

Agency Name: New York State Dept. of Health Anonymous HIV Counseling and Testing		
Address: 335 East Main St., Rochester, NY 14604		
Contact Person/Title: Delores Williams, Regional HIV Program Coordinator		
Phone No.: 585-423-8081	Hotline No.: 800-962-5063	Website: www.health.state.ny.us
TTY No.: 585-423-8120	Fax No.: 585-423-8118	Email Address:
HIV/AIDS Related Services: No testing at the above listed address. Call 1-800-962-5063 for information about testing locations. Anonymous and free of charge HIV testing. Will provide short-term counseling and referrals for individuals who may have tested positive through a physician, other agency or another geographic area. Both walk-in and appointment testing available. Interpreting services for deaf provided with enough advance notice. Special testing initiatives offered to agencies who serve populations at risk for HIV. Rapid HIV test now available.		
Target Populations Served: Any population at risk for HIV infection.		
Languages Spoken by Service Providers (including ASL): English and Spanish		
Regular Operating Hours: Mon. – Fri.: 8:30a – 4:30p	How Services are Accessed: <input checked="" type="checkbox"/> Walk In <input checked="" type="checkbox"/> Appointment <input type="checkbox"/> Referral	
Payment Sources Accepted: <input checked="" type="checkbox"/> No Charge <input type="checkbox"/> Private Pay <input type="checkbox"/> HMO <input type="checkbox"/> Insurance <input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> Sliding Fee <input type="checkbox"/> Other _____		
Counties Served: <input type="checkbox"/> Chemung <input checked="" type="checkbox"/> Monroe <input type="checkbox"/> Schuyler <input type="checkbox"/> Steuben <input type="checkbox"/> Yates <input type="checkbox"/> Livingston <input checked="" type="checkbox"/> Ontario <input type="checkbox"/> Seneca <input checked="" type="checkbox"/> Wayne <input type="checkbox"/> Orleans <input type="checkbox"/> Genesee <input checked="" type="checkbox"/> Other: Referrals offered for all counties		
Services Provided		
<u>Counseling & Testing</u> <input checked="" type="checkbox"/> HIV <input type="checkbox"/> STD <input type="checkbox"/> TB	<u>Legal</u> <input type="checkbox"/> Civil <input type="checkbox"/> Human Rights/ADA <input type="checkbox"/> Permanency Planning	<u>Mental Health</u> <input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Counseling <input type="checkbox"/> Bereavement Support
<u>Domestic Violence</u> <input type="checkbox"/> Hotline <input type="checkbox"/> Housing <input type="checkbox"/> Support Groups	<u>Long-Term Care</u> <input type="checkbox"/> Home Care <input type="checkbox"/> Respite <input type="checkbox"/> Hospice <input type="checkbox"/> Home for Dying	<u>Prevention Education</u> <input type="checkbox"/> Target Group(s): <input type="checkbox"/> Interventions Delivered to Groups (IDGs) <input type="checkbox"/> Interventions Delivered to Individuals (IDIs)
<u>HIV/AIDS Case Management</u> <input type="checkbox"/> COBRA <input type="checkbox"/> Community/Supportive <input type="checkbox"/> Medical	<u>Medical Care</u> <input type="checkbox"/> Medical <input type="checkbox"/> Dental <input type="checkbox"/> Clinical Trials	<u>Substance Treatment</u> <input type="checkbox"/> Inpatient <input type="checkbox"/> Outpatient <input type="checkbox"/> Detox <input type="checkbox"/> Support Groups _____
<u>Housing Services</u> <input type="checkbox"/> Housing Placement & Referral <input type="checkbox"/> Security Deposit <input type="checkbox"/> Emergency Rental Assistance <input type="checkbox"/> Long/Short Term Subsidy <input type="checkbox"/> Emergency Utility Assistance	<u>Supportive Services</u> <input type="checkbox"/> Peer Support Groups <input type="checkbox"/> Structured Socialization Activities <input type="checkbox"/> Consumer Education	<u>Other</u>