Affiliated Treatment Provider Referral List

(732)-625-3907

Agency may require referrals to attend a specific number of self-help meetings and/or participate in random urine testing. Also, some individual agencies may have additional treatment requirements.

Aberdeen

CPC BEHAVIORAL HEALTH (ABERDEEN) *

1088 Highway 34 Mailing Address

Aberdeen Counseling Center Aberdeen Counseling Center 1088 Highway 34

(800)-250-9811 Aberdeen NJ 07747 (732) 219-0814 (Fax) Cost:

Contact Person: Access CenterIntake:\$175Languages spoken: EnglishAssessment:\$175Time: Mon-Thurs 8am-9pm; Fri 8am-5pmIndividual:\$125

Levels of Care:1.0 (OP), 2.1 (IOP), Medication Monitoring Group: \$50; A/D Screening \$10-\$30

Insurance Accepted: Most Insurances, Medicaid, Medicare, Fee for

Service, Sliding Scale Fee

Asbury Park

JEWISH FAMILY AND CHILDREN *

(732)-556-4016

705 Summerfield Avenue Mailing Address

705 Summerfield Avenue Asbury Park NJ 07712

Group:

(732) 774-8809 (Fax) Cost:

Contact Person: Hilary Krosney-Rediker, Director Intake: \$250 Languages spoken: English Assessment: \$250

Time: Mon, Wed, Thurs 9am-9pm; Tues 9am-4:30pm; Fri 9am-3pm Levels of Care:1.0 (OP), 2.1 (IOP)

Insurance Accepted: Cash/Check/Credit Card, some private

insurances, Medicaid, DAS grants, Sliding

scale Fee

Individual: \$150

\$100; A/D Screen \$8

NEW HOPE IBHC (EPIPHANY HOUSE - ASBURY PARK) *

300 Fourth Avenue Mailing Address

300 Fourth Avenue Asbury Park NJ 07712

(732)-775-0720 Asbury Park NJ 0771 (732) 775-7840 (Fax) Cost:

Contact Person: Intake Intake:

Languages spoken: English Assessment:
Time: 24/7/365 Individual:

Levels of Care:Halfway House Svcs (Women only); Co-Occurring Group:

Transforment

Treatment

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

Belmar

DAVID MEYERS COUNSELING SERVICES(IDRC - BELMAR)

First Presbyterian Church

9th Avenue & E Street

(848)-667-0267

Mailing Address

401 Tilton Place

Neptune NJ 07753

(Fax) Cost:

Contact Person: David Meyers Intake: TELEHEALTH

Languages spoken: English Assessment: \$125
Time: Tues 7pm-8pm (Group); Individual sessions by appt. Individual: \$75

Levels of Care:1 (OP) Group: \$40, A/D Screen \$75

Insurance Accepted: Cash, Check, Venmo, Credit Card, Sliding

Scale Fee

Eatontown

PREFERRED BEHAVIORAL HEALTH (Eatontown) *

40 Christopher Way Mailing Address

40 Christopher Way Eatontown NJ 07724

(732) 905-0789 (Fax) Cost:

Contact Person: Amanda Rembisz Intake: \$167.21 Languages spoken: English Spanish Assessment: \$438.17

Time: Mon-Thurs 9am-5pm; Fri 9 am-5pm; Sat 9am-1pm Individual: \$68.21(30mins), \$90.28 (45mins)

Levels of Care:1 (OP), 2.1 (IOP) Group: \$27.50 (OP), \$109.48 (IOP), A/D Screen \$50

Insurance Accepted: Insurance, Medicaid, Grants, Sliding Scale;

Transportation available to treatment program,

not assessment

RECOVERY INNOVATIONS INC. *

(732)-380-7061

(908)-601-3835

1 Corbett Way, Suite 1 Mailing Address

1 Corbett Way, Suite 1 Eatontown NJ 07724

(732) 380-7508 (Fax) Cost:

