DEPARTMENT OF HEALTH CARE SERVICES
LICENSING AND CERTIFICATION SECTION
STATUS REPORT

This is an alphabetical list by county of all non-medical alcoholism and drug abuse recovery or treatment facilities licensed and/or certified by the Department of Health Care Services.

To view facilities within a specific county, simply click on the county name below. For easier browsing and navigation through this report, please access the **"Page and Bookmark"** View option on your Adobe Reader.

Alameda County
Alpine County
Amador County
Butte County
Calaveras County
Colusa County
Contra Costa County
Del Norte County
El Dorado County
Fresno County
Glenn County
Humboldt County
Imperial County
Inyo County
Kern County
Kings County
Lake County
Lassen County
Los Angeles County
Madera County
Marin County
Mariposa County
Mendocino County
Merced County
Modoc County
Mono County
Monterey County
Napa County
Nevada County
Orange County
Placer County
Plumas County
Riverside County
Sacramento County
San Benito County
San Bernardino County
San Diego County
San Francisco County
San Joaquin County
San Luis Obispo County
San Mateo County
Santa Barbara County
Santa Clara County
Santa Cruz County
Shasta County
Sierra County
Siskiyou County
Solano County
Sonoma County
Stanislaus County
Sutter County
Tehama County
Trinity County
Tulare County
Tuolumne County
Ventura County
Yolo County
Yuba County

COMMENTS?

We are always looking for ways to improve this document. If you have any comments or suggestions, please e-mail them to hilda.espinoza@dhcs.ca.gov, or contact the Licensing and Certification Section at (916) 322-2911.

LEGEND

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES
LICENSED RESIDENTIAL FACILITIES AND/OR CERTIFIED ALCOHOL AND DRUG PROGRAMS

Program Name: The facility/program name.

Legal Name: The legal name of the entity having the authority and responsibility for the operation of the facility or program.

Address: The facility/ program address. The location where services are provided.

City/State: Name of the city where the facility/ program is located.

Record ID: The identification number issued by the Department of Health Care Services (DHCS), Licensing and Certification Section (LCS), for licensed facilities or certified programs. The last digit tells if the facility/ program is a nonprofit (N) or profit (P) entity.

Service Type: Indicates if the facility/program is:

- RES - Indicates facility licensed by the Department of Health Care Services
  (DHCS), the licensing authority for 24-hour residential nonmedical alcoholism or drug abuse recovery or treatment facilities serving adults.
- NON - Indicates a nonresidential program which has voluntarily applied to DHCS for alcohol and/ or drug certification.
- DETOX - Indicates a free standing, 24-hour nonmedical detoxification facility licensed by DHCS.
- RES-DETOX - Indicates a facility licensed by DHCS to provide 24-hour residential nonmedical alcohol and/or drug recovery, treatment, and detoxification services for adults.
- DPH - Indicates licensure by the Department of Public Health, the licensing authority for medical alcohol and drug recovery or treatment facilities whose programs are certified by DHCS. Typically, these are Chemical Dependency Recovery Hospitals.
- DSS - Indicates licensure by the Department of Social Services, the licensing authority for residential facilities for individuals in need of care and supervision whose programs are certified by DHCS. Typically, these are group homes.
- COR - Indicates the facility is under the jurisdiction of the Department of Corrections and Rehabilitation (locked facility) whose program is certified by DHCS.

Resident Capacity: Indicates the maximum number of residents authorized by DHCS to receive recovery, treatment, or detoxification services at any one time in the residential facility.

Total Occupancy: Designates the maximum number of residential facility participants plus any dependent children, staff, or volunteers who may be housed in the facility. This occupancy is approved by the State or local fire authority.

(The resident capacity and total occupancy are only indicated for licensed residential facilities. Certified nonresidential facilities show "0" as the resident capacity and total occupancy.)

Target Population: Describes the targeted population of the facility or program.

- 1.1 – Co-Ed
- 1.2 – Men Only
- 1.3 - Women Only
- 1.4 - Women/Children
- 1.5 – Youth/Adolescents
- 1.7 – Families
- 1.8 – Dual Diagnosis
- 1.9 – Co-Ed/Children
- 1.10 – Co-Ed/Youth
- 1.11 – Men/Youth
- 1.12 – Women/Youth
- 1.13 – Co-Ed/Child/Dual
- 1.14 – Women/Child/Dual

Expiration Date: Expiration date of the facility's current license and/or certification.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Alameda County**

Program Name: **CHRYSALIS**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 3837, 3839, 3841, 3843, 3845 AND 3847 TELEGRAPH AVENUE
City, State Zip: OAKLAND, CA 94609
Phone: (510) 450-1190 Fax: (510) 455-3520
Record ID: **010001AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.3
Expiration Date: 10/31/2017 IMS: No

Program Name: **CRONIN HOUSE**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 2595 DEPOT ROAD
City, State Zip: HAYWARD, CA 94545
Phone: (510) 784-5874 Fax: (510) 784-9194
Record ID: **010001BN**
Service Type: RES
Resident Capacity: 34
Total Occupancy: 34
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **PROJECT EDEN**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 22646 2ND STREET
City, State Zip: HAYWARD, CA 94541
Phone: (510) 247-8200 Fax: (510) 247-8202
Record ID: **010001CN**
Service Type: NON
Target Population: 1.5
Expiration Date: 9/30/2018 IMS: No

Program Name: **CHERRY HILL DETOXIFICATION SERVICES PROGRAM**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 2035 FAIRMONT DRIVE
City, State Zip: SAN LEANDRO, CA 94578
Phone: (866) 866-7496 Fax: (510) 351-7630
Record ID: **010001DN**
Service Type: RES-DETOX
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **COMMUNITY RECOVERY CENTER EAST**
Legal Name: THE WEST OAKLAND HEALTH COUNCIL
Address: 7501 INTERNATIONAL BOULEVARD
City, State Zip: OAKLAND, CA 94621
Phone: (510) 729-8800 Fax: (510) 569-4965
Record ID: **010005FN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **COMMUNITY RECOVERY CENTER WEST**
Legal Name: THE WEST OAKLAND HEALTH COUNCIL
Address: 700 ADELINE STREET
City, State Zip: OAKLAND, CA 94607
Phone: (510) 465-1800 Ext:2055 Fax: (510) 465-1508
Record ID: **010005JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **ORCHID WOMEN'S RECOVERY CENTER**
Legal Name: BI-BETT
Address: 1342 EAST 27TH STREET
City, State Zip: OAKLAND, CA 94606
Phone: (510) 535-0611 Fax: (510) 535-1358
Record ID: **010006AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.4
Expiration Date: 4/30/2018 IMS: No

Program Name: **EAST OAKLAND RECOVERY CENTER**
Legal Name: BI-BETT
Address: 7200 BANCROFT AVENUE,
SUITE 176
City, State Zip: OAKLAND, CA 94605
Phone: (510) 568-2432 Fax: (510) 568-3912
Record ID: **010006DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **C.U.R.A., INC.**
Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE
Address: 37437 GLENMOOR DRIVE
City, State Zip: FREMONT, CA 94536
Phone: (510) 713-3200 Fax: (510) 713-0684
Record ID: **010010AN**
Service Type: RES
Resident Capacity: 51
Total Occupancy: 51
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **C.U.R.A., INC. OUTPATIENT PROGRAM**
Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE
Address: 37469 AND 37471 GLENMOOR DRIVE
City, State Zip: FREMONT, CA 94536
Phone: (510) 713-3202 Fax: (510) 713-0684
Record ID: **010010BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **NEW BRIDGE FOUNDATION**
Legal Name: THE NEW BRIDGE FOUNDATION, INC.
Address: 1816 AND 1820 SCENIC AVENUE
City, State Zip: BERKELEY, CA 94709
Phone: (510) 548-7270 Fax: (510) 665-3176
Record ID: **010013AN**
Service Type: RES-DETOX
Resident Capacity: 93
Total Occupancy: 93
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: Yes

Program Name: **NEW BRIDGE FOUNDATION**
Legal Name: THE NEW BRIDGE FOUNDATION, INC.
Address: 1816 SCENIC AVENUE
City, State Zip: BERKELEY, CA 94709
Phone: (510) 548-7270 Fax: (510) 548-1060
Record ID: **010013BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEW BRIDGE FOUNDATION, INC.**
Legal Name: THE NEW BRIDGE FOUNDATION, INC.
Address: 2323 HEARST AVENUE
City, State Zip: BERKELEY, CA 94709
Phone: (510) 548-7270 Fax: (510) 665-3176
Record ID: **010013CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ALAMEDA HOUSE**
Legal Name: THE SOLIDARITY FELLOWSHIP, INC.
Address: 34401 AND 34413 BLACKSTONE WAY
City, State Zip: FREMONT, CA 94555
Phone: (510) 796-7120
Record ID: **010019AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **PROJECT PRIDE RESIDENTIAL PROGRAM FOR WOMEN & CHILDREN**
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT
Address: 2545 SAN PABLO AVENUE
City, State Zip: OAKLAND, CA 94612
Phone: (510) 446-7150 Fax: (510) 832-0626
Record ID: **010025BN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 40
Target Population: 1.4
Expiration Date: 7/31/2018 IMS: No

Program Name: **EAST BAY COMMUNITY RECOVERY PROJECT - NONRESIDENTIAL**
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT
Address: 2577 SAN PABLO AVENUE
City, State Zip: OAKLAND, CA 94612
Phone: (510) 446-7180 Fax: (510) 832-0606
Record ID: **010025CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HAYWARD OUTPATIENT PROGRAM**
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT
Address: 22971 SUTRO STREET
City, State Zip: HAYWARD, CA 94541
Phone: (510) 446-7100 Fax: (510) 446-7191
Record ID: **010025EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **WISTAR MEN'S R & R PROGRAM, INC.**
Legal Name: WISTAR R AND R PROGRAM, INC.
Address: 9735 EMPIRE ROAD
City, State Zip: OAKLAND, CA 94603
Phone: (510) 568-9288 Fax: (510) 562-1549
Record ID: **010032EN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **AXIS COMMUNITY HEALTH CENTER**
Legal Name: AXIS COMMUNITY HEALTH, INC.
Address: 6666 OWENS DRIVE
City, State Zip: PLEASANTON, CA 94588
Phone: (925) 462-1755 Fax: (925) 485-1265
Record ID: **010046BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **SECOND CHANCE (TRI-CITIES), INC.**
Legal Name: SECOND CHANCE, INC.
Address: 6330 THORNTON AVENUE, SUITE B
City, State Zip: NEWARK, CA 94560
Phone: (510) 792-4357 Fax: (510) 745-1693
Record ID: **010061AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SECOND CHANCE PHOENIX PROGRAM**
Legal Name: SECOND CHANCE, INC.
Address: 6330 THORNTON AVENUE,
SUITE A
City, State Zip: NEWARK, CA 94560
Phone: (510) 792-4357 Fax: (510) 745-1670
Record ID: **010061DN**
Service Type: NON
Target Population: 1.4
Expiration Date: 5/31/2019 IMS: No

Program Name: **SECOND CHANCE, INC.**
Legal Name: SECOND CHANCE, INC.
Address: 107 JACKSON STREET
City, State Zip: HAYWARD, CA 94544
Phone: (510) 886-8696 Fax: (510) 745-1693
Record ID: **010061GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FRIENDSHIP HOUSE AMERICAN INDIAN LODGE**
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS
Address: 1818 38TH AVENUE AND 1815 39TH AVENUE
City, State Zip: OAKLAND, CA 94601
Phone: (510) 535-7100 Fax: (510) 535-3445
Record ID: **010062AN**
Service Type: RES
Resident Capacity: 9
Total Occupancy: 20
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **OPTIONS RECOVERY SERVICES**
Legal Name: OPTIONS RECOVERY SERVICES
Address: 1931 CENTER STREET
City, State Zip: BERKELEY, CA 94704
Phone: (510) 666-9552 Fax: (510) 666-9909
Record ID: **010066AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **OPTIONS- OAKLAND DRUG FREE OUTPATIENT PROGRAM**
Legal Name: OPTIONS RECOVERY SERVICES
Address: 610 16TH STREET,
SUITE 312, 314, 315, 318, AND 319
City, State Zip: OAKLAND, CA 94612-1284
Phone: (510) 836-9900 Fax: (510) 836-9902
Record ID: **010066CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **MEN ON THE WAY**
Legal Name: WOMEN ON THE WAY RECOVERY CENTER
Address: 20424 HAVILAND AVENUE
City, State Zip: HAYWARD, CA 94541
Phone: (510) 276-3661 Fax: (510) 870-1575
Record ID: **010072AN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES**
Legal Name: TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES
Address: 30086 MISSION BOULEVARD
City, State Zip: HAYWARD, CA 94544
Phone: (510) 675-9362 Fax: (510) 675-9468
Record ID: **010079AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **MAGNOLIA WOMEN'S RECOVERY PROGRAM**
Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.
Address: 682 BRIERGATE WAY
City, State Zip: HAYWARD, CA 94544
Phone: (510) 487-2910 Fax: (510) 487-2916
Record ID: **010081AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.14
Expiration Date: 9/30/2017 IMS: No

Program Name: **MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.**
Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.
Address: 3408 ANDOVER STREET
City, State Zip: OAKLAND, CA 94606
Phone: (510) 547-1531 Fax: (510) 547-1543
Record ID: **010081CN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 20
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **NATIVE AMERICAN HEALTH CENTER, INC.**
Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.
Address: 3124 INTERNATIONAL BOULEVARD,
4TH FLOOR
City, State Zip: OAKLAND, CA 94601
Phone: (510) 434-5421 Fax: (510) 437-9574
Record ID: **010090AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ALAMEDA FAMILY SERVICES**
Legal Name: ALAMEDA FAMILY SERVICES
Address: 2325 CLEMENT AVENUE
City, State Zip: ALAMEDA, CA 94501
Phone: (510) 629-6300
Record ID: **010091AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **FOUNTAIN RECOVERY**
Legal Name: BROTHER AND SISTER PARTNERSHIP
Address: 5053 PAVO COURT
City, State Zip: LIVERMORE, CA 94551
Phone: (925) 292-5583 Fax: (925) 292-0296
Record ID: **010095AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CAL-PEP**
Legal Name: CAL-PEP
Address: 2811 ADELINE STREET
City, State Zip: OAKLAND, CA 94608
Phone: (510) 874-7850 Fax: (510) 874-6775
Record ID: **010099AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **MUJERES CON ESPERANZA/WOMEN'S SERVICES ENHANCEMENT PROGRAM**
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH
Address: 3315 INTERNATIONAL BOULEVARD
City, State Zip: OAKLAND, CA 94601
Phone: (510) 536-4764 Fax: (510) 291-9591
Record ID: **010101AN**
Service Type: NON
Target Population: 1.3
Expiration Date: 10/31/2017 IMS: No

Program Name: **EL CHANTE RESIDENTIAL HOME**
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH
Address: 425 VERNON STREET
City, State Zip: OAKLAND, CA 94610
Phone: (510) 465-4569 Fax: (510) 291-9591
Record ID: **010101CN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **LATINO FAMILY SERVICES CENTER**
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH
Address: 1315 FRUITVALE AVENUE
City, State Zip: OAKLAND, CA 94601
Phone: (510) 536-4760 Fax: (510) 291-9591
Record ID: **010101DN**
Service Type: NON
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **RECOVERY 55**
Legal Name: St. Mary's Center
Address: 925 BROCKHURST
City, State Zip: OAKLAND, CA 94608
Phone: (510) 923-9600
Record ID: **010102AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Alpine County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Amador County**

Program Name:	**AMADOR COUNTY BEHAVIORAL HEALTH SERVICES**
Legal Name:	AMADOR COUNTY BEHAVIORAL HEALTH SERVICES
Address:	10877 CONDUCTOR BOULEVARD,
	SUITE 300
City, State Zip:	SUTTER CREEK, CA 95685
Phone:	(209) 223-6412 Fax: (209) 223-3460
Record ID:	**030001AN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	5/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Butte County**

Program Name: **NORTHERN VALLEY INDIAN HEALTH, INC**
Legal Name: NORTHERN VALLEY INDIAN HEALTH, INC.
Address: 845 WEST EAST AVENUE
City, State Zip: CHICO, CA 95926-2002
Phone: (530) 934-4348 Ext:1267 Fax: (530) 934-7688
Record ID: **040018AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ESPLANADE HOUSE OUTPATIENT ALCOHOL AND DRUG PROGRAM**
Legal Name: COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.
Address: 181 EAST SHASTA AVENUE
City, State Zip: CHICO, CA 95973-0523
Phone: (530) 712-2600 Fax: (530) 895-1848
Record ID: **040022AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **TRI-COUNTY TREATMENT RESIDENTIAL FACILITY**
Legal Name: JULIE CHAPMAN
Address: 2740 ORO DAM BOULEVARD EAST
City, State Zip: OROVILLE, CA 95966
Phone: (530) 533-5272 Fax: (530) 533-5821
Record ID: **040024AP**
Service Type: RES
Resident Capacity: 39
Total Occupancy: 39
Target Population: 1.2
Expiration Date: 8/31/2019 IMS: No

Program Name: **TRI-COUNTY TREATMENT OUTPATIENT PROGRAM**
Legal Name: JULIE CHAPMAN
Address: 1881 ROBINSON STREET,
SUITE E
City, State Zip: OROVILLE, CA 95965
Phone: (530) 533-5272 Fax: (530) 533-5821
Record ID: **040024BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **THERAPEUTIC SOLUTIONS**
Legal Name: THERAPEUTIC SOLUTIONS PROFESSIONAL CORPORATION
Address: 3255 ESPLANADE
City, State Zip: CHICO, CA 95973-0255
Phone: (530) 899-3150 Fax: (530) 899-3160
Record ID: **040030AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SKYWAY HOUSE SHASTA RETREAT**
Legal Name: SKYWAY HOUSE, LLC
Address: 3105 ESPLANADE
City, State Zip: CHICO, CA 95973
Phone: (530) 342-3046 Fax: (530) 342-1756
Record ID: **040033BP**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ELIJAH HOUSE RESTORATION CENTER**
Legal Name: ELIJAH HOUSE S.L.E
Address: 40 & 42 COYOTE MOON TRAIL
City, State Zip: OROVILLE, CA 95966
Phone: (530) 679-0531 Fax: (844) 360-9250
Record ID: **040034AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 13
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Calaveras County**

Program Name: **CHANGING ECHOES**
Legal Name: CHANGING ECHOES, INC.
Address: 7632 POOL STATION ROAD
City, State Zip: ANGELS CAMP, CA 95222
Phone: (209) 785-3666
Record ID: **050002AN**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE LAKES TREATMENT CENTER**
Legal Name: THE LAKES TREATMENT CENTER, INC.
Address: 7260 O'BYRNES FERRY ROAD
City, State Zip: COPPEROPOLIS, CA 95228
Phone: (209) 785-8200 Fax: (209) 785-8202
Record ID: **050005AP**
Service Type: RES-DETOX
Resident Capacity: 76
Total Occupancy: 80
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: Yes

Program Name: **THE LAKES AT BLACK CREEK**
Legal Name: THE LAKES TREATMENT CENTER, INC.
Address: 88 SANGUINETTI COURT
City, State Zip: COPPEROPOLIS, CA 95228
Phone: (209) 785-2829 Fax: (209) 785-8225
Record ID: **050005BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: Yes

Program Name: **TURNING POINT**
Legal Name: TURNING POINT OF ARNOLD, LLC
Address: 1194 CEDAR STREET
City, State Zip: ARNOLD, CA 95223
Phone: (209) 822-3117 Fax: (209) 890-7246
Record ID: **050006AP**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Colusa County**

Program Name:	**COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH**
Legal Name:	COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH
Address:	162 EAST CARSON STREET, SUITE B
City, State Zip:	COLUSA, CA 95932-2880
Phone:	(530) 458-0525 Fax: (530) 458-8028
Record ID:	**060001FN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	3/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Contra Costa County**

Program Name: **WEST GAADDS**
Legal Name: BI-BETT
Address: 3726 BARRETT AVENUE
City, State Zip: RICHMOND, CA 94804
Phone: (925) 685-7418 Fax: (958) 685-7005
Record ID: **070001ACN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **DIABLO VALLEY RANCH**
Legal Name: BI-BETT
Address: 11540 MARSH CREEK ROAD
City, State Zip: CLAYTON, CA 94517
Phone: (925) 672-5700
Record ID: **070001AN**
Service Type: RES
Resident Capacity: 58
Total Occupancy: 59
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **FREDERIC OZANAM CENTER**
Legal Name: BI-BETT
Address: 2931 PROSPECT AVENUE
City, State Zip: CONCORD, CA 94518
Phone: (925) 676-4840 Fax: (925) 676-1315
Record ID: **070001BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **PUEBLOS DEL SOL**
Legal Name: BI-BETT
Address: 2090 COMMERCE AVENUE
City, State Zip: CONCORD, CA 94520
Phone: (925) 798-7250
Record ID: **070001CN**
Service Type: RES-DETOX
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **SERENITY HOUSE**
Legal Name: BI-BETT
Address: 11440 MARSH CREEK ROAD
City, State Zip: CLAYTON, CA 94517
Phone: (925) 672-5700
Record ID: **070001DN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **OAKNOLLS**
Legal Name: BI-BETT
Address: 11460 MARSH CREEK ROAD
City, State Zip: CLAYTON, CA 94517
Phone: (925) 672-5700
Record ID: **070001JN**
Service Type: RES
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **FREDERIC OZANAM CENTER - CRYSTAL PALACE**
Legal Name: BI-BETT
Address: 1390 SANTA CLARA AVENUE
City, State Zip: CONCORD, CA 94518-1025
Phone: (925) 676-4840
Record ID: **070001KN**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **FREDERIC OZANAM CENTER--RAINBOW VILLAGE**
Legal Name: BI-BETT
Address: 2901 PROSPECT AVENUE
City, State Zip: CONCORD, CA 94518
Phone: (925) 676-4840 Fax: (925) 676-1315
Record ID: **070001LN**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **FREDERIC OZANAM CENTER--EMERALD CITY**
Legal Name: BI-BETT
Address: 2950 PROSPECT AVENUE
City, State Zip: CONCORD, CA 94518
Phone: (925) 676-4840
Record ID: **070001NN**
Service Type: RES
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **EAST COUNTY COMMUNITY WOMEN'S CENTER**
Legal Name: BI-BETT
Address: 2, 4, 12 AND 14 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384
Record ID: **070001RN**
Service Type: RES-DETOX
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.3
Expiration Date: 12/31/2018 IMS: No

Program Name: **EAST COUNTY WOLLAM**
Legal Name: BI-BETT
Address: 22 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384
Record ID: **070001SN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.4
Expiration Date: 12/31/2018 IMS: No

Program Name: **EAST COUNTY WOLLAM**
Legal Name: BI-BETT
Address: 32 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384 Fax: (925) 458-8996
Record ID: **070001TN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.4
Expiration Date: 12/31/2018 IMS: No

Program Name: **EAST COUNTY GAADDS/ACFF**
Legal Name: BI-BETT
Address: 1251 CALIFORNIA STREET,
SUITE 600
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 439-5161 Fax: (925) 439-0322
Record ID: **070001UN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **EAST COUNTY WOLLAM**
Legal Name: BI-BETT
Address: 34 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384 Fax: (925) 458-8996
Record ID: **070001VN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.4
Expiration Date: 4/30/2018 IMS: No

Program Name: **GAADDS CENTRAL/ACFF**
Legal Name: BI-BETT
Address: 2290 DIAMOND BOULEVARD,
SUITE 202
City, State Zip: CONCORD, CA 94520
Phone: (925) 685-7418 Fax: (925) 685-7005
Record ID: **070001XN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **EAST COUNTY WOLLAM**
Legal Name: BI-BETT
Address: 24 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384 Fax: (925) 427-4217
Record ID: **070001ZN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE RECTORY WOMEN'S RECOVERY CENTER**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 1901 CHURCH LANE
City, State Zip: SAN PABLO, CA 94806
Phone: (510) 236-3134 Fax: (510) 236-3151
Record ID: **070008AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 21
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **LA CASA UJIMA**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 904 MELLUS STREET
City, State Zip: MARTINEZ, CA 94553
Phone: (925) 229-0230 Fax: (925) 229-0233
Record ID: **070008BN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 18
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **UJIMA WEST OUTPATIENT TREATMENT PROGRAM**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 12960 SAN PABLO AVENUE
City, State Zip: RICHMOND, CA 94805
Phone: (510) 215-2280 Fax: (925) 215-2283
Record ID: **070008CN**
Service Type: NON
Target Population: 1.3
Expiration Date: 2/28/2019 IMS: No

Program Name: **LA CASA UJIMA**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 919 MELLUS STREET
City, State Zip: MARTINEZ, CA 94553
Phone: (925) 229-0230 Fax: (925) 229-0233
Record ID: **070008DN**
Service Type: RES
Resident Capacity: 3
Total Occupancy: 6
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **UJIMA EAST INTENSIVE DAY TREATMENT PROGRAM**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 180 EAST LELAND ROAD,
SUITES A & B
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-9100 Fax: (925) 427-9102
Record ID: **070008EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE RECTORY WOMEN'S RECOVERY CENTER**
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 1916 CHURCH LANE
City, State Zip: SAN PABLO, CA 94806
Phone: (510) 236-3134 Fax: (510) 236-3151
Record ID: **070008HN**
Service Type: RES
Resident Capacity: 3
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **DISCOVERY HOUSE**
Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
Address: 4645 PACHECO BOULEVARD
City, State Zip: MARTINEZ, CA 94553
Phone: (925) 646-9270
Record ID: **070012BN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **CROSSROADS TREATMENT CENTER**
Legal Name: RECOVERY MANAGEMENT SERVICES, INC.
Address: 2449 PACHECO STREET &
2118 EAST STREET
City, State Zip: CONCORD, CA 94520
Phone: (925) 682-5704 Fax: (925) 685-7835
Record ID: **070018CN**
Service Type: RES-DETOX
Resident Capacity: 19
Total Occupancy: 21
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **CROSSROADS TREATMENT CENTER**
Legal Name: RECOVERY MANAGEMENT SERVICES, INC.
Address: 2449 PACHECO STREET
City, State Zip: CONCORD, CA 94520
Phone: (925) 682-5704 Fax: (925) 685-7835
Record ID: **070018LN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **REACH PROJECT**
Legal Name: R.E.A.C.H. PROJECT
Address: 1915 D STREET
City, State Zip: ANTIOCH, CA 94509
Phone: (925) 754-3673
Record ID: **070024AN**
Service Type: NON
Target Population: 1.7
Expiration Date: 6/30/2019 IMS: No

Program Name: **REACH PROJECT**
Legal Name: R.E.A.C.H. PROJECT
Address: 3385 MAIN STREET,
SUITE B
City, State Zip: OAKLEY, CA 94561
Phone: (925) 754-3673
Record ID: **070024CN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

Program Name: **R.E.A.C.H. PROJECT**
Legal Name: R.E.A.C.H. PROJECT
Address: 101 SANDCREEK ROAD
SUITE B
City, State Zip: BRENTWOOD, CA 94513-2057
Phone: (925) 666-8460 Fax: (925) 754-2002
Record ID: **070024DN**
Service Type: NON
Target Population: 1.10
Expiration Date: 2/28/2019 IMS: No

Program Name: **COLE HOUSE**
Legal Name: J. COLE RECOVERY HOMES, INC.
Address: 1408 A STREET
City, State Zip: ANTIOCH, CA 94509
Phone: (925) 978-2873 Fax: (925) 757-0411
Record ID: **070034AP**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 17
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **STEP/AHEAD ADOLESCENT OUTPATIENT DRUG TREATMENT PROGRAM**
Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS
Address: 207 37TH STREET
City, State Zip: RICHMOND, CA 94805
Phone: (510) 233-7555 Fax: (510) 233-4545
Record ID: **070041AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2017 IMS: No

Program Name: **RICHMOND HIGH SCHOOL-OATS PROGRAM**
Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS
Address: 1250 23RD STREET
City, State Zip: RICHMOND, CA 94804
Phone: (510) 237-8770
Record ID: **070041BN**
Service Type: NON
Target Population: 1.10
Expiration Date: 3/31/2018 IMS: No

Program Name: **GATEWAY ALCOHOL AND DRUG SERVICES**
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.
Address: 13201 SAN PABLO AVENUE,
SUITE 206
City, State Zip: SAN PABLO, CA 94806
Phone: (510) 235-2887 Fax: (510) 235-2563
Record ID: **070043AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **GMG BEHAVIORAL HEALTH SERVICES**
Legal Name: RICHARD I. GRACER, M.D., A PROFESSIONAL CORPORATION
Address: 4 CROW CANYON COURT,
SUITE 210
City, State Zip: SAN RAMON, CA 94583
Phone: (925) 277-1100 Fax: (925) 277-1358
Record ID: **070044AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **DIABLO VALLEY DRUG AND ALCOHOL SERVICES**
Legal Name: DIABLO VALLEY DRUG AND ALCOHOL SERVICES INC.
Address: 100 PARK PLACE, SUITE 120B
City, State Zip: SAN RAMON, CA 94583
Phone: (925) 289-1430 Fax: (925) 277-1557
Record ID: **070046AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **NEW DIRECTIONS FOR YOUNG ADULTS CA, INC.**
Legal Name: NEW DIRECTIONS FOR YOUNG ADULTS CA, INC.
Address: 100 LONGBROOK WAY
#20
City, State Zip: PLEASANT HILL, CA 94523
Phone: (866) 611-5450 Ext:231 Fax: (866) 203-0007
Record ID: **070047AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Del Norte County**

Program Name:	**DEL NORTE HEALTH AND HUMAN SERVICES/ALCOHOL AND OTHER DRUG PROGRAMS**
Legal Name:	DEL NORTE COUNTY HEALTH AND HUMAN SERVICES
Address:	1279 2ND STREET, SUITE C
City, State Zip:	CRESCENT CITY, CA 95531
Phone:	(707) 464-4813 Fax: (707) 465-1442
Record ID:	**080003AN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	10/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **El Dorado County**

Program Name: **PROGRESS HOUSE MEN'S FACILITY**
Legal Name: PROGRESS HOUSE, INC.
Address: 838 BEACH COURT ROAD
City, State Zip: COLOMA, CA 95613
Phone: (530) 626-7252
Record ID: **090002AN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **PROGRESS HOUSE WOMEN AND CHILDREN'S FACILITY**
Legal Name: PROGRESS HOUSE, INC.
Address: 5607 MOUNT MURPHY ROAD
City, State Zip: GARDEN VALLEY, CA 95633
Phone: (530) 333-9460 Fax: (530) 333-1019
Record ID: **090002BN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 32
Target Population: 1.4
Expiration Date: 5/31/2018 IMS: No

Program Name: **PROGRESS HOUSE OUTPATIENT SERVICES**
Legal Name: PROGRESS HOUSE, INC.
Address: 2844 COLOMA STREET
City, State Zip: PLACERVILLE, CA 95667
Phone: (530) 642-1715
Record ID: **090002CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **PROGRESS HOUSE PERINATAL FACILITY**
Legal Name: PROGRESS HOUSE, INC.
Address: 5494 PONY EXPRESS TRAIL,
HOUSE 1, 2, 3, 4 AND 5
City, State Zip: CAMINO, CA 95709
Phone: (530) 644-3758 Fax: (530) 644-3782
Record ID: **090002FN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 32
Target Population: 1.4
Expiration Date: 5/31/2018 IMS: No

Program Name: **PROGRESS HOUSE INC DETOX CENTER**
Legal Name: PROGRESS HOUSE, INC.
Address: 2986 COLOMA STREET
City, State Zip: PLACERVILLE, CA 95667-8828
Phone: (530) 626-9240 Fax: (530) 626-8992
Record ID: **090002JN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **NEW MORNING YOUTH AND FAMILY SERVICES**
Legal Name: NEW MORNING YOUTH AND FAMILY SERVICES, INC.
Address: 6765 GREEN VALLEY ROAD
City, State Zip: PLACERVILLE, CA 95667-8984
Phone: (530) 622-5551 Fax: (530) 622-5800
Record ID: **090005AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **TAHOE YOUTH AND FAMILY SERVICES**
Legal Name: TAHOE YOUTH AND FAMILY SERVICES
Address: 1021 FREMONT AVENUE
City, State Zip: SOUTH LAKE TAHOE, CA 96150-8136
Phone: (530) 541-2445
Record ID: **090006AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **EDCA LIFESKILLS**
Legal Name: EDCA LIFESKILLS
Address: 893 SPRING STREET
City, State Zip: PLACERVILLE, CA 95667-4437
Phone: (530) 622-8193 Fax: (530) 622-4017
Record ID: **090009AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **TAHOE TURNING POINT**
Legal Name: TAHOE TURNING POINT
Address: 2494 LAKE TAHOE BOULEVARD,
SUITES B1, B2, AND B5
City, State Zip: SOUTH LAKE TAHOE, CA 96150-7142
Phone: (530) 577-5340 Fax: (530) 577-5323
Record ID: **090014DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES - PLACERVILLE**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 1364 RUTHHAVEN ROAD
City, State Zip: PLACERVILLE, CA 95667
Phone: (530) 295-5550 Fax: (530) 295-5551
Record ID: **090018AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 27
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES - SOUTH LAKE TAHOE**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 586 GLORENE AVENUE
City, State Zip: SOUTH LAKE TAHOE, CA 96150-3907
Phone: (800) 556-8885
Record ID: **090018CN**
Service Type: RES-DETOX
Resident Capacity: 70
Total Occupancy: 75
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name:	**SALIM'S HOUSE**
Legal Name:	ANOTHER CHOICE ANOTHER CHANCE EL DORADO HILLS
Address:	2619 WILLOWDALE DRIVE
City, State Zip:	EL DORADO HILLS, CA 95762
Phone:	(916) 509-5919 Fax: (916) 817-1384
Record ID:	**090022AN**
Service Type:	RES
Resident Capacity:	5
Total Occupancy:	5
Target Population:	1.1
Expiration Date:	6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Fresno County**

Program Name: **COMPREHENSIVE ADDICTION PROGRAMS, INC.**
Legal Name: COMPREHENSIVE ADDICTION PROGRAMS, INCORPORATED
Address: 2445 WEST WHITESBRIDGE ROAD
City, State Zip: FRESNO, CA 93706
Phone: (559) 264-5096
Record ID: **100003AN**
Service Type: RES-DETOX
Resident Capacity: 65
Total Occupancy: 65
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **NUESTRA CASA RECOVERY HOME**
Legal Name: FRESNO COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.
Address: 1414 WEST KEARNEY BOULEVARD
City, State Zip: FRESNO, CA 93706
Phone: (559) 485-0501 Fax: (559) 485-1313
Record ID: **100006AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **TURTLE LODGE**
Legal Name: SIERRA TRIBAL CONSORTIUM, INC.
Address: 610 WEST MCKINLEY AVENUE
City, State Zip: FRESNO, CA 93728
Phone: (559) 445-2691
Record ID: **100007AN**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 37
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ELEVENTH HOUR REHABILITATION PROGRAMS**
Legal Name: ELEVENTH HOUR REHABILITATION PROGRAMS
Address: 334 SHAW AVENUE,
SUITE 100
City, State Zip: CLOVIS, CA 93612
Phone: (559) 322-1819 Fax: (559) 454-1928
Record ID: **100009GP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **WESTCARE CALIFORNIA**
Legal Name: WESTCARE CALIFORNIA, INC.
Address: 2772 SOUTH MARTIN LUTHER KING BOULEVARD
City, State Zip: FRESNO, CA 93706
Phone: (559) 265-4800 Fax: (559) 265-4808
Record ID: **100010FN**
Service Type: RES-DETOX
Resident Capacity: 215
Total Occupancy: 265
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **WESTCARE CALIFORNIA, INC.**
Legal Name: WESTCARE CALIFORNIA, INC.
Address: 611 EAST BELMONT
City, State Zip: FRESNO, CA 93701
Phone: (559) 237-3420 Fax: (559) 213-1935
Record ID: **100010IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **KING OF KINGS MEN'S RECOVERY HOME**
Legal Name: THE KING OF KINGS COMMUNITY CENTER
Address: 2267 SOUTH GENEVA AVENUE
City, State Zip: FRESNO, CA 93706
Phone: (559) 266-6449
Record ID: **100024AN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **KING OF KINGS OUTPATIENT AND PERINATAL SERVICES PROGRAM**
Legal Name: THE KING OF KINGS COMMUNITY CENTER
Address: 2302 MARTIN LUTHER KING BOULEVARD
City, State Zip: FRESNO, CA 93706-4135
Phone: (559) 268-9559 Fax: (559) 268-9559
Record ID: **100024BN**
Service Type: NON
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE AVANTI PROGRAM**
Legal Name: KINGS VIEW
Address: 1822 JENSEN AVENUE,
SUITE 102
City, State Zip: SANGER, CA 93657
Phone: (559) 875-6300
Record ID: **100026AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **QUEST HOUSE**
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.
Address: 2731 WEST OLIVE AVENUE
City, State Zip: FRESNO, CA 93728
Phone: (559) 233-5096 Fax: (559) 233-5099
Record ID: **100028EN**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **FIRST STREET CENTER OUTPATIENT PROGRAM**
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.
Address: 3636 NORTH FIRST STREET,
SUITE 135
City, State Zip: FRESNO, CA 93726-6818
Phone: (559) 225-1464
Record ID: **100028HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **SPIRIT OF WOMAN OF CALIFORNIA**
Legal Name: SPIRIT OF WOMAN OF CALIFORNIA, INC.
Address: 327 WEST BELMONT AVENUE
City, State Zip: FRESNO, CA 93728
Phone: (559) 233-4353
Record ID: **100036AN**
Service Type: RES
Resident Capacity: 63
Total Occupancy: 208
Target Population: 1.14
Expiration Date: 3/31/2018 IMS: No

Program Name: **FRESNO NEW CONNECTION, INC.**
Legal Name: FRESNO NEW CONNECTION, INC.
Address: 4411 NORTH CEDAR AVENUE,
SUITE 108
City, State Zip: FRESNO, CA 93726
Phone: (559) 248-1548 Fax: (559) 248-1530
Record ID: **100039AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **FRESNO FIRST**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 2550 WEST CLINTON AVENUE
City, State Zip: FRESNO, CA 93705-4201
Phone: (858) 573-2600 Fax: (559) 441-0354
Record ID: **100042CN**
Service Type: RES
Resident Capacity: 60
Total Occupancy: 85
Target Population: 1.3
Expiration Date: 9/30/2018 IMS: No

Program Name: **FAMILY & YOUTH ALTERNATIVES**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3122 NORTH MILLBROOK AVENUE,
SUITE A
City, State Zip: FRESNO, CA 93703
Phone: (858) 573-2600 Fax: (559) 600-4876
Record ID: **100042DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **FLOYD FARROW SUBSTANCE ABUSE UNIT**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3333 EAST AMERICAN AVENUE,
BUILDING 707 AND 709
City, State Zip: FRESNO, CA 93725
Phone: (559) 600-4876 Fax: (559) 495-3650
Record ID: **100042EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **VISIONS FOR YOUTH**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 4939 E. YALE AVENUE
City, State Zip: FRESNO, CA 93727
Phone: (559) 977-1931 Fax: (559) 225-9174
Record ID: **100042FN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **PROMESA BEHAVIORIAL HEALTH OUTPATIENT DRUG AND ALCOHOL PROGRAM**
Legal Name: PROMESA BEHAVIORIAL HEALTH
Address: 7120 N. MARKS AVENUE,
SUITE 110
City, State Zip: FRESNO, CA 93711
Phone: (559) 981-5534 Fax: (559) 320-5893
Record ID: **100043BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **PANACEA SERVICES, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATMENT (CDAT)**
Legal Name: PANACEA SERVICES, INC.
Address: 3152 NORTH MILLBROOK,
SUITES D AND E
City, State Zip: FRESNO, CA 93703
Phone: (559) 241-0364 Fax: (559) 241-0342
Record ID: **100052CP**
Service Type: NON
Target Population: 1.5
Expiration Date: 1/31/2019 IMS: No

Program Name: **EMINENCE HEALTHCARE, INC.**
Legal Name: EMINENCE HEALTHCARE, INC.
Address: 740 WEST NORTH AVENUE,
ANNEX 1 AND 5A1
City, State Zip: REEDLEY, CA 93654
Phone: (559) 917-1635 Fax: (559) 221-8101
Record ID: **100063DP**
Service Type: NON
Target Population: 1.5
Expiration Date: 3/31/2018 IMS: No

Program Name: **UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.**
Legal Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.
Address: 3170 NORTH CHESTNUT AVENUE,
SUITE 105
City, State Zip: FRESNO, CA 93703
Phone: (559) 252-5150 Fax: (559) 252-5156
Record ID: **100066AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.**
Legal Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.
Address: 625 AND 627 EAST KEATS AVENUE
City, State Zip: FRESNO, CA 93710-7000
Phone: (559) 252-5150 Fax: (559) 252-5156
Record ID: **100066BP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.9
Expiration Date: 5/31/2019 IMS: No

Program Name: **HERNDON RECOVERY CENTER**
Legal Name: SATNAM S. ATWAL, MD
Address: 7055 NORTH CHESTNUT AVENUE,
SUITE 101
City, State Zip: FRESNO, CA 93720
Phone: (559) 298-5111 Fax: (559) 298-3111
Record ID: **100074AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2018 IMS: No

Program Name: **HERNDON RECOVERY CENTER RESIDENTIAL**
Legal Name: SATNAM S. ATWAL, MD
Address: 2631 EAST JORDAN AVENUE
City, State Zip: FRESNO, CA 93720
Phone: (559) 298-5111 Fax: (559) 298-3111
Record ID: **100074BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **HERNDON RECOVERY CENTER**
Legal Name: SATNAM S. ATWAL, MD
Address: 7361 NO. SIERRA VISTA
City, State Zip: FRESNO, CA 93720
Phone: (559) 298-5111 Fax: (559) 298-3111
Record ID: **100074CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **TOUCHSTONE RECOVERY CENTER**
Legal Name: RICHARD V. GUZZETTA, M.D.
Address: 724 MEDICAL CENTER DRIVE EAST,
SUITE 103
City, State Zip: CLOVIS, CA 93611
Phone: (559) 298-6711 Fax: (559) 298-6609
Record ID: **100076AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **PATHWAYS TO RECOVERY**
Legal Name: FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
Address: 515 SOUTH CEDAR AVENUE
City, State Zip: FRESNO, CA 93702
Phone: (559) 600-6068 Fax: (559) 453-8916
Record ID: **100081AN**
Service Type: NON
Target Population: 1.3
Expiration Date: 8/31/2017 IMS: No

Program Name: **DELTA CARE, INC.**
Legal Name: DELTA CARE, INC.
Address: 4705 NORTH SONORA AVENUE,
SUITE 113A
City, State Zip: FRESNO, CA 93722
Phone: (559) 289-6785
Record ID: **100082AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **CENTRAL CALIFORNIA RECOVERY, INC.**
Legal Name: CENTRAL CALIFORNIA RECOVERY, INCORPORATED
Address: 1204 WEST SHAW AVENUE,
SUITE 102
City, State Zip: FRESNO, CA 93711-3708
Phone: (559) 681-1947 Fax: (559) 486-6294
Record ID: **100087AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **DUNAMIS INC., GROUP HOME**
Legal Name: DUNAMIS, INC. GROUP HOME
Address: 4991 EAST MCKINLEY AVENUE,
SUITE 112 AND 113
City, State Zip: FRESNO, CA 93727
Phone: (281) 782-5887
Record ID: **100091AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **ASI COUNSELING AND PROFESSIONAL SERVICES, INC.**
Legal Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.
Address: 2005 NORTH WISHON AVENUE
City, State Zip: FRESNO, CA 93704
Phone: (559) 499-1011
Record ID: **100092AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **TRANSITIONS CHILDRENS SERVICES: OUTPATIENT & CONTINUING CARE SERVICES**
Legal Name: TRANSITIONS CHILDREN'S SERVICES
Address: 1945 N. HELM AVENUE,
SUITE 101
City, State Zip: FRESNO, CA 93727
Phone: (559) 222-5437 Fax: (559) 222-5445
Record ID: **100093AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **FIRST STEPS RECOVERY**
Legal Name: TRUE NORTH DETOX, LLC
Address: 21877 AND 22051 OAK HILL LANE
City, State Zip: CLOVIS, CA 93619
Phone: (559) 299-5100 Fax: (360) 323-7285
Record ID: **100094AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE LIVING CENTER OF FRESNO, INC.**
Legal Name: THE LIVING CENTERS OF FRESNO, INC.
Address: 4576 E. SHIELDS AVENUE
City, State Zip: FRESNO, CA 93726
Phone: (831) 345-5024
Record ID: **100095AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Glenn County**

Program Name: **GLENN COUNTY SUBSTANCE ABUSE PROGRAM**
Legal Name: GLENN COUNTY HEALTH SERVICES
Address: 1187 EAST SOUTH STREET
City, State Zip: ORLAND, CA 95963-1640
Phone: (530) 865-1146 Fax: (530) 934-6592
Record ID: **110001AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **NORTHERN VALLEY INDIAN HEALTH, INC.**
Legal Name: NORTHERN VALLEY INDIAN HEALTH, INC.
Address: 207 NORTH BUTTE STREET
City, State Zip: WILLOWS, CA 95988
Phone: (530) 934-4641 Fax: (530) 934-7688
Record ID: **110002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Humboldt County**

Program Name: **HUMBOLDT RECOVERY CENTER**
Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED
Address: 1303 11TH STREET AND
1024 N STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 443-4237
Record ID: **120001AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 22
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **HUMBOLDT RECOVERY CENTER**
Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED
Address: 905 L STREET, AND
1116 AND 1120 9TH STREET
City, State Zip: EUREKA, CA 95502
Phone: (707) 443-0514 Fax: (707) 443-0514
Record ID: **120001BN**
Service Type: RES
Resident Capacity: 21
Total Occupancy: 23
Target Population: 1.2
Expiration Date: 1/31/2019 IMS: No

Program Name: **HUMBOLDT RECOVERY CENTER**
Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED
Address: 944 N STREET AND
1219 10TH STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 443-4237 Fax: (707) 442-1191
Record ID: **120001DN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 18
Target Population: 1.3
Expiration Date: 2/28/2019 IMS: No

Program Name: **CROSSROADS**
Legal Name: NORTH COAST SUBSTANCE ABUSE COUNCIL
Address: 1205 AND 1210 MYRTLE AVENUE
City, State Zip: EUREKA, CA 95501
Phone: (707) 445-0869 Fax: (707) 445-0826
Record ID: **120005AN**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SINGING TREES RECOVERY CENTER**
Legal Name: SINGING TREES RECOVERY CENTER
Address: 2061 HIGHWAY 101
City, State Zip: GARBERVILLE, CA 95542
Phone: (707) 247-3495 Fax: (707) 247-3334
Record ID: **120008AP**
Service Type: RES-DETOX
Resident Capacity: 20
Total Occupancy: 23
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **ALCOHOL DRUG CARE SERVICES RESIDENTIAL TREATMENT PROGRAM**
Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.
Address: 1321, 1335 C STREET AND
217 14TH STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 445-1391
Record ID: **120009AN**
Service Type: RES-DETOX
Resident Capacity: 23
Total Occupancy: 25
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ADCS WOMEN'S RESIDENTIAL TREATMENT PROGRAM**
Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.
Address: 1742 J STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 444-2232 Fax: () -
Record ID: **120009CN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.12
Expiration Date: 3/31/2018 IMS: No

Program Name: **OUTPATIENT TREATMENT SERVICES**
Legal Name: HUMBOLDT COUNTY ALCOHOL AND OTHER DRUG PROGRAMS
Address: 720 WOOD STREET,
ROOMS 112, 115, 116, 117, 118, 119, 121, 123, 127, 128, 130 AND 734
City, State Zip: EUREKA, CA 95501
Phone: (707) 476-4070 Fax: (707) 446-3776
Record ID: **120010AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **HEALTHY MOMS PROGRAM**
Legal Name: HUMBOLDT COUNTY ALCOHOL & OTHER DRUG PROGRAMS
Address: 2910 H STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 441-5220
Record ID: **120011AN**
Service Type: NON
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **UNITED INDIAN HEALTH SERVICES, INC.-CHILD & FAMILY SERVICES DEPT.**
Legal Name: UNITED INDIAN HEALTH SERVICES, INC.
Address: 1600 WEEOT WAY
City, State Zip: ARCATA, CA 95521
Phone: (707) 825-5060 Fax: (707) 825-6753
Record ID: **120015AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Imperial County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Inyo County**

Program Name: **ALPINE RECOVERY CENTER**
Legal Name: ROBERT B. DIBBLE
Address: 375 EAST LINE STREET
City, State Zip: BISHOP, CA 93514
Phone: (760) 873-4357
Record ID: **140001AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **INYO COUNTY**
Legal Name: INYO COUNTY HEALTH AND HUMAN SERVICES
Address: 162 GROVE STREET
City, State Zip: BISHOP, CA 93514
Phone: (760) 873-6533 Fax: (760) 873-3277
Record ID: **140002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Kern County**

Program Name: **KCHC OUTPATIENT RECOVERY SERVICES**
Legal Name: KERN COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.
Address: 1400 EASTON DRIVE,
SUITE 151
City, State Zip: BAKERSFIELD, CA 93309
Phone: (661) 634-9877 Fax: (661) 864-0198
Record ID: **150003HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **JASON'S RETREAT/CAPISTRANO COMMUNITY FOR WOMEN**
Legal Name: BAKERSFIELD RECOVERY SERVICES INC.
Address: 600 BERNARD STREET AND
2000 BAKER STREET
City, State Zip: BAKERSFIELD, CA 93305
Phone: (661) 325-1817 Fax: (661) 325-3929
Record ID: **150004AN**
Service Type: RES-DETOX
Resident Capacity: 54
Total Occupancy: 59
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CAPISTRANO LINCOLN STREET RETREAT**
Legal Name: BAKERSFIELD RECOVERY SERVICES INC.
Address: 708 LINCOLN STREET
City, State Zip: BAKERSFIELD, CA 93305
Phone: (661) 869-1795 Fax: (661) 869-1794
Record ID: **150004GN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 26
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **BROTHERHOOD CENTER**
Legal Name: COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS
Address: 1124 BAKER STREET
City, State Zip: BAKERSFIELD, CA 93305
Phone: (661) 327-9376 Fax: (661) 327-7349
Record ID: **150011BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **CENTRO DE COLORES**
Legal Name: COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS
Address: 10420 MAIN STREET
City, State Zip: LAMONT, CA 93241
Phone: (661) 845-3753 Fax: (661) 845-4866
Record ID: **150011CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **KEN KENNEMER SUBSTANCE ABUSE TREATMENT CENTER**
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.
Address: 1100 UNION AVENUE
City, State Zip: BAKERSFIELD, CA 93307
Phone: (661) 861-6111 Fax: (661) 861-6161
Record ID: **150013BN**
Service Type: RES
Resident Capacity: 100
Total Occupancy: 100
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **THE NAPD GENESIS PROGRAM (NEW ADVANCES FOR PEOPLE WITH DISABILITIES)**
Legal Name: NEW ADVANCES FOR PEOPLE WITH DISABILITIES
Address: 1909 16TH STREET
City, State Zip: BAKERSFIELD, CA 93301
Phone: (661) 325-3003 Fax: (661) 325-2344
Record ID: **150025AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **WESTCARE CALIFORNIA**
Legal Name: WESTCARE CALIFORNIA, INC.
Address: 2901 & 2909 SOUTH H STREET
City, State Zip: BAKERSFIELD, CA 93304
Phone: (661) 398-4303 Fax: (661) 398-4306
Record ID: **150029AN**
Service Type: RES
Resident Capacity: 35
Total Occupancy: 35
Target Population: 1.2
Expiration Date: 1/31/2018 IMS: No

Program Name: **WESTCARE BAKERSFIELD OUTPATIENT**
Legal Name: WESTCARE CALIFORNIA, INC.
Address: 2901 SOUTH H STREET
City, State Zip: BAKERSFIELD, CA 93304
Phone: (661) 398-4303 Fax: (559) 453-7827
Record ID: **150029DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ASPIRE COUNSELING SERVICES**
Legal Name: ASPIRE COUNSELING SERVICES, INC.
Address: 9830 BRIMHALL ROAD
City, State Zip: BAKERSFIELD, CA 93312
Phone: (661) 213-6990 Fax: (661) 396-7302
Record ID: **150059AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CASA AURORA**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1932 JESSIE STREET
City, State Zip: BAKERSFIELD, CA 93305-4114
Phone: (661) 447-4666
Record ID: **150060CN**
Service Type: NON
Target Population: 1.3
Expiration Date: 11/30/2017 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC.**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 3801 BUCK OWENS BOULEVARD,
SUITES 105 - 107
City, State Zip: BAKERSFIELD, CA 93308
Phone: (661) 325-4357 Fax: (661) 325-4345
Record ID: **150062AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC.**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 407 HELEN WAY, 9301 OPAL STREET AND
512 STABLE AVENUE
City, State Zip: BAKERSFIELD, CA 93307
Phone: (800) 367-8336 Fax: (661) 297-9701
Record ID: **150062BP**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SYNERGY RECOVERY SERVICES**
Legal Name: SYNERGY RECOVERY SERVICES
Address: 4100 EMPIRE DRIVE,
#120
City, State Zip: BAKERSFIELD, CA 93309
Phone: (661) 878-9100
Record ID: **150069AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT**
Legal Name: BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT
Address: 1617 30TH STREET
City, State Zip: BAKERSFIELD, CA 93301
Phone: (661) 327-4030 Fax: (661) 327-0145
Record ID: **150070AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **OREGON STREET RECOVERY CENTER**
Legal Name: LEGACY VILLAGE, LLC
Address: 1620 OREGON STREET
City, State Zip: BAKERSFIELD, CA 93305
Phone: (661) 843-7360 Fax: (661) 374-4897
Record ID: **150071AP**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Kings County**

Program Name: **ALCOHOL AND DRUG EDUCATION AND COUNSELING CENTER**
Legal Name: KINGS VIEW
Address: 1393 BAILEY DRIVE, ROOMS 106, 149, 198 AND 207
City, State Zip: HANFORD, CA 93230
Phone: (559) 582-4481 Fax: (559) 582-6547
Record ID: **160004AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.**
Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Address: 623, 629 AND 700 NORTH IRWIN STREET
City, State Zip: HANFORD, CA 93230
Phone: (559) 583-9300 Fax: (559) 583-9307
Record ID: **160005AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 8/31/2017 IMS: No

Program Name: **HANNAH'S HOUSE**
Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Address: 222 WEST KEITH STREET
City, State Zip: HANFORD, CA 93230
Phone: (559) 583-7800 Fax: (559) 583-7890
Record ID: **160005BN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 20
Target Population: 1.14
Expiration Date: 7/31/2018 IMS: No

Program Name: **SAMUEL'S HOUSE**
Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Address: 11517 15TH AVENUE
City, State Zip: LEMOORE, CA 93245
Phone: (559) 583-7800 Fax: (559) 583-9307
Record ID: **160005CN**
Service Type: RES
Resident Capacity: 49
Total Occupancy: 49
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **WESTCARE**
Legal Name: WESTCARE CALIFORNIA, INC.
Address: 410 EAST 7TH STREET
SUITES 5, 7 AND 9
City, State Zip: HANFORD, CA 93230
Phone: (559) 251-4800
Record ID: **160006CN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Lake County**

Program Name: **CLEARLAKE CLINIC**
Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES
Address: 7000-B SOUTH CENTER DRIVE
City, State Zip: CLEARLAKE, CA 95422
Phone: (707) 994-7090 Fax: (707) 994-7164
Record ID: **170002BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **LAKE COUNTY DIVISION OF ALCOHOL AND OTHER DRUG SERVICES**
Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES
Address: 6302 13TH AVENUE
City, State Zip: LUCERNE, CA 95458
Phone: (707) 274-9101 Fax: (707) 274-9132
Record ID: **170002CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **HILLTOP RECOVERY SERVICES**
Legal Name: HILLTOP RECOVERY SERVICES
Address: 14720 OLD CATHOLIC CHURCH ROAD
City, State Zip: CLEARLAKE OAKS, CA 95423
Phone: (707) 998-1800 Fax: (707) 987-2591
Record ID: **170011AN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **HILLTOP RECOVERY INTENSIVE OUTPATIENT PROGRAM**
Legal Name: HILLTOP RECOVERY SERVICES
Address: 6300 EAST HIGHWAY 20
City, State Zip: LUCERNE, CA 95458
Phone: (707) 274-5610 Fax: (707) 274-8327
Record ID: **170011DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Lassen County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Los Angeles County**

Program Name: **ANTELOPE VALLEY REHABILITATION CENTER - ACTON**
Legal Name: LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH
Address: 30500 ARRASTRE CANYON ROAD
City, State Zip: ACTON, CA 93510
Phone: (661) 269-0062 Fax: (661) 269-4507
Record ID: **190001AN**
Service Type: RES
Resident Capacity: 166
Total Occupancy: 166
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **ANTELOPE VALLEY REHABILITATION CENTERS - HIGH DESERT RECOVERY SERVICES**
Legal Name: LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH
Address: 44900 NORTH 60TH STREET WEST
City, State Zip: LANCASTER, CA 93536
Phone: (661) 940-3549 Fax: (661) 266-1772
Record ID: **190001CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ALCOHOLISM CENTER FOR WOMEN**
Legal Name: ALCOHOLISM CENTER FOR WOMEN
Address: 1147 SOUTH ALVARADO STREET
City, State Zip: LOS ANGELES, CA 90006
Phone: (213) 381-8500 Fax: (213) 381-9410
Record ID: **190002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALCOHOLISM CENTER FOR WOMEN**
Legal Name: ALCOHOLISM CENTER FOR WOMEN
Address: 1135 SOUTH ALVARADO STREET
City, State Zip: LOS ANGELES, CA 90006
Phone: (213) 381-8500 Fax: (213) 381-9410
Record ID: **190002BN**
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.3
Expiration Date: 2/28/2019 IMS: No

Program Name: **COMFORT RECOVERY IOP LLC**
Legal Name: COMFORT RECOVERY IOP LLC
Address: 20011 VENTURA BLVD., SUITE 105
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (818) 821-7878
Record ID: **190005AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **BEACON HOUSE**
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO
Address: 1003 SOUTH BEACON STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940
Record ID: **190006AN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **LIGHTHOUSE**
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO
Address: 132 WEST 10TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940
Record ID: **190006BN**
Service Type: RES
Resident Capacity: 25
Total Occupancy: 25
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **MCMILLEN HOUSE**
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO
Address: 1012 SOUTH PALOS VERDES STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940 Fax: (310) 331-0070
Record ID: **190006DN**
Service Type: RES
Resident Capacity: 25
Total Occupancy: 25
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **CHANNEL VIEW HOUSE**
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO
Address: 124 WEST 11TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940
Record ID: **190006EN**
Service Type: RES
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **PROPER HOUSE**
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO
Address: 1021 S. BEACON STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940 Fax: (310) 831-0070
Record ID: **190006GN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.2
Expiration Date: 7/31/2019 IMS: No

Program Name: **HOLLYWOOD FAMILY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 6838 SUNSET BOULEVARD
City, State Zip: HOLLYWOOD, CA 90028
Phone: (323) 461-3817 Fax: (323) 461-5683
Record ID: **190007AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **WILMINGTON COMMUNITY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 1318A AND 1314B NORTH AVALON BOULEVARD
City, State Zip: WILMINGTON, CA 90744
Phone: (310) 549-2715
Record ID: **190007CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PATTERNS**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 12917 CERISE AVENUE
City, State Zip: HAWTHORNE, CA 90250
Phone: (310) 675-4431
Record ID: **190007FN**
Service Type: RES
Resident Capacity: 23
Total Occupancy: 35
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **PACIFICA HOUSE**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 2501 WEST EL SEGUNDO BOULEVARD
City, State Zip: HAWTHORNE, CA 90250
Phone: (323) 754-2816 Fax: (323) 754-2828
Record ID: **190007GN**
Service Type: RES
Resident Capacity: 58
Total Occupancy: 68
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **SOUTH BAY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 15519 CRENSHAW BOULEVARD
City, State Zip: GARDENA, CA 90249
Phone: (310) 679-9031
Record ID: **190007HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **AMERICAN RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 2180 WEST VALLEY BOULEVARD,
FLOOR 200
City, State Zip: POMONA, CA 91768
Phone: (909) 865-2336 Fax: (909) 865-1831
Record ID: **190007IN**
Service Type: DPH
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BOYLE HEIGHTS FAMILY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 3421 OLYMPIC BOULEVARD
City, State Zip: LOS ANGELES, CA 90023
Phone: (323) 262-1786 Fax: (323) 262-2659
Record ID: **190007JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **LINCOLN HEIGHTS FAMILY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 4099 NORTH MISSION ROAD
City, State Zip: LOS ANGELES, CA 90032
Phone: (323) 221-1746
Record ID: **190007KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **REDGATE MEMORIAL RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 1775 CHESTNUT AVENUE
City, State Zip: LONG BEACH, CA 90813
Phone: (562) 599-8444 Fax: (562) 591-6034
Record ID: **190007LN**
Service Type: DPH
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **AMERICAN RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 2180 WEST VALLEY BOULEVARD,
FLOORS 100, 300 AND 400
City, State Zip: POMONA, CA 91768
Phone: (909) 865-2336
Record ID: **190007MN**
Service Type: RES
Resident Capacity: 123
Total Occupancy: 123
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **AMERICAN RECOVERY CENTER OUTPATIENT PROGRAM**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 2180 WEST VALLEY BOULEVARD
City, State Zip: POMONA, CA 91766
Phone: (909) 865-2336 Fax: (909) 865-1831
Record ID: **190007ON**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **JOINT EFFORTS**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 590 WEST 8TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 831-2358 Fax: (310) 831-2356
Record ID: **190007QN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF THE SOUTH BAY**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 1334 POST AVENUE
City, State Zip: TORRANCE, CA 90501
Phone: (310) 328-1460 Fax: (310) 328-1964
Record ID: **190007RN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FLOSSIE LEWIS CENTER**
Legal Name: BEHAVIORIAL HEALTH SERVICES, INC.
Address: 341 & 351 EAST 6TH STREET AND
615 ELM AVENUE
City, State Zip: LONG BEACH, CA 90802
Phone: (562) 435-7350 Fax: (562) 435-4532
Record ID: **190007SN**
Service Type: RES
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **LONG BEACH FAMILY RECOVERY CENTER**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 514 W. PACIFIC COAST HIGHWAY
City, State Zip: LONG BEACH , CA 90806-5237
Phone: (562) 432-0713 Fax: (844) 676-6538
Record ID: **190007VN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HIGH GAIN PROGRAM**
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 9100 SOUTH SEPULVEDA BLVD. #105
City, State Zip: LOS ANGELES, CA 90045
Phone: (310) 644-3659 Fax: (310) 216-6747
Record ID: **190007WN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **THE BISHOP GOODEN HOME**
Legal Name: THE GOODEN CENTER
Address: 191 NORTH EL MOLINO AVENUE
City, State Zip: PASADENA, CA 91101
Phone: (626) 356-0078 Fax: (626) 795-2844
Record ID: **190009AN**
Service Type: RES
Resident Capacity: 19
Total Occupancy: 19
Target Population: 1.8
Expiration Date: 3/31/2018 IMS: No

Program Name: **DRUG AND ALCOHOL COUNSELING SERVICES**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 11500 PARAMOUNT BOULEVARD
City, State Zip: DOWNEY, CA 90241
Phone: (562) 923-4545 Fax: (562) 862-5906
Record ID: **190011AAN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **POSITIVE STEPS**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 8332 IOWA STREET AND
11501 DOLAN AVENUE
City, State Zip: DOWNEY, CA 90241
Phone: (562) 923-7894 Fax: (562) 869-3400
Record ID: **190011AFN**
Service Type: RES-DETOX
Resident Capacity: 47
Total Occupancy: 57
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **FOLEY HOUSE**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 10501, 10505, 10511, 10517, AND 10519 MILLS AVENUE
City, State Zip: WHITTIER, CA 90604
Phone: (562) 944-7953 Fax: (562) 946-7494
Record ID: **190011AN**
Service Type: RES-DETOX
Resident Capacity: 20
Total Occupancy: 30
Target Population: 1.4
Expiration Date: 3/31/2018 IMS: No

Program Name: **AWAKENINGS**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 12322 CLEARGLEN,
APARTMENTS 1, 2, 3 AND 4
City, State Zip: WHITTIER, CA 90604
Phone: (562) 947-3835 Fax: (562) 943-1235
Record ID: **190011KN**
Service Type: RES-DETOX
Resident Capacity: 14
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **LA CASITA DE LAS MAMAS OF DOWNEY**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 10603, 10615 AND 10621 DOWNEY AVENUE
City, State Zip: DOWNEY, CA 90241
Phone: (562) 622-2268 Fax: (562) 923-5164
Record ID: **190011ON**
Service Type: RES-DETOX
Resident Capacity: 18
Total Occupancy: 26
Target Population: 1.4
Expiration Date: 3/31/2018 IMS: No

Program Name: **ANGEL STEP TOO**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 16314, 16316, 16316-1/2, 16318, 16318-1/2, 16322, 16322-1/2,
AND 16322-7/8 CORNUTA AVENUE
City, State Zip: BELLFLOWER, CA 90706
Phone: (562) 461-9272
Record ID: **190011VN**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 54
Target Population: 1.4
Expiration Date: 11/30/2017 IMS: No

Program Name: **CASA DE LAS AMIGAS-THE JON DUDLEY OUTPATIENT CENTER**
Legal Name: CASA DE LAS AMIGAS
Address: 744 EAST WALNUT AVENUE
City, State Zip: PASADENA, CA 91101
Phone: (626) 792-2770 Fax: (626) 792-5826
Record ID: **190012BN**
Service Type: NON
Target Population: 1.8
Expiration Date: 6/30/2018 IMS: No

Program Name: **CASA DE LAS AMIGAS**
Legal Name: CASA DE LAS AMIGAS
Address: 160 NORTH EL MOLINO AVENUE AND
173 NORTH OAK KNOLL AVENUE
City, State Zip: PASADENA, CA 91101
Phone: (626) 792-2770 Fax: (626) 792-5826
Record ID: **190012CN**
Service Type: RES-DETOX
Resident Capacity: 34
Total Occupancy: 34
Target Population: 1.8
Expiration Date: 3/31/2018 IMS: No

