

Administrative Office of Courts & Probation

P.O. Box 98910
Lincoln, NE 68509
Phone: (402) 471-3730

District 1

Agency Facility County: Fillmore

Agency Name: FGH Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
FGH inc.	422 N 17th St Geneva, NEBRASKA 68361	Adult Co-Occurring Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Adult Mental Health Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Adult Mental Health Outpatient Counseling (Individual)	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Adult Substance Use Addendum	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Adult Substance Use Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Adult Substance Use Outpatient Treatment (Individual)	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Co-Occurring Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Mental Health Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Substance Use Addendum	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Substance Use Evaluation	Betka, Cindy	4028795959	cindy@redcouchcounseling.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Betka, Cindy	4028795959	cindy@redcouchcounseling.org

Agency Name: Fillmore County Hospital

Administrative Office of Courts & Probation

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Fillmore County Hospital	1900 F Street Geneva, NEBRASKA 68361	Adult Co-Occurring Evaluation	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Knight, Stephanie	4027593192	sknight@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Knight, Stephanie	4027593192	sknight@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Mental Health Outpatient Counseling (Group)	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Mental Health Outpatient Counseling (Individual)	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Knight, Stephanie	4027593192	sknight@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Substance Use Evaluation	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Knight, Stephanie	4027593192	sknight@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Substance Use Outpatient Treatment (Group)	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Adult Substance Use Outpatient Treatment (Individual)	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org

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Fillmore County Hospital	1900 F Street Geneva, NEBRASKA 68361	Juvenile Co-Occurring Evaluation	Schleif, Laurin	4027593192	lschleif@myfch.org
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			McGill, Kirsten	4057593192	kmcgill@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hoffman, Tabitha	4027593192	thoffman@myfch.org
			Knight, Stephanie	4027593192	sknight@myfch.org
			McGill, Kirsten	4057593192	kmcgill@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Substance Use Evaluation	McGill, Kirsten	4057593192	kmcgill@myfch.org
			Schleif, Laurin	4027593192	lschleif@myfch.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Schleif, Laurin	4027593192	lschleif@myfch.org

Agency Name: Heartland Boys Home

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland Boys Home	914 Rd P 914 Rd P Geneva, NEBRASKA 68361	Group Home A			

Agency Facility County: Gage

Agency Name: Blue Valley Behavioral Health, Inc

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Blue Valley Behavioral Health, Inc	1123 North 9th Street Beatrice, NEBRASKA 68310	Adult Co-Occurring Evaluation	VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Thomalla, Eric	4024434414	ethomalla@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Group)	White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net

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Blue Valley Behavioral Health, Inc	1123 North 9th Street Beatrice, NEBRASKA 68310	Expedited Substance Use Evaluation	VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: CASA of Gage County

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CASA of Gage County	205 N 4th Street Suite 2B Beatrice, NEBRASKA 68310	Thrive Mentoring	Lovitt, Amber	4028062546	director@casaofgagecounty.org

Agency Name: City of Beatrice

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
City of Beatrice	400 Ella St Beatrice, NEBRASKA 68310	Invoice - Law Enforcement Transportation			

Agency Name: Directions Counseling Center P.C.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Directions Counseling Center P.C.	500 Market St. Beatrice, NEBRASKA 68310	Adult Co-Occurring Evaluation	Antons, Justin	4022397844	justin.antons@icloud.com
		Adult Mental Health Evaluation	Antons, Justin	4022397844	justin.antons@icloud.com
		Adult Mental Health Outpatient Counseling (Individual)	Antons, Justin	4022397844	justin.antons@icloud.com
		Adult Substance Use Evaluation	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com

Agency Name: Silver Sun Mental Health DBA Nebraska Mental Health Centers

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	110 N. 9th St. Beatrice, NEBRASKA 68310	Adult Co-Occurring Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Gambling Outpatient Counseling (Individual/Group)			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Adult Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Adult Mental Health Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Groeteke, Olivia	4024836990	oliviag@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Sex Offense-Specific Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke,	4024836990	lzphd1@gmail.com

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	110 N. 9th St. Beatrice, NEBRASKA 68310	Adult Sex Offense-Specific Evaluation	Leland		
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Addendum	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Co-Occurring Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com

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	110 N. 9th St. Beatrice, NEBRASKA 68310	Juvenile Co-Occurring Evaluation	Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Mental Health Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Groeteke, Olivia	4024836990	oliviag@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Psychiatric Evaluation	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Substance Use Addendum	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Substance Use Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com

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	110 N. 9th St. Beatrice, NEBRASKA 68310	Juvenile Substance Use Evaluation	Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Groeteke, Olivia	4024836990	oliviag@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juveniles Who Sexually Harm Risk Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		PRS-BIP			

Agency Name: The Resolution Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Resolution Center	120 S. 5th St. Beatrice, NEBRASKA 68310	Expedited Family Group Conference			
		Mediation			

