

National Council on Alcoholism & Drug Dependence - Rochester Area

MONROE COUNTY OASAS CERTIFIED TREATMENT PROVIDERS

1931 Buffalo Road - Rochester, New York 14624 Telephone: 585-719-3480 or 719-3483 Fax: 585-423-1908 Website: www.ncadd-ra.org

SERVICE	PROVIDER NAME									
DESCRIPTION	Action for a Better Community (ABC)	Baden Street	Catholic Charities Family and Community Services	Conifer Park	Delphi Rise	East House	Helio Health	Huther Doyle		
Website	www.abcinfo.org	www.badenstreet.org	www.cfcrochester.org	www.coniferpark.com	www.delphirise.org	www.easthouse.org	www.helio.health	www.hutherdoyle.com		
Intake Contact	Evangeline Jenkins	Desirae Carmona	Yesenia Vazquez	Lasheka Leonard	Krystal Gonzalez	Leslie Alvarado-Fischer	Admissions Team	Kara Phillips		
Phone Number	585-510-4797	585-325-4910 x1141	585-546-7220 x6258	585-442-8422 x4400	585-467-2230 x206	585-238-4893	585-287-5622	585-287-9569		
Fax Number	585-262-4826	585-546-1491	585-546-2607	585-442-8494	585-730-6110	585-238-4899	585-287-5628	585-325-5154		
E-Mail	ejenkins@abcinfo.org	dcarmona@badenstreet.org	vvazquez@cfcrochester.org	lleonard@libertymgt.com	kgonzalez@delphirise.org	lalvarado-fischer@easthouse.org	HelioRocAdmissions@helio.health	Kphillips@hutherdoyle.com		
EVALUATION SERVICES										
Evaluation	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		PROVIDE	PROVIDE		
Walk-in Evaluations We advise that everyone call and confirm the walk-in hours, due to changing COVID-19 restrictions.	M-F 8:30am-3:00pm 33 Chestnut Street		M-F 8:30am-12:30pm 79 N. Clinton Avenue	M-F 11:00am-3:00pm 556 S. Clinton Avenue	24 / 7 72 Hinchey Road		24 / 7 1850 Brighton Henrietta Townline Road	M-F 8:00am-3:00pm 360 East Avenue		
CLIENT TYPE										
Youth under 18										
Adult	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		
Female	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		
Male	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		
Client with Children	ACCEPT		ACCEPT		ACCEPT	ACCEPT		ACCEPT		
ADDICTION SERVICES										
Alcohol Use Disorder	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		
Substance Use Disorder	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		
Opioid Use Disorder	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		
* MAT	* S / V	* S / V/Sd	* S / V	* S / Sd / V	* S / Sd / V		* S / Sd / V	* S / Sd / V		
Dual Diagnosis	PROVIDE		PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		
Gambling Treatment	BBOWBE	BBO)//BE	PROVIDE PROVIDE				DBO//DE			
Spanish Program	PROVIDE	PROVIDE	PROVIDE				PROVIDE			
LEVEL OF CARE Detox				PROVIDE			PROVIDE			
Stabilization			PROVIDE	PROVIDE			PROVIDE			
Inpatient			PROVIDE	PROVIDE			PROVIDE			
Outpatient	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		PROVIDE	PROVIDE		
Residential	TROVIDE	TROVIDE	PROVIDE	TROVIDE	TROVIDE	PROVIDE		TROVIDE		
INSURANCE TYPE			TROVIDE			TROVIDE				
Aetna	ACCEPT		ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT		
CIGNA	ACCEPT		Accel	ACCEPT	ACCEPT		AUGEIT	ACCEPT		
Excellus	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT		
Fidelis	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT		
Medicaid	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		
Medicare	ACCEPT		ACCEPT	ACCEPT	ACCEPT			ACCEPT		
MVP	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT		
Public Assistance	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT		
Tricare										
YourCare Health Plan	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT		
Sliding Fee Scale	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		

For the most updated version of this directory and other resources, visit <u>https://ncadd-ra.org/programs-services/finger-lakes-addiction-resource-center</u>. *Disclaimer: information included on this template is updated biannually based on data shared with NCADD-RA from each of the providers*. Revised January 2023

