADDRESS
107 SOUTH DIVISION STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

JEFF THOMAS
CEO/ADMINISTRATOR

MENTAL HEALTH SERVICES:
TRIAGE - VOLUNTARY

038800 **GATEWAY COUNSELING SERVICES**
140 SOUTH ARTHUR STREET, SUITE 665
SPOKANE, WA 99202
(509) 532-8855

MAILING ADDRESS
140 S ARTHUR ST STE 665
SPOKANE, WA 99202

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

NEAL HAYDEN
ADMINISTRATOR/OWNER

KIMBERLY STANKOVICH
CLINICAL SUPERVISOR

200219 **IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SPOKANE MAIN**
5709 WEST SUNSET HIGHWAY, SUITE 100
SPOKANE, WA 99224

MAILING ADDRESS
5709 WEST SUNSET HIGHWAY, SUITE 100
SPOKANE, WA 99224

DR. CHARNA MINTZ
EXECUTIVE DIRECTOR

RICK JUSTUS
PROGRAM DIRECTOR

SPOKANE

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200080

INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE

720 WEST BOONE AVENUE, SUITE 101
SPOKANE, WA 99201

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

019701

ISABELLA HOUSE

2308 WEST 3RD AVENUE
SPOKANE, WA 99201
(509) 624-1244

ART JACOBS
ADMINISTRATOR

FARIBA NIKDEL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

172200

KAREN'S HOUSE

4324 NORTH JEFFERSON STREET
SPOKANE, WA 99205
(509) 477-4631
WWW.SPOKANERECOVERY.ORG

BLAKE REDDING
INTERIM EXECUTIVE DIRECTOR

CHRISTINA MACLACHLAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

4324 N JEFFERSON ST
SPOKANE, WA 99205

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

RECOVERY HOUSE

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200087

LUTHERAN COMMUNITY SERVICES NORTHWEST - SPOKANE

210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201
(509) 797-8224
LCSNW@LCSNW.ORG
WWW.LCSNW.ORG

HEIKE LAKE
AREA DIRECTOR

SHARON O'BRIEN
PROGRAM SUPERVISOR

SPOKANE

MAILING ADDRESS

210 WEST SPRAGUE AVENUE
SPOKANE, WA 99201

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

055600**N.A.T.I.V.E. PROJECT**

1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831
(509) 325-5502

TONI LODGE
EXECUTIVE DIRECTOR

CLAIRE ABERASTURI
BEHAVIORAL HEALTH DIRECTOR (MH & SUD CS)

MAILING ADDRESS

1803 WEST MAXWELL AVENUE
SPOKANE, WA 99201-2831

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

019702**NEW HORIZON COUNSELING SERVICES**

701 EAST 3RD AVENUE
SPOKANE, WA 99202
(509) 838-6092

WWW.NEWHORIZONCARECENTERS.ORG

ALICE BUCKLES
PROGRAM ADMINISTRATOR

KELLY DUKE
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

011401**NEW HORIZON COUNSELING SERVICES - VALLEY OFFICE**

15407 EAST MISSION AVENUE, SUITE 100
SPOKANE VALLEY, WA 99037
(509) 927-1543

ALICE BUCKLES
PROGRAM ADMINISTRATOR

BRADLEY EYLAR
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 4627
SPOKANE, WA 99220-0627

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200245**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - NINE MILE FALLS**

5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026
(509) 465-2200
WWW.CO.STEVENS.WA.US/COUNSELING

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5998 HIGHWAY 291, SUITE 2
NINE MILE FALLS, WA 99026

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200305**NORTHWEST AUTISM CENTER - SPOKANE BRANCH**

825 HAWTHORNE ROAD
SPOKANE, 99218
(509) 777-3309
(509) 777-3553
JIDE@NWAUTISM.ORG
WWW.NWAUTISM.ORG

JIM MATTHEWS
PROGRAM MANAGER

DANA STEVENS
DIRECTOR OF CLINICAL SERVICES

MAILING ADDRESS

825 HAWTHORNE ROAD
SPOKANE, 99218

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200249**NORTHWEST AUTISM CENTER - SPOKANE MAIN**

528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202
(509) 328-1582
INFO@NWAUTISM.ORG
[HTTP://SANDBOX.NWAUTISM.ORG](http://SANDBOX.NWAUTISM.ORG)

ADAM KOGLER
OPERATIONS AND FINANCIAL OFFICER

MAILING ADDRESS

528 EAST SPOKANE FALLS BOULEVARD
SPOKANE, WA 99202

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

SPOKANE

098700

PARTNERS WITH FAMILIES AND CHILDREN

1321 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(509) 473-4810
WWW.PARTNERSWITHFAMILIES.ORG

CAROL PLISCHKE
EXECUTIVE DIRECTOR

KOLLEEN SEWARD
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

1321 W BROADWAY AVE
SPOKANE, WA 99201

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

200093

PASSAGES FAMILY SUPPORT

1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202
(509) 892-9241
INFORMATION@PASSAGESFS.ORG
WWW.PASSAGES-SPOKANE.ORG

REBECCA BATES
EXECUTIVE DIRECTOR

MISTY SOUTHALL
CLINICAL SUPERVISOR

MAILING ADDRESS

1002 NORTH SUPERIOR STREET
SPOKANE, WA 99202

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200355

PATHWAYS OF WASHINGTON, INC.

1050 NORTH ARGONNE ROAD, SUITE 102
SPOKANE VALLEY, WA 99212
(509) 209-8990
PHSWA@PATHWAYS.COM
WWW.PATHWAYS.COM

AMIKA TANIGUCHI
STATE DIRECTOR

MARK MCENDERFER
TEAM LEAD

MAILING ADDRESS

1050 NORTH ARGONNE ROAD, SUITE 102
SPOKANE VALLEY, WA 99212

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

111600

PIONEER CENTER EAST

3400 WEST GARLAND AVENUE
SPOKANE, WA 99205
(509) 325-2355

TENNILLE LIGHTFOOT
DIRECTOR

KEITH BRYANT
CLINICAL PRACTICES MANAGER

SPOKANE

MAILING ADDRESS

PO BOX 9838
SPOKANE, WA 99209

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL
WITHDRAWAL MANAGEMENT

172900**PIONEER COUNSELING SERVICES - SPOKANE**

910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201
(509) 325-7232

KATRINA HENDRICKSON
DIRECTOR

CARA STRANGE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

910 WEST BOONE AVENUE, SUITE 201
SPOKANE, WA 99201

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200439**PIONEER HUMAN SERVICES - SPOKANE RESIDENTIAL REENTRY CENTER**

925 WEST BROADWAY AVENUE
SPOKANE, WA 99201
(253) 274-0484

[HTTP://PIONEERHUMANSERVICES.ORG](http://PIONEERHUMANSERVICES.ORG)

NANCY BLACKMAN
CLINICAL MANAGER

MAILING ADDRESS

758 ST HELENS AVE
TACOMA, WA 98402

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

200100**PROVIDENCE SACRED HEART MEDICAL CENTER - E&T**

101 WEST 8TH AVENUE
SPOKANE, WA 99204

MAILING ADDRESS

101 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT
INPATIENT EVALUATION AND TREATMENT - CHILDREN

200099**PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT**

101 WEST 8TH AVENUE
SPOKANE, WA 99204

SPOKANE

MAILING ADDRESS

101 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
PSYCHIATRIC MEDICATION

200528**PSYCHIATRIC SOLUTIONS**

1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216
(509) 863-9779
SUPPORT@PSYCHSOLUTIONS.COM
WWW.PSYCHSOLUTIONS.COM

JOSEPH JUDD
EXECUTIVE DIRECTOR

MAILING ADDRESS

1620 NORTH MAMER ROAD, BUILDING B100
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

035100**RIVERSIDE RECOVERY CENTER, INC.**

3710 NORTH MONROE STREET
SPOKANE, WA 99205
(509) 328-5234

CHRIS MULLIN
EXECUTIVE DIRECTOR

JAIME PETERSON
CLINICAL SUPERVISOR

MAILING ADDRESS

3710 N MONROE ST
SPOKANE, WA 99205

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

176600**ROYAL LIFE CENTERS, LLC - CASCADE**

14525 NORTH NEWPORT HIGHWAY
MEAD, WA 99021
(509) 340-9643
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

TERESA RORIE
PROGRAM DIRECTOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
INDIVIDUAL TREATMENT

176700**ROYAL LIFE CENTERS, LLC - SPOKANE DETOX**

524 EAST FRANCIS AVENUE
SPOKANE, WA 99208
(509) 919-4150
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

TERESA RORIE
PROGRAM DIRECTOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

200388**SOAR BEHAVIOR SERVICES**

CONFIDENTIAL LOCATION
(509) 999-5657
INFO@SOARBEHAVIOR.COM
WWW.SOARBEHAVIOR.COM

JAMES MATTHEWS
CLINICAL DIRECTOR

MAILING ADDRESS**CERTIFIED SERVICES**MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

120300**SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC.**

- SPOKANE
104 SOUTH FREYA STREET BLUE FLAG BUILDING,
SUITE 206
SPOKANE, WA 99202
(509) 927-3668

ANDREW TATUM
ADMINISTRATOR

BRAD BRESOLIN
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 111297
TACOMA, WA 98411

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

012102**SPARC - CHRISTOPH HOUSE**

1403 WEST 7TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-3251

MARK BROWNLOW
ADMINISTRATOR

BRANDY WOODS
CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
RECOVERY HOUSE

165900**SPARC - DELANEY HOUSE**

1501 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 624-7456

MARK BROWNLOW
ADMINISTRATOR

CAROL GRABOWSKI
CLINICAL SUPERVISOR

MAILING ADDRESS

812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT

SPOKANE

012101 **SPARC - OUTPATIENT SERVICES**
1508 WEST SIXTH AVENUE
SPOKANE, WA 99204-7159
(509) 624-5228
SISADMIN@SPARCOP.ORG
WWW.SPARCOP.ORG

MAILING ADDRESS
812 S WALNUT ST
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

165800 **SPARC - SHAW HOUSE**
1509 WEST 8TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-7456

MAILING ADDRESS
812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

MARK BROWNLOW
ADMINISTRATOR

CAROL GRABOWSKI
CLINICAL SUPERVISOR

012100 **SPARC - WESTBROOK HOUSE**
1404 WEST 8TH AVENUE
SPOKANE, WA 99204-7159
(509) 624-3251

MAILING ADDRESS
812 S WALNUT ST.
SPOKANE, WA 99204

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
RECOVERY HOUSE

MARK BROWNLOW
ADMINISTRATOR

BRANDY WOODS
CLINICAL SUPERVISOR

200118 **SPOKANE COUNTY DETENTION SERVICES**
1100 WEST MALLON AVENUE
SPOKANE, WA 99260
(509) 477-2278
WWW.SPOKANECOUNTY.ORG/351/DETENTION-SERVIC

MAILING ADDRESS
1100 WEST MALLON AVENUE
SPOKANE, WA 99260

CERTIFIED SERVICES

KRISTINA RAY
MENTAL HEALTH MANAGER

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT

200119 **SPOKANE COUNTY JUVENILE COURT SERVICES**
902 NORTH ADAMS STREET
SPOKANE, WA 99260

BONNIE BUSH
ADMINISTRATOR

SPOKANE

MAILING ADDRESS

902 NORTH ADAMS STREET
SPOKANE, WA 99260

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200120**SPOKANE COUNTY SUPPORTIVE LIVING PROGRAM**

327 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4388
SCRBHCONTRACTS@SPOKANECOUNTY.ORG
WWW.SPOKANECOUNTY.ORG/3155

TONYA STERN
ASSISTANT DIRECTOR

KIM LONGHOFER
HUMAN SERVICES PROGRAM MANAGER

MAILING ADDRESS

327 WEST 8TH AVENUE
SPOKANE, WA 99204

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

136200**SPOKANE PUBLIC SCHOOLS - DISTRICT 81**

200 NORTH BERNARD STREET
SPOKANE, WA 99201
(509) 354-7946
KEVINMOR@SPOKANESCHOOLS.ORG
WWW.SPOKANESCHOOLS.ORG

DAVID CRUMP, PH.D
CLINICAL DIRECTOR

GARY FROST
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

200 N BERNARD ST
SPOKANE, WA 99201

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

011300**SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES**

1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095
(509) 324-1420

JULIE ALBRIGHT
ADMINISTRATOR

JENNIFER TIMONEY
OTP PROGRAM MANAGER

MAILING ADDRESS

1101 WEST COLLEGE AVENUE
SPOKANE, WA 99201-2095

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

012000**SPOKANE TREATMENT & RECOVERY SERVICES**

312 WEST 8TH AVENUE
SPOKANE, WA 99204
(509) 477-4631
(509) 477-4650

BLAKE REDDING
INTERIM DIRECTOR

ERIC DENO
SUD CLINICAL SUPERVISOR

SPOKANE

MAILING ADDRESS

PO BOX 2845
SPOKANE, WA 99220-2845

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

EMERGENCY SERVICE PATROL
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
WITHDRAWAL MANAGEMENT
YOUTH WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

154200**SPOKANE TREATMENT SOLUTIONS**

15812 EAST INDIANA AVENUE, SUITE 100
SPOKANE VALLEY, WA 99216
(877) 418-8103
(509) 795-3133

MARK-ERIK DIBIASE
CLINIC DIRECTOR

DAVID P. ROBINSON
CLINICAL SUPERVISOR

MAILING ADDRESS

15812 E INDIANA AVE, STE 100
SPOKANE VALLEY, WA 99216

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
GROUP THERAPY
INDIVIDUAL TREATMENT

083800**SUN RAY COURT**

518 SOUTH BROWNE STREET
SPOKANE, WA 99202
(509) 456-5465

THOMAS L. COOK
BRANCH ADMINISTRATOR

MAILING ADDRESS

PO BOX 4627
SPOKANE, WA 99220-0627

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE

200280**SUNSHINE BEHAVIORAL HEALTH**

1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206
(509) 892-4342

RON SIMPSON
ADMINISTRATOR

MAILING ADDRESS

1102 SOUTH RAYMOND ROAD
SPOKANE, WA 99206

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

SPOKANE

200281 **SUPPORTED EDUCATION ENHANCING
REHABILITATION (SEER)**
3305 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224

