

# Administrative Office of Courts & Probation

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

## District 3A

**Agency Facility County: Lancaster**

**Agency Name: AMANDA AUSTIN-MAFILIKA COUNSELING. DBA: INTO BALANCE**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
AMANDA AUSTIN-MAFILIKA COUNSELING. DBA: INTO BALANCE	1620 S. 70th St Suite 105, Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Mafilika, Amanda	4028070777	amanda@intobalance.us
			Stephens, Johna	4078070777	johna@intobalance.us
		Adult Mental Health Outpatient Counseling (Group)	Mafilika, Amanda	4028070777	amanda@intobalance.us
			Stollar, Cheryl	5313335085	cheri@intobalance.us
		Adult Mental Health Outpatient Counseling (Individual)	Mafilika, Amanda	4028070777	amanda@intobalance.us
			Stephens, Johna	4078070777	johna@intobalance.us
			Stollar, Cheryl	5313335085	cheri@intobalance.us
		Adult Substance Use Addendum	Mafilika, Amanda	4028070777	amanda@intobalance.us
			Stephens, Johna	4078070777	johna@intobalance.us
		Adult Substance Use Evaluation	Mafilika, Amanda	4028070777	amanda@intobalance.us
			Stephens, Johna	4078070777	johna@intobalance.us
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Mafilika, Amanda	4028070777	amanda@intobalance.us
		Adult Substance Use Outpatient Treatment (Group)	Mafilika, Amanda	4028070777	amanda@intobalance.us
		Adult Substance Use Outpatient Treatment (Individual)	Mafilika, Amanda	4028070777	amanda@intobalance.us
Stephens, Johna	4078070777		johna@intobalance.us		

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1620 S. 70th St Suite 105 Lincoln, NEBRASKA 68506	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	Sheldon, Lana	4023141298	lana@intobalance.us
		Adult Substance Use Evaluation	Sheldon, Lana	4023141298	lana@intobalance.us
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	Sheldon, Lana	4023141298	lana@intobalance.us

### Agency Name: Alcohol And Drug Counseling Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alcohol And Drug Counseling Services LLC	5600 S. 38th. St. Lincoln NE 68516 Lincoln, NEBRASKA 68516	Adult Matrix Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Evaluation			

### Agency Name: Alcohol and Drug Solutions PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alcohol and Drug Solutions	2109 South 24th St Lincoln, NEBRASKA	Adult Co-Occurring Capable Short-Term	Dirks, Tamara	4024614960	tdirks@alcoholanddrugsolutions.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
PC	68502	Residential			
		Adult Substance Use Short-Term Residential	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Dirks, Tamara	4024614960	tdirks@alcoholanddrugsolutions.com
			Gilfillan, Dameon	4023015371	Dgilfillan@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
421 South 9th St Suite 130 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Steckelberg Scott, Jamie	4023140507	Jamie.Scott.SW@gmail.com	
		Adult Substance Use Addendum	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
		Adult Substance Use Evaluation	Steckelberg Scott, Jamie	4023140507	Jamie.Scott.SW@gmail.com
			Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
		Adult Substance Use Intensive Outpatient	Steckelberg Scott, Jamie	4023140507	Jamie.Scott.SW@gmail.com
			Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	421 South 9th St Suite 130 Lincoln, NEBRASKA 68508	Counseling (IOP)	Gilfillan, Dameon	4023015371	Dgilfillan@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
		Adult Substance Use Outpatient Treatment (Group)	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Dameon	4023015371	Dgilfillan@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
		Adult Substance Use Outpatient Treatment (Individual)	Gilfillan, Dameon	4023015371	Dgilfillan@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jpgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com

### Agency Name: Alivation Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alivation Health	8550 Cuthills Cir. Lincoln, NEBRASKA 68526	Adult Co-Occurring Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Adult Mental Health	Lile, Melissa	4024766060	mlile@alivation.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alivation Health	8550 Cuthills Cir. Lincoln, NEBRASKA 68526	Outpatient Counseling (Individual)	(Missy)		
		Adult Psychological Evaluation			
		Adult Substance Use Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Adult Substance Use Outpatient Treatment (Individual)	Lile, Melissa (Missy)	4024766060	mlile@alivation.com

### **Agency Name: Art of Advice, LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Art of Advice, LLC	237 S 70th Street Suite 217, Office 3 Lincoln, NEBRASKA 68510	Adult Gambling Outpatient Counseling (Individual/Group)	Crellin, Shannon	3252016817	screllin@artofadvicecellc.net
			Felton, Ronald	4029841839	ron.felton@yahoo.com
		Adult Substance Use Addendum	Crellin, Shannon	3252016817	screllin@artofadvicecellc.net
			Felton, Ronald	4029841839	ron.felton@yahoo.com
		Adult Substance Use Evaluation	Crellin, Shannon	3252016817	screllin@artofadvicecellc.net
			Felton, Ronald	4029841839	ron.felton@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Crellin, Shannon	3252016817	screllin@artofadvicecellc.net
			Felton, Ronald	4029841839	ron.felton@yahoo.com

