Prevention Council of Saratoga County
Directory of OASAS Certified Treatment Providers
in New York's Capital Region

Revised: 10/2018

The PREVENTION COUNCIL

PROVIDER NAME				
SERVICE DESCRIPTION	St. Peter's Health Partners Outpatient Program and Day Rehabilitation (Central Ave)	SPARC Men's Halfway House	SPARC Inpatient Rehabilatation	Senior Hope Counseling
COUNTY	ALBANY	ALBANY	ALBANY	ALBANY
Website	http://www.sphcs.org/OutpatientRehabilitation	http://www.sphcs.org/OutpatientRehabilitation	http://www.sphcs.org/InpatientRehabilitation	http://www.seniorhope.org/
Intake Contact			Jeffrey Capitummino	Susan Gosselin
Phone Number	518-449-5170	518-449-5170	518-452-6757	518-489-7777
Fax Number	518-598-0493	518-598-0493	518-452-6756	518-489-7771
Email			James.Jeffreys@sphp.com	sgosselin@seniorhope.org
EVALUATION SERVICES				
Evaluation	PROVIDE	PROVIDE	By referral	PROVIDE
Walk-In Evaluation	PROVIDE (as of Sept. 1)	PROVIDE (time permitting)	PROVIDE (time permitting)	As time allows
CLIENT TYPE				
Youth <18				
Adult	ACCEPT		ACCEPT	Accepts adults (men and
Female	ACCEPT		ACCEPT	women) 40 years of age
Male	ACCEPT	ACCEPT	ACCEPT	and older
Client w/Children				
ADDICTION SERVICES				
Alcohol	PROVIDE	PROVIDE	PROVIDE	PROVIDE
Substance Abuse	PROVIDE	PROVIDE	PROVIDE	PROVIDE
Narcotics	PROVIDE	PROVIDE	PROVIDE	PROVIDE
MAT	PROVIDE	PROVIDE	PROVIDE	
Opioids	PROVIDE	PROVIDE	PROVIDE	PROVIDE
Impaired Driver	PROVIDE	PROVIDE		PROVIDE
Dual Diagnosis	PROVIDE	PROVIDE		PROVIDE
Spanish Program	PROVIDE	PROVIDE	Translators available	
LEVEL OF CARE				
Detox				
Stabilization			PROVIDE	
Inpatient		PROVIDE	PROVIDE	
Outpatient	PROVIDE			PROVIDE (Non-intensive)
Residential		PROVIDE		
INSURANCE				*Please call to verify which insurance
Aetna	ACCEPT	Only DSS or Self-Pay	ACCEPT	
CDPHP	ACCEPT		ACCEPT	
CIGNA	ACCEPT			
Excellus				
Fidelis	ACCEPT		ACCEPT	
Medicaid	ACCEPT		ACCEPT	
Medicare			ACCEPT	
MVP				
Public Assistance	ACCEPT			
YourCare Health Plan				
Sliding Fee	ACCEPT	ACCEPT		
Tricare	ACCEPT			
United Health				
WellCare				

For the most updated versions of this directory visit:

Disclaimer: Information included on this template is updated biannually based on data shared with The Prevention Council from each provider.

SERVICE DESCRIPTION	PROVIDER NAME					
	Acacia Network/Promesa	Addictions Care Center of Albany	Belevedere Addiction Services	Equinox, Inc.	Hope House for Women & Children	LaSalle School
COUNTY	ALBANY	ALBANY	ALBANY	ALBANY	ALBANY	ALBANY
Website	https://www.acacianetwork.org/regional-development/	http://theacca.net/	http://belvederehealthservices.com/belvedere-addiction-services	http://www.equinoxinc.org/index.php	https://www.hopehouseinc.org/	http://www.lasalle-school.org/general/the-counseling-center-at-lasalle/
Intake Contact	Jessica Flach	Vanessa Condy	Gail Moore	Megan Mulholland	Star Petersen	Jessica Repko
Phone Number	729-5659, x5011	518-434-2367, x119	518-694-9400, x115	518-435-9931	518-453-8351	518-242-4731 x219, clinic x290
Fax Number	518-426-1325	518-434-2372	518-694-4419	518-459-3715	518-438-7827	518-242-4747
Email	jflach@promesa.org				spetersen@hopehouseinc.org	
EVALUATION SERVICES						
Evaluation	PROVIDE	PROVIDE	PROVIDE	PROVIDE	Upon referral	PROVIDE
Walk-In Evaluation	PROVIDE	PROVIDE	Mon-Fri, 8AM-2PM	Tuesday & Friday, 10AM-3PM		
CLIENT TYPE						
Youth <18	ACCEPT (Adolescent outpatient program)			ACCEPT (Ages 12+)		ACCEPT (up to 18YO for mental health; 21YO for substance abuse
Adult	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT
Female	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT
Male	ACCEPT	ACCEPT (Men's Residential)	ACCEPT	ACCEPT		
Client w/Children		ACCEPT (Women's Center)			Women with up to 2 children	
ADDICTION SERVICES						
Alcohol	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE
Substance Abuse	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE
Narcotics	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE
MAT	PROVIDE	PROVIDE	PROVIDE		PROVIDE	
Opiods	PROVIDE	PROVIDE	PROVIDE		PROVIDE	
Impaired Driver	PROVIDE	PROVIDE	PROVIDE	PROVIDE	PROVIDE	
Dual Diagnosis	PROVIDE	PROVIDE	PROVIDE	PROVIDE		PROVIDE
Spanish Program	PROVIDE			Translator service available		translators available
LEVEL OF CARE						
Detox		ANCILLARY			Congregant Care, Level 2	
Stabilization		PROVIDE			PROVIDE	
Inpatient						
Outpatient	PROVIDE	PROVIDE	PROVIDE	PROVIDE (non-intensive)		PROVIDE
Residential		PROVIDE			PROVIDE	
INSURANCE						
Aetna	ACCEPT				ACCEPT	
CDPHP	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT
CIGNA	ACCEPT		ACCEPT		ACCEPT	
Excellus	ACCEPT		ACCEPT		ACCEPT	
Fidelis	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT	ACCEPT
Medicaid	ACCEPT	ACCEPT	ACCEPT		ACCEPT	ACCEPT
Medicare	ACCEPT	ACCEPT			ACCEPT	
MVP	ACCEPT	ACCEPT	ACCEPT		ACCEPT	
Public Assistance	ACCEPT	ACCEPT	ACCEPT		ACCEPT	
YourCare Health Plan					ACCEPT	
Sliding Fee	ACCEPT	ACCEPT	ACCEPT	ACCEPT		ACCEPT
Tricare		ACCEPT			ACCEPT	
United Health	ACCEPT	ACCEPT				
WellCare	ACCEPT	ACCEPT		ACCEPT		