Contact Person: Nicole MartinezIntake:\$225Languages spoken: EnglishAssessment:\$225Time: Mon-Thurs 9am-9pm; Fri-Sat 9am-5pmIndividual:\$150

Levels of Care:1 (OP), 2.1 (IOP) Group: \$80; A/D Screening \$70 (when applicable)

Insurance Accepted: Cash, Check, CC, Medicaid, Fee for Service

Freehold

AMERICAN DAY CD/HIGH FOCUS CENTERS (USE THIS ONE)

6 Paragon Way Mailing Address

 Suite 104
 47 Maple Street Suite 401

 (732)-303-9900
 Summit NJ 07901

 (732) 303-9901 (Fax)
 Cost:

Contact Person: ACCESS CENTER Intake:

Languages spoken: EnglishAssessment:\$250.00Time: 9am to 9pmIndividual:\$90-180

Levels of Care: 1.0 (OP), 2.1 (IOP) Group: IOP \$350; A/D Screen \$50

Insurance Accepted: Self Pay and Commercial Insurance. No

Sliding Scale Fee

COMMUNITY REHAB*

3443 Route 9 North Mailing Address

3443 Route 9 North Freehold NJ 07728

(732)-462-5553 Freehold NJ 077

(732) 462-2012 (Fax) Cost:

Contact Person: Diane CassidyIntake:\$150Languages spoken: EnglishAssessment:\$150Time: Mon-Fri 9am-9pmIndividual:\$50

Levels of Care:1 (OP), 2.1 (IOP), Partial Care, Co-occuring Group: \$35, A/D Screening: \$25

Insurance Accepted: Check, Cash, Insurance, Medicaid, Medicare,

Sliding Scale Fee

CPC BEHAVIORAL HEALTHCARE (FREEHOLD) *

22 Court Street Mailing Address

Freehold Counseling Center Freehold Counseling Center 22 Court Street

(800)-250-9811 Freehold NJ 07728

(732) 219-0814 (Fax) Cost:

Contact Person: Access CenterIntake:\$175Languages spoken: EnglishAssessment:\$175Time: Mon-Thurs 8am-9pm; Fri 8am-5pmIndividual:\$125

Levels of Care:1 (OP), 2.1 (IOP), Medication Monitoring Group: \$50; A/D Screening \$10-\$30

Insurance Accepted: Most Insurances, Medicaid, Medicare, Fee for

Service, Sliding Scale Fee

DAVID MEYERS COUNSELING SERVICES(IDRC - FREEHOLD)

Mailing Address 1st Presbyterian Church 118 WEST MAIN STREET 401 Tilton Place (848)-667-0267 Neptune NJ 07753 Cost:

(Fax)

TELEHEALTH Contact Person: David Meyers Intake:

Languages spoken: English Assessment: \$125 Time: By appt. Individual: \$75

\$40, A/D Screen \$75 Levels of Care:1 (OP) Group:

Insurance Accepted: Cash, Check, Venmo, Credit Card, Sliding

Scale Fee

NEW HOPE IBHC (FREEHOLD) *

(732)-308-0113

2 Monmouth Avenue Mailing Address

2 Monmouth Avenue Freehold NJ 07728

(732) 308-0115 (Fax) Cost: Contact Person: Intake Intake:

Languages spoken: English Spanish Assessment: \$150 Time: Mon, Tue, Thur 9:30am-9pm; Wed 9:30am-5pm; Fri 9 am-4pm; Individual: \$45-90

Sat 9:30 am-12pm

Levels of Care:1 (OP), 2.1 (IOP), Co-Occurring Treatment Services \$45-90; A/D Screening \$35-70 Group:

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

DANIEL STRUBLE, LCSW, LCADC

32 Village Ct. Mailing Address

32 Village Ct. (732)-335-1675 Hazlet NJ 07730 (732) 335-1151 (Fax) Cost:

Contact Person: Daniel Struble, LCSW, LCADC

Intake: \$100 Languages spoken: English Assessment: \$200 Time: Mon-Thurs 8am-9pm; Fri 8am-12pm Individual: \$75