Program Name: **CASTLE SUBSTANCE ABUSE PROGRAM - WEST**
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 1319 SOUTH MANHATTAN PLACE
City, State Zip: LOS ANGELES, CA 90019
Phone: (323) 735-7059
Record ID: **190013AN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CASTLE SUBSTANCE ABUSE PROGRAM-OUTPATIENT**
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 3021 SOUTH VERMONT AVENUE
City, State Zip: LOS ANGELES, CA 90007
Phone: (323) 732-9124
Record ID: **190013BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CASTLE SUBSTANCE ABUSE PROGRAM - EAST**
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 4771 SOUTH MAIN STREET
City, State Zip: LOS ANGELES, CA 90037
Phone: (323) 233-3342
Record ID: **190013CN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SANTA MONICA RECOVERY CENTER**
Legal Name: CLARE FOUNDATION, INC.
Address: 905 AND 907 PICO BOULEVARD
City, State Zip: SANTA MONICA, CA 90405
Phone: (310) 314-6200
Record ID: **190016BN**
Service Type: RES-DETOX
Resident Capacity: 49
Total Occupancy: 49
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **WOMEN'S RECOVERY HOME**
Legal Name: CLARE FOUNDATION, INC.
Address: 844 PICO BOULEVARD
City, State Zip: SANTA MONICA, CA 90405
Phone: (310) 314-6200
Record ID: **190016FN**
Service Type: RES-DETOX
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **CLARE FOUNDATION INTENSIVE OUTPATIENT PROGRAM**
Legal Name: CLARE FOUNDATION, INC.
Address: 1020 PICO BOULEVARD
City, State Zip: SANTA MONICA, CA 90405
Phone: (310) 314-6200 Ext:3424 Fax: (310) 399-2850
Record ID: **190016HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **CONSCIOUS RECOVERY BY CLARE**
Legal Name: CLARE FOUNDATION, INC.
Address: 1334 LINCOLN BOULEVARD
City, State Zip: SANTA MONICA, CA 90401
Phone: (310) 576-2063 Fax: (310) 396-6974
Record ID: **190016KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **PICO OUTPATIENT**
Legal Name: CLARE FOUNDATION, INC.
Address: 1002 PICO BOULEVARD
City, State Zip: SANTA MONICA, CA 90405
Phone: (310) 314-6200 Fax: (310) 314-6221
Record ID: **190016LN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **GRANDVIEW FOUNDATION, INC. - RESIDENTIAL**
Legal Name: GRANDVIEW FOUNDATION, INC.
Address: 1230 NORTH MARENGO AVENUE AND
225 GRANDVIEW STREET
City, State Zip: PASADENA, CA 91103
Phone: (626) 797-1124 Fax: (626) 398-9674
Record ID: **190022AN**
Service Type: RES
Resident Capacity: 41
Total Occupancy: 43
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **GRANDVIEW FOUNDATION, INC.**
Legal Name: GRANDVIEW FOUNDATION, INC.
Address: 1230 NORTH MARENGO AVENUE
City, State Zip: PASADENA, CA 91103
Phone: (626) 797-1124 Ext:116 Fax: (626) 398-9674
Record ID: **190022EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **HOPE HARBOR CENTER**
Legal Name: THE SALVATION ARMY
Address: 3107 SOUTH GRAND AVENUE
City, State Zip: LOS ANGELES, CA 90007
Phone: (213) 744-8186 Fax: (213) 626-0717
Record ID: **190023AN**
Service Type: RES
Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **THE SALVATION ARMY BELL SHELTER--WELLNESS CENTER**
Legal Name: THE SALVATION ARMY
Address: 5600 RICKENBACKER ROAD,
BUILDING 2A-B
City, State Zip: BELL, CA 90201
Phone: (323) 263-1206 Fax: (323) 263-8543
Record ID: **190023CN**
Service Type: RES
Resident Capacity: 75
Total Occupancy: 75
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **THE SALVATION ARMY HAVEN**
Legal Name: THE SALVATION ARMY
Address: 11301 WILSHIRE BOULEVARD,
BUILDING 212, 2ND FLOOR
City, State Zip: LOS ANGELES, CA 90073
Phone: (310) 478-3711 Ext:48762
Record ID: **190023DN**
Service Type: RES
Resident Capacity: 65
Total Occupancy: 65
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE SALVATION ARMY HOPE HARBOR CENTER**
Legal Name: THE SALVATION ARMY
Address: 3107 SOUTH GRAND AVENUE
City, State Zip: LOS ANGELES, CA 90007
Phone: (213) 744-1688 Fax: (213) 744-8186
Record ID: **190023HN**
Service Type: NON
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **HOUSE OF HOPE**
Legal Name: HOUSE OF HOPE FOUNDATION, INC.
Address: 221, 223, 225, 227, 229, 235 WEST 9TH STREET
AND 917 PALOS VERDES STREET, APARTMENT C AND D
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 831-9411 Fax: (310) 831-5796
Record ID: **190025AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.3
Expiration Date: 3/31/2018 IMS: No

Program Name: **HOUSE OF HOPE FOUNDATION, INC.**
Legal Name: HOUSE OF HOPE FOUNDATION, INC.
Address: 205 WEST 9TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 521-9209 Fax: (310) 521-9241
Record ID: **190025GN**
Service Type: NON
Target Population: 1.3
Expiration Date: 7/31/2019 IMS: No

Program Name: **JAN CLAYTON CENTER**
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 4969 SUNSET BOULEVARD
City, State Zip: LOS ANGELES, CA 90027
Phone: (323) 660-8042 Fax: (323) 660-9265
Record ID: **190027AN**
Service Type: RES-DETOX
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **VOA OF CENTRAL CITY RECOVERY SERVICES**
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 515 EAST 6TH STREET,
9TH FLOOR
City, State Zip: LOS ANGELES, CA 90021
Phone: (323) 660-8042 Fax: (213) 622-6831
Record ID: **190027BN**
Service Type: RES
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **VS-21**
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 622 SOUTH WALL STREET,
BUILDING C
City, State Zip: LOS ANGELES, CA 90014
Phone: (213) 623-8580
Record ID: **190027FN**
Service Type: RES
Resident Capacity: 80
Total Occupancy: 80
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **HOMELESS VETERANS CORRECTIONAL REHABILITATION / VS90**
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 1765 SOUTH LA CIENEGA BOULEVARD
City, State Zip: LOS ANGELES, CA 90035
Phone: (310) 204-0690
Record ID: **190027HN**
Service Type: RES
Resident Capacity: 50
Total Occupancy: 50
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **LITTLE HOUSE**
Legal Name: LITTLE HOUSE
Address: 9718 HARVARD STREET
City, State Zip: BELLFLOWER, CA 90706-3699
Phone: (562) 925-2777 Fax: (562) 925-7572
Record ID: **190029AN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 34
Target Population: 1.3
Expiration Date: 9/30/2017 IMS: No

Program Name: **PALM HOUSE RECOVERY HOME**
Legal Name: PALM HOUSE, INCORPORATED
Address: 2515 EAST JEFFERSON STREET
City, State Zip: CARSON, CA 90810
Phone: (310) 830-7803 Fax: (310) 830-6606
Record ID: **190040AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **PASADENA SUBSTANCE USE PREVENTION & TREATMENT SERVICES**
Legal Name: PASADENA PUBLIC HEALTH DEPARTMENT
Address: 1845 NORTH FAIR OAKS AVENUE
City, State Zip: PASADENA, CA 91103
Phone: (626) 744-6001 Fax: (626) 744-6096
Record ID: **190041AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY**
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY
Address: 6166 VESPER AVENUE
City, State Zip: VAN NUYS, CA 91411
Phone: (818) 997-0414 Fax: (818) 997-0851
Record ID: **190049AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 4/30/2018 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY**
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY
Address: 24460 LYONS AVENUE
City, State Zip: SANTA CLARITA, CA 91321
Phone: (616) 253-9400 Fax: (818) 997-0851
Record ID: **190049BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **RICKMAN RECOVERY CENTERS**
Legal Name: NORMAN L. RICKMAN
Address: 1433 E. ROUTE 66, SUITE F
City, State Zip: GLENDORA, CA 91740
Phone: (626) 962-3203 Fax: (626) 962-0036
Record ID: **190062BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **HIS SHELTERING ARMS, INC. INTEGRATED BEHAVIORAL HEALTHCARE SYSTEMS**
Legal Name: HIS SHELTERING ARMS INC.
Address: 112 WEST 111TH STREET AND 11101 SOUTH MAIN STREET
City, State Zip: LOS ANGELES, CA 90061
Phone: (323) 755-6646 Fax: (323) 777-2209
Record ID: **190064BN**
Service Type: RES
Resident Capacity: 49
Total Occupancy: 69
Target Population: 1.4
Expiration Date: 5/31/2019 IMS: No

Program Name: **HIS SHELTERING ARMS, INC.-INTEGRATED BEHAVIORIAL HEALTHCARE SYSTEMS**
Legal Name: HIS SHELTERING ARMS INC.
Address: 11101 SOUTH MAIN STREET, SUITE 115
City, State Zip: LOS ANGELES, CA 90061-1925
Phone: (323) 755-6646 Fax: (323) 777-2209
Record ID: **190064CN**
Service Type: NON
Target Population: 1.4
Expiration Date: 8/31/2017 IMS: No

Program Name: **MUJERES RECOVERY HOME**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 530 NORTH AVENUE 54
City, State Zip: LOS ANGELES, CA 90042
Phone: (323) 254-2423
Record ID: **190065AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **LATINOS RECOVERY HOME**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 2436 WABASH AVENUE
City, State Zip: LOS ANGELES, CA 90033
Phone: (323) 780-8756 Fax: (323) 780-8333
Record ID: **190065CN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **LATINAS RECOVERY HOME**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 327 NORTH SAINT LOUIS STREET
City, State Zip: LOS ANGELES, CA 90063
Phone: (323) 261-7810 Fax: (323) 261-1375
Record ID: **190065EN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **SAN GABRIEL VALLEY CENTER**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 11046 VALLEY MALL
City, State Zip: EL MONTE, CA 91731
Phone: (626) 444-6000 Fax: (626) 444-9044
Record ID: **190065HN**
Service Type: NON
Target Population: 1.7
Expiration Date: 1/31/2018 IMS: No

Program Name: **LATINO FAMILY ALCOHOL AND DRUG SERVICES**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 3316-3320 WEST BEVERLY BOULEVARD
City, State Zip: MONTEBELLO, CA 90640
Phone: (323) 722-4529 Fax: (323) 722-4450
Record ID: **190065IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **MENTAL HEALTH AND ADDICTION SERVICES FOR ADOLESCENTS**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 2309 DALY STREET
City, State Zip: LOS ANGELES, CA 90031
Phone: (323) 222-4591 Fax: (323) 222-4614
Record ID: **190065JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **SAFE REFUGE**
Legal Name: SAFE REFUGE
Address: 3111, 3113, 3115, 3119, 3125, AND 3131 EAST SEVENTH ST. APTS 1, 3, 4, 5, 6; 719 APTS 1-10, 727 & 729 OBISPO AVE; AND 718, 728, 728A, 728 1/2 FREEMAN AV
City, State Zip: LONG BEACH, CA 90804
Phone: (562) 987-5722 Fax: (562) 987-4586
Record ID: **190077AHN**
Service Type: RES-DETOX
Resident Capacity: 89
Total Occupancy: 89
Target Population: 1.9
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE REFUGE**
Legal Name: SAFE REFUGE
Address: 3125, 3137 AND 3139 EAST SEVENTH STREET
City, State Zip: LONG BEACH, CA 90804
Phone: (562) 987-5722 Fax: (562) 987-4586
Record ID: **190077CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SAFE REFUGE**
Legal Name: SAFE REFUGE
Address: 1046 REDONDO AVENUE
City, State Zip: LONG BEACH, CA 90804
Phone: (562) 987-5722 Fax: (562) 987-4586
Record ID: **190077RN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **LIVE AGAIN RECOVERY HOME - CAMP CISQUITO**
Legal Name: LIVE AGAIN MINISTRIES
Address: 38215 NORTH SAN FRANCISQUITO CANYON ROAD
City, State Zip: SAUGUS, CA 91350
Phone: (661) 270-0025
Record ID: **190079BN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE RIVER COMMUNITY**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 23701 EAST FORK STREET
City, State Zip: AZUSA, CA 91702
Phone: (626) 250-3290 Fax: (626) 910-1380
Record ID: **190081AN**
Service Type: RES
Resident Capacity: 38
Total Occupancy: 38
Target Population: 1.8
Expiration Date: 3/31/2018 IMS: No

Program Name: **RIVER COMMUNITY DAY TREATMENT**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 510 SOUTH SECOND AVENUE,
SUITE 6 AND 7
City, State Zip: COVINA, CA 91723-3017
Phone: (626) 974-8123
Record ID: **190081BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SOCIAL MODEL RECOVERY SYSTEMS (PCADD)**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 1245 EAST WALNUT STREET,
SUITE 101, 103, 107, 109, 115, 117 AND 118
City, State Zip: PASADENA, CA 91106
Phone: (626) 795-9127 Fax: (626) 795-0979
Record ID: **190081EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **OMNI CENTER**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 3426 AND 3430 COGSWELL ROAD
City, State Zip: EL MONTE, CA 91732
Phone: (626) 453-3400
Record ID: **190081FN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **MARIPOSA RECOVERY HOME**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 453 SOUTH INDIANA STREET
City, State Zip: LOS ANGELES, CA 90063
Phone: (323) 266-7726 Fax: (323) 266-7742
Record ID: **190081GN**
Service Type: RES
Resident Capacity: 13
Total Occupancy: 15
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **MID VALLEY OUTPATIENT SERVICES**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 3131 SANTA ANITA AVENUE,
SUITE 112B
City, State Zip: EL MONTE, CA 91733
Phone: (626) 453-3432 Fax: (626) 453-3415
Record ID: **190081HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **STEPPING STONES HOME I & II**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 17719 AND 17727 EAST CYPRESS STREET
City, State Zip: COVINA, CA 91722
Phone: (626) 967-2677 Fax: (626) 858-4923
Record ID: **190081IN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 23
Target Population: 1.4
Expiration Date: 1/31/2018 IMS: No

Program Name: **ROYAL PALMS RECOVERY HOME**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 360 SOUTH WESTLAKE AVENUE
City, State Zip: LOS ANGELES, CA 90057
Phone: (213) 483-9201 Fax: (626) 332-3145
Record ID: **190081JN**
Service Type: RES
Resident Capacity: 115
Total Occupancy: 115
Target Population: 1.2
Expiration Date: 12/31/2017 IMS: No

Program Name: **RENA B. RECOVERY HOME**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 4439, 4445 AND 4455 BURNS AVENUE
City, State Zip: LOS ANGELES, CA 90029
Phone: (323) 664-8940 Fax: (626) 332-3145
Record ID: **190081KN**
Service Type: RES
Resident Capacity: 76
Total Occupancy: 76
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **BIMINI RECOVERY CENTER**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 155 SOUTH BIMINI PLACE
City, State Zip: LOS ANGELES, CA 90004
Phone: (213) 388-5423 Fax: (213) 388-1317
Record ID: **190081LN**
Service Type: RES
Resident Capacity: 84
Total Occupancy: 84
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **RENA B. RECOVERY CENTER**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 4445 BURNS AVENUE
City, State Zip: LOS ANGELES, CA 90029
Phone: (323) 664-8940 Fax: (626) 974-4164
Record ID: **190081MN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **GLENDALE ADVENTIST ALCOHOL AND DRUG SERVICES**
Legal Name: GLENDALE ADVENTIST MEDICAL CENTER
Address: 335 MISSION ROAD
City, State Zip: GLENDALE, CA 91205
Phone: (818) 242-3116 Fax: (818) 242-5759
Record ID: **190082BN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **TARZANA TREATMENT CENTERS**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 18646 OXNARD STREET,
SOUTH AND WEST WINGS
City, State Zip: TARZANA, CA 91356
Phone: (818) 996-1051 Fax: (818) 654-3906
Record ID: **190085AN**
Service Type: RES-DETOX
Resident Capacity: 152
Total Occupancy: 165
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: Yes

Program Name: **TARZANA TREATMENT CENTER - LONG BEACH**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 2101 MAGNOLIA AVENUE
City, State Zip: LONG BEACH, CA 90806
Phone: (562) 218-1868 Fax: (562) 596-0346
Record ID: **190085BN**
Service Type: RES-DETOX
Resident Capacity: 84
Total Occupancy: 109
Target Population: 1.9
Expiration Date: 11/30/2017 IMS: Yes

Program Name: **TARZANA TREATMENT CENTER - DETOX**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 18646 OXNARD STREET,
DETOXIFICATION UNIT
City, State Zip: TARZANA, CA 91356
Phone: (818) 996-1051 Fax: (818) 654-3906
Record ID: **190085DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **TARZANA TREATMENT CENTER OUTPATIENT SERVICES**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 18646 OXNARD STREET
City, State Zip: TARZANA, CA 91356
Phone: (818) 996-1051 Fax: (818) 654-3906
Record ID: **190085FN**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **Tarzana Treatment Centers, Inc.**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44447 NORTH 10TH STREET WEST
BUILDING A
City, State Zip: LANCASTER, CA 93534
Phone: (661) 726-2630 Fax: (818) 975-5013
Record ID: **190085GN**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **TARZANA TREATMENT CENTER - NORTHRIDGE**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 18700 OXNARD STREET
City, State Zip: TARZANA, CA 91356
Phone: (818) 996-1051 Fax: (818) 966-3051
Record ID: **190085HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **TARZANA TREATMENT CENTER YOUTH SERVICES - LANCASTER**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44443 NORTH 10TH STREET WEST
City, State Zip: LANCASTER, CA 93535
Phone: (818) 996-1051 Fax: (818) 966-3051
Record ID: **190085JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **TARZANA TREATMENT CENTER**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 7101 BAIRD AVENUE
City, State Zip: RESEDA, CA 91335
Phone: (818) 996-1051 Fax: (818) 996-3051
Record ID: **190085KN**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **TARZANA TREATMENT CENTER - LANCASTER**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44447 NORTH 10TH STREET WEST
BUILDING B
City, State Zip: LANCASTER, CA 93534
Phone: (661) 726-2630 Fax: (818) 996-3051
Record ID: **190085LN**
Service Type: RES-DETOX
Resident Capacity: 40
Total Occupancy: 51
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: Yes

Program Name: **TARZANA TREATMENT CENTERS, INC.**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 5190 ATLANTIC AVENUE
City, State Zip: LONG BEACH, CA 90806
Phone: (818) 428-4111
Record ID: **190085NN**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **TARZANA TREATMENT CENTERS**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44459 10TH STREET WEST
City, State Zip: LANCASTER, CA 93534
Phone: (818) 996-1051 Ext:4100 Fax: (818) 996-3051
Record ID: **190085ON**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **TARZANA TREATMENT CENTERS - LANCASTER**
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44447 NORTH 10TH STREET WEST,
BUILDING C
City, State Zip: LANCASTER, CA 93534
Phone: (818) 996-1051 Fax: (818) 966-3051
Record ID: **190085PN**
Service Type: DSS
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CHABAD RESIDENTIAL TREATMENT CENTER**
Legal Name: CHABAD OF CALIFORNIA
Address: 5675 WEST OLYMPIC BOULEVARD
City, State Zip: LOS ANGELES, CA 90036
Phone: (323) 965-1365 Fax: (323) 965-1275
Record ID: **190087CN**
Service Type: RES
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CHABAD RECOVERY OUTPATIENT CENTER**
Legal Name: CHABAD OF CALIFORNIA
Address: 1750 SOUTH LA CIENEGA BLVD
City, State Zip: LOS ANGELES, CA 90035
Phone: (323) 965-1365
Record ID: **190087DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **DIDI HIRSCH MENTAL HEALTH SERVICES**
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 11643 GLENOAKS BOULEVARD
City, State Zip: PACOIMA, CA 913311050
Phone: (310) 897-2609 Fax: (818) 890-7159
Record ID: **190092AN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 60
Target Population: 1.4
Expiration Date: 7/31/2018 IMS: No

Program Name: **DIDI HIRSCH COMMUNITY MENTAL HEALTH CENTER, OUTPATIENT SUBSTANCE ABUSE SERVICES**
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 11133 WASHINGTON BOULEVARD
City, State Zip: CULVER CITY, CA 90230
Phone: (310) 895-2300 Fax: (310) 398-5690
Record ID: **190092BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **DIDI HIRSCH MENTAL HEALTH SERVICES- YOUTH SUBSTANCE ABUSE SERVICES PROGRAM**
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 12420 VENICE BOULEVARD, SUITE 200
City, State Zip: LOS ANGELES, CA 90066
Phone: (310) 751-1200 Fax: (310) 398-0312
Record ID: **190092CN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2017 IMS: No

Program Name: **DIDI HIRSCH PSYCHIATRIC SERVICE**
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 1540 COLORADO STREET
City, State Zip: GLENDALE, CA 91205-1514
Phone: (818) 244-7257 Fax: (818) 244-5431
Record ID: **190092DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **DIDI HIRSCH MENTAL HEALTH SERVICES**
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 323 NORTH PRAIRIE AVENUE,
City, State Zip: INGLEWOOD, CA 90301
Phone: (310) 677-7808
Record ID: **190092EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **IMPACT DRUG AND ALCOHOL TREATMENT CENTER**
Legal Name: PRINCIPLES, INC.
Address: 1680 NORTH FAIR OAKS AVENUE
City, State Zip: PASADENA, CA 91103
Phone: (626) 798-0884 Fax: (626) 798-6970
Record ID: **190094AN**
Service Type: RES
Resident Capacity: 130
Total Occupancy: 130
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **IMPACT OUTPATIENT/AFTERCARE PROGRAM**
Legal Name: PRINCIPLES, INC.
Address: 1450 NORTH LAKE AVENUE,
SUITE 200
City, State Zip: PASADENA, CA 91104
Phone: (626) 564-4240 Fax: (626) 577-4250
Record ID: **190094GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **PRINCIPLES, INC., D.B.A. IMPACT**
Legal Name: PRINCIPLES, INC.
Address: 333 SOUTH CENTRAL AVENUE
City, State Zip: LOS ANGELES, CA 90013
Phone: (213) 625-5009 Fax: (213) 577-4250
Record ID: **190094HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CRI-HELP, PFLEGER RESIDENTIAL**
Legal Name: CRI-HELP, INC.
Address: 11027 BURBANK BOULEVARD
City, State Zip: NORTH HOLLYWOOD, CA 91601
Phone: (818) 985-8323 Fax: (818) 506-7066
Record ID: **190095AN**
Service Type: RES-DETOX
Resident Capacity: 135
Total Occupancy: 135
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **CRI-HELP - PFLEGER OUTPATIENT**
Legal Name: CRI-HELP, INC.
Address: 8330 LANKERSHIM BOULEVARD
City, State Zip: NORTH HOLLYWOOD, CA 91605
Phone: (818) 985-8323
Record ID: **190095KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SOCORRO**
Legal Name: CRI-HELP, INC.
Address: 2010 NORTH LINCOLN PARK AVENUE
City, State Zip: LINCOLN HEIGHTS, CA 90031
Phone: (323) 222-1440
Record ID: **190095MN**
Service Type: RES
Resident Capacity: 41
Total Occupancy: 41
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SOCORRO**
Legal Name: CRI-HELP, INC.
Address: 2029 KEITH STREET
City, State Zip: LOS ANGELES, CA 90031
Phone: (323) 222-6509
Record ID: **190095NN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **BROWN SCAPULAR PROGRAM**
Legal Name: CANON HUMAN SERVICES CENTERS, INC.
Address: 9705 SOUTH HOLMES AVENUE
City, State Zip: LOS ANGELES, CA 90002
Phone: (323) 249-9097 Fax: (323) 249-9121
Record ID: **190099DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **BROWN SCAPULAR PROGRAM**
Legal Name: CANON HUMAN SERVICES CENTERS, INC.
Address: 9705 SOUTH HOLMES STREET
City, State Zip: LOS ANGELES, CA 90002
Phone: (323) 249-9097 Fax: (323) 249-9121
Record ID: **190099EN**
Service Type: RES
Resident Capacity: 43
Total Occupancy: 43
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **L.A. CADA**
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE
Address: 11015 BLOOMFIELD AVENUE
City, State Zip: SANTA FE SPRINGS, CA 90670-4601
Phone: (562) 906-2676 Fax: (562) 906-2681
Record ID: **190100BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **L.A. CADA**
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE
Address: 470 EAST THIRD STREET,
SUITES A AND B
City, State Zip: LOS ANGELES, CA 90013
Phone: (213) 626-6411 Fax: (562) 906-2676
Record ID: **190100EN**
Service Type: NON
Target Population: 1.7
Expiration Date: 1/31/2018 IMS: No

Program Name: **ALLEN HOUSE**
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE
Address: 10425 SOUTH PAINTER AVENUE
City, State Zip: SANTA FE SPRINGS, CA 90670
Phone: (562) 906-2685 Fax: (562) 236-9899
Record ID: **190100IN**
Service Type: RES-DETOX
Resident Capacity: 55
Total Occupancy: 55
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **H.O.W. HOUSE**
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE
Address: 14100, 14100 1/4, 14100 1/2, GLENGYLE STREET
City, State Zip: WHITTIER, CA 90604
Phone: (562) 777-1222 Fax: (562) 906-1222
Record ID: **190100LN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 19
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **SUNRISE COMMUNITY COUNSELING CENTER**
Legal Name: SUNRISE COMMUNITY COUNSELING CENTER
Address: 537 SOUTH ALVARADO STREET
City, State Zip: LOS ANGELES, CA 90057-2903
Phone: (213) 207-2770 Fax: (213) 207-2773
Record ID: **190110CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **VAN NESS RECOVERY HOUSE**
Legal Name: VAN NESS RECOVERY HOUSE
Address: 1919 NORTH BEACHWOOD DRIVE
City, State Zip: LOS ANGELES, CA 90068
Phone: (323) 463-4266 Fax: (323) 962-6721
Record ID: **190111AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **ASIAN AMERICAN DRUG ABUSE PROGRAM**
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.
Address: 5318 SOUTH CRENSHAW BOULEVARD
City, State Zip: LOS ANGELES, CA 90043
Phone: (323) 293-6291 Fax: (323) 293-1091
Record ID: **190112AN**
Service Type: RES
Resident Capacity: 29
Total Occupancy: 31
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **ASIAN AMERICAN DRUG ABUSE PROGRAM**
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.
Address: 1088 SOUTH LA BREA AVENUE
City, State Zip: LOS ANGELES, CA 90019
Phone: (323) 295-0262 Fax: (323) 295-2533
Record ID: **190112CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ASIAN-AMERICAN DRUG ABUSE PROGRAM**
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.
Address: 520 NORTH LA BREA,
SUITE 209
City, State Zip: INGLEWOOD, CA 90302
Phone: (323) 294-4932 Fax: (323) 294-2533
Record ID: **190112DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.**
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.
Address: 13931 SOUTH VAN NESS AVENUE
City, State Zip: GARDENA, CA 90249
Phone: (323) 293-6284 Fax: (323) 295-4075
Record ID: **190112EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.**
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.
Address: 5825 W. OLYMPIC BLVD.
City, State Zip: LOS ANGELES, CA 90036
Phone: (323) 933-9022 Fax: (323) 933-4029
Record ID: **190112FN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 9/30/2018 IMS: No

Program Name: **PHOENIX HOUSE - VENICE**
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.
Address: 503 OCEAN FRONT WALK
City, State Zip: VENICE, CA 90291
Phone: (310) 392-3070 Fax: (310) 392-9068
Record ID: **190115AN**
Service Type: RES-DETOX
Resident Capacity: 53
Total Occupancy: 53
Target Population: 1.2
Expiration Date: 12/31/2017 IMS: No

Program Name: **PHOENIX HOUSES OF LOS ANGELES**
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.
Address: 11600 ELDRIDGE AVENUE
City, State Zip: LAKE VIEW TERRACE, CA 91342
Phone: (818) 686-3013
Record ID: **190115BN**
Service Type: DSS
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **PHOENIX HOUSE: OUTPATIENT SERVICES**
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.
Address: 503 OCEAN FRONT WALK
City, State Zip: VENICE, CA 90291
Phone: (310) 392-3070 Fax: (310) 392-9068
Record ID: **190115CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PHOENIX HOUSE ACADEMY OUTPATIENT CENTER**
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC
Address: 11600 ELDRIDGE AVENUE
City, State Zip: LAKE VIEW TERRACE, CA 91342
Phone: (818) 686-3170
Record ID: **190115DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **FRED BROWN'S RECOVERY SERVICES, INC.**
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.
Address: 270 WEST 14TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 519-8723 Fax: (310) 519-9428
Record ID: **190135CN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.2
Expiration Date: 11/30/2018 IMS: No

Program Name: **FRED BROWN'S RECOVERY SERVICES, INC.**
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.
Address: 856 WEST 19TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 548-1196 Fax: (310) 519-9428
Record ID: **190135EN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FRED BROWN'S RECOVERY SERVICES**
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.
Address: 278 WEST 14TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 519-8723 Fax: (310) 519-9428
Record ID: **190135IN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **FRED BROWN'S RECOVERY SERVICES**
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.
Address: 276 WEST 14TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 519-8723 Fax: (310) 519-9428
Record ID: **190135JN**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **FRED BROWN'S RECOVERY SERVICES**
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.
Address: 270 WEST 14TH STREET,
#3
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 519-8723 Fax: (310) 519-9428
Record ID: **190135MN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **S. H. A. W. L. HOUSE**
Legal Name: SUPPORT FOR HARBOR AREA WOMEN'S LIVES
Address: 936 SOUTH CENTRE STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 521-9310 Fax: (310) 521-9310
Record ID: **190147AN**
Service Type: RES
Resident Capacity: 13
Total Occupancy: 13
Target Population: 1.12
Expiration Date: 6/30/2019 IMS: No

Program Name: **OASIS WOMEN'S RECOVERING COMMUNITY**
Legal Name: OASIS WOMEN'S RECOVERING COMMUNITY
Address: 13832 POLK STREET
City, State Zip: SYLMAR, CA 91342
Phone: (818) 362-0986 Fax: (818) 833-0922
Record ID: **190155BN**
Service Type: RES
Resident Capacity: 17
Total Occupancy: 17
Target Population: 1.3
Expiration Date: 8/31/2017 IMS: No

Program Name: **DARE U TO CARE OUTREACH MINISTRY**
Legal Name: DARE U TO CARE OUTREACH MINISTRY
Address: 1004 WEST 120TH STREET
City, State Zip: LOS ANGELES, CA 90044
Phone: (323) 208-7575 Fax: (323) 777-2488
Record ID: **190182DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **DARE U TO CARE DRUG/ALCOHOL TREATMENT PROGRAM**
Legal Name: DARE U TO CARE OUTREACH MINISTRY
Address: 316 WEST 120TH STREET
City, State Zip: LOS ANGELES, CA 90061
Phone: (323) 777-2372 Fax: (323) 777-2488
Record ID: **190182EN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 21
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **NEW FOUND LIFE**
Legal Name: NEW FOUND LIFE, INC.
Address: 2211, 2213, 2135 AND 2137 EAST OCEAN BOULEVARD
City, State Zip: LONG BEACH, CA 90803-2440
Phone: (562) 434-4060 Fax: (562) 987-3924
Record ID: **190184AP**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **WESTSIDE RESIDENCE HALL**
Legal Name: UNITED STATES VETERANS INITIATIVE
Address: 733 SOUTH HINDRY AVE.
SUITES 203, 208, 209, 210, AND 211
City, State Zip: INGLEWOOD, CA 90301
Phone: (310) 348-7600 Fax: (310) 641-2661
Record ID: **190188AN**
Service Type: RES
Resident Capacity: 50
Total Occupancy: 50
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **CROSSROADS**
Legal Name: CROSSROADS, INCORPORATED
Address: 1269 NORTH HARVARD AVE.; 615 SAN JOSE AVE.;
AND 250 W. 1ST ST., SUITE 254
City, State Zip: CLAREMONT, CA 91711-0015
Phone: (909) 626-7847 Fax: (909) 626-7867
Record ID: **190205AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 9/30/2017 IMS: No

Program Name: **SSG HOP-ICS**
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.
Address: 5715 SOUTH BROADWAY
City, State Zip: LOS ANGELES, CA 90037
Phone: (323) 948-0444 Fax: (323) 948-0443
Record ID: **190210BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 3/31/2019 IMS: No

Program Name: **PACIFIC ASIAN ALCOHOL AND DRUG PROGRAM**
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.
Address: 2001 BEVERLY BOULEVARD,
SUITE 201
City, State Zip: LOS ANGELES, CA 90057
Phone: (213) 413-1622 Fax: (213) 413-5456
Record ID: **190210CN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **SSG WEBER COMMUNITY CENTER**
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.
Address: 5849 SOUTH CROCKER STREET
City, State Zip: LOS ANGELES, CA 90003
Phone: (323) 234-4445 Fax: (213) 553-1822
Record ID: **190210EN**
Service Type: NON
Target Population: 1.5
Expiration Date: 7/31/2017 IMS: No

Program Name: **CREATIVE CARE - MALIBU**
Legal Name: CREATIVE CARE, INC.
Address: 5909, 5927, 5941 AND 5947 TRANCAS CANYON ROAD
City, State Zip: MALIBU, CA 90265
Phone: (818) 223-9334 Fax: (310) 589-5547
Record ID: **190226AP**
Service Type: RES-DETOX
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **DAY TREATMENT AND OUTPATIENT ALCOHOL AND/OR OTHER DRUG SERVICES**
Legal Name: EL PROYECTO DEL BARRIO, INC.
Address: 9140 VAN NUYS BOULEVARD,
SUITES 104-107, 201, 203, AND 208-211
City, State Zip: PANORAMA CITY, CA 91402
Phone: (818) 895-2206 Fax: (818) 895-0824
Record ID: **190236BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **ARK OUTPATIENT DRUG FREE SERVICES/DRUG COURT**
Legal Name: SHIELDS FOR FAMILIES
Address: 11705 DEPUTY YAMAMOTO PLACE,
SUITE A
City, State Zip: LYNWOOD, CA 90262
Phone: (323) 357-6930 Fax: (323) 569-1979
Record ID: **190238CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **GENESIS FAMILY DAY TREATMENT PROGRAM**
Legal Name: SHIELDS FOR FAMILIES
Address: 12021 SOUTH WILMINGTON AVENUE,
LOT C
City, State Zip: LOS ANGELES, CA 90059
Phone: (310) 668-8260
Record ID: **190238DN**
Service Type: NON
Target Population: 1.7
Expiration Date: 3/31/2019 IMS: No

Program Name: **EXODUS FAMILY DAY TREATMENT PROGRAM**
Legal Name: SHIELDS FOR FAMILIES
Address: 1500 EAST KAY STREET, UNITS 100, 1704, 1708, 1710, 1712, 1714, 1716, 1720, 1736, 1740, 1746, AND 1762
City, State Zip: COMPTON, CA 90221
Phone: (310) 898-2450 Fax: (310) 898-2452
Record ID: **190238EN**
Service Type: NON
Target Population: 1.7
Expiration Date: 5/31/2019 IMS: No

Program Name: **EDEN DUAL DIAGNOSIS PROGRAM**
Legal Name: SHIELDS FOR FAMILIES
Address: 2620 INDUSTRY WAY, SUITE A
City, State Zip: LYNWOOD, CA 90262
Phone: (323) 242-5000 Fax: (323) 242-5011
Record ID: **190238FN**
Service Type: NON
Target Population: 1.7
Expiration Date: 3/31/2019 IMS: No

Program Name: **SHIELDS FOR FAMILIES - MT. CARMEL TREATMENT CENTER**
Legal Name: SHIELDS FOR FAMILIES
Address: 801 WEST 70TH STREET
City, State Zip: LOS ANGELES, CA 90044
Phone: (323) 242-5000 Fax: (323) 242-5011
Record ID: **190238GN**
Service Type: RES
Resident Capacity: 46
Total Occupancy: 46
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **AMERICAN INDIAN CHANGING SPIRITS**
Legal Name: AMERICAN INDIAN CHANGING SPIRITS
Address: 2120 W. WILLIAMS STREET, BUILDING 1 AND 2
City, State Zip: LONG BEACH, CA 90810
Phone: (562) 388-8118 Fax: (562) 799-1807
Record ID: **190239AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON**
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON
Address: 656 NORTH PARK AVENUE
City, State Zip: POMONA, CA 91768
Phone: (909) 629-4084 Fax: (909) 629-4086
Record ID: **190241BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF EAST SAN GABRIEL & POMONA**
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON
Address: 4626 NORTH GRAND AVENUE
City, State Zip: COVINA, CA 91724
Phone: (626) 331-5316 Fax: (626) 332-2219
Record ID: **190241CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **INTEGRATED TREATMENT PROGRAM FOR CO-OCCURRING DISORDERS**
Legal Name: HOMELESS HEALTH CARE LOS ANGELES
Address: 2330 BEVERLY BOULEVARD
City, State Zip: LOS ANGELES, CA 90057
Phone: (213) 744-0724 Fax: (213) 749-2432
Record ID: **190246AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SPIRITT FAMILY SERVICES**
Legal Name: SPIRITT FAMILY SERVICES
Address: 8000 PAINTER AVENUE
City, State Zip: WHITTIER, CA 90602
Phone: (562) 903-7000 Fax: (502) 903-7707
Record ID: **190247BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **SPIRITT FAMILY SERVICES**
Legal Name: SPIRITT FAMILY SERVICES
Address: 2000 TYLER AVENUE
City, State Zip: SOUTH EL MONTE, CA 91733
Phone: (626) 968-0091 Fax: (626) 968-0041
Record ID: **190247CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SPIRITT FAMILY SERVICES**
Legal Name: SPIRITT FAMILY SERVICES
Address: 147 SOUTH SIXTH AVENUE
City, State Zip: LA PUENTE, CA 91746
Phone: (626) 968-0041
Record ID: **190247DN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **PASADENA RECOVERY CENTER**
Legal Name: PASADENA RECOVERY CENTER, INC.
Address: 1811 NORTH RAYMOND AVENUE
City, State Zip: PASADENA, CA 91103-1840
Phone: (626) 345-9992 Fax: (626) 345-9995
Record ID: **190250AP**
Service Type: RES-DETOX
Resident Capacity: 88
Total Occupancy: 88
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES**
Legal Name: PACIFIC CLINICS
Address: 11721 A TELEGRAPH ROAD
City, State Zip: SANTA FE SPRINGS, CA 90670-3691
Phone: (562) 949-8455 Fax: (562) 949-4807
Record ID: **190254KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **AMITY FOUNDATION-AMISTAD DE LOS ANGELES**
Legal Name: EPIDAURUS
Address: 3735, 3739 AND 3745 SOUTH GRAND AVENUE
City, State Zip: LOS ANGELES, CA 90007
Phone: (213) 743-9078 Fax: (213) 748-5102
Record ID: **190259AN**
Service Type: RES
Resident Capacity: 184
Total Occupancy: 184
Target Population: 1.2
Expiration Date: 5/31/2019 IMS: No

Program Name: **AMITY FOUNDATION**
Legal Name: EPIDAURUS
Address: 3750 SOUTH GRAND AVENUE
City, State Zip: LOS ANGELES, CA 90007
Phone: (213) 743-9075 Fax: (866) 763-2186
Record ID: **190259CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **THE HIGH ROAD PROGRAM**
Legal Name: THE HIGH ROAD PROGRAM
Address: 700 SOUTH ARROYO PARKWAY
City, State Zip: PASADENA, CA 91105
Phone: (626) 793-6159 Fax: (626) 795-9540
Record ID: **190262AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **THE HIGH ROAD PROGRAM**
Legal Name: THE HIGH ROAD PROGRAM
Address: 14430 SHERMAN WAY
City, State Zip: VAN NUYS, CA 91405
Phone: (818) 785-9119 Fax: (818) 785-2150
Record ID: **190262BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SOUTH BAY HUMAN SERVICES**
Legal Name: SOUTH BAY HUMAN SERVICES COALITION, INC.
Address: 2370 WEST CARSON STREET, SUITE 136
City, State Zip: TORRANCE, CA 90501
Phone: (310) 328-0780
Record ID: **190268AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **MENLO HOUSE RESIDENTIAL**
Legal Name: SADLER HEALTHCARE, INC.
Address: 1731 SOUTH MENLO AVENUE
City, State Zip: LOS ANGELES, CA 90006
Phone: (323) 734-3284 Fax: (323) 724-0019
Record ID: **190279CP**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **MARIPOSA HOUSE**
Legal Name: SADLER HEALTHCARE, INC.
Address: 220 N. NORMANDIE AVENUE AND
225 N. MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90004
Phone: (213) 220-4482
Record ID: **190279DP**
Service Type: RES
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **PASSAGES**
Legal Name: GRASSHOPPER HOUSE LLC
Address: 6428 MEADOWS COURT
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-0663
Record ID: **190283AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **PASSAGES C**
Legal Name: GRASSHOPPER HOUSE LLC
Address: 6439 SYCAMORE MEADOWS DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-0663
Record ID: **190283CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **PASSAGES VISTA HOUSE**
Legal Name: GRASSHOPPER HOUSE LLC
Address: 6380 MEADOWS COURT
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-6592
Record ID: **190283DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PASSAGES**
Legal Name: GRASSHOPPER HOUSE LLC
Address: 6447 SYCAMORE MEADOWS DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-0663
Record ID: **190283FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **THE NESS COUNSELING CENTER**
Legal Name: THE NESS COUNSELING CENTER, INC.
Address: 8512 WHITWORTH DRIVE
City, State Zip: LOS ANGELES, CA 90035
Phone: (310) 360-8512 Fax: (310) 360-8510
Record ID: **190286AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MJB RECOVERY, INC.**
Legal Name: MJB TRANSITIONAL RECOVERY, INC.
Address: 11152 SOUTH MAIN STREET
City, State Zip: LOS ANGELES, CA 90061
Phone: (323) 777-2491 Fax: (323) 777-0426
Record ID: **190288BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **POSITIVE STEPS, INC.**
Legal Name: POSITIVE STEPS, INC.
Address: 5230 NORTH CLARK AVENUE, SUITE 18
City, State Zip: LAKEWOOD, CA 90712
Phone: (562) 804-2700 Fax: (562) 496-2104
Record ID: **190289AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS - TORRANCE**
Legal Name: TWIN TOWN CORPORATION
Address: 20300 S. VERMONT AVENUE, SUITE 245
City, State Zip: TORRANCE, CA 90502
Phone: (310) 787-1335 Fax: (562) 493-1280
Record ID: **190290AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS - NORTH HOLLYWOOD**
Legal Name: TWIN TOWN CORPORATION
Address: 6180 LAUREL CANYON BOULEVARD, SUITE 275
City, State Zip: NORTH HOLLYWOOD, CA 91606
Phone: (818) 985-0560 Fax: (562) 493-1280
Record ID: **190290BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS, WEST HOLLYWOOD**
Legal Name: TWIN TOWN CORPORATION
Address: 8739 SANTA MONICA BOULEVARD
City, State Zip: WEST HOLLYWOOD, CA 90069
Phone: (562) 493-1280 Fax: (310) 854-0134
Record ID: **190290CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **AM/PM VAN NUYS BUDGET SCHOOL - ESCUELA LATINA**
Legal Name: DRIVER SAFETY SCHOOLS, INC.
Address: 6740 KESTER AVENUE, SUITE 206
City, State Zip: VAN NUYS, CA 91405
Phone: (818) 787-7878 Fax: (310) 575-0500
Record ID: **190294AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2017 IMS: No

Program Name: **MATRIX INSTITUTE ON ADDICTIONS**
Legal Name: MATRIX INSTITUTE ON ADDICTIONS
Address: 20301 VENTURA BOULEVARD, SUITE 121
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (818) 226-6070 Fax: (818) 704-8948
Record ID: **190297AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **MATRIX INSTITUTE**
Legal Name: MATRIX INSTITUTE ON ADDICTIONS
Address: 1849 SAWTELLE BOULEVARD, SUITE 100
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 478-8305 Fax: (310) 478-8639
Record ID: **190297BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC-RANCH**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 30035 BOUQUET CANYON ROAD
City, State Zip: SAUGUS, CA 91350
Phone: (661) 297-9705 Fax: (661) 297-9701
Record ID: **190315DP**
Service Type: NON
Target Population: 1.5
Expiration Date: 8/31/2018 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC.**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 22722 SOLEDAD CANYON ROAD
City, State Zip: SANTA CLARITA, CA 91350
Phone: (661) 297-9716 Fax: (661) 297-9701
Record ID: **190315FP**
Service Type: NON
Target Population: 1.8
Expiration Date: 2/28/2018 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC., ADULT RESIDENTIAL UNIT**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 30010 BOUQUET CANYON ROAD
City, State Zip: SANTA CLARITA, CA 91390
Phone: (800) 367-8336 Fax: (661) 297-9701
Record ID: **190315HP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **LIVING PROOF RECOVERY CENTER**
Legal Name: LIVING PROOF RECOVERY CENTER
Address: 324 W. FOOTHILL BOULEVARD
City, State Zip: MONROVIA, CA 91016-6420
Phone: (626) 205-2518 Fax: (626) 386-5250
Record ID: **190316BP**
Service Type: NON
Target Population: 1.13
Expiration Date: 8/31/2017 IMS: No

Program Name: **I-ADARP, (INTER-AGENCY DRUG ABUSE RECOVERY PROGRAM)**
Legal Name: I-ADARP, INC.
Address: 8330 LANKERSHIM BOULEVARD, 1ST FLOOR
City, State Zip: NORTH HOLLYWOOD, CA 91605
Phone: (818) 994-7454 Fax: (818) 252-1410
Record ID: **190321AN**
Service Type: NON
Target Population: 1.9
Expiration Date: 10/31/2017 IMS: No

Program Name: **BEIT T'SHUVAH**
Legal Name: BEIT T'SHUVAH
Address: 8831 VENICE BOULEVARD
City, State Zip: LOS ANGELES, CA 90034
Phone: (310) 204-5200 Fax: (310) 204-8908
Record ID: **190326AN**
Service Type: RES
Resident Capacity: 98
Total Occupancy: 120
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **FIRST TO SERVE, INC.**
Legal Name: FIRST TO SERVE
Address: 4052 BUDLONG AVENUE
City, State Zip: LOS ANGELES, CA 90037
Phone: (323) 595-7502 Fax: (323) 758-4011
Record ID: **190342CN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **VALLEY COMMUNITY HEALTHCARE DRUG AND ALCOHOL TREATMENT PROGRAM**
Legal Name: VALLEY COMMUNITY HEALTHCARE
Address: 6801 COLDWATER CANYON AVENUE
City, State Zip: NORTH HOLLYWOOD, CA 91605-5104
Phone: (818) 763-1718 Fax: (818) 763-7231
Record ID: **190349AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **STORK CLUB - OPTIONS FOR RECOVERY AT HARBOR UCLA RESEARCH AND EDUCATION INSTITUTE**
Legal Name: LOS ANGELES BIOMEDICAL RESEARCH INSTITUTE AT HARBOR-UCLA MEDICAL CENTER
Address: 1124 WEST CARSON STREET, BUILDING N-33
City, State Zip: TORRANCE, CA 90502
Phone: (310) 222-5410 Fax: (310) 787-7742
Record ID: **190351AN**
Service Type: NON
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **CAMBODIAN ASSOCIATION OF AMERICA, COMMUNITY PREVENTION AND RECOVERY PROGRAM**
Legal Name: CAMBODIAN ASSOCIATION OF AMERICA
Address: 2501 ATLANTIC AVENUE
City, State Zip: LONG BEACH, CA 90806
Phone: (562) 988-1863 Fax: (562) 427-1678
Record ID: **190358AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **ROBERT SUNDANCE FAMILY WELLNESS CENTER**
Legal Name: UNITED AMERICAN INDIAN INVOLVEMENT, INC.
Address: 1125 WEST 6TH STREET, SUITES 103 AND 303
City, State Zip: LOS ANGELES, CA 90017
Phone: (213) 202-3970 Fax: (213) 202-3977
Record ID: **190364AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CLINICA MSR. OSCAR A. ROMERO**
Legal Name: CLINICA MSR. OSCAR A ROMERO
Address: 2032 MARENGO STREET
SUITE B
City, State Zip: LOS ANGELES, CA 90033
Phone: (213) 989-7700 Fax: (213) 989-7701
Record ID: **190368AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY**
Legal Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY
Address: 311 EAST AVENUE K-4
City, State Zip: LANCASTER, CA 93535
Phone: (661) 948-5046 Fax: (661) 948-5049
Record ID: **190376AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HOUSE OF UHURU**
Legal Name: WATTS HEALTHCARE CORPORATION
Address: 8005 SOUTH FIGUEROA STREET
City, State Zip: LOS ANGELES, CA 90003
Phone: (323) 568-5400 Fax: (323) 752-8031
Record ID: **190377AN**
Service Type: RES
Resident Capacity: 66
Total Occupancy: 66
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **HOUSE OF UHURU**
Legal Name: WATTS HEALTHCARE CORPORATION
Address: 8005 SOUTH FIGUEROA STREET
City, State Zip: LOS ANGELES, CA 90003
Phone: (323) 568-5400 Fax: (323) 752-8031
Record ID: **190377BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **HELPLINE YOUTH COUNSELING**
Legal Name: HELPLINE YOUTH COUNSELING
Address: 14181 TELEGRAPH ROAD, WEST WING
City, State Zip: WHITTIER, CA 90604
Phone: (562) 273-0722 Fax: (562) 946-3641
Record ID: **190386AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **NEW PERCEPTIONS**
Legal Name: NEW PERCEPTIONS, INC.
Address: 17813 MALDEN STREET
City, State Zip: NORTHRIDGE, CA 91325
Phone: (818) 885-9596 Fax: (818) 885-9595
Record ID: **190416AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **MCINTYRE HOUSE**
Legal Name: MCINTYRE HOUSE
Address: 544 NORTH KENMORE AVENUE
City, State Zip: LOS ANGELES, CA 90004
Phone: (323) 662-0855 Fax: (323) 622-0842
Record ID: **190420AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 19
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **CLEARVIEW TREATMENT PROGRAMS**
Legal Name: CLEARVIEW CENTERS, LLC
Address: 2432 AND 2432 1/2 WALNUT AVENUE
City, State Zip: VENICE, CA 90291
Phone: (310) 862-8980 Fax: (310) 862-8822
Record ID: **190438AP**
Service Type: RES-DETOX
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CLEARVIEW TREATMENT PROGRAMS**
Legal Name: CLEARVIEW CENTERS, LLC
Address: 2435 GLYNDON AVENUE
City, State Zip: VENICE, CA 90291
Phone: (310) 305-2691 Fax: (310) 305-2693
Record ID: **190438CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **CLEARVIEW TREATMENT PROGRAMS**
Legal Name: CLEARVIEW CENTERS, LLC
Address: 2427 WALNUT AVENUE
City, State Zip: VENICE, CA 90291
Phone: (310) 448-8822 Fax: (310) 448-8833
Record ID: **190438DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **THE CANYON AT PEACE PARK**
Legal Name: THE CANYON AT PEACE PARK
Address: 2890 AND 2900 KANAN DUME ROAD
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-3209 Fax: (310) 457-4440
Record ID: **190441AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES (THE FAMILY CENTER)**
Legal Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES, INCORPORATED
Address: 540 SOUTH EREMLAND DRIVE, SUITES A-D
City, State Zip: COVINA, CA 91723
Phone: (626) 967-5103 Fax: (626) 967-1339
Record ID: **190442AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **ALCOHOL & DRUG PROGRAM**
Legal Name: CHILD & FAMILY CENTER
Address: 21545 CENTRE POINTE PARKWAY
City, State Zip: SANTA CLARITA, CA 91350
Phone: (661) 259-9439 Fax: (661) 259-9658
Record ID: **190459AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER**
Legal Name: ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER INC.
Address: 3111 WINONA AVENUE, SUITE 201
City, State Zip: BURBANK, CA 91504
Phone: (626) 792-8797 Fax: (626) 792-8798
Record ID: **190462AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAM, DIV. OF ADOLESCENT MED., CHILD**
Legal Name: CHILDREN'S HOSPITAL LOS ANGELES
Address: 5000 SUNSET BOULEVARD, 7TH FLOOR, SUITE 701
City, State Zip: LOS ANGELES, CA 90027
Phone: (323) 361-2463 Fax: (323) 913-7951
Record ID: **190473AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2019 IMS: No

Program Name: **CLIFFSIDE MALIBU**
Legal Name: CLIFFSIDE MALIBU
Address: 30060 ANDROMEDA LANE
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2800 Fax: (310) 589-2802
Record ID: **190474AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **INGLEWOOD AREA ALCOHOL AND DRUG PROGRAM**
Legal Name: LEWIS PROFESSIONAL SERVICES, INCORPORATED
Address: 400 SOUTH LA BREA, SUITE # 101,102, 200, 202, 203, 204 AND 205
City, State Zip: INGELWOOD, CA 90301
Phone: (310) 674-6267 Fax: (310) 673-5904
Record ID: **190480AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **VALLEY WOMEN'S CENTER**
Legal Name: VALLEY WOMEN'S CENTER, INC.
Address: 22110 ROSCOE BOULEVARD, SUITE 204
City, State Zip: CANOGA PARK, CA 91304
Phone: (818) 713-8700 Fax: (818) 713-8585
Record ID: **190502AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **HELPING KIDS TO RECOVER, INC.**
Legal Name: HELPING KIDS TO RECOVER, INC.
Address: 637 EAST ALBERTONI STREET, SUITES 200, 201 AND 203
City, State Zip: CARSON, CA 90746
Phone: (310) 217-0616 Fax: (310) 217-0545
Record ID: **190503AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **NEW HOPE DRUG AND ALCOHOL TREATMENT PROGRAM**
Legal Name: NEW HOPE DRUG ALCOHOL TREATMENT PROGRAM, INC.
Address: 1841 AND 1841 1/2 WEST IMPERIAL HIGHWAY
City, State Zip: LOS ANGELES, CA 90047
Phone: (323) 750-2850 Fax: (323) 750-0851
Record ID: **190504AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **COASTAL RECOVERY CENTER**
Legal Name: TRANSCULTURAL HEALTH DEVELOPMENT, INC.
Address: 117 EAST HARRY BRIDGES BOULEVARD
City, State Zip: WILMINGTON, CA 90744
Phone: (310) 549-8383 Fax: (310) 549-9304
Record ID: **190511BP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **PASSAGES EAST**
Legal Name: FEDERAL RECOVERY SYSTEMS LLC
Address: 6439 (B) SYCAMORE MEADOWS DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-6592
Record ID: **190516AP**
Service Type: RES-DETOX
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PASSAGES NORTHEAST**
Legal Name: FEDERAL RECOVERY SYSTEMS LLC
Address: 6428 - B MEADOWS COURT
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-6592
Record ID: **190516BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **EATON CANYON TREATMENT CENTER**
Legal Name: EATON CANYON RECOVERY SERVICES, INC.
Address: 3323 EAST FAIRPOINT STREET
City, State Zip: PASADENA, CA 91107
Phone: (626) 798-0150 Fax: (626) 798-8685
Record ID: **190521AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **EATON CANYON TREATMENT CENTER OUT PATIENT SERVICES**
Legal Name: EATON CANYON RECOVERY SERVICES, INC.
Address: 259 NORTH SIERRA MADRE VILLA
City, State Zip: PASADENA, CA 91107
Phone: (626) 798-0150 Fax: (626) 798-8685
Record ID: **190521BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **EATON CANYON TREATMENT CENTER - WEST**
Legal Name: EATON CANYON RECOVERY SERVICES, INC.
Address: 743 NORTH HILL AVENUE
City, State Zip: PASADENA, CA 91104
Phone: (626) 798-0150 Fax: (626) 798-8685
Record ID: **190521CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **KB RECOVERY**
Legal Name: KEVIN BABAYAN
Address: 15722 TUPPER STREET
City, State Zip: NORTH HILLS, CA 91343
Phone: (818) 231-8054 Fax: (818) 892-9471
Record ID: **190527AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **WEINGART CENTER ASSOCIATION/EPIC**
Legal Name: WEINGART CENTER ASSOCIATION
Address: 554 AND 566 SOUTH SAN PEDRO STREET,
4TH, 7TH AND 8TH FLOOR
City, State Zip: LOS ANGELES, CA 90013
Phone: (213) 617-9000 Fax: (213) 623-0408
Record ID: **190541AN**
Service Type: RES
Resident Capacity: 85
Total Occupancy: 85
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **CHARTER OAK RECOVERY CENTER**
Legal Name: AURORA CHARTER OAK - LOS ANGELES, LLC
Address: 1161 EAST COVINA BOULEVARD,
BUILDING C
City, State Zip: COVINA, CA 91724
Phone: (626) 966-1632
Record ID: **190551AP**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **MALIBU BEACH RECOVERY CENTER**
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC
Address: 1752 CORRAL CANYON ROAD
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-9133
Record ID: **190562AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **MALIBU BEACH RECOVERY CENTER - IOP**
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC
Address: 15415 W. SUNSET BOULEVARD, SUITE 200
City, State Zip: PACIFIC PALISADES, CA 90272
Phone: (310) 456-2026
Record ID: **190562BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **MALIBU BEACH RECOVERY CENTER - BRENTWOOD HOUSE**
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC
Address: 101 SOUTH SALTAIR AVENUE
City, State Zip: LOS ANGELES, CA 90049
Phone: (310) 472-0139
Record ID: **190562CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **MALIBU BEACH RECOVERY CENTER**
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC
Address: 4322 ESCONDIDO DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (424) 235-2346
Record ID: **190562EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.**
Legal Name: ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.
Address: 1084 & 1092 NEW YORK DRIVE
City, State Zip: ALTADENA, CA 91001
Phone: (818) 421-7890 Fax: (626) 798-2777
Record ID: **190569AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SUNSET MALIBU**
Legal Name: SUNSET MALIBU
Address: 30042 ANDROMEDA LANE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-9500 Fax: (310) 457-9544
Record ID: **190575BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **AUTHENTIC RECOVERY CENTER**
Legal Name: AUTHENTIC RECOVERY, LLC
Address: 2203 OVERLAND AVENUE
City, State Zip: LOS ANGELES, CA 90064
Phone: (310) 497-7236 Fax: (310) 474-1906
Record ID: **190577AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **AUTHENTIC RECOVERY CENTER**
Legal Name: AUTHENTIC RECOVERY, LLC
Address: 2207 PELHAM AVENUE
City, State Zip: LOS ANGELES, CA 90064
Phone: (310) 401-4692 Fax: (310) 481-2264
Record ID: **190577BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **AUTHENTIC RECOVERY CENTER**
Legal Name: AUTHENTIC RECOVERY, LLC
Address: 10780 SANTA MONICA BOULEVARD, SUITE 230 & 260
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 474-2100 Fax: (310) 481-2264
Record ID: **190577CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **AUTHENTIC RECOVERY CENTER**
Legal Name: AUTHENTIC RECOVERY, LLC
Address: 10700 CUSHDON AVE.
City, State Zip: LOS ANGELES, CA 90064
Phone: (310) 474-2100 Fax: (310) 481-2264
Record ID: **190577DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 2/28/2019 IMS: Yes

Program Name: **PLAZA COMMUNITY SERVICES**
Legal Name: PLAZA COMMUNITY CENTER, A CALIFORNIA NONPROFIT RELIGIOUS CORPORATION
Address: 5255 POMONA BOULEVARD, SUITES 2 AND 5A
City, State Zip: LOS ANGELES, CA 90022
Phone: (323) 888-2530 Fax: (323) 726-3510
Record ID: **190582AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **HARBOR AREA SUBSTANCE ABUSE TREATMENT CENTER**
Legal Name: HACC INC.
Address: 599 WEST 9TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 831-0331 Fax: (310) 831-0004
Record ID: **190586AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **DIVINE HEALTHCARE SERVICES, INC.**
Legal Name: DIVINE HEALTHCARE SERVICES, INC.
Address: 405 WEST MANCHESTER BOULEVARD, SUITE A
City, State Zip: INGLEWOOD, CA 90301
Phone: (310) 672-3820
Record ID: **190604AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

Program Name: **YOUR EMPOWERING SOLUTIONS**
Legal Name: YOUR EMPOWERING SOLUTIONS
Address: 4020 PALOS VERDES DRIVE NORTH, SUITE 201
City, State Zip: ROLLING HILLS ESTATE, CA 90274
Phone: (310) 541-6350 Fax: (310) 541-6497
Record ID: **190605AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **CIVIGENICS, INC., LONG BEACH FACILITY**
Legal Name: COMMUNITY EDUCATION CENTERS, INC., DBA CALIFORNIA AS CEC INTL., INC.
Address: 2233 EAST 69TH STREET
City, State Zip: LONG BEACH, CA 90805
Phone: (562) 663-0711 Fax: (562) 663-1343
Record ID: **190606AP**
Service Type: RES
Resident Capacity: 112
Total Occupancy: 112
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **SUMMIT MALIBU**
Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC
Address: 28011 PAQUET PLACE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-0787 Fax: (310) 457-8067
Record ID: **190612BP**
Service Type: RES-DETOX
Resident Capacity: 7
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **SUMMIT MALIBU LOWER**
Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC
Address: 27026 SEA VISTA DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-0787 Fax: (310) 457-8067
Record ID: **190612CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **PROMISES TREATMENT CENTERS IV**
Legal Name: PROMAL4, INC.
Address: 20729 ROCKCROFT DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-9233 Fax: (310) 317-9233
Record ID: **190617AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **DIXON RECOVERY INSTITUTE, INC.**
Legal Name: DIXON RECOVERY INSTITUTE, INC.
Address: 1512 W. SLAUSON AVENUE, ROOMS 103, 202 & 210
City, State Zip: LOS ANGELES, CA 90047
Phone: (323) 244-5677 Fax: (866) 582-9013
Record ID: **190622AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **PROMISES TREATMENT CENTERS III**
Legal Name: SBAR2 INC.
Address: 3743 SOUTH BARRINGTON AVENUE
City, State Zip: LOS ANGELES, CA 90066
Phone: (310) 390-2340
Record ID: **190623AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **PROMISES TREATMENT CENTERS II**
Legal Name: PROMAL2 INC.
Address: 20723 ROCKCROFT DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-9233 Fax: (310) 943-0438
Record ID: **190624AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **PROMISES RESIDENTIAL TREATMENT CENTERS**
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.
Address: 20725 ROCKCROFT DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-9233 Fax: (310) 943-0438
Record ID: **190625AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **PROMISES RESIDENTIAL TREATMENT CENTERS**
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.
Address: 3743 1/2 SOUTH BARRINGTON AVENUE
City, State Zip: LOS ANGELES, CA 90066
Phone: (310) 390-2340 Fax: (310) 391-6436
Record ID: **190625CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **PROMISES TREATMENT CENTERS VI**
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.
Address: 20713 ROCKCROFT DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-9233 Fax: (310) 317-9287
Record ID: **190625EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **PROMISES TREATMENT CENTERS - OUTPATIENT PROGRAM**
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.
Address: 2045 S. BARRINGTON AVENUE SUITE B
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 268-7737 Fax: (310) 479-3520
Record ID: **190625FP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **PROFESSIONALS TREATMENT AT PROMISES**
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.
Address: 2515 WILSHIRE BOULEVARD
City, State Zip: SANTA MONICA, CA 90403
Phone: (424) 744-5155 Fax: (310) 943-3389
Record ID: **190625GP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **RIDGEVIEW RANCH**
Legal Name: RIDGEVIEW DRIVE RANCH, LLC
Address: 3085 RIDGEVIEW DRIVE
City, State Zip: ALTADENA, CA 91001
Phone: (626) 482-3478 Fax: (626) 791-1592
Record ID: **190627AP**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **RIDGEVIEW RANCH II**
Legal Name: RIDGEVIEW DRIVE RANCH, LLC
Address: 3323 MARENGO AVENUE
City, State Zip: ALTADENA, CA 91001
Phone: (626) 765-9600 Fax: (626) 765-9605
Record ID: **190627BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **RIDGEVIEW RANCH III**
Legal Name: RIDGEVIEW DRIVE RANCH, LLC
Address: 915 GREEN LANE
City, State Zip: LA CANADA FLINTRIDGE, CA 91011
Phone: (626) 254-7881
Record ID: **190627FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: Yes

Program Name: **MEDI-CURE HEALTH SERVICES, INC.**
Legal Name: MEDI-CURE HEALTH SERVICES, INC.
Address: 3756 SANTA ROSALIA DRIVE # 417
City, State Zip: LOS ANGELES, CA 90008
Phone: (323) 295-1136 Fax: (323) 295-1071
Record ID: **190636AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 10/31/2018 IMS: No

Program Name: **DAVID & MARGARET YOUTH AND FAMILY SERVICES RECOVERY PROGRAM**
Legal Name: DAVID AND MARGARET HOME, INC.
Address: 1350 THIRD STREET
City, State Zip: LA VERNE, CA 91750
Phone: (909) 596-5921 Ext:3500 Fax: (909) 596-3954
Record ID: **190641AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 5/31/2019 IMS: No

Program Name: **MILESTONES 1, THE RANCH MALIBU VENTURE 1**
Legal Name: THE RANCH MALIBU VENTURE 1
Address: 200 VERA CANYON ROAD
City, State Zip: MALIBU, CA 90265
Phone: (818) 879-9110 Fax: (818) 879-9011
Record ID: **190649AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **MILESTONES 2, THE RANCH MALIBU VENTURE 1**
Legal Name: THE RANCH MALIBU VENTURE 1
Address: 221 VERA CANYON ROAD
City, State Zip: MALIBU, CA 90265
Phone: (818) 879-9110 Fax: (818) 879-9011
Record ID: **190649BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **PASSAGES 8**
Legal Name: 6390 MEADOWS COURT LLC
Address: 6390 MEADOWS COURT
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-0663
Record ID: **190650AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **PASSAGES 9**
Legal Name: 6390A MEADOWS COURT LLC
Address: 6390-B MEADOWS COURT
(REAR GUEST HOUSE)
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2880 Fax: (310) 464-0663
Record ID: **190652AP**
Service Type: RES-DETOX
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **2ND CHANCE FOR RECOVERY**
Legal Name: 2ND CHANCE FOR RECOVERY, INC.
Address: 600 E 7TH STREET, SUITE 104 & 105
City, State Zip: LOS ANGELES, CA 90021
Phone: (213) 537-0110 Fax: (213) 537-0880
Record ID: **190653AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **SERENITY MALIBU**
Legal Name: SEASONS RECOVERY CENTERS LLC
Address: 6021 GALAHAD ROAD
City, State Zip: MALIBU, CA 90265
Phone: (424) 234-2044 Fax: (818) 337-0365
Record ID: **190655AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **SEASONS AGOURA**
Legal Name: SEASONS RECOVERY CENTERS LLC
Address: 5850 LAPWORTH DRIVE
City, State Zip: AGOURA HILLS, CA 91301
Phone: (747) 222-7802 Fax: (424) 235-2017
Record ID: **190655CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **YOU CAN ALCOHOL AND DRUG COUNSELING AND EDUCATION PROGRAM**
Legal Name: YOU CAN HEALTH SERVICES
Address: 600 WEST MANCHESTER AVENUE, SUITE 5
City, State Zip: LOS ANGELES, CA 90044
Phone: (310) 349-9778
Record ID: **190656AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 9/30/2018 IMS: No