MAILING ADDRESS
3305 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT

200122 **TAMARACK CENTER - CLIP**
2901 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224

MAILING ADDRESS
2901 W. FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CHILD LONG-TERM INPATIENT PROGRAM (CLIP)

200123 **TAMARACK CENTER - OUTPATIENT**
2901 WEST FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224
(509) 326-8100
TAMARACK.ORG

MAILING ADDRESS
2901 W. FORT GEORGE WRIGHT DRIVE
SPOKANE, WA 99224

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
DAY SUPPORT
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200127 **THE EMILY PROGRAM - SPOKANE**
2020 EAST 29TH AVENUE, SUITE 200
SPOKANE, WA 99203

MAILING ADDRESS
2020 EAST 29TH AVENUE, SUITE 200
SPOKANE, WA 99203

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

SPOKANE

046200

**THE HEALING LODGE - BUTTERFLY PELPALWICHIYA
GIRLS CD**

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

REBECCA CROCKER
EXECUTIVE DIRECTOR

KIPPY JONES
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

150500

THE HEALING LODGE - CEDAR BOYS COD

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

REBECCA CROCKER
EXECUTIVE DIRECTOR

DODDIE LAGERVALL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

150600

THE HEALING LODGE - SAGE BOYS CD

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220
(509) 533-6910
ADMIN@HEALINGLODGE.ORG
WWW.HEALINGLODGE.ORG

REBECCA CROCKER
EXECUTIVE DIRECTOR

STEPHANIE MCGREGOR
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

5600 EAST 8TH AVENUE
SPOKANE VALLEY, WA 99212-0220

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
YOUTH RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

012400

VETERANS AFFAIRS MEDICAL CENTER - SPOKANE

4815 NORTH ASSEMBLY STREET
SPOKANE, WA 99205-6197
(509) 434-7014

PAUL NICOLAI, COORDINATOR
SUBSTANCE ABUSE PROGRAMS

MAILING ADDRESS

4815 N ASSEMBLY ST - 116/668/SATP
SPOKANE, WA 99205-6197

SPOKANE

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

020000**YFA CONNECTIONS**

22 SOUTH THOR STREET
SPOKANE, WA 99202
(509) 532-2000

THOMAS MURPHY
ADMINISTRATOR

TOM BRYANT
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 3344
SPOKANE, WA 99220-3344

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200536**YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION**

930 NORTH MONROE STREET
SPOKANE, WA 99201
(509) 789-9297
WWW.YWCASPOKANE.ORG

MARGARET CURTIN REY-BEAR
CLINICAL DIRECTOR

MAILING ADDRESS

930 NORTH MONROE STREET
SPOKANE, WA 99201

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

STEVENS

148100**ADEPT ASSESSMENT CENTER - COLVILLE**

218 B NORTH OAK STREET
COLVILLE, WA 99114
(509) 684-2349

SHANA WINDHORST
ADMINISTRATOR

JAMIE ZBORAC
CLINICAL SUPERVISOR

MAILING ADDRESS

218 B NORTH OAK ST.
COLVILLE, WA 99114

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

012501**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH**

301 EAST CLAY AVENUE, ROOMS 201 & 216
CHEWELAH, WA 99109
(509) 935-4808
WWW.CO.STEVENS.WA.US/COUNSELING

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

STEVENS

MAILING ADDRESS

PO BOX 905
CHEWELAH, WA 99109-0905

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

012500**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - MAIN**

165 EAST HAWTHORNE AVENUE
COLVILLE, WA 99114
(509) 684-4597
WWW.CO.STEVENS.WA.US/COUNSELING

DAVID NIELSEN
EXECUTIVE DIRECTOR

DAN PITMAN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

165 E HAWTHORNE AVE
COLVILLE, WA 99114

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200512**NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T**

982 EAST COLUMBIA AVENUE
COLVILLE, WA 99114
(509) 684-4597
BMICHAELSON@STEVENS COUNTYWA.GOV
WWW.CO.STEVENS.WA.US/COUNSELING/INDEX.HTM

DAVID M. NIELSEN, PH.D.
EXECUTIVE DIRECTOR

D. LYNNE GUHLKE
MENTAL HEALTH CLINICAL DIRECTOR

MAILING ADDRESS

165 E HAWTHORNE AVE
COLVILLE, WA 99114

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

STEVENS

009900 **SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM**
6228 OLD SCHOOL ROAD
WELLPINIT, WA 99040
(509) 258-7502
(800) 789-4282

BRENT POTTER
HHS DIRECTOR

LINDA ANDERSON (PEND APPROVAL)
CLINICAL SUPERVISOR

MAILING ADDRESS
PO BOX 540
WELLPINIT, WA 99040

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS TELEPHONE SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT

THURSTON

089200 **ALTERNATIVES PROFESSIONAL COUNSELING, INC.**
203 4TH AVENUE EAST, SUITES 301-304
OLYMPIA, WA 98501
(360) 357-7986

NOUNOUCHE CHORLEY
CLINICAL DIRECTOR

MAILING ADDRESS
203 4TH AVE E #301-304
OLYMPIA, WA 98501

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

144000 **BALANCED PERSPECTIVES, INC.**
2413 PACIFIC AVENUE SE, SUITE B
OLYMPIA, WA 98501
(360) 352-1052

ROBERT SHOPE

MAILING ADDRESS
PO BOX 4141
OLYMPIA, WA 98501

CERTIFIED SERVICES

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200009 **BASICS NW, LLC - MAIN**
8282 28TH COURT NE, SUITE A & AMP; C
LACEY, WA 98516
(360) 915-6868
WWW.BASICSNW.COM

MATTHEW WOODARD
CEO

TIMOTHY GULLICK
CLINICAL DIRECTOR

MAILING ADDRESS
8282 28TH COURT NE, SUITE A
LACEY, WA 98516

THURSTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200028

BEHAVIORAL HEALTH RESOURCES - MAIN

3857 MARTIN WAY EAST
OLYMPIA, WA 98506
(360) 704-7170
COMMUNITYRELATIONS@BHR.ORG
WWW.BHR.ORG

LAURIE TEBO
CEO

IAN HARREL
COO/MH CLINICAL SUPERVISOR

MAILING ADDRESS

3857 MARTIN WAY EAST
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

020100

BHR RECOVERY SERVICES - TUMWATER

6128 CAPITOL BOULEVARD SE
TUMWATER, WA 98501
(360) 704-7170

LAURIE TEBO
CEO

DANIELLE MURPHY
RECOVERY SERVICES MANAGER

MAILING ADDRESS

6128 CAPITOL BLVD SE
TUMWATER, WA 98501

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200016

CAPITAL RECOVERY CENTER

1000 CHERRY STREET SE
OLYMPIA, WA 98501
(360) 464-3880
(360) 357-2582

JAMES WRIGHT
EXECUTIVE DIRECTOR

MAILING ADDRESS

1000 CHERRY STREET SE
OLYMPIA, WA 98501

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT

THURSTON

200142

CATHOLIC COMMUNITY SERVICES - OLYMPIA

1011 10TH AVENUE SOUTHEAST
OLYMPIA, WA 98501
(360) 878-8248
INFO@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

104900

CATHOLIC COMMUNITY SERVICES - YELM

715 EAST YELM AVENUE, SUITE 8
YELM, WA 98597
(360) 878-8248
(888) 322-7156
STEPHANIETH@CCSWW.ORG
WWW.CCSWW.ORG

MARY STONE SMITH
VICE PRESIDENT

HEIDI WILLIAMS
SITE DIRECTOR/CLINICAL SUPERVISOR

MAILING ADDRESS

1001 N J STREET
TACOMA, WA 98403

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200162

COMMUNITY YOUTH SERVICES - MAIN

711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

MAILING ADDRESS

711 STATE AVENUE NORTHEAST
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

THURSTON

200163 **COMMUNITY YOUTH SERVICES - PEAR STREET**
520 PEAR STREET SOUTHEAST
OLYMPIA, WA 98501
(360) 943-0780
WWW.COMMUNITYYOUTHSERVICES.ORG

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SCOTT HANAUER
CEO

ALICIA FERRIS
CHIEF CLINICAL OFFICER (MH CLINICAL SUPERVISOR)

200515 **COMMUNITY YOUTH SERVICES - UNION AVENUE**
505 UNION AVENUE SOUTHEAST, 1ST FLOOR
OLYMPIA, WA 98501
(360) 943-0780
(360) 918-7860
TAY@COMMUNITYYOUTHSERVICES.ORG
WWW.COMMUNITYYOUTHSERVICES.ORG

MAILING ADDRESS
711 STATE AVE NE
OLYMPIA, WA 98506

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

SCOTT HANAUER
CEO

DR. EKATERINA SHKURKIN
PROGRAM DIRECTOR (MH CLINICAL SUPERVISOR)

012600 **CRISIS CLINIC OF THURSTON AND MASON COUNTIES**
CONFIDENTIAL LOCATION
(360) 586-2800
(360) 586-2888

MAILING ADDRESS
PO BOX 13453
OLYMPIA, WA 98508-3453

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
INFORMATION AND CRISIS

ROWEN O'NEILL
EXECUTIVE DIRECTOR

KELLY OLSON
BOARD PRESIDENT

077400 **DOC - CEDAR CREEK CORRECTIONS CENTER**
12200 BORDEAUX ROAD
LITTLEROCK, WA 98556
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

THURSTON

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LEVEL II INTENSIVE OUTPATIENT

200513**DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT**

7345 LINDERSON WAY SOUTHWEST
TUMWATER, WA 98501
(360) 725-8602
(360) 725-8603

DAWN WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
SCREENING AND BRIEF INTERVENTION

147500**FIRST THINGS FIRST 123, LLC**

1905 4TH AVENUE EAST, SUITE B
OLYMPIA, WA 98506
(360) 338-0600
(360) 951-1797

ANGIE M. CHAMBERS
ADMINISTRATOR

DARRELL R. CHAMBERS
CLINICAL SUPERVISOR

MAILING ADDRESS

1910 4TH AVE E, PMB 42
OLYMPIA, WA 98506

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

145800**FREEDOM RECOVERY, LLC**

715 EAST YELM AVENUE, SUITE 6
YELM, WA 98597
(253) 961-0116
ROBLONG.FRC@COMCAST.NET

ROB LONG
EXECUTIVE DIRECTOR

JASON JOHNSTONE
CLINICAL SUPERVISOR

MAILING ADDRESS

715 EAST YELM AVENUE, SUITE 6
YELM, WA 98597

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200351**HAND IN HAND BEHAVIORAL CONSULTING LLC**

1800 COOPER POINT ROAD, SUITE 21
OLYMPIA, WA 98502
(360) 810-1547
CWOLFF@HANDINHANDBC.COM
WWW.HANDINHANDBC.COM

LAURA CAMPBELL
MEMBER/OWNER

MAILING ADDRESS

PO BOX 6286
OLYMPIA, WA 98507

THURSTON

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200076

INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA

204 QUINCE STREET, SUITE 200
OLYMPIA, WA 98506

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

028100

NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM

FRONTAGE ROAD - NISQUALLY RESERVATION
OLYMPIA, WA 98513
(360) 413-2727

SHARLAINE LACLAIR
INTERIM CEO

KELLY KNITTLE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

4820 SHE-NAH-NUM DR SE
OLYMPIA, WA 98513

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

160800

NORTHWEST RESOURCES II, INC. - LACEY

3773-A MARTIN WAY E, SUITE 105
LACEY, WA 98506
(360) 688-7312
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

162700

NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH

200 LILLY ROAD NORTHEAST, SUITE C
OLYMPIA, WA 98506
(360) 918-8336
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

DUANE PRICE
MH CLINICAL SUPERVISOR

MAILING ADDRESS

2708 WESTMOOR CT SW
OLYMPIA, WA 98502

THURSTON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

061600**NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN**

2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502
(360) 943-8810
INFO@NWRII.COM
WWW.NWRII.COM

DENNIS NEAL
ADMINISTRATOR

STANCIN KAHLER
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

2708 WESTMOOR COURT SOUTHWEST
OLYMPIA, WA 98502

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200527**OLYMPIC HEALTH & RECOVERY SERVICES**

612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503
(360) 867-2602
(800) 658-4105
INQUIRIES@TMBHO.ORG
WWW.TMBHO.ORG

MARK FREEDMAN
CEO

JESSICA SHOOK
CLINICAL MANAGER/SUPERVISOR

MAILING ADDRESS

612 WOODLAND SQUARE LOOP SE, SUITE 401
LACEY, WA 98503

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS PEER SUPPORT
CRISIS STABILIZATION
CRISIS TELEPHONE SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY HOUSING SUPPORT
RECOVERY PEER SUPPORT

140400**PIERCE COUNTY ALLIANCE - THURSTON COUNTY
DRUG COURT**

2400 BRISTOL COURT SW, SUITE B
OLYMPIA, WA 98502
(360) 357-2482

TERREE SCHMIDT-WHELAN
ADMINISTRATOR

JAMES BOYLE
CLINICAL SUPERVISOR

MAILING ADDRESS

2400 BRISTOL CT SW STE B
OLYMPIA, WA 98502

THURSTON

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

152700**PINNACLE PEAK INSTITUTE, INC.**

1822 BLACK LAKE BOULEVARD, SUITE 101
OLYMPIA, WA 98512
(360) 515-0791
(360) 704-0086

JOHN THOMPSON
ADMINISTRATOR

MAILING ADDRESS

1822 BLACK LAKE BLVD, STE 101
OLYMPIA, WA 98512

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200483**PROVIDENCE HEALTH & SERVICES BEHAVIORAL
HEALTH - CCC BRANCH**