\$40; A/D Screen \$25 Levels of Care:Assessment, 1 (OP) Group:

Insurance Accepted: Cash, Credit, Check, BC/BS, Aetna, Cigna,

United Health Care, Medicare, Sliding Scale

Howell

CPC BEHAVIORAL HEALTHCARE (HOWELL) *

4539 US Highway 9 Mailing Address

Howell Counseling Center Howell Counseling Center 4539 US Highway 9

(800)-250-9811 Howell NJ 07731

(732) 219-0814 (Fax) Cost:

\$175 Contact Person: Access Center Intake: Languages spoken: English Assessment: \$175 Time: Mon-Fri 8am-6pm Individual: \$125

Levels of Care:1 (OP), 2.1 (IOP), Medication Management Group: \$50; A/D Screening \$10-\$30

Insurance Accepted: Most Insurances, Medicaid, Medicare, Fee for

Service, Sliding Scale Fee

Keansburg

RESA TREATMENT CENTER

(732)-495-1474

199 Main Street, Suite 2A Mailing Address

> 199 Main Street, Suite 2A Keansburg NJ 07734

(866) 730-7538 (Fax) Cost:

Contact Person: Gina Bellifemine Intake: \$150 Languages spoken: English Assessment: \$150 Time: Mon-Thurs 9am-9pm; Fri 9am-5pm Individual: \$100

Levels of Care:1 (OP), 2.1 (IOP) Group: \$50; A/D screening \$45

Insurance Accepted: Cash, Credit, Medicaid, Medicare, Private

Insurance, and Sliding Scale

Cost:

Long Branch

DAVID MEYERS COUNSELING SERVICES(IDRC-LONG BRANCH)

First Presbyterian Church Mailing Address PO BOX 774 167 Cedar Avenue (732)-735-5139 Oakhurst NJ 07755

(Fax)

Contact Person: Nancy Reng Languages spoken: English

Time: By appt. Levels of Care:1 (OP)

Time: 24/7/365

Insurance Accepted: Cash, Check, Venmo, Credit Care, Sliding

Scale Fee

TELEHEALTH

Assessment: \$125 Individual: \$75

Group: \$40, A/D Screen \$75

NEW HOPE IBHC (EPIPHANY HOUSE - LONG BRANCH) *

373 Brighton Avenue Mailing Address

> 373 Brighton Avenue Long Branch NJ 07740

> > Individual:

Group:

(732)-775-0720 732-775-7840 (Fax) Cost: Contact Person: Intake Intake: Assessment: Languages spoken: English

Levels of Care: Halfway House Services (Women Only); Co-Occurring

Treatm

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

NEW HOPE IBHC (PHILLIPS HOUSE - Halfway House Services) *

190 Chelsea Avenue Mailing Address

> 190 Chelsea Avenue Long Branch NJ 07740

(732)-870-8500 (732) 222-9315 (Fax) Cost: Contact Person: Intake Intake: Languages spoken: English Assessment: Time: 24/7/365 Individual: Group:

Levels of Care: Halfway House Services (MEN only), Co-Occurring

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

NEW HOPE IBHC (PHILLIPS HOUSE - OutPatient Services) *

190 Chelsea Avenue Mailing Address

> 190 Chelsea Avenue Long Branch NJ 07740

> > Individual:

Group:

Intake:

\$150

\$45-\$90

\$45-\$90; A/D Screening \$35-70

(732) 222-9315 (Fax) Cost:

Contact Person: To Reach Intake Option 3; Spanish x3015 Intake: Languages spoken: English Spanish Assessment:

Time: M, T, T 9:30 am-9 pm; W 9:30 am-5pm; F 9:30-4pm; Sat 9:30

am-12 pm; Tues

(732)-870-8500

Levels of Care:1.0 (OP), 2.1 (IOP), Co-Occurring Treatment Services

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

Manalapan STRESS CARE OF MANALAPAN *

500 Park Avenue Mailing Address

500 Park Avenue (732)-679-4500 Manalapan NJ 07726

(732) 679-4549 (Fax) Cost: Contact Person: Press "O" Reception

Languages spoken: English Assessment: \$100 Time: Mon-Fri 9am-9pm Individual: \$85

Levels of Care:1 (OP), 2.1 (IOP), 2.5 (PC) Group: \$50 (OP); \$200 (IOP)

Insurance Accepted: All Commercial Insurance, Medicaid,

Medicare, FFS Initiatives.