Program Name: **CLIFFSIDE MALIBU II**
Legal Name: CLIFFSIDE MALIBU II
Address: 5853 BUSCH DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (800) 332-9202 Fax: (424) 781-4708
Record ID: **190658AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **SOBA TREATMENT CENTER**
Legal Name: SOBALIVING LLC.
Address: 22677 PACIFIC COAST HIGHWAY
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-5250
Record ID: **190664AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **SOBA RECOVERY CENTER**
Legal Name: SOBALIVING LLC.
Address: 27437 WINDING WAY
City, State Zip: MALIBU, CA 90265
Phone: (310) 589-2180 Fax: (310) 919-3667
Record ID: **190664BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HANNAH'S FIRST STEP TREATMENT CENTER**
Legal Name: HANNA'S HOUSE
Address: 5900 SOUTH EASTERN AVENUE, SUITE 186
City, State Zip: COMMERCE, CA 90040
Phone: (323) 278-6501 Fax: (323) 278-6515
Record ID: **190678AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **OCEANSIDE MALIBU**
Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.
Address: 21022 PACIFIC COAST HIGHWAY
City, State Zip: MALIBU, CA 90265
Phone: (818) 917-3225 Fax: (310) 456-3305
Record ID: **190687AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.**
Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.
Address: 23480 PARK SORRENTO,
217A
City, State Zip: CALABASAS, CA 91302
Phone: (818) 917-3225 Fax: (888) 999-9477
Record ID: **190687BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **KLEAN WEST HOLLYWOOD**
Legal Name: KLEAN W. HOLLYWOOD, LLC
Address: 840, 842, 844, 846, 848, 850, 852, 852 1/2, 854 HILLDALE AVENUE
City, State Zip: WEST HOLLYWOOD, CA 90069
Phone: (310) 895-7095 Fax: (310) 358-9374
Record ID: **190692AP**
Service Type: RES-DETOX
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **KLEAN W. HOLLYWOOD OUTPATIENT**
Legal Name: KLEAN W. HOLLYWOOD, LLC
Address: 9000 SUNSET BOULEVARD, SUITE 650-B
City, State Zip: WEST HOLLYWOOD, CA 90069
Phone: (310) 922-2264
Record ID: **190692HP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SEASONS IN MALIBU**
Legal Name: SEASONS RECOVERY CENTERS LLC
Address: 32223 PACIFIC COAST HIGHWAY
City, State Zip: MALIBU, CA 90265
Phone: (424) 457-8396 Fax: (424) 235-2017
Record ID: **190695AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **THE HILLS TREATMENT CENTER, LLC**
Legal Name: THE HILLS TREATMENT CENTER, LLC
Address: 8147, 8171 AND 8207 MULHOLLAND DRIVE, AND
8507 WILLOW GLEN ROAD
City, State Zip: LOS ANGELES, CA 90046
Phone: (323) 791-5489 Fax: (877) 729-8207
Record ID: **190703AP**
Service Type: RES-DETOX
Resident Capacity: 21
Total Occupancy: 21
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **CHAPMAN HOUSE**
Legal Name: CHAPMAN HOUSE, INC.
Address: 834 PACIFIC AVENUE
City, State Zip: LONG BEACH, CA 90813
Phone: (714) 742-2909 Fax: (714) 288-6130
Record ID: **190706AP**
Service Type: RES
Resident Capacity: 37
Total Occupancy: 37
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **PACIFICA RECOVERY, INC.**
Legal Name: PACIFICA RECOVERY, INC.
Address: 415 WEST FOOTHILL BOULEVARD, SUITES 210 AND 211
City, State Zip: CLAREMONT, CA 91711
Phone: (919) 447-5081 Fax: (919) 447-5974
Record ID: **190712AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MELA COUNSELING SERVICES CENTER, INC.**
Legal Name: MELA COUNSELING SERVICES CENTER, INC.
Address: 5723 WHITTIER BOULEVARD
City, State Zip: LOS ANGELES, CA 90022-4222
Phone: (323) 721-6855 Fax: (323) 721-8631
Record ID: **190713AN**
Service Type: NON
Target Population: 1.10
Expiration Date: 3/31/2019 IMS: No

Program Name: **MINI HOUSE RESIDENTIAL TREATMENT**
Legal Name: JWCH INSTITUTE, INC.
Address: 303 EAST 52ND STREET
City, State Zip: LOS ANGELES, CA 90011
Phone: (323) 813-0200 Fax: (323) 215-0170
Record ID: **190718AN**
Service Type: RES
Resident Capacity: 31
Total Occupancy: 31
Target Population: 1.4
Expiration Date: 4/30/2019 IMS: No

Program Name: **SOLUTION FAMILY RESOURCE CENTER**
Legal Name: JWCH INSTITUTE, INC.
Address: 1218 EAST COMPTON BOULEVARD
City, State Zip: COMPTON, CA 90221
Phone: (310) 608-1505 Fax: (323) 215-0170
Record ID: **190718BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CENTER FOR COMMUNITY HEALTH**
Legal Name: JWCH INSTITUTE, INC.
Address: 522 S SAN PEDRO STREET
City, State Zip: LOS ANGELES, CA 90013
Phone: (213) 486-4050 Fax: (213) 627-4015
Record ID: **190718CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **ALTERNATIVES RECOVERY**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 2530 HYPERION AVENUE
City, State Zip: LOS ANGELES, CA 90027
Phone: (949) 313-5223
Record ID: **190721AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PROMINENCE TREATMENT CENTER**
Legal Name: PROMINENCE CORPORATION
Address: 2150 COLD CANYON ROAD
City, State Zip: CALABASAS, CA 91302
Phone: (818) 591-6869 Fax: (818) 914-6279
Record ID: **190722AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 6/30/2017 IMS: No

Program Name: **MALIBU CANYON REHABILITATION**
Legal Name: PROMINENCE CORPORATION
Address: 4505 LAS VIRGENES ROAD, SUITE 205 & 207
City, State Zip: CALABASAS, CA 91302-1956
Phone: (818) 878-6900 Fax: (818) 878-6902
Record ID: **190722BP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 6/30/2017 IMS: No

Program Name: **PROMINENCE TREATMENT CENTER**
Legal Name: PROMINENCE CORPORATION
Address: 25053 MULHOLLAND HIGHWAY
City, State Zip: CALABASAS, CA 91302
Phone: (818) 225-8102 Fax: (818) 914-6840
Record ID: **190722CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE CONTROL CENTER**
Legal Name: THE CONTROL CENTER, INC.
Address: 8383 WILSHIRE BOULEVARD, SUITE 228
City, State Zip: BEVERLY HILLS, CA 90211-2433
Phone: (310) 271-8700 Fax: (310) 271-8703
Record ID: **190723AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **LA FUENTE HOLLYWOOD TREATMENT CENTER LLC**
Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC
Address: 5718 & 5718 1/2 FOUNTAIN AVENUE
City, State Zip: LOS ANGELES, CA 90028
Phone: (323) 464-2947 Fax: (323) 464-2947
Record ID: **190725AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.10
Expiration Date: 9/30/2017 IMS: No

Program Name: **LA FUENTE HOLLYWOOD OUTPATIENT**
Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC
Address: 1601 NORTH GOWER STREET, SUITE 101
City, State Zip: LOS ANGELES, CA 90028
Phone: (323) 464-2947 Fax: (323) 544-6307
Record ID: **190725BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 12423 DAHLIA AVENUE
City, State Zip: EL MONTE, CA 91732
Phone: (626) 258-0324 Fax: (415) 970-7518
Record ID: **190728AN**
Service Type: RES
Resident Capacity: 72
Total Occupancy: 102
Expiration Date: 8/31/2017 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 2307 WEST 6TH STREET
City, State Zip: LOS ANGELES, CA 90057
Phone: (415) 970-7500
Record ID: **190728BN**
Service Type: RES
Resident Capacity: 200
Total Occupancy: 200
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 145 WEST 22ND STREET
City, State Zip: LOS ANGELES, CA 90007
Phone: (415) 970-7500
Record ID: **190728CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER**
Legal Name: HEALTHRIGHT 360
Address: 2555 E. COLORADO BLVD. SUITE 100-101
City, State Zip: PASADENA, CA 91107
Phone: (626) 577-2261 Fax: (626) 577-2305
Record ID: **190728DN**
Service Type: NON
Target Population: 1.8
Expiration Date: 2/28/2018 IMS: No

Program Name: **PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER, POMONA**
Legal Name: HEALTHRIGHT 360
Address: 831 E. ARROW HIGHWAY
City, State Zip: POMONA, CA 91767
Phone: (909) 398-4383
Record ID: **190728EN**
Service Type: NON
Target Population: 1.8
Expiration Date: 1/31/2018 IMS: No

Program Name: **PROTOTYPES RESOLVE RECOVERY**
Legal Name: HEALTHRIGHT 360
Address: 6109 AFTON PLACE
City, State Zip: LOS ANGELES, CA 90028
Phone: (323) 461-4118 Fax: (323) 461-4119
Record ID: **190728FN**
Service Type: RES-DETOX
Resident Capacity: 34
Total Occupancy: 34
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **PROTOTYPES WOMEN'S CENTER**
Legal Name: HEALTHRIGHT 360
Address: 845 E. ARROW HIGHWAY
City, State Zip: POMONA, CA 91767
Phone: (909) 624-1233
Record ID: **190728GN**
Service Type: RES-DETOX
Resident Capacity: 164
Total Occupancy: 254
Target Population: 1.4
Expiration Date: 7/31/2018 IMS: No

Program Name: **INSPIRE MALIBU**
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.
Address: 30101 AGOURA COURT
SUITE 103
City, State Zip: AGOURA HILLS, CA 91301
Phone: (818) 532-6243 Fax: (818) 532-6244
Record ID: **190729AP**
Service Type: NON-DETOX
Target Population: 1.8
Expiration Date: 10/31/2017 IMS: No

Program Name: **INSPIRE MALIBU**
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.
Address: 3875 KANAN ROAD
City, State Zip: AGOURA HILLS, CA 91301
Phone: (818) 359-3666 Fax: (818) 532-6244
Record ID: **190729BP**
Service Type: RES-DETOX
Resident Capacity: 11
Total Occupancy: 11
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **INSPIRE MALIBU**
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.
Address: 33239 MULHOLLAND HIGHWAY
City, State Zip: MALIBU, CA 90265
Phone: (818) 359-3666 Ext:824 Fax: (818) 532-6244
Record ID: **190729DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **FFC SUBSTANCE ABUSE DISORDER TREATMENT PROGRAM**
Legal Name: FAMILIES FOR CHILDREN INC.
Address: 2504 W. MANCHESTER BOULEVARD
City, State Zip: INGLEWOOD, CA 90305
Phone: (323) 750-5855 Fax: (310) 750-5885
Record ID: **190730AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **PAX HOUSE**
Legal Name: PAX HOUSE, INC.
Address: 324 WAPELLO STREET
City, State Zip: ALTADENA, CA 91001
Phone: (626) 398-3897
Record ID: **190732AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PAX HOUSE**
Legal Name: PAX HOUSE, INC.
Address: 2052 N. LAKE AVENUE, SUITE F
City, State Zip: ALTADENA, CA 91001
Phone: (323) 821-6226 Fax: (626) 243-4425
Record ID: **190732BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CYCLES OF CHANGE RECOVERY SERVICES**
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.
Address: 43858 BEECH AVENUE
City, State Zip: LANCASTER, CA 93534
Phone: (661) 729-8155 Fax: (661) 949-8131
Record ID: **190735AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **CYCLES OF CHANGE II**
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.
Address: 36451 EL CAMINO DRIVE
City, State Zip: PALMDALE, CA 93551
Phone: (818) 489-3779 Fax: (661) 800-4827
Record ID: **190735BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CYCLES OF CHANGE RECOVERY SERVICES**
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.
Address: 1805 WEST AVENUE K, SUITE 202
City, State Zip: LANCASTER, CA 93534
Phone: (661) 948-8390 Fax: (661) 948-8184
Record ID: **190735CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CYCLES OF CHANGE III**
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.
Address: 44210 61ST STREET WEST
City, State Zip: LANCASTER, CA 93536
Phone: (661) 846-2662
Record ID: **190735DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.**
Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.
Address: 5199 E. PACIFIC COAST HIGHWAY, SUITE 330N
City, State Zip: LONG BEACH, CA 90804
Phone: (562) 365-2020 Fax: (562) 239-3135
Record ID: **190736AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SCHARP - OASIS HOUSE**
Legal Name: SOUTHERN CALIFORNIA HEALTH & REHABILITATION PROGRAM
Address: 5201 S. VERMONT AVENUE
City, State Zip: LOS ANGELES, CA 90037
Phone: (323) 751-2677 Fax: (323) 751-0971
Record ID: **190745AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE CANYON AT SANTA MONICA**
Legal Name: THE CANYON AT SANTA MONICA, LLC
Address: 12304 SANTA MONICA BOULEVARD, SUITE #112
City, State Zip: LOS ANGELES, CA 90025
Phone: (424) 832-7368
Record ID: **190746AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **H & H TESTING OUTPATIENT**
Legal Name: H & H TESTING, INC.
Address: 10801 NATIONAL BOULEVARD,
SUITE 251, 420 AND 579
City, State Zip: LOS ANGELES, CA 90064
Phone: (424) 293-2224 Fax: (424) 293-2264
Record ID: **190750AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **MOTIVATIONAL RECOVERY SERVICES, INC.**
Legal Name: MOTIVATIONAL RECOVERY SERVICES, INC.
Address: 2116 S. CENTRAL AVENUE
#2118
City, State Zip: LOS ANGELES, CA 90011
Phone: (213) 493-4664 Fax: (213) 493-4665
Record ID: **190751AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **AVALON MALIBU**
Legal Name: AVALON BY THE SEA, INC.
WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA
Address: 32430 PACIFIC COAST HIGHWAY
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-9111 Fax: (310) 457-3013
Record ID: **190752AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **MALIBU INTEGRATIVE RECOVERY**
Legal Name: AVALON BY THE SEA, INC.
WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA
Address: 29350 PACIFIC COAST HIGHWAY, #9 AND 11
City, State Zip: MALIBU, CA 90265
Phone: (424) 235-2229 Fax: (424) 235-2230
Record ID: **190752CP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **HOPE ALIVE COUNSELING CENTERS, LLC**
Legal Name: HOPE ALIVE COUNSELING CENTERS, LLC
Address: 4242 LAVINIA AVENUE
City, State Zip: LYNWOOD, CA 90262
Phone: (310) 710-2280
Record ID: **190753AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **HOPE ALIVE COUNSELING CENTERS, LLC**
Legal Name: HOPE ALIVE COUNSELING CENTERS, LLC
Address: 11157 ATLANTIC AVENUE
City, State Zip: LYNWOOD, CA 90262
Phone: (310) 710-2280
Record ID: **190753BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM**
Legal Name: TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM, INC.
Address: 3756 SANTA ROSALIA DRIVE, SUITE 617
City, State Zip: LOS ANGELES, CA 90008
Phone: (323) 810-3153
Record ID: **190758AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **REBOS**
Legal Name: LIVING REBOS, LLC
Address: 1772 S ROBERTSON BOULEVARD
City, State Zip: LOS ANGELES, CA 90035
Phone: (310) 694-5590 Fax: (310) 694-3278
Record ID: **190759AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **VISIONS TREATMENT CENTERS, LLC**
Legal Name: VISIONS TREATMENT CENTERS, LLC
Address: 119 BARRINGTON PLACE AND 115 BARRINGTON WALK
City, State Zip: LOS ANGELES, CA 90049
Phone: (310) 476-0033 Fax: (310) 694-3278
Record ID: **190760AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SOVEREIGN HEALTH OF CALIFORNIA**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 6167 BRISTOL PARKWAY,
SUITE 100
City, State Zip: CULVER CITY, CA 90230
Phone: (424) 207-2220 Fax: (949) 276-5183
Record ID: **190762AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SOVEREIGN HEALTH OF LOS ANGELES I**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 12832 SHORT AVENUE
City, State Zip: LOS ANGELES, CA 90066
Phone: (949) 923-7895
Record ID: **190762BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ARTEMIS HILL RECOVERY**
Legal Name: ARTEMIS HILL RECOVERY INC.
Address: 1858 LEES AVENUE
City, State Zip: LONG BEACH, CA 90815
Phone: (562) 431-8459
Record ID: **190763AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 11/30/2018 IMS: No

Program Name: **THE DISCOVERY HOUSE RESIDENTIAL TREATMENT**
Legal Name: THE DISCOVERY HOUSE, LLC
Address: 6957 ENFIELD AVENUE AND
6956 BERTRAND AVENUE AND 6953 ENFIELD AVENUE
City, State Zip: RESEDA, CA 91335
Phone: (818) 654-4907 Fax: (818) 401-9387
Record ID: **190764AP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **TDH FAMILY CONSULTING OUTPATIENT HEALTHCARE SERVICES**
Legal Name: THE DISCOVERY HOUSE, LLC
Address: 17635 VANOWEN STREET
City, State Zip: VAN NUYS, CA 91406
Phone: (805) 991-2002 Fax: (818) 401-9387
Record ID: **190764DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **PROGRESSIONS TLC, LLC**
Legal Name: PROGRESSIONS TLC, LLC
Address: 5336 WINNETKA AVENUE
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (818) 324-2507 Fax: (888) 310-4278
Record ID: **190768AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **ELIJAH'S HOUSE TREATMENT CENTER**
Legal Name: ELIJAH'S HOUSE TX CORP.
Address: 1617 ASBURY DRIVE
City, State Zip: PASADENA, CA 91104
Phone: (626) 394-9565 Fax: (626) 696-3242
Record ID: **190769AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.**
Legal Name: HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.
Address: 1249 S. LA BREA AVENUE
City, State Zip: LOS ANGELES, CA 90019
Phone: (323) 592-3722 Fax: (323) 931-4748
Record ID: **190770AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE BEACH HOUSE**
Legal Name: JAMES & BENTZ, INC.
Address: 31450 BROAD BEACH ROAD
City, State Zip: MALIBU, CA 90265
Phone: (424) 644-0808 Fax: (424) 644-0990
Record ID: **190773AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE BEACH HOUSE CENTER FOR WELLNESS**
Legal Name: JAMES & BENTZ, INC.
Address: 22601 PACIFIC COAST HIGHWAY SUITE 235
City, State Zip: MALIBU, CA 90265
Phone: (310) 317-0228 Fax: (310) 317-0312
Record ID: **190773BP**
Service Type: NON-DETOX
Target Population: 1.8
Expiration Date: 5/31/2019 IMS: No

Program Name: **EXODUS RECOVERY INTEGRATED CLINIC**
Legal Name: EXODUS RECOVERY, INC.
Address: 1920 MARENGO STREET
City, State Zip: LOS ANGELES, CA 90033
Phone: (310) 945-3350 Fax: (310) 840-7023
Record ID: **190774AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **HARMONY DETOX CENTER**
Legal Name: HARMONY HOLLYWOOD LLC
Address: 826 NORTH MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90029
Phone: (323) 375-5356 Fax: (323) 454-4598
Record ID: **190775BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **HOLLYWOOD DETOX CENTER**
Legal Name: HARMONY HOLLYWOOD LLC
Address: 830 & 832 NORTH MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90029
Phone: (323) 375-5356 Fax: (323) 454-4598
Record ID: **190775CP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **1736 FAMILY CRISIS CENTER**
Legal Name: 1736 FAMILY CRISIS CENTER
Address: 21707 HAWTHORNE BOULEVARD, SUITE 300
City, State Zip: TORRANCE, CA 90503
Phone: (310) 543-9900
Record ID: **190777AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **1736 FAMILY CRISIS CENTER**
Legal Name: 1736 FAMILY CRISIS CENTER
Address: 2116 ARLINGTON AVENUE, SUITE 200
City, State Zip: LOS ANGELES, CA 90018
Phone: (310) 543-9900
Record ID: **190777BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 20138 ELKWOOD STREET
City, State Zip: WINNETKA, CA 91306-2312
Phone: (818) 626-8704 Fax: (707) 202-0622
Record ID: **190778AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **KOOL LIVING, INC.**
Legal Name: KOOL LIVING, INC.
Address: 226421 CROWN VALLEY PARKWAY, SUITE 200
City, State Zip: MISSION VIEGO, CA 95691
Phone: (951) 427-4807 Fax: (747) 202-0622
Record ID: **190778BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 18960 KESWICK STREET
City, State Zip: RESEDA, CA 91335
Phone: (818) 862-9180 Fax: (747) 202-0622
Record ID: **190778CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 7735 WINNETKA AVENUE
City, State Zip: WINNETKA, CA 91306
Phone: (951) 427-4807 Fax: (747) 202-0622
Record ID: **190778DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CORNERSTONE OUTPATIENT TREATMENT PROGRAM**
Legal Name: SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CENTER, INCORPORATED
Address: 5950 CEDROS STREET
City, State Zip: VAN NUYS, CA 91411
Phone: (818) 901-4836 Fax: (818) 376-0044
Record ID: **190780AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **NATIONWIDE DRUG AND ALCOHOL COUNSELING, INC.**
Legal Name: NATIONWIDE DRUG AND ALCOHOL COUNSELING, INC.
Address: 1040 ELM AVENUE, SUITE 310
City, State Zip: LONG BEACH, CA 90813
Phone: (562) 901-6880
Record ID: **190784AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **COMPATIOR, INC.**
Legal Name: COMPATIOR, INC.
Address: 9637 CALIFORNIA AVENUE
City, State Zip: SOUTH GATE, CA 90280
Phone: (323) 378-2009
Record ID: **190785AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **ACADIA MALIBU**
Legal Name: ACADIA MALIBU, INC.
Address: 5922 PHILIP AVENUE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-4417 Fax: (310) 494-0442
Record ID: **190786AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ALO HOUSE RECOVERY CENTERS**
Legal Name: ACADIA MALIBU, INC.
Address: 28955 PACIFIC COAST HIGHWAY
#200
City, State Zip: MALIBU, CA 90265
Phone: (310) 975-5344 Fax: (310) 494-0442
Record ID: **190786CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **ACADIA MALIBU, INC.**
Legal Name: ACADIA MALIBU, INC.
Address: 28901 SELFRIDGE DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 975-5344 Fax: (310) 494-0442
Record ID: **190786DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ALO HOUSE RECOVERY CENTERS OUTPATIENT PROGRAM**
Legal Name: ACADIA MALIBU, INC.
Address: 3042 ROWENA AVENUE
City, State Zip: LOS ANGELES, CA 90039
Phone: (310) 975-5344
Record ID: **190786EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BREATHE LIFE HEALING CENTER**
Legal Name: BREATHE WEHO TREATMENT SERVICES LLC
Address: 8730 WEST SUNSET BOULEVARD EAST TOWER, 5TH FLOOR
City, State Zip: WEST HOLLYWOOD, CA 90069
Phone: (800) 929-5904 Fax: (800) 763-1597
Record ID: **190788AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BREATHE WEHO TREATMENT SERVICES**
Legal Name: BREATHE WEHO TREATMENT SERVICES LLC
Address: 8020 JOVENITA CANYON DRIVE
City, State Zip: LOS ANGELES, CA 90046
Phone: (323) 997-4409 Fax: (310) 659-9088
Record ID: **190788BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER**
Legal Name: REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER
Address: 716 W. COMPTON BOULEVARD
City, State Zip: COMPTON, CA 90220
Phone: (310) 663-0789
Record ID: **190793AN**
Service Type: NON
Target Population: 1.8
Expiration Date: 6/30/2018 IMS: No

Program Name: **GROWTH EXTENDED, INC.**
Legal Name: GROWTH EXTENDED, INC.
Address: 15743 COVELLO STREET
City, State Zip: LAKE BALBOA, CA 91406
Phone: (888) 447-1116 Ext:8 Fax: (888) 751-6166
Record ID: **190794AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **DESIGN FOR CHANGE**
Legal Name: DESIGN FOR CHANGE
Address: 1066 EAST AVENUE J &
44319 11TH STREET EAST
City, State Zip: LANCASTER, CA 93535
Phone: (661) 942-1026 Fax: (661) 349-4737
Record ID: **190795AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **DESIGN FOR CHANGE OUTPATIENT**
Legal Name: DESIGN FOR CHANGE
Address: 44501 16TH STREET WEST,
SUITE 101
City, State Zip: LANCASTER, CA 93534
Phone: (661) 945-2317 Fax: (661) 945-5750
Record ID: **190795BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **DESIGN FOR CHANGE II**
Legal Name: DESIGN FOR CHANGE
Address: 40516 MILAN DRIVE
City, State Zip: PALMDALE, CA 93551
Phone: (661) 947-9967 Fax: (661) 526-4383
Record ID: **190795CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **RENAISSANCE SOUTH LA, INC.**
Legal Name: RENAISSANCE SOUTH LA, INC.
Address: 19401 S. VERMONT AVENUE, SUITE B-102 & C-100
City, State Zip: TORRANCE, CA 90502
Phone: (310) 919-5500 Fax: (310) 756-6575
Record ID: **190796AN**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CAREFORWARD HEALTH**
Legal Name: CAREFORWARD HEALTH, LLC
Address: 9730 WILSHIRE BOULEVARD, SUITE 109
City, State Zip: BEVERLY HILLS, CA 90212
Phone: (310) 463-5521 Fax: (424) 201-2696
Record ID: **190797AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **NEW START DAY TREATMENT AND I.O.P.PROGRAM**
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC
Address: 10401 VENICE BOULEVARD, SUITE 250
City, State Zip: LOS ANGELES, CA 90034
Phone: (310) 636-1819 Fax: (310) 287-1949
Record ID: **190798AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **A NEW START TREATMENT AND RECOVERY CENTER, LLC**
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC
Address: 11241, 11243 & 11245 LUCERNE AVENUE
City, State Zip: LOS ANGELES, CA 90230
Phone: (310) 741-1018 Fax: (310) 202-6410
Record ID: **190798CP**
Service Type: RES-DETOX
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **A NEW START TREATMENT AND RECOVERY CENTER, LLC**
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC
Address: 4111, 4113, 4115, 4117 MILTON AVENUE
City, State Zip: CULVER CITY, CA 90232
Phone: (310) 287-1919 Fax: (310) 287-1949
Record ID: **190798DP**
Service Type: RES-DETOX
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **VALLEY HOPE OUTPATIENT**
Legal Name: FERNANDO RODRIGUEZ
Address: 14416 FRIAR STREET, SUITE C
City, State Zip: VAN NUYS, CA 91401
Phone: (818) 902-1100 Fax: (818) 902-1300
Record ID: **190803AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE VILLAGE FAMILY SERVICES**
Legal Name: THE VILLAGE FAMILY SERVICES, INC.
Address: 6736 LAUREL CANYON BOULEVARD, SUITE 200
City, State Zip: NORTH HOLLYWOOD, CA 91606
Phone: (818) 755-8786 Fax: (818) 755-8789
Record ID: **190804AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **THE VILLAGE FAMILY SERVICES ALCOHOL AND SUBSTANCE USE TREATMENT PROGRAM**
Legal Name: THE VILLAGE FAMILY SERVICES, INC.
Address: 6801 COLDWATER CANYON AVENUE,
E1
City, State Zip: NORTH HOLLYWOOD, CA 91605
Phone: (818) 755-8786 Fax: (818) 755-8789
Record ID: **190804BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **CENTRAL CITY COMMUNITY HEALTH CENTER, INC.**
Legal Name: CENTRAL CITY COMMUNITY HEALTH CENTER, INC.
Address: 5970 S. CENTRAL AVENUE
City, State Zip: LOS ANGELES, CA 90022
Phone: (323) 724-0019 Fax: (323) 724-3539
Record ID: **190806AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE VILLA TREATMENT CENTER**
Legal Name: THE VILLA TREATMENT CENTER, LLC
Address: 5051 HOOD DRIVE
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (747) 226-0187 Fax: (818) 975-5414
Record ID: **190807AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **BIENESTAR DRUG TREATMENT PROGRAM**
Legal Name: BIENESTAR HUMAN SERVICES, INC.
Address: 8134 VAN NUYS BOULEVARD, SUITE 200
City, State Zip: PANORAMA CITY, CA 91402
Phone: (818) 908-3820 Fax: (818) 908-3844
Record ID: **190808AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **BLVD CENTERS**
Legal Name: BLVD CENTERS, INC.
Address: 1776 NORTH HIGHLAND AVENUE
City, State Zip: LOS ANGELES, CA 90028
Phone: (424) 281-6147 Fax: (213) 262-2082
Record ID: **190810AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 6/30/2018 IMS: No

Program Name: **BLVD CENTERS**
Legal Name: BLVD CENTERS, INC.
Address: 1608 SAWTELLE BOULEVARD
City, State Zip: LOS ANGELES, CA 90025
Phone: (425) 285-8054
Record ID: **190810BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **FREEHAB**
Legal Name: THE TEEN PROJECT, INC.
Address: 8140 SUNLAND BOULEVARD
City, State Zip: SUN VALLEY, CA 91352
Phone: (949) 283-1260 Fax: (818) 582-8836
Record ID: **190811AN**
Service Type: RES
Resident Capacity: 74
Total Occupancy: 74
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **LOS ANGELES LGBT CENTER**
Legal Name: LOS ANGELES LGBT CENTER
Address: 1625 N. SCHRADER BOULEVARD, SUITE 106, 114K, 202A, 402 & 405
City, State Zip: LOS ANGELES, CA 90028
Phone: (323) 993-7448 Fax: (323) 308-4041
Record ID: **190812AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **SOBER STAGES INC. OUTPATIENT PROGRAM**
Legal Name: SOBER STAGES INCORPORATED OUTPATIENT PROGRAM
Address: 19562 VENTURA BOULEVARD, SUITE 233
City, State Zip: TARZANA, CA 91356
Phone: (818) 705-6363 Fax: (818) 705-4449
Record ID: **190813AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CLIFFSIDE MALIBU OUTPATIENT SERVICES**
Legal Name: CLIFFSIDE MALIBU OUTPATIENT SERVICES
Address: 28990 WEST PACIFIC COAST HIGHWAY, SUITE 203
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-3999 Fax: (310) 457-6047
Record ID: **190815AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 9/30/2018 IMS: No

Program Name: **HAVEN HOUSE**
Legal Name: HAVEN HOUSE, INC.
Address: 2252 HILLSBORO AVENUE
City, State Zip: LOS ANGELES, CA 90034
Phone: (310) 876-0988
Record ID: **190816AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ROOTS THROUGH RECOVERY**
Legal Name: ROOTS, INC.
Address: 3939 ATLANTIC AVENUE, SUITE # 102
City, State Zip: LONG BEACH, CA 90807
Phone: (562) 473-0827
Record ID: **190817AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **A STEP IN THE RIGHT DIRECTION INTENSIVE OUTPATIENT PROGRAM**
Legal Name: A STEP IN THE RIGHT DIRECTION
Address: 9535 RESEDA BOULEVARD, SUITE 300
City, State Zip: NORTHRIDGE, CA 91324
Phone: (818) 231-1400 Fax: (747) 224-0003
Record ID: **190818AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **NEW DIRECTIONS ALCOHOL & DRUG SERVICES, INC.**
Legal Name: NEW DIRECTIONS ALCOHOL AND DRUG SERVICES, INC.
Address: 1331 WEST AVENUE J, SUITE 206
City, State Zip: LANCASTER, CA 93534
Phone: (661) 942-2255 Fax: (661) 949-1480
Record ID: **190819AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **LAT INTENSIVE OUTPATIENT PROGRAMS, INC.**
Legal Name: LAT INTENSIVE OUTPATIENT PROGRAMS INC.
Address: 11936 JEFFERSON BOULEVARD, SUITE D
City, State Zip: CULVER CITY, CA 90230
Phone: (310) 572-7000 Fax: (310) 572-7003
Record ID: **190820AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **CLUB SOBA**
Legal Name: SOBA CHEVIOT HILLS LLC
Address: 3384 MOTOR AVENUE
City, State Zip: LOS ANGELES, CA 90034-3712
Phone: (310) 457-5250
Record ID: **190822AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **CLUB SOBA**
Legal Name: SOBA CHEVIOT HILLS LLC
Address: 3142 PATRICIA AVENUE
City, State Zip: LOS ANGELES, CA 90064-4718
Phone: (424) 298-8353 Fax: (310) 919-3103
Record ID: **190822BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CLUB SOBA**
Legal Name: SOBA CHEVIOT HILLS LLC
Address: 3818 DUNN DRIVE
City, State Zip: CULVER CITY, CA 90232
Phone: (310) 425-8139 Fax: (310) 919-3103
Record ID: **190822CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CROSSROADS RECOVERY CENTERS**
Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK
Address: 11503 GLADHILL ROAD
City, State Zip: WHITTIER, CA 90604
Phone: (877) 293-0722 Fax: (562) 393-4442
Record ID: **190824AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MALIBU BALANCE DAY TREATMENT, INC.**
Legal Name: MALIBU BALANCE DAY TREATMENT INC.
Address: 4505 LAS VIRGENES ROAD, SUITE 200, 201
City, State Zip: CALABASAS, CA 91302
Phone: (818) 880-0800
Record ID: **190826AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **WESTSIDE TREATMENT**
Legal Name: WESTSIDE TREATMENT, LLC
Address: 11150 W. OLYMPIC BOULEVARD, #760
City, State Zip: LOS ANGELES, CA 90064
Phone: (424) 835-6183 Fax: (310) 943-3883
Record ID: **190827AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTERNATIVES BEHAVIORAL HEALTH, LLC**
Legal Name: ALTERNATIVES BEHAVIORAL HEALTH, LLC
Address: 822 S. ROBERTSON BOULEVARD, SUITE 300
City, State Zip: LOS ANGELES, CA 90035
Phone: (888) 532-9137 Fax: (888) 739-6925
Record ID: **190829AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SEA CHANGE SANTA MONICA**
Legal Name: SEA CHANGE SANTA MONICA, L.P.
Address: 1831 WILSHIRE BOULEVARD, #C
City, State Zip: SANTA MONICA, CA 90403
Phone: (424) 268-4322 Fax: (310) 998-8696
Record ID: **190831AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **SEA CHANGE SANTA MONICA**
Legal Name: SEA CHANGE SANTA MONICA, L.P.
Address: 1051 PRINCETON STREET
City, State Zip: SANTA MONICA, CA 90403
Phone: (888) 823-3310 Fax: (323) 843-9800
Record ID: **190831BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: Yes

Program Name: **AWAKENINGS**
Legal Name: AGOURA NEUROFEEDBACK, INC.
Address: 28720 ROADSIDE DRIVE, #200
City, State Zip: AGOURA HILLS, CA 91301
Phone: (310) 848-5418 Fax: (858) 348-8097
Record ID: **190833AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HILLS TREATMENT CORP.**
Legal Name: MALIBU HILLS TREATMENT CORP.
Address: 265 WESTLAKE BOULEVARD
City, State Zip: MALIBU, CA 90265
Phone: (818) 706-9000 Fax: (818) 706-9009
Record ID: **190834BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MALIBU HILLS TREATMENT CORP.**
Legal Name: MALIBU HILLS TREATMENT CORP.
Address: 415 WESTLAKE BOULEVARD
City, State Zip: MALIBU, CA 90265
Phone: (818) 706-9000 Fax: (818) 706-9009
Record ID: **190834CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **PASSAGES MALIBU PHP LLC.**
Legal Name: PASSAGES MALIBU PHP, LLC
Address: 1728 ABBOT KINNEY BOULEVARD, #103
City, State Zip: VENICE, CA 90291
Phone: (310) 595-5831 Fax: (310) 464-6904
Record ID: **190835AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **REVIVE DETOX**
Legal Name: REVIVE DETOX
Address: 360 N. VISTA STREET
City, State Zip: LOS ANGELES, CA 90036
Phone: (323) 452-0921 Fax: (323) 544-6079
Record ID: **190836AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HILLSMAN CENTER**
Legal Name: LMPG FOUNDATION, LLC
Address: 1440 E. 41ST STREET
City, State Zip: LOS ANGELES, CA 90011
Phone: (323) 231-2585 Fax: (323) 231-8771
Record ID: **190838AP**
Service Type: RES
Resident Capacity: 34
Total Occupancy: 38
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **A NEW SOLUTION**
Legal Name: CHANGING STEPS NETWORK INC.
Address: 942 W. 12TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (323) 202-8432
Record ID: **190841BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **A NEW SOLUTION**
Legal Name: CHANGING STEPS NETWORK INC.
Address: 9339 LOUISE AVENUE
City, State Zip: NORTHRIDGE, CA 91325
Phone: (818) 362-0986
Record ID: **190841CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **A NEW SOLUTION**
Legal Name: CHANGING STEPS NETWORK INC.
Address: 14540 HAMLIN STREET, SUITE I
City, State Zip: VAN NUYS, CA 91411
Phone: (818) 477-2874
Record ID: **190841DP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **DESTINATIONS TO RECOVERY**
Legal Name: DESTINATIONS TO RECOVERY, LLC
Address: 21051 WARNER CENTER LANE, SUITE 220
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (818) 737-2221 Fax: (310) 728-2125
Record ID: **190842AP**
Service Type: NON
Target Population: 1.4
Expiration Date: 8/31/2017 IMS: No

Program Name: **DESTINATIONS TO RECOVERY**
Legal Name: DESTINATIONS TO RECOVERY, LLC
Address: 6222 WILSHIRE BOULEVARD,
#313
City, State Zip: LOS ANGELES, CA 90048
Phone: (818) 737-2221 Fax: (818) 737-2222
Record ID: **190842BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **VALLEY RECOVERY TREATMENT**
Legal Name: CALIFORNIA RECOVERY CENTERS LLC
Address: 23304 HAPPY VALLEY DRIVE
City, State Zip: NEWHALL, CA 91321
Phone: (818) 404-6505 Fax: (818) 348-4401
Record ID: **190843AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **NOVA VITAE TREATMENT CENTER**
Legal Name: NOVA VITAE TREATMENT CENTER
Address: 16670 MOORPARK STREET,
#B
City, State Zip: ENCINO, CA 91436
Phone: (818) 422-3442
Record ID: **190844AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **SOVEREIGN HEALTH OF LOS ANGELES II**
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.
Address: 5919 W. 74TH STREET
City, State Zip: LOS ANGELES, CA 90045
Phone: (424) 227-2783
Record ID: **190845AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **FOREFRONT HEALTH OF BEVERLY HILLS**
Legal Name: SOUTHERN CALIFORNIA RECOVERY, LLC
Address: 1771 SUMMITRIDGE DRIVE
City, State Zip: BEVERLY HILLS, CA 90210
Phone: (561) 578-8600 Fax: (561) 578-8601
Record ID: **190848AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: Yes

Program Name: **ANGEL WINGS RECOVERY OF SOUTH BAY**
Legal Name: ANGEL WINGS RECOVERY OF SOUTHBAY
Address: 3841 W 130TH STREET
City, State Zip: HAWTHORNE, CA 90250-0000
Phone: (310) 863-7446 Fax: (310) 863-7445
Record ID: **190849BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CLIFFSIDE MALIBU 3**
Legal Name: CLIFFSIDE MALIBU 3
Address: 30010 ANDROMEDA LANE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-3460 Fax: (424) 781-4708
Record ID: **190850AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.**
Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.
Address: 18134 CHASE STREET
City, State Zip: NORTHRIDGE, CA 91325
Phone: (818) 775-9431 Fax: (828) 626-9794
Record ID: **190851AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.**
Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.
Address: 9529 CORBIN AVENUE
City, State Zip: NORTHRIDGE, CA 91324
Phone: (818) 554-5600 Fax: (818) 626-9749
Record ID: **190851BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **ALTA TREATMENT CENTERS, INC.**
Legal Name: ALTA CENTERS, INC.
Address: 5435 NORTH BALBOA BOULEVARD, SUITE 103
City, State Zip: ENCINO, CA 91316
Phone: (844) 663-7465
Record ID: **190852AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **ALTA CENTERS INC.**
Legal Name: ALTA CENTERS, INC.
Address: 6100 RODGERTON DRIVE
City, State Zip: LOS ANGELES, CA 90068
Phone: (818) 616-7443
Record ID: **190852CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **REFUGE RECOVERY CENTERS**
Legal Name: REFUGE RECOVERY HOUSE, LLC
Address: 4302 W. MELROSE AVENUE, SUITE 5C
City, State Zip: LOS ANGELES, CA 90029-3511
Phone: (363) 660-0735 Fax: (866) 537-7317
Record ID: **190853AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **REFUGE RECOVERY CENTERS**
Legal Name: REFUGE RECOVERY HOUSE, LLC
Address: 1007 MANZANITA STREET
City, State Zip: LOS ANGELES, CA 90029-3511
Phone: (323) 787-7077 Fax: (866) 537-7317
Record ID: **190853BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **LAUNCH**
Legal Name: MD HOME DETOX CONSULTING, INC
Address: 150 S. BARRINGTON AVENUE, SUITE 8-10
City, State Zip: BRENTWOOD, CA 90049
Phone: (310) 779-4476
Record ID: **190855AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SERVICE INDUSTRIES OUTPATIENT SERVICES**
Legal Name: SERVICE INDUSTRIES, INC.
Address: 2500 OVERLAND AVENUE, #D
City, State Zip: LOS ANGELES, CA 90064-3333
Phone: (323) 477-2130 Fax: (310) 253-9801
Record ID: **190856AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ACCESS MALIBU, INC.**
Legal Name: ACCESS MALIBU, INC.
Address: 5247 HORIZON DRIVE
City, State Zip: MALIBU, CA 90265-4215
Phone: (831) 236-1169 Fax: (424) 781-4705
Record ID: **190857AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **RESTORE HEALTH AND WELLNESS CENTER, LLC**
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC
Address: 16530 VENTURA BOULEVARD, SUITE 200
City, State Zip: ENCINO, CA 91436
Phone: (888) 519-1570 Fax: (818) 574-3990
Record ID: **190858AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **RESTORE HEALTH AND WELLNESS CENTER, LLC**
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC
Address: 10821 BAILE AVENUE
City, State Zip: CHATSWORTH, CA 91311-8405
Phone: (954) 376-3915 Fax: (818) 574-3990
Record ID: **190858BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/1/2018 IMS: No

Program Name: **FIRSTPOINT BEHAVIORAL AND ADDICTION COUNSELING, INC.**
Legal Name: FIRSTPOINT BEHAVIORAL AND ADDICTION COUNSELING, INC.
Address: 22330 HAWTHORNE BOULEVARD, SUITE 240
City, State Zip: TORRANCE, CA 90505
Phone: (610) 617-5912 Fax: (310) 317-7505
Record ID: **190860AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **LOS ANGELES DETOX LLC**
Legal Name: LOS ANGELES DETOX LLC
Address: 522 N. LARCHMONT BOULEVARD
City, State Zip: LOS ANGELES, CA 90004
Phone: (323) 450-2205
Record ID: **190861AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **1 METHOD CENTER**
Legal Name: 1 METHOD, LLC
Address: 10254 BANNOCKBURN DRIVE
City, State Zip: LOS ANGELES, CA 90064
Phone: (310) 837-7330 Fax: (310) 837-7376
Record ID: **190862AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **1 METHOD CENTER**
Legal Name: 1 METHOD, LLC
Address: 1964 WESTWOOD BLVD. #400
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 837-7330
Record ID: **190862BP**
Service Type: NON
Target Population: 1.8
Expiration Date: 7/31/2019 IMS: No

Program Name: **CLEAR RECOVERY CENTER**
Legal Name: CLEAR INC.
Address: 201 HERONDO STREET
City, State Zip: REDONDO BEACH, CA 90277
Phone: (310) 346-2676 Fax: (866) 899-1638
Record ID: **190863AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **CLEAR RECOVERY CENTER**
Legal Name: CLEAR INC.
Address: 515 N. SEPULVEDA BOULEVARD,
SUITE B
City, State Zip: MANHATTAN BEACH, CA 90266
Phone: (877) 799-1985 Fax: (866) 899-1638
Record ID: **190863BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **BETTY FORD CENTER - WEST LOS ANGELES**
Legal Name: HAZELDEN BETTY FORD FOUNDATION
Address: 10700 SANTA MONICA BOULEVARD, SUITE 310
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 307-7053 Fax: (310) 446-1818
Record ID: **190864AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ALTADENA CENTER**
Legal Name: SHIRLEY BENNETT
Address: 3025 NORTH LINCOLN AVENUE
City, State Zip: ALTADENA, CA 91001
Phone: (626) 765-6905 Fax: (626) 765-6617
Record ID: **190865AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **JAHI FAMILY SERVICES, INC.**
Legal Name: JAHI FAMILY SERVICES, INC.
Address: 9001 S. VERMONT STREET
City, State Zip: LOS ANGELES, CA 90044
Phone: (323) 779-5244 Fax: (929) 757-5244
Record ID: **190866AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **LAKE HUGHES RECOVERY**
Legal Name: LAKE HUGHES RECOVERY
Address: 48745 THREE POINTS ROAD
City, State Zip: LAKE HUGHES, CA 93532
Phone: (661) 731-3171
Record ID: **190867AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **SHELBY RECOVERY SERVICES INC.**
Legal Name: SHELBY RECOVERY SERVICES INC.
Address: 279 E. GREENHAVEN STREET
City, State Zip: COVINA, CA 91722
Phone: (310) 877-8557
Record ID: **190868AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **MALIBU DETOX**
Legal Name: MALIBU DETOX, LLC
Address: 22766 SADDLE PEAK ROAD
City, State Zip: TOPANGA, CA 90290
Phone: (818) 208-5695 Fax: (310) 919-3185
Record ID: **190869AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **MALIBU DETOX**
Legal Name: MALIBU DETOX, LLC
Address: 21965 SADDLE PEAK ROAD
City, State Zip: TOPANGA, CA 90290
Phone: (310) 958-4692 Fax: (310) 919-3185
Record ID: **190869BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE ARROYOS DAY TREATMENT PROGRAM**
Legal Name: THE ARROYOS, INC.
Address: 1 WEST CALIFORNIA BOULEVARD, SUITE 122, 221 & 321
City, State Zip: PASADENA, CA 91105
Phone: (877) 884-8272 Fax: (626) 628-3177
Record ID: **190870AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **THRIVE TREATMENT**
Legal Name: THRIVE TREATMENT, LLC
Address: 3101 OCEAN PARK BOULEVARD, SUITE 302 & 309
City, State Zip: SANTA MONICA, CA 90405
Phone: (888) 975-8474
Record ID: **190871AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **VALLEY DETOX AND REHABILITATION, LLC**
Legal Name: VALLEY DETOX AND REHABILITATION
Address: 14000 VALERIO STREET
City, State Zip: VAN NUYS, CA 91405
Phone: (323) 350-4064 Fax: (323) 417-4706
Record ID: **190872AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MIRACLES IN ACTION**
Legal Name: MIRACLES IN ACTION, LLC
Address: 290 E VERDUGO AVENUE, #105
City, State Zip: BURBANK, CA 91502
Phone: (818) 429-9103
Record ID: **190873AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ELEVATIONS**
Legal Name: ELEVATION BEHAVIORAL HEALTH LLC
Address: 30065 TRIUNFO DRIVE
City, State Zip: AGOURA HILLS, CA 91301
Phone: (818) 575-7201 Fax: (818) 575-7201
Record ID: **190874AP**
Service Type: RES-DETOX
Resident Capacity: 11
Total Occupancy: 11
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **DESTINY RECOVERY CENTER LLC**
Legal Name: DESTINY RECOVERY CENTER, LLC
Address: 23301 BESSEMER STREET
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (310) 738-0008
Record ID: **190875AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **CALABASAS RESIDENTIAL**
Legal Name: PARK MIRAMAR 24650 LLC
Address: 24650 PARK MIRAMAR
City, State Zip: CALABASAS, CA 91302
Phone: (818) 223-9009 Fax: (818) 223-8999
Record ID: **190876AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CALABASAS OUTPATIENT**
Legal Name: PARK MIRAMAR 24650 LLC
Address: 23951 CRAFTSMAN ROAD,
BUILDING B
City, State Zip: CALABASAS, CA 91302
Phone: (818) 535-5601
Record ID: **190876BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **HARMONY PLACE**
Legal Name: JMG INVESTMENTS, INC.
Address: 23041-A HATTERAS STREET
City, State Zip: WOODLAND HILLS, CA 91367-4236
Phone: (818) 796-4369 Fax: (818) 914-4440
Record ID: **190879AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: Yes

Program Name: **HARMONY PLACE**
Legal Name: JMG INVESTMENTS, INC.
Address: 23041 HATTERAS STREET
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (818) 796-4369 Fax: (818) 914-4440
Record ID: **190879BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: Yes

Program Name: **SEMPRE FAMIGLIA LLC**
Legal Name: SEMPRE FAMIGLIA LLC
Address: 10447 LARAMIE AVENUE
City, State Zip: CHATSWORTH, CA 91311
Phone: (818) 447-2458
Record ID: **190880AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FAITH RECOVERY**
Legal Name: FAITH RECOVERY, INC.
Address: 2211 PALO VERDE AVENUE, SUITE C
City, State Zip: LONG BEACH, CA 90815
Phone: (562) 881-2322 Fax: (562) 430-2250
Record ID: **190881AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOBER COLLEGE**
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC
Address: 6022 VARIEL AVENUE
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (818) 274-0304 Fax: (818) 274-0309
Record ID: **190883AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **SOBER COLLEGE**
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC
Address: 22401 OXNARD STREET
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (818) 415-3456 Fax: (818) 301-1935
Record ID: **190883BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **SOBER COLLEGE**
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC
Address: 8546 KEOKUK AVENUE
City, State Zip: WINNETKA, CA 91306
Phone: (747) 302-3763 Fax: (818) 301-1935
Record ID: **190883CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: Yes

Program Name: **CROSSROAD TRANSITIONAL, INC**
Legal Name: CROSSROAD TRANSITIONAL, INC
Address: 19646 BALLINGER STREET
City, State Zip: NORTHRIDGE, CA 91324
Phone: (818) 482-0175
Record ID: **190884AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC.
Address: 1243 7TH STREET, SUITE B AND C
City, State Zip: SANTA MONICA, CA 90401
Phone: (424) 231-2420
Record ID: **190886AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **WISDOM OUTPATIENT CENTER**
Legal Name: WISDOM TREATMENT, LLC
Address: 3031 N. SAN FERNANDO BLVD, SUITE 100
City, State Zip: BURBANK, CA 91505
Phone: (832) 312-9611 Fax: (818) 861-7527
Record ID: **190887AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **ABOUT FACE: DVIP**
Legal Name: ABOUT FACE: DVIP, INC.
Address: 3407 W 6TH STREET #700
City, State Zip: LOS ANGELES, CA 90020
Phone: (213) 384-7084 Fax: (213) 384-7653
Record ID: **190888AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **PEGGY ALBRECHT FRIENDLY HOUSE**
Legal Name: FRIENDLY HAND FOUNDATION
Address: 347 S NORMANDIE AVENUE
City, State Zip: LOS ANGELES, CA 90020-3167
Phone: (213) 389-9964 Fax: (213) 389-8812
Record ID: **190890AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **SANCTUARY TREATMENT CENTER**
Legal Name: SANCTUARY TREATMENT CENTER INC.
Address: 4815 WOODLEY AVENUE
City, State Zip: ENCINO, CA 91436
Phone: (408) 836-3698
Record ID: **190891AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **VALLEY DETOX CENTER**
Legal Name: ACTIVE RECOVERY SOLUTIONS, LLC
Address: 15120 AND 15114 VOSE STREET
City, State Zip: VAN NUYS, CA 91405
Phone: (818) 616-1939 Fax: (424) 343-0011
Record ID: **190892AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **EXIS**
Legal Name: EXIS RECOVERY INC.
Address: 2001 S. BARRINGTON AVENUE, SUITE 219
City, State Zip: LOS ANGELES , CA 90025
Phone: (310) 497-6248 Fax: (213) 261-9887
Record ID: **190893AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **THE VIEW**
Legal Name: THE VIEW LLC
Address: 864 TEAKWOOD ROAD
City, State Zip: LOS ANGELES, CA 90049
Phone: (760) 409-1287
Record ID: **190894AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **LIGHTHOUSE RECOVERY CENTERS**
Legal Name: LIGHTHOUSE RECOVERY CENTERS, LLC
Address: 5242 DARRO ROAD
City, State Zip: LOS ANGELES, CA 91308
Phone: (888) 329-9133 Fax: (818) 279-0550
Record ID: **190896AP**
Service Type: RES-DETOX
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **ABACUS GUIDANCE CENTER, INC.**
Legal Name: ABACUS GUIDANCE CENTER, INC.
Address: 312 NORTH ALLEN AVE.
City, State Zip: PASADENA, CA 91106-1604
Phone: (626) 241-9280
Record ID: **190897AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **STEPS TO RECOVERY**
Legal Name: STEPS TO RECOVERY, CORP.
Address: 14434 GILMORE STREET
City, State Zip: VAN NUYS, CA 91401
Phone: (818) 905-1422
Record ID: **190898AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **PROFOUND TREATMENT**
Legal Name: PROFOUND TREATMENT, LLC
Address: 1990 WESTWOOD BOULEVARD
SUITE 210
City, State Zip: WEST LOS ANGELES, CA 90025
Phone: (310) 614-4660
Record ID: **190899AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **INNERACTIONS**
Legal Name: INNER+ACTIONS, LLC
Address: 21333 OXNARD STREET, 2ND FLOOR
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (818) 963-4357 Fax: (818) 399-7436
Record ID: **190900AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **HARMONY PLACE WOODLAND HILLS**
Legal Name: VALLEY RESTORATION CENTER, LLC
Address: 22900 VENTURA BOULEVARD, #300 & #340
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (818) 519-0670
Record ID: **190901AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **HAVEN OUTPATIENT CENTER**
Legal Name: RECOVERY GRADS, LLC
Address: 817 WEST 34TH STREET,
4TH FLOOR
City, State Zip: LOS ANGELES, CA 90089
Phone: (310) 822-1234 Fax: (310) 822-1234
Record ID: **190902AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **VENTURA RECOVERY CENTER-NORTHRIDGE**
Legal Name: SIESTA HOUSE, LLC
Address: 17433 NORDHOFF STREET
City, State Zip: NORTHRIDGE, CA 91325
Phone: (213) 494-4341
Record ID: **190903AP**
Service Type: RES-DETOX
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **REMEDY DETOX CENTERS**
Legal Name: REMEDY DETOX CENTERS, LLC
Address: 4340 MAURY AVENUE
City, State Zip: LONG BEACH, CA 90807
Phone: (888) 889-8883 Fax: (562) 446-4345
Record ID: **190904AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **REMEDY DETOX CENTERS**
Legal Name: REMEDY DETOX CENTERS, LLC
Address: 1821 E MARSHALL PLACE
City, State Zip: LONG BEACH, CA 90807
Phone: (562) 270-6344 Fax: (562) 446-4340
Record ID: **190904BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **310 RECOVERY**
Legal Name: 310 RECOVERY, INC.
Address: 10533 WASHINGTON BLVD.
City, State Zip: CULVER CITY, CA 90232
Phone: (310) 210-6931
Record ID: **190905AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LIFE UNCOMMON**
Legal Name: LIFE UNCOMMON, LLC
Address: 8616 LA TIJERA BOULEVARD,
#404
City, State Zip: LOS ANGELES, CA 90045
Phone: (310) 463-5521 Fax: (310) 982-2564
Record ID: **190906AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **MELROSE RECOVERY**
Legal Name: MELROSE RECOVERY LLC
Address: 501 N. MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90004
Phone: (702) 901-9079
Record ID: **190907AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **BEL AIR VALLEY DETOX**
Legal Name: BEL AIR OUTPATIENT CENTER, LLC
Address: 4938 RUBIO AVENUE
City, State Zip: ENCINO, CA 91436
Phone: (310) 869-6211
Record ID: **190908AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **THE VILLA OUTPATIENT SERVICES, LLC**
Legal Name: THE VILLA OUTPATIENT SERVICES, LLC
Address: 4463 VAN NUYS BOULEVARD
City, State Zip: SHERMAN OAKS, CA 91403
Phone: (818) 205-9069 Fax: (818) 205-9525
Record ID: **190909AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **AWAKENINGS PM**
Legal Name: CW PSYCHOLOGICAL CORPORATION
Address: 28720 ROADSIDE DRIVE,
SUITE 229
City, State Zip: AGOURA HILLS, CA 91301-6317
Phone: (805) 574-0936
Record ID: **190910AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **COMMON BOND REHAB CENTER**
Legal Name: COMMON BOND REHAB CENTER, LLC
Address: 24456 LYONS AVENUE
City, State Zip: NEWHALL, CA 91321
Phone: (661) 733-1520
Record ID: **190912AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **DEDICATO TREATMENT CENTER**
Legal Name: DEDICATO TREATMENT CENTER INC.
Address: 22 W. CARTER AVENUE
City, State Zip: SIERRA MADRE, CA 91024
Phone: (626) 644-8857 Fax: (626) 921-0214
Record ID: **190913AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 3556 SERRA ROAD
City, State Zip: MALIBU, CA 90265
Phone: (310) 303-8325 Fax: (949) 612-2001
Record ID: **190914AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE VALLEY PREVENTION & TREATMENT CENTER**
Legal Name: VIDA FAMILY CENTER, INC.
Address: 4419 VAN NUYS BOULEVARD,
#307
City, State Zip: SHERMAN OAKS, CA 91403
Phone: (818) 365-7776
Record ID: **190915AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE CAMDEN CENTER, INC.**
Legal Name: THE CAMDEN CENTER, INC.
Address: 10780 SANTA MONICA BOULEVARD,
SUITES 105, 120, 310
City, State Zip: LOS ANGELES , CA 90025
Phone: (844) 422-6336 Fax: (888) 887-2955
Record ID: **190916AP**
Service Type: NON-DETOX
Target Population: 1.10
Expiration Date: 9/30/2018 IMS: No

Program Name: **INTEGRITY TREATMENT PROGRAM**
Legal Name: INTEGRITY TREATMENT PROGRAM, LLC
Address: 12301 WILSHIRE BOULEVARD,
206
City, State Zip: LOS ANGELES, CA 90025
Phone: (310) 621-1536
Record ID: **190917AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BARBARA CARE HEALTH SOLUTIONS, INC.**
Legal Name: BARBARA CARE HEALTH SOLUTIONS, INC.
Address: 323 N. PRAIRIE AVENUE,
401-A
City, State Zip: INGLEWOOD, CA 90301
Phone: (323) 829-0234
Record ID: **190918AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **PASSAGES BEVERLYWOOD**
Legal Name: PASSAGES BEVERLYWOOD, LLC
Address: 2370 SOUTH ROBERTSON BOULEVARD
City, State Zip: LOS ANGELES, CA 90034-2029
Phone: (323) 694-9680 Fax: (424) 298-8034
Record ID: **190919AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **LIFESYNC RECOVERY AND DETOXIFICATION CENTER**
Legal Name: LIFESYNC RECOVERY AND DETOXIFICATION, LLC
Address: 6025 MURPHY WAY
City, State Zip: MALIBU, CA 90265
Phone: (818) 991-5433 Fax: (818) 991-5423
Record ID: **190920AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **SILICON BEACH OUTPATIENT CENTER, LLC**
Legal Name: SILICON BEACH OUTPATIENT CENTER, LLC
Address: 8939 S. SEPULVEDA BOULEVARD,
414
City, State Zip: LOS ANGELES, CA 90045-2334
Phone: (310) 795-0542
Record ID: **190921AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SEWELL TREATMENT CENTER**
Legal Name: FRED JEFFERSON MEMORIAL HOMES FOR BOYS
Address: 152 WEST WALNUT STREET,
#150
City, State Zip: CARSON, CA 90248
Phone: (310) 763-1660 Fax: (310) 886-3258
Record ID: **190922AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **AXIS RESIDENTIAL TREATMENT - WEST**
Legal Name: AXIS RESIDENTIAL TREATMENT - WEST, LLC
Address: 4022-4024 HURON AVENUE
City, State Zip: CULVER CITY, CA 90232
Phone: (310) 838-3640 Fax: (310) 838-3642
Record ID: **190923AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **FOUNDATIONS LOS ANGELES**
Legal Name: CANYON WEST LOS ANGELES, LLC.
Address: 17167 W. VENTURA BOULEVARD
City, State Zip: ENCINO, CA 91316
Phone: (818) 464-1700
Record ID: **190924AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **SOBERGUARD RECOVERY CENTER**
Legal Name: SG DETOX 5156 LLC
Address: 5156 BASCULE AVENUE
City, State Zip: WOODLAND HILLS, CA 91364
Phone: (818) 456-4658
Record ID: **190925AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **MPBH RECOVERY CENTER**
Legal Name: MOTION PICTURE BEHAVIORAL HEALTH, INC.
Address: 5210 VISTA MIGUEL DRIVE
City, State Zip: LA CANADA, CA 91101
Phone: (951) 427-4807
Record ID: **190926AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PACIFIC VIEW RECOVERY CENTER**
Legal Name: PACIFIC VIEW RECOVERY CENTER, LLC
Address: 643 PACIFIC STREET,
UNITS 1, 2, 3, & 4
City, State Zip: SANTA MONICA, CA 90405
Phone: (310) 392-2320 Fax: (310) 392-2331
Record ID: **190927AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **AXIS LLC**
Legal Name: AXIS LLC
Address: 3215 CHEVIOT VISTA PLACE
City, State Zip: LOS ANGELES, CA 90034
Phone: (310) 202-1593 Fax: (310) 202-7604
Record ID: **190928AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **THINK AND BE TREATMENT CENTER**
Legal Name: THINK AND BE TREATMENT CENTER
Address: 4955 VAN NUYS BOULEVARD,
SUITE 200
City, State Zip: SHERMAN OAKS, CA 91403
Phone: (310) 926-5935 Fax: (818) 981-1510
Record ID: **190929AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **MANIFEST RECOVERY**
Legal Name: DOLOROSA OPERATIONS, LLC
Address: 22209 DOLOROSA STREET
City, State Zip: WOODLAND HILLS, CA 91367
Phone: (949) 929-4802
Record ID: **190930AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PSYCHOLOGICAL CARE AND HEALING CENTER**
Legal Name: PCH TREATMENT, INC.
Address: 11965 VENICE BOULEVARD,
SUITES 200, 201, 202, 203, 204, 205, 207, 209, 210, 307, 308, 310, 311
City, State Zip: LOS ANGELES, CA 90066
Phone: (310) 566-7625 Fax: (310) 566-7629
Record ID: **190931AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PEACE BY PIECE TREATMENT CENTER, INC.**
Legal Name: PEACE BY PIECE TREATMENT CENTER, INC.
Address: 5343 SHIRLEY AVENUE
City, State Zip: TARZANA, CA 91356
Phone: (800) 971-6553 Fax: (800) 971-6553
Record ID: **190932AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **TRIUMPH RECOVERY**
Legal Name: TRIUMPH RECOVERY
Address: 13252 MAGNOLIA BOULEVARD
City, State Zip: SHERMAN OAKS, CA 91423
Phone: (818) 736-9891 Fax: (818) 736-9893
Record ID: **190933AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **DESIGN FOR LIVING**
Legal Name: DESIGN FOR LIVING
Address: 3239 WEST AVENUE K-1
City, State Zip: LANCASTER, CA 93536
Phone: (818) 219-1912 Fax: (661) 793-7231
Record ID: **190934AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **APPLIED LA, LLC**
Legal Name: APPLIED LA, LLC
Address: 11340 W OLYMPIC BOULEVARD,
SUITE 305
City, State Zip: LOS ANGELES, CA 90064
Phone: (888) 583-0002 Fax: (760) 406-4254
Record ID: **190935AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **CAST CENTERS IOP**
Legal Name: CAST CENTERS LLC
Address: 630 N. DOHENY DRIVE
City, State Zip: WEST HOLLYWOOD, CA 90069
Phone: (626) 437-2374 Fax: (310) 564-1883
Record ID: **190936AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **CASA BELLA**
Legal Name: CASA BELLA SOBERLIVING-WEST
Address: 1937 FEDERAL AVENUE
City, State Zip: LOS ANGELES, CA 90025
Phone: (818) 923-3929
Record ID: **190937AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 12/31/2018 IMS: No