225 STATE AVENUE NORTHEAST
OLYMPIA, WA 98501
(360) 486-6400
TIMOTHY.LAROCQUE@PROVIDENCE.ORG
WWW.PROVIDENCE.ORG

SUE BEALL
SWR DIRECTOR BH SERVICES

GEORGE CHAPPELL
MEDICAL DIRECTOR

MAILING ADDRESS

225 STATE AVENUE NORTHEAST
OLYMPIA, WA 98501

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200098**PROVIDENCE HEALTH & SERVICES BEHAVIORAL
HEALTH - MAIN**

413 LILLY ROAD NE
OLYMPIA, WA 98506

[HTTP://WASHINGTON.PROVIDENCE.ORG](http://WASHINGTON.PROVIDENCE.ORG)

MAILING ADDRESS

413 LILLY ROAD NE
OLYMPIA, WA 98506

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

176500**ROYAL LIFE CENTERS, LLC - HAVEN**

8649 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0422
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

RICKY RORIE
PROGRAM DIRECTOR

BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8649 MARTIN WAY E
LACEY, WA 98516

THURSTON

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
WITHDRAWAL MANAGEMENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

176800**ROYAL LIFE CENTERS, LLC - OLYMPIC**

8645 MARTIN WAY EAST
LACEY, WA 98516
(360) 515-0070
ADMISSIONS@ROYALCENTERS.COM
WWW.ROYALLIFECENTERS.COM

RICKY RORIE
PROGRAM DIRECTOR

BRANDY MCBRIDE
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

8649 MARTIN WAY EAST
LACEY, WA 98516

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

INDIVIDUAL TREATMENT

200267**SEA MAR BEHAVIORAL HEALTH - OLYMPIA**

3030 LIMITED LANE NW
OLYMPIA, WA 98502

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

110200**SEA MAR BEHAVIORAL HEALTH - TUMWATER**

6334-6336 LITTLEROCK ROAD SW
TUMWATER, WA 98512
(360) 570-8258

CLAUDIA D'ALLEGRI
ADMINISTRATOR

JARED LANGTON
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

176000**SEA MAR BEHAVIORAL HEALTH - YELM**

202 CULLENS STREET NW
YELM, WA 98597
(206) 764-4714

CLAUDIA D'ALLEGRI
VP OF BEHAVIORAL HEALTH

JODI TAYLOR
CLINICAL SUPERVISOR

THURSTON

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

111900**SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES**

6700 MARTIN WAY EAST, SUITE 117
OLYMPIA, WA 98516
(360) 413-6910

MOLLY CARNEY
EXECUTIVE DIRECTOR

JANICE CROLL
CLINICAL SUPERVISOR

MAILING ADDRESS

1700 AIRPORT WY S
SEATTLE, WA 98134-1618

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
OPIATE SUBSTITUTION TREATMENT

015300**ST. PETER CHEMICAL DEPENDENCY CENTER**

4800 COLLEGE STREET SOUTHEAST
LACEY, WA 98503
(360) 456-7575
(800) 332-0465

SUE BEALL
ADMINISTRATOR

RHONDA WATKINS
CLINICAL SUPERVISOR

MAILING ADDRESS

4800 COLLEGE ST SE
LACEY, WA 98503

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

PROBLEM & PATHOLOGICAL GAMBLING SERVICES:

PROBLEM & PATHOLOGICAL GAMBLING

200041**TELECARE - THURSTON MASON CRISIS TRIAGE**

3285 FERGUSON STREET SW
TUMWATER, WA 98512
(360) 943-1907
MFERGUSON@TELECARECORP.COM
WWW.TELECARECORP.COM

MARISSA ELLIOT
START-UP ADMINISTRATOR

TYVONNE BERRING
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

CRISIS EMERGENCY INVOLUNTARY DETENTION
INPATIENT EVALUATION AND TREATMENT - ADULT

200500**TELECARE - THURSTON MASON E&T**

3436 MARY ELDER ROAD NORTHEAST
OLYMPIA, WA 98506
(360) 528-2590
MROSS@TELECARECORP.COM
WWW.TELECARECORP.COM

PAM EGGLESTON
INTERIM ADMINISTRATOR

KRISTIANN SMITH
INTERIM CLINICAL DIRECTOR

THURSTON

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511-4339

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

INPATIENT EVALUATION AND TREATMENT - ADULT

200509**TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM**

3436 MARY ELDER ROAD NORTHEAST, SUITE A
OLYMPIA, WA 98506
(360) 528-2590
WWW.TELECARECORP.COM

PAM EGGLESTON
INTERIM ADMINISTRATOR

KRISTIANN SMITH
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511-4339

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

CASE MANAGEMENT
CRISIS STABILIZATION
GROUP THERAPY
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RESIDENTIAL TREATMENT FACILITY

200498**TELECARE - THURSTON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM**

908 5TH AVENUE SOUTHEAST
OLYMPIA, WA 98501
(360) 754-2426
WWW.TELECARECORP.COM

TYVONNE BERRING
ADMINISTRATOR

MAILING ADDRESS

PO BOX 14339
TUMWATER, WA 98511-4339

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS OUTREACH
CRISIS PEER SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200128**THE EMILY PROGRAM - LACEY**

673 WOODLAND SQUARE LOOP SE, SUITE 330
LACEY, WA 98503

STACEY SCHILTER-PISANO
SITE MANAGER

MAILING ADDRESS

673 WOODLAND SQUARE LOOP S.E., SUITE 330
LACEY, WA 98503

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

051400**THE RIGHT STEP, INC.**

3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503
(360) 923-9585
WWW.THERIGHTSTEPINC.COM

JOSEPHINE KAIL-LEIBL
ADMINISTRATOR

MIJA BRADSHAW
INTERIM CLINICAL SUPERVISOR

THURSTON

MAILING ADDRESS

3925 8TH AVENUE SE, SUITE A
LACEY, WA 98503

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200130**THURSTON COUNTY E&T CENTER**

3436 MARY ELDER ROAD NE
OLYMPIA, WA 98506

MAILING ADDRESS

3436 MARY ELDER ROAD NE
OLYMPIA, WA 98506

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

099600**TRUE NORTH-ESD 113 - TUMWATER MAIN**

6005 TYEE DRIVE SW
TUMWATER, WA 98512
(360) 464-6870
(360) 464-6873

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

105700**TRUE NORTH-ESD 113 - YELM**

1315 YELM HIGHWAY
YELM, WA 98597

(360) 458-6233

ERIN RIFFE
ADMINISTRATOR

JACKIE YEE
INTERM CLINICAL SUPERVISOR

MAILING ADDRESS

6005 TYEE DR SW
TUMWATER, WA 98512

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WAHAKIYAKUM

001502**WAHAKIYAKUM COUNTY HEALTH AND HUMAN SERVICES**

42 ELOCHOMAN VALLEY ROAD
CATHLAMET, WA 98612
(360) 795-8630

ANNA GAVISHORA
DIRECTOR-WAHAKIYAKUM COUNTY H&HS

DALLAS CARROLL
CLINICAL SUPERVISOR

MAILING ADDRESS

42 ELOCHOMAN VALLEY RD
CATHLAMET, WA 98612

WAHAKIYAKUM

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT

WALLA WALLA

200067**CHILDREN'S HOME SOCIETY OF WASHINGTON - WALLA WALLA**

1612 PENNY LANE
WALLA WALLA, WA 99362
(509) 529-2130
WWW.CHILDRENSHOMESOCIETY.ORG

LIBBY HEIN
CHIEF PROGRAM OFFICER

MAILING ADDRESS

1612 PENNY LANE
WALLA WALLA, WA 99362

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

166200**COMPREHENSIVE HEALTHCARE - WALLA WALLA**

1520 KELLY PLACE, SUITE 234
WALLA WALLA, WA 98362
(509) 524-2920
WWW.COMPHC.ORG

RON GENGLER
ADMINISTRATOR

ANDREA RAY
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INFORMATION AND CRISIS
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

075900**DOC - WASHINGTON STATE PENITENTIARY**

1313 NORTH 13TH STREET
WALLA WALLA, WA 99362
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL II INTENSIVE OUTPATIENT

WALLA WALLA

107400

SERENITY POINT COUNSELING SERVICES, LLC

919 SOUTH 2ND AVENUE
WALLA WALLA, WA 99362
(509) 529-6036
(509) 529-6037
SERENITYPOINTCOUNSELING.COM
WWW.SERENITYPOINTCOUNSELING.COM

PATRICK C. FLORES
ADMINISTRATOR

PATRICK C. FLORES, LICSW/CDP
MH & SUD CLINICAL SUPERVISOR

MAILING ADDRESS

919 S 2ND AVE
WALLA WALLA, WA 99362

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

013100

**VETERANS ADMINISTRATION MEDICAL CENTER -
WALLA WALLA**

77 WAINWRIGHT DRIVE, BUILDING 143
WALLA WALLA, WA 99362
(509) 525-5200

BOBI GOODSON
SUPERVISOR OF RECOVERY/MH SVCS

KATHY WIKMAN
SENIOR ADDICTION THERAPIST

MAILING ADDRESS

77 WAINWRIGHT DR, BLDG 143, OFFICE 203
WALLA WALLA, WA 99362

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL I OUTPATIENT

WHATCOM

038600

BELAIR CLINIC

1130 NORTH STATE STREET
BELLINGHAM, WA 98225
(360) 676-4485

NICOLE WHIPPLE
ADMINISTRATOR

LUZELLEN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

1130 NORTH STATE STREET
BELLINGHAM, WA 98225

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

139900

BRIDGES TREATMENT AND RECOVERY - BELLINGHAM

1221 FRASER STREET, SUITE E-1
BELLINGHAM, WA 98229
(360) 714-8180

DYLAN BRASHEAR
ADMINISTRATOR

CARI JONES
CLINICAL SUPERVISOR

MAILING ADDRESS

1221 FRASER ST STE E-1
BELLINGHAM, WA 98229

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

WHATCOM

147000

BRIDGES TREATMENT AND RECOVERY - FERNDALE

6044 PORTAL WAY, SUITE 103
FERNDALE, WA 98248
(360) 714-8180
(360) 393-4579

DYLAN BRASHEAR
ADMINISTRATOR

CARI JONES
CLINICAL SUPERVISOR

MAILING ADDRESS

1221 FRASER ST, STE E-1
BELLINGHAM, WA 98229

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

078600

CATHOLIC COMMUNITY SERVICES - BELLINGHAM

LAKEWAY DRIVE
515 LAKEWAY DRIVE
BELLINGHAM, WA 98225
(360) 676-2187

DONNA WELLS
AGENCY DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225-5054

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

200138

CATHOLIC COMMUNITY SERVICES - BELLINGHAM MAIN

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-2164
WWW.CCSWWW.ORG

WILL RICE
REGIONAL CHIEF OF OPERATIONS

KATHY MCNAUGHTON
REGIONAL CLINICAL DIRECTOR

MAILING ADDRESS

1133 RAILROAD AVENUE, SUITE 100
BELLINGHAM, WA 98225

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200336

COMPASS HEALTH - BELLINGHAM

1216 BAY STREET
BELLINGHAM, WA 98225
(360) 752-4545
WWW.COMPASSHEALTH.ORG

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CRISIS OUTREACH
CRISIS PEER SUPPORT

WHATCOM

200178 **COMPASS HEALTH - WHATCOM COUNTY MCLEOD**
3645 EAST MCLEOD ROAD
BELLINGHAM, WA 98226
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
POST OFFICE BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

ERIN WELLS
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT

200179 **COMPASS HEALTH - WHATCOM TRIAGE CENTER**
2030 DIVISION STREET
BELLINGHAM, WA 98226
(425) 349-6700
WWW.COMPASSHEALTH.ORG

MAILING ADDRESS
PO BOX 3810
EVERETT, WA 98213-8810

CERTIFIED SERVICES

ANASTASIA ALLES
CHIEF OPERATING OFFICER

CHRIS STARERS-FOOTE
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
RESIDENTIAL TREATMENT FACILITY

013400 **CONTACT COUNSELING**
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225
(360) 671-3277

MAILING ADDRESS
1118 FINNEGAN WAY, SUITE 103
BELLINGHAM, WA 98225

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT

JOHN CHAMBERS
ADMINISTRATOR

019401 **DOC - BELLINGHAM WORK RELEASE**
1125 NORTH GARDEN STREET
BELLINGHAM, WA 98225
(360) 676-2150
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 WILLIAMS
PROGRAM ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

WHATCOM

200192 **ENDLESS POTENTIAL, LLC**
2110 IRON STREET
BELLINGHAM, WA 98225
(360) 930-6063
(360) 746-4092
CONTACTUS@ENDLESSPOSTENTIALLLC.COM
WWW.ENDLESSPOTENTIALLLC.COM

MAILING ADDRESS
2110 IRON STREET
BELLINGHAM, WA 98225

CERTIFIED SERVICES

ROBYN NEWBERRY
OWNER

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

167100 **LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER**
- MAIN
609 NORTHSORE DRIVE
BELLINGHAM, WA 98226
(360) 676-6000

MAILING ADDRESS
609 NORTHSORE DRIVE
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

JENNY BILLINGS
CEO

SUSAN CAVANAUGH
CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

200441 **LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER**
- SUNSET DUPLEX
1727 EAST SUNSET DRIVE
BELLINGHAM, WA 98226
(360) 676-6000
KAY.BURBIDGE@LWRTC.ORG
WWW.LWRTC.ORG

MAILING ADDRESS
609 N SHORE DR
BELLINGHAM, WA 98226

CERTIFIED SERVICES
SUBSTANCE USE DISORDER SERVICES:
LEVEL I OUTPATIENT

JENNY BILLINGS
CEO

TAWNA THOMAS
MH CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
GROUP THERAPY
INDIVIDUAL TREATMENT
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT

022700 **LUMMI COUNSELING SERVICES**
2616 KWINA ROAD
BELLINGHAM, WA 98226
(360) 312-2420
(360) 380-6950

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

ROSALIE SCOTT
PROGRAM MANAGER AMDINISTRATOR

HANK WHITTLESEY
CLINICAL SUPERVISOR

WHATCOM

023000

NOOKSACK TRIBE'S GENESIS II

6750 MISSION ROAD
EVERSON, WA 98247
(360) 966-7704

ANNETTE SOLOMON
ADMINISTRATOR

MAILING ADDRESS

PO BOX 157
DEMING, WA 98244

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200456

NORTHWEST REGIONAL COUNCIL

600 LAKEWAY DRIVE, SUITE 100
BELLINGHAM, WA 98225
(360) 676-6749
(800) 585-6749
ANDEREA@DSHS.WA.GOV
WWW.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

