

PROVIDERS APPROVED FOR MOBILE VAN MEDICATION ASSISTED TREATMENT INITIATIVE

Atlantic County

Approved Enhancements	<u>Clinical Review</u> Yes	<u>COOC</u> Yes	<u>Medication Assisted Treatment</u> Yes	<u>Recovery Support</u> Yes				
<u>SITE LICENSE # 2000275</u>	Project Row - Mobile Van							
	1315 Pacific Avenue Atlantic City, NJ 08401							
	EMAIL: Davis.Henrietta@jbrcnj.org							
	Phone: 609-345-4035 FAX: 609-345-2461							
	<u>OP</u>	<u>IOP</u>	<u>PC</u>	<u>STR</u>	<u>LTR</u>	<u>HH</u>	<u>DETOX</u>	<u>MMID</u>
LICENSED Levels of Care								
APPROVED Levels of Care MATI Van	Yes							

Mercer County

Approved Enhancements	<u>Clinical Review</u> Yes	<u>COOC</u> Yes	<u>Medication Assisted Treatment</u> Yes	<u>Recovery Support</u>				
<u>SITE LICENSE # 2000345</u>	New Horizon Treatment Services, Inc. - Mobile Van							
	132 Perry Street Trenton, NJ 08618							
	EMAIL: michael.hanlon@nhts.net							
	Phone: 609-396-5856 FAX: 609-394-8988							
	<u>OP</u>	<u>IOP</u>	<u>PC</u>	<u>STR</u>	<u>LTR</u>	<u>HH</u>	<u>DETOX</u>	<u>MMID</u>
LICENSED Levels of Care								
APPROVED Levels of Care MATI Van	Yes	Yes	Yes					

Passaic County

Approved Enhancements	<u>Clinical Review</u>	<u>COOC</u>	<u>Medication Assisted Treatment</u>			<u>Recovery Support</u>			
	Yes	Yes	Yes			Yes			
<u>SITE LICENSE # 2000108</u>	Paterson Counseling Center - Mobile Van								
	319-321 Main Street Paterson, NJ 07505								
	EMAIL: ralexander@patersoncounseling.org								
	Phone: 973-523-8316 FAX: 973-523-2248								
	<u>OP</u>	<u>IOP</u>	<u>PC</u>	<u>STR</u>	<u>LTR</u>	<u>HH</u>	<u>DETOX</u>	<u>MMID</u>	
LICENSED Levels of Care	[]	[]	[]	[]	[]	[]	[]	[]	[]
APPROVED Levels of Care MATI Van	Yes	Yes							

Union County

Approved Enhancements	<u>Clinical Review</u>	<u>COOC</u>	<u>Medication Assisted Treatment</u>			<u>Recovery Support</u>			
	Yes	Yes	Yes			Yes			
<u>SITE LICENSE # 2000304</u>	Organization for Recovery - Mobile Van								
	519 North Avenue Plainfield, NJ 07060								
	EMAIL: brafferty@organizationforrecovery.org								
	Phone: 908-769-4700 FAX: 908-769-8212								
	<u>OP</u>	<u>IOP</u>	<u>PC</u>	<u>STR</u>	<u>LTR</u>	<u>HH</u>	<u>DETOX</u>	<u>MMID</u>	
LICENSED Levels of Care	[]	[]	[]	[]	[]	[]	[]	[]	[]
APPROVED Levels of Care MATI Van	Yes	Yes							