Program Name: **HATHAWAY RECOVERY**
Legal Name: DESTINY RECOVERY, INC.
Address: 784 EAST POMELLO DRIVE
City, State Zip: CLAREMONT, CA 91711
Phone: (909) 971-3333
Record ID: **190939AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **OAKS OF HOPE**
Legal Name: OAKS OF HOPE LLC
Address: 26525 JOSEL DRIVE
City, State Zip: CANYON COUNTRY, CA 91387
Phone: (661) 298-6191
Record ID: **190940AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **RECOVERY GUILD**
Legal Name: AMERICAN INSTITUTE OF ADDICTION MEDICINE, LLC.
Address: 12400 W. MAGNOLIA BOULEVARD
City, State Zip: VALLEY VILLAGE, CA 91607
Phone: (818) 495-4300 Fax: (818) 452-3700
Record ID: **190942AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **IRIS HEALING RETREAT**
Legal Name: IRIS HEALING RETREAT LLC
Address: 23033 OSTRONIC DRIVE,
City, State Zip: LOS ANGELES , CA 91367
Phone: (323) 449-0016
Record ID: **190943AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **WESTWIND OUTPATIENT SERVICES**
Legal Name: JAZ CAPITAL INVESTMENTS, LLC
Address: 640 S. SAN VICENTE BOULEVARD, SUITE 410 & 482
City, State Zip: LOS ANGELES, CA 90048
Phone: (323) 302-9721
Record ID: **190945AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **STAN PRICE REENTRY CENTER**
Legal Name: CENTER FOR HEALTH JUSTICE, INC.
Address: 900 AVILA STREET, SUITES 102 & 301
City, State Zip: LOS ANGELES, CA 90012
Phone: (213) 229-0985 Fax: (213) 229-0986
Record ID: **190946AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **OPEN HEART RECOVERY**
Legal Name: OPEN HEART RECOVERY
Address: 4026 6TH AVENUE
City, State Zip: LOS ANGELES, CA 90008
Phone: (323) 389-8894 Fax: (310) 671-2306
Record ID: **190947AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **LANDMARK RECOVERY CENTER**
Legal Name: LANDMARK RECOVERY LLC.
Address: 2172 ARGYLE AVE.
City, State Zip: LOS ANGELES, CA 90068
Phone: (818) 486-2755
Record ID: **190949AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **OVERLAND IOP**
Legal Name: HK MANAGEMENT COMPANY LLC
Address: 3415 OVERLAND AVE
City, State Zip: LOS ANGELES, CA 90034
Phone: (310) 876-0407 Fax: (310) 876-0313
Record ID: **190950AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **CHANDLER TREATMENT LLC**
Legal Name: CHANDLER TREATMENT, LLC
Address: 5503 CAHUENGA BLVD, SUITE 201
City, State Zip: NORTH HOLLYWOOD, CA 91601
Phone: (818) 538-1527
Record ID: **190952AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **MALIBU SUNLIFE**
Legal Name: SUNLIFE RECOVERY CENTERS, LLC
Address: 31508 ANACAPA VIEW DRIVE
City, State Zip: MALIBU, CA 90265
Phone: (310) 457-0808 Fax: (310) 457-0808
Record ID: **190954AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 2/28/2019 IMS: No

Program Name: **VICTORIA'S HOUSE RESIDENTIAL**
Legal Name: VICTORIA'S HOUSE, LLC
Address: 1813 12TH STREET, UNIT E
City, State Zip: SANTA MONICA, CA 90404
Phone: (310) 581-5746 Fax: (310) 581-5748
Record ID: **190955AP**
Service Type: RES-DETOX
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **VICTORIA'S HOUSE RESIDENTIAL**
Legal Name: VICTORIA'S HOUSE, LLC
Address: 1813 12TH STREET, UNIT F
City, State Zip: SANTA MONICA, CA 90404
Phone: (310) 581-5746 Fax: (310) 581-5748
Record ID: **190955BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HEALTHY LIVING RESIDENTIAL PROGRAM**
Legal Name: HEALTHY LIVING AND LIFESTYLE, INC.
Address: 22512 GARZOTA DRIVE
City, State Zip: SANTA CLARITA, CA 91350
Phone: (661) 523-7676 Fax: (661) 523-7676
Record ID: **190956AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **MALIBU OUTPATIENT**
Legal Name: MALIBU OUTPATIENT, INC.
Address: 28955 PACIFIC COAST HIGHWAY, SUITE 210
City, State Zip: MALIBU, CA 90265
Phone: (310) 975-5344
Record ID: **190958AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 12/31/2018 IMS: No

Program Name: **HELPING HANDS REHABILITATION CLINIC, INC.**
Legal Name: HELPING HANDS REHABILITATION CLINIC, INC.
Address: 8714 N. SEPULVEDA BLVD.
City, State Zip: NORTH HILLS, CA 91343
Phone: (818) 833-0999
Record ID: **190959AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SERENITY TRAUMA HEALING CENTER**
Legal Name: SERENITY FAMILY AND PSYCHOLOGICAL COUNSELING CENTER, P.C.
Address: 881 ALMA REAL DRIVE, SUITE 310
City, State Zip: PACIFIC PALISADES, CA 90272
Phone: (310) 310-9249 Fax: (310) 454-7240
Record ID: **190960AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 4/30/2019 IMS: No

Program Name: **CONCLUSIONS TREATMENT**
Legal Name: CONCLUSIONS TREATMENT, LLC.
Address: 10200 SEPULVEDA BLVD, SUITE 370
City, State Zip: MISSION HILLS, CA 91345
Phone: (818) 221-3076 Fax: (818) 221-3077
Record ID: **190961AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **INSIGHT HEALTH AND WELLNESS, LLC**
Legal Name: INSIGHT HEALTH AND WELLNESS, LLC
Address: 8920 WILSHIRE BLVD, SUITE 310
City, State Zip: LOS ANGELES, CA 90211
Phone: (310) 456-8451 Fax: (888) 891-2295
Record ID: **190962AP**
Service Type: NON-DETOX
Target Population: 1.7
Expiration Date: 5/31/2019 IMS: No

Program Name: **5 RES DETOX**
Legal Name: 5 RES DETOX, LLC
Address: 10902 RIVERSIDE DRIVE, #B
City, State Zip: NORTH HOLLYWOOD, CA 91602
Phone: (323) 608-2280
Record ID: **190964AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **HONEY CENTER, INC.**
Legal Name: HONEY CENTER, INC.
Address: 1436 S. LA CIENEGA BLVD, SUITE 208A
City, State Zip: LOS ANGELES, CA 90035
Phone: (866) 818-0321
Record ID: **190965AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **INFINITY MALIBU**
Legal Name: INFINITY MALIBU, LLC
Address: 27475 WINDING WAY
City, State Zip: MALIBU, CA 90265
Phone: (818) 855-8587 Fax: (818) 616-3271
Record ID: **190966AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **INFINITY MALIBU IOP**
Legal Name: INFINITY MALIBU IOP, LLC
Address: 28035 DOROTHY DRIVE, SUITE 110
City, State Zip: AGOURA HILLS, CA 91301
Phone: (818) 855-8587 Fax: (818) 616-3271
Record ID: **190967AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 10/31/2017 IMS: No

Program Name: **WEST PALMS DETOX**
Legal Name: PACIFIC RECOVERY SOLUTIONS LLC
Address: 3229 HILLOCK DRIVE
City, State Zip: LOS ANGELES, CA 90068
Phone: (918) 804-7684
Record ID: **190969AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: Yes

Program Name: **PULSE TREATMENT CENTER**
Legal Name: PULSE TREATMENT CENTER, INC.
Address: 5530 CORBIN AVENUE, SUITE 145
City, State Zip: TARZANA, CA 91356
Phone: (949) 293-2278 Fax: (818) 286-1582
Record ID: **190970AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 3/31/2019 IMS: No

Program Name: **HILLSIDE MALIBU CORP.**
Legal Name: HILLSIDE MALIBU CORP.
Address: 4505 LAS VIRGENES, SUITE 211
City, State Zip: CALABASAS, CA 91302
Phone: (818) 706-9000 Fax: (818) 706-9009
Record ID: **190971AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **PRECIOUS TREATMENT**
Legal Name: PRECIOUS TREATMENT
Address: 4381 VANALDEN AVE.
City, State Zip: TARZANA, CA 91356
Phone: (213) 216-1545 Fax: (818) 280-8063
Record ID: **190975AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **RENEWAL SOBRIETY LLC**
Legal Name: RENEWAL SOBRIETY LLC
Address: 6442 COLDWATER CANYON AVE #200
City, State Zip: NORTH HOLLYWOOD, CA 91606
Phone: (917) 374-4215
Record ID: **190976AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **THE WAY OUT SO CAL, INC.**
Legal Name: THE WAY OUT SO CAL, INC.
Address: 28118 BOUQUET CANYON ROAD
City, State Zip: SANTA CLARITA, CA 91350
Phone: (661) 296-4444 Fax: (661) 296-6666
Record ID: **190979AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 5/31/2019 IMS: No

Program Name: **NEW U BEGINNINGS**
Legal Name: NEW U BEGINNINGS INC
Address: 5205 AGNES AVE.
City, State Zip: VALLEY VILLAGE, CA 91607
Phone: (818) 962-1031 Fax: (818) 962-1032
Record ID: **190980AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **FORWARD RECOVERY SOLUTIONS**
Legal Name: FORWARD RECOVERY SOLUTIONS, LLC
Address: 9740 WEST PICO BLVD.
City, State Zip: LOS ANGELES, CA 90035
Phone: (310) 945-0344
Record ID: **190981AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **NOVO DETOX**
Legal Name: NOVO MEDICAL DETOXIFICATION CENTERS OF LOS ANGELES, INC.
Address: 11346 THURSTON PLACE
City, State Zip: LOS ANGELES, CA 90049
Phone: (310) 308-2038
Record ID: **190982AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: Yes

Program Name: **REBOS DETOX**
Legal Name: LOST SHEEP, L.L.C.
Address: 4198 SUNSWEPT DRIVE
City, State Zip: STUDIO CITY, CA 91604
Phone: (310) 699-1005 Fax: (310) 694-3278
Record ID: **190984AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Madera County**

Program Name:	**VALLEY TEEN RANCH RESIDENTIAL TREATMENT GROUP HOME**
Legal Name:	VALLEY TEEN RANCH
Address:	10535 ROAD 35
City, State Zip:	MADERA, CA 93638
Phone:	(559) 635-1110 Fax: (559) 538-5004
Record ID:	**200001AN**
Service Type:	NON
Target Population:	1.11
Expiration Date:	10/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Marin County**

Program Name: **CENTER POINT - THE MANOR**
Legal Name: CENTER POINT, INC.
Address: 603 D STREET
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 454-9444 Fax: (415) 492-8844
Record ID: **210002BN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **THE VILLAGE**
Legal Name: CENTER POINT, INC.
Address: 1477-1483 LINCOLN AVENUE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 454-9444
Record ID: **210002FN**
Service Type: RES
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.4
Expiration Date: 8/31/2017 IMS: No

Program Name: **CENTER POINT OUTPATIENT SERVICES**
Legal Name: CENTER POINT, INC.
Address: 1601 SECOND STREET, SUITE 104
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 456-6655 Fax: (415) 492-8844
Record ID: **210002GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **BAY AREA COMMUNITY RESOURCES**
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.
Address: 171 CARLOS DRIVE
City, State Zip: SAN RAFAEL, CA 94903
Phone: (415) 444-5580 Fax: (415) 444-5598
Record ID: **210005BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **BAY AREA COMMUNITY RESOURCES--IN CUSTODY PROGRAM**
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.
Address: 13 PETER BEHR DRIVE
City, State Zip: SAN RAFAEL, CA 94903
Phone: (415) 755-2328 Fax: (415) 755-2228
Record ID: **210005CN**
Service Type: NON
Target Population: 1.2
Expiration Date: 5/31/2019 IMS: No

Program Name: **POSITIVE CHANGES**
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.
Address: 103 SHORELINE PARKWAY
SUITES 101 & 201
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 485-3304 Fax: (415) 755-2270
Record ID: **210005DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **SERENITY KNOLLS**
Legal Name: SERENITY KNOLLS
Address: 145 TAMAL ROAD
City, State Zip: FOREST KNOLLS, CA 94933
Phone: (415) 488-0400 Fax: (415) 488-1955
Record ID: **210011AP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **THE HELEN VINE RECOVERY CENTER**
Legal Name: BUCKELEW PROGRAMS
Address: 301 SMITH RANCH ROAD
City, State Zip: SAN RAFAEL, CA 94903
Phone: (415) 492-0818
Record ID: **210017DN**
Service Type: RES-DETOX
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **BAYSIDE MARIN II**
Legal Name: BAYSIDE MARIN, INC.
Address: 189 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000
Record ID: **210030AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **BAYSIDE MARIN I**
Legal Name: BAYSIDE MARIN, INC.
Address: 191 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000
Record ID: **210030BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: Yes

Program Name: **BAYSIDE MARIN OUTPATIENT PROGRAM**
Legal Name: BAYSIDE MARIN, INC.
Address: 718 4TH STREET
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000
Record ID: **210030CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **BAYSIDE MARIN III**
Legal Name: BAYSIDE MARIN, INC.
Address: 47 TWEED TERRACE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000 Fax: (415) 454-3535
Record ID: **210030DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **BAYSIDE MARIN**
Legal Name: BAYSIDE MARIN, INC.
Address: 168 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000 Fax: (415) 454-3535
Record ID: **210030EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **BAYSIDE MARIN IV**
Legal Name: BAYSIDE MARIN, INC.
Address: 180 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000 Fax: (415) 454-3535
Record ID: **210030FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MARIN OUTPATIENT AND RECOVERY SERVICES**
Legal Name: MARIN SERVICES FOR MEN
Address: 710 C STREET, SUITE 7A & 8
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 485-6736 Fax: (415) 236-1830
Record ID: **210033AN**
Service Type: NON
Target Population: 1.2
Expiration Date: 1/31/2018 IMS: No

Program Name: **NORTH BAY RECOVERY CENTER**
Legal Name: NORTH BAY RECOVERY CENTER, LLC.
Address: 55 SHAVER STREET,
SUITES 200 AND 300
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 454-4357 Fax: (415) 454-4329
Record ID: **210037AP**
Service Type: NON
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **REFLECTIONS**
Legal Name: LIVING AT REFLECTIONS, LLC
Address: 1191 SIMMONS LANE
City, State Zip: NOVATO, CA 94945
Phone: (415) 895-6146
Record ID: **210038AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **REFLECTIONS**
Legal Name: LIVING AT REFLECTIONS, LLC
Address: 10 LOCKTON LANE
City, State Zip: NOVATO, CA 94945
Phone: (415) 891-8000
Record ID: **210038BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **HUCKLEBERRY YOUTH PROGRAMS**
Legal Name: HUCKLEBERRY YOUTH PROGRAMS, INC.
Address: 361 THIRD STREET, SUITE G
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 258-4944
Record ID: **210039AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 10/31/2018 IMS: No

Program Name: **ALTA MIRA RECOVERY PROGRAMS**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 125 BULKLEY AVENUE
City, State Zip: SAUSALITO, CA 94965
Phone: (415) 332-1350 Fax: (415) 275-7201
Record ID: **210040AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTA MIRA RECOVERY PROGRAMS**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 135 BULKLEY AVENUE
City, State Zip: SAUSALITO, CA 94965
Phone: (415) 332-1350 Fax: (415) 275-7201
Record ID: **210040BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTA MIRA RECOVERY PROGRAMS**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 25 SANTA ROSA
City, State Zip: SAUSALITO, CA 94965
Phone: (415) 332-1350 Fax: (415) 339-6084
Record ID: **210040CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTA MIRA RECOVERY PROGRAMS**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 110 HARRISON AVENUE
City, State Zip: SAUSALITO, CA 94965
Phone: (415) 332-1350 Fax: (415) 275-7201
Record ID: **210040DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTA MIRA RECOVERY PROGRAMS**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 126 HARRISON AVENUE
City, State Zip: SAUSALTO, CA 94965
Phone: (415) 332-1350 Fax: (415) 275-7201
Record ID: **210040EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ALTA MIRA OUTPATIENT SERVICES**
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 591 REDWOOD HIGHWAY, SUITE 5220
City, State Zip: MILL VALLEY, CA 94941
Phone: (415) 339-6084 Fax: (415) 520-2404
Record ID: **210040FP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **MARIN TREATMENT CENTER**
Legal Name: MARIN TREATMENT CENTER
Address: 1466 LINCOLN AVENUE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 457-3755 Fax: (415) 457-9516
Record ID: **210042AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MUIR WOOD ADOLESCENT & FAMILY SERVICES**
Legal Name: MUIR WOOD, LLC
Address: 938 B STREET
City, State Zip: SAN RAFAEL, CA 94901
Phone: (310) 903-1155 Fax: (707) 559-5401
Record ID: **210044AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 10/31/2017 IMS: No

Program Name: **SAFE PASSAGE RECOVERY**
Legal Name: SAFE PASSAGE RECOVERY LLC
Address: 863 FRANCISCO BLVD EAST
SUITE A
City, State Zip: SAN RAFAEL, CA 94903
Phone: (415) 578-2069 Fax: (415) 578-2823
Record ID: **210046AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **FULL CIRCLE RECOVERY CENTER**
Legal Name: FULL CIRCLE ADDICTION AND RECOVERY SERVICES LLC
Address: 1104 LINCOLN AVENUE
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 202-6255
Record ID: **210048AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 3/31/2019 IMS: No

Program Name: **AVERY LANE, LLC**
Legal Name: AVERY LANE, LLC
Address: 505A SAN MARIN DRIVE, SUITE 300
City, State Zip: NOVATO, CA 94945
Phone: (415) 686-6127
Record ID: **210049AP**
Service Type: NON-DETOX
Target Population: 1.3
Expiration Date: 1/31/2019 IMS: No

Program Name: **SUNNY HILLS SERVICES**
Legal Name: Sunny Hills Services
Address: 300 SUNNY HILLS DRIVE, BLDG. 3
City, State Zip: SAN ANSELMO, CA 94960
Phone: (415) 457-3200 Fax: (415) 456-4679
Record ID: **210050AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Mariposa County**

Program Name:	**MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES**
Legal Name:	MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES
Address:	5362 AND 5362-A LEMEE LANE
City, State Zip:	MARIPOSA, CA 95338
Phone:	(209) 966-2000 Fax: (209) 742-0996
Record ID:	**220002AN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	7/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Mendocino County**

Program Name: **UKIAH RECOVERY CENTER**
Legal Name: FORD STREET PROJECT
Address: 201 BRUSH STREET, BUILDINGS 201A, 201B, AND 201C
City, State Zip: UKIAH, CA 95482
Phone: (707) 462-1934
Record ID: **230004AN**
Service Type: RES-DETOX
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **FORD STREET PROJECT**
Legal Name: FORD STREET PROJECT
Address: 139 FORD STREET
City, State Zip: UKIAH, CA 95482
Phone: (707) 462-1934 Fax: (707) 468-9860
Record ID: **230004BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY, ALCOHOL AND OTHER DRUG PROGRA**
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 790 SOUTH FRANKLIN STREET, SUITE B
City, State Zip: FORT BRAGG, CA 95437
Phone: (707) 472-2605 Fax: (707) 472-2605
Record ID: **230006GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY BEHAVIORIAL HEALTH & RECOVERY**
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 1120 SOUTH DORA STREET
City, State Zip: UKIAH, CA 95482
Phone: (707) 472-2637 Fax: (707) 472-2768
Record ID: **230006HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **MENDOCINO COUNTY HHSA - CHILDREN'S AND FAMILY SERVICES**
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 727 S. STATE STREET
City, State Zip: UKIAH, CA 95482
Phone: (707) 472-2605 Fax: (707) 472-2657
Record ID: **230006KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **WILLITS INTEGRATED SERVICES CENTER (WISC)**
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 474 E. VALLEY STREET
City, State Zip: WILLITS, CA 95490
Phone: (707) 472-2605 Fax: (707) 472-2657
Record ID: **230006LN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Merced County**

Program Name: **DAVE RIORDAN'S 'HOBIE HOUSE'**
Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC.
Address: 1299 AND 1301 YOSEMITE PARKWAY, 1931 AND 1941 HIGHLAND AVENUE
City, State Zip: MERCED, CA 95340
Phone: (209) 722-6335
Record ID: **240001BN**
Service Type: RES
Resident Capacity: 25
Total Occupancy: 26
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **THE ROSE JULIA RIORDAN TRANQUILITY VILLAGE**
Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC.
Address: 509/519, 527/537, 559, 569, 579 AND 589 MENDOCINO COURT
City, State Zip: ATWATER, CA 95301
Phone: (209) 357-5261 Fax: (209) 357-5279
Record ID: **240001EN**
Service Type: RES
Resident Capacity: 42
Total Occupancy: 60
Target Population: 1.4
Expiration Date: 11/30/2018 IMS: No

Program Name: **RECOVERY ASSISTANCE FOR TEENS (R.A.F.T.)**
Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES
Address: 3313 NORTH G STREET, SUITE B
City, State Zip: MERCED, CA 95340
Phone: (209) 381-6808 Fax: (209) 725-3810
Record ID: **240003AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 7/31/2019 IMS: No

Program Name: **THE CENTER**
Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES
Address: 3305 G STREET
City, State Zip: MERCED, CA 95340
Phone: (209) 381-6880 Fax: (209) 723-6220
Record ID: **240003BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **MERCED COUNTY SACPA DRUG TREATMENT PROGRAM**
Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH-ALCOHOL AND DRUG SERVICES
Address: 676 LOUHBOROUGH DRIVE
City, State Zip: MERCED, CA 95348-2601
Phone: (209) 381-6852 Fax: (209) 385-3174
Record ID: **240003CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Modoc County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Mono County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Monterey County**

Program Name: **BEACON HOUSE**
Legal Name: BEACON HOUSE
Address: 468 PINE AVENUE
City, State Zip: PACIFIC GROVE, CA 93950
Phone: (831) 372-2334
Record ID: **270001AN**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **DOOR TO HOPE**
Legal Name: DOOR TO HOPE
Address: 165 CLAY STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 422-6226 Fax: (831) 758-5127
Record ID: **270002AN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 3/31/2018 IMS: No

Program Name: **NUEVA ESPERANZA**
Legal Name: DOOR TO HOPE
Address: 325 CALIFORNIA STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 422-2636 Fax: (831) 758-5127
Record ID: **270002BN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 16
Target Population: 1.3
Expiration Date: 3/31/2018 IMS: No

Program Name: **DOOR TO HOPE**
Legal Name: DOOR TO HOPE
Address: 130 WEST GABILAN STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 758-0181 Fax: (831) 758-5127
Record ID: **270002CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **SUN STREET CENTERS, MEN'S RESIDENTIAL**
Legal Name: SUN STREET CENTERS
Address: 8 SUN STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 753-5145
Record ID: **270003AN**
Service Type: RES
Resident Capacity: 54
Total Occupancy: 54
Target Population: 1.2
Expiration Date: 11/30/2017 IMS: No

Program Name: **SUN STREET CENTERS OUTPATIENT PROGRAM**
Legal Name: SUN STREET CENTERS
Address: 12 SUN STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 753-6001 Fax: (831) 753-5169
Record ID: **270003BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **GENESIS RESIDENTIAL CENTER**
Legal Name: COMMUNITY HUMAN SERVICES
Address: 1140, 1146, AND 1152 SONOMA AVENUE
City, State Zip: SEASIDE, CA 93955
Phone: (831) 899-2436 Fax: (831) 658-3815
Record ID: **270004AN**
Service Type: RES
Resident Capacity: 36
Total Occupancy: 42
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **VALLEY HEALTH ASSOCIATES**
Legal Name: VALLEY HEALTH ASSOCIATES
Address: 338 MONTEREY STREET
City, State Zip: SALINAS, CA 93901
Phone: (831) 424-6655 Fax: (831) 424-9717
Record ID: **270011AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **MONTEREY INSTITUTE OF MENTAL HEALTH**
Legal Name: MONTEREY INSTITUTE LICENSED CLINICAL SOCIAL WORKER, INC.
Address: 398 FOAM STREET, SUITE 200
City, State Zip: MONTEREY, CA 93940
Phone: (831) 747-1727
Record ID: **270012AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Napa County**

Program Name: **NAPA COUNTY ALCOHOL AND DRUG PROGRAMS**
Legal Name: NAPA COUNTY HEALTH AND HUMAN SERVICES
Address: 2751 NAPA VALLEY CORPORATE DRIVE
BUILDINGS A & B
City, State Zip: NAPA, CA 94558
Phone: (707) 253-4721
Record ID: **280003BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **ALTERNATIVES FOR BETTER LIVING**
Legal Name: ALTERNATIVES FOR BETTER LIVING
Address: 701 SCHOOL STREET
City, State Zip: NAPA, CA 94559-2829
Phone: (707) 226-1248 Fax: (707) 226-8011
Record ID: **280010AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **ALDEA BEHAVIORAL HEALTH SERVICES**
Legal Name: ALDEA, INC.
Address: 2310 1ST STREET
City, State Zip: NAPA, CA 94559
Phone: (707) 255-1855 Fax: (707) 255-5621
Record ID: **280013BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 4/30/2019 IMS: No

Program Name: **COLD SPRINGS**
Legal Name: PACIFICA PAIN MANAGEMENT SERVICES, INC.
Address: 415 COLD SPRINGS ROAD
City, State Zip: ANGWIN, CA 94508-9657
Phone: (707) 963-1493 Fax: (707) 963-1463
Record ID: **280015AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **MCALISTER INSTITUTE RESIDENTIAL PROGRAM**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2100 NAPA VALLEJO HIGHWAY, BLDG. 253 (M-1)
City, State Zip: NAPA, CA 94558-6293
Phone: (707) 257-1460 Fax: (619) 442-1101
Record ID: **280017AN**
Service Type: RES-DETOX
Resident Capacity: 55
Total Occupancy: 61
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **DUFFY'S MYRTLEDALE**
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC
Address: 3058, 3076 & 3088 MYRTLEDALE ROAD
City, State Zip: CALISTOGA, CA 94515
Phone: (888) 717-9724 Fax: (707) 942-4819
Record ID: **280019AP**
Service Type: RES-DETOX
Resident Capacity: 61
Total Occupancy: 61
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **DUFFY'S NAPA VALLEY**
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC
Address: 2436 FOOTHILL BOULEVARD, SUITE E
City, State Zip: CALISTOGA, CA 94515
Phone: (707) 942-6888 Fax: (707) 942-4819
Record ID: **280019BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Nevada County**

Program Name: **GRASS VALLEY SERVICE CENTER**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 180 SIERRA COLLEGE DRIVE
City, State Zip: GRASS VALLEY, CA 95945-5768
Phone: (530) 273-9541 Fax: (530) 273-7740
Record ID: **290002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **HOPE HOUSE/SERENITY HOUSE**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 159 BRENTWOOD DRIVE
City, State Zip: GRASS VALLEY, CA 95945-5768
Phone: (530) 271-1141 Fax: (530) 271-7036
Record ID: **290002BN**
Service Type: RES-DETOX
Resident Capacity: 40
Total Occupancy: 52
Target Population: 1.9
Expiration Date: 1/31/2019 IMS: No

Program Name: **TRUCKEE SERVICE CENTER**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 10015 PALISADES DRIVE, SUITE 1
City, State Zip: TRUCKEE, CA 96161-1941
Phone: (530) 587-8194 Fax: (530) 587-5617
Record ID: **290002DN**
Service Type: NON
Target Population: 1.10
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Orange County**

Program Name: **MARIPOSA WOMEN AND FAMILY CENTER**
Legal Name: MARIPOSA WOMEN AND FAMILY CENTER
Address: 812 W. TOWN AND COUNTRY ROAD
City, State Zip: ORANGE, CA 92868
Phone: (714) 547-6494
Record ID: **300005AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MARIPOSA WOMEN AND FAMILY CENTER**
Legal Name: MARIPOSA WOMEN AND FAMILY CENTER
Address: 29222 RANCHO VIEJO ROAD, #122
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (714) 547-6494 Fax: (714) 547-6464
Record ID: **300005BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ADULT AND OLDER ADULT BEHAVIORAL HEALTH- SANTA ANA SUBSTANCE USE DISORDERS**
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 1200 NORTH MAIN STREET, SUITES 100B AND 301
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 834-2860 Fax: (714) 568-4933
Record ID: **300006BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ADULT AND OLDER ADULT BEHAVIORAL HEALTH- WESTMINSTER SUBSTANCE USE DISORDERS**
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 14140 BEACH BOULEVARD, ROOM 120 AND 200
City, State Zip: WESTMINSTER, CA 92683
Phone: (714) 834-2160
Record ID: **300006DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ADULT AND OLDER ADULT BEHAVIORAL HEALTH - ALISO VIEJO SUBSTANCE USE DISORDERS**
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 5 MAREBLU, SUITES 100 AND 200
City, State Zip: ALISO VIEJO, CA 92656
Phone: (714) 834-2160
Record ID: **300006GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ADULT AND OLDER ADULT BEHAVIORAL HEALTH - COSTA MESA SUBSTANCE USE DISORDERS**
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 3115 REDHILL AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 834-2160
Record ID: **300006IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ADULT AND OLDER ADULT BEHAVIORAL HEALTH - ANAHEIM SUBSTANCE USE DISORDERS**
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 2035 BALL ROAD, SUITES 100A AND 100P
City, State Zip: ANAHEIM, CA 92805
Phone: (714) 517-6140 Fax: (714) 517-6169
Record ID: **300006LN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **NEW DIRECTIONS FOR WOMEN/PROGRAM FOR WOMEN WITH CHILDREN**
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Address: 334 UNIVERSITY AVENUE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 313-1192
Record ID: **300007FN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.4
Expiration Date: 10/31/2017 IMS: No

Program Name: **NEW DIRECTIONS FOR WOMEN, INC.**
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Address: 2601 AND 2607 WILLO LANE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 313-1192
Record ID: **300007GN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.3
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEW DIRECTIONS FOR WOMEN OUTPATIENT PROGRAM**
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Address: 3001 REDHILL AVENUE, BUILDING 4, SUITES 108 AND 109
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 313-1192
Record ID: **300007JN**
Service Type: NON
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **NEW DIRECTIONS FOR WOMEN**
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Address: 2614 WILLO LANE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 313-1192 Fax: (949) 269-9233
Record ID: **300007KN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEW DIRECTIONS FOR WOMEN**
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Address: 2603 WILLO LANE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 313-1192
Record ID: **300007LN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 3/31/2019 IMS: No

Program Name: **CASA ELENA RECOVERY HOME**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 832 SOUTH ANAHEIM BOULEVARD
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 772-5580
Record ID: **300010BN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **LA FAMILIA ALCOHOL AND DRUG SERVICES**
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.
Address: 1905 NORTH COLLEGE AVENUE, SUITE M
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 479-0120 Fax: (714) 479-0153
Record ID: **300010DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **SOUTH COAST COUNSELING, INC.**
Legal Name: SOUTH COAST COUNSELING, INC.
Address: 693 PLUMER STREET
City, State Zip: COSTA MESA, CA 92627-2720
Phone: (949) 642-0180
Record ID: **300012BN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ROQUE CENTER**
Legal Name: ROQUE CENTER, INC.
Address: 10936 DALE AVENUE
City, State Zip: STANTON, CA 90680
Phone: (714) 952-4032
Record ID: **300015AN**
Service Type: RES-DETOX
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE VILLA**
Legal Name: THE VILLA CENTER, INC.
Address: 910 NORTH FRENCH STREET
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 547-3301 Fax: (714) 547-1249
Record ID: **300016AN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 16
Target Population: 1.3
Expiration Date: 1/31/2018 IMS: No

Program Name: **THE VILLA ANNEX**
Legal Name: THE VILLA CENTER, INC.
Address: 311 EAST WASHINGTON STREET
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 547-2732 Fax: (714) 547-1249
Record ID: **300016CN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 1/31/2018 IMS: No

Program Name: **THE VILLA ANNEX II**
Legal Name: THE VILLA CENTER, INC.
Address: 519 EAST WASHINGTON AVENUE
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 547-3301 Fax: (714) 547-1249
Record ID: **300016DN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE 1**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13682 YORBA STREET
City, State Zip: TUSTIN, CA 92780-1831
Phone: (714) 730-5399
Record ID: **300017AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE OF SOUTHERN CALIFORNIA 3**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 427 SOUTH YORBA STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399
Record ID: **300017BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE OF SOUTHERN CALIFORNIA 7**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13681 ROSALIND STREET
City, State Zip: TUSTIN, CA 92780
Phone: (714) 730-5399 Fax: (714) 710-7100
Record ID: **300017CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE OF SOUTHERN CALIFORNIA 4**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13671 ROSALIND STREET
City, State Zip: TUSTIN, CA 92780-1831
Phone: (714) 730-5399 Fax: (714) 710-7100
Record ID: **300017DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE OF SOUTHERN CALIFORNIA OUTPATIENT SERVICES**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 1950 EAST 17TH STREET, SUITE 150
City, State Zip: SANTA ANA, CA 92705
Phone: (714) 547-4300
Record ID: **300017FP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE #2**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13022 YORBA STREET
City, State Zip: SANTA ANA, CA 92705
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017GP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #5**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 2641 OLD GRAND
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017HP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #6**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13861 ESPLANADE AVENUE
City, State Zip: SANTA ANA, CA 92705
Phone: (714) 547-4300
Record ID: **300017IP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #9**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 2217 NORTH WRIGHT STREET
City, State Zip: SANTA ANA, CA 92780
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017JP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME Y-11**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 880 S. YORBA STREET
City, State Zip: ORANGE, CA 92869-5052
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017KP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME M-10**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 3310 E. MAPLE AVENUE
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399
Record ID: **300017LP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME - HOUSE 12**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 581 SOUTH PROSPECT STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399
Record ID: **300017NP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **CORNERSTONE OF SOUTHERN CALIFORNIA 8**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 13672 YORBA STREET
City, State Zip: TUSTIN, CA 92780
Phone: (714) 730-5399
Record ID: **300017OP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #14**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 1612 EAST FRUIT STREET
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017PP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME 15**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 700 SOUTH YORBA STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017SP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME 16**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 235 SOUTH PROSPECT
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399 Fax: (714) 730-5399
Record ID: **300017TP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME 17**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 225 SOUTH PROSPECT
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017UP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #18**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 757 SOUTH YORBA STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017VP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #19**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 3735 EAST SPRING STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399 Fax: (714) 730-3505
Record ID: **300017WP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 9/30/2018 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #20**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 249 SOUTH PROSPECT STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399
Record ID: **300017XP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **CORNERSTONE RECOVERY HOME #21**
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 591 SOUTH PROSPECT STREET
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399
Record ID: **300017YP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **ONE NORTH RECOVERY, LLC**
Legal Name: ONE NORTH RECOVERY, LLC
Address: 34456 CALLE PORTOLA
City, State Zip: CAPISTRANO BEACH, CA 92624-1054
Phone: (949) 481-7014
Record ID: **300018AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **COOPER FELLOWSHIP**
Legal Name: COOPER FELLOWSHIP, INC.
Address: 401, 405, 409, 413, 417, AND 421 NORTH COOPER STREET
City, State Zip: SANTA ANA, CA 92703
Phone: (714) 554-1152 Fax: (714) 265-4870
Record ID: **300029AN**
Service Type: RES
Resident Capacity: 60
Total Occupancy: 60
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **PHOENIX HOUSE ORANGE COUNTY, INC.**
Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC.
Address: 1207 EAST FRUIT STREET, BUILDINGS A, B2, B3, C, D, E & F
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 953-9373
Record ID: **300033AN**
Service Type: RES
Resident Capacity: 130
Total Occupancy: 130
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PHOENIX HOUSE ORANGE COUNTY**
Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC.
Address: 1207 EAST FRUIT STREET, BUILDING B1
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 953-9373
Record ID: **300033CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **HOPE HOUSE**
Legal Name: HOPE HOUSE CORPORATION
Address: 710 AND 714 N ANAHEIM BOULEVARD
City, State Zip: ANAHEIM, CA 92805
Phone: (714) 776-7490 Fax: (714) 776-8650
Record ID: **300034AN**
Service Type: RES
Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **GERRY HOUSE**
Legal Name: STRAIGHT TALK CLINIC, INCORPORATED
Address: 1225 AND 1227 WEST 6TH STREET
City, State Zip: SANTA ANA, CA 92703
Phone: (714) 972-1402
Record ID: **300040AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **WOODGLEN RECOVERY JUNCTION**
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED
Address: 771 WEST ORANGETHORPE AVENUE
City, State Zip: FULLERTON, CA 92832
Phone: (714) 879-6916
Record ID: **300042AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **WOODGLEN RECOVERY JUNCTION**
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED
Address: 751 WEST ORANGETHORPE AVENUE
City, State Zip: FULLERTON, CA 92832
Phone: (714) 879-2741 Fax: (714) 578-2960
Record ID: **300042BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **DAYLIGHT AGAIN**
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED
Address: 329 EAST COMMONWEALTH AVENUE
City, State Zip: FULLERTON, CA 92832
Phone: (714) 879-6916 Fax: (714) 578-2960
Record ID: **300042CN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **WOODGLEN WEST DETOX**
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED
Address: 1401 WEST ORANGETHORPE AVE.
City, State Zip: FULLERTON, CA 92832
Phone: (714) 612-6956 Fax: (714) 578-2960
Record ID: **300042DN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SOBER LIVING BY THE SEA**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 4138 PATRICE ROAD
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 673-6696 Fax: (949) 723-2829
Record ID: **300044ACP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **THE ROSE OF NEWPORT BEACH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 6110 WEST OCEAN FRONT
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 673-6696 Fax: (949) 723-2829
Record ID: **300044AFP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE LANDING AT NEWPORT BEACH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 4711 SEASHORE DRIVE
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 673-6696 Fax: (949) 723-2829
Record ID: **300044AGP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE ROSE OF NEWPORT BEACH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 6111 SEASHORE DRIVE
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 673-6696 Fax: (949) 723-2829
Record ID: **300044SP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **HERITAGE HOUSE**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 2212 A-D & 2218 A-D PLACENTIA AVENUE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 646-2271
Record ID: **300054AN**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 31
Target Population: 1.4
Expiration Date: 6/30/2018 IMS: No

Program Name: **HERITAGE HOUSE NORTH**
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 315, 319, AND 321 NORTH STATE COLLEGE BOULEVARD
City, State Zip: ANAHEIM, CA 92806-2925
Phone: (714) 687-0077 Fax: (714) 687-0691
Record ID: **300054IN**
Service Type: RES
Resident Capacity: 21
Total Occupancy: 44
Target Population: 1.4
Expiration Date: 12/31/2018 IMS: No

Program Name: **BREAKAWAY PROGRAM**
Legal Name: BREAKAWAY HEALTH CORPORATION
Address: 3151 AIRWAY AVENUE, SUITE D-1
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 847-7585 Fax: (714) 848-5410
Record ID: **300065AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 1/31/2018 IMS: No

Program Name: **THE RECOVERY CENTER**
Legal Name: NANCY CLARK AND ASSOCIATES, INC.
Address: 1110 VICTORIA STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 646-2340 Fax: (949) 631-4589
Record ID: **300067AP**
Service Type: RES
Resident Capacity: 38
Total Occupancy: 41
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **RELAPSE PREVENTION OUTPATIENT PROGRAM**
Legal Name: NANCY CLARK AND ASSOCIATES, INC.
Address: 471 OLD NEWPORT ROAD, SUITE 101
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 631-0550 Fax: (949) 631-4589
Record ID: **300067BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **TOUCHSTONES**
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.
Address: 525 NORTH PARKER
City, State Zip: ORANGE, CA 92868
Phone: (714) 639-5546
Record ID: **300070AN**
Service Type: DSS
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **COVENANT HILLS TREATMENT CENTERS**
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.
Address: 217 AND 219 AVENIDA MONTEREY
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 248-5335 Fax: (949) 248-4275
Record ID: **300074BP**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **COVENANT HILLS TREATMENT CENTERS, INC.**
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.
Address: 34248 VIA SANTA ROSA, APARTMENTS A, B, AND C
City, State Zip: CAPISTRANO BEACH, CA 92624
Phone: (949) 489-8121 Fax: (949) 369-7261
Record ID: **300074CP**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 11/30/2018 IMS: No

Program Name: **COVENANT HILLS TREATMENT CENTERS.**
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.
Address: 27442 CALLE ARROYO, SUITE B
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 248-5335
Record ID: **300074DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SPENCER RECOVERY CENTER**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 1316 SOUTH COAST HIGHWAY
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 376-3705
Record ID: **300088AP**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **SPENCER RECOVERY CENTERS, INC.**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 1337 GAVIOTA, UNIT B AND C
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 376-3705 Fax: (949) 376-6862
Record ID: **300088JP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **SPENCER RECOVERY CENTERS, INC.**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 665 CAMINO DE LOS MARES, SUITE 104C
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 313-5224 Fax: (949) 313-5240
Record ID: **300088LP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CHAPMAN HOUSE**
Legal Name: CHAPMAN HOUSE, INC.
Address: 1412 EAST CHAPMAN AVENUE
City, State Zip: ORANGE, CA 92866
Phone: (714) 288-9779 Fax: (714) 538-9779
Record ID: **300105BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **CHAPMAN HOUSE, INC.**
Legal Name: CHAPMAN HOUSE, INC.
Address: 14511 - 14512 CARFAX DRIVE
City, State Zip: TUSTIN, CA 92780
Phone: (714) 288-9779 Fax: (714) 288-6130
Record ID: **300105IP**
Service Type: RES-DETOX
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **COLLEGE COMMUNITY SERVICES/CALWORKS (CCS/CW)**
Legal Name: COLLEGE COMMUNITY SERVICES
Address: 501 NORTH BROOKHURST STREET, SUITES 300B AND 320
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 490-7711 Fax: (714) 490-7717
Record ID: **300106BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **COLLEGE COMMUNITY SERVICES/CALWORKS/CAMINO NUEVO**
Legal Name: COLLEGE COMMUNITY SERVICES
Address: 1200 NORTH MAIN STREET, SUITE 630
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 824-8150 Fax: (714) 824-8151
Record ID: **300106CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **KC SERVICES**
Legal Name: KOREAN COMMUNITY SERVICES, INC.
Address: 14795 JEFFREY ROAD, SUITE 207
City, State Zip: IRVINE, CA 92618
Phone: (949) 654-9163
Record ID: **300107CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **KC SERVICES**
Legal Name: KOREAN COMMUNITY SERVICES, INC.
Address: 1060 SOUTH BROOKHURST ROAD
City, State Zip: FULLERTON, CA 92833
Phone: (714) 449-1339 Fax: (714) 449-1289
Record ID: **300107DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **KC SERVICES**
Legal Name: KOREAN COMMUNITY SERVICES, INC.
Address: 7281 GARDEN GROVE BOULEVARD, SUITE H
City, State Zip: GARDEN GROVE, CA 92844
Phone: (714) 539-4544
Record ID: **300107EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **ABLE TO CHANGE RECOVERY, INC.**
Legal Name: ABLE TO CHANGE RECOVERY, INC.
Address: 28522 AVENIDA PLACIDA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 493-6800 Fax: (949) 493-6832
Record ID: **300118AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **ABLE TO CHANGE RECOVERY, INC.**
Legal Name: ABLE TO CHANGE RECOVERY, INC.
Address: 31501 RANCHO VIEJO ROAD, SUITE 101 & 103
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 493-6800 Fax: (949) 493-6832
Record ID: **300118BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **ABLE TO CHANGE RECOVERY, INC.**
Legal Name: ABLE TO CHANGE RECOVERY, INC.
Address: 23492 WHITE DOVE AVENUE
City, State Zip: LAKE FOREST, CA 92630
Phone: (949) 493-6800 Fax: (949) 493-6832
Record ID: **300118CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **ABLE TO CHANGE RECOVERY, INC.**
Legal Name: ABLE TO CHANGE RECOVERY, INC.
Address: 32732 CAMARON
City, State Zip: DANA POINT, CA 92629
Phone: (949) 493-6800 Fax: (949) 493-6832
Record ID: **300118DP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **ABLE TO CHANGE RECOVERY, INC.**
Legal Name: ABLE TO CHANGE RECOVERY, INC.
Address: 30032 IMPERIAL DRIVE
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 493-6800 Fax: (949) 493-6832
Record ID: **300118EP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CENTER FOR THE TREATMENT OF ADDICTION, INC.**
Legal Name: THE CENTER FOR THE TREATMENT OF ADDICTION, INC.
Address: 2701 EAST CHAPMAN AVENUE, SUITE 111
City, State Zip: FULLERTON, CA 92831
Phone: (760) 722-0672 Fax: (760) 722-3418
Record ID: **300119HP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **NEW BEGINNING FELLOWSHIP CENTER**
Legal Name: THE NEW BEGINNING FELLOWSHIP CENTER
Address: 16581 BROOKHURST
City, State Zip: FOUNTAIN VALLEY, CA 92706
Phone: (714) 839-2515 Fax: (714) 839-5501
Record ID: **300120BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **YELLOWSTONE, WROC**
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.
Address: 3132 BOSTON WAY
City, State Zip: COSTA MESA, CA 92626
Phone: (888) 941-9048 Fax: (714) 646-5296
Record ID: **300121AN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **YELLOWSTONE (WOMEN'S RECOVERY OF CALIFORNIA)**
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.
Address: 154 & 160 EAST BAY STREET
City, State Zip: COSTA MESA, CA 92627-2147
Phone: (949) 646-5296 Fax: (888) 941-9048
Record ID: **300121BN**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **THE YELLOWSTONE BRIDGE**
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.
Address: 2028 FULLERTON AVENUE,
UNITS A, B, AND C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 574-3008 Fax: (949) 646-5296
Record ID: **300121FN**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **THE CENTER**
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.
Address: 2001 HARBOR BOULEVARD, SUITE 200
City, State Zip: COSTA MESA, CA 92626
Phone: (888) 941-9048 Fax: (949) 646-5296
Record ID: **300121IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS - LOS ALAMITOS**
Legal Name: TWIN TOWN CORPORATION
Address: 4388 EAST KATELLA AVENUE
City, State Zip: LOS ALAMITOS, CA 90720
Phone: (562) 594-8844 Fax: (562) 493-1280
Record ID: **300128AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS, ORANGE**
Legal Name: TWIN TOWN CORPORATION
Address: 705 WEST LA VETA AVENUE, SUITE 208
City, State Zip: ORANGE, CA 92868
Phone: (714) 532-9295 Fax: (562) 493-1280
Record ID: **300128CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **TWIN TOWN TREATMENT CENTERS, MISSION VIEJO**
Legal Name: TWIN TOWN CORPORATION
Address: 27281 LAS RAMBLAS STREET, SUITE 140
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 540-0170 Fax: (562) 493-1280
Record ID: **300128DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **BODY MIND SPIRIT IOP**
Legal Name: WILLIAM W. MARTIN, PH.D, LICENSED CLINICAL PSYCHOLOGIST, A PROFESSIONAL COROPORATION
Address: 665 CAMINO DE LOS MARES, SUITE 104
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 248-7377 Fax: (866) 805-2796
Record ID: **300135AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **PAT MOORE FOUNDATION**
Legal Name: THE PAT MOORE FOUNDATION
Address: 1918 WEST HALL AVENUE
City, State Zip: SANTA ANA, CA 92704
Phone: (714) 546-2200 Fax: (949) 209-1980
Record ID: **300136MN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **PAT MOORE FOUNDATION**
Legal Name: THE PAT MOORE FOUNDATION
Address: 2614 WEST COLOMBINE STREET, UNIT A
City, State Zip: SANTA ANA, CA 92704
Phone: (714) 546-2200 Fax: (949) 209-1980
Record ID: **300136NN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **PAT MOORE FOUNDATION**
Legal Name: THE PAT MOORE FOUNDATION
Address: 2614 WEST COLOMBINE STREET, UNIT B
City, State Zip: SANTA ANA, CA 92704
Phone: (714) 546-2200 Fax: (949) 209-1980
Record ID: **300136ON**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **PAT MOORE FOUNDATION**
Legal Name: THE PAT MOORE FOUNDATION
Address: 2105 W. ADAMS STREET
City, State Zip: SANTA ANA, CA 92704
Phone: (714) 546-2200 Fax: (949) 209-1980
Record ID: **300136RN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SOLUTIONS FOR RECOVERY**
Legal Name: SOLUTIONS FOR RECOVERY, INC.
Address: 31931 PASEO TERRAZA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 874-1332 Fax: (949) 661-1264
Record ID: **300143BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **SOLUTIONS BY THE SEA**
Legal Name: OCEAN RECOVERY LLC
Address: 1601 WEST BALBOA BOULEVARD
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 723-2388
Record ID: **300144AP**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.3
Expiration Date: 12/31/2018 IMS: No

Program Name: **OCEAN RECOVERY 1115**
Legal Name: OCEAN RECOVERY, L.L.C.
Address: 1115 WEST BALBOA BOULEVARD
City, State Zip: NEWPORT BEACH, CA 92661
Phone: (949) 675-3764 Fax: (949) 723-1288
Record ID: **300144BP**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **HOPE BY THE SEA, INC.**
Legal Name: HOPE BY THE SEA, INC.
Address: 28371 VIA ANZAR
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 218-2690 Fax: (949) 218-1957
Record ID: **300149AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **HOPE BY THE SEA, INC.**
Legal Name: HOPE BY THE SEA, INC.
Address: 33171 PASEO CERVEZA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 218-2690 Fax: (949) 218-1597
Record ID: **300149BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **HOPE BY THE SEA**
Legal Name: HOPE BY THE SEA, INC.
Address: 31907 (B) DEL OBISPO
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 276-2691
Record ID: **300149CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **HOPE BY THE SEA**
Legal Name: HOPE BY THE SEA, INC.
Address: 31907 (A) DEL OBISPO
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 276-7518
Record ID: **300149DP**
Service Type: RES-DETOX
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **SEACLIFF RECOVERY CENTER**
Legal Name: RIGHT NOW RECOVERY, LLC
Address: 18682 BEACH BOULEVARD, SUITE 255
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 960-0078
Record ID: **300152BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 240 KNOX STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 645-1026 Fax: (949) 645-1026
Record ID: **300154AP**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 236 KNOX STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 645-1026 Fax: (949) 645-1026
Record ID: **300154BP**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC., 3**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 930 MAGELLAN STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 645-1026 Fax: (714) 242-6775
Record ID: **300154CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 934 MAGELLAN STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 645-1026 Fax: (714) 242-6775
Record ID: **300154DP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 8/31/2017 IMS: No

Program Name: **SAFE HARBOR'S CHERISH DETOX**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 22372 HARWICH LANE
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (714) 785-2079
Record ID: **300154FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE HARBOR CONNECTIONS**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 679 GOVERNOR STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 785-2079 Fax: (714) 242-6775
Record ID: **300154GP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2017 IMS: No

Program Name: **SAFE HARBOR CONNECTIONS**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 687 GOVERNOR STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 785-2079 Fax: (714) 242-6775
Record ID: **300154HP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2017 IMS: No

Program Name: **SAFE HARBOR CONNECTIONS**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 671 GOVERNOR STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 785-2079 Fax: (714) 242-6775
Record ID: **300154IP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2017 IMS: No

Program Name: **SAFE HARBOR CONNECTIONS**
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.
Address: 675 GOVERNOR STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 785-2079 Fax: (714) 242-6775
Record ID: **300154JP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2017 IMS: No

Program Name: **WEL-MOR PSYCHOLOGY GROUP, INC.**
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Address: 2900 BRISTOL STREET, SUITE E 103
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 540-9070 Fax: (714) 549-4525
Record ID: **300162AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **WEL-MOR PSYCHOLOGY GROUP, INC.**
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Address: 5130 EAST LA PALMA, SUITE 212
City, State Zip: ANAHEIM, CA 92807
Phone: (714) 540-9070 Fax: (714) 549-4525
Record ID: **300162BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **WEL-MOR PSYCHOLOGY GROUP, INC.**
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Address: 25401 CABOT ROAD, SUITE 114
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (714) 540-9070 Fax: (714) 549-4525
Record ID: **300162CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **WEL-MOR PSYCHOLOGY GROUP, INC.**
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Address: 1440 NORTH HARBOR BOULEVARD, SUITE 725
City, State Zip: FULLERTON, CA 92835
Phone: (714) 540-9070 Fax: (714) 549-4525
Record ID: **300162DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ORANGE COUNTY BAR FOUNDATION STOP SHORT OF ADDICTION**
Legal Name: ORANGE COUNTY BAR FOUNDATION, INC.
Address: 313 NORTH BIRCH, 2ND FLOOR
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 480-1925 Fax: (714) 480-1933
Record ID: **300164AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 1132 WEST BALBOA BOULEVARD
City, State Zip: NEWPORT BEACH, CA 92661
Phone: (949) 675-3406 Fax: (949) 722-8125
Record ID: **300165AP**
Service Type: RES
Resident Capacity: 11
Total Occupancy: 11
Target Population: 1.3
Expiration Date: 5/31/2019 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2384 NEWPORT BOULEVARD
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 675-3406 Fax: (949) 675-3916
Record ID: **300165BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 129 CABRILLO STREET
City, State Zip: COSTA MESA, CA 92627-3053
Phone: (949) 515-4140 Fax: (949) 515-4150
Record ID: **300165EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 198 TULIP LANE,
UNITS C & D
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 791-2423
Record ID: **300165GP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 192 TULIP LANE,
UNIT C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9145
Record ID: **300165HP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 192 TULIP LANE,
UNIT D
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9153
Record ID: **300165IP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2868 ROYAL PALM DRIVE,
UNITS A & B
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 258-7865
Record ID: **300165JP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2868 ROYAL PALM DRIVE,
UNIT C
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 556-1529
Record ID: **300165KP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 192 TULIP LANE,
UNIT B
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9152
Record ID: **300165LP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 192 TULIP LANE
UNIT A
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9140
Record ID: **300165MP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 198 TULIP LANE
A-B
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9163
Record ID: **300165NP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2864 ROYAL PALM DRIVE,
UNIT C
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 556-1502
Record ID: **300165OP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2864 ROYAL PALM DRIVE,
UNIT B
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 546-4796
Record ID: **300165PP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2864 ROYAL PALM DRIVE,
UNIT A
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 437-1737
Record ID: **300165QP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2868 ROYAL PALM DRIVE,
UNIT D
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 556-1530
Record ID: **300165RP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2864 ROYAL PALM DRIVE,
UNIT D
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 556-1519
Record ID: **300165SP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2379 ORANGE AVENUE,
UNITS B & C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 791-8436
Record ID: **300165TP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 2379 ORANGE AVENUE,
UNIT A
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 764-9139
Record ID: **300165UP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **BALBOA HORIZONS RECOVERY SERVICES**
Legal Name: BALBOA HORIZONS RECOVERY SERVICES
Address: 18943 SAN FELIPE STREET
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 458-8334
Record ID: **300165VP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MORNINGSIDE RECOVERY**
Legal Name: MORNINGSIDE RECOVERY, LLC
Address: 1400 REYNOLDS AVENUE, SUITES 100,125,150, &175
City, State Zip: IRVINE, CA 92614
Phone: (949) 675-0006 Fax: (949) 675-0007
Record ID: **300168IP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **MORNINGSIDE RECOVERY, LLC**
Legal Name: MORNINGSIDE RECOVERY, LLC
Address: 9842 13TH STREET
City, State Zip: GARDEN GROVE, CA 92844
Phone: (949) 675-0006 Fax: (949) 675-0007
Record ID: **300168JP**
Service Type: RES-DETOX
Resident Capacity: 87
Total Occupancy: 87
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: Yes

Program Name: **CAPO BY THE SEA**
Legal Name: CAPO BY THE SEA, INC.
Address: 26682 AVENIDA LAS PALMAS
City, State Zip: CAPISTRANO BEACH, CA 92624
Phone: (949) 874-1332 Fax: (949) 276-0045
Record ID: **300173AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CAPO BY THE SEA**
Legal Name: CAPO BY THE SEA, INC.
Address: 27130 B-PASEO ESPADA, SUITE 521 & 522
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 874-1332
Record ID: **300173CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MIRAMAR RECOVERY**
Legal Name: MIRAMAR HEALTH, INC.
Address: 339 JASMINE STREET
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 370-0771 Fax: (949) 554-1285
Record ID: **300182AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **DAHLIA HOUSE**
Legal Name: MIRAMAR HEALTH, INC.
Address: 435 DAHLIA AVENUE
City, State Zip: NEWPORT BEACH, CA 92625
Phone: (949) 497-9189 Fax: (949) 554-1285
Record ID: **300182BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CARNATION HOUSE**
Legal Name: MIRAMAR HEALTH, INC.
Address: 435-1/2 DAHLIA AVENUE
City, State Zip: NEWPORT BEACH, CA 92625
Phone: (949) 370-0771 Fax: (949) 554-1285
Record ID: **300182CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **MIRAMAR HEALTH OUTPATIENT SERVICES**
Legal Name: MIRAMAR HEALTH, INC.
Address: 2165 HARBOR BLVD.
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 370-0771
Record ID: **300182DP**
Service Type: NON
Target Population: 1.7
Expiration Date: 11/30/2018 IMS: No

Program Name: **ALTERNATIVE OPTIONS**
Legal Name: ALTERNATIVE OPTIONS COUNSELING CENTER, INC.
Address: 101 SOUTH KRAEMER BOULEVARD, SUITE 110
City, State Zip: PLACENTIA, CA 92870
Phone: (877) 538-4133 Fax: (562) 921-5703
Record ID: **300186AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **HEALTHCARE SERVICES, INC., THE LIGHTHOUSE**
Legal Name: HEALTHCARE SERVICES, INC.
Address: 1320 WEST PEARL STREET
UNITS A,B,C & D
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 384-3970 Fax: (714) 384-3876
Record ID: **300188AP**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **HEALTHCARE SERVICES**
Legal Name: HEALTHCARE SERVICES, INC.
Address: 1340 PEARL STREET
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 871-9841 Fax: (714) 384-3876
Record ID: **300188CP**
Service Type: RES-DETOX
Resident Capacity: 21
Total Occupancy: 21
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **ANAHEIM LIGHTHOUSE**
Legal Name: HEALTHCARE SERVICES, INC.
Address: 1330 WEST PEARL, UNIT A, B, C, D
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 780-1174 Fax: (714) 784-1124
Record ID: **300188EP**
Service Type: RES-DETOX
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **NEW LIFE SPIRIT RECOVERY INC.**
Legal Name: NEW LIFE SPIRIT RECOVERY INC.
Address: 18652 FLORIDA STREET, SUITE 200
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 841-1906 Fax: (714) 908-3308
Record ID: **300190AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **DOMUS RETREAT**
Legal Name: DOMUS RETREAT LLC
Address: 270 SOUTH ORANGE ACRES DRIVE
City, State Zip: ANAHEIM HILLS, CA 92807
Phone: (310) 205-0808
Record ID: **300203AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **ADELANTE RECOVERY CENTER, INC.**
Legal Name: ADELANTE RECOVERY CENTER, INC.
Address: 49 MONTECITO DRIVE
City, State Zip: CORONA DEL MAR, CA 92625
Phone: (949) 887-4448 Fax: (949) 706-9769
Record ID: **300206AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 209 AND 211 EAST 18TH STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 650-4334
Record ID: **300207AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 1040 WEST 17TH STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 650-4334
Record ID: **300207BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 354 BROADWAY
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 269-9239
Record ID: **300207CP**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.2
Expiration Date: 5/31/2019 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 2417 ORANGE AVENUE, UNITS 101A, 101B, 101C, 102A, 201B & 201C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 269-9239
Record ID: **300207FP**
Service Type: RES
Resident Capacity: 21
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 235 EAST 18TH STREET, UNITS A, B, C AND 241 EAST 18TH STREET, UNITS A, B, C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 650-5171
Record ID: **300207GP**
Service Type: RES
Resident Capacity: 23
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 175 VIRGINIA PLACE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 650-5171
Record ID: **300207HP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 171 ROCHESTER, UNITS A & B
175 ROCHESTER, UNITS A & B
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 650-5171
Record ID: **300207IP**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 125 & 131 E. WILSON STREET, UNITS 1, 2, 3
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334
Record ID: **300207KP**
Service Type: RES
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **NORTHBOUND TREATMENT SERVICES**
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 1545 NEWPORT BOULEVARD
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 650-4334 Fax: (949) 548-4718
Record ID: **300207LP**
Service Type: NON
Target Population: 1.8
Expiration Date: 3/31/2019 IMS: No

Program Name: **OCEAN HILLS RECOVERY, INC.**
Legal Name: OCEAN HILLS RECOVERY, INC.
Address: 33242 CHRISTINA DRIVE
City, State Zip: DANA POINT, CA 92629
Phone: (949) 496-3794 Fax: (949) 388-8407
Record ID: **300208AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **OCEAN HILLS RECOVERY, INC.**
Legal Name: OCEAN HILLS RECOVERY, INC.
Address: 33402 PALO ALTO STREET
City, State Zip: DANA POINT, CA 92629
Phone: (949) 429-5106 Fax: (949) 542-8563
Record ID: **300208BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **OCEAN HILLS RECOVERY, INC.**
Legal Name: OCEAN HILLS RECOVERY, INC.
Address: 34062 AMBER LANTERN
City, State Zip: DANA POINT, CA 92629
Phone: (949) 524-8840 Fax: (949) 218-6157
Record ID: **300208CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **OCEAN HILLS RECOVERY, INC.**
Legal Name: OCEAN HILLS RECOVERY, INC.
Address: 33701 BIG SUR
City, State Zip: DANA POINT, CA 92629
Phone: (949) 429-6076
Record ID: **300208DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **21ST CENTURY WELLNESS, INC.**
Legal Name: 21ST CENTURY WELLNESS, INC.
Address: 23792 ROCKFIELD BOULEVARD, SUITE 100
City, State Zip: LAKE FOREST, CA 92630
Phone: (949) 900-8260 Fax: (949) 900-8268
Record ID: **300211AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **ASSOCIATES IN COUSELING & MEDIATION**
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION
Address: 265 SOUTH ANITA DRIVE, SUITE 117
City, State Zip: ORANGE, CA 92868
Phone: (714) 547-1404 Fax: (714) 550-4677
Record ID: **300213AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **ASSOCIATES IN COUNSELING & MEDIATION**
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION
Address: 25201 PASEO DE ALICIA, SUITE 100
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (714) 554-1404 Fax: (714) 550-4677
Record ID: **300213BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **ASSOCIATES IN COUNSELING & MEDIATION**
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION
Address: 960 WEST 17TH STREET, SUITE B/C
City, State Zip: SANTA ANA, CA 92706
Phone: (714) 547-1404 Fax: (714) 550-4677
Record ID: **300213CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **SOVEREIGN HEALTH OF CALIFORNIA**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 1211 PUERTA DEL SOL, SUITE 120
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 276-5553 Fax: (949) 498-2619
Record ID: **300217AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOVEREIGN BY THE SEA II**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 29371 LAS CRUCES
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (949) 481-1136
Record ID: **300217CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **SOVEREIGN HEALTH ACASO**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 29372 VIA ACASO DRIVE
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (948) 481-1086
Record ID: **300217DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **SAFE HARBOR'S CAPELLA I**
Legal Name: SAFE HARBOR'S CAPELLA, INC.
Address: 546 BERNARD STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 323-8294 Fax: (714) 242-6775
Record ID: **300221AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE HARBOR'S CAPELLA**
Legal Name: SAFE HARBOR'S CAPELLA, INC.
Address: 550A BERNARD STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 323-8294 Fax: (714) 242-6775
Record ID: **300221BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE HARBOR'S CAPELLA III**
Legal Name: SAFE HARBOR'S CAPELLA, INC.
Address: 550B BERNARD STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 323-8294 Fax: (714) 242-6775
Record ID: **300221CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **SAFE HARBOR'S CAPELLA II**
Legal Name: SAFE HARBOR'S CAPELLA, INC.
Address: 548 BERNARD STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 323-8294 Fax: (714) 242-6775
Record ID: **300221DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **CASA BELLA RECOVERY**
Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.
Address: 31365 MONTEREY STREET
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 715-0467 Fax: (949) 715-0467
Record ID: **300222AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CASA BELLA RECOVERY COUNSELING & THERAPY**
Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.
Address: 3284 PACIFIC COAST HIGHWAY, SUITE N
City, State Zip: DANA POINT, CA 92629
Phone: (949) 275-7581 Fax: (949) 715-0467
Record ID: **300222BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **DEE'S HOUSE**
Legal Name: DEE'S HOUSE, LLC
Address: 18886 SANTA MARTA STREET
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 374-6873 Fax: (714) 374-6873
Record ID: **300223AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **NEW METHOD WELLNESS, INC.**
Legal Name: NEW METHOD WELLNESS, INC.
Address: 31473 RANCHO VIEJO ROAD, SUITES 101, 102, 103, AND 104
31461 RANCHO VIEJO ROAD, SUITE 105
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 463-0924 Fax: (949) 472-4352
Record ID: **300229AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **NEW METHOD WELLNESS**
Legal Name: NEW METHOD WELLNESS, INC.
Address: 313 CALLE VILLARIO
City, State Zip: SAN CLEMENTE, CA 92627
Phone: (949) 951-1824 Fax: (949) 472-4352
Record ID: **300229BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 811 N. RANCH WOOD TRAIL
City, State Zip: ORANGE, CA 92869
Phone: (714) 288-0872 Fax: (714) 288-2045
Record ID: **300233AP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 1655 N. HUNTERS WAY
City, State Zip: ORANGE, CA 92869
Phone: (714) 288-9052 Fax: (714) 288-2099
Record ID: **300233BP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEWPORT ACADEMY INTENSIVE OUTPATIENT & DAY TREATMENT PROGRAM**
Legal Name: MONROE OPERATIONS, LLC
Address: 3189 PULLMAN STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 721-4091 Fax: (949) 243-0282
Record ID: **300233DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 1655 NORTH HUNTERS WAY, BUILDING 3
City, State Zip: ORANGE, CA 92869
Phone: (714) 271-3043 Fax: (714) 288-2099
Record ID: **300233EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 811 NORTH RANCH WOOD TRAIL, BUILDING 3
City, State Zip: ORANGE, CA 92869
Phone: (714) 288-0872 Fax: (714) 271-3043
Record ID: **300233FP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 20115 HILLSIDE DRIVE
City, State Zip: ORANGE, CA 92869
Phone: (714) 376-5889 Fax: (714) 288-2099
Record ID: **300233GP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **NEWPORT ACADEMY**
Legal Name: MONROE OPERATIONS, LLC
Address: 760 N. RODEO CIRCLE
City, State Zip: ORANGE, CA 92869
Phone: (714) 376-5889 Fax: (714) 288-2099
Record ID: **300233HP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **JUST ONE RECOVERY**
Legal Name: JUST ONE RECOVERY
Address: 262 & 264 N. CLEVELAND STREET
City, State Zip: ORANGE, CA 92866
Phone: (714) 538-8085 Fax: (714) 628-9884
Record ID: **300234AN**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 1/31/2018 IMS: No