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

052100

SEA MAR BEHAVIORAL HEALTH - BELLINGHAM

3350 AIRPORT WAY
BELLINGHAM, WA 98226
(360) 734-5458
INFO@SEAMARCHC.ORG
WWW.SEAMARCHC.ORG

CLAUDIA D'ALLEGRI
VICE PRESIDENT OF BEHAVIORAL HEALTH

CHARLES WATRAS
SUD CLINICAL SUPERVISOR

WHATCOM

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

095800**SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER**

1603 EAST ILLINOIS STREET
BELLINGHAM, WA 98226
(360) 647-4266

LESLIE BLAKE
ADMINISTRATOR

DIONNEA ANDRICOS
CLINICAL SUPERVISOR

MAILING ADDRESS

8915 14TH AVE S
SEATTLE, WA 98108

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
RECOVERY HOUSE
YOUTH RESIDENTIAL

200419**SENDAN CENTER**

1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225
(360) 305-3275
SENDANCENTER.COM

MAILING ADDRESS

1616 CORNWALL AVENUE, SUITE 100
BELLINGHAM, WA 98225

CERTIFIED SERVICESMENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200317**SUNRISE SERVICES, INC. - BELLINGHAM**

1515 CORNWALL AVENUE
BELLINGHAM, WA 98225
(360) 746-7200
INFO@SUNRISEEMAIL.COM
WWW.SUNRISECOMMUNITYLIVING.COM

HOLLY MORGAN
EXECUTIVE ADMINISTRATOR

SHAWN (SHAMORA) BEARWOOD
MH & SUD CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 2569
EVERETT, WA 98213

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY PEER SUPPORT

WHATCOM

200073 **UNITY CARE NORTHWEST - BELLINGHAM BRANCH**
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200310 **UNITY CARE NORTHWEST - FERNDALE 5603 BRANCH**
5603 3RD AVENUE
FERNDALE, WA 98248
(360) 752-7410
WWW.INTERFAITHCHC.ORG

CINDY PAFFUMI
BEHAVIORAL HEALTH DIRECTOR

MAILING ADDRESS
1616 CORNWALL AVE STE 205
BELLINGHAM, WA 98225

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

200404 **UNITY CARE NORTHWEST - FERNDALE 5616 BRANCH**
5616 3RD AVENUE
FERNDALE, WA 98248

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
INDIVIDUAL TREATMENT

200072 **UNITY CARE NORTHWEST - MAIN**
220 UNITY STREET
BELLINGHAM, WA 98225

RANDY POLIDAN
‎DIRECTOR OF BEHAVIORAL HEALTH

MAILING ADDRESS
1616 CORNWALL AVENUE, SUITE 205
BELLINGHAM, WA 98225

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
CASE MANAGEMENT
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY PEER SUPPORT

WHATCOM

131800

WATERFRONT COUNSELING IN BLAINE

228 CHERRY STREET
BLAINE, WA 98230
(360) 332-1000

DONALD E. STAAL
ADMINISTRATOR

MAILING ADDRESS

PO BOX 463
CUSTER, WA 98240

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

119600

WHATCOM COMMUNITY DETOX

2030 DIVISION STREET
BELLINGHAM, WA 98226
(360) 676-2020

MARY REED
DETOX MANAGER

ROSE NESS
PCN DIRECTOR

MAILING ADDRESS

2030 DIVISION ST
BELLINGHAM, WA 98226

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

WITHDRAWAL MANAGEMENT

WHITMAN

075500

PALOUSE RECOVERY CENTER, LLC

1240 SOUTHEAST BISHOP BOULEVARD, SUITE P
PULLMAN, WA 99163
(509) 334-0718

JEAN IVERSON
ADMINISTRATOR

DARCELL MEYERS & JERRY PASTORE
CO-MGRS W/JEAN IVERSON

MAILING ADDRESS

1240 SE BISHOP BLVD STE P
PULLMAN, WA 99163

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

013800

PALOUSE RIVER COUNSELING CENTER - MAIN

340 NORTHEAST MAPLE STREET
PULLMAN, WA 99163
(509) 334-1133

MIKE BERNEY
DIRECTOR

MARK ZEIGLER
CLINICAL DIRECTOR

MAILING ADDRESS

340 NE MAPLE ST
PULLMAN, WA 99163

WHITMAN

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
CRISIS OUTREACH
CRISIS STABILIZATION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

200256

PALOUSE RIVER COUNSELING CENTER - PULLMAN

400 NORTHEAST MAIDEN LANE
PULLMAN, WA 99163

MIKE BERNEY
DIRECTOR

MAILING ADDRESS

340 NE MAPLE STREET
PULLMAN, WA 99163

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
INDIVIDUAL TREATMENT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION

YAKIMA

200462

AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC. -

YAKIMA OUTPATIENT

916 NORTH 16TH AVENUE, SUITE 102
YAKIMA, WA 98902
(509) 902-1091
WWW.ABHSINC.NET

KRISTINE MCCLURE
ADMINISTRATOR

ANGELA MELLO
DIRECTOR OF CLIENT SERVICES

MAILING ADDRESS

PO BOX 141106
SPOKANE VALLEY, WA 99214

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

121400

APPLE VALLEY COUNSELING SERVICE

611 WEST A STREET
YAKIMA, WA 98902
(509) 452-1000
(877) 452-2827

WILLIAM ELLIS
ADMINISTRATOR

CHARLOTTE 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

YAKIMA

149800

BALANCE SOCIAL SERVICES, LLC
1400 SUMMITVIEW AVENUE, SUITE 106
YAKIMA, WA 98902
(509) 453-1702

JOE CERVANTES
ADMINISTRATOR

HECTOR MADRID
CLINICAL SUPERVISOR

MAILING ADDRESS

1400 SUMMITVIEW AVE, SUITE 106
YAKIMA, WA 98902-2902

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

050300

BARTH CLINIC - YAKIMA MAIN
201 EAST LINCOLN AVENUE
YAKIMA, WA 98901
(509) 457-5653
WWW.BARTHCLINIC.COM

JAMES BARTH
ADMINISTRATOR

MEGHAN TRAVERS
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 1207
YAKIMA, WA 98907-1207

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

177100

BELIEVE IN RECOVERY, LLC - YAKIMA
3907 CREEKSIDE LOOP, SUITE 110
YAKIMA, WA 98902
(509) 317-2140

VINCENT MARQUIS
OWNER/ADMINISTRATOR

MAILING ADDRESS

3907 CREEKSIDE LP STE 110
YAKIMA, WA 98902

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200153

**CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
YAKIMA D STREET**
303 EAST D STREET, SUITE 5
YAKIMA, WA 98901
(509) 965-7100
WWW.CFCSYAKIMA.ORG

DARLENE DARNELL
INTERIM PRESIDENT & CEO

MAILING ADDRESS

5301 TIETON DR STE C
YAKIMA, WA 98908

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

YAKIMA

200150 **CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
YAKIMA KERN ROAD**
3801 KERN ROAD
YAKIMA, WA 98902
(509) 965-7100
WWW.CFCSYAKIMA.ORG

MAILING ADDRESS
5301 TIETON DR STE C
YAKIMA, WA 98908

CERTIFIED SERVICES

DARLENE DARNELL
INTERIM PRESIDENT & CEO

MENTAL HEALTH SERVICES:
RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200152 **CATHOLIC CHARITIES OF THE DIOCESE OF YAKIMA -
YAKIMA MAIN**
5301 TIETON DRIVE, SUITE C
YAKIMA, WA 98908
(509) 965-7100
WWW.CFCSYAKIMA.ORG

MAILING ADDRESS
5301 TIETON DRIVE, SUITE C
YAKIMA, WA 98908

CERTIFIED SERVICES

DARLENE DARNELL
INTERIM PRESIDENT & CEO

MENTAL HEALTH SERVICES:
BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
DAY SUPPORT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION

096000 **CENTER FOR ADDICTIONS RECOVERY AND
EDUCATION (CARE)**
1015 SOUTH 40TH AVENUE, SUITE 23
YAKIMA, WA 98908
(509) 966-7246

MAILING ADDRESS
1015 S 40TH AVE STE 23
YAKIMA, WA 98908

CERTIFIED SERVICES
PROBLEM & PATHOLOGICAL GAMBLING SERVICES:
PROBLEM & PATHOLOGICAL GAMBLING

STEPHEN A. YOUNKER, ED.D.
DIRECTOR

THERESA RAWSON
CLINICAL SUPERVISOR

200013 **COMPREHENSIVE HEALTHCARE - BRIDGES E&T**
201 SOUTH SECOND AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.CWCMH.ORG

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

TIM SHIELDS
ADMINISTRATOR

RON GENGLER
COO/MH CLINICAL SUPERVISOR

MENTAL HEALTH SERVICES:
INPATIENT EVALUATION AND TREATMENT - ADULT

YAKIMA

200354

COMPREHENSIVE HEALTHCARE - COMPETENCY RESTORATION CENTER
1500 PACIFIC AVENUE
YAKIMA, WA 98902
(509) 575-4084
WWW.CWCMH.ORG

TYRA VILLAFAN
DIRECTOR

HARRY KRAMER
VICE PRESIDENT

MAILING ADDRESS
PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:
COMPETENCY EVALUATION & RESTORATION TREATMENT

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

YAKIMA

136300

COMPREHENSIVE HEALTHCARE - PATHWAYS

307 WEST WALNUT STREET
YAKIMA, WA 98902
(509) 453-4274
(509) 453-4301

SHAWNA STONEKING
DIRECTOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

CASE MANAGEMENT
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

125600

COMPREHENSIVE HEALTHCARE - SUNNYSIDE

1319 SAUL ROAD SOUTH
SUNNYSIDE, WA 98944
(509) 837-2089

MIKE NORTON
ADMINISTRATOR

CINDY BROWN
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
CRISIS EMERGENCY INVOLUNTARY DETENTION
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION
RECOVERY EMPLOYMENT SUPPORT
RECOVERY MEDICATION SUPPORT
RECOVERY PEER SUPPORT
RECOVERY SUPPORT WRAPAROUND FACILITATION
RESIDENTIAL TREATMENT FACILITY

146700

**COMPREHENSIVE HEALTHCARE - TWO RIVERS
LANDING**

504 SOUTH 3RD AVENUE
YAKIMA, WA 98902
(509) 469-3727
(509) 575-4084

TIMOTHY SHIELDS
DIRECTOR

BARBARA MYERS-MULL
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 959
YAKIMA, WA 98907

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

RON GENGLER
COO

YAKIMA

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

076500**DOC - AHTANUM VIEW WORK RELEASE**

2009 SOUTH 64TH AVENUE
YAKIMA, WA 98903
(360) 725-8628

DAWN L. WILLIAMS
SUBSTANCE ABUSE ADMINISTRATOR

BRYAN SMITH
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 41123 (MS 41123)
OLYMPIA, WA 98504-1123

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

154800**INNOVATION RESOURCE CENTER**

214 SOUTH 6TH STREET, SUITE 3
SUNNYSIDE, WA 98944
(509) 836-2400

FRANCISCO J. GUERRERO
ADMINISTRATOR

MARIE E. GUERRERO
CLINICAL DIRECTOR

MAILING ADDRESS

PO BOX 953
SUNNYSIDE, WA 98944

CERTIFIED SERVICES**SUBSTANCE USE DISORDER SERVICES:**

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

200075**INSTITUTE FOR FAMILY DEVELOPMENT - YAKIMA**

413 NORTH 20TH AVENUE, SUITE B
YAKIMA, WA 98902

CHARLOTTE BOOTH
EXECUTIVE DIRECTOR

MAILING ADDRESS

34004 16TH AVE. S, SUITE 200
FEDERAL WAY, WA 98003

CERTIFIED SERVICES**MENTAL HEALTH SERVICES:**

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
INDIVIDUAL TREATMENT

153200**INTEGRITY SUPPORT SERVICES, LLC**

242 DIVISION STREET
GRANDVIEW, WA 98930
(509) 882-8012

VICENTE RUIZ
ADMINISTRATOR

YAKIMA

MAILING ADDRESS

242 DIVISION STREET
GRANDVIEW, WA 98930

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

014100**MERIT RESOURCE SERVICES - SUNNYSIDE**

702 EAST FRANKLIN AVENUE
SUNNYSIDE, WA 98944
(509) 837-7700
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

ANTHONY ESPARZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

014101**MERIT RESOURCE SERVICES - TOPPENISH**

321 WEST FIRST AVENUE
TOPPENISH, WA 98948
(509) 865-5233
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

ANTHONY ESPARZA
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

083200**MERIT RESOURCE SERVICES - WAPATO**

312 WEST 2ND STREET
WAPATO, WA 98951
(509) 877-7271
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
SCREENING AND BRIEF INTERVENTION

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT

YAKIMA

107800

MERIT RESOURCE SERVICES - YAKIMA

315 NORTH 2ND STREET
YAKIMA, WA 98901
(509) 469-9366
LORETTAO@MERITRESOURCES.ORG
WWW.MERITRESOURCES.ORG

DAVID L. WILSON
EXECUTIVE DIRECTOR

GEORGE DAVIS
SUD CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 997
SUNNYSIDE, WA 98944

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

152600

NUEVA VIDA COUNSELING SERVICES, LLC

402 WEST FIRST AVENUE
TOPPENISH, WA 98948
(509) 865-9034

VICENTE A. MORAN
OWNER/ADMINISTRATOR

MAILING ADDRESS

402 W 1ST AVE
TOPPENISH, WA 98948-1530

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT

014000

SUNDOWN M RANCH

2280 SR 821
SELAH, WA 98901
(509) 457-0990

SCOTT MUNSON
EXECUTIVE DIRECTOR

CHUCK BUTTREY
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 217
SELAH, WA 98942