Agency Facility County: Jefferson

Agency Name: Blue Valley Behavioral Health, Inc

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	521 E St PO Box 120 Fairbury, NEBRASKA 68352	Adult Co-Occurring Evaluation	VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	521 E St PO Box 120 Fairbury, NEBRASKA 68352	Juvenile Substance Use Evaluation	Rebecca		
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Facility County: Nemaha

Agency Name: Blue Valley Behavioral Health, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	820 Central Ave, Suite 4 Auburn, NEBRASKA 68305	Adult Co-Occurring Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	820 Central Ave, Suite 4 Auburn, NEBRASKA 68305	Adult Substance Use Evaluation	White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net

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	820 Central Ave, Suite 4 Auburn, NEBRASKA 68305	Juvenile Substance Use Evaluation	Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: Sandra Pasco Armstrong MS, PLADC, PLMHP

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sandra Pasco Armstrong MS, PLADC, PLMHP	2313 P street Auburn, NEBRASKA 68305	Adult Co-Occurring Evaluation	Pasco-Armstrong, Sandra	4024140767	sandy@inspireempowerrestore.com
		Adult Mental Health Evaluation	Pasco-Armstrong, Sandra	4024140767	sandy@inspireempowerrestore.com
		Adult Substance Use Evaluation	Pasco-Armstrong, Sandra	4024140767	sandy@inspireempowerrestore.com

Agency Facility County: Otoe

Agency Name: Blue Valley Behavioral Health, Inc

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1903 4th Corso Nebraska City, NEBRASKA 68410	Adult Co-Occurring Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Group)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment	Attoungble, Ashley	4028740541	aattoungble@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1903 4th Corso Nebraska City, NEBRASKA 68410	(Individual)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use	Attoungble,	4028740541	aattoungble@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1903 4th Corso Nebraska City, NEBRASKA 68410	Outpatient Treatment (Individual/Family)	Ashley		
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Stanek, Sean	4028735505	sstanek@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: Community Empowerment

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Community Empowerment	903 A St Palmyra, NEBRASKA 68418	Adult Mental Health Outpatient Counseling (Individual)	Hale, Jamaal	4027300831	redman2516@yahoo.com
		Adult Substance Use Evaluation	Hale, Jamaal	4027300831	redman2516@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Hale, Jamaal	4027300831	redman2516@yahoo.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hale, Jamaal	4027300831	redman2516@yahoo.com
		Juvenile Substance Use Evaluation	Hale, Jamaal	4027300831	redman2516@yahoo.com

Agency Name: ESH Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
ESH	917 Wildwood Lane 108	Adult Substance	Black, Cynthia	4028743268	cblack0218@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling	Nebraska City, NEBRASKA 68410	Use Addendum			
		Adult Substance Use Evaluation	Black, Cynthia	4028743268	cblack0218@gmail.com

Agency Name: Emerson Mental Health & Substance Use Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Emerson Mental Health & Substance Use Counseling LLC	985 Midland St Syracuse, NEBRASKA 68446	Adult Co-Occurring Evaluation	Emerson, Ashley	4028640778	ashleyemerson2012@gmail.com
		Adult Mental Health Evaluation	Emerson, Ashley	4028640778	ashleyemerson2012@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Emerson, Ashley	4028640778	ashleyemerson2012@gmail.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Emerson, Ashley	4028640778	ashleyemerson2012@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Emerson, Ashley	4028640778	ashleyemerson2012@gmail.com
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			

Agency Name: Impact Behavioral Health, LCC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Impact Behavioral	PO Box 252 Palmyra,	Adult Sex Offense-Specific Evaluation	Moser, Olivia	4024305171	Impactbxhealth@gmail.com
			Simonsen,	4028795860	StacySimonsen14@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Health, LLC	NEBRASKA 68418	Adult Sex Offense-Specific Evaluation	Stacy		

Agency Name: Lewis Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lewis Counseling Services	3825 Ames ave Douglas, NEBRASKA 68111	Adult Co-Occurring Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Adult Mental Health Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Adult Mental Health Outpatient Counseling (Group)	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Adult Mental Health Outpatient Counseling (Individual)	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Adult Substance Use Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Day Reporting	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Family Support	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Juvenile Co-Occurring Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Juvenile Mental Health Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com
		Juvenile Substance Use Evaluation	Lewis, Monica	4023203566	Monicalewis@lewisounselingservices.com

Agency Name: Sandra Pasco Armstrong MS, PLADC, PLMHP

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sandra Pasco Armstrong MS, PLADC, PLMHP	917 Wildwood Office Number 108 Nebraska City, NEBRASKA 68410	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			

Agency Name: Saved to Serve Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Saved to Serve Counseling	11907 Arbor Street STE C Douglas, NEBRASKA 68144	Adult Co-Occurring Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Adult Mental Health Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Adult Mental Health Outpatient Counseling (Individual)	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Adult Substance Use Addendum	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Adult Substance Use Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Expedited Co-Occurring Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Expedited Mental Health Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Expedited Substance Use Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Juvenile Co-Occurring Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Saved to Serve Counseling	11907 Arbor Street STE C Douglas, NEBRASKA 68144	Juvenile Mental Health Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Juvenile Substance Use Addendum	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com
		Juvenile Substance Use Evaluation	Riley, LaTaunya	5312504099	saved2servecounseling@yahoo.com