Program Name: **SURE HAVEN**
Legal Name: SURE HAVEN
Address: 725 CENTER STREET, UNITS A AND B
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 467-9213 Ext:228 Fax: (888) 588-4998
Record ID: **300235DP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **SURE HAVEN**
Legal Name: SURE HAVEN
Address: 3072 & 3073 MADISON AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (828) 773-4477
Record ID: **300235GP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SURE HAVEN**
Legal Name: SURE HAVEN
Address: 3125 AND 3129 PIERCE AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 467-9213 Fax: (888) 588-4998
Record ID: **300235QP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SOVEREIGN BY THE SEA II**
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.
Address: 105 AVENIDA PALA
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 545-6853 Fax: (949) 265-0446
Record ID: **300236AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **ORANGE COUNTY RECOVERY SERVICES**
Legal Name: ORANGE COUNTY RECOVERY SERVICES, LLC
Address: 19322 BEACH BOULEVARD
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (949) 515-9191 Fax: (949) 515-9193
Record ID: **300237AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **PACIFIC SHORES RECOVERY**
Legal Name: PACIFIC SHORES RECOVERY, LLC
Address: 3309 CLAY STREET
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 574-2510 Fax: (949) 722-1135
Record ID: **300238AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **CHAPTERS CAPISTRANO**
Legal Name: CHAPTERS CAPISTRANO, LLC
Address: 1525 BUENA VISTA, UNITS A, B AND C
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 481-2766 Fax: (949) 545-6237
Record ID: **300239AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CHAPTERS CAPISTRANO**
Legal Name: CHAPTERS CAPISTRANO, LLC
Address: 222 AVENIDA LA CUESTA
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 698-2249
Record ID: **300239BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **NEWPORT BEACH RECOVERY CENTER**
Legal Name: NEWPORT BEACH RECOVERY CENTER
Address: 207 28TH STREET
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 200-9372 Fax: (949) 612-7968
Record ID: **300240AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **449 RECOVERY**
Legal Name: FOUR FORTY-NINE, INC.
Address: 26010 ACERO STREET
SUITE 100
City, State Zip: MISSION VIEJO, CA 92691
Phone: (855) 435-7449 Fax: (949) 429-0767
Record ID: **300242AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **PACE RECOVERY CENTER, LLC**
Legal Name: PACE RECOVERY CENTER, LLC
Address: 209 22ND STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 274-9239 Fax: (714) 369-2159
Record ID: **300244AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **PACE RECOVERY CENTER, LLC**
Legal Name: PACE RECOVERY CENTER, LLC
Address: 528 16TH STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 369-2137 Fax: (714) 369-2139
Record ID: **300244BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **PACE RECOVERY CENTER, LLC**
Legal Name: PACE RECOVERY CENTER, LLC
Address: 3197-B AIRPORT LOOP DRIVE
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 884-4558 Fax: (714) 274-9517
Record ID: **300244CP**
Service Type: NON
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **PACE RECOVERY CENTER**
Legal Name: PACE RECOVERY CENTER, LLC
Address: 414 11TH STREET
City, State Zip: HUNTINGTON BEACH, CA 92648-4508
Phone: (714) 369-6504
Record ID: **300244DP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **PACE RECOVERY CENTER**
Legal Name: PACE RECOVERY CENTER, LLC
Address: 526 16TH STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (949) 640-0018 Fax: (714) 274-9517
Record ID: **300244EP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 1/31/2018 IMS: No

Program Name: **SOUTH ORANGE COUNTY DETOX TREATMENT**
Legal Name: ALEXANDRA ROSE CORPORATION
Address: 4009 CALLE ABRIL
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (714) 785-2512 Fax: (949) 481-4949
Record ID: **300245AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **WINDWARD WAY RECOVERY**
Legal Name: WINDWARD WAY RECOVERY LLC
Address: 2787 BRISTOL STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (887) 713-2669 Fax: (887) 820-8959
Record ID: **300246AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **WINDWARD WAY**
Legal Name: WINDWARD WAY RECOVERY LLC
Address: 316 HAMILTON STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 903-1053 Fax: (877) 820-8959
Record ID: **300246BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 7/31/2019 IMS: No

Program Name: **WINDWARD WAY**
Legal Name: WINDWARD WAY RECOVERY LLC
Address: 395 VICTORIA STREET
City, State Zip: COSTA MESA, CA 92627-1548
Phone: (949) 525-6871 Fax: (977) 820-8959
Record ID: **300246CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **WINDWARD WAY**
Legal Name: WINDWARD WAY RECOVERY LLC
Address: 165 23RD STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 903-1053 Fax: (877) 820-8959
Record ID: **300246EP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **SIMPLE RECOVERY, INC.**
Legal Name: SIMPLE RECOVERY INC.
Address: 9531 NETHERWAY DRIVE
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (949) 646-3600 Fax: (949) 646-3100
Record ID: **300247AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2019 IMS: No

Program Name: **SIMPLE RECOVERY INC.**
Legal Name: SIMPLE RECOVERY INC.
Address: 1901 NEWPORT BOULEVARD,
SUITE 156, 165, 200 & 225
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 646-3600 Fax: (949) 646-3100
Record ID: **300247BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SIMPLE RECOVERY INC.**
Legal Name: SIMPLE RECOVERY INC.
Address: 20112 VIVA CIRCLE
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (949) 646-3600
Record ID: **300247CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SIMPLE RECOVERY INC.**
Legal Name: SIMPLE RECOVERY INC.
Address: 20621 PAISLEY LANE
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (714) 406-1911 Fax: (714) 646-3100
Record ID: **300247DP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ENCOMPASS RECOVERY**
Legal Name: ENCOMPASS TREATMENT SERVICES, LLC
Address: 27122A PASEO ESPADA, SUITE 924
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 218-4102 Fax: (509) 463-7115
Record ID: **300248AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **NEW START DETOX**
Legal Name: LIBERTY HOUSING SERVICES, INC.
Address: 906 DORMAN STREET
City, State Zip: SANTA ANA, CA 92701
Phone: (714) 486-3691 Fax: (714) 884-3896
Record ID: **300249AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **NEW START DETOX**
Legal Name: LIBERTY HOUSING SERVICES, INC.
Address: 13832 GLENMERE DRIVE
City, State Zip: SANTA ANA, CA 92705
Phone: (714) 332-3143 Fax: (714) 486-2127
Record ID: **300249BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **HARMONY HEALS, INC.**
Legal Name: HARMONY HEALS, INC.
Address: 23173 LA CADENA DRIVE
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 837-2751 Fax: (888) 762-3708
Record ID: **300250AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **STEPHOUSE RECOVERY CENTER**
Legal Name: THE STEPHOUSE RECOVERY, INC.
Address: 1601 BAKER STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (714) 933-6601 Fax: (657) 845-7531
Record ID: **300251BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **STEPHOUSE RECOVERY CENTER**
Legal Name: THE STEPHOUSE RECOVERY, INC.
Address: 10529 SLATER AVENUE, SUITES 10505, 10507 & 10537, 10
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (888) 923-7623 Fax: (657) 845-7531
Record ID: **300251CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **STEPHOUSE RECOVERY CENTER**
Legal Name: THE STEPHOUSE RECOVERY, INC.
Address: 17981 LOS TIEMPOS
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 933-6559
Record ID: **300251DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **GET REAL RECOVERY, INC.**
Legal Name: GET REAL RECOVERY, INC.
Address: 30290 RANCHO VIEJO ROAD, SUITE 204
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 449-2429 Fax: (888) 835-3339
Record ID: **300252AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **GET REAL RECOVERY, INC**
Legal Name: GET REAL RECOVERY, INC.
Address: 28334 PASEO MICHELLE
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 933-2505 Fax: (888) 835-3339
Record ID: **300252BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **GET REAL RECOVERY, INC.**
Legal Name: GET REAL RECOVERY, INC.
Address: 29521 ANA MARIA LANE
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (949) 933-2505 Fax: (888) 835-3339
Record ID: **300252CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 11/30/2018 IMS: No

Program Name: **TREE HOUSE RECOVERY (THR)**
Legal Name: ARROWOOD CAPITAL, INC.
Address: 1956 POMONA AVENUE
City, State Zip: COSTA MESA, CA 92627
Phone: (855) 447-8733 Fax: (714) 968-2752
Record ID: **300253AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 1/31/2019 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 125 COLUMBIA, SUITE B
City, State Zip: ALISO VIEJO, CA 92656
Phone: (949) 344-2742 Fax: (949) 366-5964
Record ID: **300254AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 610 AVENIDA ACAPULCO
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 481-2681
Record ID: **300254BP**
Service Type: RES-DETOX
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 31472 ISLE VISTA
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (949) 340-3885
Record ID: **300254DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 402 PASADENA COURT, UNITS 1, 2, AND 3
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 429-5456
Record ID: **300254EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 33801 VIA CASCADA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (339) 293-9066
Record ID: **300254HP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **SOBERTEC LLC**
Legal Name: SOBERTEC LLC
Address: 4425 MAR ESCARPA
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 340-1108
Record ID: **300254IP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **ZEN RECOVERY, LLC**
Legal Name: ZEN RECOVERY, LLC
Address: 126 E. 16TH STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 940-5445 Fax: (714) 242-1975
Record ID: **300260AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SOUTH COAST BEHAVIORIAL HEALTH**
Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC
Address: 3151 AIRWAY AVENUE, N1-N2
City, State Zip: COSTA MESA, CA 92626
Phone: (866) 811-5249
Record ID: **300261AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **APOLLO RECOVERY**
Legal Name: ARTEMIS HILL RECOVERY INC.
Address: 17429 SANTA LUCIA STREET
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 274-9766 Fax: (562) 431-0840
Record ID: **300262AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: Yes

Program Name: **SOUTHERN CALIFORNIA RECOVERY CENTERS**
Legal Name: TML RECOVERY, LLC
Address: 24470 DEL PRADO AVENUE, SUITE B
City, State Zip: DANA POINT, CA 92629
Phone: (800) 410-6552
Record ID: **300265AP**
Service Type: NON
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **LIGHTHOUSE TREATMENT CENTER**
Legal Name: WINDSTONE ADDICTION CENTERS, INC.
Address: 1310 W. PEARL STREET
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 780-1174 Fax: (714) 780-1124
Record ID: **300266AP**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LIGHTHOUSE TREATMENT CENTER**
Legal Name: WINDSTONE ADDICTION CENTERS, INC.
Address: 1243 W. PEARL ST.
City, State Zip: ANHIEM, CA 92801
Phone: (714) 833-5604 Fax: (714) 833-5038
Record ID: **300266BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 11/30/2017 IMS: No

Program Name: **LIGHTHOUSE TREATMENT CENTER**
Legal Name: WINDSTONE ADDICTION CENTERS, INC.
Address: 1243 1/2 W. PEARL STREET
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 833-5604 Fax: (714) 833-5038
Record ID: **300266CP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **LIGHTHOUSE TREATMENT CENTER**
Legal Name: WINDSTONE ADDICTION CENTERS, INC.
Address: 1253 W. PEARL ST.
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 833-5604 Fax: (714) 833-5038
Record ID: **300266DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **LIGHTHOUSE TREATMENT CENTER**
Legal Name: WINDSTONE ADDICTION CENTERS, INC.
Address: 1300 W. PEARL STREET
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 833-5604 Fax: (714) 833-5038
Record ID: **300266EP**
Service Type: RES-DETOX
Resident Capacity: 17
Total Occupancy: 17
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **SURF CITY RECOVERY**
Legal Name: SURF CITY RECOVERY
Address: 18090 BEACH BOULEVARD, SUITE 5
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (949) 209-7765
Record ID: **300267AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SURF CITY RECOVERY**
Legal Name: SURF CITY RECOVERY
Address: 9872 BIG SUR DRIVE
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 841-3863
Record ID: **300267BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CASA RECOVERY**
Legal Name: CASA RECOVERY, INC.
Address: 31877 DEL OBISPO STREET, SUITE 104
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (888) 928-2272 Fax: (949) 284-0574
Record ID: **300268BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA, LLC**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 4504 SEASHORE DRIVE
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (800) 762-6717 Fax: (949) 629-3883
Record ID: **300270AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 230 EAST 17TH STREET SUITE 201
City, State Zip: COSTA MESA, CA 92627
Phone: (800) 762-6717 Fax: (949) 629-3883
Record ID: **300270BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA, LLC**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 1509 ORANGE AVENUE, A AND B
City, State Zip: COSTA MESA, CA 92627
Phone: (951) 212-0439 Fax: (310) 400-5846
Record ID: **300270CP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 317 ROCHESTER AVENUE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 220-0049 Fax: (310) 440-5846
Record ID: **300270DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 400 WESTMINSTER AVENUE, SUITE 1
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (947) 220-0049 Fax: (310) 400-5846
Record ID: **300270EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 204 E. 17TH STREET, SUITE 203
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 220-0052
Record ID: **300270FP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **HOTEL CALIFORNIA BY THE SEA**
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 19240 BEACH BLVD.
City, State Zip: HUNTINGTON BEACH, CA 92627
Phone: (951) 212-0439 Fax: (310) 400-5864
Record ID: **300270HP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **A MISSION FOR MICHAEL, INC.**
Legal Name: A MISSION FOR MICHAEL, INC.
Address: 647 CAMINO DE LOS MARES, SUITE 201
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 489-0950 Fax: (949) 489-0959
Record ID: **300272AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **PACIFIC PALMS RECOVERY**
Legal Name: PACIFIC PALMS RECOVERY, LLC
Address: 3551 CAMINO MIRA COSTA, SUITES F AND T
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 943-5188 Fax: (949) 542-8565
Record ID: **300273AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **HARMONY HEALS DETOX**
Legal Name: COMPLETE RESURGENCY, LLC
Address: 31957 AND 31959 VIRGINIA WAY
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 837-2751 Fax: (949) 600-7113
Record ID: **300277AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **EMBRACE RECOVERY**
Legal Name: EMBRACE RECOVERY, LLC
Address: 23232 PERALTA DRIVE, SUITE 219
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 525-3696
Record ID: **300288AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOCAL DETOX**
Legal Name: SOCAL DETOX LLC
Address: 1703 AVENIDA SALVADOR
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (888) 590-0777 Fax: (360) 323-7285
Record ID: **300290AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOCAL DETOX**
Legal Name: SOCAL DETOX LLC
Address: 835 AVENIDA SALVADOR
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (888) 590-0777 Fax: (360) 323-7285
Record ID: **300290BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **SPENCER RECOVERY CENTERS**
Legal Name: COAST TO COAST REFERRAL CENTER, INC.
Address: 1337 GAVIOTA
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 376-3705 Fax: (949) 376-6862
Record ID: **300291AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **COAST TO COAST REFERRAL CENTER**
Legal Name: COAST TO COAST REFERRAL CENTER, INC.
Address: 665 CAMINO DE LOS MARES, SUITE 104B
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 313-5200 Fax: (949) 313-5240
Record ID: **300291BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **WJW TREATMENT CENTERS**
Legal Name: CACTUS GARDENS OPPORTUNITY HOUSE, INC.
Address: 13212 & 13222 CHAPMAN AVENUE
City, State Zip: GARDEN GROVE, CA 92840
Phone: (714) 703-9492 Fax: (714) 740-2030
Record ID: **300292AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **NSIGHT OUTPATIENT PROGRAM**
Legal Name: INSIGHT PSYCHOLOGY AND ADDICTION INC.
Address: 4000 BIRCH STREET,
SUITE 112A
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (888) 256-2201 Fax: (949) 203-0402
Record ID: **300293AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **COMMUNITY REHAB**
Legal Name: TRINITY REHAB GROUP, LLC.
Address: 129 W PALMYRA AVENUE
City, State Zip: ORANGE, CA 92866
Phone: (714) 797-1264 Fax: (714) 970-1965
Record ID: **300294AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 1119 SUNFLOWER AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 279-1376
Record ID: **300297AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 20271 SW BIRCH STREET, SUITE 202
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (714) 557-2350 Fax: (714) 947-4058
Record ID: **300297BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **AKUA MIND & BODY, INC.**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 369 RALCAM PLACE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 279-1376
Record ID: **300297CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 373 RALCAM PLACE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 646-2456
Record ID: **300297DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 725 W. 20TH STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 873-5013
Record ID: **300297EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 324 UNIVERSITY DRIVE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 279-1376
Record ID: **300297FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CROSSROADS RECOVERY CENTERS**
Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK
Address: 402 EAST LA HABRA BOULEVARD
City, State Zip: LA HABRA, CA 90631
Phone: (877) 293-0722
Record ID: **300298AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SECOND CHANCE ADDICTION RECOVERY CENTER, INC.**
Legal Name: SECOND CHANCE ADDICTION RECOVERY CENTER, INC.
Address: 1335 SOUTH EUCLID STREET
City, State Zip: ANAHEIM, CA 92802
Phone: (714) 215-4371 Fax: (715) 533-7398
Record ID: **300299AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PATH TO SERENITY**
Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC
Address: 18912 PATRICIAN DRIVE
City, State Zip: VILLA PARK, CA 92861
Phone: (949) 289-0350 Fax: (949) 209-3710
Record ID: **300300AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 2/28/2019 IMS: No

Program Name: **ADDICTION RECOVERY REHAB**
Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC
Address: 10002 BRILEY WAY
City, State Zip: VILLA PARK, CA 92861
Phone: (949) 289-0350 Fax: (949) 209-3710
Record ID: **300300BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 1/31/2019 IMS: No

Program Name: **GRANT ME THE COURAGE RECOVERY**
Legal Name: GRANT ME THE COURAGE RECOVERY, LLC
Address: 3230 E. IMPERIAL HIGHWAY, SUITE 312
City, State Zip: BREA, CA 92821
Phone: (714) 674-0000 Fax: (866) 653-9110
Record ID: **300302AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2200 HARBOR BOULEVARD, SUITE C-210
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 734-7432
Record ID: **300303AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 1650 ADAMS AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 734-7432 Fax: (949) 209-1884
Record ID: **300303BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CLEAN PATH BEHAVIORAL HEALTH**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2822 MONTEREY AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 734-7432 Ext:110 Fax: (949) 209-1884
Record ID: **300303CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2272 PAMELA LANE,
UNIT A
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 734-7432 Ext:129 Fax: (949) 209-1884
Record ID: **300303DP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CLEAN PATH BEHAVIORAL HEALTH**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 973 ARBOR STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 734-7432 Ext:115 Fax: (949) 209-1884
Record ID: **300303EP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CLEAN PATH BEHAVIORAL HEALTH**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 13741 OLYMPIC AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 734-7432 Fax: (949) 209-1884
Record ID: **300303FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 308 22ND STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (949) 734-7432 Fax: (949) 209-1884
Record ID: **300303GP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2272 PAMELA LANE, UNIT B
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 734-7432 Fax: (949) 209-1884
Record ID: **300303HP**
Service Type: RES
Resident Capacity: 3
Total Occupancy: 3
Target Population: 1.8
Expiration Date: 10/31/2018 IMS: No

Program Name: **CLEAN PATH RECOVERY**
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2272 PAMELA LANE, UNIT C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 734-7432 Fax: (949) 209-1884
Record ID: **300303IP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 10/31/2018 IMS: No

Program Name: **SOBER PARTNERS BEACH HOUSE**
Legal Name: PARTNERS PROJECT INC.
Address: 517 14TH STREET
City, State Zip: HUNTINGTON BEACH , CA 92647
Phone: (657) 845-4159 Fax: (949) 877-0119
Record ID: **300305AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 12/31/2018 IMS: No

Program Name: **SOBER PARTNERS WATERFRONT RECOVERY CENTER**
Legal Name: PARTNERS PROJECT INC.
Address: 3101 WEST COAST HIGHWAY, SUITE 200
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (855) 997-2786
Record ID: **300305BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **SOBER PARTNERS REEF HOUSE**
Legal Name: PARTNERS PROJECT INC.
Address: 302 18TH STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (855) 997-2786
Record ID: **300305CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **CALIFORNIA COAST DETOX AND REHAB**
Legal Name: NDR PACIFIC INC.
Address: 24482 CARACAS STREET
City, State Zip: DANA POINT, CA 92629
Phone: (949) 218-8174
Record ID: **300306AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **SHORELINE TREATMENT**
Legal Name: PURE LIFE RECOVERY, LLC.
Address: 1 CALLE SALAMONTES
City, State Zip: SAN CLEMENTE, CA 92673
Phone: (949) 388-7014 Fax: (949) 545-6267
Record ID: **300308BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **FAITH BY THE SEA**
Legal Name: FAITH BY THE SEA, INC.
Address: 27129 CALLE ARROYO
SUITE 1821
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 542-8480 Fax: (949) 429-3698
Record ID: **300309AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 34575 CAMINO CAPISTRANO
City, State Zip: DANA POINT, CA 92629
Phone: (888) 783-0622 Fax: (949) 429-1845
Record ID: **300311AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 35072 CAMINO CAPISTRANO
City, State Zip: DANA POINT, CA 92624
Phone: (949) 276-4095 Fax: (949) 429-1845
Record ID: **300311BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 1564 SKYLINE DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 698-2249 Fax: (949) 429-1845
Record ID: **300311CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 33762 AVENIDA CALITA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 698-2249 Fax: (949) 874-5911
Record ID: **300311DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 27123 CALLE ARROYO,
2121
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (877) 978-3047
Record ID: **300311EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 283 UPLAND DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 715-9174
Record ID: **300311FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 31422 CEANOTHUS DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 715-1647
Record ID: **300311HP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MONARCH SHORES**
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC
Address: 27136 B PASEO ESPADA,
#1121
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (877) 978-3047
Record ID: **300311IP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **PILLARS RECOVERY, LLC**
Legal Name: PILLARS RECOVERY, LLC
Address: 304 MARGUERITE AVENUE
City, State Zip: CORONA DEL MAR, CA 92625
Phone: (949) 610-9360 Fax: (949) 258-5510
Record ID: **300312AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **PILLARS RECOVERY**
Legal Name: PILLARS RECOVERY, LLC
Address: 28772 TOP OF THE WORLD
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 610-9360
Record ID: **300312BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PILLARS RECOVERY**
Legal Name: PILLARS RECOVERY, LLC
Address: 326 OLD NEWPORT BLVD.
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 610-9360
Record ID: **300312CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC.**
Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC
Address: 1958 BALEARIC DRIVE
City, State Zip: COSTA MESA, CA 92626
Phone: (310) 422-6744 Fax: (310) 422-6744
Record ID: **300313AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC.**
Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC
Address: 275 E AST WILSON STREET
City, State Zip: COSTA MESA, CA 92627
Phone: (310) 422-6744 Fax: (714) 556-0120
Record ID: **300313BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ADDICTION HEALTH ALLIANCE**
Legal Name: ADDICTION HEALTH ALLIANCE, LLC
Address: 605 AVENIDA LOS FLORES
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 306-9511 Fax: (949) 542-3878
Record ID: **300314AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **BEACHSIDE RECOVERY LLC**
Legal Name: BEACHSIDE RECOVERY LLC
Address: 24662 SANTA CLARA AVENUE
City, State Zip: DANA POINT, CA 92629
Phone: (949) 531-6457 Fax: (949) 475-5567
Record ID: **300315AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BEACHSIDE RECOVERY LLC**
Legal Name: BEACHSIDE RECOVERY LLC
Address: 16812 RED HILL AVENUE, SUITE A
City, State Zip: IRVINE, CA 92606
Phone: (949) 531-6457 Fax: (949) 475-5567
Record ID: **300315BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BEACHSIDE RECOVERY LLC**
Legal Name: BEACHSIDE RECOVERY LLC
Address: 10231 BRIER LANE
City, State Zip: NORTH TUSTIN, CA 92705-1518
Phone: (888) 387-5576 Fax: (949) 258-9303
Record ID: **300315CP**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **BEACHSIDE RECOVERY LLC**
Legal Name: BEACHSIDE RECOVERY LLC
Address: 15548 SONORA STREET
City, State Zip: TUSTIN, CA 92782
Phone: (888) 387-5576 Fax: (949) 258-9303
Record ID: **300315DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **BEACHSIDE RECOVERY LLC**
Legal Name: BEACHSIDE RECOVERY LLC
Address: 23671 BRASILIA STREET
City, State Zip: MISSION VIEJO, CA 92691-3047
Phone: (888) 387-5576 Fax: (949) 258-9303
Record ID: **300315EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SO CAL TREATMENT**
Legal Name: TRINA TIMANUS
Address: 1246 E. TURIN AVENUE
City, State Zip: ANAHEIM, CA 92805
Phone: (714) 381-0432
Record ID: **300317AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **OCEANFRONT RECOVERY**
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC
Address: 900 GLENNEYRE STREET, SUITE T
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (414) 614-7244 Fax: (949) 715-7037
Record ID: **300318AP**
Service Type: NON
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **OCEANFRONT RECOVERY**
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC
Address: 30662 MARILYN DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 681-5100 Fax: (949) 484-2800
Record ID: **300318BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **OCEANFRONT RECOVERY**
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC
Address: 31122 BROOKS STREET
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 681-5100 Fax: (949) 484-2800
Record ID: **300318CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **OCEANFRONT RECOVERY**
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC
Address: 2575 TEMPLE HILLS DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 681-5100
Record ID: **300318DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **OCEANFRONT RECOVERY**
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC
Address: 431 NYES PL.
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (949) 777-4766 Fax: (949) 715-5488
Record ID: **300318EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HILLSIDE LAGUNA BEACH**
Legal Name: HILLSIDE LAGUNA BEACH LLC
Address: 2516 TEMPLE HILLS DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (310) 445-5743 Fax: (949) 261-9999
Record ID: **300319AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.**
Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.
Address: 18672 FLORIDA STREET, #100
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 596-6400 Fax: (714) 596-4900
Record ID: **300320AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **ORANGE COUNTY RECOVERY**
Legal Name: STEPHEN AND AMBER KNIGHT
Address: 18632 BEACH BOULEVARD, SUITE 240
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 418-6053
Record ID: **300321AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **BALBOA RECOVERY**
Legal Name: KEVIN CULLEN
Address: 430 31ST STREET, SUITE B
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 400-7120 Fax: (949) 675-3359
Record ID: **300322AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SOUTH SHORES RECOVERY**
Legal Name: SOUTH SHORES DETOX, LLC
Address: 27568 VISTA DE DONS
City, State Zip: DANA POINT, CA 92624
Phone: (949) 218-2347 Fax: (949) 481-7104
Record ID: **300324AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **FIRST LIGHT RECOVERY**
Legal Name: FIRST LIGHT RECOVERY, LLC
Address: 140 AVENIDA ALGODON, UNIT B & C
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 973-0700
Record ID: **300325AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CASA CAPRI**
Legal Name: CASA CAPRI LLC
Address: 2787 BRISTOL STREET
SUITE 215
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 861-0576 Fax: (877) 820-8959
Record ID: **300326AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CASA CAPRI RECOVERY**
Legal Name: CASA CAPRI LLC
Address: 15964 MT. JACKSON STREET
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (877) 836-8090 Fax: (877) 820-8959
Record ID: **300326BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **CASA CAPRI RECOVERY**
Legal Name: CASA CAPRI LLC
Address: 166 E. 18TH STREET,
UNITS 1, 2 & 3
City, State Zip: COSTA MESA, CA 92627
Phone: (877) 836-8090 Fax: (877) 820-8959
Record ID: **300326CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **CASA CAPRI RECOVERY**
Legal Name: CASA CAPRI LLC
Address: 10572 MORNING GLORY CIRCLE
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (877) 836-8090 Fax: (877) 820-8959
Record ID: **300326DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2019 IMS: No

Program Name: **REFLECTIONS RECOVERY CENTER**
Legal Name: REFLECTIONS RECOVERY LLC
Address: 17165 NEWHOPE STREET, SUITE M
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 708-2950 Fax: (714) 708-2966
Record ID: **300327AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **TRES VISTAS RECOVERY**
Legal Name: PAIN RECOVERY MEDICAL GROUP, INC.
Address: 31642 AVENIDA EVITA
City, State Zip: SAN JUAN CAPISTRANO, CA 92677
Phone: (951) 595-3721 Fax: (949) 606-0491
Record ID: **300328AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **SOLMAR RETREAT**
Legal Name: HOAG NEUROBEHAVIORAL HEALTH, LLC
Address: 1 HOAG DRIVE
City, State Zip: NEWPORT BEACH, CA 92663-4162
Phone: (949) 764-5656 Fax: (949) 764-8185
Record ID: **300329AP**
Service Type: RES
Resident Capacity: 21
Total Occupancy: 21
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **AFFINITY RECOVERY**
Legal Name: AFFINITY GROUP LLC
Address: 31952 PASEO TERRAZA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (714) 422-0119 Fax: (888) 276-0605
Record ID: **300330AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **AFFINITY RECOVERY**
Legal Name: AFFINITY GROUP LLC
Address: 1911 KINGS ROAD
City, State Zip: NEWPORT BEACH, CA 92663
Phone: (949) 321-8151 Fax: (888) 276-0605
Record ID: **300330BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **AFFINITY RECOVERY**
Legal Name: AFFINITY GROUP LLC
Address: 9 STARLIGHT ISLE
City, State Zip: LADERA RANCH, CA 92694-1467
Phone: (855) 698-7114 Fax: (888) 276-0605
Record ID: **300330CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **COMPASS RECOVERY**
Legal Name: COMPASS RECOVERY, INC.
Address: 3151 AIRWAY AVENUE, F105-B
City, State Zip: COSTA MESA, CA 92626
Phone: (855) 204-7053 Fax: (949) 891-0440
Record ID: **300331AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **COMPASS RECOVERY**
Legal Name: COMPASS RECOVERY, INC.
Address: 9431 ALDERBURY STREET
City, State Zip: CYPRESS, CA 90630-2855
Phone: (855) 204-7053 Fax: (949) 891-0440
Record ID: **300331BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **COMPASS RECOVERY**
Legal Name: COMPASS RECOVERY, INC.
Address: 30891 RIVERA PLACE
City, State Zip: LAGUNA NIGUEL, CA 92677-2455
Phone: (714) 376-5889
Record ID: **300331CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 26421 VIA CALIFORNIA AND 26362 VIA CANON
City, State Zip: CAPISTRANO BEACH, CA 92624
Phone: (949) 542-4032 Fax: (949) 606-9282
Record ID: **300332AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 4014 CALLE BIENVENIDOS
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 481-3826 Fax: (747) 202-0622
Record ID: **300332BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **KOOL LIVING RECOVERY CENTER**
Legal Name: KOOL LIVING, INC.
Address: 440 AVENIDA CRESPI
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (818) 671-4294 Fax: (747) 202-0622
Record ID: **300332CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **KOOL LIVING, INC.**
Legal Name: KOOL LIVING, INC.
Address: 226421 CROWN VALLEY PARKWAY, SUITE 200
City, State Zip: MISSION VIEJO, CA 95691
Phone: (951) 427-4807 Fax: (747) 202-0622
Record ID: **300332DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE SOBER SPOT RECOVERY CENTER**
Legal Name: SOBER SPOT, LLC, THE
Address: 25241 PASEO DE ALICIA, SUITE 220
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 388-5123 Fax: (949) 441-7165
Record ID: **300333AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **WHOLE LIFE RECOVERY**
Legal Name: WHOLE LIFE RECOVERY, LLC
Address: 32122 CAMINO CAPISTRANO SUITE 100
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (888) 963-8921
Record ID: **300334AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **COASTLINE BREEZE**
Legal Name: COASTLINE BREEZE DETOX REHAB & RECOVERY
Address: 33952 GRANADA DRIVE
City, State Zip: DANA POINT, CA 92629
Phone: (877) 557-9511 Fax: (480) 383-6983
Record ID: **300335AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 1804 VIA SAGE
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 248-4645
Record ID: **300337AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 21 LENNOX COURT
City, State Zip: LADERA RANCH, CA 92694
Phone: (310) 303-8325 Fax: (949) 203-8555
Record ID: **300337BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 27686 MANOR HILL
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (310) 303-8325 Fax: (949) 203-8555
Record ID: **300337CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 29422 CLIPPER WAY
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (310) 303-8325 Fax: (949) 203-8555
Record ID: **300337DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **LUMINANCE HEALTH GROUP, INC.**
Legal Name: LUMINANCE HEALTH GROUP, INC.
Address: 24662 EL CAMINO CAPISTRANO
City, State Zip: DANA POINT, CA 92629
Phone: (310) 303-8325 Fax: (949) 203-8555
Record ID: **300337EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SUNRISE RECOVERY CENTER**
Legal Name: WECARE LLC
Address: 2525 W. WOODLAND DRIVE
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 821-1064 Fax: (714) 459-7393
Record ID: **300338AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CANYON VIEW TREATMENT CENTER**
Legal Name: PULZE RESIDENTIAL CARE GROUP, LLC
Address: 1001 & 1005 S. MOUNTVALE COURT
City, State Zip: ANAHEIM, CA 92808
Phone: (951) 922-5338
Record ID: **300341AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **A BETTER LIFE RECOVERY**
Legal Name: A BETTER LIFE RECOVERY, LLC
Address: 27126 PASEO ESPADA, SUITES 1621-1623
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 313-7443 Fax: (949) 579-2876
Record ID: **300342AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **A BETTER LIFE RECOVERY**
Legal Name: A BETTER LIFE RECOVERY, LLC
Address: 26006 CAMPEON
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (714) 316-4630
Record ID: **300342BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **A BETTER LIFE RECOVERY**
Legal Name: A BETTER LIFE RECOVERY, LLC
Address: 24262 SUNNYBROOK CIRCLE
City, State Zip: LAKE FOREST, CA 92630
Phone: (714) 316-4630
Record ID: **300342CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **CASA GLORIOSA**
Legal Name: GLORIOSA MANAGEMENT, LLC
Address: 25466 GLORIOSA DRIVE
City, State Zip: MISSION VIEJO, CA 92691
Phone: (951) 427-4807 Fax: (949) 305-9054
Record ID: **300345AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **TURNING POINT TREATMENT CENTER**
Legal Name: TURNING POINT TREATMENT CENTER, INC.
Address: 28111 SOMERSET
City, State Zip: MISSION VIEJO, CA 92692
Phone: (949) 215-3775 Fax: (949) 215-3776
Record ID: **300346AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **TURNING POINT TREATMENT CENTER**
Legal Name: TURNING POINT TREATMENT CENTER, INC.
Address: 24851 VIA SANTA CRUZ
City, State Zip: MISSION VIEJO, CA 92692
Phone: (949) 215-0360 Fax: (949) 215-0465
Record ID: **300346BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **FRESH START OF CALIFORNIA**
Legal Name: FRESH START OF CALIFORNIA, LLC
Address: 1210 N ROSS STREET
City, State Zip: SANTA ANA, CA 92701
Phone: (323) 419-7384
Record ID: **300349AP**
Service Type: RES-DETOX
Resident Capacity: 8
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SHEER RECOVERY SERVICES**
Legal Name: SHEER RECOVERY, LLC
Address: 32371 CARIBBEAN DRIVE
City, State Zip: DANA POINT, CA 92629-3533
Phone: (714) 658-3773 Fax: (949) 441-7165
Record ID: **300350AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SHEER RECOVERY SERVICES**
Legal Name: SHEER RECOVERY, LLC
Address: 27130 PASEO ESPADA, SUITE A1422, A1423 & A1424
City, State Zip: SAN JUAN CAPISTRANO, CA 92675-6712
Phone: (714) 658-3773 Fax: (949) 441-7165
Record ID: **300350BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SHEER RECOVERY**
Legal Name: SHEER RECOVERY, LLC
Address: 24621 AQUILLA DRIVE
City, State Zip: DANA POINT, CA 92629-1042
Phone: (714) 658-3773 Fax: (949) 441-7165
Record ID: **300350CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **TRUVIDA RECOVERY**
Legal Name: CREST RECOVERY, LLC
Address: 29522 VIA VALVERDE
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (949) 283-4679
Record ID: **300351AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **TRUVIDA WELLNESS**
Legal Name: CREST RECOVERY, LLC
Address: 23726 BIRTCHER DRIVE
City, State Zip: LAKE FOREST, CA 92630
Phone: (949) 283-4679
Record ID: **300351BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/12/2019 IMS: No

Program Name: **SOUTH SHORES DETOX**
Legal Name: SOUTH SHORES DETOX, LLC
Address: 32851 BUCCANEER STREET
City, State Zip: DANA POINT, CA 92629
Phone: (949) 388-4019
Record ID: **300352AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SURVIVORS LLC**
Legal Name: SURVIVORS LLC
Address: 2082 SE BRISTOL STREET, SUITE 200
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (957) 256-7698
Record ID: **300354AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **FIRST CHOICE DETOX**
Legal Name: PACIFIC VIEW DETOX LLC
Address: 26411 CHAPARRAL PLACE
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 207-8601 Fax: (949) 207-8601
Record ID: **300355AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **ADDICTION CENTER FOR HEALING**
Legal Name: ADDICTION CENTER FOR HEALING
Address: 6 HUGHES
SUITE 130
City, State Zip: IRVINE, CA 92618
Phone: (949) 400-5852
Record ID: **300357AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **DUCK HOUSE TREATMENT & RECOVERY**
Legal Name: DUCK HOUSE, LLC, THE
Address: 952 DAHLIA AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (657) 266-0623 Fax: (714) 852-5643
Record ID: **300358AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **CAPO CANYON RECOVERY**
Legal Name: CAPO CANYON RECOVERY, LLC
Address: 23822 STILLWATER LANE
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (800) 804-8714 Fax: (949) 284-8040
Record ID: **300359AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: Yes

Program Name: **417 RECOVERY**
Legal Name: 417 SAN CLEMENTE, LLC.
Address: 26010 ACERO,
SUITE 200
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 353-5017 Fax: (949) 356-6443
Record ID: **300360AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 12/31/2018 IMS: No

Program Name: **LAGUNA DETOX**
Legal Name: JAWB, LLC.
Address: 226 CLIFF DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (310) 946-8143
Record ID: **300361AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **LAGUNA DETOX**
Legal Name: JAWB, LLC.
Address: 224 CLIFF DRIVE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (310) 946-8143
Record ID: **300361BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **OCEAN GROUP, LLC**
Legal Name: OCEAN GROUP, LLC
Address: 2305 TEMPLE HILLS DR.
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (619) 871-7345
Record ID: **300363AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 4/30/2019 IMS: No

Program Name: **ASPIRE RECOVERY INC.**
Legal Name: ASPIRE RECOVERY INC.
Address: 16390 PACIFIC COAST HIGHWAY SUITE 200
City, State Zip: HUNTINGTON BEACH, CA 92649
Phone: (800) 467-4106 Fax: (855) 806-9448
Record ID: **300364AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **CALIFORNIA PRIME RECOVERY**
Legal Name: CALIFORNIA PRIME RECOVERY SERVICES INC
Address: 17330 NEWHOPE STREET
SUITE A
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (949) 510-3358
Record ID: **300365AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **PROTOTYPES' MOTHER AND CHILD RESIDENTIAL HOMES AT THE TUSTIN FAMILY CAMPUS**
Legal Name: HEALTHRIGHT 360
Address: 15405 LANSDOWNE ROAD
City, State Zip: TUSTIN, CA 92782
Phone: (714) 566-8433 Fax: (714) 566-8433
Record ID: **300366AN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 49
Target Population: 1.4
Expiration Date: 2/28/2019 IMS: No

Program Name: **STAR DETOX CENTER**
Legal Name: SUBSTANCE TREATMENT ADDICTION RECOVERY DETOX CENTER
Address: 1822 SOUTH BAYLESS STREET
City, State Zip: ANAHEIM, CA 92802
Phone: (844) 557-6237 Fax: (657) 699-3127
Record ID: **300367AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 1/31/2019 IMS: Yes

Program Name: **HEALING PATH DETOX**
Legal Name: HEALING PATH DETOX LLC
Address: 7661 AMBERLEAF CIRCLE (UNIT 1, 2, 3 AND 4)
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone:
Record ID: **300368AP**
Service Type: RES-DETOX
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **WAVELENGTHS RECOVERY, LLC**
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 701 HUNTINGTON STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 442-6668 Fax: (714) 442-2354
Record ID: **300369AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **WAVELENGTHS RECOVERY, LLC**
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 301 MAIN STREET, STE. 201
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 312-1011 Fax: (714) 442-2354
Record ID: **300369BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **WAVELENGTHS RECOVERY, LLC**
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 101 HUNTINGTON STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 312-1011 Fax: (714) 442-2354
Record ID: **300369CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **WAVELENGTHS RECOVERY, LLC**
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 7761 GARFIELD AVENUE, UNIT 101
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 375-1178 Fax: (714) 442-2354
Record ID: **300369DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **WAVELENGTHS RECOVERY, LLC**
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 7761 GARFIELD AVENUE, UNIT 2
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 312-1011 Fax: (714) 442-2354
Record ID: **300369EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **RISE AGAIN RECOVERY**
Legal Name: RISE AGAIN RECOVERY
Address: 20932 BROOKHURST STREET, SUITE 101
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (714) 907-1105
Record ID: **300370AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 2/28/2019 IMS: No

Program Name: **STONERIVER GROUP**
Legal Name: STONERIVER GROUP, LLC
Address: 140 AVENIDA ALGODON, UNIT A
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (949) 542-8810
Record ID: **300371AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.13
Expiration Date: 6/30/2019 IMS: No

Program Name: **SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER**
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC
Address: 30471 VIA ALCAZAR
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (714) 232-0649 Fax: (714) 252-0173
Record ID: **300373AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.13
Expiration Date: 12/31/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC**
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC
Address: 25681 SABINA AVE
City, State Zip: MISSION VIEJO, CA 92691
Phone: (714) 232-0649 Fax: (714) 252-0173
Record ID: **300373BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC**
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC
Address: 24522 VANESSA DRIVE
City, State Zip: MISSION VIEJO, CA 92691
Phone: (714) 232-0649 Fax: (714) 252-0173
Record ID: **300373DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **TRUE RECOVERY**
Legal Name: TRUE RECOVERY INC.
Address: 20351 SW ACACIA STREET, FL 2
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (844) 744-8783 Fax: (714) 551-9339
Record ID: **300376AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **DESTINY RECOVERY CENTER, LLC**
Legal Name: DESTINY RECOVERY CENTER, LLC
Address: 23041 AVENIDA DE LA CARLOTA, SUITE 280
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (310) 738-0008
Record ID: **300377AP**
Service Type: NON-DETOX
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **R AND R RECOVERY**
Legal Name: R AND R RECOVERY
Address: 4952 WARNER AVE, SUITE 100
City, State Zip: HUNTINGTON BEACH, CA 92649
Phone: (949) 307-6660
Record ID: **300379AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 2/28/2019 IMS: No

Program Name: **SOLACE HILLS RECOVERY CENTER**
Legal Name: CORRAL MANAGEMENT, LLC
Address: 20641 RED CORRAL ROAD
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (714) 325-1950
Record ID: **300381AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CLEAR LIFE RECOVERY**
Legal Name: KKB HEALTH SOLUTIONS, LLC
Address: 4120 BIRCH STREET, SUITE 121
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (941) 883-1945 Fax: (949) 398-8469
Record ID: **300382AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **NEW EXISTENCE**
Legal Name: NEW EXISTENCE, LLC
Address: 17050 BUSHARD STREET, SUITE 200
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 375-6626 Fax: (866) 991-3182
Record ID: **300384AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **NOVATION**
Legal Name: NOVATION BEHAVIORAL HEALTH, LLC
Address: 1707 EAST BAY AVENUE
City, State Zip: NEWPORT BEACH, CA 92661
Phone: (949) 734-9571 Fax: (888) 411-8786
Record ID: **300385AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **ANCHORED TIDES RECOVERY**
Legal Name: ANCHORED TIDES RECOVERY
Address: 19126 MAGNOLIA STREET, SUITE 101,
City, State Zip: HUNTINGTON BEACH, CA 92646
Phone: (714) 377-7706 Fax: (714) 377-7715
Record ID: **300386AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 6/23/2019 IMS: No

Program Name: **MAINSTAY RECOVERY**
Legal Name: MAINSTAY RECOVERY, LLC
Address: 2790 HARBOR BLVD, SUITE 208
City, State Zip: COSTA MESA, CA 92625
Phone: (417) 343-2426
Record ID: **300387AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **CALIFORNIA ADDICTION INSTITUTE OF MIND AND MEDICINE**
Legal Name: AMERICAN ADDICTION INSTITUTE OF MIND AND MEDICINE
Address: 17662 IRVINE BLVD, SUITE 10
City, State Zip: TUSTIN, CA 92780
Phone: (949) 929-6203
Record ID: **300388AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **DBT CENTER OF ORANGE COUNTY**
Legal Name: MICHELE S LOB, LICENSED MARRIAGE AND FAMILY THERAPY,
A PROFESSIONAL CORPORATION
Address: 4299 MACARTHUR BOULEVARD, #200
City, State Zip: NEWPORT BEACH, CA 92660
Phone: (949) 480-7767 Fax: (949) 209-1977
Record ID: **300625AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **BEGINNINGS**
Legal Name: ELITE CARE, INC.
Address: 1991 ANAHEIM AVENUE, UNIT B
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 954-6135
Record ID: **300626AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **BEGINNINGS**
Legal Name: ELITE CARE, INC.
Address: 1991 ANAHEIM AVENUE,
UNIT A
City, State Zip: COSTA MESA , CA 92627
Phone: (888) 511-0607
Record ID: **300626BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **BEGINNINGS**
Legal Name: ELITE CARE, INC.
Address: 1991 ANAHEIM AVENUE,
UNIT C
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 397-2250
Record ID: **300626CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **STILL WATERS RECOVERY CENTER, INC.**
Legal Name: STILL WATERS RECOVERY CENTER, INC.
Address: 20422 BEACH BOULEVARD, SUITE 235
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 202-9818 Fax: (714) 242-1363
Record ID: **300627AP**
Service Type: NON
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **LOTUS PLACE RECOVERY**
Legal Name: LOTUS PLACE RECOVERY, LLC
Address: 16480 HARBOR BOULEVARD, SUITE 200
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 884-4408 Fax: (714) 617-4125
Record ID: **300628AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **HALO HOUSE**
Legal Name: HALO HEALTH SERVICES, INC.
Address: 2421 TUSTIN AVENUE
City, State Zip: COSTA MESA , CA 92627
Phone: (949) 307-3216
Record ID: **300629AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **COASTLINE RECOVERY**
Legal Name: COASTLINE RECOVERY, LLC
Address: 2102 BUSINESS CENTER DRIVE, SUITE 121
City, State Zip: IRVINE, CA 92612
Phone: (800) 712-9635
Record ID: **300630AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **COASTLINE BEHAVIORAL HEALTH**
Legal Name: COASTLINE RECOVERY, LLC
Address: 18377 BEACH BOULEVARD,
209/210
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (800) 712-9638 Fax: (714) 388-3844
Record ID: **300630BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **TRUE LIFE RECOVERY**
Legal Name: TRUE LIFE RECOVERY, INC.
Address: 16832 MAPLE STREET
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 351-7800
Record ID: **300631AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE HOUSE OF THE RISING SON, LLC**
Legal Name: THE HOUSE OF THE RISING SON, LLC
Address: 147 EL LEVANTE
City, State Zip: SAN CLEMENTE, CA 92672
Phone: (503) 793-8919 Fax: (949) 606-8518
Record ID: **300633AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **NATIONWIDE RECOVERY CENTERS**
Legal Name: NATIONWIDE RECOVERY CENTERS, LLC
Address: 22602 COSTA BELLA
City, State Zip: LAKE FOREST, CA 92630
Phone: (949) 606-5742 Fax: (949) 525-4321
Record ID: **300634AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LEAD RECOVERY CENTER**
Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC
Address: 3151 AIRWAY AVENUE, F107
City, State Zip: COSTA MESA, CA 92626-4607
Phone: (800) 910-9299 Fax: (888) 870-3174
Record ID: **300635AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **LEAD RECOVERY CENTER**
Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC
Address: 1897 ORANGE AVE., UNIT B
City, State Zip: COSTA MESA, CA 92627
Phone: (800) 380-0012 Fax: (888) 870-3174
Record ID: **300635BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **PACIFIC SOLSTICE**
Legal Name: PACIFIC SOLSTICE, LLC
Address: 23461 SOUTH POINTE DRIVE, SUITE 340
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 701-0221
Record ID: **300636AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **SHANTI RECOVERY SERVICES**
Legal Name: SHANTI RECOVERY SERVICES, INC.
Address: 31211 CASA GRANDE DRIVE
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 294-5104
Record ID: **300637AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **BROADWAY DETOX CENTER**
Legal Name: BROADWAY DETOX CENTER, LLC
Address: 6021 JADE CIRCLE
City, State Zip: HUNTINGTON BEACH, CA 92647
Phone: (657) 227-3532
Record ID: **300638AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **MISSION TREATMENT & RECOVERY**
Legal Name: PEPPERTREE MANAGEMENT, LLC
Address: 25352 HILLARY LANE
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 652-5351
Record ID: **300639AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SUSTAIN RECOVERY**
Legal Name: OCTLC, INC.
Address: 125 SOUTH CHAPARRAL COURT, SUITE 200
City, State Zip: ANAHEIM, CA 92808
Phone: (714) 376-5889 Fax: (675) 236-4152
Record ID: **300640AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **ADVANCED RECOVERY SOLUTION**
Legal Name: ADVANCED RECOVERY SOLUTION, LLC.
Address: 3744 N. HERMOSA PLACE
City, State Zip: FULLERTON, CA 92835
Phone: (951) 212-0439
Record ID: **300641BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NEW LIFE TREATMENT CENTER**
Legal Name: NEW LIFE TREATMENT CENTER, INC.
Address: 598 PIERPOINT DRIVE
City, State Zip: COSTA MESA, CA 92626
Phone: (657) 267-0219
Record ID: **300642AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEW LIFE TREATMENT CENTER**
Legal Name: NEW LIFE TREATMENT CENTER, INC.
Address: 1940 WEST ORANGEWOOD AVENUE, #205
City, State Zip: ORANGE, CA 92868
Phone: (626) 644-0070
Record ID: **300642BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEW LIFE TREATMENT CENTER**
Legal Name: NEW LIFE TREATMENT CENTER, INC.
Address: 1764 NORTH MORNINGSIDE STREET
City, State Zip: ORANGE, CA 92867
Phone: (626) 644-0070
Record ID: **300642CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **MILESTONE DETOX**
Legal Name: MILESTONE DETOX, LLC
Address: 31981 CALLE WINONA
City, State Zip: SAN JUAN CAPISTRANO, CA 92675
Phone: (949) 344-8149
Record ID: **300646AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 326 UNIVERSITY DRIVE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 279-1376
Record ID: **300647AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 328 UNIVERSITY DRIVE
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 279-1376
Record ID: **300647BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **REALIGN DETOX & RESIDENTIAL TREATMENT CENTER**
Legal Name: REALIGN DETOX, LLC
Address: 29552 CROWN CREEK
City, State Zip: LAGUNA NIGUEL, CA 92677-3951
Phone: (714) 232-0649 Fax: (714) 821-1084
Record ID: **300648AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **ALTUS TREATMENT SERVICES**
Legal Name: ALTUS TREATMENT CENTRAL, LLC
Address: 145 COLUMBIA,
SUITE 200
City, State Zip: ALISO VIEJO, CA 92656
Phone: (949) 521-6138
Record ID: **300650AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **ALTUS TREATMENT SERVICES**
Legal Name: ALTUS TREATMENT CENTRAL, LLC
Address: 25542 RHODA DRIVE
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 521-6138 Fax: (949) 521-7926
Record ID: **300650BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **ALTUS TREATMENT SERVICES**
Legal Name: ALTUS TREATMENT CENTRAL, LLC
Address: 24072 CASTILLA LANE
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 521-6138 Fax: (949) 521-7926
Record ID: **300650CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **ALTUS TREATMENT SERVICES**
Legal Name: ALTUS TREATMENT CENTRAL, LLC
Address: 24102 LARKWOOD
City, State Zip: LAKE FOREST, CA 92630
Phone: (949) 521-6138
Record ID: **300650DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **EPIC VICTORY, INC.**
Legal Name: EPIC VICTORY, INC.
Address: 23547 MOULTON PARKWAY,
201A & 201B
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (949) 415-9217 Fax: (949) 583-1516
Record ID: **300651AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **12 SOUTH RECOVERY**
Legal Name: 12 SOUTH, LLC
Address: 27285 LAS RAMBLAS,
#147
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 338-2275
Record ID: **300653AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **BEACH CITY TREATMENT**
Legal Name: BEACH CITY TREATMENT, LLC
Address: 421 11TH STREET
City, State Zip: HUNTINGTON BEACH, CA 92648
Phone: (714) 726-8652
Record ID: **300654AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **BEACH CITY TREATMENT**
Legal Name: BEACH CITY TREATMENT, LLC
Address: 30461 PUERTO VALLARTA
City, State Zip: LAGUNA NIGUEL, CA 92677
Phone: (714) 726-8652
Record ID: **300654BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **FRESH START RECOVERY SERVICES**
Legal Name: FRESH START, LLC
Address: 2790 HARBOR BOULEVARD,
SUITE 307 & 309
City, State Zip: COSTA MESA, CA 92627
Phone: (949) 295-2888
Record ID: **300655AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **BRIDGES TO LIFE DETOX**
Legal Name: DAMASCUS ROAD, LLC
Address: 1313 NORTH BROOKHURST STREET
City, State Zip: ANAHEIM, CA 92801
Phone: (714) 232-0649 Fax: (714) 252-0173
Record ID: **300656AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **GUARDIAN HEALTH CARE**
Legal Name: GUARDIAN HEALTH CARE SERVICES, INC.
Address: 1055 CHEYENNE STREET
City, State Zip: COSTA MESA, CA 92626
Phone: (657) 245-3991
Record ID: **300658AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **GUARDIAN HEALTH CARE**
Legal Name: GUARDIAN HEALTH CARE SERVICES, INC.
Address: 2534 SOUTH DEEGAN DRIVE
City, State Zip: SANTA ANA, CA 92704
Phone: (714) 852-3074
Record ID: **300658BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC**
Legal Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC
Address: 10905 EL DOMINO AVENUE
City, State Zip: FOUNTAIN VALLEY, CA 92708
Phone: (714) 673-9007
Record ID: **300659AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **LANDMARK RECOVERY CENTER**
Legal Name: LANDMARK RECOVERY LLC.
Address: 23265 SOUTH POINTE DRIVE,
101
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (888) 792-9170 Fax: (888) 792-2681
Record ID: **300660AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **THE WELL RECOVERY PARTNERS**
Legal Name: THE WELL RECOVERY PARTNERS
Address: 5282 CORNELL AVENUE
City, State Zip: WESTMINSTER, CA 92683
Phone: (714) 316-8100
Record ID: **300662AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PURE PATH RECOVERY**
Legal Name: PURE PATH RECOVERY LLC
Address: 51 SORBONNE STREET
City, State Zip: WESTMINSTER, CA 92683
Phone: (949) 375-0070
Record ID: **300663AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **SAFE AND SOUND TREATMENT, LLC**
Legal Name: SAFE AND SOUND TREATMENT, LLC
Address: 799 W 19TH STREET,
UNIT G
City, State Zip: COSTA MESA, CA 92627
Phone: (714) 454-7502
Record ID: **300666AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **SATORI RECOVERY CENTER**
Legal Name: SATORI RECOVERY CENTER, LLC
Address: 2760 PARK AVENUE
City, State Zip: LAGUNA BEACH, CA 92651
Phone: (626) 825-8805
Record ID: **300667AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SATORI RECOVERY CENTER**
Legal Name: SATORI RECOVERY CENTER, LLC
Address: 26142 BUENA VISTA COURT
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (626) 825-8805
Record ID: **300667BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **NARCONON HUNTINGTON HARBOR HOUSE**
Legal Name: NARCONON FRESH START
Address: 17123 ROUNDHILL DRIVE
City, State Zip: HUNTINGTON BEACH, CA 92649
Phone: (949) 675-8988 Fax: (888) 680-2730
Record ID: **300668AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **THE EDGE, LLC**
Legal Name: THE EDGE, LLC
Address: 26060 ACERO
SUITE 124
City, State Zip: MISSION VIEJO, CA 92691
Phone: (949) 340-7762
Record ID: **300669AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Placer County**

Program Name: **PLACER COUNTY ALCOHOL AND OTHER DRUG TREATMENT PROGRAM**
Legal Name: COUNTY OF PLACER, DEPARTMENT OF HEALTH & HUMAN SERVICES, ADULT SYSTEM OF CARE
Address: 101 CIRBY HILLS DRIVE
City, State Zip: ROSEVILLE, CA 95678
Phone: (916) 787-8800 Fax: (916) 787-8857
Record ID: **310002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PLACER COUNTY ALCOHOL AND OTHER DRUG TREATMENT PROGRAM**
Legal Name: COUNTY OF PLACER, DEPARTMENT OF HEALTH & HUMAN SERVICES, ADULT SYSTEM OF CARE
Address: 11512 B AVENUE
City, State Zip: AUBURN, CA 95603
Phone: (530) 889-7240 Fax: (530) 889-7293
Record ID: **310002BN**
Service Type: NON
Target Population: 1.8
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEW LEAF COUNSELING SERVICES**
Legal Name: JAMES HARDWICK
Address: 1254 HIGH STREET
City, State Zip: AUBURN, CA 95603-5015
Phone: (530) 889-9195 Fax: (530) 889-9197
Record ID: **310007AP**
Service Type: NON
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **HOPE HELP AND HEALING**
Legal Name: HOPE HELP AND HEALING
Address: 11960 HERITAGE OAK PLACE, SUITE 20
City, State Zip: AUBURN, CA 95603-2403
Phone: (530) 885-4249 Fax: (530) 885-6191
Record ID: **310010CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **TRUE STEP**
Legal Name: HOPE HELP AND HEALING
Address: 318 LINCOLN WAY, #B
City, State Zip: AUBURN, CA 95603
Phone: (530) 392-0432 Fax: (530) 885-6191
Record ID: **310010DN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **KOINONIA GROUP HOME #1**
Legal Name: KOINONIA FOSTER HOMES, INC.
Address: 3880 OAK TREE LANE
City, State Zip: LOOMIS, CA 95650-9316
Phone: (916) 652-6557 Fax: (916) 652-8930
Record ID: **310012AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **KOINONIA GROUP HOME #2**
Legal Name: KOINONIA FOSTER HOMES, INC.
Address: 6331 KING ROAD
City, State Zip: LOOMIS, CA 95650-8801
Phone: (916) 652-3842 Fax: (916) 652-9586
Record ID: **310012BN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **KOINONIA GROUP HOME #3**
Legal Name: KOINONIA FOSTER HOMES, INC.
Address: 5440 PARAGON STREET
City, State Zip: ROCKLIN, CA 95677-2217
Phone: (916) 624-2636 Fax: (916) 624-2069
Record ID: **310012CN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **KOINONIA GROUP HOME #4**
Legal Name: KOINONIA FOSTER HOMES, INC.
Address: 8200 KING ROAD
City, State Zip: LOOMIS, CA 95650-8813
Phone: (916) 652-0516 Fax: (916) 652-4237
Record ID: **310012DN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **AUBURN CAMPUS-OUTPATIENT PROGRAM**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 12183 LOCKSLEY LANE,
SUITE 101, 102, 103 & 104
City, State Zip: AUBURN, CA 95602-2050
Phone: (530) 885-1961 Fax: (916) 797-8979
Record ID: **310019AN**
Service Type: NON
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **AUBURN CAMPUS RESIDENTIAL PROGRAM**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 12125 SHALE RIDGE ROAD
City, State Zip: AUBURN, CA 95602
Phone: (530) 885-1917 Fax: (530) 273-7740
Record ID: **310019BN**
Service Type: RES-DETOX
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **LINCOLN SERVICE CENTER**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 1530 3RD STREET, SUITE 212
City, State Zip: LINCOLN, CA 95648-2500
Phone: (916) 434-8927 Fax: (916) 434-0678
Record ID: **310019CN**
Service Type: NON
Target Population: 1.9
Expiration Date: 5/31/2019 IMS: No

Program Name: **ROSEVILLE CAMPUS**
Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 730 SUNRISE AVENUE, SUITES 201, 250, 260, 261, & 271
City, State Zip: ROSEVILLE, CA 95661-4553
Phone: (916) 782-3737 Fax: (916) 782-3739
Record ID: **310019EN**
Service Type: NON
Target Population: 1.9
Expiration Date: 5/31/2019 IMS: No

Program Name: **SIERRA NATIVE ALLIANCE - WHITE BISON PROGRAM (WBP)**
Legal Name: NATIVE ALLIANCE OF THE SIERRA NEVADA FOOTHILLS
Address: 610 AUBURN RAVINE ROAD, SUITE G & F
City, State Zip: AUBURN, CA 95603-3930
Phone: (530) 888-8767 Fax: (530) 888-8757
Record ID: **310020AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NEW LEAF COUNSELING SERVICES HOFFMAN HOUSE**
Legal Name: JAMES N HARDWICK
Address: 199 HOFFMAN AVENUE
City, State Zip: AUBURN, CA 95603
Phone: (530) 885-9067 Fax: (530) 885-2534
Record ID: **310022AP**
Service Type: RES
Resident Capacity: 9
Total Occupancy: 15
Target Population: 1.4
Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Plumas County**

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Riverside County**

Program Name: **ABC RECOVERY CENTERS**
Legal Name: A.B.C. RECOVERY CENTER, INC.
Address: 44374 PALM STREET AND
44435 BISKRA STREET
City, State Zip: INDIO, CA 92201
Phone: (760) 342-6616 Fax: (760) 347-8276
Record ID: **330001AN**
Service Type: RES-DETOX
Resident Capacity: 75
Total Occupancy: 75
Target Population: 1.9
Expiration Date: 6/30/2018 IMS: No

Program Name: **ABC RECOVERY CENTER OUTPATIENT PROGRAM**
Legal Name: A.B.C. RECOVERY CENTER, INC.
Address: 82353 INDIO BLVD.
City, State Zip: INDIO, CA 92201
Phone: (760) 342-6616 Fax: (760) 347-8276
Record ID: **330001BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 7/31/2017 IMS: No

Program Name: **THE RANCH**
Legal Name: THE RANCH RECOVERY CENTERS, INC.
Address: 7885 ANNANDALE AVENUE
City, State Zip: DESERT HOT SPRINGS, CA 92240-1419
Phone: (760) 329-2924
Record ID: **330003AN**
Service Type: RES-DETOX
Resident Capacity: 46
Total Occupancy: 46
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **HACIENDA VALDEZ**
Legal Name: THE RANCH RECOVERY CENTERS, INC.
Address: 12890 QUINTA WAY
City, State Zip: DESERT HOT SPRINGS, CA 92240-4852
Phone: (760) 329-2959 Fax: (760) 329-2953
Record ID: **330003BN**
Service Type: RES-DETOX
Resident Capacity: 35
Total Occupancy: 35
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **MEN'S SUBSTANCE ABUSE RECOVERY HOME**
Legal Name: WHITESIDE MANOR
Address: 2709, 2743 & 2759 ORANGE STREET
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 686-9454 Fax: (951) 686-2303
Record ID: **330004AN**
Service Type: RES-DETOX
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **WILSHIRE HOUSE**
Legal Name: WHITESIDE MANOR
Address: 2452 AND 2456 WILSHIRE STREET
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 682-6631 Fax: (951) 686-2303
Record ID: **330004TN**
Service Type: RES-DETOX
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 11/30/2018 IMS: No

Program Name: **PALM AVENUE WOMEN'S PROGRAM**
Legal Name: WHITESIDE MANOR
Address: 4750 PALM AVENUE
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 686-0021 Fax: (951) 686-0026
Record ID: **330004WN**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.3
Expiration Date: 10/31/2017 IMS: No

Program Name: **OMEGA/ BETA PROGRAM LAKE ELSINORE**
Legal Name: RIVERSIDE RECOVERY RESOURCES
Address: 600 THIRD STREET, SUITE C
City, State Zip: LAKE ELSINORE, CA 92530
Phone: (951) 674-5354 Fax: (951) 674-5227
Record ID: **330009ON**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **TIME TO CHANGE RECOVERY**
Legal Name: TTC RECOVERY, INC.
Address: 29204 SHIPWRIGHT DRIVE
City, State Zip: MENIFEE, CA 92585
Phone: (888) 948-1468
Record ID: **330010AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **WOODCREST RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 17270 ROOSEVELT STREET
City, State Zip: RIVERSIDE, CA 92508
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013AN**
Service Type: RES-DETOX
Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.2
Expiration Date: 11/30/2017 IMS: Yes

Program Name: **A WOMAN'S PLACE**
Legal Name: MFI RECOVERY CENTER
Address: 4295 BROCKTON AVENUE
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013GN**
Service Type: RES-DETOX
Resident Capacity: 38
Total Occupancy: 64
Target Population: 1.4
Expiration Date: 7/31/2019 IMS: Yes

Program Name: **MFI RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 5870 ARLINGTON AVENUE
City, State Zip: RIVERSIDE, CA 92504
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MFI RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 1035 WEST RAMSEY STREET, SUITE A
City, State Zip: BANNING, CA 92220
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **MFI RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 4440 UNIVERSITY AVENUE, UNIT 2, 3, 4, 5, 7, 8, 9, 11, 12 & 13
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013KN**
Service Type: RES-DETOX
Resident Capacity: 33
Total Occupancy: 33
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: Yes

Program Name: **VALLEY-WIDE COUNSELING SERVICES**
Legal Name: MFI RECOVERY CENTER
Address: 1604 SOUTH SANTA FE AVENUE, SUITE 403
City, State Zip: SAN JACINTO, CA 92583
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013QN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **MFI RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 24885 WHITEWOOD ROAD, #105
City, State Zip: MURRIETA, CA 92563
Phone: (951) 683-6596 Fax: (951) 351-1554
Record ID: **330013RN**
Service Type: NON
Target Population: 1.5
Expiration Date: 7/31/2019 IMS: No

Program Name: **LA VISTA, A PROGRAM OF MFI RECOVERY CENTER**
Legal Name: MFI RECOVERY CENTER
Address: 2220 GIRARD STREET, BLDG. A & B & 294 E. MIDWAY AVENUE
City, State Zip: SAN JACINTO, CA 92562
Phone: (951) 925-8450 Fax: (951) 658-6686
Record ID: **330013SN**
Service Type: RES-DETOX
Resident Capacity: 29
Total Occupancy: 29
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **MICHAEL'S HOUSE**
Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC
Address: 430 SOUTH CAHUILLA ROAD
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 416-7951
Record ID: **330014BP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PALM SPRINGS SERENITY RETREAT**
Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC
Address: 2095 NORTH INDIAN CANYON DRIVE
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 416-7951 Fax: (760) 416-1330
Record ID: **330014CP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **MICHAEL'S HOUSE**
Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC
Address: 1910 SOUTH CAMINO REAL
City, State Zip: PALM SPRINGS, CA 92264
Phone: (760) 320-3433
Record ID: **330014DP**
Service Type: RES-DETOX
Resident Capacity: 60
Total Occupancy: 110
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **MICHAEL'S HOUSE OUTPATIENT CENTER**
Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC
Address: 515 NORTH PALM CANYON DRIVE, BUILDING H
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 318-1010 Fax: (760) 325-0112
Record ID: **330014EP**
Service Type: NON
Target Population: 1.8
Expiration Date: 11/30/2018 IMS: No