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE INPATIENT
LEVEL I OUTPATIENT
LEVEL II INTENSIVE OUTPATIENT
RECOVERY HOUSE
WITHDRAWAL MANAGEMENT
YOUTH RESIDENTIAL
YOUTH WITHDRAWAL MANAGEMENT

152200

TRIUMPH TREATMENT SERVICES - BETH'S PLACE

608 SUPERIOR LANE
YAKIMA, WA 98902
(509) 853-4176
AVASQUEZ@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO

TOM DAVIDSON
EXECUTIVE CLINICAL DIRECTOR (SUD CS)

MAILING ADDRESS

PO BOX 2849
YAKIMA, WA 98907-2849

YAKIMA

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

114900**TRIUMPH TREATMENT SERVICES - CASITA**

605 SUPERIOR LANE
YAKIMA, WA 98902
(509) 853-4174
(509) 853-4173
AVASQUEZ@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO

TOM DAVIDSON
EXECUTIVE CLINICAL DIRECTOR (SUD CS)

MAILING ADDRESS

PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

166300**TRIUMPH TREATMENT SERVICES - INSPIRATIONS**

3300 ROOSEVELT AVENUE
YAKIMA, WA 98902
(509) 571-1455
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO

DIANNE SNYDER
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT

013901**TRIUMPH TREATMENT SERVICES - JAMES OLDHAM
TREATMENT CENTER**

201 HIGHLAND DRIVE
BUENA, WA 98921
(509) 865-6705
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO

MAILING ADDRESS

PO BOX 354
BUENA, WA 98921

CERTIFIED SERVICES

SUBSTANCE USE DISORDER SERVICES:
INTENSIVE INPATIENT
LONG-TERM RESIDENTIAL
RECOVERY HOUSE

013900**TRIUMPH TREATMENT SERVICES - MAIN**

102 SOUTH NACHES AVENUE
YAKIMA, WA 98901
(509) 248-1800
CDAC@TRIUMPHTX.ORG
WWW.TRIUMPHTX.ORG

WALLY LEE
CEO

TOM DAVIDSON
SUD CLINICAL SUPERVISOR

YAKIMA

MAILING ADDRESS

PO BOX 2849
YAKIMA, WA 98907-2849

CERTIFIED SERVICESSUBSTANCE 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 SERVICESSUBSTANCE USE DISORDER SERVICES:

LONG-TERM RESIDENTIAL

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
CASE MANAGEMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
PSYCHIATRIC MEDICATION
RECOVERY MEDICATION SUPPORT
RESIDENTIAL TREATMENT FACILITY

107000**VETERANS ADMINISTRATION - YAKIMA SUBSTANCE ABUSE OUTREACH**

310 NORTH 5TH AVENUE
YAKIMA, WA 98902
(509) 457-2736

BOBI GOODSON
ADMINISTRATOR

KATHY WIKMAN
SENIOR ADDICTION THERAPIST

MAILING ADDRESS

77 WAINWRIGHT DR (CD TRTMT UNIT)
WALLA WALLA, WA 99362

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

LEVEL I OUTPATIENT

014200**YAKAMA INDIAN NATION COMPREHENSIVE ALCOHOLISM PROGRAM**

20 GUNNYON ROAD
TOPPENISH, WA 98948
(509) 865-5121
Eric

ANITA MENDOZA
ADMINISTRATOR/PROGRAM DIRECTOR

ERIC JOHNSON
CLINICAL SUPERVISOR

MAILING ADDRESS

PO BOX 367
TOPPENISH, WA 98948

CERTIFIED SERVICESSUBSTANCE USE DISORDER SERVICES:

ALCOHOL AND DRUG INFORMATION SCHOOL
DUI ASSESSMENT
LEVEL I OUTPATIENT

YAKIMA

200285

YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW
1000 WALLACE WAY
GRANDVIEW, WA 98930

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS

918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

200286

YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH
510 WEST 1ST AVENUE
TOPPENISH, WA 98948

JANIS LUVAAS
ADMINISTRATOR

MAILING ADDRESS

918 EAST MEADE AVENUE
YAKIMA, WA 98903

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

BRIEF INTERVENTION TREATMENT
FAMILY THERAPY
GROUP THERAPY
INDIVIDUAL TREATMENT
LESS RESTRICTIVE ALTERNATIVE (LRA) SUPPORT
PSYCHIATRIC MEDICATION

050001

YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA 12TH AVENUE
307 SOUTH 12TH AVENUE, SUITE 4B
YAKIMA, WA 98902
(509) 575-8457

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

YAKIMA

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

200287

YAKIMA VALLEY MEMORIAL HOSPITAL E&T

2811 TIETON DRIVE
YAKIMA, WA 98902

JOHN SEE
PSYCHIATRIC SERVICES, INPATIENT NURSE MANAGER

MAILING ADDRESS

2811 TIETON DRIVE
YAKIMA, WA 98902

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

INPATIENT EVALUATION AND TREATMENT - ADULT

200424

AUTISM OUTREACH OF WASHINGTON, INC.

CONFIDENTIAL LOCATION
(619) 795-9925
INFO@AUTISMOUTREACHSOCAL.COM

PATRICK BUNT
PRESIDENT

ABIGAIL BUNT
EXECUTIVE DIRECTOR

MAILING ADDRESS

CERTIFIED SERVICES

MENTAL HEALTH SERVICES:

RECOVERY SUPPORT APPLIED BEHAVIOR ANALYSIS (ABA)

200101

PROTOCOL SERVICES, INC.

621 SOUTHWEST ALDER STREET, SUITE 400
PORTLAND, OR 97205

MAILING ADDRESS

621 SW ALDER STREET, SUITE 400
PORTLAND, OR 97205

CERTIFIED SERVICES

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CRISIS TELEPHONE SUPPORT

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A FIRST PLACE - MAIN	053500	COWLITZ
A NEW SAFEHAVEN	116600	COWLITZ
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A RENEWAL CENTER, LLC	150100	KING
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ACTION COUNSELING - KENNEWICK	060500	BENTON
ACTION COUNSELING - PORT ORCHARD	119000	KITSAP
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DOC - COYOTE RIDGE CORRECTIONS CENTER	075800	FRANKLIN
DOC - ELEANOR CHASE WORK RELEASE	026802	SPOKANE
DOC - HELEN B. RATCLIFFE WORK RELEASE	077200	KING
DOC - LARCH CORRECTIONS CENTER	077500	CLARK
DOC - LONGVIEW WORK RELEASE	078000	COWLITZ
DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN	125000	MASON
DOC - MONROE CORRECTIONS CENTER - MSU	076900	SNOHOMISH
DOC - MONROE CORRECTIONS CENTER - SOU (SPECIAL OFFENDER UNIT)	147200	SNOHOMISH
DOC - MONROE CORRECTIONS CENTER - WSR (WASHINGTON STATE REFORMATORY)	147300	SNOHOMISH
DOC - OLYMPIC CORRECTIONS CENTER	076700	CLALLAM
DOC - PENINSULA WORK RELEASE	086500	KITSAP
DOC - PROGRESS HOUSE WORK RELEASE	078100	PIERCE
DOC - REYNOLDS WORK RELEASE	077300	KING
DOC - STAFFORD CREEK CORRECTIONS CENTER	107500	GRAYS HARBOR
DOC - TRI-CITIES WORK RELEASE	086300	FRANKLIN
DOC - TUMWATER SUBSTANCE ABUSE RECOVERY UNIT	200513	THURSTON
DOC - TWIN RIVERS CORRECTIONS CENTER	076800	SNOHOMISH
DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON	077700	MASON
DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN - PURDY	077800	PIERCE
DOC - WASHINGTON STATE PENITENTIARY	075900	WALLA WALLA
DOORWAY TO RECOVERY - NORTH	125900	KING
DOWNTOWN EMERGENCY SERVICE CENTER - CRISIS SOLUTIONS CENTER	200189	KING
DOWNTOWN EMERGENCY SERVICE CENTER - JAMES STREET	169200	KING
DOWNTOWN EMERGENCY SERVICE CENTER - MAIN	097900	KING
DOWNTOWN EMERGENCY SERVICE CENTER - WALL STREET	169100	KING

EAGLE HARBOR COUNSELING, LLC	200480	KITSAP
EASTSIDE CENTER FOR FAMILY	109700	KING
EASTSIDE RECOVERY GROUP	037201	KING
EASTSIDE SOCIAL SKILLS THERAPY, LLC	200191	KING
EATING RECOVERY CENTER OF WASHINGTON - MAIN	200048	KING
EATING RECOVERY CENTER OF WASHINGTON - SEATTLE	200531	KING
EDGEWOOD SEATTLE ADDICTION SERVICES	149600	KING
ELLIE LORENZ COUNSELING AND CONSULTING SERVICE	164500	KITTITAS
ENDLESS POTENTIAL, LLC	200192	WHATCOM
ENGAGE ABA LLC	200137	KING
EUGENIA CENTER - CHEHALIS BRANCH	200492	LEWIS
EUGENIA CENTER - CHEHALIS MAIN	054000	LEWIS
EUGENIA CENTER - MOSSYROCK	172600	LEWIS
EVERETT TREATMENT SERVICES	200452	SNOHOMISH
EVERGREEN HEALTHCARE	136100	KING
EVERGREEN RECOVERY CENTERS - BUILDING B	010802	SNOHOMISH
EVERGREEN RECOVERY CENTERS - BUILDING C	010801	SNOHOMISH
EVERGREEN RECOVERY CENTERS - EVERETT DETOX	089100	SNOHOMISH
EVERGREEN RECOVERY CENTERS - EVERETT OUTPATIENT	010803	SNOHOMISH
EVERGREEN RECOVERY CENTERS - LYNNWOOD DETOX	162800	SNOHOMISH
EVERGREEN RECOVERY CENTERS - LYNNWOOD OUTPATIENT	133600	SNOHOMISH
EVERGREEN TREATMENT SERVICES - GRAYS HARBOR CLINIC	163700	GRAYS HARBOR
EVERGREEN TREATMENT SERVICES - REACH	200477	KING
EVERGREEN TREATMENT SERVICES - SOUTH KING COUNTY CLINIC	200408	KING
EVERGREEN TREATMENT SERVICES - UNIT 1	016300	KING
EVERGREEN TREATMENT SERVICES - UNIT 2	016301	KING
EVERGREEN TREATMENT SERVICES - UNIT 3	101300	KING
EVERGREENHEALTH RECOVERY CENTER, MONROE	011200	SNOHOMISH
EXCELSIOR YOUTH CENTER - MAIN	089300	SPOKANE
EXCELSIOR YOUTH CENTER - SPOKANE BRANCH	200478	SPOKANE
EXODUS - YOUTH	037000	KING
EXODUS COUNSELING AND TREATMENT SERVICES	122800	PIERCE
F.H. COUNSELING & ASSOCIATES PLCC	162100	PIERCE
FAIRFAX BEHAVIORAL HEALTH - EVERETT E&T	200194	SNOHOMISH
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND ARTS	118200	KING
FAIRFAX BEHAVIORAL HEALTH - KIRKLAND E&T	200420	KING
FAIRFAX BEHAVIORAL HEALTH - MONROE E&T	200349	SNOHOMISH
FAMILY SOLUTIONS - 114TH AVENUE BRANCH	200433	CLARK
FAMILY SOLUTIONS - MAIN AGENCY	200061	CLARK
FAMILY SOLUTIONS - MAIN STREET BRANCH	200415	CLARK
FAMILY THERAPY & RECOVERY P.S.	165700	KING

FEAT OF WASHINGTON	200195	KING
FIRST STEP COMMUNITY COUNSELING SERVICES, LLC	131700	BENTON
FIRST THINGS FIRST 123, LLC	147500	THURSTON
FOLLMAN AGENCY	038000	SKAGIT
FOUNDATION FOR MULTICULTURAL SOLUTIONS	101700	PIERCE
FOUNDATIONS FOR LEARNING AND BEHAVIOR, INC.	200196	KING
FREE BY THE SEA AT SUNSET VIEW FREEDOM CENTER, LLC	153600	PACIFIC
FREEDOM RECOVERY, LLC	145800	THURSTON
FRIENDS OF YOUTH - DUVALL	170300	KING
FRIENDS OF YOUTH - MAIN	040901	KING
FRIENDS OF YOUTH - NORTH BEND	170200	KING
FRONTIER BEHAVIORAL HEALTH - ARGONNE ROAD	200430	SPOKANE
FRONTIER BEHAVIORAL HEALTH - BOONE	012200	SPOKANE
FRONTIER BEHAVIORAL HEALTH - CALISPEL E&T	200207	SPOKANE
FRONTIER BEHAVIORAL HEALTH - CHILD & FAMILY	200198	SPOKANE
FRONTIER BEHAVIORAL HEALTH - EVERGREEN CLUB	200193	SPOKANE
FRONTIER BEHAVIORAL HEALTH - FOOTHILLS E&T	200208	SPOKANE
FRONTIER BEHAVIORAL HEALTH - HOWARD STREET	200199	SPOKANE
FRONTIER BEHAVIORAL HEALTH - HULSKAMP BUILDING	200200	SPOKANE
FRONTIER BEHAVIORAL HEALTH - IOP SERVICES	200201	SPOKANE
FRONTIER BEHAVIORAL HEALTH - JEFFERSON STREET	200418	SPOKANE
FRONTIER BEHAVIORAL HEALTH - LIDGERWOOD	200429	SPOKANE
FRONTIER BEHAVIORAL HEALTH - MAIN	200197	SPOKANE
FRONTIER BEHAVIORAL HEALTH - NORTH PINES	200204	SPOKANE
FRONTIER BEHAVIORAL HEALTH - PACIFIC AVENUE	200362	SPOKANE
FRONTIER BEHAVIORAL HEALTH - PACT	200202	SPOKANE
FRONTIER BEHAVIORAL HEALTH - RASCHKO BUILDING	200203	SPOKANE
FRONTIER BEHAVIORAL HEALTH - SHORT AVENUE	200360	SPOKANE
FRONTIER BEHAVIORAL HEALTH - STABILIZATION SERVICES	200206	SPOKANE
FULL LIFE CARE	200060	KING
FUTURE VISIONS PROGRAM, INC.	042400	KING
GATEWAY COUNSELING SERVICES	038800	SPOKANE
GIG HARBOR COUNSELING	007001	PIERCE
GRANT INTEGRATED SERVICES - GRAND COULEE	200212	GRANT
GRANT INTEGRATED SERVICES - MATTAWA	200213	GRANT
GRANT INTEGRATED SERVICES - MOSES LAKE MAIN	002200	GRANT
GRANT INTEGRATED SERVICES - QUINCY	200214	GRANT
GRANT INTEGRATED SERVICES - ROYAL CITY	200215	GRANT
GRAY WOLF RANCH	200454	JEFFERSON
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - HOQUIAM	200510	GRAYS HARBOR
GREAT RIVERS BEHAVIORAL HEALTH AGENCY - LONGVIEW	200511	COWLITZ

