



**State of California**  
**Department of Health Care Services**  
**Certification**

*In accordance with applicable provisions of the Health and Safety Code of California and its rules, regulations, and standards, the Department of Health Care Services hereby certifies:*

**WCHS, INC.**

*to operate and maintain an alcohol and/or other drug program using the following name and location:*

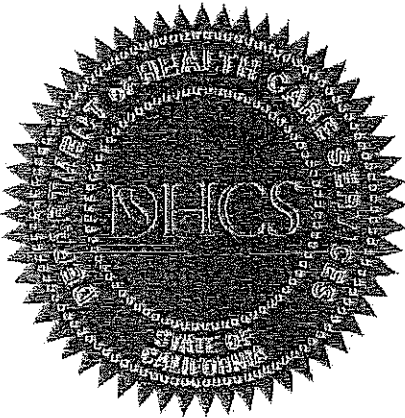
**RIVERSIDE COMPREHENSIVE TREATMENT CENTER**  
**1021 WEST LA CADENA**  
**RIVERSIDE, CALIFORNIA 92501**  
*(Name Change Effective February 1, 2024)*

*This certification extends to the following level of alcohol and/or other drug program services:*

**DETOXIFICATION AND OUTPATIENT SERVICES**

**Certification Number: 330081DP**

**Effective Date: 12/01/2024**  
**Expiration Date: 11/30/2026**



**JANELLE ITO-ORILLE, Division Chief**

Complaints regarding services provided in this facility should be directed to:  
 Licensing and Certification Division  
 Complaints Coordinator, Complaints Section, MS 2601  
 Post Office Box 997413, Sacramento, California 95899-7413  
 PHONE: (877) 685-8333 / (916) 322-2911 – FAX: (916) 440-5094 – E-mail: [SUDComplaints@dhcs.ca.gov](mailto:SUDComplaints@dhcs.ca.gov)

**Post in a prominent location. This Certification is not transferable.**