Program Name: **SOROPTIMIST HOUSE OF HOPE #1**
Legal Name: SOROPTIMIST HOUSE OF HOPE, INC.
Address: 13525 CIELO AZUL WAY
City, State Zip: DESERT HOT SPRINGS, CA 92240
Phone: (760) 329-4673 Fax: (760) 329-7311
Record ID: **330016AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **METCALF RECOVERY RANCH**
Legal Name: VARP, INC.
Address: 9826 18TH AVENUE
City, State Zip: BLYTHE, CA 92225
Phone: (760) 922-8625 Fax: (760) 922-6717
Record ID: **330020AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **SAN JACINTO SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 1370 S. STATE STREET, SUITE A
City, State Zip: SAN JACINTO, CA 92583
Phone: (951) 791-3350 Fax: (951) 791-3353
Record ID: **330023BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **RIVERSIDE SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 2085 RUSTIN AVENUE
City, State Zip: RIVERSIDE, CA 92507
Phone: (951) 955-2105 Fax: (951) 955-8060
Record ID: **330023CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORONA SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 623 NORTH MAIN STREET, SUITE D-11
City, State Zip: CORONA, CA 92880
Phone: (951) 737-2962
Record ID: **330023DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM**
Legal Name: COUNTY OF RIVERSIDE
Address: 83-912 AVENUE 45, SUITE 9
City, State Zip: INDIO, CA 92201
Phone: (760) 347-0754 Fax: (760) 347-8507
Record ID: **330023EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **BLYTHE SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 1297 WEST HOBSON WAY
City, State Zip: BLYTHE, CA 92225-1423
Phone: (760) 921-5000 Fax: (760) 921-5002
Record ID: **330023FN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CATHEDRAL CITY SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 68-615 PEREZ ROAD, SUITE 3A, 4A, 5A, 6A AND 7A
City, State Zip: CATHEDRAL CITY, CA 92234
Phone: (760) 770-2213 Fax: (760) 770-2240
Record ID: **330023HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **HILL ALCOHOL & DRUG TREATMENT**
Legal Name: COMMUNITY SOLUTIONS, INC.
Address: 41877 NORTH ENTERPRISE CIRCLE, #100
City, State Zip: TEMECULA, CA 92590
Phone: (951) 719-3685 Fax: (951) 719-3684
Record ID: **330032BP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **CASA LAS PALMAS RECOVERY HOME**
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.
Address: 83844 HOPI AVENUE
City, State Zip: INDIO, CA 92203
Phone: (760) 347-9442
Record ID: **330037AN**
Service Type: RES
Resident Capacity: 7
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **CASA CECILIA RECOVERY HOME**
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.
Address: 83885 ROSA AVENUE
City, State Zip: THERMAL, CA 92274
Phone: (760) 398-2008 Fax: (760) 342-8022
Record ID: **330037BN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **RIVERSIDE COUNTY LATINO COMMISSION COUNSELING CENTER**
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.
Address: 1612 FIRST STREET
City, State Zip: COACHELLA, CA 92236
Phone: (760) 398-9000 Fax: (760) 398-9790
Record ID: **330037DN**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **PERRIS VALLEY RECOVERY PROGRAMS, INC.**
Legal Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.
Address: 236 E. THIRD STREET,
B
City, State Zip: PERRIS, CA 92570
Phone: (951) 657-2960 Fax: (951) 940-4600
Record ID: **330038BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **10 ACRE RANCH, INC.**
Legal Name: 10 ACRE RANCH, INC.
Address: 5953 GRAND AVENUE
City, State Zip: RIVERSIDE, CA 92504
Phone: (951) 784-7081 Fax: (951) 784-7084
Record ID: **330042BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **10 ACRE RANCH, INC.**
Legal Name: 10 ACRE RANCH, INC.
Address: 4175 BROCKTON AVENUE
City, State Zip: RIVERSIDE, CA 92501-1369
Phone: (951) 394-8108 Fax: (951) 394-8109
Record ID: **330042CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **THE HIGH ROAD PROGRAM**
Legal Name: THE HIGH ROAD PROGRAM
Address: 3579 ARLINGTON AVENUE, SUITE 200
City, State Zip: RIVERSIDE, CA 92506
Phone: (951) 781-6762 Fax: (951) 781-6249
Record ID: **330050AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **THE AWARENESS PROGRAM**
Legal Name: AWARENESS PROGRAM, INC.
Address: 45926 OASIS STREET
City, State Zip: INDIO, CA 92201
Phone: (760) 342-1233 Fax: (760) 342-5344
Record ID: **330051AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **SUNRISE RECOVERY RANCH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 6690 LIMONITE FRONTAGE ROAD
City, State Zip: RIVERSIDE, CA 92509
Phone: (951) 328-0146 Fax: (949) 675-4285
Record ID: **330056BP**
Service Type: RES-DETOX
Resident Capacity: 13
Total Occupancy: 13
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **SUNRISE RECOVERY RANCH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 6798 LIMONITE FRONTAGE ROAD
City, State Zip: RIVERSIDE, CA 92509
Phone: (951) 328-0146 Fax: (949) 675-4285
Record ID: **330056CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SUNRISE RECOVERY RANCH**
Legal Name: SOBER LIVING BY THE SEA, INC.
Address: 6770 LIMONITE FRONTAGE ROAD
City, State Zip: RIVERSIDE, CA 92509
Phone: (951) 328-0146 Fax: (949) 675-4285
Record ID: **330056DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **THE WYLIE CENTER**
Legal Name: THE CAROLYN E. WYLIE CENTER FOR CHILDREN, YOUTH & FAMILIES
Address: 4164 BROCKTON AVENUE
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 683-5193 Fax: (909) 683-6019
Record ID: **330065AN**
Service Type: NON
Target Population: 1.4
Expiration Date: 2/28/2018 IMS: No

Program Name: **U. S. VETS SUBSTANCE ABUSE TREATMENT PROGRAM/VETERANS IN PROGRESS I**
Legal Name: UNITED STATES VETERANS INITIATIVE
Address: 15105 6TH STREET, ROOMS 323-326
City, State Zip: MARCH ARB, CA 92518
Phone: (951) 999-9120 Fax: (951) 656-6890
Record ID: **330075AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 11/30/2017 IMS: No

Program Name: **TEMECULA VALLEY TREATMENT CENTER**
Legal Name: WCHS, INC.
Address: 40700 CALIFORNIA OAKS ROAD, SUITES 201, 202 AND 203
City, State Zip: MURRIETA, CA 92562
Phone: (951) 894-5072 Fax: (951) 894-7324
Record ID: **330081AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **DESERT TREATMENT CLINIC**
Legal Name: WCHS, INC.
Address: 1330 NORTH INDIAN CANYON DRIVE, SUITES A, B AND C
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 322-9065 Fax: (760) 322-8916
Record ID: **330081CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **RIVERSIDE TREATMENT CENTER**
Legal Name: WCHS, INC.
Address: 1021 WEST LA CADENA
City, State Zip: RIVERSIDE, CA 92501
Phone: (951) 784-8010 Fax: (951) 784-2859
Record ID: **330081DP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **SPENCER RECOVERY CENTERS**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 1276 NORTH PALM CANYON DRIVE, #204
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 778-4876 Fax: (949) 313-5240
Record ID: **330086AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **PALM SPRINGS RECOVERY**
Legal Name: SPENCER RECOVERY CENTERS, INC.
Address: 1404 NORTH PALM CANYON DRIVE
City, State Zip: PALM SPRINGS, CA 92262
Phone: (949) 376-3705 Fax: (949) 376-6862
Record ID: **330086BP**
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **FORTERUS HEALTH CARE SERVICES, INC.**
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.
Address: 30852 HIGHLAND VISTA CIRCLE
City, State Zip: TEMECULA, CA 92591
Phone: (951) 837-2401 Fax: (951) 848-9402
Record ID: **330098BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **FORTERUS HEALTH CARE SERVICES, INC.**
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.
Address: 41126 ENGLEMANN OAK STREET
City, State Zip: MURRIETA, CA 92562
Phone: (951) 894-8641 Fax: (951) 848-9402
Record ID: **330098GP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **FORTERUS HEALTH CARE SERVICES, INC.**
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.
Address: 40734 SYMERON WAY
City, State Zip: MURRIETA, CA 92562
Phone: (951) 894-8641 Fax: (951) 848-9402
Record ID: **330098JP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **FORTERUS HEALTH CARE SERVICES**
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.
Address: 41655 DATE STREET, #101
City, State Zip: MURRIETA, CA 92562
Phone: (951) 894-8620 Fax: (951) 848-9402
Record ID: **330098KP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **RANCH CREEK RECOVERY**
Legal Name: RANCH CREEK RECOVERY, INC.
Address: 25650 BASS POINT
City, State Zip: MURRIETA, CA 92592
Phone: (951) 676-9111 Fax: (951) 571-4841
Record ID: **330100AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **RANCH CREEK RECOVERY OUTPATIENT**
Legal Name: RANCH CREEK RECOVERY, INC.
Address: 43264 BUSINESS PARK DRIVE #101
City, State Zip: TEMECULA, CA 92590
Phone: (951) 696-9200 Fax: (951) 695-9366
Record ID: **330100BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **PHYSICIANS FOR HEALTHY HOSPITALS, INC. / HEMET VALLEY RECOVERY CENTER**
Legal Name: PHYSICIANS FOR HEALTHY HOSPITALS, INC.
Address: 371 NORTH WESTON PLACE
City, State Zip: HEMET, CA 92543
Phone: (951) 765-4900 Fax: (951) 765-4764
Record ID: **330101AP**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA DETOX**
Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.
Address: 42012 DAHLIA WAY
City, State Zip: TEMECULA, CA 92591
Phone: (714) 854-2026
Record ID: **330105AP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY**
Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.
Address: 41743 ENTERPRISE CIRCLE N.
#208
City, State Zip: TEMECULA, CA 92590
Phone: (714) 854-2026
Record ID: **330105BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **DESERT PALMS RECOVERY**
Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC
Address: 67580 JONES ROAD
City, State Zip: CATHEDRAL CITY, CA 92234
Phone: (760) 969-4140 Fax: (760) 969-4169
Record ID: **330112BP**
Service Type: RES-DETOX
Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **SUNSPIRE HEALTH IOP**
Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC
Address: 73-771 DINAH SHORE DRIVE,
SUITE 200
City, State Zip: PALM DESERT, CA 92211
Phone: (760) 464-2611 Fax: (760) 969-4179
Record ID: **330112CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SERENITY PALMS**
Legal Name: IRECOVER TREATMENT CENTERS INC.
Address: 37066 BANKSIDE DRIVE
City, State Zip: CATHEDRAL CITY, CA 92234
Phone: (760) 459-3736 Fax: (406) 784-3994
Record ID: **330113AP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **ADDICTION THERAPEUTIC SERVICES**
Legal Name: J. HERNDONS, LLC
Address: 559 S. PALM CANYON DRIVE, SUITE B-101
City, State Zip: PALM SPRINGS, CA 92264
Phone: (760) 778-6120 Fax: (760) 406-6077
Record ID: **330114AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **AJ'S AMETHYST HOUSE**
Legal Name: B II A J OUR HOUSE, LLC
Address: 1119 W. 7TH STREET
City, State Zip: SAN JACINTO, CA 92582
Phone: (951) 654-1089 Fax: (951) 654-7868
Record ID: **330115AP**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 32
Target Population: 1.3
Expiration Date: 12/31/2017 IMS: No

Program Name: **KEN SEELEY COMMUNITIES**
Legal Name: INTERVENTION911
Address: 420 S PALM CANYON DRIVE
SUITE C AND D
City, State Zip: PALM SPRINGS, CA 92262-7304
Phone: (323) 401-3660
Record ID: **330116BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **BELLA MONTE RECOVERY**
Legal Name: BELLA MONTE RECOVERY LLC
Address: 68111 CALLE TIENDAS
City, State Zip: DESERT HOT SPRINGS, CA 92240
Phone: (760) 676-5125 Fax: (760) 671-9806
Record ID: **330117AP**
Service Type: RES
Resident Capacity: 38
Total Occupancy: 38
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **2 SHINE AGAIN**
Legal Name: 2 SHINE AGAIN INC.
Address: 37347 AVENIDA CHAPALA
City, State Zip: TEMECULA, CA 92592
Phone: (951) 303-3056 Fax: (951) 303-3056
Record ID: **330119AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SECOND 2 NONE RECOVERY SERVICES**
Legal Name: OPTIMAL METABOLIC SOLUTIONS, LLC
Address: 40165 MURRIETA HOT SPRINGS ROAD, SUITE I
City, State Zip: MURRIETA, CA 92563
Phone: (951) 461-1800 Fax: (951) 667-3383
Record ID: **330123AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **TEMECULA SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 40925 COUNTY CENTER DRIVE, SUITE #200
City, State Zip: TEMECULA, CA 92590
Phone: (951) 600-6360 Fax: (951) 600-6850
Record ID: **330124BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **DESERT HOT SPRINGS SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 14320 PALM DRIVE
City, State Zip: DESERT HOT SPRINGS, CA 92240
Phone: (760) 773-6767 Fax: (760) 773-6760
Record ID: **330124CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **LAKE ELSINORE SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 31760 CASINO DRIVE, SUITE 200
City, State Zip: LAKE ELSINORE, CA 92530
Phone: (951) 471-4649 Fax: (951) 471-4687
Record ID: **330124DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **BANNING SAPT**
Legal Name: COUNTY OF RIVERSIDE
Address: 1330 W. RAMSEY STREET
City, State Zip: BANNING, CA 92220
Phone: (951) 849-7142 Fax: (951) 849-1762
Record ID: **330124EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **SOVEREIGN HEALTH OF CALIFORNIA**
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.
Address: 69508 BORREGO ROAD
City, State Zip: CATHEDRAL CITY, CA 92234
Phone: (949) 324-2818 Fax: (760) 699-2450
Record ID: **330125BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **BLUESTONE RECOVERY, INC.**
Legal Name: BLUESTONE RECOVERY, INC.
Address: 1660 CHICAGO AVENUE, #M-11
City, State Zip: RIVERSIDE, CA 92507
Phone: (951) 823-0540 Fax: (951) 823-0541
Record ID: **330127AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SOUTH CALIFORNIA ROAD TO RECOVERY**
Legal Name: MALIBU BEHAVIORAL HEALTH SERVICES, INC.
Address: 7057 GASKIN PLACE
City, State Zip: RIVERSIDE, CA 92506
Phone: (949) 397-5056
Record ID: **330128AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **THE CENTER FOR LIFE CHANGE**
Legal Name: THE CENTER FOR LIFE CHANGE, INC.
Address: 43397 BUSINESS PARK DRIVE, SUITE D8
City, State Zip: TEMECULA, CA 92590
Phone: (951) 775-4000
Record ID: **330129AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **WEST COAST RECOVERY CENTER, LLC**
Legal Name: WEST COAST RECOVERY CENTER, LLC
Address: 910 N STATE STREET
City, State Zip: HEMET, CA 92543
Phone: (951) 929-8200 Fax: (951) 929-8750
Record ID: **330130BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **WEST COAST RECOVERY CENTER, LLC**
Legal Name: WEST COAST RECOVERY CENTER, LLC
Address: 910 N STATE STREET,
D
City, State Zip: HEMET, CA 92543
Phone: (951) 929-8200 Fax: (951) 929-8750
Record ID: **330130CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SOVEREIGN HEALTH CANTERA**
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.
Address: 501 N. CANTERA CIRCLE
City, State Zip: PALM SPRINGS, CA 92262
Phone: (949) 276-5553
Record ID: **330131AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **ADELANTE RECOVERY CENTER, INC.**
Legal Name: ADELANTE RECOVERY CENTER, INC.
Address: 23970 SPENSER BUTTE DRIVE
City, State Zip: PERRIS, CA 92570
Phone: (951) 657-7863 Fax: (951) 943-9251
Record ID: **330132AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **GRANJA RESIDENTIAL DETOXIFICATION AND TREATMENT SERVICES**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 39689 GRANJA COURT
City, State Zip: TEMECULA, CA 92592
Phone: (951) 693-9200 Fax: (951) 929-8500
Record ID: **330133AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 25827 BAY MEADOWS WAY
City, State Zip: MURRIETA, CA 92563
Phone: (951) 302-1247 Fax: (915) 929-8500
Record ID: **330133BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 34480 SYCAMORE SPRINGS ROAD
City, State Zip: HEMET, CA 92544
Phone: (951) 693-9200 Fax: (951) 693-9200
Record ID: **330133CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 27600 SUNDAY DRIVE
City, State Zip: TEMECULA, CA 92590
Phone: (951) 308-0018 Fax: (951) 929-8500
Record ID: **330133DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 784 OLIVETTE STREET
City, State Zip: HEMET, CA 92543
Phone: (951) 929-8200
Record ID: **330133FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **WEST COAST COUNSELING WELLNESS CENTERS**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 660 N CAWSTON AVENUE
City, State Zip: HEMET, CA 92545
Phone: (951) 929-8200
Record ID: **330133GP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **WEST COAST WELLNESS CENTERS**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 26419 LIBERTY DRIVE
City, State Zip: HEMET, CA 92544
Phone: (714) 232-0649 Fax: (714) 549-7393
Record ID: **330133HP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 36480 VILLA DEL SOL
City, State Zip: WILDOMAR, CA 92590
Phone: (951) 223-4695 Fax: (951) 929-2780
Record ID: **330133JP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 31631 AUTO CENTER DRIVE
City, State Zip: LAKE ELSINORE, CA 92530
Phone: (951) 929-8200 Fax: (951) 929-2780
Record ID: **330133KP**
Service Type: RES-DETOX
Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 44240 LA CRUZ DRIVE
City, State Zip: TEMECULA, CA 92590
Phone: (951) 223-4695 Fax: (951) 929-2780
Record ID: **330133LP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 42200 CALLE BARBONA
City, State Zip: TEMECULA, CA 92590
Phone: (951) 223-4695 Fax: (951) 929-2780
Record ID: **330133MP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **MOUNTAINSIDE RECOVERY CENTER**
Legal Name: WEST COAST WELLNESS CENTERS LLC
Address: 21952 AVENIDA DE ARBOLES
City, State Zip: MURRIETA, CA 92562
Phone: (951) 223-4695 Fax: (951) 929-2780
Record ID: **330133NP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 3/31/2019 IMS: No

Program Name: **HEARTH STONE HOUSE**
Legal Name: HEARTH STONE HOUSE, INC
Address: 44500 SAN PASCAUL AVENUE
City, State Zip: PALM DESERT, CA 92260
Phone: (760) 779-1999 Fax: (760) 799-8999
Record ID: **330134AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CALIFORNIA HIGHLANDS ADDICTION TREATMENT**
Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC
Address: 15986 S. HIGHLAND SPRINGS AVENUE
City, State Zip: BANNING, CA 92220
Phone: (213) 787-5755 Fax: (909) 245-1090
Record ID: **330135AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **BEST NEW LIFE RECOVERY**
Legal Name: BROOKE ELIZABETH BEST-FREEMAN
Address: 20755 CARANCHO ROAD
City, State Zip: TEMECULA, CA 92590
Phone: (951) 545-4606
Record ID: **330137BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE KILOBY CENTER FOR RECOVERY, INC.**
Legal Name: THE KILOBY CENTER FOR RECOVERY, INC.
Address: 71-777 SAN JACINTO DRIVE, SUITE 102
City, State Zip: RANCHO MIRAGE, CA 92270
Phone: (442) 666-8526
Record ID: **330138AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **NEW LIFE RIVERSIDE SUBSTANCE USE**
Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM
Address: 771 BLAINE STREET, SUITE C
City, State Zip: RIVERSIDE, CA 92507
Phone: (951) 358-4120 Fax: (951) 358-4189
Record ID: **330139AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **DAY REPORTING CENTER RIVERSIDE SUBSTANCE USE**
Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM
Address: 1020 IOWA AVENUE, SUITE B
City, State Zip: RIVERSIDE, CA 92507
Phone: (951) 358-6691 Fax: (951) 358-4479
Record ID: **330139BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **BLUE TIGER RECOVERY**
Legal Name: BLUE TIGER RECOVERY LLC
Address: 2825 E TAHQUITZ CANYON WAY, BUILDING C
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 534-3487 Fax: (760) 406-4045
Record ID: **330140AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FULL CIRCLE RECOVERY**
Legal Name: FULL CIRCLE RECOVERY, INC.
Address: 1840 LAMPTON LANE
City, State Zip: NORCO, CA 92860
Phone: (951) 737-6199 Fax: (951) 737-6199
Record ID: **330141AN**
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **FULL CIRCLE RECOVERY**
Legal Name: FULL CIRCLE RECOVERY, INC.
Address: 139 TRAKEHNER
City, State Zip: NORCO, CA 92860
Phone: (951) 737-6199 Fax: (951) 737-6199
Record ID: **330141BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **FULL CIRCLE RECOVERY, INC.**
Legal Name: FULL CIRCLE RECOVERY, INC.
Address: 1860 LAMPTON LANE
City, State Zip: NORCO, CA 92860
Phone: (951) 737-6199 Fax: (951) 737-6199
Record ID: **330141CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **CLEAR VISION RECOVERY CENTER**
Legal Name: CLEAR VISION, LLC
Address: 16891 ALITA DRIVE
City, State Zip: RIVERSIDE, CA 92504
Phone: (951) 313-7403 Fax: (951) 787-4962
Record ID: **330142AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **PHOENIX RISING RECOVERY**
Legal Name: EXECUTIVE RECOVERY GROUP, INC.
Address: 35450 PEGASUS COURT
City, State Zip: PALM DESERT, CA 92211
Phone: (760) 409-1287
Record ID: **330143AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **PHOENIX RISING RECOVERY**
Legal Name: EXECUTIVE RECOVERY GROUP, INC.
Address: 77725 ENFIELD LANE,
100/200
City, State Zip: PALM DESERT, CA 92211
Phone: (760) 409-1287
Record ID: **330143BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **RANCHO MILAGRO RECOVERY, INC.**
Legal Name: RANCHO MILAGRO RECOVERY, INC.
Address: 31985 HONEYSUCKLE CIRCLE
City, State Zip: WINCHESTER, CA 92596
Phone: (951) 384-2672
Record ID: **330144AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SUN RAY ADDICTIONS COUNSELING & EDUCATION**
Legal Name: SUN RAY HOLDING COMPANY, LLC
Address: 950 N STATE STREET, SUITE D & E
City, State Zip: HEMET, CA 92543
Phone: (951) 652-3560 Fax: (951) 929-8750
Record ID: **330145AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA ADDICTION CENTER**
Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER
Address: 36500 DE PORTOLA ROAD
City, State Zip: TEMECULA, CA 92592
Phone: (951) 302-2481 Fax: (951) 302-2392
Record ID: **330146AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA ADDICTION CENTER**
Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER
Address: 44274 GEORGE CUSHMAN COURT #208
City, State Zip: TEMECULA, CA 92592
Phone: (714) 619-5081 Fax: (714) 619-5084
Record ID: **330146BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **LEE'S TREATMENT AND RECOVERY**
Legal Name: LEE'S TREATMENT AND RECOVERY, LLC
Address: 245 N. LINCOLN
City, State Zip: CORONA, CA 92882-1851
Phone: (877) 251-3669 Fax: (951) 737-6691
Record ID: **330147AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **PALM DESERT RECOVERY CENTER**
Legal Name: PALM DESERT RECOVERY CENTER, INC.
Address: 73733 FRED WARING DRIVE,
SUITE 100
City, State Zip: PALM DESERT, CA 92260
Phone: (760) 230-5300 Fax: (760) 990-2247
Record ID: **330148AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **ZEN MOUNTAIN PATH**
Legal Name: ZEN RECOVERY, LLC
Address: 26299 TAHQUITZ DRIVE
City, State Zip: IDYLLWILD, CA 92549
Phone: (714) 604-2684
Record ID: **330149AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **INLAND DETOX, INC**
Legal Name: INLAND DETOX, INC
Address: 38630 MESA ROAD
City, State Zip: TEMECULA, CA 92592
Phone: (951) 355-9116
Record ID: **330150AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **SOLUTION BASED TREATMENT & DETOX**
Legal Name: SCE CORP.
Address: 41017 ARRON COURT
City, State Zip: MURRIETA, CA 92562
Phone: (951) 698-4823 Fax: (951) 696-9783
Record ID: **330152AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **PACIFIC GROVE HOSPITAL**
Legal Name: VISTA BEHAVIORAL HOSPITAL, LLC
Address: 5900 BROCKTON AVENUE
City, State Zip: RIVERSIDE, CA 92506
Phone: (951) 275-8400 Fax: (951) 786-0293
Record ID: **330153AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **TURNING POINT TREATMENT CENTER**
Legal Name: TURNING POINT TREATMENT CENTER, INC.
Address: 30235 YNEZ ROAD
City, State Zip: TEMECULA, CA 92592
Phone: (951) 308-1913 Fax: (951) 308-9133
Record ID: **330154AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **AXIS RESIDENTIAL TREATMENT, LLC**
Legal Name: AXIS RESIDENTIAL TREATMENT, LLC
Address: 75450 FAIRWAY DRIVE
City, State Zip: INDIAN WELLS, CA 92210
Phone: (760) 469-8275 Fax: (760) 346-8032
Record ID: **330155AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SAN DIEGO DETOX, INC.**
Legal Name: SAN DIEGO DETOX, INC.
Address: 9480 PATS POINT
City, State Zip: CORONA, CA 92883
Phone: (951) 987-0540
Record ID: **330156CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **SAN DIEGO DETOX, INC.**
Legal Name: SAN DIEGO DETOX, INC.
Address: 9440 PATS POINT
City, State Zip: CORONA, CA 92883
Phone: (951) 987-0540
Record ID: **330156DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BRISAS IOP**
Legal Name: BRISAS IOP, LLC
Address: 5700 DIVISION STREET, SUITE 200-A AND SUITE 200-B
City, State Zip: RIVERSIDE, CA 92506
Phone: (951) 205-5888 Fax: (951) 346-3399
Record ID: **330157AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **DIVINE INTERVENTION RECOVERY RANCH**
Legal Name: THE ROSE OF SHARON 7
Address: 23931 S. WARREN ROAD
City, State Zip: SAN JACINTO, CA 92582
Phone: (760) 618-1286 Fax: (951) 926-1173
Record ID: **330158AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 1/31/2019 IMS: No

Program Name: **ASCENSION TREATMENT CENTERS CALIFORNIA, LLC**
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC
Address: 555 S PALM CANYON DRIVE, A202
City, State Zip: PALM SPRINGS, CA 92264
Phone: (760) 396-7436
Record ID: **330159AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ASCENSION TREATMENT CENTERS CALIFORNIA, LLC**
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC
Address: 280 E. MEL AVE.
City, State Zip: PALM SPRINGS, CA 92262
Phone: (760) 396-7436
Record ID: **330159BP**
Service Type: RES-DETOX
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **JILOA TREATMENT**
Legal Name: JILOA TREATMENT AND RECOVERY CENTERS, INC.
Address: 26340 KALMIA AVENUE
City, State Zip: MORENO VALLEY, CA 92555
Phone: (951) 203-4474 Fax: (951) 208-4491
Record ID: **330160AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 1/31/2019 IMS: No

Program Name: **NATURAL REST HOUSE**
Legal Name: NATURAL REST HOUSE, INC.
Address: 79100 OCOTILLO DRIVE
City, State Zip: LA QUINTA, CA 92270
Phone: (812) 204-4324
Record ID: **330161AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8
Expiration Date: 6/30/2019 IMS: No

Program Name: **VALOR DETOX AND TREATMENT**
Legal Name: BETTER BEGINNINGS RECOVERY, INC.
Address: 29204 SHIPWRIGHT DRIVE
City, State Zip: MENIFEE, CA 92585
Phone: (951) 672-4525 Fax: (951) 698-1422
Record ID: **330162AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **BETTY FORD CENTER - OUTPATIENT PROGRAM**
Legal Name: HAZELDEN BETTY FORD FOUNDATION
Address: 39000 BOB HOPE DRIVE
City, State Zip: RANCHO MIRAGE, CA 92270
Phone: (866) 831-5700 Fax: (760) 733-1807
Record ID: **330164AN**
Service Type: NON
Target Population: 1.7
Expiration Date: 5/31/2019 IMS: No

Program Name: **EVOLVE DETOX AND REHABILITATION CENTER, INC.**
Legal Name: EVOLVE DETOX AND REHABILITATION CENTER, INC.
Address: 6560 SANDY LANE
City, State Zip: RIVERSIDE, CA 92505
Phone: (714) 232-0649 Fax: (714) 252-0173
Record ID: **330165AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **TRANQUIL PALMS**
Legal Name: SBR RECOVERY. LLC
Address: 44-775 DEEP CANYON ROAD
City, State Zip: PALM DESERT, CA 92260
Phone: (858) 345-7422
Record ID: **330166AP**
Service Type: NON
Target Population: 1.3
Expiration Date: 3/31/2019 IMS: No

Program Name:	**GRAND TERRACE DETOX AND RECOVERY**
Legal Name:	GRAND TERRACE DETOX AND RECOVERY
Address:	18989 SOUTH GRAND AVE.
City, State Zip:	LAKE ELSINORE, CA 92530
Phone:	(951) 201-9145 Fax: (714) 252-0173
Record ID:	**330168AP**
Service Type:	RES-DETOX
Resident Capacity:	6
Total Occupancy:	6
Target Population:	1.1
Expiration Date:	6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Sacramento County**

Program Name: **ALPHA OAKS**
Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.
Address: 8400 FAIR OAKS BOULEVARD
City, State Zip: CARMICHAEL, CA 95608-2502
Phone: (916) 944-3920 Fax: (916) 944-7740
Record ID: **340001AN**
Service Type: RES-DETOX
Resident Capacity: 23
Total Occupancy: 23
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **CORNERSTONE**
Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.
Address: 6348 AND 6350 APPIAN WAY
City, State Zip: CARMICHAEL, CA 95608-0724
Phone: (916) 966-5102 Fax: (916) 966-9362
Record ID: **340001BN**
Service Type: RES
Resident Capacity: 11
Total Occupancy: 12
Target Population: 1.3
Expiration Date: 4/30/2018 IMS: No

Program Name: **ALTUA**
Legal Name: RIVER CITY RECOVERY CENTER, INC.
Address: 12490 ALTA MESA ROAD
City, State Zip: HERALD, CA 95638-8409
Phone: (209) 748-2470
Record ID: **340002AN**
Service Type: RES
Resident Capacity: 55
Total Occupancy: 55
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **STARLIGHT**
Legal Name: RIVER CITY RECOVERY CENTER, INC.
Address: 2218 E STREET
City, State Zip: SACRAMENTO, CA 95816
Phone: (916) 442-4519 Fax: (916) 442-3577
Record ID: **340002BN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 26
Target Population: 1.3
Expiration Date: 11/30/2018 IMS: No

Program Name: **SOBRIETY BRINGS A CHANGE**
Legal Name: SOBRIETY BRINGS A CHANGE
Address: 4600 47TH AVENUE #102
City, State Zip: SACRAMENTO, CA 95824-3923
Phone: (916) 454-4242
Record ID: **340008AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 9/30/2018 IMS: No

Program Name: **ALTERNATIVE HOUSE**
Legal Name: WELLSPACE HEALTH
Address: 1550 JULIESSE AVENUE
City, State Zip: SACRAMENTO, CA 95815-1803
Phone: (916) 921-6598
Record ID: **340015AN**
Service Type: RES-DETOX
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **CRISIS INTAKE AND COUNSELING CENTER**
Legal Name: WELLSPACE HEALTH
Address: 1820 J STREET
City, State Zip: SACRAMENTO, CA 95811-3010
Phone: (916) 325-5556 Fax: (916) 444-5620
Record ID: **340015CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **OPTIONS FOR RECOVERY - RESIDENTIAL TREATMENT PROGRAM**
Legal Name: VOLUNTEERS OF AMERICA NORTHERN CALIFORNIA AND NORTHERN NEVADA, INC.
Address: 1001 GRAND AVENUE
City, State Zip: SACRAMENTO, CA 95838-3512
Phone: (916) 929-1951 Fax: (916) 929-5116
Record ID: **340018AN**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 28
Target Population: 1.4
Expiration Date: 11/30/2018 IMS: No

Program Name: **D & A DETOX CENTER**
Legal Name: D & A DETOX CENTER
Address: 2721 BARBERA WAY
City, State Zip: RANCHO CORDOVA, CA 95670-4804
Phone: (916) 364-7660
Record ID: **340035CN**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **D & A TREATMENT CENTER**
Legal Name: D & A DETOX CENTER
Address: 10157 LA ALEGRIA DRIVE
City, State Zip: RANCHO CORDOVA, CA 95670-3109
Phone: (916) 361-2833 Fax: (916) 364-5389
Record ID: **340035FN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **ANOTHER CHOICE, ANOTHER CHANCE**
Legal Name: ANOTHER CHOICE, ANOTHER CHANCE
Address: 7000 FRANKLIN BOULEVARD
SUITES 625 AND 670
City, State Zip: SACRAMENTO, CA 95823
Phone: (916) 388-9418
Record ID: **340037AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **SACRAMENTO COUNTY ADULT DRUG COURT**
Legal Name: SACRAMENTO COUNTY ADULT DRUG COURT
Address: 3201 FLORIN-PERKINS ROAD
City, State Zip: SACRAMENTO, CA 95826-3900
Phone: (916) 875-1171
Record ID: **340038AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **NEW DAWN TREATMENT CENTERS**
Legal Name: CDT SERVICE CORPORATION
Address: 6371 AUBURN BOULEVARD, SUITE A
City, State Zip: CITRUS HEIGHTS, CA 95621-5275
Phone: (916) 723-1319 Fax: (866) 575-1276
Record ID: **340039AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NEW DAWN TREATMENT CENTERS**
Legal Name: CDT SERVICE CORPORATION
Address: 6039, 6040, 6043, AND 6045 ROLOFF WAY
City, State Zip: ORANGEVALE, CA 95662-4544
Phone: (916) 989-1675 Fax: (866) 892-3394
Record ID: **340039BP**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEW DAWN TREATMENT CENTERS**
Legal Name: CDT SERVICE CORPORATION
Address: 8780 & 8782 SHERRY DRIVE
City, State Zip: ORANGEVALE, CA 95662-4534
Phone: (916) 989-1675 Fax: (866) 892-3394
Record ID: **340039CP**
Service Type: RES-DETOX
Resident Capacity: 11
Total Occupancy: 11
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **NEW DAWN TREATMENT CENTERS**
Legal Name: CDT SERVICE CORPORATION
Address: 9960 BUSINESS PARK DRIVE, SUITE 160
City, State Zip: SACRAMENTO, CA 95827-1733
Phone: (916) 363-2732
Record ID: **340039EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **THE PROMISE HOUSE**
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES
Address: 2727 P STREET
City, State Zip: SACRAMENTO, CA 95816-6403
Phone: (916) 452-3073
Record ID: **340041BN**
Service Type: RES-DETOX
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.4
Expiration Date: 10/31/2017 IMS: No

Program Name: **BRIDGES OUTPATIENT TREATMENT SERVICES**
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES
Address: 3600 POWER INN ROAD, SUITE D
City, State Zip: SACRAMENTO, CA 95826-3826
Phone: (916) 453-2704 Fax: (916) 453-2708
Record ID: **340041CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **BRIDGES RESIDENTIAL**
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES
Address: 1731 P STREET
City, State Zip: SACRAMENTO, CA 95814-6104
Phone: (916) 450-0700 Fax: (916) 930-0554
Record ID: **340041DN**
Service Type: RES-DETOX
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2
Expiration Date: 7/31/2019 IMS: No

Program Name: **CARES ALCOHOL AND OTHER DRUG OUTPATIENT PROGRAM**
Legal Name: THE CENTER FOR A.I.D.S. RESEARCH, EDUCATION AND SERVICES - SACRAMENTO
Address: 1500 21ST STREET
City, State Zip: SACRAMENTO, CA 95814-5216
Phone: (916) 443-3299 Fax: (916) 325-1980
Record ID: **340042BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CENTER POINT**
Legal Name: CENTER POINT, INC.
Address: 11228 FAIR OAKS BOULEVARD
City, State Zip: FAIR OAKS, CA 95628-5139
Phone: (916) 962-2800 Fax: (415) 492-8844
Record ID: **340048AN**
Service Type: RES
Resident Capacity: 31
Total Occupancy: 35
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE SACRAMENTO REGION AFFILIATE**
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE INC. SACRAMENTO REGION AFFILIATE
Address: 2143 HURLEY WAY
City, State Zip: SACRAMENTO, CA 95825
Phone: (916) 922-5110 Fax: (916) 921-1832
Record ID: **340052BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **SACRAMENTO VETERANS RESOURCE CENTER**
Legal Name: VIETNAM VETERANS OF CALIFORNIA, INC.
Address: 7270 EAST SOUTHGATE DRIVE, BUILDING 4
City, State Zip: SACRAMENTO, CA 95823-2621
Phone: (916) 393-8387 Fax: (916) 393-8389
Record ID: **340058AN**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **KOINONIA GROUP HOME #5**
Legal Name: KOINONIA FOSTER HOMES, INC.
Address: 4232 BIG CLOUD WAY
City, State Zip: ANTELOPE, CA 95843-2406
Phone: (916) 652-0171 Fax: (916) 652-3979
Record ID: **340063AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 10/31/2018 IMS: No

Program Name: **CLEAN & SOBER DETOX**
Legal Name: CLEAN & SOBER DETOX, A CALIFORNIA NONPROFIT CORPORATION
Address: 8946 MADISON AVENUE
City, State Zip: FAIR OAKS, CA 95628-4010
Phone: (916) 965-3386 Fax: (916) 536-1393
Record ID: **340067AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **AZURE ACRES IOP**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 2641 COTTAGE WAY
SUITES 8, 9 AND 10
City, State Zip: SACRAMENTO, CA 95825
Phone: (916) 338-0400 Fax: (916) 338-3589
Record ID: **340078AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SACRAMENTO TREATMENT CLINIC**
Legal Name: TREATMENT ASSOCIATES, INC.
Address: 7225 EAST SOUTHGATE DRIVE, SUITE D
City, State Zip: SACRAMENTO, CA 95823-2651
Phone: (760) 710-0951 Fax: (916) 394-1010
Record ID: **340080AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **SACRAMENTO NATIVE AMERICAN HEALTH CENTER**
Legal Name: SACRAMENTO NATIVE AMERICAN HEALTH CENTER, INC.
Address: 2020 J STREET
City, State Zip: SACRAMENTO, CA 95814-3120
Phone: (916) 341-0575 Fax: (916) 341-0574
Record ID: **340082AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **STRATEGIES FOR CHANGE OUTPATIENT**
Legal Name: STRATEGIES FOR CHANGE
Address: 4441 AUBURN BOULEVARD, SUITE E
City, State Zip: SACRAMENTO, CA 95841-4139
Phone: (916) 473-5764 Fax: (916) 473-5766
Record ID: **340084AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **STRATEGIES FOR CHANGE**
Legal Name: STRATEGIES FOR CHANGE
Address: 4343 WILLIAMSBOURGH DRIVE
City, State Zip: SACRAMENTO, CA 95823-2006
Phone: (916) 395-3552
Record ID: **340084BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **SIERRA VISTA HOSPITAL OUTPATIENT CD PROGRAM**
Legal Name: BHC SIERRA VISTA HOSPITAL, INC.
Address: 8009 BRUCEVILLE ROAD #100
City, State Zip: SACRAMENTO, CA 95823-2332
Phone: (916) 288-0300 Fax: (916) 689-5517
Record ID: **340090AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **CLEAN & SOBER RECOVERY HOME**
Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.
Address: 5820 CHESTNUT AVENUE
City, State Zip: ORANGEVALE, CA 95662-4807
Phone: (916) 990-0190 Fax: (916) 990-0193
Record ID: **340093AP**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **CLEAN & SOBER RECOVERY SERVICES, INC.**
Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.
Address: 9198 GREENBACK LANE, SUITE 101
City, State Zip: ORANGEVALE, CA 95662
Phone: (916) 990-0190 Fax: (916) 990-0193
Record ID: **340093BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **PATHWAYS RECOVERY**
Legal Name: PATHWAYS RECOVERY
Address: 6538 GREY OAK COURT
City, State Zip: CITRUS HEIGHTS, CA 95621-1024
Phone: (916) 735-8377 Fax: (877) 494-5088
Record ID: **340098AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **TOWNS HEALTH SERVICES**
Legal Name: TOWNS HEALTH SERVICES, INC.
Address: 750 SPAANS DRIVE
SUITE C, D, AND F
City, State Zip: GALT, CA 95632-8609
Phone: (916) 612-2452 Fax: (209) 744-9910
Record ID: **340100AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **PALM TREE RANCH**
Legal Name: TOWNS HEALTH SERVICES, INC.
Address: 12370 CLAY STATION ROAD
City, State Zip: HERALD, CA 95638
Phone: (209) 748-2628
Record ID: **340100BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SACRAMENTO RECOVERY HOUSE**
Legal Name: SACRAMENTO RECOVERY HOUSE, INC.
Address: 1914 22ND STREET
City, State Zip: SACRAMENTO, CA 95816-7109
Phone: (916) 455-6258
Record ID: **340103AN**
Service Type: RES
Resident Capacity: 17
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **GATEWAY HOUSE**
Legal Name: SACRAMENTO RECOVERY HOUSE, INC.
Address: 4049 MILLER WAY
City, State Zip: SACRAMENTO, CA 95817-1332
Phone: (916) 451-9312 Fax: (916) 451-8014
Record ID: **340103BN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **VERITAS COUNSELING CDIOP**
Legal Name: VERITAS COUNSELING CDIOP
Address: 3137 DWIGHT ROAD, SUITE 600
City, State Zip: ELK GROVE, CA 95758-6472
Phone: (916) 422-1319 Fax: (916) 422-1321
Record ID: **340105AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **VALLEY RECOVERY CENTER OF CALFORNIA**
Legal Name: SUMMIT BHC SACRAMENTO, LLC
Address: 2221 FAIR OAKS BOULEVARD
City, State Zip: SACRAMENTO, CA 95825-5501
Phone: (916) 514-8500
Record ID: **340106AP**
Service Type: RES-DETOX
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CEDAR POINT RECOVERY**
Legal Name: CEDAR POINT RECOVERY, LLC
Address: 8950 CAL CENTER DRIVE, SUITE 160
City, State Zip: SACRAMENTO, CA 95826
Phone: (916) 273-4543 Fax: (916) 376-7467
Record ID: **340109AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **CEDAR POINT RECOVERY**
Legal Name: CEDAR POINT RECOVERY, LLC
Address: 1099 STEWART ROAD
City, State Zip: SACRAMENTO, CA 95864-5303
Phone: (844) 262-0337 Fax: (916) 514-9307
Record ID: **340109BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **HOPE @ LAST**
Legal Name: LAST ENTERPRISE, INC.
Address: 6326 MAIN AVENUE,
22
City, State Zip: ORANGEVALE, CA 95662
Phone: (916) 671-1767
Record ID: **340110AP**
Service Type: NON
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **DIAMOND HOUSE DETOX**
Legal Name: PSYCHNP CONSULTANTS, INC.
Address: 8624 DIAMOND OAK WAY
City, State Zip: ELK GROVE, CA 95624
Phone: (425) 941-2436
Record ID: **340111AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **AKUA MIND & BODY**
Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 10087 TERRA LOMA DRIVE
City, State Zip: RANCHO CORDOVA, CA 95670
Phone: (916) 368-7074 Fax: (916) 368-7090
Record ID: **340113AP**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Benito County**

Program Name: **SAN BENITO COUNTY BEHAVIORAL HEALTH**
Legal Name: SAN BENITO COUNTY BEHAVIORAL HEALTH
Address: 1131 SAN FELIPE ROAD
City, State Zip: HOLLISTER, CA 95023
Phone: (831) 636-4020 Fax: (831) 636-4015
Record ID: **350001AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **BRIGHT FUTURE RECOVERY, INC.**
Legal Name: BRIGHT FUTURE RECOVERY, INC.
Address: 1000 FAIRVIEW ROAD
City, State Zip: HOLLISTER, CA 95023
Phone: (831) 245-7736
Record ID: **350002AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Bernardino County**

Program Name: **RECOVERY CENTER**
Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Address: 934 NORTH MOUNTAIN AVENUE,
SUITES A, B, C AND D
City, State Zip: UPLAND, CA 91786
Phone: (909) 949-4667
Record ID: **360001AAN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **INLAND VALLEY RECOVERY SERVICES - SAN BERNARDINO RECOVERY CENTER**
Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Address: 939 N. D STREET, BUILDINGS A & B AND 955 N. D STREET
City, State Zip: SAN BERNARDINO, CA 92410
Phone: (909) 889-6519 Fax: (909) 889-6560
Record ID: **360001ABN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **WOMEN'S AND MEN'S RESIDENTIAL SERVICES**
Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Address: 1260 ARROW HIGHWAY, BUILDING B & C
City, State Zip: UPLAND, CA 91786
Phone: (909) 932-1069 Fax: (909) 932-1087
Record ID: **360001ZN**
Service Type: RES-DETOX
Resident Capacity: 130
Total Occupancy: 130
Target Population: 1.4
Expiration Date: 2/28/2018 IMS: No

Program Name: **CEDAR HOUSE LIFE CHANGE CENTER**
Legal Name: SOCIAL SCIENCE SERVICES, INC.
Address: 18612 SANTA ANA AVENUE
City, State Zip: BLOOMINGTON, CA 92316
Phone: (909) 421-7120
Record ID: **360002CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **CEDAR HOUSE LIFE CHANGE CENTER**
Legal Name: SOCIAL SCIENCE SERVICES, INC.
Address: 18612 SANTA ANA AVENUE
City, State Zip: BLOOMINGTON, CA 92316
Phone: (909) 421-7120
Record ID: **360002DN**
Service Type: RES
Resident Capacity: 125
Total Occupancy: 125
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **CEDAR HOUSE LIFE CHANGE CENTER**
Legal Name: SOCIAL SCIENCE SERVICES, INC.
Address: 10888 MAPLE AVENUE
City, State Zip: BLOOMINGTON, CA 92316
Phone: (909) 873-0478 Fax: (909) 421-7128
Record ID: **360002FN**
Service Type: RES
Resident Capacity: 11
Total Occupancy: 26
Target Population: 1.4
Expiration Date: 10/31/2017 IMS: No

Program Name: **ST. JOHN OF GOD HEALTH CARE SERVICES**
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES
Address: 13333 PALMDALE ROAD
City, State Zip: VICTORVILLE, CA 92392
Phone: (760) 241-4917
Record ID: **360003HN**
Service Type: RES-DETOX
Resident Capacity: 66
Total Occupancy: 82
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **ST. JOHN OF GOD HEALTH CARE SERVICES**
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES
Address: 15534 6TH STREET
City, State Zip: VICTORVILLE, CA 92392
Phone: (760) 241-4917 Fax: (760) 241-8911
Record ID: **360003IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **GIBSON HOUSE FOR MEN**
Legal Name: VARP, INC.
Address: 1100, 1078 AND 1094 NORTH D STREET, AND 1087 NORTH STODDARD STREET
City, State Zip: SAN BERNARDINO, CA 92410
Phone: (909) 381-3774
Record ID: **360004BN**
Service Type: RES
Resident Capacity: 58
Total Occupancy: 61
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **GIBSON HOUSE RECOVERY CENTER FOR WOMEN**
Legal Name: VARP, INC.
Address: 1103, 1107, 1069, 1135, 1139, NORTH D STREET AND
382 & 384 11TH STREET
City, State Zip: SAN BERNARDINO, CA 92410
Phone: (909) 888-6956
Record ID: **360004FN**
Service Type: RES
Resident Capacity: 53
Total Occupancy: 62
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **VARP, INC. OUTPATIENT PROGRAM**
Legal Name: VARP, INC.
Address: 1149 NORTH D STREET
City, State Zip: SAN BERNARDINO, CA 92410
Phone: (909) 381-3774 Fax: (909) 381-6845
Record ID: **360004TN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PINE RIDGE TREATMENT CENTER**
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED
Address: 2727 HIGHLAND DRIVE
City, State Zip: RUNNING SPRINGS, CA 92382
Phone: (909) 867-7028
Record ID: **360007AP**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **PINE RIDGE TREATMENT CENTERS, INC. - VICTORVILLE**
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED
Address: 15367 BONANZA ROAD, #A
City, State Zip: VICTORVILLE, CA 92392
Phone: (760) 955-1012 Fax: (760) 955-4811
Record ID: **360007BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PINE RIDGE TREATMENT CENTERS, INC. - SAN BERNARDINO**
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED
Address: 1881 COMMERCENTER EAST, SUITE 220
City, State Zip: SAN BERNARDINO, CA 92408
Phone: (909) 890-0294
Record ID: **360007CP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **PINE RIDGE TREATMENT CENTER - LUCERNE VALLEY**
Legal Name: PINE RIDGE TREATMENT CENTERS, INCORPORATED
Address: 9401 CRYSTAL CREEK ROAD
City, State Zip: LUCERNE VALLEY, CA 92356
Phone: (760) 248-9199
Record ID: **360007DP**
Service Type: RES-DETOX
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **INLAND BEHAVIORAL AND HEALTH SERVICES, INC.**
Legal Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.
Address: 1963 NORTH E STREET
City, State Zip: SAN BERNARDINO, CA 92405
Phone: (909) 881-6146 Fax: (909) 881-0111
Record ID: **360015AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **MATRIX INSTITUTE ON ADDICTIONS**
Legal Name: MATRIX INSTITUTE ON ADDICTIONS
Address: 11777 SEBASTIAN WAY, SUITES 102 A & B
City, State Zip: RANCHO CUCAMONGA, CA 91730
Phone: (909) 989-9724
Record ID: **360020AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **DAP RECOVERY HOME**
Legal Name: DRUG ALTERNATIVE PROGRAM
Address: 11805 AND 11816 ARLISS LANE
City, State Zip: GRAND TERRACE, CA 92313
Phone: (909) 783-1094
Record ID: **360021BN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER**
Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED
Address: 16248 VICTOR STREET
City, State Zip: VICTORVILLE, CA 92395
Phone: (760) 243-7151 Fax: (760) 952-1432
Record ID: **360030AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INC.**
Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED
Address: 225 BARSTOW ROAD
City, State Zip: BARSTOW, CA 92311
Phone: (760) 243-7151
Record ID: **360030BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **PRIDE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1874 BUSINESS DRIVE, SUITE B
City, State Zip: SAN BERNARDINO, CA 92408
Phone: (858) 573-2600 Fax: (858) 573-5144
Record ID: **360033AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **VICTOR VALLEY CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 15770 MOJAVE DRIVE, SUITES K & L
City, State Zip: VICTORVILLE, CA 92394
Phone: (858) 573-2600 Fax: (858) 573-5144
Record ID: **360033BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **REDLANDS CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1874 BUSINESS CENTER DRIVE, SUITE C
City, State Zip: SAN BERNARDINO, CA 92408
Phone: (858) 573-2600 Fax: (909) 335-1701
Record ID: **360033DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CENTRAL VALLEY REGIONAL RECOVERY CENTER**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1076 SANTO ANTONIO DRIVE, SUITES B, C & D
City, State Zip: COLTON, CA 92324
Phone: (858) 573-2600 Fax: (909) 433-9824
Record ID: **360033HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **NEEDLES CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 300 H STREET
City, State Zip: NEEDLES, CA 92363
Phone: (858) 573-2600 Fax: (858) 573-5144
Record ID: **360033IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **FONTANA CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1076 SANTO ANTONIO DRIVE, SUITES B & D, ROOMS 2, 4 & 9
City, State Zip: COLTON, CA 92324
Phone: (858) 573-2600 Fax: (858) 573-5144
Record ID: **360033JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **SAN BERNARDINO CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1874 BUSINESS CENTER DRIVE, SUITE A
City, State Zip: SAN BERNARDINO, CA 92408
Phone: (858) 573-2600 Fax: (909) 386-0529
Record ID: **360033MN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **BIG BEAR CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 41945 BIG BEAR BOULEVARD, SUITE 208
City, State Zip: BIG BEAR LAKE, CA 92315
Phone: (909) 872-0223 Fax: (909) 872-1686
Record ID: **360033NN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **YUCCA VALLEY CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 58945 BUSINESS CENTER DRIVE, SUITES J, N & P
City, State Zip: YUCCA VALLEY, CA 92284
Phone: (909) 872-0223 Fax: (909) 872-1686
Record ID: **360033ON**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **JOSHUA TREE CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 61607 29 PALMS HIGHWAY, SUITE C & D
City, State Zip: JOSHUA TREE, CA 92252
Phone: (909) 872-0223 Fax: (909) 872-1686
Record ID: **360033PN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **RIM FAMILY SERVICES**
Legal Name: RIM FAMILY SERVICES, INC.
Address: 28545 HIGHWAY 18
City, State Zip: SKY FOREST, CA 92385
Phone: (909) 336-1800 Fax: (909) 336-0990
Record ID: **360036AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **RIALTO BEHAVIORAL ADDICTION TREATMENT SERVICES**
Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT
Address: 850 E. FOOTHILL BOULEVARD, SUITE A, SECTIONS A-F
City, State Zip: RIALTO, CA 92376
Phone: (909) 421-9465 Fax: (909) 421-9457
Record ID: **360050AN**
Service Type: NON
Target Population: 1.4
Expiration Date: 5/31/2019 IMS: No

Program Name: **SAN BERNARDINO COUNTY - BARSTOW ADS**
Legal Name: SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
Address: 1841 E. MAIN STREET
City, State Zip: BARSTOW, CA 92311
Phone: (760) 255-5700 Fax: (760) 256-5092
Record ID: **360050EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **MARIPOSA COMMUNITY COUNSELING**
Legal Name: SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
Address: 2940 INLAND EMPIRE BOULEVARD
City, State Zip: ONTARIO, CA 91764
Phone: (909) 933-6341 Fax: (909) 933-6355
Record ID: **360050HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **SUPERVISED TREATMENT AFTER RELEASE PROGRAM (STAR)**
Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT
Address: 1330 EAST COOLEY DRIVE, ROOMS 106, 119, 129, 131, 137, 200, 201, 203, 205, 206, LOBBY AND CLERICAL AREA
City, State Zip: COLTON, CA 92324
Phone: (909) 423-0750 Fax: (909) 423-0760
Record ID: **360050IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **FONTANA CHOICE SUBSTANCE USE DISORDER TREATMENT**
Legal Name: COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH
Address: 17830 ARROW BOULEVARD
City, State Zip: FONTANA, CA 92335
Phone: (909) 463-7556
Record ID: **360050JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **VICTORVILLE CHOICE SUBSTANCE USE DISORDER TREATMENT**
Legal Name: COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH
Address: 15480 RAMONA AVENUE
City, State Zip: VICTORVILLE, CA 92392-2421
Phone: (760) 243-8145 Fax: (909) 388-0898
Record ID: **360050KN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (SAN MANUEL CLINIC)**
Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC.
Address: 11980 MOUNT VERNON AVENUE
City, State Zip: GRAND TERRANCE, CA 92313
Phone: (951) 864-1097 Fax: (951) 849-9633
Record ID: **360058AN**
Service Type: NON
Target Population: 1.8
Expiration Date: 4/30/2019 IMS: No

Program Name: **COLTON CLINICAL SERVICES**
Legal Name: WCHS, INC.
Address: 2275 EAST COOLEY DRIVE
City, State Zip: COLTON, CA 92324
Phone: (909) 370-1777 Fax: (909) 370-1776
Record ID: **360066AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **TIME FOR CHANGE FOUNDATION**
Legal Name: TIME FOR CHANGE FOUNDATION
Address: 1255 EAST HIGHLAND AVENUE, SUITE 211
City, State Zip: SAN BERNARDINO, CA 92404
Phone: (909) 886-2994 Fax: (909) 886-0218
Record ID: **360071AN**
Service Type: NON
Target Population: 1.3
Expiration Date: 6/30/2017 IMS: No

Program Name: **NEW CREATION ADDICTION TREATMENT CENTER**
Legal Name: G AND C SWAN INC.
Address: 11646 ENCANTO LANE AND 23950 PRADO LANE
City, State Zip: COLTON, CA 92324
Phone: (909) 981-6121 Fax: (909) 944-0192
Record ID: **360075AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **HIS HOUSE**
Legal Name: G AND C SWAN INC.
Address: 239 AND 215 WEST 9TH STREET, SUITE I, J AND K, AND
227 NORTH PALM AVENUE
City, State Zip: UPLAND, CA 91786
Phone: (909) 981-6121 Fax: (909) 944-0192
Record ID: **360075BP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 31
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **HIS HOUSE**
Legal Name: G AND C SWAN INC.
Address: 1354 CARLOS PLACE
City, State Zip: ONTARIO, CA 91764
Phone: (909) 519-0767 Fax: (909) 944-0192
Record ID: **360075CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **NEW CREATION ADDICTION TREATMENT CENTER**
Legal Name: G AND C SWAN INC.
Address: 9531 PITTSBURGH AVENUE
City, State Zip: RANCHO CUCOMUNGA, CA 91786
Phone: (909) 241-7219 Fax: (909) 985-2316
Record ID: **360075DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ABOVE IT ALL TREATMENT CENTER**
Legal Name: HI-LAND MOUNTAIN HOMES, INC.
Address: 27482 NORTH BAY ROAD
City, State Zip: LAKE ARROWHEAD, CA 92352
Phone: (909) 338-1234 Fax: (909) 744-8938
Record ID: **360082BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ABOVE IT ALL TREATMENT CENTER**
Legal Name: HI-LAND MOUNTAIN HOMES, INC
Address: 23739 LAKE DRIVE
City, State Zip: CRESTLINE, CA 92325
Phone: (202) 294-1554
Record ID: **360082DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **SERENITY LODGE**
Legal Name: SERENITY LODGE
Address: 974, 985, 986, 977, 995 & 1010 MEADOWBROOK ROAD;
1032 CEDAR LANE AND 1000 PINE COURT, LAKE ARROWHEAD, CA
City, State Zip: CREST PARK, CA 92326
Phone: (909) 294-3913 Fax: (909) 294-3913
Record ID: **360091AP**
Service Type: RES
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CREEKSIDE RANCH TREATMENT CENTER**
Legal Name: COVENANT HEALTH SERVICES
Address: 2730 MILL CREEK ROAD
City, State Zip: MENTONE, CA 92359-0000
Phone: (909) 794-2027 Fax: (909) 794-2027
Record ID: **360092AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **NEW CREATION**
Legal Name: NEW CREATION BEHAVIORAL HEALTHCARE FOUNDATION
Address: 2511 S MCCARTY DRIVE
City, State Zip: COLTON, CA 92324
Phone: (909) 519-0767 Fax: (909) 985-2316
Record ID: **360096AN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **MERITO HOUSE**
Legal Name: MERITO HOUSE, LLC
Address: 911 CHURCH STREET
City, State Zip: REDLANDS, CA 92372
Phone: (909) 981-6121 Fax: (909) 985-2316
Record ID: **360098AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 11/30/2018 IMS: No

Program Name: **BENCHMARK TRANSITIONS**
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.
Address: 36442 WILDWOOD CANYON ROAD

City, State Zip: YUCAIPA, CA 92399
Phone: (800) 474-4848 Fax: (909) 748-6424
Record ID: **360099AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **BENCHMARK TRANSITIONS**
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.
Address: 1971 ESSEX COURT
City, State Zip: REDLANDS, CA 92373
Phone: (800) 474-4848
Record ID: **360099BP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **BENCHMARK TRANSITIONS AT PANORAMA RIDGE**
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.
Address: 35826 PANORAMA DRIVE
City, State Zip: YUCAIPA, CA 92399
Phone: (800) 474-4848 Fax: (909) 793-4499
Record ID: **360099CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **HOPE SPRINGS CALIFORNIA**
Legal Name: HOPE SPRINGS CALIFORNIA LLC
Address: 29099 HOSPITAL ROAD, SUITE 103 & 104
City, State Zip: LAKE ARROWHEAD, CA 92352
Phone: (909) 499-4766 Fax: (909) 337-5353
Record ID: **360102BP**
Service Type: NON
Target Population: 1.2
Expiration Date: 6/30/2017 IMS: No

Program Name: **REVIVAL RECOVERY SERVICES**
Legal Name: REVIVAL RECOVERY SERVICES
Address: 12350 INDIAN RIVER DRIVE
City, State Zip: APPLE VALLEY, CA 92308
Phone: (760) 887-1632 Fax: (760) 961-8173
Record ID: **360103AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **NEW ORIGINS**
Legal Name: NEW ORIGINS, LLC
Address: 101 E. REDLANDS BOULEVARD, SUITE 200
City, State Zip: REDLANDS, CA 92373
Phone: (955) 984-1788 Fax: (909) 335-2804
Record ID: **360105AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2019 IMS: No

Program Name: **DBA: JOSHUA TREE RECOVERY HOME**
Legal Name: AMERICAN HEALTH SERVICES LLC
Address: 65675 SULLIVAN ROAD
City, State Zip: JOSHUA TREE, CA 92252
Phone: (916) 802-7002
Record ID: **360106AP**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **BLUESTONE MANOR**
Legal Name: BLUESTONE RECOVERY, INC.
Address: 29556 HOOK CREEK ROAD
City, State Zip: CEDAR GLEN, CA 92321-0400
Phone: (951) 536-2213 Fax: (909) 074-4839
Record ID: **360107BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **FIRST STEP RECOVERY CENTER**
Legal Name: ROUTE 66 RECOVERY PARTNERS, A MEDICAL CORPORATION
Address: 12402 INDUSTRIAL BOULEVARD,
B-6
City, State Zip: VICTORVILLE, CA 92395
Phone: (760) 780-1237 Fax: (877) 780-3252
Record ID: **360108AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LAKE ARROWHEAD RECOVERY CENTER**
Legal Name: LAKE ARROWHEAD RECOVERY CENTER, LLC
Address: 28729 PALISADES DRIVE,
BUILDING A & B
City, State Zip: LAKE ARROWHEAD, CA 92352
Phone: (435) 590-4147
Record ID: **360109AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **HARVEY HOUSE MANOR I**
Legal Name: HARVEY HOUSE INC
Address: 3512 AND 3515 NOLAN STREET
City, State Zip: SAN BERNARDINO, CA 92407
Phone: (951) 347-3672 Fax: (951) 934-6166
Record ID: **360111AP**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **HARVEY HOUSE MANOR II**
Legal Name: HARVEY HOUSE INC
Address: 11372 SAN JUAN STREET UPPER, UNITS A AND B
City, State Zip: LOMA LINDA, CA 92564
Phone: (951) 347-3672 Fax: (951) 934-6166
Record ID: **360111BP**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name:	**HOWER LODGE**
Legal Name:	HOWER LODGE
Address:	26166 CIRCLE DRIVE
City, State Zip:	LAKE ARROWHEAD, CA 92352
Phone:	(909) 744-9271
Record ID:	**360113AP**
Service Type:	RES-DETOX
Resident Capacity:	6
Total Occupancy:	7
Target Population:	1.3
Expiration Date:	6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Diego County**

Program Name: **CROSSROADS FOUNDATION**
Legal Name: THE CROSSROADS FOUNDATION
Address: 3594 FOURTH AVENUE
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 296-1151 Fax: (619) 296-6218
Record ID: **370002AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 22
Target Population: 1.3
Expiration Date: 6/30/2019 IMS: No

Program Name: **HEARTLAND HOUSE**
Legal Name: THE TWELFTH STEP HOUSE OF SAN DIEGO
Address: 5855 AND 5860 (APT 2 & 3) STREAMVIEW DRIVE
City, State Zip: SAN DIEGO, CA 92105
Phone: (619) 287-5460
Record ID: **370003AN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **SAN DIEGO FREEDOM RANCH**
Legal Name: SAN DIEGO FREEDOM RANCH, INC.
Address: 1777 BUCKMAN SPRINGS ROAD
City, State Zip: CAMPO, CA 91906
Phone: (619) 478-5696 Fax: (619) 478-2404
Record ID: **370004AN**
Service Type: RES
Resident Capacity: 50
Total Occupancy: 60
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **JR RANCH**
Legal Name: SAN DIEGO FREEDOM RANCH, INC.
Address: 1765 BUCKMAN SPRINGS ROAD
City, State Zip: CAMPO, CA 91906
Phone: (619) 478-5696 Fax: (619) 479-2404
Record ID: **370004BN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **SERENITY CENTER**
Legal Name: HEALTHRIGHT 360
Address: 1341 NORTH ESCONDIDO BOULEVARD
City, State Zip: ESCONDIDO, CA 92026
Phone: (760) 747-1015
Record ID: **370005GN**
Service Type: RES
Resident Capacity: 120
Total Occupancy: 140
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **PATHFINDERS**
Legal Name: PATHFINDERS OF SAN DIEGO
Address: 2952 AND 2980 CEDAR STREET, AND 1530 DALE STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 239-7370 Fax: (619) 239-1817
Record ID: **370006AN**
Service Type: RES
Resident Capacity: 42
Total Occupancy: 44
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **AMIGOS SOBRIOS**
Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION
Address: 741 11TH AVENUE
City, State Zip: SAN DIEGO, CA 92101
Phone: (619) 232-7754 Fax: (619) 232-0968
Record ID: **370007BN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **RENAISSANCE TREATMENT CENTER**
Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION
Address: 2300 EAST 7TH STREET
City, State Zip: NATIONAL CITY, CA 91950
Phone: (619) 791-2730 Fax: (619) 282-8262
Record ID: **370007CN**
Service Type: RES-DETOX
Resident Capacity: 120
Total Occupancy: 120
Target Population: 1.8
Expiration Date: 4/30/2018 IMS: No

Program Name: **STEPPING STONE OF SAN DIEGO**
Legal Name: THE STEPPING STONE OF SAN DIEGO
Address: 3767 CENTRAL AVENUE
City, State Zip: SAN DIEGO, CA 92105
Phone: (619) 584-4010 Fax: (619) 521-1701
Record ID: **370008DN**
Service Type: RES
Resident Capacity: 31
Total Occupancy: 31
Target Population: 1.8
Expiration Date: 5/31/2018 IMS: No