GREAT RIVERS BEHAVIORAL HEALTH AGENCY - MAIN	200458	LEWIS
GREATER LAKES MENTAL HEALTHCARE - 72ND STREET	200057	PIERCE
GREATER LAKES MENTAL HEALTHCARE - MAIN	200056	PIERCE
GREATER LAKES MENTAL HEALTHCARE - PEOPLE'S PLAZA	200482	PIERCE
GREATER LAKES MENTAL HEALTHCARE - SEELEY LAKE LODGE	200059	PIERCE
GREATER LAKES MENTAL HEALTHCARE - SPANAWAY CLINIC	200364	PIERCE
GREATER LAKES RECOVERY CENTER E&T	200055	PIERCE
GREEN HILL SCHOOL SMART DRUG/ALCOHOL UNIT	057200	LEWIS
HAND IN HAND BEHAVIORAL CONSULTING LLC	200351	THURSTON
HARBORCREST BEHAVIORAL HEALTH	002500	GRAYS HARBOR
HARBORVIEW MEDICAL CENTER - INPATIENT	200217	KING
HARBORVIEW MEDICAL CENTER ADDICTIONS PROGRAM	098800	KING
HARBORVIEW MENTAL HEALTH SERVICES	200216	KING
HEALTHY WHOLE SOLUTIONS	148700	KITSAP
HELPING PROFESSIONALS WELLNESS CENTER, LLC - BATTLE GROUND	173700	CLARK
HERO HOUSE	200049	KING
HOLISTIC RECOVERY FOR MOTHERS	200493	PIERCE
HOPE + HELP	159400	KING
HOPE PLACE	178600	KING
HOPESPARKS - MAIN	200053	PIERCE
HOPESPARKS - PUYALLUP	200403	PIERCE
HOTEL CALIFORNIA BY THE SEA	174700	KING
HUMANITY'S CHILDREN	200050	KING
IDEAL BALANCE - KENNEWICK	161300	BENTON
IKRON CORPORATION GREATER SEATTLE - MAIN	200051	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - BELLEVUE	200220	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - LAKEWOOD	200223	PIERCE
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - MOUNTLAKE	200221	SNOHOMISH
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SEATTLE	200222	KING
IMAGINE BEHAVIORAL & DEVELOPMENTAL SERVICES - SPOKANE MAIN	200219	SPOKANE
INNOVATION RESOURCE CENTER	154800	YAKIMA
INSTITUTE FOR FAMILY DEVELOPMENT - BREMERTON	200079	KITSAP
INSTITUTE FOR FAMILY DEVELOPMENT - EVERETT	200078	SNOHOMISH
INSTITUTE FOR FAMILY DEVELOPMENT - FEDERAL WAY	200077	KING
INSTITUTE FOR FAMILY DEVELOPMENT - OLYMPIA	200076	THURSTON
INSTITUTE FOR FAMILY DEVELOPMENT - SPOKANE	200080	SPOKANE
INSTITUTE FOR FAMILY DEVELOPMENT - VANCOUVER	200074	CLARK
INSTITUTE FOR FAMILY DEVELOPMENT - YAKIMA	200075	YAKIMA
INTEGRATIVE COUNSELING SERVICES	136000	KING
INTEGRITY SUPPORT SERVICES, LLC	153200	YAKIMA
INTERCEPT ASSOCIATES	004300	KING

ISABELLA HOUSE	019701	SPOKANE
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - OAK HARBOR	086200	ISLAND
ISLAND ASSESSMENT & COUNSELING CENTER, INC. - SEATTLE	129400	KING
ISLAND CROSSING COUNSELING SERVICES	113900	SNOHOMISH
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - LONGVIEW/KELSO	084900	COWLITZ
KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER	085000	CLARK
KAREN'S HOUSE	172200	SPOKANE
KELSO TREATMENT SOLUTIONS	200537	COWLITZ
KENT TREATMENT SOLUTIONS	103200	KING
KENT YOUTH AND FAMILY SERVICES	016700	KING
KINDERING - BOTHELL	200303	SNOHOMISH
KINDERING CENTER	200226	KING
KING COUNTY CRISIS & COMMITMENT SERVICES	200227	KING
KING COUNTY EMERGENCY SERVICE PATROL	004404	KING
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER	200228	KING
KITSAP MENTAL HEALTH SERVICES - ADOLESCENT INPATIENT	200230	KITSAP
KITSAP MENTAL HEALTH SERVICES - ADULT INPATIENT	200229	KITSAP
KITSAP MENTAL HEALTH SERVICES - MAIN	018400	KITSAP
KITSAP MENTAL HEALTH SERVICES - PORT ORCHARD	168700	KITSAP
KITSAP MENTAL HEALTH SERVICES - SHERIDAN ROAD	174300	KITSAP
KITSAP MENTAL HEALTH SERVICES - WHEATON WAY	200338	KITSAP
KITSAP RECOVERY CENTER - INPATIENT	006700	KITSAP
KITSAP RECOVERY CENTER - OUTPATIENT	200505	KITSAP
KLALLAM COUNSELING SERVICES	022600	CLALLAM
KLEAN LONG BEACH WASHINGTON LLC	159500	PACIFIC
KWAWACHEE COUNSELING CENTER	008900	PIERCE
L.E.A.P.S. AND BEYOND, INC. - MAIN	200233	ISLAND
L.E.A.P.S. AND BEYOND, INC. - OAK HARBOR BRANCH	200345	ISLAND
L.E.A.P.S. AND BEYOND, INC. - PORT ORCHARD	200346	ISLAND
L.E.A.P.S. AND BEYOND, INC. - TACOMA	200538	PIERCE
LA ESPERANZA HCS - BURIEN	155500	KING
LA ESPERANZA HCS - LYNNWOOD	124500	SNOHOMISH
LA FE - THE HOPE, LLC	145500	KING
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER - MAIN	167100	WHATCOM
LAKE WHATCOM RESIDENTIAL & TREATMENT CENTER - SUNSET DUPLEX	200441	WHATCOM
LAKESIDE CENTER FOR AUTISM, LLC	200232	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - AUBURN	009404	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EDMONDS	009401	SNOHOMISH
LAKESIDE-MILAM RECOVERY CENTERS, INC. - EVERETT	004603	SNOHOMISH
LAKESIDE-MILAM RECOVERY CENTERS, INC. - ISSAQUAH	035104	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - KIRKLAND	009402	KING

LAKESIDE-MILAM RECOVERY CENTERS, INC. - KIRKLAND INPATIENT	004600	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - PUYALLUP	035103	PIERCE
LAKESIDE-MILAM RECOVERY CENTERS, INC. - RENTON	009400	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE EASTLAKE	091400	KING
LAKESIDE-MILAM RECOVERY CENTERS, INC. - TACOMA	004604	PIERCE
LIFELINE CONNECTIONS - ABERDEEN	200484	GRAYS HARBOR
LIFELINE CONNECTIONS - CAMAS	200306	CLARK
LIFELINE CONNECTIONS - SOUTH BEND	200486	PACIFIC
LIFELINE CONNECTIONS - VANCOUVER BRANCH	172100	CLARK
LIFELINE CONNECTIONS - VANCOUVER MAIN	000900	CLARK
LINCOLN COUNTY ALCOHOL & DRUG CENTER	007600	LINCOLN
LOURDES COUNSELING CENTER - CULLUM HOUSE	200236	BENTON
LOURDES COUNSELING CENTER - E&T	200237	BENTON
LOURDES COUNSELING CENTER - KENNEWICK	200428	BENTON
LOURDES COUNSELING CENTER - MAIN	025202	BENTON
LOURDES COUNSELING CENTER - PASCO	177600	FRANKLIN
LOURDES COUNSELING CENTER - TRIAGE	200188	BENTON
LOVE OVERWHELMING	200371	COWLITZ
LOVELAND ASSOCIATES	144400	KING
LUMMI COUNSELING SERVICES	022700	WHATCOM
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK AVENUE	200088	BENTON
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENNEWICK MORAIN	200501	BENTON
LUTHERAN COMMUNITY SERVICES NORTHWEST - KENT	200312	KING
LUTHERAN COMMUNITY SERVICES NORTHWEST - SEATAC MAIN	200084	KING
LUTHERAN COMMUNITY SERVICES NORTHWEST - SPOKANE	200087	SPOKANE
LUTHERAN COMMUNITY SERVICES NORTHWEST - VANCOUVER	200086	CLARK
MAGNOLIA BEHAVIOR THERAPY - DUPONT	200238	PIERCE
MAGNOLIA BEHAVIOR THERAPY - SNOHOMISH	200352	SNOHOMISH
MAKAH RECOVERY SERVICES	022800	CLALLAM
MATT TALBOT CENTER	138600	KING
MAXIM HEALTHCARE SERVICES, INC.	200444	PIERCE
MEIER CLINICS	200090	KING
MERIT RESOURCE SERVICES - ELLENSBURG	174000	KITTITAS
MERIT RESOURCE SERVICES - KENNEWICK	200470	BENTON
MERIT RESOURCE SERVICES - SUNNYSIDE	014100	YAKIMA
MERIT RESOURCE SERVICES - TOPPENISH	014101	YAKIMA
MERIT RESOURCE SERVICES - WAPATO	083200	YAKIMA
MERIT RESOURCE SERVICES - YAKIMA	107800	YAKIMA
METROPOLITAN DEVELOPMENT COUNCIL - TACOMA E&T	200240	PIERCE
METROPOLITAN DEVELOPMENT COUNCIL - THE CENTER	018900	PIERCE
MINDFUL ALTERNATIVES	120800	KING

MOSAIC CHILDREN'S THERAPY CLINIC	200243	KING
MOTIVATIONS	043100	KING
MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM	022900	KING
MUCKLESHOOT FAMILY AND YOUTH BEHAVIORAL HEALTH	157000	KING
MULTICARE BEHAVIORAL HEALTH - ADOLESCENT BEHAVIORAL HEALTH	200440	PIERCE
MULTICARE BEHAVIORAL HEALTH - ASIAN COUNSELING SERVICES	200209	PIERCE
MULTICARE BEHAVIORAL HEALTH - AUBURN MEDICAL CENTER	200361	KING
MULTICARE BEHAVIORAL HEALTH - LUCKETT HOUSE	200211	PIERCE
MULTICARE BEHAVIORAL HEALTH - PACT	200210	PIERCE
MULTICARE BEHAVIORAL HEALTH - PUYALLUP MAIN	152800	PIERCE
MULTICARE BEHAVIORAL HEALTH - TACOMA	160400	PIERCE
N.A.T.I.V.E. PROJECT	055600	SPOKANE
NAMI SOUTHWEST WASHINGTON - MAIN	200319	CLARK
NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)	052000	PACIFIC
NAVAL HOSPITAL SUBSTANCE ABUSE AND REHABILITATION PROGRAM (SARP)	168300	ISLAND
NAVOS - AUBURN	200247	KING
NAVOS - BURIEN 136TH STREET	075300	KING
NAVOS - BURIEN 152ND STREET	161000	KING
NAVOS - BURIEN 8TH AVENUE	200246	KING
NAVOS - CLIP	200231	KING
NAVOS - INPATIENT SERVICES	200244	KING
NAVOS - KENT	200248	KING
NAVOS - MAIN	172800	KING
NAVY SUBSTANCE ABUSE REHABILITATION PROGRAM (SARP)	006900	KITSAP
NEW DIRECTIONS COUNSELING - CHEHALIS	057600	LEWIS
NEW DIRECTIONS COUNSELING - SHELTON	051401	MASON
NEW FREEDOM RECOVERY CENTER, LLC	164000	PIERCE
NEW HOPE RECOVERY, LLC	157200	CHELAN
NEW HORIZON COUNSELING SERVICES	019702	SPOKANE
NEW HORIZON COUNSELING SERVICES - VALLEY OFFICE	011401	SPOKANE
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - MAIN	178300	SNOHOMISH
NEW LIFE ADDICTION AND RECOVERY SERVICES, PLLC - SEATTLE	178400	KING
NEW LIFE RECOVERY SOLUTIONS	142100	KING
NEW TRADITIONS	141600	KING
NEXUS YOUTH AND FAMILIES - AUBURN MAIN	015600	KING
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1029 COLE (CLOSED)	200494	KING
NEXUS YOUTH AND FAMILIES - ENUMCLAW 1356 COLE	170100	KING
NEXUS YOUTH AND FAMILIES - ENUMCLAW BLAKE STREET	170000	KING
NEXUS YOUTH AND FAMILIES - MAPLE VALLEY	200532	KING
NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM	028100	THURSTON
NOOKSACK TRIBE'S GENESIS II	023000	WHATCOM