Marlboro

DISCOVERY INSTITUTE OF ADDICTIVE DISORDERS, INC. *

80 Conover Road Mailing Address

P.O. Box 177

(732)-946-9444 x140 Marlboro NJ 07746

(732) 946-0758 (Fax) Cost:

Contact Person: Darlene Grimes Intake: Preadmit Eval \$75

Languages spoken: English Assessment: \$275 Time: 24/7 Individual: \$100

Levels of Care:1.0 (OP), 2.1 (IOP), 3.7 (inpatient), IWM Group: \$75; A/D Screening \$50 (\$9 for rapid)

Insurance Accepted: Medicaid, SAPTI, Comm Insurance, NJSI, Self

Pay, Sliding Scale Fee

NEW HOPE IBHC (MARLBORO) *

80 Conover Road Mailing Address
PO BOX 66

(732)-946-3030 Marlboro NJ 07746

(732) 946-4891 (Fax) Cost:
Contact Person: Intake Intake:

Languages spoken: English Assessment: \$150
Time: 24/7/365 Individual: \$45-\$90

Levels of Care:Adult Sub-Acute residential Detox-Standard, Adult

Group:

Short

Insurance Accepted: Self-Pay, Private Insurance, Medicaid, DMHAS

FFS Network

Matawan

STRESS CARE OF NEW JERSEY (Matawan) *

4122 Route 516 Mailing Address

4122 Route 516 Matawan NJ 07747 \$45-90; A/D screening \$35-70

(732)-679-4500 Matawan N (732) 679-4549 (Fax) Cost:

Contact Person: Press "O" Reception Intal

Languages spoken: EnglishAssessment:\$100Time: Mon-Fri 9am-9pmIndividual:\$85

Levels of Care:1 (OP), 2.1 (IOP), 2.5 (PC) Group: \$50 (OP); \$200 (IOP)

Insurance Accepted: All Commercial Insurance, Medicaid,

Medicare, FFS Initiatives.

YMCA OF GREATER MONMOUTH COUNTY *

166 Main Street Mailing Address

166 Main Street Matawan NJ 07747

(732)-290-9040 Matawan NJ 077 (732) 566-0433 (Fax) Cost:

Contact Person: Donna Francese Intake:

Languages spoken: English Assessment: \$150

Time: Mon-Thurs 9am-9pm; Fri 9am-5pm Individual: \$75 (sliding scale available)
Levels of Care:1 (OP), 2.1 (IOP) Group: \$45; A/D Screening \$10

Insurance Accepted: Cash, CC, Check, Aetna, Horizon BCBS,
Qualcare, United Health Care, Oxford, Meritan,

Medicaid, DMHAS FFS, Sliding scale

Nentu

Neptune

HMH HOSPITALS CORP - JERSEY SHORE UNIVERSITY MEDICAL CENTER

1200 Jumping Brook Road Mailing Address

1200 Jumping Brook Road

(732)-643-4400 Neptune NJ 07754

(732) 643-4378 (Fax) Cost:
Contact Person: Call Center Intake:

Languages spoken: English Assessment: \$718

Time: Mon-Thurs 8am-9pm; Fri 8am-5pm Individual: \$490; No charge if part of IOP Levels of Care:1 (OP), 2.1 (IOP) Group: \$375; A/D Screening \$6