* MAT (Medication-Assisted Treatment) Code: M = Methadone / S = Suboxone / Sd = Sublocade / V = Vivitrol

OPEN ACCESS 24/7 Walk-in Evaluations Delphi Rise, 72 Hinchey Road, Rochester, NY 14624 585-627-1777



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SERVICE DESCRIPTION	PROVIDER NAME									
	John L. Norris Addiction Treatment Center	Rochester Regional Health Chemical Dependency	Sisters of Charity Hospital Pathways - Rochester	Strong Recovery	Veterans Outreach Center	Villa of Hope	Westfall Associates	YWCA Supportive Living		
	www.oasas.ny.gov/location/ john-l-norris-addiction-	www.rochesterregional.org	www.chsbuffalo.org/ locations/	www.urmc.rochester.edu	www.vocroc.org	www.villaofhope.org	www.westfallassociates.com	www.ywca.org		
Website	treatment-center		pathways-rochester							
Intake Contact	Kelly Lame	Central Intake	Christina Carol	Intake Team	Alec Andrest	Intake	Reception Staff	Amy Wells		
Phone Number	585-461-1515	585-922-9900	585-424-6580	585-275-3161	585-506-9060	585-328-0834	585-473-1500	585-368-2225		
Fax Number	585-461-1602	585-423-9523	585-424-6609	585-273-1089	585-506-9063	585-436-0103	585-473-1205	585-232-3540		
E-Mail	john.Inorrisadmissionmailbox @oasas.ny.gov				alec.andrest@vocroc.org	behavioral.health@villaofhope.org	info@westfallcd.com	awells@ywcarcohester.org		
EVALUATION SERVICES										
Evaluation		PROVIDE		PROVIDE	PROVIDE	PROVIDE	PROVIDE			
Walk-in Evaluations We advise that everyone call and confirm the walk-in hours, due to changing COVID-19 restrictions.		walk-in evaluations are on hold immediate evaluations are available by calling 585-723-SAFE				M-Th 8:00am-3:00pm F 8:00am-2:00pm 1099 Jay Street Bidg J #202	urgent evaluations: M-F 8:30am-5:00pm 919 Westfall Road Bldg B, #60			
CLIENT TYPE										
Youth under 18		ACCEPT		ACCEPT		ACCEPT				
Adult	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT			
Female	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT	ACCEPT		
Male	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT			
Client with Children						ACCEPT		ACCEPT		
ADDICTION SERVICES										
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Opioid Use Disorder	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE		
* MAT	* M / S / V	* S / Sd / V		* M / S / Sd / V		* S / Sd / V	* S / Sd / V			
Dual Diagnosis	PROVIDE	PROVIDE		PROVIDE		PROVIDE	PROVIDE			
Gambling Treatment	PROVIDE									
Spanish Program		PROVIDE	PROVIDE	PROVIDE						
LEVEL OF CARE										
Detox		PROVIDE				PROVIDE				
Stabilization				PROVIDE						
Inpatient	PROVIDE	PROVIDE								
Outpatient		PROVIDE	PROVIDE	PROVIDE		PROVIDE	PROVIDE			
Residential		PROVIDE			PROVIDE	PROVIDE		PROVIDE		
INSURANCE TYPE				100557						
Aetna	ACCEPT	ACCEPT		ACCEPT		ACCEPT	ACCEPT			
CIGNA		ACCEPT	100557	100557		ACCEPT	100557			
Excellus	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT	ACCEPT		
Fidelis	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT		ACCEPT		
Medicaid	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT		ACCEPT		
Medicare	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT	ACCEPT		
MVP Public Assistance	ACCEPT ACCEPT	ACCEPT ACCEPT	ACCEPT ACCEPT	ACCEPT ACCEPT	ACCEPT	ACCEPT ACCEPT	ACCEPT	ACCEPT		
Tricare	AUCEPT	AUGEPT	AUGEPT	AUGEPT	AUGEPT	ACCEPT		ALLEPT		
YourCare Health Plan	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT			
Sliding Fee Scale	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT		
Siluing ree Scale	AUGEPT	AUGEFT	AUGEFT	AUGEFT	AUGEFT	AUGEPT	AUGEFT	AUGEFT		

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