NORTH STAR TREATMENT GROUP, LLC	139500	KING
NORTHBOUND TREATMENT SERVICES OF WASHINGTON, LLC	200495	KING
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - CHEWELAH	012501	STEVENS
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - DAVENPORT	160900	LINCOLN
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - MAIN	012500	STEVENS
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - NINE MILE FALLS	200245	SPOKANE
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES - REPUBLIC	001900	FERRY
NORTHEAST WASHINGTON ALLIANCE COUNSELING SERVICES E&T	200512	STEVENS
NORTHSHORE YOUTH AND FAMILY SERVICES	118000	KING
NORTHSIDE COUNSELING, LLC	176100	KING
NORTHWEST ABA - MAIN	200250	KING
NORTHWEST ABA - TACOMA	200378	PIERCE
NORTHWEST AUTISM CENTER - SPOKANE BRANCH	200305	SPOKANE
NORTHWEST AUTISM CENTER - SPOKANE MAIN	200249	SPOKANE
NORTHWEST BEHAVIORAL ASSOCIATES	200251	KING
NORTHWEST HOSPITAL E&T - SEATTLE	200252	KING
NORTHWEST INDIAN TREATMENT CENTER	074000	GRAYS HARBOR
NORTHWEST INTEGRATED HEALTH - LAKEWOOD	200431	PIERCE
NORTHWEST INTEGRATED HEALTH - MAIN	162000	PIERCE
NORTHWEST INTEGRATED HEALTH - TACOMA	173000	PIERCE
NORTHWEST RECOVERY CENTERS, LLC	151800	KING
NORTHWEST REGIONAL COUNCIL	200456	WHATCOM
NORTHWEST RESOURCES II, INC. - LACEY	160800	THURSTON
NORTHWEST RESOURCES II, INC. - OLYMPIA BRANCH	162700	THURSTON
NORTHWEST RESOURCES II, INC. - OLYMPIA MAIN	061600	THURSTON
NORTHWEST RESOURCES II, INC. - SHELTON	101500	MASON
NORTHWEST RESOURCES ONE, LLC	003900	KING
NUA COUNSELING, PLLC	173900	KING
NUEVA VIDA COUNSELING SERVICES, LLC	152600	YAKIMA
OKANOGAN BEHAVIORAL HEALTHCARE, INC.	007800	OKANOGAN
OLALLA GUEST LODGE	007000	KITSAP
OLIVE CREST	200091	KING
OLYMPIC HEALTH & RECOVERY SERVICES	200527	THURSTON
OLYMPIC PERSONAL GROWTH CENTER	086000	CLALLAM
OPAL CLINIC FOR EATING DISORDERS, PLLC	200092	KING
ORGANIZATION FOR RESEARCH AND LEARNING	200254	KING
PACIFIC ISLAMIC COMMUNITY AND CULTURAL SERVICES	200385	KING
PACIFIC NORTHWEST AUTISM	200255	WHATCOM
PALOUSE RECOVERY CENTER, LLC	075500	WHITMAN
PALOUSE RIVER COUNSELING CENTER - MAIN	013800	WHITMAN
PALOUSE RIVER COUNSELING CENTER - PULLMAN	200256	WHITMAN

PARTNERS WITH FAMILIES AND CHILDREN	098700	SPOKANE
PASSAGES FAMILY SUPPORT	200093	SPOKANE
PATHWAYS OF WASHINGTON, INC.	200355	SPOKANE
PEACEHEALTH SOUTHWEST MEDICAL CENTER	200094	CLARK
PEACEHEALTH ST. JOHN MEDICAL CENTER E&T	200095	COWLITZ
PEACEHEALTH ST. JOSEPH MEDICAL CENTER E&T	200096	WHATCOM
PEARL STREET CENTER - CLIP	200097	PIERCE
PEND OREILLE COUNTY COUNSELING SERVICES - MAIN	008100	PEND OREILLE
PEND OREILLE COUNTY COUNSELING SERVICES - METALINE FALLS	169000	PEND OREILLE
PENINSULA BEHAVIORAL HEALTH - ARLENE ENGEL HOME	200258	CLALLAM
PENINSULA BEHAVIORAL HEALTH - CLALLAM COUNTY RESPITE CENTER	200261	CLALLAM
PENINSULA BEHAVIORAL HEALTH - HORIZON CENTER	200259	CLALLAM
PENINSULA BEHAVIORAL HEALTH - MAIN	015000	CLALLAM
PENINSULA BEHAVIORAL HEALTH - SEQUIM	200260	CLALLAM
PENINSULA COUNSELING, INC.	146100	PIERCE
PERCH BEHAVIORAL HEALTH	200331	PIERCE
PHOENIX RECOVERY SERVICES, LLC	114600	SKAGIT
PIB-PROCESO, LLC - KENT	165600	KING
PIB-PROCESO, LLC - SEATTLE	156500	KING
PIERCE COUNTY ALLIANCE - MAIN	019100	PIERCE
PIERCE COUNTY ALLIANCE - THURSTON COUNTY DRUG COURT	140400	THURSTON
PINNACLE PEAK INSTITUTE, INC.	152700	THURSTON
PIONEER ADULT COUNSELING - TACOMA	114000	PIERCE
PIONEER CENTER EAST	111600	SPOKANE
PIONEER CENTER NORTH	005002	SKAGIT
PIONEER COUNSELING SERVICES - SEATTLE	096500	KING
PIONEER COUNSELING SERVICES - SPOKANE	172900	SPOKANE
PIONEER HUMAN SERVICES - CO-OCCURRING RESIDENTIAL PROGRAM (CORP)	128100	KING
PIONEER HUMAN SERVICES - SKAGIT COUNTY CRISIS CENTER	153000	SKAGIT
PIONEER HUMAN SERVICES - SPOKANE RESIDENTIAL REENTRY CENTER	200439	SPOKANE
PORT GAMBLE S'KLALLAM RECOVERY CENTER	088800	KITSAP
PORT GARDNER BAY RECOVERY, INC.	114400	SNOHOMISH
PROGRAMA SER	200529	KING
PROSPERITY WELLNESS CENTER - GRAHAM	200544	PIERCE
PROSPERITY WELLNESS CENTER - MAIN	103700	PIERCE
PROSPERITY WELLNESS CENTER - OUTPATIENT SERVICES	169800	PIERCE
PROTOCOL SERVICES, INC.	200101	
PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - CCC BRANCH	200483	THURSTON
PROVIDENCE HEALTH & SERVICES BEHAVIORAL HEALTH - MAIN	200098	THURSTON
PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES	035700	SNOHOMISH
PROVIDENCE SACRED HEART MEDICAL CENTER - E&T	200100	SPOKANE

PROVIDENCE SACRED HEART MEDICAL CENTER - OUTPATIENT	200099	SPOKANE
PSYCHIATRIC SOLUTIONS	200528	SPOKANE
QUALITY BEHAVIORAL HEALTH - CLARKSTON	014600	ASOTIN
QUALITY BEHAVIORAL HEALTH - POMEROY	014601	GARFIELD
QUILEUTE COUNSELING AND RECOVERY SERVICES	043600	CLALLAM
QUINAULT INDIAN NATION	004500	GRAYS HARBOR
RAGING RIVER RECOVERY CENTER	113500	KING
RECOVERY & WELLNESS CENTER OF EASTERN WASHINGTON	200321	BENTON
RECOVERY MATTERS, LLC	164200	SNOHOMISH
REFLECTIONS COUNSELING SERVICES GROUP	155000	CLALLAM
REFUGEE WOMEN'S ALLIANCE - KENT	200107	KING
REFUGEE WOMEN'S ALLIANCE - SEATAC	200106	KING
REFUGEE WOMEN'S ALLIANCE - SEATTLE MAIN	200105	KING
REHAB WITHOUT WALLS, INC.	200373	SNOHOMISH
RELIANCE HEALTH SYSTEMS - NEUROPSYCH PROGRAM	200397	BENTON
RELIANCE HEALTH SYSTEMS - SALUS HEALTH	168900	BENTON
REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)	052200	PIERCE
RENTON AREA YOUTH & FAMILY SERVICES	017100	KING
RESIDENCE XII - KIRKLAND	005200	KING
RI INTERNATIONAL - COMMUNITY BUILDING	200104	PIERCE
RI INTERNATIONAL - CSU	200103	PIERCE
RI INTERNATIONAL - E&T	200102	PIERCE
RIVERSIDE RECOVERY CENTER, INC.	035100	SPOKANE
RIVERTON PLACE	117000	KING
RMH SERVICES	200108	KITSAP
ROOTS CLINIC AT ACADEMY FOR PRECISION LEARNING	200372	KING
ROYAL LIFE CENTERS, LLC - CASCADE	176600	SPOKANE
ROYAL LIFE CENTERS, LLC - HAVEN	176500	THURSTON
ROYAL LIFE CENTERS, LLC - OLYMPIC	176800	THURSTON
ROYAL LIFE CENTERS, LLC - PUGET SOUND	176400	PIERCE
ROYAL LIFE CENTERS, LLC - SPOKANE DETOX	176700	SPOKANE
RYTHER - BELLEVUE	159100	KING
RYTHER - MAIN	005500	KING
RYTHER - MUKILTEO	166400	SNOHOMISH
SAFE HARBOR RECOVERY CENTER, INC. FPC	081000	JEFFERSON
SAUK-SUIATTLE INDIAN TRIBE	144800	SNOHOMISH
SCHICK SHADEL HOSPITAL	163800	KING
SEA MAR BEHAVIORAL HEALTH - ABERDEEN	137000	GRAYS HARBOR
SEA MAR BEHAVIORAL HEALTH - ANACORTES	200264	SKAGIT
SEA MAR BEHAVIORAL HEALTH - BELLEVUE	200239	KING
SEA MAR BEHAVIORAL HEALTH - BELLEVUE CHILD & FAMILY	200353	KING

SEA MAR BEHAVIORAL HEALTH - BELLINGHAM	052100	WHATCOM
SEA MAR BEHAVIORAL HEALTH - DES MOINES	200435	KING
SEA MAR BEHAVIORAL HEALTH - ELMA	200343	GRAYS HARBOR
SEA MAR BEHAVIORAL HEALTH - EVERETT	052101	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - EVERETT CHILD & FAMILY	200334	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - FEDERAL WAY	137900	KING
SEA MAR BEHAVIORAL HEALTH - GIG HARBOR	200265	PIERCE
SEA MAR BEHAVIORAL HEALTH - KELSO	200374	COWLITZ
SEA MAR BEHAVIORAL HEALTH - KENT	200401	KING
SEA MAR BEHAVIORAL HEALTH - LYNNWOOD	139100	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - MONROE	104600	SNOHOMISH
SEA MAR BEHAVIORAL HEALTH - MOUNT VERNON	079300	SKAGIT
SEA MAR BEHAVIORAL HEALTH - OAK HARBOR	163100	ISLAND
SEA MAR BEHAVIORAL HEALTH - OLYMPIA	200267	THURSTON
SEA MAR BEHAVIORAL HEALTH - PREGNANT & PARENTING WOMEN	164100	PIERCE
SEA MAR BEHAVIORAL HEALTH - PUYALLUP	127100	PIERCE
SEA MAR BEHAVIORAL HEALTH - SEATTLE	121300	KING
SEA MAR BEHAVIORAL HEALTH - TACOMA	089900	PIERCE
SEA MAR BEHAVIORAL HEALTH - TACOMA HEALTHCARE FOR THE HOMELESS	200514	PIERCE
SEA MAR BEHAVIORAL HEALTH - TUMWATER	110200	THURSTON
SEA MAR BEHAVIORAL HEALTH - TURNING POINT RECOVERY	172300	KING
SEA MAR BEHAVIORAL HEALTH - VANCOUVER 109TH COURT	200268	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER FOURTH PLAIN	200269	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER MEDICAL	200339	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER ORCHARDS	200337	CLARK
SEA MAR BEHAVIORAL HEALTH - VANCOUVER SALMON CREEK	200309	CLARK
SEA MAR BEHAVIORAL HEALTH - WHITE CENTER	200434	KING
SEA MAR BEHAVIORAL HEALTH - YELM	176000	THURSTON
SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA	052102	PIERCE
SEA MAR VISIONS FEMALE YOUTH TREATMENT CENTER	095800	WHATCOM
SEADRUNAR	017200	KING
SEATTLE BEHAVIOR CONSULTING AND THERAPY, LLC	200270	KING
SEATTLE CHILDREN'S HOSPITAL	150200	KING
SEATTLE CHILDREN'S HOSPITAL - AUTISM CENTER	200392	KING
SEATTLE CHILDREN'S HOSPITAL - BELLEVUE PSYCHIATRY AT OVERLAKE	200390	KING
SEATTLE CHILDREN'S HOSPITAL - MAIN	200347	KING
SEATTLE CHILDREN'S HOSPITAL - ODESSA BROWN CHILDREN'S CLINIC	200391	KING
SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES	115200	KING
SEATTLE INDIAN HEALTH BOARD	005700	KING
SENDAN CENTER	200419	WHATCOM
SENECA FAMILY OF AGENCIES	200242	KING

SERENITY COUNSELING SERVICES	016500	PIERCE
SERENITY LANE - VANCOUVER	148800	CLARK
SERENITY POINT COUNSELING SERVICES, LLC	107400	WALLA WALLA
SHAMROCK GROUP, INC.	009700	KING
SHIPOWICK-SMITH COUNSELING & POSITIVE LIVING CENTER	145900	CHELAN
SHOALWATER BAY INDIAN TRIBE	112300	PACIFIC
SISTERS IN COMMON	200109	KING
SKAGIT REGIONAL HEALTH	200110	SKAGIT
SKAMANIA COUNTY COMMUNITY HEALTH	010600	SKAMANIA
SKOKOMISH H.O.P.E. ALCOHOL & DRUG PROGRAM	048500	MASON
SMOKEY POINT BEHAVIORAL HOSPITAL	146200	SNOHOMISH
SNOHOMISH COUNTY HUMAN SERVICES	200112	SNOHOMISH
SOAR BEHAVIOR SERVICES	200388	SPOKANE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - ABERDEEN	012701	GRAYS HARBOR
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - KENT	200467	KING
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - MOSES LAKE	155300	GRANT
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - PUYALLUP	109600	PIERCE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - SHELTON	147800	MASON
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - SPOKANE	120300	SPOKANE
SOCIAL TREATMENT OPPORTUNITY PROGRAMS II, INC. - TACOMA	012702	PIERCE
SOMERSET COUNSELING CENTER, LLC	105200	BENTON
SOUND EDUCATION & BEHAVIOR ASSOCIATES - MAIN	200271	KING
SOUND EDUCATION & BEHAVIOR ASSOCIATES - THIRD AVENUE	200425	KING
SOUND FAMILY CENTER LLC	166900	KING
SOUND MENTAL HEALTH - AUBURN	106400	KING
SOUND MENTAL HEALTH - BELLEVUE BUILDING A	118300	KING
SOUND MENTAL HEALTH - BELLEVUE BUILDING B	200274	KING
SOUND MENTAL HEALTH - BROADWAY	200442	KING
SOUND MENTAL HEALTH - CAPITOL HILL MAIN	105900	KING
SOUND MENTAL HEALTH - CAPITOL HILL NORTH	200272	KING
SOUND MENTAL HEALTH - NORTHGATE	106500	KING
SOUND MENTAL HEALTH - REDMOND	200276	KING
SOUND MENTAL HEALTH - SOUTHCENTER	106200	KING
SOUND MENTAL HEALTH - TUKWILA	200443	KING
SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES	111900	THURSTON
SOUTHEAST YOUTH AND FAMILY SERVICES	200116	KING
SOUTHWEST YOUTH AND FAMILY SERVICES	200117	KING
SPARC - CHRISTOPH HOUSE	012102	SPOKANE
SPARC - DELANEY HOUSE	165900	SPOKANE
SPARC - OUTPATIENT SERVICES	012101	SPOKANE
SPARC - SHAW HOUSE	165800	SPOKANE