Insurance Accepted: Commercial Insurances, Medicaid, Medicare,

Charity Care, Self-Pay, HMH Compassionate

Care

GATEWAY DAY TREATMENT PROGRAM

(732)-922-0591

1 Centre Street Mailing Address

P.O. Box 2136 Ocean NJ 07712

Cost:

(732) 922-0593 (Fax)

Contact Person: \$157.94 Languages spoken: English Assessment: \$67.75 Time: 8am - 4:30pm Individual: \$49/hr

Levels of Care:2.1 (IOP), 2.5 (PC) Group: \$18.82/hr; A/D Screen \$25

Insurance Accepted: NJ Family Care (Medicaid), Network HMOs,

NJ SAI/Work First NJ, Self Pay, Sliding Scale

Fee

Oceanport

UNITY PLACE OF MONMOUTH COUNTY *

1075 Stephenson Ave, Suite C Mailing Address

1075 Stephenson Ave, Suite C

(848)-208-2636 Oceanport NJ 07757

(848) 208-2051 (Fax) Cost: Contact Person: Intake:

Languages spoken: English Assessment: \$150 Time: Mon-Fri 8am-4:30pm Individual: \$90-144

Levels of Care:1 (OP), 2.1 (IOP), 2.5 (PC) Group: \$54-109; A/D Screen \$30

Insurance Accepted: Medicaid, Self Pay, Commercial Insurance,

Fee for Service

Red Bank

CPC BEHAVIORAL HEALTHCARE (RED BANK) '

Mailing Address 270 Highway 35

Helen Herrmann Counseling Center Helen Herrmann Counseling Center 270 Highway 35

(800)-250-9811 Red Bank NJ 07701

(732) 219-0814 (Fax) Cost:

\$175 Contact Person: Access Center Intake: \$175 Languages spoken: English Assessment: Time: Mon-Thurs 7:30am-9pm, Fri 8am-5pm Individual: \$125

Levels of Care:1 (OP), 2.1 (IOP), Medication Monitoring, Level 1 Group: \$50; A/D Screening \$10-\$30

Ambula

Insurance Accepted: Most insurances, Medicaid, Medicare, Fee for

Service, Sliding Scale Fee

DAVID MEYERS COUNSELING SERVICES(IDRC-RED BANK)

84 Maple Avenue Mailing Address

PO Box 774 (732)-735-5139 Oakhurst NJ 07755

Cost: (Fax)

TELEHEALTH Contact Person: Nancy Reng Intake:

Languages spoken: English Assessment: \$125 Time: By appt. Individual: \$75

\$40, A/D Screen \$75 Levels of Care:1 (OP) Group:

Insurance Accepted: Cash, Check, Venmo, Credit Care, Sliding

Scale Fee

Shrewsbury

HMH HOSPITALS CORP- RIVERVIEW MEDICAL CENTER *

Booker Behavioral Health Ctr Mailing Address

661 Shrewsbury Avenue Booker Behavioral Health Ctr 661 Shrewsbury Avenue

(732)-345-3400 Shrewsbury NJ 07702

(732) 345-3401 (Fax) Cost: Contact Person: Call Center Intake:

Languages spoken: English Assessment: \$718

Time: Mon-Thurs 8am-9pm; Fri 8 am-5pm Individual: \$490; No charge if part of IOP Levels of Care:1 (OP), 2.1 (IOP) Group: \$375; A/D Screening \$6

Insurance Accepted: Commercial Insurances, Medicaid, Medicare,

Charity Care, Self-Pay, HMH Compassionate

Care

SEABROOK SHREWSBURY

21 WHITE STREET

(856)-455-7575 (856) 391-6022 (Fax) Contact Person: Call Center Languages spoken: English

Time:

Levels of Care:Level 1 (OP), 2.1 (IOP), 2.5 (PHP)
Insurance Accepted: Cash, Credit Card, Insurance

Mailing Address 21 WHITE STREET SHREWSBURY NJ 07702

Cost: Intake:

Assessment: \$275 (with A/D Screen)

Individual: \$150

Group: OP \$150, IOP \$240, PHP \$440