Program Name: **THE FELLOWSHIP CENTER**
Legal Name: THE FELLOWSHIP CENTER, INC.
Address: 737 AND 745 EAST GRAND AVENUE, 726 AND 736 EAST 2ND AVENUE, AND 123 SOUTH ELM STREET
City, State Zip: ESCONDIDO, CA 92025
Phone: (760) 745-8478 Fax: (760) 745-6852
Record ID: **370009AN**
Service Type: RES-DETOX
Resident Capacity: 113
Total Occupancy: 113
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **VETERANS VILLAGE OF SAN DIEGO REHABILITATION CENTER**
Legal Name: VIETNAM VETERANS OF SAN DIEGO
Address: 4115, 4125, 4137, & 4141 PACIFIC HIGHWAY AND 3670 COUTS STREET
City, State Zip: SAN DIEGO, CA 92110
Phone: (619) 497-0142 Fax: (619) 497-0263
Record ID: **370010BN**
Service Type: RES
Resident Capacity: 242
Total Occupancy: 242
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE WAY BACK**
Legal Name: THE WAY BACK
Address: 2516 A STREET
City, State Zip: SAN DIEGO, CA 92102-2199
Phone: (619) 235-0592 Fax: (619) 235-0593
Record ID: **370011AN**
Service Type: RES
Resident Capacity: 27
Total Occupancy: 29
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **TRADITION ONE-MEN**
Legal Name: TRADITION ONE
Address: 4104, 4114 AND 4124 DELTA STREET
City, State Zip: SAN DIEGO, CA 92113
Phone: (619) 264-0141 Fax: (619) 264-7274
Record ID: **370012AN**
Service Type: RES
Resident Capacity: 46
Total Occupancy: 49
Target Population: 1.2
Expiration Date: 2/28/2018 IMS: No

Program Name: **TURNING POINT**
Legal Name: THE TURNING POINT HOME OF SAN DIEGO
Address: 1315 25TH STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 233-0067 Fax: (619) 233-3990
Record ID: **370013AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 21
Target Population: 1.3
Expiration Date: 7/31/2017 IMS: No

Program Name: **CASA DE MILAGROS**
Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON ANTI-POVERTY OF SAN DIEGO COUNTY, INC.
Address: 1127 SOUTH 38TH STREET
City, State Zip: SAN DIEGO, CA 92113
Phone: (619) 262-4002
Record ID: **370014AN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.3
Expiration Date: 9/30/2017 IMS: No

Program Name: **NOSOTROS**
Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON ANTI-POVERTY OF SAN DIEGO COUNTY, INC.
Address: 73 NORTH 2ND AVENUE
City, State Zip: CHULA VISTA, CA 91910
Phone: (619) 426-4801 Fax: (619) 426-0034
Record ID: **370014BN**
Service Type: RES
Resident Capacity: 17
Total Occupancy: 17
Target Population: 1.2
Expiration Date: 9/30/2017 IMS: No

Program Name: **HOUSE OF METAMORPHOSIS**
Legal Name: HOUSE OF METAMORPHOSIS, INC.
Address: 2970 MARKET STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 236-9492 Fax: (619) 236-9127
Record ID: **370021AN**
Service Type: RES
Resident Capacity: 64
Total Occupancy: 64
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY**
Legal Name: HOUSE OF METAMORPHOSIS, INC.
Address: 2867 AND 2871 C STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 236-9217 Fax: (619) 236-9127
Record ID: **370021KN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **SHORT TERM I--MARLBOROUGH**
Legal Name: CRASH, INC.
Address: 4161 MARLBOROUGH AVENUE
City, State Zip: SAN DIEGO, CA 92105
Phone: (619) 282-7274 Fax: (619) 282-7496
Record ID: **370024IN**
Service Type: RES
Resident Capacity: 50
Total Occupancy: 50
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **GOLDEN HILL HOUSE II**
Legal Name: CRASH, INC.
Address: 726 F STREET
City, State Zip: SAN DIEGO, CA 92101
Phone: (619) 239-9691 Fax: (619) 239-0909
Record ID: **370024KN**
Service Type: RES
Resident Capacity: 63
Total Occupancy: 63
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **GOLDEN HILL HOUSE**
Legal Name: CRASH, INC.
Address: 2410 E STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 234-3346 Fax: (619) 234-3357
Record ID: **370024LN**
Service Type: RES
Resident Capacity: 43
Total Occupancy: 43
Target Population: 1.3
Expiration Date: 4/30/2019 IMS: No

Program Name: **PEMARRO**
Legal Name: GROUP CONSCIENCE
Address: 1482 KINGS VILLA ROAD
City, State Zip: RAMONA, CA 92065
Phone: (760) 789-8070 Fax: (760) 789-8073
Record ID: **370025AN**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CHOICES IN RECOVERY/FOUNDATION HOUSE**
Legal Name: THE BETHESDA RECOVERY CENTER
Address: 619 CIVIC CENTER DRIVE
City, State Zip: VISTA, CA 92083
Phone: (760) 945-5290 Fax: (760) 945-7765
Record ID: **370039IN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **CHOICES IN RECOVERY - ALCOHOL AND DRUG ABUSE OUTPATIENT TREATMENT PROGRAM**
Legal Name: THE BETHESDA RECOVERY CENTER
Address: 733 SOUTH SANTA FE AVENUE
City, State Zip: VISTA, CA 92083
Phone: (760) 945-5290 Fax: (760) 945-7765
Record ID: **370039JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **CHOICES IN RECOVERY/NEW HOUSE**
Legal Name: THE BETHESDA RECOVERY CENTER
Address: 747 MELROSE PLACE
City, State Zip: VISTA, CA 92083
Phone: (760) 945-5290 Fax: (760) 945-7765
Record ID: **370039KN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **CHOICES IN RECOVERY/HILL HOUSE**
Legal Name: THE BETHESDA RECOVERY CENTER
Address: 1135 NORTH DRIVE
City, State Zip: VISTA, CA 92083
Phone: (760) 945-5290 Fax: (760) 945-7765
Record ID: **370039LN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **CHOICES IN RECOVERY/HUMBLE HOUSE**
Legal Name: THE BETHESDA RECOVERY CENTER
Address: 248 HILL DRIVE
City, State Zip: VISTA, CA 92083
Phone: (760) 945-5290 Fax: (760) 945-7765
Record ID: **370039MN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 4/30/2019 IMS: No

Program Name: **MCALISTER INSTITUTE SOUTH BAY REGIONAL RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 1180 3RD AVENUE, SUITES C-3, C-4 AND C-5
City, State Zip: CHULA VISTA, CA 91911
Phone: (619) 691-8164
Record ID: **370045ABN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **SOUTH TEEN RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 629 THIRD AVENUE, SUITE C
City, State Zip: CHULA VISTA, CA 91910-5741
Phone: (619) 691-1045 Fax: (619) 691-1491
Record ID: **370045ACN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **NORTH CENTRAL TEEN RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 7625 MESA COLLEGE DRIVE, SUITE 115B
City, State Zip: SAN DIEGO, CA 92111
Phone: (858) 277-4633 Fax: (858) 277-4933
Record ID: **370045AEN**
Service Type: NON
Target Population: 1.5
Expiration Date: 8/31/2017 IMS: No

Program Name: **MCALISTER INSTITUTE EAST TEEN RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 550 FESLER STREET, SUITE G1 AND G2
City, State Zip: EL CAJON, CA 92020
Phone: (619) 588-5361 Fax: (619) 588-5421
Record ID: **370045AMN**
Service Type: NON
Target Population: 1.5
Expiration Date: 4/30/2019 IMS: No

Program Name: **NORTH COASTAL REGIONAL RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2821 OCEANSIDE BOULEVARD
City, State Zip: OCEANSIDE, CA 92054
Phone: (760) 721-2781
Record ID: **370045AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **NEW HOPE TEEN RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 1212 S. 43RD STREET, SUITE C, D, AND E
City, State Zip: SAN DIEGO, CA 92113
Phone: (619) 690-9904 Fax: (619) 263-1793
Record ID: **370045APN**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **NORTH INLAND WOMEN/ADOLESCENT RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 751 RANCHEROS DRIVE, SUITE 3, 4, AND 5
City, State Zip: SAN MARCOS, CA 92069
Phone: (760) 761-0515 Fax: (760) 761-0464
Record ID: **370045AQN**
Service Type: NON
Target Population: 1.5
Expiration Date: 10/31/2017 IMS: No

Program Name: **NORTH COASTAL TEEN RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 3923 WARING ROAD, SUITE D
City, State Zip: OCEANSIDE, CA 92056
Phone: (760) 726-4451 Fax: (760) 726-4465
Record ID: **370045ARN**
Service Type: NON
Target Population: 1.10
Expiration Date: 1/31/2018 IMS: No

Program Name: **MCALISTER INSTITUTE SOUTH BAY WOMEN'S RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2414 HOOVER AVENUE, SUITES A, B, C
City, State Zip: NATIONAL CITY, CA 91950
Phone: (619) 336-1226 Fax: (619) 477-1052
Record ID: **370045BN**
Service Type: NON
Target Population: 1.3
Expiration Date: 4/30/2018 IMS: No

Program Name: **EAST COUNTY REGIONAL RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 1365 NORTH JOHNSON AVENUE, SUITES 111 AND 113
City, State Zip: EL CAJON, CA 92020
Phone: (619) 440-4801 Ext:1592 Fax: (619) 442-1592
Record ID: **370045DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **MCALISTER INSTITUTE - LEMON GROVE FACILITY**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2049 SKYLINE DRIVE
City, State Zip: LEMON GROVE, CA 91945
Phone: (619) 465-7303
Record ID: **370045FN**
Service Type: RES-DETOX
Resident Capacity: 155
Total Occupancy: 180
Target Population: 1.9
Expiration Date: 4/30/2018 IMS: No

Program Name: **MCALISTER INSTITUTE GROUP HOME-EAST**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2219 ODESSA COURT
City, State Zip: LEMON GROVE, CA 91945
Phone: (619) 461-4871
Record ID: **370045MN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **MCALISTER INSTITUTE GROUP HOME NORTH**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 323 HUNTER STREET
City, State Zip: RAMONA, CA 92065
Phone: (760) 789-0571 Fax: (760) 789-0577
Record ID: **370045QN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 4/30/2019 IMS: No

Program Name: **EAST COUNTY REGIONAL RECOVERY CENTER**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 1385 NORTH JOHNSON AVENUE, SUITES 102/103
City, State Zip: EL CAJON, CA 92020
Phone: (619) 440-4801
Record ID: **370045TN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **MCALISTER INSTITUTE GROUP HOME - SOUTH**
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2315 BAR BIT ROAD
City, State Zip: SPRING VALLEY, CA 91978
Phone: (619) 442-0277 Fax: (619) 337-3610
Record ID: **370045VN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

Program Name: **AMITY FOUNDATION OF CALIFORNIA**
Legal Name: EPIDAURUS
Address: 2260 WATSON WAY
City, State Zip: VISTA, CA 92083
Phone: (760) 599-1892 Fax: (760) 599-1884
Record ID: **370059AN**
Service Type: RES
Resident Capacity: 60
Total Occupancy: 68
Target Population: 1.2
Expiration Date: 12/31/2018 IMS: No

Program Name: **EAST COUNTY CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 545 NORTH MAGNOLIA AVENUE
City, State Zip: EL CAJON, CA 92020-3608
Phone: (619) 579-0947 Fax: (619) 558-6282
Record ID: **370069BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **NORTH COUNTY CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 504 WEST VISTA WAY
City, State Zip: VISTA, CA 92083
Phone: (760) 940-1836 Fax: (760) 940-1274
Record ID: **370069CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **NORTH INLAND REGIONAL RECOVERY CENTER**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 200 EAST WASHINGTON AVE., SUITE 100
City, State Zip: ESCONDIDO, CA 92025-1806
Phone: (760) 741-7708 Fax: (760) 741-5421
Record ID: **370069DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TEEN RECOVERY PROGRAM - NORTH INLAND**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 340 RANCHEROS DRIVE, SUITE 166
City, State Zip: SAN MARCOS, CA 92069
Phone: (760) 744-3672 Fax: (760) 744-6182
Record ID: **370069FN**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **MID-COAST REGIONAL RECOVERY CENTER**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3340 KEMPER STREET, SUITES 105 AND 207
City, State Zip: SAN DIEGO, CA 92110
Phone: (619) 523-8121 Fax: (619) 523-8121
Record ID: **370069IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **HARMONY WOMEN'S RECOVERY CENTER**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3645 RUFFIN ROAD,
SUITE 100
City, State Zip: SAN DIEGO, CA 92123-1875
Phone: (858) 384-6284 Fax: (858) 384-6453
Record ID: **370069MN**
Service Type: NON
Target Population: 1.3
Expiration Date: 1/31/2019 IMS: No

Program Name: **SOUTH COUNTY CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1172 3RD AVENUE, SUITE D1
City, State Zip: CHULA VISTA, CA 91911
Phone: (858) 573-2600 Fax: (858) 573-5144
Record ID: **370069QN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **FAMILY RECOVERY CENTER**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1100 SPORTFISHER DRIVE
City, State Zip: OCEANSIDE, CA 92054
Phone: (858) 573-2600 Fax: (760) 439-4779
Record ID: **370069TN**
Service Type: RES
Resident Capacity: 55
Total Occupancy: 90
Target Population: 1.4
Expiration Date: 5/31/2018 IMS: No

Program Name: **ACTION CENTRAL**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 6244 EL CAJON BOULEVARD, SUITES 15, 16, 17 &18
City, State Zip: SAN DIEGO, CA 92115-3918
Phone: (619) 287-8225 Fax: (619) 287-4146
Record ID: **370069XN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **SAN DIEGO CENTER FOR CHANGE**
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3340 KEMPER STREET, SUITE 101, 103 AND 104
City, State Zip: SAN DIEGO, CA 92110
Phone: (619) 758-1433 Fax: (619) 758-9823
Record ID: **370069YN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **UPAC, ADULT AND ADOLESCENT ALCOHOL AND DRUG TREATMENT PROGRAMS**
Legal Name: UNION OF PAN ASIAN COMMUNITIES
Address: 3288 EL CAJON BOULEVARD, SUITES 1A, 1B, 3, 5, 6, 10, 11, 12, AND 13
City, State Zip: SAN DIEGO, CA 92104
Phone: (619) 521-5720 Fax: (619) 521-5728
Record ID: **370071AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **DKA PARENTCARE FAMILY RECOVERY CENTER**
Legal Name: VISTA HILL FOUNDATION
Address: 4990 WILLIAMS AVENUE
City, State Zip: LA MESA, CA 91942
Phone: (619) 698-1663 Fax: (619) 698-1665
Record ID: **370072AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **PARENTCARE CENTRAL FAMILY RECOVERY CENTER**
Legal Name: VISTA HILL FOUNDATION
Address: 4125 ALPHA STREET
City, State Zip: SAN DIEGO, CA 92113
Phone: (619) 266-0166 Fax: (619) 698-1665
Record ID: **370072CN**
Service Type: NON
Target Population: 1.3
Expiration Date: 8/31/2017 IMS: No

Program Name: **VISTA HILL BRIDGES TEEN RECOVERY CENTER**
Legal Name: VISTA HILL FOUNDATION
Address: 220 EUCLID AVENUE, SUITE 40 AND 50
City, State Zip: SAN DIEGO, CA 92114
Phone: (858) 518-2192 Fax: (858) 874-1849
Record ID: **370072DN**
Service Type: NON
Target Population: 1.5
Expiration Date: 9/30/2017 IMS: No

Program Name: **CASA RAPHAEL**
Legal Name: ALPHA PROJECT FOR THE HOMELESS
Address: 975 AND 993 POSTAL WAY
City, State Zip: VISTA, CA 92083
Phone: (760) 630-9922 Fax: (760) 630-9996
Record ID: **370073AN**
Service Type: RES
Resident Capacity: 150
Total Occupancy: 150
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **UCSD CO-OCCURRING DISORDERS TREATMENT AND RECOVERY PROGRAM**
Legal Name: UNIVERSITY OF CALIFORNIA, SAN DIEGO
Address: 140 ARBOR DRIVE
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 543-7795 Fax: (619) 543-7013
Record ID: **370077AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SAN DIEGO RESCUE MISSION MEN'S CENTER RECOVERY PROGRAM**
Legal Name: SAN DIEGO RESCUE MISSION, INC.
Address: 120 ELM STREET, 3RD AND 4TH FLOOR
City, State Zip: SAN DIEGO, CA 92101
Phone: (619) 687-3720 Fax: (619) 704-2858
Record ID: **370080CN**
Service Type: RES
Resident Capacity: 188
Total Occupancy: 188
Target Population: 1.2
Expiration Date: 1/31/2019 IMS: No

Program Name: **NEW ENTRA CASA**
Legal Name: NEW ENTRA CASA CORPORATION
Address: 3575 PERSHING AVENUE
City, State Zip: SAN DIEGO, CA 92104
Phone: (619) 294-4526 Fax: (619) 294-4526
Record ID: **370083AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 4/30/2018 IMS: No

Program Name: **NARCONON JLB RANCH**
Legal Name: NARCONON FRESH START
Address: 35955 HIGHWAY 79
City, State Zip: WARNER SPRINGS, CA 92086
Phone: (760) 782-0471 Fax: (760) 782-0695
Record ID: **370087BN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NARCONON SUNSHINE SUMMIT LODGE**
Legal Name: NARCONON FRESH START
Address: 35025 HIGHWAY 79
City, State Zip: WARNER SPRINGS, CA 92086
Phone: (760) 418-0030 Fax: (888) 680-2730
Record ID: **370087CN**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 45
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **ESCONDIDO COMMUNITY SOBERING SERVICES**
Legal Name: INTERFAITH COMMUNITY SERVICES, INC.
Address: 1717, 1719 EAST WASHINGTON AVENUE
City, State Zip: ESCONDIDO, CA 92057
Phone: (760) 520-8306 Fax: (760) 745-5467
Record ID: **370093BN**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **THE LIGHTHOUSE COMMUNITY**
Legal Name: HEALTHCARE SERVICES, INC.
Address: 3880 ROSECRANS STREET
City, State Zip: SAN DIEGO, CA 92110
Phone: (619) 515-0243 Fax: (619) 235-0678
Record ID: **370094AP**
Service Type: RES-DETOX
Resident Capacity: 98
Total Occupancy: 98
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **CALVARY RANCH CHRISTIAN DRUG AND ALCOHOL RECOVERY FACILITY**
Legal Name: GOD'S HOUSE MINISTRIES, INCORPORATED
Address: 13610 WILLOW ROAD
City, State Zip: LAKESIDE, CA 92040
Phone: (619) 561-2599 Fax: (619) 561-4673
Record ID: **370098AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 5/31/2018 IMS: No

Program Name: **LASTING RECOVERY**
Legal Name: FARKAS & SAALINGER, PSYCHOLOGY CORP
Address: 6046 CORNERSTONE COURT WEST, SUITES 103, 105, 107, 108, 110, 111, 112, 113, 114, 115, 127 & 128
City, State Zip: SAN DIEGO, CA 92121
Phone: (858) 453-4315 Fax: (858) 453-5690
Record ID: **370101AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 1/31/2019 IMS: No

Program Name: **THE TRAINING CENTER**
Legal Name: TRAINING CENTER EPHESIANS 4:11-16
Address: 525 GRAND AVENUE
City, State Zip: SPRING VALLEY, CA 91977
Phone: (619) 327-5400 Fax: (619) 327-5410
Record ID: **370104AN**
Service Type: RES
Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.2
Expiration Date: 11/30/2017 IMS: No

Program Name: **REJUVE-NATIONS OUTPATIENTS FACILITY, INC.**
Legal Name: REJUVE-NATIONS OUTPATIENTS FACILITY, INC.
Address: 4101 UNIVERSITY AVENUE, SUITES E204-E205
City, State Zip: SAN DIEGO, CA 92195
Phone: (619) 602-9405 Fax: (951) 657-7180
Record ID: **370105AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PALOMAR FAMILY COUNSELING SERVICE, INC. DRUG AND ALCOHOL PROGRAM**
Legal Name: PALOMAR FAMILY COUNSELING SERVICE, INC.
Address: 1002 EAST GRAND AVENUE
City, State Zip: ESCONDIDO, CA 92025
Phone: (760) 741-2660 Fax: (760) 741-2647
Record ID: **370107AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **CAPALINA CLINIC**
Legal Name: SAN DIEGO HEALTH ALLIANCE
Address: 1560 CAPALINA ROAD
City, State Zip: SAN MARCOS, CA 92069
Phone: (760) 744-2104 Fax: (760) 744-1382
Record ID: **370108AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **FASHION VALLEY CLINIC**
Legal Name: SAN DIEGO HEALTH ALLIANCE
Address: 7545 METROPOLITAN DRIVE
City, State Zip: SAN DIEGO, CA 92108
Phone: (619) 718-9890 Fax: (619) 718-9897
Record ID: **370108CP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **EL CAJON TREATMENT CENTER**
Legal Name: SAN DIEGO HEALTH ALLIANCE
Address: 234 N. MAGNOLIA AVE.
City, State Zip: EL CAJON, CA 92020
Phone: (619) 579-8378 Fax: (619) 579-8155
Record ID: **370108DP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **THIRD AVENUE CLINIC**
Legal Name: SAN DIEGO TREATMENT SERVICES, LLC
Address: 1155 THIRD AVE.
City, State Zip: CHULA VISTA, CA 91911
Phone: (619) 498-8260 Fax: (619) 498-8265
Record ID: **370109AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ST. VINCENT DE PAUL VILLAGE RECOVERY SERVICES**
Legal Name: ST. VINCENT DE PAUL VILLAGE, INC.
Address: 16 15TH STREET, PAUL MIRABILE CENTER BUILDING,
GROUP ROOM 200 & 207 AND THERAPY ROOM 233 &234
City, State Zip: SAN DIEGO, CA 92101
Phone: (619) 233-8500 Fax: (619) 231-9542
Record ID: **370110AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **SAN DIEGO TREATMENT AND RECOVERY CENTER**
Legal Name: JC SERVICE AND ENTERPRISES, INC.
Address: 6244 EL CAJON BOULEVARD, SUITE 26
City, State Zip: SAN DIEGO, CA 92115
Phone: (619) 559-8242
Record ID: **370111AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **SOLEDAD HOUSE**
Legal Name: ABC SOBER LIVING., LLC
Address: 5330 SOLEDAD MOUNTAIN ROAD
City, State Zip: SAN DIEGO, CA 92109
Phone: (858) 204-1304 Fax: (858) 274-8700
Record ID: **370116AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 5/31/2019 IMS: No

Program Name: **SOLEDAD HOUSE II**
Legal Name: ABC SOBER LIVING., LLC
Address: 5214 SOLEDAD MOUNTAIN ROAD
City, State Zip: SAN DIEGO, CA 92109
Phone: (858) 204-1304 Fax: (858) 274-8700
Record ID: **370116BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3
Expiration Date: 8/31/2019 IMS: No

Program Name: **SAN DIEGO AMERICAN INDIAN HEALTH CENTER**
Legal Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Address: 2602 FIRST AVENUE, SUITE 100
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 234-2158 Ext:102 Fax: (619) 234-0505
Record ID: **370120AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 4/30/2019 IMS: No

Program Name: **ATON CENTER**
Legal Name: ATON CENTER, INC.
Address: 3250 COUNTRY ROSE CIRCLE
City, State Zip: ENCINITAS, CA 92024
Phone: (858) 759-5017 Fax: (858) 756-1686
Record ID: **370122AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: Yes

Program Name: **ATON CENTER**
Legal Name: ATON CENTER, INC.
Address: 3238 COUNTRY ROSE CIRCLE
City, State Zip: ENCINITAS, CA 92024
Phone: (858) 759-5017 Fax: (858) 759-5016
Record ID: **370122CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **ATON CENTER**
Legal Name: ATON CENTER, INC.
Address: 3462 WESTERN SPRINGS ROAD
City, State Zip: ENCINITAS, CA 92024
Phone: (858) 759-5017 Fax: (858) 759-5016
Record ID: **370122DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **ATON CENTER**
Legal Name: ATON CENTER, INC.
Address: 3262 COUNTRY ROSE CIRCLE
City, State Zip: ENCINITAS, CA 92024
Phone: (858) 759-5017 Fax: (858) 759-5016
Record ID: **370122EP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **ATON CENTER**
Legal Name: ATON CENTER, INC.
Address: 3225 COUNTRY ROSE CIRCLE
City, State Zip: ENCINITAS, CA 92024
Phone: (858) 759-5017 Fax: (858) 759-5016
Record ID: **370122FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: Yes

Program Name: **SAN DIEGO ADDICTION TREATMENT CENTER, INC.**
Legal Name: SAN DIEGO ADDICTION TREATMENT CENTER, INC.
Address: 2456 E STREET
City, State Zip: SAN DIEGO, CA 92102
Phone: (619) 507-6510 Fax: (619) 269-9056
Record ID: **370129AP**
Service Type: RES-DETOX
Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NEW HORIZON RECOVERY**
Legal Name: MARTINA COFFELT
Address: 417 SANDALWOOD COURT
City, State Zip: ENCINITAS, CA 92024
Phone: (760) 805-4015 Fax: (760) 529-4403
Record ID: **370130AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **WEST COAST RECOVERY CENTERS**
Legal Name: WEST COAST MEN'S, LLC
Address: 516 SOUTH THE STRAND, UNIT B
City, State Zip: OCEANSIDE, CA 92054
Phone: (855) 927-2687 Fax: (760) 434-2238
Record ID: **370135AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 7/31/2018 IMS: No

Program Name: **WEST COAST RECOVERY CENTERS**
Legal Name: WEST COAST MEN'S, LLC
Address: 785 GRAND AVENUE
SUITES 214, 216, & 220
City, State Zip: CARLSBAD, CA 92008
Phone: (442) 500-8236 Fax: (442) 500-8479
Record ID: **370135BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **PACIFIC BAY RECOVERY**
Legal Name: PACIFIC BAY RECOVERY INC
Address: 1501 5TH AVENUE, SUITE 100,101 AND 201
City, State Zip: SAN DIEGO, CA 92101
Phone: (619) 456-0811 Fax: (619) 456-0832
Record ID: **370136AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 5/31/2018 IMS: No

Program Name: **PACIFIC BAY RECOVERY**
Legal Name: PACIFIC BAY RECOVERY INC
Address: 4095 JACKDAW STREET
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 542-9956 Fax: (619) 456-0832
Record ID: **370136CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **TRUE LIFE CENTER FOR WELLBEING, INC.**
Legal Name: TRUE LIFE CENTER FOR WELLBEING, INC.
Address: 4520 EXECUTIVE DRIVE, SUITE 225
City, State Zip: SAN DIEGO, CA 92121
Phone: (858) 349-4116
Record ID: **370137AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **APEX RECOVERY**
Legal Name: APEX RECOVERY, LLC
Address: 4251 NABAL DRIVE
City, State Zip: LA MESA, CA 91941
Phone: (619) 756-6424 Fax: (619) 243-7211
Record ID: **370138AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **APEX RECOVERY**
Legal Name: APEX RECOVERY, LLC
Address: 9952 GRANDVIEW DRIVE
City, State Zip: LA MESA, CA 91941
Phone: (619) 756-6424 Fax: (619) 243-7211
Record ID: **370138BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **GENESIS RECOVERY, INC.**
Legal Name: GENESIS RECOVERY, INC.
Address: 24352 FEATHERSTONE CANYON ROAD
City, State Zip: LAKESIDE, CA 92040
Phone: (619) 797-7319 Fax: (619) 367-9737
Record ID: **370139AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 31
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **GENESIS RECOVERY, INC. DAY PROGRAM**
Legal Name: GENESIS RECOVERY, INC.
Address: 7373 UNIVERSITY AVE, SUITE 110
City, State Zip: LA MESA, CA 91942
Phone: (619) 797-7319 Fax: (619) 367-9737
Record ID: **370139BN**
Service Type: NON
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **CONFIDENTIAL RECOVERY**
Legal Name: COMMUNITY BEHAVIORAL HEALTH SOLUTIONS, INC.
Address: 7071 CONSOLIDATED WAY
City, State Zip: SAN DIEGO, CA 92121
Phone: (858) 449-3898
Record ID: **370140AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PRACTICAL RECOVERY IOP**
Legal Name: PRACTICAL RECOVERY PSYCHOLOGY GROUP, INC.
Address: 8950 VILLA LA JOLLA DRIVE, SUITE B214
City, State Zip: LA JOLLA, CA 92037-1708
Phone: (858) 546-1100 Fax: (858) 455-0141
Record ID: **370141AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SOLUTIONS FOR RECOVERY**
Legal Name: FAMILY HEALTH CENTERS OF SAN DIEGO, INC.
Address: 2136 EL CAJON BOULEVARD
City, State Zip: SAN DIEGO, CA 92104
Phone: (619) 515-2588 Fax: (619) 269-8349
Record ID: **370142AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA RECOVERY CENTER - ENCINITAS**
Legal Name: DR RECOVERY ENCINITAS, LLC
Address: 609 S. VULCAN AVENUE, SUITE 301
City, State Zip: ENCINITAS, CA 92024
Phone: (800) 410-6552 Fax: (949) 542-3878
Record ID: **370143AP**
Service Type: NON
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **RECOVERY WORKS SAN DIEGO**
Legal Name: CLARK E. SMITH, M.D., A MEDICAL CORPORATION
Address: 9820 WILLOW CREEK ROAD, #295
City, State Zip: SAN DIEGO, CA 92131
Phone: (858) 530-9112
Record ID: **370144AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **FOUNDATIONS OF SAN DIEGO**
Legal Name: FOUNDATIONS SAN DIEGO, LLC
Address: 3930 FOURTH AVENUE, SUITE 301
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 849-6011 Fax: (619) 230-5554
Record ID: **370146AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **SHERIDAN GARDENS**
Legal Name: SIERRA ASSET MANAGEMENT, LLC
Address: 2021 SHERIDAN ROAD
City, State Zip: ENCINITAS, CA 92024
Phone: (706) 230-1176 Fax: (949) 660-0632
Record ID: **370147AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **PRESENT MOMENTS RECOVERY**
Legal Name: WINDRIVER RECOVERY, LLC
Address: 1809 WINDRIVER STREET
City, State Zip: SAN MARCOS, CA 92078
Phone: (619) 363-4767 Fax: (619) 655-4732
Record ID: **370148AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **PACIFIC TREATMENT SERVICES**
Legal Name: W. WOOTON, INC.
Address: 333 SOUTH JUNIPER STREET, SUITE 114
City, State Zip: ESCONDIDO, CA 92025
Phone: (858) 610-0438
Record ID: **370150AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **CROWNVIEW CO-OCCURRING INSTITUTE INCORPORATED**
Legal Name: CROWNVIEW CO-OCCURRING INSTITUTE, INCORPORATED
Address: 2892 JEFFERSON STREET
City, State Zip: CARLSBAD, CA 92008
Phone: (760) 434-9500 Fax: (760) 434-3550
Record ID: **370151AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **AFFINITY TREATMENT CENTERS**
Legal Name: CAMELOT AT AFFINITY TREATMENT CENTERS, INC.
Address: 2035 ALTA VISTA DRIVE
City, State Zip: VISTA, CA 92084
Phone: (760) 917-1112 Fax: (760) 414-9127
Record ID: **370152AP**
Service Type: RES
Resident Capacity: 5
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **OCEAN RANCH RECOVERY**
Legal Name: SOCAL DETOX LLC
Address: 20555 FORTUNA DEL SUR
City, State Zip: ELFIN FOREST, CA 92029
Phone: (888) 590-0777 Fax: (360) 323-7285
Record ID: **370153AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **VILLA KALI MA**
Legal Name: KALI WEST LLC
Address: 2912 MANAGUA PLACE
City, State Zip: CARLSBAD, CA 92009
Phone: (619) 246-8862 Fax: (760) 683-5157
Record ID: **370154AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 7/31/2018 IMS: No

Program Name: **SOBER COLLEGE SAN DIEGO**
Legal Name: SAN DIEGO STUDENT RECOVERY, LLC
Address: 5440 MOREHOUSE DRIVE, #4500
City, State Zip: SAN DIEGO, CA 92121
Phone: (310) 363-2415 Fax: (858) 750-3205
Record ID: **370155AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **DIEGO PALMS RECOVERY**
Legal Name: DIEGO PALMS RECOVERY, INC.
Address: 700 GARDEN VIEW COURT,
SUITE 202
City, State Zip: ENCINITAS, CA 92024
Phone: (760) 479-6163
Record ID: **370156AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **TRUE NORTH RECOVERY SERVICES**
Legal Name: TRUE NORTH BEHAVIORAL, APC
Address: 543 ENCINITAS BOULEVARD,
SUITE 109
City, State Zip: ENCINITAS, CA 92024
Phone: (760) 517-6544 Fax: (888) 850-3284
Record ID: **370157AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SOUTHERN CALIFORNIA RECOVERY CENTERS**
Legal Name: SOUTHERN CALIFORNIA RECOVERY CENTERS OCEANSIDE, LLC
Address: 2850 PIO PICO DRIVE, SUITES A, B, C, & D
City, State Zip: CARLSBAD, CA 92008
Phone: (949) 542-3879 Fax: (760) 607-3038
Record ID: **370158AP**
Service Type: NON
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **LA JOLLA RECOVERY**
Legal Name: LA JOLLA RECOVERY, INC.
Address: 7301 GIRARD AVENUE, SUITE LL
City, State Zip: LA JOLLA, CA 92037
Phone: (858) 345-7926
Record ID: **370159AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **PACIFIC PALMS RECOVERY**
Legal Name: PACIFIC PALMS RECOVERY, LLC
Address: 2215 MESA DRIVE
City, State Zip: OCEANSIDE, CA 92054
Phone: (949) 228-4207 Fax: (949) 234-9634
Record ID: **370160AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **BLVD CENTERS, INC.**
Legal Name: BLVD CENTERS INC.
Address: 3785 6TH AVENUE,
200
City, State Zip: SAN DIEGO, CA 92103
Phone: (619) 541-6078 Fax: (213) 262-2082
Record ID: **370161AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PARAGON RECOVERY**
Legal Name: PARAGON RECOVERY, LLC.
Address: 1852 SANTA MARGARITA DRIVE
City, State Zip: FALLBROOK, CA 92028
Phone: (760) 731-1386
Record ID: **370163AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **TALK THERAPY PSYCHOLOGY CENTER**
Legal Name: TALK THERAPY PSYCHOLOGY CENTER, CORP.
Address: 5935 CORNERSTONE COURT WEST
SUITE 125
City, State Zip: SAN DIEGO, CA 92121
Phone: (858) 205-2490
Record ID: **370164AP**
Service Type: NON
Target Population: 1.8
Expiration Date: 10/31/2018 IMS: No

Program Name: **LA JOLLA ADDICTION HEALING CENTER**
Legal Name: LA JOLLA ADDICTION HEALING CENTER
Address: 7590 FAY AVENUE, SUITE 404
City, State Zip: LA JOLLA, CA 92037
Phone: (858) 454-4357
Record ID: **370165AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 12/31/2018 IMS: No

Program Name: **FUTURES TREATING ADDICTIONS**
Legal Name: FUTURES RECOVERY, INC.
Address: 1405 MISSOURI AVENUE
City, State Zip: OCEANSIDE, CA 92054
Phone: (800) 944-6441 Fax: (800) 944-6441
Record ID: **370166AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **BETTY FORD CENTER - SAN DIEGO**
Legal Name: HAZELDEN BETTY FORD FOUNDATION
Address: 11720 EL CAMINO REAL, SUITE 200
City, State Zip: SAN DIEGO, CA 92130
Phone: (858) 766-9980 Fax: (858) 259-0197
Record ID: **370167AN**
Service Type: NON
Target Population: 1.7
Expiration Date: 5/31/2019 IMS: No

Program Name: **CALIFORNIA VISTAS ADDICTION TREATMENT**
Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC
Address: 3875 PEONY DRIVE
City, State Zip: FALLBROOK, CA 92028
Phone: (951) 764-3950 Fax: (909) 245-1090
Record ID: **370168AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: Yes

Program Name: **IMMERSIVE RECOVERY**
Legal Name: CALIFORNIA COASTAL RECOVERY CENTERS, LLC
Address: 1582 W. SAN MARCOS BLVD, SUITE 301
City, State Zip: SAN MARCOS, CA 92069
Phone: (858) 342-9151
Record ID: **370169AP**
Service Type: NON
Target Population: 1.7
Expiration Date: 4/30/2019 IMS: No

Program Name: **RESTORE DETOX CENTERS**
Legal Name: RESTORE TREATMENT CENTERS, LLC
Address: 14099 SKY MOUNTAIN TRAIL
City, State Zip: POWAY, CA 92064
Phone: (949) 813-6151 Fax: (760) 216-6760
Record ID: **370171AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **SHORELINE RANCH**
Legal Name: PURE LIFE RECOVERY, LLC.
Address: 19915 FORTUNA DEL ESTE
City, State Zip: ESCONDIDO, CA 92029
Phone: (949) 346-2486 Fax: (949) 545-6267
Record ID: **370174AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Francisco County**

Program Name: **ACCEPTANCE PLACE**
Legal Name: BAKER PLACES, INC.
Address: 1326 4TH AVENUE
City, State Zip: SAN FRANCISCO, CA 94122
Phone: (415) 682-2080 Fax: (415) 626-2398
Record ID: **380001BN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 1/31/2018 IMS: No

Program Name: **FERGUSON PLACE**
Legal Name: BAKER PLACES, INC.
Address: 1249 SCOTT STREET
City, State Zip: SAN FRANCISCO, CA 94115
Phone: (415) 922-9104 Fax: (415) 922-1427
Record ID: **380001CN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **JOE HEALY DETOXIFICATION PROGRAM**
Legal Name: BAKER PLACES, INC.
Address: 101 GOUGH/120 PAGE STREET, 2ND AND 3RD FLOOR
City, State Zip: SAN FRANCISCO, CA 94102
Phone: (415) 553-4490
Record ID: **380001IN**
Service Type: RES-DETOX
Resident Capacity: 31
Total Occupancy: 31
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **ARA FIRST STEP HOME**
Legal Name: ALCOHOLICS REHABILITATION ASSOCIATION OF SAN FRANCISCO, INC.
Address: 1035 HAIGHT STREET
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 863-3661 Fax: (415) 863-3670
Record ID: **380003AN**
Service Type: RES
Resident Capacity: 45
Total Occupancy: 45
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **FRIENDSHIP HOUSE**
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS
Address: 56 JULIAN AVENUE, 1ST, 2ND AND 3RD AND 4TH FLOORS
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 865-0964 Fax: (415) 865-5428
Record ID: **380004AN**
Service Type: RES
Resident Capacity: 80
Total Occupancy: 80
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **GOLDEN GATE FOR SENIORS**
Legal Name: COMMUNITY AWARENESS & TREATMENT SERVICES, INC.
Address: 637 SOUTH VAN NESS AVENUE
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 626-7553
Record ID: **380005AN**
Service Type: RES
Resident Capacity: 19
Total Occupancy: 20
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HARBOR LIGHT ALCOHOL SERVICES CENTER**
Legal Name: THE SALVATION ARMY
Address: 1275 HARRISON STREET
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 503-3000
Record ID: **380006AN**
Service Type: RES-DETOX
Resident Capacity: 118
Total Occupancy: 118
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **THE SALVATION ARMY - HARBOR HOUSE**
Legal Name: THE SALVATION ARMY
Address: 407 NINTH STREET
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 503-3000 Fax: (415) 252-6159
Record ID: **380006EN**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 82
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **LATINO FAMILY ALCOHOLISM COUNSELING CENTER**
Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING
Address: 154-A CAPP STREET
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 826-6767 Fax: (415) 826-1408
Record ID: **380008AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **FAMILY DAY TREATMENT PROGRAM**
Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING
Address: 154-A CAPP STREET
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 826-0554 Fax: (415) 701-1868
Record ID: **380008BN**
Service Type: NON
Target Population: 1.7
Expiration Date: 1/31/2019 IMS: No

Program Name: **HENRY OHLHOFF HOUSE**
Legal Name: HENRY OHLHOFF HOUSE
Address: 601 AND 625 STEINER STREET
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 621-4388 Fax: (415) 626-0170
Record ID: **380013AN**
Service Type: RES
Resident Capacity: 52
Total Occupancy: 52
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **HENRY OHLHOFF OUTPATIENT PROGRAMS**
Legal Name: HENRY OHLHOFF HOUSE
Address: 2191 MARKET STREET, SUITE A
City, State Zip: SAN FRANCISCO, CA 94114
Phone: (415) 575-1100 Fax: (415) 575-1106
Record ID: **380013BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 1735 MISSION STREET
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 970-7500 Fax: (415) 746-1968
Record ID: **380016ACN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 1318 GATEVIEW STREET, TREASURE ISLAND UNITS A-F;
1442 CHINOOK COURT, UNIT D
City, State Zip: SAN FRANCISCO, CA 94130
Phone: (415) 970-7500 Fax: (415) 437-6823
Record ID: **380016ADN**
Service Type: RES
Resident Capacity: 57
Total Occupancy: 57
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 890 HAYES STREET
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 970-7500
Record ID: **380016AFN**
Service Type: RES
Resident Capacity: 115
Total Occupancy: 115
Target Population: 1.2
Expiration Date: 4/30/2018 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 214 HAIGHT STREET
City, State Zip: SAN FRANCISCO, CA 94102
Phone: (415) 762-3700 Fax: (415) 989-4910
Record ID: **380016AHN**
Service Type: RES
Resident Capacity: 64
Total Occupancy: 64
Target Population: 1.3
Expiration Date: 3/31/2019 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 1601 DONNER AVENUE #3
City, State Zip: SAN FRANCISCO, CA 94124
Phone: (415) 970-7500 Fax: (415) 970-7518
Record ID: **380016AJN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 2261 AND 2263 BRYANT STREET
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 970-7500 Fax: (415) 000-0000
Record ID: **380016AKN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 25
Target Population: 1.4
Expiration Date: 7/31/2017 IMS: No

Program Name: **HEALTHRIGHT 360**
Legal Name: HEALTHRIGHT 360
Address: 815 BUENA VISTA WEST
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 970-7500 Fax: (415) 437-6823
Record ID: **380016ALN**
Service Type: RES-DETOX
Resident Capacity: 108
Total Occupancy: 108
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **YOUTH SERVICES OF SAN FRANCISCO**
Legal Name: HEALTHRIGHT 360
Address: 2166 HAYES STREET, SUITE 302
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 776-1001 Fax: (415) 776-1066
Record ID: **380016ANN**
Service Type: NON
Target Population: 1.5
Expiration Date: 1/31/2018 IMS: No

Program Name: **ASIAN AMERICAN RESIDENTIAL RECOVERY SERVICES**
Legal Name: HEALTHRIGHT 360
Address: 2024 HAYES STREET
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 750-5111
Record ID: **380016AON**
Service Type: RES
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **AARS-PROJECT ADAPT**
Legal Name: HEALTHRIGHT 360
Address: 2020 HAYES STREET
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 750-5125
Record ID: **380016AQN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **LEE WOODWARD COUNSELING CENTER FOR WOMEN**
Legal Name: HEALTHRIGHT 360
Address: 2166 HAYES STREET, SUITE 303 & 303-A
City, State Zip: SAN FRANCISCO, CA 94117
Phone: (415) 776-1001 Fax: (415) 776-1066
Record ID: **380016ARN**
Service Type: NON
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **HEALTHRIGHT 360 - OUTPATIENT PROGRAM**
Legal Name: HEALTHRIGHT 360
Address: 1735 MISSION STREET, SUITE 3280
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 762-3700 Ext:301
Record ID: **380016ASN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **FATHER ALFRED CENTER**
Legal Name: ST. ANTHONY FOUNDATION
Address: 291 10TH STREET
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 592-2880 Fax: (415) 252-0537
Record ID: **380017CN**
Service Type: RES
Resident Capacity: 80
Total Occupancy: 80
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **STEPPING STONE**
Legal Name: SAN FRANCISCO WOMEN'S REHABILITATION FOUNDATION, INCORPORATED
Address: 255 10TH AVENUE
City, State Zip: SAN FRANCISCO, CA 94118
Phone: (415) 751-5921 Fax: (415) 751-5130
Record ID: **380032AN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **GOOD SHEPHERD GRACENTER**
Legal Name: THE GOOD SHEPHERD GRACENTER OF SAN FRANCISCO
Address: 250 AMHERST STREET
City, State Zip: SAN FRANCISCO, CA 94134
Phone: (415) 337-1938 Fax: (415) 586-0355
Record ID: **380040BN**
Service Type: RES
Resident Capacity: 13
Total Occupancy: 13
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **JELANI HOUSE**
Legal Name: JELANI, INC.
Address: 1601 QUESADA AVENUE
City, State Zip: SAN FRANCISCO, CA 94124
Phone: (415) 822-5977 Fax: (415) 822-5943
Record ID: **380045AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 42
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **JELANI, INC.'S FAMILY PROGRAM**
Legal Name: JELANI, INC.
Address: 1638 AND 1640 KIRKWOOD STREET
City, State Zip: SAN FRANCISCO, CA 94124
Phone: (415) 671-1165 Fax: (415) 671-1043
Record ID: **380045DN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **CASA QUETZAL RECOVERY HOME**
Legal Name: LATINO COMMISSION ON ALCOHOL AND
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.
Address: 635 BRUNSWICK STREET
City, State Zip: SAN FRANCISCO, CA 94112
Phone: (415) 337-4065
Record ID: **380055AN**
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **AVIVA HOUSE**
Legal Name: LATINO COMMISSION ON ALCOHOL AND
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.
Address: 1724-1726 BRYANT STREET
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 558-9125 Fax: (650) 244-1447
Record ID: **380055BN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.3
Expiration Date: 3/31/2018 IMS: No

Program Name: **HORIZONS UNLIMITED OF SAN FRANCISCO, INC.**
Legal Name: HORIZONS UNLIMITED OF SAN FRANCISCO, INC.
Address: 440 POTRERO AVENUE
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 487-6700 Fax: (415) 487-6724
Record ID: **380059AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **STIMULANT TREATMENT OUTPATIENT PROGRAM (STOP)**
Legal Name: UNIVERISTY OF CALIFORNIA, SAN FRANCISCO
Address: 982 MISSION STREET
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 597-8038 Fax: (415) 597-8004
Record ID: **380061AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **EPIPHANY HOUSE**
Legal Name: MOUNT ST. JOSEPH - ST. ELIZABETH
Address: 1615 BRODERICK STREET
City, State Zip: SAN FRANCISCO, CA 94115
Phone: (415) 409-6003 Fax: (415) 351-4051
Record ID: **380081BN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 22
Target Population: 1.4
Expiration Date: 11/30/2017 IMS: No

Program Name: **EPIPHANY RESIDENTIAL PROGRAM**
Legal Name: MOUNT ST. JOSEPH - ST. ELIZABETH
Address: 100 MASONIC AVENUE
City, State Zip: SAN FRANCISCO, CA 94118
Phone: (415) 567-8370 Fax: (415) 292-5531
Record ID: **380081CN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 26
Target Population: 1.4
Expiration Date: 11/30/2017 IMS: No

Program Name: **HARM REDUCTION THERAPY CENTER**
Legal Name: THE HARM REDUCTION THERAPY CENTER
Address: 45 FRANKLIN STREET, SUITE 320
City, State Zip: SAN FRANCISCO, CA 94102
Phone: (415) 252-0669 Fax: (415) 252-0669
Record ID: **380082AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **POST RELEASE EDUCATION PROGRAM (P.R.E.P.)**
Legal Name: SAN FRANCISCO SHERIFF'S DEPARTMENT
Address: 70 OAK GROVE
City, State Zip: SAN FRANCISCO, CA 94107
Phone: (415) 575-6450 Fax: (415) 575-6452
Record ID: **380083BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SUBSTANCE ABUSE PROGRAM**
Legal Name: CURRY SENIOR CENTER
Address: 315 TURK STREET
City, State Zip: SAN FRANCISCO, CA 94102
Phone: (415) 885-2274 Fax: (415) 885-2344
Record ID: **380091AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **NATIVE AMERICAN HEALTH CENTER**
Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.
Address: 160 CAPP STREET, 2ND FLOOR
City, State Zip: SAN FRANCISCO, CA 94110
Phone: (415) 503-1046 Fax: (415) 503-7081
Record ID: **380094AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

Program Name: **THE STONEWALL PROJECT**
Legal Name: THE SAN FRANCISCO AIDS FOUNDATION
Address: 1035 MARKET STREET, SUITE 400
City, State Zip: SAN FRANCISCO, CA 94103
Phone: (415) 487-3100 Fax: (415) 558-9657
Record ID: **380096AN**
Service Type: NON
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC.**
Legal Name: ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC.
Address: 730 POLK STREET, 4TH FLOOR
City, State Zip: SAN FRANCISCO, CA 94109
Phone: (415) 292-3400 Fax: (415) 292-3404
Record ID: **380098AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **BAYVIEW HUNTERS POINT FOUNDATION YOUTH SERVICES PROGRAM**
Legal Name: BAYVIEW HUNTERS POINT FOUNDATION FOR COMMUNITY IMPROVEMENT
Address: 5015 THIRD STREET
City, State Zip: SAN FRANCISCO, CA 94124
Phone: (415) 822-1585 Fax: (415) 822-6443
Record ID: **380101DN**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **BAYSIDE SAN FRANCISCO**
Legal Name: BAYSIDE MARIN, INC.
Address: 450 SUTTER STREET, SUITE 300
City, State Zip: SAN FRANCISCO, CA 94108
Phone: (415) 721-2000
Record ID: **380102AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **FOUNDATIONS SAN FRANCISCO**
Legal Name: FRN OUTPATIENT SAN FRANCISCO LLC
Address: 55 FRANCISCO STREET, SUITE 405
City, State Zip: SAN FRANCISCO, CA 94133
Phone: (415) 293-1370 Fax: (415) 923-8899
Record ID: **380104AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **UCSF ALLIANCE HEALTH PROJECT**
Legal Name: THE REGENTS OF THE UNIVERSITY OF CALIFORNIA
Address: 1930 MARKET STREET
City, State Zip: SAN FRANCISCO, CA 94102
Phone: (415) 476-3902 Fax: (415) 476-3655
Record ID: **380105AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Joaquin County**

Program Name: **RECOVERY HOUSE**
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH/SUBSTANCE ABUSE SERVICES
Address: 500 WEST HOSPITAL ROAD
City, State Zip: FRENCH CAMP, CA 95231
Phone: (209) 468-6857 Fax: (209) 468-6739
Record ID: **390002AN**
Service Type: RES-DETOX
Resident Capacity: 69
Total Occupancy: 69
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **CHEMICAL DEPENDENCY COUNSELING CENTER**
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES/SUBSTANCE ABUSE SERVICES
Address: 620 NORTH AURORA STREET
SUITES 1, 3, 3A, AND S2-9
City, State Zip: STOCKTON, CA 95202
Phone: (209) 468-3720 Fax: (209) 468-8640
Record ID: **390002DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **FAMILY TIES**
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES/SUBSTANCE ABUSE SERVICES
Address: 500 WEST HOSPITAL ROAD
City, State Zip: FRENCH CAMP, CA 95231
Phone: (209) 468-6208 Fax: (209) 468-7032
Record ID: **390002EN**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 53
Target Population: 1.3
Expiration Date: 1/31/2018 IMS: No

Program Name: **THREE RIVERS INDIAN LODGE**
Legal Name: NATIVE DIRECTIONS, INC.
Address: 13505 SOUTH UNION ROAD
City, State Zip: MANTECA, CA 95336
Phone: (209) 858-2421 Fax: (209) 858-4692
Record ID: **390003AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2
Expiration Date: 5/31/2019 IMS: No

Program Name: **NEW DIRECTIONS**
Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM
Address: 1981 CHEROKEE ROAD
City, State Zip: STOCKTON, CA 95205
Phone: (209) 870-6506 Fax: (209) 982-1216
Record ID: **390007BN**
Service Type: RES-DETOX
Resident Capacity: 90
Total Occupancy: 95
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **NEW DIRECTIONS**
Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM
Address: 1981 CHEROKEE ROAD,
OP MEETING ROOM
City, State Zip: STOCKTON, CA 95205
Phone: (209) 870-6506 Fax: (209) 870-6521
Record ID: **390007CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **SERVICE FIRST OUTPATIENT PROGRAM**
Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA
Address: 1222 MONACO COURT, SUITE 28
City, State Zip: STOCKTON, CA 95207
Phone: (209) 644-6327 Fax: (209) 644-6327
Record ID: **390017AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **SERVICE FIRST OUTPATIENT PROGRAM**
Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA
Address: 445 W. WEBER AVENUE, SUITE 129
City, State Zip: STOCKTON, CA 95203
Phone: (209) 644-4829
Record ID: **390017BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **VALLEY COMMUNITY COUNSELING SERVICES, INC.**
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.
Address: 129 E. CENTER STREET, SUITE 4
City, State Zip: MANTECA, CA 95336
Phone: (209) 823-1911 Fax: (209) 823-1931
Record ID: **390029AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **VALLEY COMMUNITY COUNSELING SERVICES**
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.
Address: 1300 WEST LODI AVENUE, SUITE G1+ G2
City, State Zip: LODI, CA 95242
Phone: (209) 334-2126 Fax: (209) 334-9340
Record ID: **390029BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **VALLEY COMMUNITY COUNSELING SERVICES, INC.**
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.
Address: 19 EAST 6TH STREET
City, State Zip: TRACY, CA 95376
Phone: (209) 835-8583 Fax: (209) 835-2910
Record ID: **390029CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **PACIFIC VALLEY RECOVERY CENTER, INCORPORATED**
Legal Name: PACIFIC VALLEY RECOVERY CENTER, INCORPORATED
Address: 1125 N. HUNTER STREET, SUITE 14-A
City, State Zip: STOCKTON, CA 95202
Phone: (209) 817-5720 Fax: (209) 466-7627
Record ID: **390030AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **FRESH BEGINNING, INC.**
Legal Name: FRESH BEGINNING, INC.
Address: 72 WEST 11TH STREET, SUITE A
City, State Zip: TRACY, CA 95376
Phone: (209) 830-7400 Fax: (209) 833-8386
Record ID: **390031AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **STOCKTON CIRCLE OF FRIENDS ADULT PROGRAM**
Legal Name: STOCKTON CIRCLE OF FRIENDS ADULT PROGRAMS
Address: 3120 AND 3128 EAST ANITA STREET
City, State Zip: STOCKTON, CA 95205
Phone: (209) 475-8088 Fax: (209) 956-2009
Record ID: **390032AN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 6/30/2017 IMS: No

Program Name: **SOUTH STOCKTON CIRCLE OF FRIENDS ADULT ALCOHOL AND DRUG TREATMENT FACILITY**
Legal Name: WAYNE B. RICHARDSON
Address: 1484 CARPENTER ROAD
City, State Zip: STOCKTON, CA 95206
Phone: (209) 513-5042 Fax: (209) 513-5042
Record ID: **390037AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 7/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Luis Obispo County**

Program Name: **SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES**
Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES
Address: 2180 JOHNSON AVENUE, ROOMS 101-148 AND BLUE ROOM
City, State Zip: SAN LUIS OBISPO, CA 93401
Phone: (805) 781-4275
Record ID: **400003AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES**
Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES
Address: 1523 LONGBRANCH AVENUE
City, State Zip: GROVER BEACH, CA 93433
Phone: (805) 473-7080 Fax: (805) 473-7188
Record ID: **400003DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **CENTRAL COAST FREEDOM CENTER**
Legal Name: ARTEMIS HILL RECOVERY INC.
Address: 6005 CAPISTRANO AVENUE,
SUITE C, D, E, F, G & H
City, State Zip: ATASCADERO, CA 93422
Phone: (805) 461-1519
Record ID: **400005AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2017 IMS: No

Program Name: **BRYAN'S HOUSE**
Legal Name: BRYAN'S HOUSE
Address: 6480 NORTH STAR LANE
City, State Zip: PASO ROBLES, CA 93446-7639
Phone: (805) 591-9233 Fax: (805) 238-6309
Record ID: **400008AP**
Service Type: RES
Resident Capacity: 5
Total Occupancy: 16
Target Population: 1.12
Expiration Date: 4/30/2018 IMS: No

Program Name: **THE HAVEN AT PISMO**
Legal Name: TIKVA TREATMENT, LLC
Address: 929 HIDDEN PINE LANE
City, State Zip: ARROYO GRANDE, CA 93420
Phone: (805) 202-3440
Record ID: **400009AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE HAVEN AT PISMO**
Legal Name: TIKVA TREATMENT, LLC
Address: 107 NELSON STREET,
SUITE 102
City, State Zip: ARROYO GRANDE, CA 93420
Phone: (805) 202-3440
Record ID: **400009BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE HAVEN AT PISMO**
Legal Name: TIKVA TREATMENT, LLC
Address: 2030 IDYLLWILD PLACE
City, State Zip: ARROYO GRANDE, CA 93420
Phone: (805) 202-3440
Record ID: **400009CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE HAVEN AT PISMO**
Legal Name: TIKVA TREATMENT, LLC
Address: 944 VIA SOLANA
City, State Zip: ARROYO GRANDE, CA 93420
Phone: (805) 202-3440
Record ID: **400009DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **San Mateo County**

Program Name: **PALM AVENUE SOCIAL MODEL DETOXIFICATION**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 2251 PALM AVENUE
City, State Zip: SAN MATEO, CA 94403
Phone: (650) 513-6500 Fax: (650) 513-6506
Record ID: **410003AN**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **BETTS HOUSE**
Legal Name: PROJECT NINETY
Address: 23 AND 29 NORTH GRANT STREET
City, State Zip: SAN MATEO, CA 94401
Phone: (650) 579-7881 Fax: (650) 579-2640
Record ID: **410005CN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 11
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **ELLIOTT CENTER**
Legal Name: PROJECT NINETY
Address: 314 BADEN AVENUE
City, State Zip: SOUTH SAN FRANCISCO, CA 94080
Phone: (650) 579-7881 Fax: (650) 579-2640
Record ID: **410005MN**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **BRENNER HOUSE**
Legal Name: PROJECT NINETY
Address: 535 BADEN AVENUE
City, State Zip: SOUTH SAN FRANCISCO, CA 94080
Phone: (650) 579-7881
Record ID: **410005RN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **PROJECT NINETY**
Legal Name: PROJECT NINETY
Address: 416 2ND AVENUE
City, State Zip: SAN MATEO, CA 94401
Phone: (650) 579-7157 Ext:0 Fax: (650) 579-2640
Record ID: **410005VN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **PYRAMID ALTERNATIVES**
Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.
Address: 480 MANOR PLAZA
City, State Zip: PACIFICA, CA 94044
Phone: (650) 355-8787 Fax: (650) 355-8780
Record ID: **410006AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **PYRAMID ALTERNATIVES**
Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.
Address: 1590 EL CAMINO REAL, UNITS H AND J
City, State Zip: SAN BRUNO, CA 94066
Phone: (650) 355-8787 Fax: (650) 355-8780
Record ID: **410006CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **OUR COMMON GROUND EPA**
Legal Name: OUR COMMON GROUND, INC.
Address: 2560 PULGAS AVENUE
City, State Zip: EAST PALO ALTO, CA 94303
Phone: (650) 325-6466 Fax: (650) 364-7987
Record ID: **410012CN**
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **HOPE HOUSE**
Legal Name: SERVICES LEAGUE OF SAN MATEO COUNTY
Address: 3787-A, 3787-B AND 3789 HOOVER STREET
City, State Zip: REDWOOD CITY, CA 94063
Phone: (650) 363-8735 Fax: (650) 363-8701
Record ID: **410013AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 20
Target Population: 1.4
Expiration Date: 5/31/2019 IMS: No

Program Name: **CASA MARIA RECOVERY HOME**
Legal Name: LATINO COMMISSION ON ALCOHOL AND
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.
Address: 508 7TH AVENUE
City, State Zip: SAN BRUNO, CA 94066-4522
Phone: (650) 244-1444 Fax: (650) 244-1444
Record ID: **410020AN**
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.3
Expiration Date: 4/30/2019 IMS: No

Program Name: **CASA AZTLAN RECOVERY HOME**
Legal Name: LATINO COMMISSION ON ALCOHOL AND
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.
Address: 401 BRIARFIELD WAY
City, State Zip: BELMONT, CA 94002
Phone: (650) 355-7573
Record ID: **410020DN**
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **LATINO COMMISSION-ENTRE FAMILIA OUTPATIENT**
Legal Name: LATINO COMMISSION ON ALCOHOL AND
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.
Address: 301 GRAND AVENUE, SUITE 301
City, State Zip: SOUTH SAN FRANCISCO, CA 94080
Phone: (650) 244-1444 Fax: (650) 244-1447
Record ID: **410020IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **SITIKE COUNSELING CENTER**
Legal Name: SITIKE
Address: 306 SPRUCE AVENUE
City, State Zip: SOUTH SAN FRANCISCO, CA 94080
Phone: (650) 589-9305 Fax: (650) 589-9330
Record ID: **410023AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.**
Legal Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.
Address: 500 ALLERTON STREET
City, State Zip: REDWOOD CITY, CA 94063
Phone: (650) 599-9955 Fax: (950) 599-9273
Record ID: **410026CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.**
Legal Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.
Address: 225 SOUTH CABRILLO HIGHWAY, BUILDING D, SUITE # 105
City, State Zip: HALF MOON BAY, CA 94019
Phone: (650) 560-9995 Fax: (650) 599-9273
Record ID: **410026DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **WALKER HOUSE/ WILLIAMS HOUSE I AND II**
Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES
Address: 1085-A, 1085-B AND 1095 WEEKS STREET
City, State Zip: EAST PALO ALTO, CA 94303
Phone: (650) 462-4603 Fax: (650) 462-3589
Record ID: **410027AN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **MALAIKA HOUSE**
Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES
Address: 819 & 823 JAMIE LANE
City, State Zip: EAST PALO ALTO, CA 94303
Phone: (650) 462-6983
Record ID: **410027BN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 14
Target Population: 1.4
Expiration Date: 8/31/2017 IMS: No

Program Name: **FREE AT LAST**
Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES
Address: 1796 BAY ROAD
City, State Zip: EAST PALO ALTO, CA 94303
Phone: (650) 462-6999 Fax: (650) 462-1055
Record ID: **410027IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **ARCHWAY**
Legal Name: STARVISTA
Address: 609 PRICE AVENUE, ROOMS 107, 201, 205, AND 206
City, State Zip: REDWOOD CITY, CA 94063
Phone: (650) 366-8433 Fax: (650) 366-8455
Record ID: **410038AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **INSIGHTS**
Legal Name: STARVISTA
Address: 333 GELLERT BOULEVARD #206
City, State Zip: DALY CITY, CA 94015
Phone: (650) 755-0858 Fax: (650) 755-1754
Record ID: **410038BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **FIRST CHANCE SOUTH**
Legal Name: STARVISTA
Address: 826 MAHLER ROAD
City, State Zip: BURLINGAME, CA 94010
Phone: (650) 595-8165 Fax: (650) 595-8167
Record ID: **410038DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **WOMEN'S ENRICHMENT CENTER**
Legal Name: STARVISTA
Address: 335 QUARRY ROAD
City, State Zip: SAN CARLOS, CA 94070
Phone: (650) 591-3636 Fax: (650) 591-3600
Record ID: **410038EN**
Service Type: NON
Target Population: 1.3
Expiration Date: 1/31/2018 IMS: No

Program Name: **JERICHO PROJECT**
Legal Name: JERICHO PROJECT
Address: 163 AND 193 DEL PRADO DRIVE
City, State Zip: DALY CITY, CA 94015
Phone: (650) 994-9832 Fax: (415) 467-7450
Record ID: **410041BN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **JERICHO PROJECT**
Legal Name: JERICHO PROJECT
Address: 470 VALLEY DRIVE
City, State Zip: BRISBANE, CA 94005
Phone: (415) 656-1700 Fax: (415) 715-0174
Record ID: **410041DN**
Service Type: NON
Target Population: 1.2
Expiration Date: 10/31/2018 IMS: No

Program Name: **OUTPATIENT DRUG AND ALCOHOL SERVICES FOR ASIANS (ODASA)**
Legal Name: HEALTHRIGHT 360
Address: 6181 MISSION STREET
City, State Zip: DALY CITY, CA 94014
Phone: (415) 337-0140
Record ID: **410043AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **HEALTHRIGHT 360 - AARS YOUTH SERVICES OF SAN MATEO**
Legal Name: HEALTHRIGHT 360
Address: 1115 MISSION ROAD
City, State Zip: SOUTH SAN FRANCISCO, CA 94080
Phone: (650) 243-4850 Fax: (650) 243-4851
Record ID: **410043BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 5/31/2018 IMS: No

Program Name: **WRA, HILLSIDE HOUSE ONE**
Legal Name: HEALTHRIGHT 360
Address: 27 NORTH HUMBOLDT STREET, UNIT A & UNIT B
City, State Zip: SAN MATEO, CA 94401
Phone: (415) 762-1559
Record ID: **410043DN**
Service Type: RES
Resident Capacity: 5
Total Occupancy: 11
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **WRA, THE ELMS**
Legal Name: HEALTHRIGHT 360
Address: 202 EAST BELLEVUE AVENUE
City, State Zip: SAN MATEO, CA 94401
Phone: (650) 348-6603
Record ID: **410043EN**
Service Type: RES
Resident Capacity: 15
Total Occupancy: 16
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name: **WRA, LAUREL HOUSE**
Legal Name: HEALTHRIGHT 360
Address: 900 LAUREL AVENUE
City, State Zip: SAN MATEO, CA 94401
Phone: (650) 347-8808
Record ID: **410043FN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 13
Target Population: 1.3
Expiration Date: 2/28/2018 IMS: No

Program Name:	**HEALTHRIGHT 360**
Legal Name:	HEALTHRIGHT 360
Address:	2015 PIONEER COURT, SUITE B
City, State Zip:	SAN MATEO, CA 94403
Phone:	(415) 762-3700
Record ID:	**410043GN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	7/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Santa Barbara County**