Agency Name: Sybil Jackson PC Corp

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sybil Jackson PC Corp	8424 W Center Rd Douglas, NEBRASKA 68124	Adult Mental Health Outpatient Counseling (Individual)	Jackson, Sybil	4027799438	sybiljackson75@gmail.com
		Adult Substance Use Evaluation	Jackson, Sybil	4027799438	sybiljackson75@gmail.com
		Family Partner			
		Family Support	Brown, Michael	4027708109	mikeebrown.jr@gmail.com
			Jackson, Dion	4023597689	Akshonjackson75@gmail.com
			Jackson, Sybil	4027799438	sybiljackson75@gmail.com
		Intensive Family Preservation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Jackson, Sybil	4027799438	sybiljackson75@gmail.com
		Juvenile Substance Use Evaluation	Jackson, Sybil	4027799438	sybiljackson75@gmail.com

Agency Name: Syracuse Area Health

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Syracuse Area Health	2731 Healthcare Dr Syracuse, NEBRASKA 68446	Adult Co-Occurring Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Adult Mental Health Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Adult Mental Health Outpatient Counseling (Individual)	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Adult Substance Use Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Adult Substance Use Outpatient Treatment (Individual)	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Co-Occurring Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Mental Health Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Psychiatric Evaluation			
		Juvenile Substance Use Addendum	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Substance Use Evaluation	Maher, Nicole	4022692411	nmaher@syracuseareahealth.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Torrent Counseling LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Torrent Counseling LLC	995 12th St Syracuse, NEBRASKA 68446	Adult Co-Occurring Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Adult Mental Health Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Adult Substance Use Addendum	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Adult Substance Use Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Co-Occurring Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Mental Health Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Substance Use Addendum	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Substance Use Evaluation	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Burr, Chelsey	4027801210	chelsey@torrentcounseling.com

Agency Name: Wildflower Collective LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wildflower Collective LLC	5824 S 142nd St Douglas, NEBRASKA 68137	Adult Mental Health Outpatient Counseling (Individual)	Horton , Shawna	3174176447	shawnalhorton@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wildflower Collective LLC	5824 S 142nd St Douglas, NEBRASKA 68137	Adult Substance Use Outpatient Treatment (Individual)	Horton , Shawna	3174176447	shawnalhorton@gmail.com

Agency Facility County: Pawnee

Agency Name: Directions Counseling Center P.C.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pawnee County Court House	625 6th St. Pawnee City, NEBRASKA 68420	Adult Substance Use Intensive Outpatient Counseling (IOP)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com

Agency Facility County: Richardson

Agency Name: Blue Valley Behavioral Health, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	103 E 35th St, Suite A Falls City, NEBRASKA 68355	Adult Co-Occurring Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt,	4022454458	rvonderschmidt@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	103 E 35th St, Suite A Falls City, NEBRASKA 68355	Adult Substance Use Evaluation	Rebecca		
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	103 E 35th St, Suite A Falls City, NEBRASKA 68355	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Attoungble, Ashley	4028740541	aattoungble@bvbh.net
			Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: Directions Counseling Center P.C.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Richardson County Sheriffs Office	65086 706 Trail Falls City, NEBRASKA 68355	Adult Substance Use Intensive Outpatient Counseling (IOP)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Antons, Justin	4022397844	justin.antons@icloud.com
			Black, Cynthia	4028743268	cblack0218@gmail.com

Agency Facility County: Saline

Agency Name: Blue Valley Behavioral Health, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1212 Ivy Ave, Suite 2 PO Box 326 Crete, NEBRASKA 68333	Adult Co-Occurring Evaluation	VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
		Adult Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1212 Ivy Ave, Suite 2 PO Box 326 Crete, NEBRASKA 68333	Adult Substance Use Evaluation	Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Expedited Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1212 Ivy Ave, Suite 2 PO Box 326 Crete, NEBRASKA 68333	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: CITY OF CRETE POLICE DEPT

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CITY OF CRETE POLICE DEPT	243 E 13TH ST Crete, NEBRASKA 68333	Invoice - Law Enforcement Transportation			

Agency Name: Cazares Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cazares Counseling LLC	1244 Main Ave Crete, NEBRASKA 68333	Adult Co-Occurring Evaluation	Cazares, Marysol	4029370281	marysol@cazarescounseling.com
		Adult Matrix Evaluation			
		Adult Mental Health Evaluation	Cazares, Marysol	4029370281	marysol@cazarescounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Cazares, Marysol	4029370281	marysol@cazarescounseling.com
		Adult Substance Use Addendum	Cazares, Marysol	4029370281	marysol@cazarescounseling.com
		Adult Substance Use Evaluation	Cazares, Marysol	4029370281	marysol@cazarescounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Cazares, Marysol	4029370281	marysol@cazarescounseling.com