SPARC - WESTBROOK HOUSE	012100	SPOKANE
SPECIALTY SERVICES II, LLC	158400	CLALLAM
SPECIALTY SERVICES III, LLC	177400	CLALLAM
SPOKANE COUNTY DETENTION SERVICES	200118	SPOKANE
SPOKANE COUNTY JUVENILE COURT SERVICES	200119	SPOKANE
SPOKANE COUNTY SUPPORTIVE LIVING PROGRAM	200120	SPOKANE
SPOKANE PUBLIC SCHOOLS - DISTRICT 81	136200	SPOKANE
SPOKANE REGIONAL HEALTH DISTRICT TREATMENT SERVICES	011300	SPOKANE
SPOKANE TREATMENT & RECOVERY SERVICES	012000	SPOKANE
SPOKANE TREATMENT SOLUTIONS	154200	SPOKANE
SPOKANE TRIBE OF INDIANS BEHAVIORAL HEALTH PROGRAM	009900	STEVENS
SQUAXIN ISLAND BEHAVIORAL HEALTH OUTPATIENT PROGRAM	037400	MASON
ST. PETER CHEMICAL DEPENDENCY CENTER	015300	THURSTON
STARTING POINT, INC.	002800	CLARK
STEPS, LLC	200052	KING
STILLAGUAMISH TRIBE OF INDIANS	081300	SNOHOMISH
STRENGTHENING FOUNDATIONS LLC	200277	COWLITZ
SUM OF LEARNING	200278	KING
SUN RAY COURT	083800	SPOKANE
SUNDOWN M RANCH	014000	YAKIMA
SUNRISE CENTERS	006100	KING
SUNRISE SERVICES, INC. - BELLINGHAM	200317	WHATCOM
SUNRISE SERVICES, INC. - CONCRETE MAIN STREET	200363	SKAGIT
SUNRISE SERVICES, INC. - CONCRETE SR 20	175700	SKAGIT
SUNRISE SERVICES, INC. - COUPEVILLE	200380	ISLAND
SUNRISE SERVICES, INC. - EVERETT 1718 BROADWAY	174400	SNOHOMISH
SUNRISE SERVICES, INC. - EVERETT BROADWAY	200381	SNOHOMISH
SUNRISE SERVICES, INC. - EVERETT MAIN	168100	SNOHOMISH
SUNRISE SERVICES, INC. - MOUNT VERNON 2ND STREET	200279	SKAGIT
SUNRISE SERVICES, INC. - MOUNT VERNON COLLEGE WAY	156600	SKAGIT
SUNRISE SERVICES, INC. - MOUNTLAKE TERRACE	200324	SNOHOMISH
SUNRISE SERVICES, INC. - OAK HARBOR	200383	ISLAND
SUNRISE SERVICES, INC. - SEDRO WOOLEY	200384	SKAGIT
SUNRISE SERVICES, INC. - STANWOOD	200318	SNOHOMISH
SUNSHINE BEHAVIORAL HEALTH	200280	SPOKANE
SUPPORTED EDUCATION ENHANCING REHABILITATION (SEER)	200281	SPOKANE
SUQUAMISH TRIBE WELLNESS PROGRAM	110900	KITSAP
SWEDISH EDMONDS E&T	200121	SNOHOMISH
SWEDISH MEDICAL CENTER - BALLARD	044901	KING
SWEDISH MEDICAL CENTER, BALLARD BEHAVIORAL HEALTH	200394	KING
SWINOMISH WELLNESS PROGRAM	123800	SKAGIT

TACOMA DETOXIFICATION CENTER	018902	PIERCE
TACOMA TREATMENT SOLUTIONS	111700	PIERCE
TACOMA-PIERCE COUNTY TREATMENT SERVICES	019000	PIERCE
TAMARACK CENTER - CLIP	200122	SPOKANE
TAMARACK CENTER - OUTPATIENT	200123	SPOKANE
TCM TEAM	200115	CLARK
TELECARE - CLARK COUNTY E&T	200124	CLARK
TELECARE - COMMUNITY ALTERNATIVES TEAM	200535	PIERCE
TELECARE - MASON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM	168500	MASON
TELECARE - NORTH SOUND EVALUATION & TREATMENT	200307	SKAGIT
TELECARE - THURSTON MASON CRISIS TRIAGE	200041	THURSTON
TELECARE - THURSTON MASON E&T	200500	THURSTON
TELECARE - THURSTON MASON TRANSITIONAL HOUSING PROGRAM	200509	THURSTON
TELECARE - THURSTON MOBILE OUTREACH & INTENSIVE CASE MANAGEMENT TEAM	200498	THURSTON
THE CENTER FOR ALCOHOL AND DRUG TREATMENT	000600	CHELAN
THE CLEARING	160600	SAN JUAN
THE EMILY PROGRAM - LACEY	200128	THURSTON
THE EMILY PROGRAM - RTF	200386	KING
THE EMILY PROGRAM - SEATTLE	200126	KING
THE EMILY PROGRAM - SPOKANE	200127	SPOKANE
THE EVERGREEN AT NORTHPOINT	200447	KING
THE HEALING LODGE - BUTTERFLY PELPALWICHIYA GIRLS CD	046200	SPOKANE
THE HEALING LODGE - CEDAR BOYS COD	150500	SPOKANE
THE HEALING LODGE - SAGE BOYS CD	150600	SPOKANE
THE JUANITA CENTER LLC	148000	SNOHOMISH
THE MARC - MILES ABA SERVICES - SILVERDALE	200282	KITSAP
THE RECOVERY VILLAGE RIDGEFIELD	177700	CLARK
THE RIGHT CHOICE COUNSELING SERVICE, INC.	042900	KITSAP
THE RIGHT STEP, INC.	051400	THURSTON
THE SANCTUARY AT THE LAKE	004800	CHELAN
THERAPEUTIC HEALTH SERVICES - BELLEVUE	004000	KING
THERAPEUTIC HEALTH SERVICES - EVERETT	111200	SNOHOMISH
THERAPEUTIC HEALTH SERVICES - KENT	150900	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE RAINIER AVENUE	083500	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE SENECA STREET	104400	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE SUMMIT AVENUE	015800	KING
THERAPEUTIC HEALTH SERVICES - SEATTLE YOUTH & FAMILY	016900	KING
THERAPEUTIC HEALTH SERVICES - SHORELINE	015801	KING
THIRA HEALTH, LLC	200330	KING
THUNDERBIRD - SEATTLE INDIAN HEALTH BOARD	005701	KING
THURSTON COUNTY E&T CENTER	200130	THURSTON

TRANSITIONAL RESOURCES	200131	KING
TRI-CITIES COMMUNITY HEALTH - KENNEWICK	155200	BENTON
TRI-CITIES COMMUNITY HEALTH - PASCO	110300	FRANKLIN
TRI-CITIES COMMUNITY HEALTH - RICHLAND	200253	BENTON
TRILLIUM TREATMENT CENTER	109800	CLALLAM
TRIUMPH TREATMENT SERVICES - BETH'S PLACE	152200	YAKIMA
TRIUMPH TREATMENT SERVICES - CASITA	114900	YAKIMA
TRIUMPH TREATMENT SERVICES - INSPIRATIONS	166300	YAKIMA
TRIUMPH TREATMENT SERVICES - JAMES OLDHAM TREATMENT CENTER	013901	YAKIMA
TRIUMPH TREATMENT SERVICES - MAIN	013900	YAKIMA
TRIUMPH TREATMENT SERVICES - RIEL HOUSE	013902	YAKIMA
TRUE NORTH-ESD 113 - GRAYS HARBOR	096600	GRAYS HARBOR
TRUE NORTH-ESD 113 - LEWIS	101800	LEWIS
TRUE NORTH-ESD 113 - MASON	105800	MASON
TRUE NORTH-ESD 113 - PACIFIC	143100	PACIFIC
TRUE NORTH-ESD 113 - TUMWATER MAIN	099600	THURSTON
TRUE NORTH-ESD 113 - YELM	105700	THURSTON
TRUE STAR BEHAVIORAL HEALTH SERVICES	095600	CLALLAM
TSAPOWUM CHEHALIS TRIBAL BEHAVIORAL HEALTH	009600	GRAYS HARBOR
TULALIP TRIBAL BEHAVIORAL HEALTH SERVICES	024000	SNOHOMISH
UKRAINIAN COMMUNITY CENTER OF WASHINGTON - SEATTLE	200132	KING
UNITED NORTHWEST RECOVERY CENTER	071300	SKAGIT
UNITED TREATMENT AND THERAPY	112700	KING
UNITY CARE NORTHWEST - BELLINGHAM BRANCH	200073	WHATCOM
UNITY CARE NORTHWEST - FERNDALE 5603 BRANCH	200310	WHATCOM
UNITY CARE NORTHWEST - FERNDALE 5616 BRANCH	200404	WHATCOM
UNITY CARE NORTHWEST - MAIN	200072	WHATCOM
UNIVERSITY OF WASHINGTON AUTISM CENTER - MAIN	200471	KING
UNIVERSITY OF WASHINGTON AUTISM CENTER - TACOMA	200472	PIERCE
UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM	126100	SKAGIT
UW HARING CENTER	200316	KING
VALLEY CITIES COUNSELING & CONSULTATION - AUBURN	091100	KING
VALLEY CITIES COUNSELING & CONSULTATION - AURORA CLINIC	200517	KING
VALLEY CITIES COUNSELING & CONSULTATION - DES MOINES	164700	KING
VALLEY CITIES COUNSELING & CONSULTATION - ENUMCLAW	200405	KING
VALLEY CITIES COUNSELING & CONSULTATION - FEDERAL WAY	090900	KING
VALLEY CITIES COUNSELING & CONSULTATION - KENT	091000	KING
VALLEY CITIES COUNSELING & CONSULTATION - LAKE CITY CLINIC	200520	KING
VALLEY CITIES COUNSELING & CONSULTATION - PIKE PLACE CLINIC	200523	KING
VALLEY CITIES COUNSELING & CONSULTATION - RENTON	164600	KING
VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE MERIDIAN AVENUE	174600	KING

VALLEY CITIES COUNSELING & CONSULTATION - SEATTLE RAINIER AVENUE	174100	KING
VANCOUVER TREATMENT SOLUTIONS	112000	CLARK
VASHON YOUTH AND FAMILY SERVICES	200134	KING
VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)	001300	CLARK
VETERANS ADMINISTRATION - YAKIMA SUBSTANCE ABUSE OUTREACH	107000	YAKIMA
VETERANS ADMINISTRATION MEDICAL CENTER - AMERICAN LAKE	010200	PIERCE
VETERANS ADMINISTRATION MEDICAL CENTER - WALLA WALLA	013100	WALLA WALLA
VETERANS ADMINISTRATION PUGET SOUND HEALTH CARE SYSTEM - SEATTLE	006400	KING
VETERANS AFFAIRS MEDICAL CENTER - SPOKANE	012400	SPOKANE
VOLUNTEERS OF AMERICA CARE CRISIS RESPONSE SERVICES	200135	SNOHOMISH
WAHKIAKUM COUNTY HEALTH AND HUMAN SERVICES	001502	WAHKIAKUM
WASHINGTON NATIONAL COUNSELING, LLC	200148	KING
WATERFRONT COUNSELING IN BLAINE	131800	WHATCOM
WEST END OUTREACH SERVICES	000800	CLALLAM
WEST SOUND TREATMENT CENTER - PORT ORCHARD	006600	KITSAP
WEST SOUND TREATMENT CENTER - POULSBO	169700	KITSAP
WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.	054100	CLARK
WESTERN STATE HOSPITAL	200508	PIERCE
WHATCOM COMMUNITY DETOX	119600	WHATCOM
WILLAPA BEHAVIORAL HEALTH - LONG BEACH	134300	PACIFIC
WILLAPA BEHAVIORAL HEALTH - RAYMOND	134400	PACIFIC
YAKAMA INDIAN NATION COMPREHENSIVE ALCOHOLISM PROGRAM	014200	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - GRANDVIEW	200285	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - TOPPENISH	200286	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA 12TH AVENUE	050001	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA KERN ROAD	200284	YAKIMA
YAKIMA VALLEY FARM WORKERS CLINIC - YAKIMA MAIN	200283	YAKIMA
YAKIMA VALLEY MEMORIAL HOSPITAL E&T	200287	YAKIMA
YFA CONNECTIONS	020000	SPOKANE
YMCA OF GREATER SEATTLE	167200	KING
YOUTH EASTSIDE SERVICES - BELLEVUE MAIN	006500	KING
YOUTH EASTSIDE SERVICES - KIRKLAND	006501	KING
YOUTH EASTSIDE SERVICES - REDMOND	073500	KING
YWCA OF SPOKANE YOUNG WOMAN'S CHRISTIAN ASSOCIATION	200536	SPOKANE