Program Name: **RECOVERY POINT ACUTE CARE**
Legal Name: GOOD SAMARITAN SHELTER
Address: 401 'B' W. MORRISON AVENUE
City, State Zip: SANTA MARIA, CA 93458
Phone: (805) 347-3338
Record ID: **420010BN**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **ANOTHER ROAD DETOX PROGRAM**
Legal Name: GOOD SAMARITAN SHELTER
Address: 113 SOUTH M STREET
City, State Zip: LOMPOC, CA 93436
Phone: (805) 736-0357 Ext:207 Fax: (805) 346-8656
Record ID: **420010DN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **TURNING POINT**
Legal Name: GOOD SAMARITAN SHELTER
Address: 604 WEST OCEAN AVENUE
City, State Zip: LOMPOC, CA 93436
Phone: (805) 736-0357 Fax: (805) 737-0389
Record ID: **420010EN**
Service Type: NON
Target Population: 1.3
Expiration Date: 11/30/2018 IMS: No

Program Name: **RECOVERY POINT OUTPATIENT PROGRAM**
Legal Name: GOOD SAMARITAN SHELTER
Address: 245 E. INGER DRIVE, SUITE 103B
City, State Zip: SANTA MARIA, CA 93454
Phone: (805) 346-8185 Fax: (805) 346-8656
Record ID: **420010FN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **CASA DE FAMILIA TREATMENT CENTER**
Legal Name: GOOD SAMARITAN SHELTER
Address: 403 'B' WEST MORRISON
City, State Zip: SANTA MARIA, CA 93454
Phone: (805) 354-0815
Record ID: **420010GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **LOMPOC RECOVERY CENTER**
Legal Name: GOOD SAMARITAN SHELTER
Address: 104 SOUTH C STREET, SUITE A
City, State Zip: LOMPOC, CA 93436
Phone: (805) 332-3647
Record ID: **420010HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **SANTA BARBARA RESCUE MISSION - RECOVERY PROGRAM**
Legal Name: SANTA BARBARA RESCUE MISSION
Address: 535 EAST YANONALI STREET, A
City, State Zip: SANTA BARBARA, CA 93103
Phone: (805) 966-1316 Fax: (805) 966-7495
Record ID: **420016AN**
Service Type: RES
Resident Capacity: 45
Total Occupancy: 45
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **BETHEL HOUSE**
Legal Name: SANTA BARBARA RESCUE MISSION
Address: 24 WEST ARRELLEGA STREET
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 966-1316 Fax: (805) 879-8229
Record ID: **420016BN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 25
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **RECOVERY SANTA BARBARA OUTPATIENT SERVICES**
Legal Name: SANTA BARBARA RESCUE MISSION
Address: 535 EAST YANONALI STREET, B
City, State Zip: SANTA BARBARA, CA 93103
Phone: (805) 966-1316 Fax: (805) 966-7495
Record ID: **420016CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **COTTAGE RESIDENTIAL CENTER**
Legal Name: SANTA BARBARA COTTAGE HOSPITAL
Address: 316 MONTECITO STREET
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 569-7815 Fax: (805) 569-8314
Record ID: **420017AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 6/30/2017 IMS: No

Program Name: **PROJECT RECOVERY - ADULT OUTPATIENT TREATMENT PROGRAM**
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE
Address: 133 EAST HALEY STREET
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 564-6057 Fax: (805) 963-8849
Record ID: **420022AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **DANIEL BRYANT YOUTH AND FAMILY TREATMENT CENTER**
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE
Address: 1111 GARDEN STREET
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 730-7575 Fax: (805) 730-7503
Record ID: **420022BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **PC1000**
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE
Address: 232 EAST CANON PERDIDO STREET
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 963-1433 Fax: (805) 963-4099
Record ID: **420022DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **PROJECT RECOVERY RESIDENTIAL DETOX PROGRAM**
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE
Address: 1020 PLACIDO AVENUE
City, State Zip: SANTA BARBARA, CA 93103
Phone: (805) 963-1836 Fax: (805) 963-8849
Record ID: **420022EN**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SANCTUARY CENTERS OF SANTA BARBARA, INC.**
Legal Name: SANCTUARY CENTERS OF SANTA BARBARA, INC.
Address: 222 WEST VALERIO, REAR BUILDING
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 569-2785 Fax: (805) 563-1977
Record ID: **420026AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **COAST VALLEY SUBSTANCE ABUSE TREATMENT CENTER**
Legal Name: COAST VALLEY WORSHIP CENTER
Address: 1414 S. MILLER STREET, SUITE 11
City, State Zip: SANTA MARIA, CA 93454
Phone: (805) 739-1512 Fax: (805) 739-2855
Record ID: **420030AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **RECOVERY ROAD MEDICAL CENTER**
Legal Name: RECOVERY ROAD MEDICAL CENTER, INC.
Address: 3891 STATE STREET, SUITE 205
City, State Zip: SANTA BARBARA, CA 93105
Phone: (805) 962-7800 Fax: (805) 962-9002
Record ID: **420034AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **THE TIDES SANTA BARBARA**
Legal Name: THE TIDES SANTA BARBARA, LLC
Address: 5277 AUSTIN ROAD
City, State Zip: SANTA BARBARA, CA 93111
Phone: (805) 203-6211 Fax: (888) 552-0299
Record ID: **420035AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **THE OAKS - A RESIDENTIAL TREATMENT PROGRAM AT THE CHAMPION CENTER**
Legal Name: LOMPOC VALLEY MEDICAL CENTER
Address: 303 SOUTH C STREET
City, State Zip: LOMPOC, CA 93436
Phone: (805) 737-3321 Fax: (805) 737-3304
Record ID: **420036AP**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **CHANGES**
Legal Name: AMERICAN RIVIERA LLC
Address: 403 EAST MONTECITO STREET, SUITE A
City, State Zip: SANTA BARBARA, CA 93101
Phone: (805) 883-1155 Fax: (805) 883-1188
Record ID: **420037AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **LADIES RECOVERY 4 LIFE RESIDENTIAL TREATMENT FACILITY**
Legal Name: LADIES RECOVERY 4 LIFE
Address: 115 NORTH D STREET,
UNIT A
City, State Zip: LOMPOC, CA 93436-6911
Phone: (805) 588-4410 Fax: (805) 819-0942
Record ID: **420038AN**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 2/28/2019 IMS: No

Program Name: **KEYSTONE RECOVERY**
Legal Name: KEYSTONE RECOVERY NETWORK, LLC
Address: 475 BARKER PASS ROAD
UNITS A & B
City, State Zip: MONTECITO, CA 93108
Phone: (805) 363-5576
Record ID: **420039AP**
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.8
Expiration Date: 12/31/2018 IMS: No

Program Name: **IRECOVER BEHAVIORAL HEALTH CLINICS**
Legal Name: IRECOVER BEHAVIORAL HEALTH CLINICS, LLC
Address: 607 E. PLAZA DRIVE, C-102, C-201, C-202
City, State Zip: SANTA MARIA, CA 93455
Phone: (805) 631-5268
Record ID: **420040AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Santa Clara County**

Program Name: **LYRIC RECOVERY SERVICES, INC.**
Legal Name: LYRIC RECOVERY SERVICES, INC.
Address: 1210 SOUTH BASCOM AVENUE, SUITE 205
City, State Zip: SAN JOSE, CA 95128
Phone: (408) 216-9826 Fax: (408) 982-3272
Record ID: **430013AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PATHWAY HOUSE**
Legal Name: PATHWAY SOCIETY
Address: 102 SOUTH 11TH STREET
City, State Zip: SAN JOSE, CA 95112
Phone: (408) 998-5191 Fax: (408) 506-1194
Record ID: **430016AN**
Service Type: RES
Resident Capacity: 65
Total Occupancy: 65
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PATHWAY OUTPATIENT CENTER**
Legal Name: PATHWAY SOCIETY
Address: 1659 SCOTT BOULEVARD, SUITE 9, 220, AND 270
City, State Zip: SANTA CLARA, CA 95050
Phone: (408) 244-1834 Fax: (408) 244-5123
Record ID: **430016BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **PATHWAY SOCIETY**
Legal Name: PATHWAY SOCIETY
Address: 16433 MONTEREY STREET, SUITE 140
City, State Zip: MORGAN HILL, CA 95037
Phone: (408) 782-6300 Fax: (408) 782-6363
Record ID: **430016DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **MARIPOSA LODGE**
Legal Name: PATHWAY SOCIETY
Address: 9500 MALECH ROAD
City, State Zip: SAN JOSE, CA 95151
Phone: (408) 281-6542 Fax: (408) 463-0794
Record ID: **430016FN**
Service Type: RES
Resident Capacity: 64
Total Occupancy: 64
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **HORIZON SOUTH**
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 650 SOUTH BASCOM AVENUE
City, State Zip: SAN JOSE, CA 95128
Phone: (408) 295-6675 Fax: (408) 295-8544
Record ID: **430021AN**
Service Type: RES-DETOX
Resident Capacity: 41
Total Occupancy: 41
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **SUPPORT SYSTEMS HOMES, INC.**
Legal Name: SUPPORT SYSTEMS HOMES, INC.
Address: 173 NORTH MORRISON AVENUE
City, State Zip: SAN JOSE, CA 95126
Phone: (408) 370-9688 Fax: (408) 370-3487
Record ID: **430027GP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **SUPPORT SYSTEMS HOMES, INC.**
Legal Name: SUPPORT SYSTEMS HOMES, INC.
Address: 264 NORTH MORRISON AVENUE
City, State Zip: SAN JOSE, CA 95126
Phone: (408) 370-9688 Fax: (408) 370-3487
Record ID: **430027HP**
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **SUPPORT SYSTEMS HOMES, INC./ CADS, INC.**
Legal Name: SUPPORT SYSTEMS HOMES, INC.
Address: 398 S. 12TH STREET
City, State Zip: SAN JOSE, CA 95112
Phone: (408) 370-9688 Fax: (408) 370-3487
Record ID: **430027IP**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **SUPPORT SYSTEMS HOMES, INC./ CADS, INC.**
Legal Name: SUPPORT SYSTEMS HOMES, INC.
Address: 1271 & 1281 FLEMING AVENUE
City, State Zip: SAN JOSE, CA 95127
Phone: (408) 370-9688 Fax: (408) 370-3487
Record ID: **430027JP**
Service Type: RES
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **THE CAMP - OUTPATIENT SERVICES**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 256 EAST HAMILTON AVENUE, SUITE I
City, State Zip: CAMPBELL, CA 95008
Phone: (408) 866-8167
Record ID: **430034AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **SUMMIT RANCH**
Legal Name: ADVENT GROUP MINISTRIES, INC.
Address: 1200 WEST EDMUNDSON AVENUE
City, State Zip: MORGAN HILL, CA 95037
Phone: (408) 779-1492 Fax: (408) 604-0162
Record ID: **430038CN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **LAUREL HOME**
Legal Name: ADVENT GROUP MINISTRIES, INC.
Address: 865 BLACK WALNUT COURT
City, State Zip: MORGAN HILL, CA 95037
Phone: (408) 779-5841 Fax: (408) 604-0162
Record ID: **430038DN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **GATEWAY HOME**
Legal Name: ADVENT GROUP MINISTRIES, INC.
Address: 1960 CHURCH AVENUE
City, State Zip: SAN MARTIN, CA 95046
Phone: (408) 683-2099 Fax: (425) 686-0776
Record ID: **430038EN**
Service Type: DSS
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **AMICUS HOUSE, INC.**
Legal Name: AMICUS HOUSE, INC.
Address: 466 SOUTH BUENA VISTA AVENUE
City, State Zip: SAN JOSE, CA 95126
Phone: (408) 294-2277
Record ID: **430041AP**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT**
Legal Name: THE ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT OF SANTA CLARA COUNTY, INC.
Address: 2400 MOORPARK AVENUE, SUITES 210 AND300
City, State Zip: SAN JOSE, CA 95128
Phone: (408) 975-2730 Fax: (408) 975-2745
Record ID: **430042AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **CALWORKS DUAL DIAGNOSIS PROGRAM**
Legal Name: THE GARDNER FAMILY CARE CORPORATION
Address: 160 EAST VIRGINIA STREET, SUITE 280
City, State Zip: SAN JOSE, CA 95112
Phone: (408) 287-6200 Fax: (408) 998-1535
Record ID: **430045AN**
Service Type: NON
Target Population: 1.8
Expiration Date: 5/31/2019 IMS: No

Program Name: **PROYECTO PRIMAVERA ADULT OUTPATIENT PROGRAM**
Legal Name: THE GARDNER FAMILY CARE CORPORATION
Address: 614 TULLY ROAD
City, State Zip: SAN JOSE, CA 95111
Phone: (408) 287-6200 Ext:2190 Fax: (408) 977-1136
Record ID: **430045BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **INDIAN HEALTH CENTER OF SANTA CLARA VALLEY-OUTPATIENT ALCOHOL & OTHER DRUG PROGR**
Legal Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY
Address: 602 EAST SANTA CLARA STREET, SUITE 230
City, State Zip: SAN JOSE, CA 95112
Phone: (408) 350-2400 Fax: (408) 350-2411
Record ID: **430047CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NINTH STREET HOUSE**
Legal Name: PROJECT NINETY
Address: 561 SOUTH 9TH STREET
City, State Zip: SAN JOSE, CA 95112
Phone: (650) 579-7881 Fax: (650) 579-2640
Record ID: **430051AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 18
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **NEW LIFE RECOVERY CENTERS**
Legal Name: NEW LIFE RECOVERY CENTERS, INC.
Address: 473 NORTH SAN PEDRO
City, State Zip: SAN JOSE, CA 95110-2229
Phone: (408) 297-1182 Fax: (408) 297-7450
Record ID: **430053AP**
Service Type: RES-DETOX
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **NEW LIFE RECOVERY CENTERS, INC.**
Legal Name: NEW LIFE RECOVERY CENTERS, INC.
Address: 1101 PARK AVENUE
City, State Zip: SAN JOSE, CA 95126
Phone: (408) 271-0199 Fax: (408) 297-7450
Record ID: **430053BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **NEW LIFE RECOVERY CENTERS, INC.**
Legal Name: NEW LIFE RECOVERY CENTERS, INC.
Address: 166 CLAYTON AVENUE
City, State Zip: SAN JOSE, CA 95110-2210
Phone: (408) 975-0454 Fax: (408) 230-0395
Record ID: **430053CP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **HOUSE OF DAWN**
Legal Name: OPERATION DAWN
Address: 5034 PAGE MILL DRIVE
City, State Zip: SAN JOSE, CA 95111-4055
Phone: (408) 362-0121
Record ID: **430059AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2
Expiration Date: 11/30/2018 IMS: No

Program Name: **POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC.**
Legal Name: POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC
Address: 1721 LOLLIE COURT
City, State Zip: SAN JOSE, CA 95124
Phone: (408) 476-4888
Record ID: **430065AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2019 IMS: No

Program Name: **ADI-OUTPATIENT**
Legal Name: ADI- OP, INC.
Address: 1900 CAMDEN AVENUE, SUITE 202 AND 205
City, State Zip: SAN JOSE, CA 95124
Phone: (408) 879-7581 Fax: (408) 879-7587
Record ID: **430068AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **EMQ FAMILIESFIRST OUTPATIENT ADOLESCENT SUBSTANCE ABUSE**
Legal Name: FAMILIESFIRST, INC.
Address: 251 LLEWELLYN AVENUE
City, State Zip: CAMPBELL, CA 95008
Phone: (408) 379-3796
Record ID: **430070AN**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2017 IMS: No

Program Name: **PARISI HOUSE ON THE HILL, INC.**
Legal Name: PARISI HOUSE ON THE HILL, INC.
Address: 9501 AND 9505 MALECH ROAD
City, State Zip: SAN JOSE, CA 95138
Phone: (408) 281-6570 Fax: (408) 463-1116
Record ID: **430071AN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 42
Target Population: 1.3
Expiration Date: 5/31/2019 IMS: No

Program Name: **LIONROCK RECOVERY**
Legal Name: LIONROCK BEHAVIORAL HEALTH, INC.
Address: 621 E CAMPBELL AVENUE #17
City, State Zip: CAMPBELL, CA 95008
Phone: (760) 994-4990 Fax: (866) 899-8670
Record ID: **430074AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **GREENDALE HOUSE**
Legal Name: GREENDALE HOUSE LLC
Address: 401 GREENDALE WAY
City, State Zip: SAN JOSE, CA 95129
Phone: (408) 455-2944 Fax: (408) 248-0972
Record ID: **430076AP**
Service Type: RES
Resident Capacity: 14
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **SUMMIT ESTATE RECOVERY CENTER**
Legal Name: SUMMIT ESTATE, INC.
Address: 399 OLD MILL POND ROAD
City, State Zip: LOS GATOS, CA 95033
Phone: (650) 733-4711 Fax: (877) 230-5007
Record ID: **430077AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **SUMMIT ESTATE OUTPATIENT**
Legal Name: SUMMIT ESTATE, INC.
Address: 20640 3RD STREET
City, State Zip: SARATOGA, CA 95070
Phone: (408) 469-4734 Fax: (408) 469-4734
Record ID: **430077BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2018 IMS: No

Program Name: **CENTRAL TREATMENT & RECOVERY**
Legal Name: SANTA CLARA COUNTY, DEPARTMENT OF ALCOHOL AND DRUG SERVICES
Address: 976 LENZEN AVENUE, 1ST FLOOR, SUITE 1900
City, State Zip: SAN JOSE, CA 95126-2737
Phone: (408) 792-5656 Fax: (408) 947-8719
Record ID: **430078AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **ASIAN AMERICAN RECOVERY SERVICES, A HEALTHRIGHT 360 PROGRAM**
Legal Name: HEALTHRIGHT 360
Address: 1340 TULLY ROAD, SUITE 301 & 304
City, State Zip: SAN JOSE, CA 95122-3056
Phone: (408) 271-3900 Fax: (415) 865-0119
Record ID: **430079AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **GENESIS PROJECT**
Legal Name: TRUTH RECOVERY FOUNDATION, INC.
Address: 810 PALM STREET
City, State Zip: SAN JOSE, CA 95110
Phone: (408) 500-6229
Record ID: **430080AN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2
Expiration Date: 4/30/2019 IMS: No

Program Name: **BILL WILSON HOUSE**
Legal Name: BILL WILSON CENTER
Address: 3490 THE ALAMEDA
City, State Zip: SANTA CLARA, CA 95050-4333
Phone: (408) 243-0222 Fax: (408) 246-5752
Record ID: **430082AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 2/28/2018 IMS: No

Program Name: **LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER**
Legal Name: LOS GATOS MEDICAL CENTER, INC.
Address: 16400 LARK AVENUE
SUITE 350
City, State Zip: LOS GATOS, CA 95032
Phone: (408) 384-9717 Fax: (408) 358-2810
Record ID: **430083AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER**
Legal Name: LOS GATOS MEDICAL CENTER, INC.
Address: 16421 GREENWOOD LANE
City, State Zip: MONTE SERENO, CA 95030
Phone: (408) 384-9717 Fax: (408) 358-2810
Record ID: **430083BP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **WELLNESS RETREAT RECOVERY CENTER**
Legal Name: WELLNESS RECOVERY RETREAT CENTER
Address: 495 PIERCY ROAD
City, State Zip: SAN JOSE, CA 95138
Phone: (855) 762-3797
Record ID: **430084AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **FUSION RECOVERY, INC.**
Legal Name: FUSION RECOVERY, INC.
Address: 940 SARATOGA AVENUE,
SUITE 240
City, State Zip: SAN JOSE, CA 95129
Phone: (408) 474-4840 Fax: (408) 260-5003
Record ID: **430085AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **RED ROAD RECOVERY**
Legal Name: RED ROAD TREATMENT, INC.
Address: 421 N. 13TH STREET
City, State Zip: SAN JOSE, CA 95112
Phone: (650) 703-9185
Record ID: **430086AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **SERENITY GARDENS**
Legal Name: SERENITY GARDENS
Address: 5830 COHASSET WAY
City, State Zip: SAN JOSE, CA 95123
Phone: (408) 219-4681
Record ID: **430087AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR**
Legal Name: CAMINAR
Address: 2218 and 2226 N. 1ST STREET
City, State Zip: SAN JOSE, CA 95131
Phone: (408) 538-0880 Fax: (408) 943-8155
Record ID: **430088BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR**
Legal Name: CAMINAR
Address: 375 CAMBRIDGE AVE.
City, State Zip: PALO ALTO, CA 94306
Phone: (650) 326-6576 Fax: (650) 326-1340
Record ID: **430088CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR**
Legal Name: CAMINAR
Address: 950 W. JULIAN STREET
City, State Zip: SAN JOSE, CA 95126
Phone: (408) 292-9353 Fax: (408) 288-6201
Record ID: **430088DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Santa Cruz County**

Program Name: **ALTO COUNSELING CENTER-SOUTH**
Legal Name: ENCOMPASS COMMUNITY SERVICES
Address: 585 AUTO CENTER DRIVE
City, State Zip: WATSONVILLE, CA 95076
Phone: (831) 728-2233 Fax: (831) 722-8311
Record ID: **440001EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **OUT-PATIENT CLIENT SERVICES**
Legal Name: JANUS OF SANTA CRUZ
Address: 200 7TH AVENUE, SUITE 150
City, State Zip: SANTA CRUZ, CA 95062
Phone: (831) 462-1060 Fax: (831) 423-9015
Record ID: **440003AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **RESIDENTIAL TREATMENT CENTER & SPECIAL CARE UNIT**
Legal Name: JANUS OF SANTA CRUZ
Address: 200 SEVENTH AVENUE
City, State Zip: SANTA CRUZ, CA 95062
Phone: (831) 462-1060
Record ID: **440003BN**
Service Type: RES-DETOX
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **MONDANARO-BASKIN CENTER FOR WOMEN & CHILDREN**
Legal Name: JANUS OF SANTA CRUZ
Address: 516 CHESTNUT STREET
City, State Zip: SANTA CRUZ, CA 95060
Phone: (831) 423-9015
Record ID: **440003DN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 24
Target Population: 1.4
Expiration Date: 8/31/2018 IMS: No

Program Name: **SANTA CRUZ RESIDENTIAL RECOVERY**
Legal Name: ENCOMPASS COMMUNITY SERVICES
Address: 125 RIGG STREET
City, State Zip: SANTA CRUZ, CA 95060
Phone: (831) 423-3890
Record ID: **440008AN**
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **ALTO COUNSELING CENTER - NORTH**
Legal Name: ENCOMPASS COMMUNITY SERVICES
Address: 716 OCEAN STREET, SUITES 170, 200, 230
City, State Zip: SANTA CRUZ, CA 95060-2126
Phone: (831) 423-2003
Record ID: **440008HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SI SE PUEDE**
Legal Name: ENCOMPASS COMMUNITY SERVICES
Address: 161 MILES LANE
City, State Zip: WATSONVILLE, CA 95076
Phone: (831) 761-5422
Record ID: **440008LN**
Service Type: RES
Resident Capacity: 23
Total Occupancy: 23
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES-SANTA CRUZ**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 9C MAREA AVENUE
City, State Zip: LA SELVA BEACH, CA 95076
Phone: (831) 768-7190 Fax: (831) 768-4639
Record ID: **440009CN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 16
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES-SANTA CRUZ**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 125 FUCHSIA COURT
City, State Zip: FREEDOM, CA 95019
Phone: (831) 768-7190 Fax: (831) 768-4639
Record ID: **440009CN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES-SANTA CRUZ**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 262 GAFFEY ROAD, 80 VISTA VERDE CIRCLE, AND 65 KINGFISHER DRIVE
City, State Zip: WATSONVILLE, CA 95076
Phone: (831) 768-7190 Fax: (831) 768-4639
Record ID: **440009CN**
Service Type: RES-DETOX
Resident Capacity: 67
Total Occupancy: 78
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **ELEVATE ADDICTION SERVICES-SANTA CRUZ OUTPATIENT**
Legal Name: HALCYON HORIZONS, INCORPORATED
Address: 9057 SOQUEL DRIVE, BUILDING A, SUITE G
City, State Zip: APTOS, CA 95003
Phone: (831) 768-7190 Fax: (831) 768-0667
Record ID: **440009DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2018 IMS: No

Program Name: **NEW LIFE CENTER**
Legal Name: NEW LIFE COMMUNITY SERVICES, INC.
Address: 707 AND 717 FAIR AVENUE
City, State Zip: SANTA CRUZ, CA 95060
Phone: (831) 427-1007
Record ID: **440010AN**
Service Type: RES
Resident Capacity: 38
Total Occupancy: 52
Target Population: 1.7
Expiration Date: 4/30/2019 IMS: No

Program Name: **CAMP RECOVERY CENTER**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 3192 GLEN CANYON ROAD
City, State Zip: SCOTTS VALLEY, CA 95066
Phone: (831) 438-1868
Record ID: **440011AP**
Service Type: RES-DETOX
Resident Capacity: 56
Total Occupancy: 60
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE CAMP RECOVERY CENTER-SECTION II**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 3192 GLEN CANYON ROAD
City, State Zip: SCOTTS VALLEY, CA 95066-4916
Phone: (831) 438-1868
Record ID: **440011BP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **SOBRIETY WORKS**
Legal Name: RIKKI RAP, INC.
Address: 8030 SOQUEL AVENUE,
SUITE 103
City, State Zip: SANTA CRUZ, CA 95062-2096
Phone: (831) 476-1747 Fax: (831) 476-1125
Record ID: **440014AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **COASTAL TURNING POINT**
Legal Name: COASTAL TURNING POINT INC
Address: 147 SOUTH RIVER STREET,
SUITE 234A
City, State Zip: SANTA CRUZ, CA 95060-4556
Phone: (831) 234-2010 Fax: (831) 226-2123
Record ID: **440018AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Shasta County**

Program Name: **EMPIRE RECOVERY CENTER**
Legal Name: EMPIRE HOTEL, EHARC, INC.
Address: 1237 CALIFORNIA STREET
City, State Zip: REDDING, CA 96001
Phone: (530) 243-7470 Fax: (530) 243-7477
Record ID: **450001AN**
Service Type: RES-DETOX
Resident Capacity: 42
Total Occupancy: 42
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **EMPIRE OUTPATIENT SERVICES**
Legal Name: EMPIRE HOTEL, EHARC, INC.
Address: 1616 WEST STREET
City, State Zip: REDDING, CA 96001
Phone: (530) 244-7074 Fax: (530) 244-7065
Record ID: **450001CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **CHEMICAL DEPENDENCY INTENSIVE OUTPATIENT PROGRAM**
Legal Name: THOMAS J. ANDREWS, M.D., INC.
Address: 2885 CHURN CREEK ROAD, SUITE A
City, State Zip: REDDING, CA 96002
Phone: (530) 221-7474 Fax: (530) 226-6329
Record ID: **450011AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **ANDERSON OUTPATIENT PROGRAM**
Legal Name: RIGHT ROAD RECOVERY PROGRAMS, INC.
Address: 2110 FERRY STREET
City, State Zip: ANDERSON, CA 96007
Phone: (530) 365-8523
Record ID: **450012AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **VOTC, INC. RESIDENTIAL TREATMENT PROGRAM**
Legal Name: VOTC, INC.
Address: 3640, 3642, 3644, 3646, 3650, 3652 EL PORTAL DRIVE AND 3647 RICARDO AVENUE
City, State Zip: REDDING, CA 96002
Phone: (530) 722-1114 Fax: (530) 722-1115
Record ID: **450020AN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 36
Target Population: 1.3
Expiration Date: 9/30/2018 IMS: No

Program Name: **VOTC, INC.**
Legal Name: VOTC, INC.
Address: 3617 RICARDO AVENUE
SUITE #1 & 9
City, State Zip: REDDING, CA 96002
Phone: (530) 722-1114 Fax: (530) 722-1115
Record ID: **450020BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **VISIONS OF THE CROSS**
Legal Name: VOTC, INC.
Address: 2066 PLACER STREET
City, State Zip: REDDING, CA 96001
Phone: (530) 722-1114
Record ID: **450020CN**
Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **VISIONS OF THE CROSS**
Legal Name: VOTC, INC.
Address: 3617 RICARDO AVENUE, #6, 7 & 8
City, State Zip: REDDING, CA 96002
Phone: (530) 722-1114 Fax: (530) 722-1115
Record ID: **450020DN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 16
Target Population: 1.4
Expiration Date: 11/30/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Sierra County**

Program Name:	**SIERRA COUNTY HUMAN SERVICES**		
Legal Name:	SIERRA COUNTY HUMAN SERVICES		
Address:	704 MILL STREET		
City, State Zip:	LOYALTON, CA 96118		
Phone:	(530) 993-6748	Fax:	(530) 993-6759
Record ID:	**460001AN**		
Service Type:	NON		
Target Population:	1.1		
Expiration Date:	5/31/2019	IMS:	No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Siskiyou County**

Program Name: **SISKIYOU COUNTY BEHAVIORAL HEALTH**
Legal Name: SISKIYOU COUNTY HEALTH & HUMAN SERVICES AGENCY
Address: 2060 CAMPUS DRIVE
City, State Zip: YREKA, CA 96097-9538
Phone: (530) 841-4890 Fax: (530) 841-4881
Record ID: **470002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **KARUK HEALTH CLINIC**
Legal Name: KARUK TRIBE
Address: 1515 SOUTH OREGON STREET
City, State Zip: YREKA, CA 96097
Phone: (530) 842-9200 Fax: (530) 841-5150
Record ID: **470003AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Solano County**

Program Name: **SOUTHERN SOLANO ALCOHOL COUNCIL**
Legal Name: BI-BETT
Address: 419 PENNSYLVANIA STREET
City, State Zip: VALLEJO, CA 94590
Phone: (707) 643-2715 Fax: (707) 643-8536
Record ID: **480002BN**
Service Type: RES-DETOX
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **SHAMIA RECOVERY CENTER**
Legal Name: BI-BETT
Address: 126, 126-1/2, AND 128 OHIO STREET
City, State Zip: VALLEJO, CA 94590
Phone: (707) 644-2577 Fax: (707) 644-2577
Record ID: **480002CN**
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.4
Expiration Date: 11/30/2017 IMS: No

Program Name: **RECOVERY CONNECTION**
Legal Name: BI-BETT
Address: 604 BROADWAY STREET
City, State Zip: VALLEJO, CA 94590
Phone: (707) 643-2748 Fax: (707) 558-8047
Record ID: **480002GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **GENESIS HOUSE**
Legal Name: GENESIS HOUSE, INC.
Address: 1149 WARREN AVENUE
City, State Zip: VALLEJO, CA 94591
Phone: (707) 552-5295
Record ID: **480005AN**
Service Type: RES
Resident Capacity: 19
Total Occupancy: 19
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **GENESIS HOUSE II**
Legal Name: GENESIS HOUSE, INC.
Address: 133 RENIDA STREET
City, State Zip: VALLEJO, CA 94591
Phone: (707) 552-5295
Record ID: **480005BN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2
Expiration Date: 6/30/2019 IMS: No

Program Name: **THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM**
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Address: 627 GRANT STREET
City, State Zip: VALLEJO, CA 94590-7228
Phone: (707) 553-1042 Fax: (707) 553-8146
Record ID: **480010AN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE HOUSE OF ACTS II**
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Address: 115 TERI COURT
City, State Zip: VALLEJO, CA 94589
Phone: (707) 552-3462 Fax: (707) 553-8146
Record ID: **480010BN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2
Expiration Date: 6/30/2018 IMS: No

Program Name: **THE HOUSE OF ACTS ALCOHOL & SUBSTANCE ABUSE TREATMENT PROGRAM**
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Address: 844 5TH STREET
City, State Zip: VALLEJO, CA 94589
Phone: (707) 552-2071 Fax: (707) 553-8146
Record ID: **480010DN**
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.3
Expiration Date: 8/31/2018 IMS: No

Program Name: **ARCHWAY RECOVERY SERVICES, INC.**
Legal Name: ARCHWAY RECOVERY SERVICES, INC.
Address: 1525 UNION AVENUE
City, State Zip: FAIRFIELD, CA 94533
Phone: (707) 435-1804 Fax: (707) 435-9807
Record ID: **480022AN**
Service Type: RES-DETOX
Resident Capacity: 13
Total Occupancy: 13
Target Population: 1.2
Expiration Date: 3/31/2019 IMS: No

Program Name: **ANKA BEHAVIORAL HEALTH, INC.**
Legal Name: ANKA BEHAVIORAL HEALTH, INCORPORATED
Address: 251 GEORGIA STREET
City, State Zip: VALLEJO, CA 94590
Phone: (707) 558-8195 Fax: (707) 558-8196
Record ID: **480023AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **A WISE RETREAT**
Legal Name: JBLOCKSHIN & ASSOCIATES LLC,
Address: 4749 GEORGIA ST
City, State Zip: VALLEJO, CA 94591
Phone: (707) 712-7733
Record ID: **480035AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Sonoma County**

Program Name: **CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER**
Legal Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER, INC.
Address: 3250 GUERNEVILLE ROAD
City, State Zip: SANTA ROSA, CA 95401
Phone: (707) 579-4066 Fax: (707) 579-1603
Record ID: **490002AP**
Service Type: RES-DETOX
Resident Capacity: 25
Total Occupancy: 25
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE**
Legal Name: WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE
Address: 98, 112, 122, AND 140 HENDLEY STREET
City, State Zip: SANTA ROSA, CA 95404
Phone: (707) 527-0412 Fax: (707) 527-6048
Record ID: **490004EN**
Service Type: RES
Resident Capacity: 20
Total Occupancy: 32
Target Population: 1.4
Expiration Date: 2/28/2018 IMS: No

Program Name: **OUTPATIENT TREATMENT PROGRAM**
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2403 PROFESSIONAL DRIVE, SUITE 101
City, State Zip: SANTA ROSA, CA 95403
Phone: (707) 571-2233 Fax: (707) 571-2238
Record ID: **490009BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PERINATAL DAY TREATMENT**
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2400 COUNTY CENTER DRIVE SUITE B
City, State Zip: SANTA ROSA, CA 95403
Phone: (707) 566-0170 Fax: (707) 526-3155
Record ID: **490009EN**
Service Type: NON
Target Population: 1.4
Expiration Date: 4/30/2018 IMS: No

Program Name: **DRUG ABUSE ALTERNATIVES CENTER - DRUG COURT**
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2400 COUNTY CENTER DRIVE, SUITE B
City, State Zip: SANTA ROSA, CA 95403
Phone: (707) 566-0170 Fax: (707) 568-5445
Record ID: **490009LN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **TURNING POINT - ARROWOOD**
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 440 ARROWOOD DRIVE
City, State Zip: SANTA ROSA, CA 95407
Phone: (707) 571-2233 Fax: (707) 284-2955
Record ID: **490009RN**
Service Type: RES
Resident Capacity: 112
Total Occupancy: 112
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

Program Name: **TURNING POINT ORENDA DETOX**
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 1430 NEOTOMAS AVENUE
City, State Zip: SANTA ROSA, CA 95405
Phone: (707) 565-7460 Fax: (707) 565-7488
Record ID: **490009SN**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **ATHENA HOUSE**
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION
Address: 3555 SONOMA HIGHWAY
City, State Zip: SANTA ROSA, CA 95409
Phone: (707) 526-3150 Fax: (707) 526-3250
Record ID: **490010AN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 44
Target Population: 1.3
Expiration Date: 6/30/2019 IMS: No

Program Name: **CALIFORNIA HUMAN DEVELOPMENT CORPORATION EARLY INTERVENTION AND OUT-PATIENT TREA**
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION
Address: 3315 AIRWAY DRIVE
City, State Zip: SANTA ROSA, CA 95403
Phone: (707) 523-2242
Record ID: **490010EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **AZURE ACRES**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 2264 GREEN HILL ROAD
City, State Zip: SEBASTOPOL, CA 95472
Phone: (707) 823-3385
Record ID: **490021AP**
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **AZURE ACRES IOP**
Legal Name: THE CAMP RECOVERY CENTER, LLC
Address: 420 MENDOCINO AVENUE, SUITE 101
City, State Zip: SANTA ROSA, CA 95401
Phone: (707) 823-3385 Fax: (707) 823-7519
Record ID: **490021BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **MOUNTAIN VISTA FARM**
Legal Name: NEW VISTAS RECOVERY, INC.
Address: 3020 WARM SPRINGS ROAD
City, State Zip: GLEN ELLEN, CA 95442
Phone: (707) 996-6716 Fax: (707) 996-6647
Record ID: **490025AP**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 31
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **SONOMA COUNTY INDIAN HEALTH PROJECT/BEHAVIOR HEALTH**
Legal Name: SONOMA COUNTY INDIAN HEALTH PROJECT, INC.
Address: 144 STONY POINT ROAD, 2ND FLOOR
City, State Zip: SANTA ROSA, CA 95401
Phone: (707) 521-4550 Fax: (707) 544-1092
Record ID: **490032AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **OLYMPIA HOUSE**
Legal Name: SONOMA RECOVERY SERVICES, LLC
Address: 11207 VALLEY FORD ROAD
City, State Zip: PETALUMA, CA 94952
Phone: (415) 795-7609
Record ID: **490036AP**
Service Type: RES-DETOX
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **MUIR WOOD ADOLESCENT & FAMILY SERVICES**
Legal Name: MUIR WOOD, LLC
Address: 1733 SKILLMAN LANE
City, State Zip: PETALUMA, CA 94952
Phone: (310) 903-1155 Fax: (707) 555-5401
Record ID: **490038AP**
Service Type: DSS
Target Population: 1.5
Expiration Date: 8/31/2019 IMS: No

Program Name: **SACRED SPACE HEALING AND RETREAT CENTERS**
Legal Name: SACRED SPACE HEALING AND RETREAT CENTERS INTERNATIONAL
Address: 627 CHERRY CREEK ROAD
City, State Zip: CLOVERDALE, CA 95425
Phone: (707) 894-0673 Fax: (800) 914-6360
Record ID: **490039AP**
Service Type: RES-DETOX
Resident Capacity: 4
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **CHI RECOVERY**
Legal Name: CHI RECOVERY, INC.
Address: 105 MORRIS STREET, SUITES 214,218, 222, 192, 196, 204 AND 200
City, State Zip: SEBASTOPOL, CA 95472
Phone: (707) 824-0222 Fax: (707) 824-0222
Record ID: **490040AP**
Service Type: NON-DETOX
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name:	**PURA VIDA RECOVERY SERVICES**
Legal Name:	PURA VIDA RECOVERY SERVICES, LLC
Address:	130 STONY POINT ROAD, SUITE D
City, State Zip:	SANTA ROSA, CA 95401
Phone:	(707) 338-5927
Record ID:	**490041AP**
Service Type:	NON
Target Population:	1.1
Expiration Date:	4/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Stanislaus County**

Program Name: **STANISLAUS RECOVERY CENTER**
Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES
Address: 1904 RICHLAND AVENUE,
ADULT TREATMENT BUILDING
City, State Zip: CERES, CA 95307
Phone: (209) 541-2121 Fax: (209) 541-2083
Record ID: **500002EN**
Service Type: RES-DETOX
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **NEW HOPE RECOVERY**
Legal Name: GENE RADINO
Address: 823 EAST ORANGEBURG AVENUE
City, State Zip: MODESTO, CA 95350
Phone: (209) 527-9797 Fax: (209) 527-9825
Record ID: **500004AP**
Service Type: RES-DETOX
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **RECOVERY SYSTEMS ASSOCIATES**
Legal Name: GENE RADINO
Address: 823 EAST ORANGEBURG AVENUE
City, State Zip: MODESTO, CA 95350
Phone: (209) 527-2046 Fax: (209) 527-9825
Record ID: **500004BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

Program Name: **NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE**
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM
Address: 1100 KANSAS AVENUE, SUITE B-C
City, State Zip: MODESTO, CA 95351
Phone: (209) 579-1151 Fax: (209) 579-9605
Record ID: **500009CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 7/31/2018 IMS: No

Program Name: **NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM**
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM
Address: 1028 RENO AVENUE
City, State Zip: MODESTO, CA 95351
Phone: (209) 579-1103 Fax: (209) 578-1085
Record ID: **500009EN**
Service Type: RES-DETOX
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **NIRVANA DRUG AND ALCOHOL WOMEN OF HOPE**
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM
Address: 1116 & 1116 1/2 ALICE STREET &
130 NELLIE STREET
City, State Zip: MODESTO, CA 95350-5929
Phone: (209) 578-3132 Fax: (209) 578-3498
Record ID: **500009GN**
Service Type: RES-DETOX
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.3
Expiration Date: 4/30/2018 IMS: No

Program Name: **NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM**
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM
Address: 1040 RENO AVENUE
City, State Zip: MODESTO, CA 95351
Phone: (209) 579-1103 Fax: (209) 578-1085
Record ID: **500009IN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 10/31/2017 IMS: No

Program Name: **NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE**
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM
Address: 1100 KANSAS AVENUE, SUITE 'D'
City, State Zip: MODESTO, CA 95351
Phone: (209) 579-1151 Fax: (209) 579-9605
Record ID: **500009JN**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2017 IMS: No

Program Name: **THE LAST RESORT**
Legal Name: ADOLESCENCE'S LAST RESORT
Address: 218 EAST ORANGEBURG AVENUE
City, State Zip: MODESTO, CA 95350
Phone: (209) 523-6900 Fax: (209) 523-6909
Record ID: **500010AN**
Service Type: DSS
Target Population: 1.5
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE LAST RESORT**
Legal Name: ADOLESCENCE'S LAST RESORT
Address: 3125 MCHENRY AVENUE, SUITE D
City, State Zip: MODESTO, CA 95350
Phone: (209) 523-6910 Fax: (209) 523-6912
Record ID: **500010BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 12/31/2018 IMS: No

Program Name: **BREAKTHROUGHS OUTPATIENT TREATMENT**
Legal Name: DOROTHY FRANKLIN
Address: 2125 WYLIE DRIVE, SUITE 3
City, State Zip: MODESTO, CA 95355
Phone: (209) 529-1855
Record ID: **500024AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **ADDICTION FREE RECOVERY SERVICES**
Legal Name: OPIE GROUP, INC.
Address: 2937 VENEMEN AVENUE
UNIT A 105
City, State Zip: MODESTO, CA 95356
Phone: (209) 579-3301 Fax: (209) 579-3311
Record ID: **500027AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ADDICTION FREE RECOVERY SERVICES**
Legal Name: OPIE GROUP, INC.
Address: 5404 KIERNAN AVENUE
City, State Zip: SALIDA, CA 95368
Phone: (209) 579-3301 Fax: (209) 579-3311
Record ID: **500027BP**
Service Type: RES-DETOX
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **MARTIN'S AGAPE OUTPATIENT PROGRAM**
Legal Name: PAULA JEAN MARTIN
Address: 2908 FOURTH STREET
City, State Zip: CERES, CA 95307
Phone: (209) 566-8626
Record ID: **500028AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Sutter County**

Program Name: **OPTIONS FOR CHANGE SUBSTANCE ABUSE PROGRAM**
Legal Name: SUTTER-YUBA BEHAVIORAL HEALTH
Address: 1965 LIVE OAK BOULEVARD
City, State Zip: YUBA CITY, CA 95991-8828
Phone: (530) 822-7200 Fax: (530) 822-7108
Record ID: **510002BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **FIRST STEPS PERINATAL DAY TREATMENT PROGRAM**
Legal Name: SUTTER-YUBA BEHAVIORAL HEALTH
Address: 1251 EAST ONSTOTT ROAD
City, State Zip: YUBA CITY, CA 95991-2439
Phone: (530) 822-7263 Fax: (530) 822-7267
Record ID: **510002CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2018 IMS: No

Program Name: **FEATHER RIVER MEN'S CENTER**
Legal Name: FEATHER RIVER MEN'S CENTER
Address: 2465 BIRCH STREET
City, State Zip: LIVE OAK, CA 95953-2609
Phone: (530) 695-8006
Record ID: **510006AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.2
Expiration Date: 11/30/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Tehama County**

Program Name: **TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND ALCOHOL DIVISION**
Legal Name: TEHAMA COUNTY HEALTH SERVICES AGENCY
Address: 1850 WALNUT STREET, BUILDING G
City, State Zip: RED BLUFF, CA 96080
Phone: (530) 527-7893 Fax: (530) 527-0766
Record ID: **520002AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND ALCOHOL DIVISION - SOUTH COUNTY**
Legal Name: TEHAMA COUNTY HEALTH SERVICES AGENCY
Address: 275 SOLANO STREET
City, State Zip: CORNING, CA 96021
Phone: (530) 824-4890 Fax: (530) 824-8443
Record ID: **520002BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Trinity County**

Program Name:	**TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES**
Legal Name:	TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES
Address:	1450 MAIN STREET
City, State Zip:	WEAVERVILLE, CA 96093
Phone:	(530) 623-1362 Fax: (530) 623-4448
Record ID:	**530001AN**
Service Type:	NON
Target Population:	1.1
Expiration Date:	2/28/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Tulare County**

Program Name: **PAAR CENTER WEST**
Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 182 WEST BELLEVIEW AVENUE
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 781-0107
Record ID: **540001CN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3
Expiration Date: 7/31/2019 IMS: No

Program Name: **THE PAAR CENTER**
Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 509 NORTH EL GRANITO STREET
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 781-0107 Fax: (559) 781-7521
Record ID: **540001FN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **THE PAAR CENTER**
Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 218, 232 AND 237 W. BELLEVIEW AVENUE; 509 N. EL GRANITO
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 781-0107 Fax: (559) 781-7521
Record ID: **540001HN**
Service Type: RES-DETOX
Resident Capacity: 45
Total Occupancy: 48
Target Population: 1.2
Expiration Date: 11/30/2018 IMS: No

Program Name: **TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION**
Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 942 S. SANTA FE STREET
City, State Zip: VISALIA, CA 93292
Phone: (559) 636-4000 Fax: (559) 624-1067
Record ID: **540002HN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION**
Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 1055 WEST HENDERSON AVENUE, SUITE 2
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 788-1200 Fax: (559) 624-1067
Record ID: **540002IN**
Service Type: NON
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TURNING POINT YOUTH SERVICES**
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.
Address: 220 NORTH LOCUST STREET
City, State Zip: VISALIA, CA 93291
Phone: (559) 627-1385 Fax: (559) 636-2105
Record ID: **540005BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 6/30/2019 IMS: No

Program Name: **TURNING POINT VISALIA RE-ENTRY CENTER**
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.
Address: 1845 SOUTH COURT STREET,
DORMS 1, 2, 3, 4, 5 AND 6
City, State Zip: VISALIA, CA 93277
Phone: (559) 732-5550 Fax: (559) 732-5574
Record ID: **540005DN**
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.2
Expiration Date: 3/31/2018 IMS: No

Program Name: **COURAGE TO CHANGE, INC.**
Legal Name: COURAGE TO CHANGE
Address: 1230 N. ANDERSON ROAD
City, State Zip: EXETER, CA 93221
Phone: (559) 594-4855 Fax: (559) 594-0086
Record ID: **540014BN**
Service Type: NON
Target Population: 1.5
Expiration Date: 7/31/2017 IMS: No

Program Name: **RECOVERY RESOURCES**
Legal Name: RICK AND JERRI THOMPSON, D.B.A., RECOVERY RESOURCES
Address: 4040 S. DEMAREE ROAD, SUITE A
City, State Zip: VISALIA, CA 93277
Phone: (559) 625-8176 Fax: (559) 625-8179
Record ID: **540020AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **ALTERNATIVE SERVICES**
Legal Name: ALTERNATIVE SERVICES, INC.
Address: 215 NORTH D STREET
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 783-2402 Fax: (559) 782-4681
Record ID: **540024AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 2/28/2018 IMS: No

Program Name: **ALTERNATIVE SERVICES**
Legal Name: ALTERNATIVE SERVICES, INC.
Address: 2380 W. WHITENDALE AVENUE
City, State Zip: VISALIA, CA 93227
Phone: (559) 651-8090 Fax: (559) 651-8099
Record ID: **540024DP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **ALTERNATIVE SERVICES**
Legal Name: ALTERNATIVE SERVICES, INC.
Address: 125 SOUTH M STREET
City, State Zip: TULARE, CA 93274
Phone: (559) 685-8283
Record ID: **540024EP**
Service Type: NON
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **SRS RECOVERY SERVICES**
Legal Name: SRS RECOVERY SERVICES, LLC
Address: 250 NORTH MAIN STREET
City, State Zip: PORTERVILLE, CA 93257
Phone: (559) 789-9881 Fax: (559) 789-9877
Record ID: **540028BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **NEW HOPE**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 212 NORTH STEVENSON STREET
City, State Zip: VISALIA, CA 93291
Phone: (559) 625-2995 Fax: (559) 625-3808
Record ID: **540031AN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3
Expiration Date: 6/30/2018 IMS: No

Program Name: **PINE RECOVERY CENTER**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 120 WEST SCHOOL AVENUE
City, State Zip: VISALIA, CA 93291
Phone: (559) 625-4100 Fax: (559) 625-3808
Record ID: **540031BN**
Service Type: RES-DETOX
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.2
Expiration Date: 8/31/2017 IMS: No

Program Name: **NEW VISIONS FOR WOMEN**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 1425-A and B EAST WALNUT AVENUE
City, State Zip: VISALIA, CA 93277-6432
Phone: (559) 625-4072 Fax: (559) 625-3808
Record ID: **540031CN**
Service Type: RES-DETOX
Resident Capacity: 23
Total Occupancy: 23
Target Population: 1.3
Expiration Date: 5/31/2018 IMS: No

Program Name: **MOTHERING HEIGHTS**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 705 SOUTH COURT STREET
City, State Zip: VISALIA, CA 93277
Phone: (559) 625-2995 Fax: (559) 625-3808
Record ID: **540031DN**
Service Type: RES
Resident Capacity: 10
Total Occupancy: 23
Target Population: 1.4
Expiration Date: 10/31/2017 IMS: No

Program Name: **NEW HEIGHTS**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 1731 W. WALNUT AVENUE
City, State Zip: VISALIA, CA 93277
Phone: (559) 732-4885 Fax: (559) 625-3808
Record ID: **540031EN**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **ROBERTSON RECOVERY**
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.
Address: 3107 EAST KAWEAH AVENUE
City, State Zip: VISALIA, CA 93292
Phone: (559) 754-2705 Fax: (559) 802-3097
Record ID: **540031GN**
Service Type: RES-DETOX
Resident Capacity: 28
Total Occupancy: 29
Target Population: 1.2
Expiration Date: 8/31/2018 IMS: No

Program Name: **ASTON'S NEW HOPE RECOVERY**
Legal Name: ASTON'S NEW HOPE RECOVERY
Address: 2415 N. OAK GROVE COURT
City, State Zip: VISALIA, CA 93291
Phone: (559) 799-7156 Fax: (559) 636-1324
Record ID: **540037AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Tuolumne County**

Program Name:	**THE RANCH**
Legal Name:	MAYNORD'S CHEMICAL DEPENDENCY RECOVERY CENTER
Address:	19320 CHEROKEE ROAD
City, State Zip:	TUOLUMNE, CA 95379
Phone:	(209) 928-3737 Fax: (209) 928-1152
Record ID:	**550001AP**
Service Type:	RES-DETOX
Resident Capacity:	36
Total Occupancy:	37
Target Population:	1.1
Expiration Date:	12/31/2017 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Ventura County**

Program Name: **VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAM-SIMI VALLEY CTR**
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL AND DRUG PROGRAMS
Address: 3150 EAST LOS ANGELES AVENUE
City, State Zip: SIMI VALLEY, CA 93063
Phone: (805) 577-1724
Record ID: **560003AN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAM-VENTURA CTR**
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS
Address: 24 EAST MAIN STREET
City, State Zip: VENTURA, CA 93001
Phone: (805) 652-6919 Fax: (805) 652-0868
Record ID: **560003BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **OXNARD CENTER**
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS
Address: 1911 WILLIAMS DRIVE
City, State Zip: OXNARD, CA 93036
Phone: (805) 981-9200
Record ID: **560003CN**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **A NEW START FOR MOMS**
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS
Address: 1911 WILLIAMS DRIVE, SUITE 140
City, State Zip: OXNARD, CA 93036
Phone: (805) 981-9250
Record ID: **560003DN**
Service Type: NON
Target Population: 1.3
Expiration Date: 10/31/2018 IMS: No

Program Name: **FILLMORE ADP CENTER**
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS
Address: 828 WEST VENTURA STREET, SUITE 250
City, State Zip: FILLMORE, CA 93015
Phone: (805) 524-8644
Record ID: **560003GN**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **KHEPERA HOUSE**
Legal Name: KHEPERA HOUSE
Address: 108 WEST HARRISON AVENUE
City, State Zip: VENTURA, CA 93001
Phone: (805) 653-2596
Record ID: **560004DN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **KHEPERA HOUSE**
Legal Name: KHEPERA HOUSE
Address: 277 A AND B WEST HARRISON AVENUE
City, State Zip: VENTURA, CA 93001
Phone: (805) 648-9762
Record ID: **560004EN**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2
Expiration Date: 9/30/2018 IMS: No

Program Name: **KHEPERA HOUSE**
Legal Name: KHEPERA HOUSE
Address: 125-A, 125-B, 125-C & 125-D WEST HARRISON STREET
City, State Zip: VENTURA, CA 93001
Phone: (805) 653-2596 Fax: (805) 648-9762
Record ID: **560004JN**
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.2
Expiration Date: 5/31/2019 IMS: No

Program Name: **ACTION FAMILY COUNSELING CENTERS - SIMI VALLEY**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 4380 APRICOT ROAD
City, State Zip: SIMI VALLEY, CA 93063
Phone: (805) 584-3258 Fax: (661) 297-9701
Record ID: **560026AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 11/30/2018 IMS: No

Program Name: **ACTION FAMILY COUNSELING, INC. ADULT RESIDENTIAL TREATMENT - PIRU**
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 691 MAIN STREET
City, State Zip: PIRU, CA 93040
Phone: (805) 521-1250 Fax: (850) 521-1425
Record ID: **560026DP**
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **INTERVENTION INSTITUTE**
Legal Name: LAURIE SANDERS
Address: 973 S. WESTLAKE BLVD, SUITE 103
City, State Zip: THOUSAND OAKS, CA 91361
Phone: (805) 379-3611 Fax: (805) 446-4470
Record ID: **560027AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2019 IMS: No

Program Name: **ALTERNATIVE ACTION PROGRAMS**
Legal Name: DENNIS M. GIROUX & ASSOCIATES, INC.
Address: 314 WEST FOURTH STREET
City, State Zip: OXNARD, CA 93030
Phone: (805) 988-1112 Fax: (805) 988-4883
Record ID: **560028AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **GENESIS PROGRAMS, INC.**
Legal Name: GENESIS PROGRAMS, INC.
Address: 1732 PALMA DRIVE, SUITE 208
City, State Zip: VENTURA, CA 93003
Phone: (805) 650-3094 Fax: (805) 650-3097
Record ID: **560032AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **GENESIS PROGRAMS, INC.**
Legal Name: GENESIS PROGRAMS, INC.
Address: 145 HODENCAMP ROAD, SUITE 207
City, State Zip: THOUSAND OAKS, CA 91360
Phone: (805) 497-6169 Fax: (805) 497-6179
Record ID: **560032BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

Program Name: **PASSAGES VENTURA**
Legal Name: PASSAGES SILVER STRAND LLC
Address: 224 EAST CLARA STREET
City, State Zip: PORT HUENEME, CA 93041
Phone: (805) 283-4737 Fax: (805) 488-0001
Record ID: **560036AP**
Service Type: RES-DETOX
Resident Capacity: 90
Total Occupancy: 90
Target Population: 1.1
Expiration Date: 3/31/2019 IMS: No

Program Name: **PASSAGES VENTURA**
Legal Name: PASSAGES SILVER STRAND LLC
Address: 241 MARKET STREET
City, State Zip: PORT HUENEME, CA 93041
Phone: (805) 283-4737 Fax: (805) 488-9000
Record ID: **560036BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC.
Address: 1408 E THOUSAND OAKS BOULEVARD, SUITE 100
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (805) 644-5745 Fax: (818) 975-5076
Record ID: **560038BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC
Address: 385 N. CONEJO SCHOOL ROAD
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (805) 379-0565
Record ID: **560038DP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC.
Address: 395 N. CONEJO SCHOOL ROAD
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (805) 659-2309 Fax: (818) 975-5076
Record ID: **560038FP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2018 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC
Address: 1154 CARDIFF CIRCLE
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (805) 379-4883
Record ID: **560038GP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 4/30/2019 IMS: No

Program Name: **LA VENTANA TREATMENT PROGRAMS**
Legal Name: RYLIST, INC.
Address: 1771 COUNTRY OAKS LANE
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (805) 370-5440 Fax: (805) 371-4038
Record ID: **560038HP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **PSYCHOLOGICAL SERVICES FOR FAMILIES**
Legal Name: PSYCHOLOGICAL SERVICES FOR FAMILIES
Address: 410 NORTH A STREET
City, State Zip: OXNARD, CA 93030
Phone: (805) 701-1040 Fax: (805) 487-2255
Record ID: **560039AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **A WILDWOOD RECOVERY**
Legal Name: A WILDWOOD RECOVERY
Address: 360 CAMINO DE CELESTE
City, State Zip: THOUSAND OAKS, CA 91360
Phone: (805) 493-5741 Fax: (805) 493-5047
Record ID: **560040AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **A WILDWOOD RECOVERY IOP**
Legal Name: A WILDWOOD RECOVERY
Address: 166 N. MOORPARK ROAD, SUITE 304
City, State Zip: THOUSAND OAKS, CA 91360
Phone: (805) 493-5741 Fax: (805) 493-5047
Record ID: **560040BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 11/30/2017 IMS: No

Program Name: **COMMUNITY RECOVERY CENTER**
Legal Name: VENTURA RECOVERY CENTER, INC.
Address: 166 SIESTA AVENUE
City, State Zip: THOUSAND OAKS, CA 91360
Phone: (805) 499-8383 Fax: (805) 494-4898
Record ID: **560041AP**
Service Type: RES-DETOX
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **THE LAKE HOUSE**
Legal Name: SHERWOOD CORPORATE HOUSING LLC
Address: 890 LAKE SHERWOOD DRIVE
City, State Zip: LAKE SHERWOOD, CA 91361
Phone: (805) 371-8870
Record ID: **560042AP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 10/31/2017 IMS: No

Program Name: **ENGAGE RECOVERY, INC.**
Legal Name: ENGAGE RECOVERY, INC.
Address: 650 HAMPSHIRE ROAD SUITES 104, 204, 212
City, State Zip: WESTLAKE VILLAGE, CA 91361
Phone: (805) 497-0605 Fax: (805) 371-4862
Record ID: **560043AP**
Service Type: NON
Target Population: 1.5
Expiration Date: 4/30/2018 IMS: No

Program Name: **VANTAGE POINT RECOVERY**
Legal Name: GATE OF RECOVERY INC.
Address: 123 HODENCAMP ROAD,
SUITES 100, 103, 107, 205 & 210
City, State Zip: THOUSAND OAKS, CA 91360
Phone: (805) 777-7595 Fax: (805) 777-9249
Record ID: **560045AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 3/31/2018 IMS: No

Program Name: **PCI - WESTLAKE CENTERS - IOP**
Legal Name: MIRIAM HAMIDEH, PH.D, CLINICAL PSYCHOLOGIST, INC
Address: 5743 CORSA AVENUE, SUITE 223
City, State Zip: WESTLAKE VILLAGE, CA 91362
Phone: (747) 222-7464
Record ID: **560046AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **DESTINATIONS TO RECOVERY**
Legal Name: DESTINATIONS TO RECOVERY, LLC
Address: 1304 E. MAIN STREET
City, State Zip: VENTURA, CA 93001
Phone: (818) 737-2221 Fax: (805) 256-3287
Record ID: **560047AP**
Service Type: NON
Target Population: 1.13
Expiration Date: 6/30/2019 IMS: No

Program Name: **NARCONON OJAI**
Legal Name: NARCONON PACIFIC COAST
Address: 9950 SULPHUR MOUNTAIN ROAD
City, State Zip: OJAI, CA 93023
Phone: (805) 798-8021
Record ID: **560048AN**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **PURE RECOVERY**
Legal Name: PURE RECOVERY CALIFORNIA, INC.
Address: 5427 REEF WAY
City, State Zip: OXNARD, CA 93035
Phone: (805) 263-6296
Record ID: **560049AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **PURE RECOVERY**
Legal Name: PURE RECOVERY CALIFORNIA, INC.
Address: 4310 TRADEWINDS DRIVE, SUITE 300
City, State Zip: OXNARD, CA 93035
Phone: (805) 263-6296
Record ID: **560049BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2018 IMS: No

Program Name: **PURE RECOVERY**
Legal Name: PURE RECOVERY CALIFORNIA, INC.
Address: 3957 W. HEMLOCK STREET
City, State Zip: OXNARD, CA 93035
Phone: (805) 263-6296
Record ID: **560049CP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 2/28/2019 IMS: No

Program Name: **TRIBE INTEGRATIVE RECOVERY**
Legal Name: NITOR, INC.
Address: 1317 DEL NORTE ROAD, SUITE 200
City, State Zip: CAMARILLO, CA 93010
Phone: (805) 991-7561 Fax: (805) 832-6786
Record ID: **560050AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2018 IMS: No

Program Name: **"SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA**
Legal Name: "SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA
Address: 3069 CISCO COURT
City, State Zip: SIMI VALLEY, CA 93063
Phone: (805) 404-9390
Record ID: **560051AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 5/31/2018 IMS: No

Program Name: **CHANGING TIDES TREATMENT CENTER**
Legal Name: CHANGING TIDES TREATMENT, LLC
Address: 117 SANTA CRUZ AVENUE
City, State Zip: OXNARD, CA 93035
Phone: (805) 254-0619
Record ID: **560052AP**
Service Type: RES-DETOX
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **CHANGING TIDES TREATMENT CENTER**
Legal Name: CHANGING TIDES TREATMENT, LLC
Address: 2021 SPERRY AVENUE,
18
City, State Zip: VENTURA, CA 93003
Phone: (844) 883-3869
Record ID: **560052BP**
Service Type: NON
Target Population: 1.1
Expiration Date: 8/31/2018 IMS: No

Program Name: **VENTURA RECOVERY CENTER**
Legal Name: SIESTA HOUSE, LLC
Address: 2985 E. HILLCREST DRIVE,
105 &106
City, State Zip: THOUSAND OAKS, CA 91362
Phone: (800) 247-6111
Record ID: **560053AP**
Service Type: NON
Target Population: 1.1
Expiration Date: 9/30/2018 IMS: No

Program Name: **PROTOTYPES WOMEN'S CENTER-VENTURA**
Legal Name: HEALTHRIGHT 360
Address: 2150 N. VICTORIA AVENUE
City, State Zip: OXNARD, CA 93036
Phone: (805) 382-6296 Fax: (805) 382-9487
Record ID: **560054AN**
Service Type: RES-DETOX
Resident Capacity: 56
Total Occupancy: 85
Target Population: 1.4
Expiration Date: 9/30/2017 IMS: No

Program Name: **A HEALING PLACE - THE ESTATES**
Legal Name: PARADIGM RECOVERY GROUP, LLC
Address: 601 E. DAILY DRIVE, SUITE 205
City, State Zip: CAMARILLO, CA 93010
Phone: (844) 388-4100 Fax: (805) 914-0632
Record ID: **560055AP**
Service Type: NON
Target Population: **
Expiration Date: 7/31/2019 IMS: No

Program Name: **A HEALING PLACE - THE ESTATES**
Legal Name: PARADIGM RECOVERY GROUP, LLC
Address: 192 RAMONA PLACE
City, State Zip: CAMARILLO, CA 93010
Phone: (818) 618-0404 Fax: (805) 914-0632
Record ID: **560055BP**
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1
Expiration Date: 7/31/2019 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Yolo County**

Program Name: **CACHE CREEK LODGE**
Legal Name: CACHE CREEK LODGE, INC.
Address: 421, 435, AND 441 ASPEN STREET
City, State Zip: WOODLAND, CA 95695-2665
Phone: (530) 662-5727 Fax: (530) 892-1831
Record ID: **570004BN**
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.2
Expiration Date: 7/31/2017 IMS: No

Program Name: **WALTER'S HOUSE**
Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)
Address: 285 4TH STREET
City, State Zip: WOODLAND, CA 95695
Phone: (530) 662-2699 Fax: (530) 662-6918
Record ID: **570008AN**
Service Type: RES
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1
Expiration Date: 8/31/2017 IMS: No

Program Name: **FOURTH AND HOPE OUTPATIENT PROGRAM**
Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)
Address: 207 FOURTH STREET
City, State Zip: WOODLAND, CA 95695-3501
Phone: (530) 867-5010 Fax: (530) 661-2494
Record ID: **570008BN**
Service Type: NON
Target Population: 1.1
Expiration Date: 1/31/2019 IMS: No

Program Name: **PROGRESS HOUSE YOLO COUNTY WOMEN AND CHILDREN'S FACILITY**
Legal Name: PROGRESS HOUSE, INC.
Address: 15450 COUNTY ROAD 99, BUILDING A AND 15430 COUNTY ROAD 99, BUILDING B
City, State Zip: WOODLAND, CA 95695-9339
Phone: (530) 626-9240 Fax: (530) 668-8528
Record ID: **570009AN**
Service Type: RES
Resident Capacity: 12
Total Occupancy: 27
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services
Licensed Residential Facilities and/or
Certified Alcohol and Drug Programs

As of 8/1/2017 **Yuba County**

Program Name: **PATHWAYS**
Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED
Address: 2 9TH STREET
City, State Zip: MARYSVILLE, CA 95901-5362
Phone: (530) 742-6670 Fax: (530) 674-4544
Record ID: **580001BN**
Service Type: RES-DETOX
Resident Capacity: 22
Total Occupancy: 23
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **PATHWAYS**
Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED
Address: 2 9TH STREET
City, State Zip: MARYSVILLE, CA 95901-5362
Phone: (530) 742-6670 Fax: (530) 674-4544
Record ID: **580001DN**
Service Type: NON
Target Population: 1.1
Expiration Date: 12/31/2017 IMS: No

Program Name: **FOR OUR RECOVERING FAMILIES**
Legal Name: COUNTY OF YUBA PROBATION FOR OUR RECOVERING (F.O.R) FAMILIES
Address: 8 7TH STREET
City, State Zip: MARYSVILLE, CA 95901
Phone: (530) 749-5124 Fax: (530) 743-7364
Record ID: **580002AN**
Service Type: NON
Target Population: 1.13
Expiration Date: 6/30/2019 IMS: No