### **Agency Name: Associates in Counseling & Treatment**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in	5600 P Street	Adult Co-Occurring	Cramer,	4022616667	angela.cramer@actnebraska.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling & Treatment	Lincoln, NEBRASKA 68505	Evaluation	Angela		
			Karas, Alice	4029757007	akaras1263@gmail.com
		Adult Gambling Intensive Outpatient Counseling (Individual/Group)	Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
		Adult Mental Health Evaluation	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
		Adult Substance Use Addendum	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Bugay, Danielle	4022616667	danielle.bugay@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Dresden, Dawn	4022616667	dawn.dresden@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org
Parolek, Troy	4022616667		Troy.parolek@actnebraska.org		
Wray, Brenda	4024163811		brendawray2000@yahoo.com		

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		Adult Substance Use Evaluation	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Bugay, Danielle	4022616667	danielle.bugay@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Dresden, Dawn	4022616667	dawn.dresden@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org
			Parolek, Troy	4022616667	Troy.parolek@actnebraska.org
			Wray, Brenda	4024163811	brendawray2000@yahoo.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Bugay, Danielle	4022616667	danielle.bugay@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Dresden, Dawn	4022616667	dawn.dresden@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org

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		Adult Substance Use Intensive Outpatient Counseling (IOP)	Parolek, Troy	4022616667	Troy.parolek@actnebraska.org
			Wray, Brenda	4024163811	brendawray2000@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Bugay, Danielle	4022616667	danielle.bugay@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Dresden, Dawn	4022616667	dawn.dresden@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org
			Parolek, Troy	4022616667	Troy.parolek@actnebraska.org
			Wray, Brenda	4024163811	brendawray2000@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Bugay, Danielle	4022616667	danielle.bugay@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Dresden, Dawn	4022616667	dawn.dresden@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com



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		Adult Substance Use Outpatient Treatment (Individual)	Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org
			Parolek, Troy	4022616667	Troy.parolek@actnebraska.org
			Wray, Brenda	4024163811	brendawray2000@yahoo.com
		PRS-BIP	Amato, Kathryn	4022616667	katie.amato@actnebraska.org
			Bartu, Allen	4022616667	allen.bartu@actnebraska.org
			Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
			Miller, Ashley	4022616667	ashley.miller@actnebraska.org
		Wray, Brenda	4024163811	brendawray2000@yahoo.com	

### Agency Name: Behavioral Health Resources, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Resources, LLC	7441 O Street, Suite 107 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Rohren, Brenda	4024861101	brenda@bhr-llc.com
		Adult Mental Health Evaluation	Rohren, Brenda	4024861101	brenda@bhr-llc.com
		Adult Mental Health Outpatient Counseling (Individual)	Rohren, Brenda	4024861101	brenda@bhr-llc.com
		Adult Substance Use Addendum	Rohren, Brenda	4024861101	brenda@bhr-llc.com
		Adult Substance Use	Rohren, Brenda	4024861101	brenda@bhr-

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Resources, LLC	7441 O Street, Suite 107 Lincoln, NEBRASKA 68510	Evaluation			llc.com
		Adult Substance Use Outpatient Treatment (Individual)	Rohren, Brenda	4024861101	brenda@bhr-llc.com

### Agency Name: Bloom Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bloom Counseling LLC	315 S 9th street Suite 122 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Mental Health Outpatient Counseling (Individual)	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Substance Use Addendum	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Substance Use Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Substance Use Outpatient Treatment (Individual)	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		PRS-BIP	Adams, Eli	8582768237	eli.adams2@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bloom Counseling LLC	315 S 9th street Suite 122 Lincoln, NEBRASKA 68508	PRS-BIP	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com

### Agency Name: Blue Valley Behavioral Health, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	3901 Normal Blvd, Suite 201 Lincoln, NEBRASKA 68506	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)		
		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
			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
	3901 Normal Blvd, Suite 201 Lincoln, NEBRASKA 68506	Adult Substance Use Outpatient Treatment (Individual)	White, Nichole	4022283386	nwhite@bvbh.net

### Agency Name: Brookhaven Therapy, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brookhaven Therapy, LLC	3201 S 33rd St Ste C Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Simnitt, Alyssa	4022256508	alyssa@brookhaventherapy.com
			Witt, John- Paul	4022256527	jpw@brookhaventherapy.com
		Adult Mental Health Evaluation	Simnitt, Alyssa	4022256508	alyssa@brookhaventherapy.com
			Witt, John- Paul	4022256527	jpw@brookhaventherapy.com
		Adult Mental Health Outpatient Counseling (Individual)	Simnitt, Alyssa	4022256508	alyssa@brookhaventherapy.com
			Witt, John- Paul	4022256527	jpw@brookhaventherapy.com

### Agency Name: Bryan Health Independence Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bryan Health Independence Center	1640 Lake Street Lincoln, NEBRASKA 68502	Adult Co-Occurring Capable Short-Term Residential	Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese- Griffin, Stephanie	4024815684	stephanie.mcleese- griffin@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Adult Substance Use	Bianco,	5312053084	steph.bianco810@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bryan Health Independence Center	1640 Lake Street Lincoln, NEBRASKA 68502	Addendum	Stephanie		
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Schumacher, Robin	4024815268	robin.schumacher@bryanhealth.org
		Adult Substance Use Evaluation	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Schumacher, Robin	4024815268	robin.schumacher@bryanhealth.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org

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Bryan Health Independence Center	1640 Lake Street Lincoln, NEBRASKA 68502	Adult Substance Use Intensive Outpatient Counseling (IOP)	Annette		
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Adult Substance Use Outpatient Treatment (Individual)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Adult Substance Use Short-Term Residential	Bianco, Stephanie	5312053084
		Holmquist, Larry		4024815494	jim.holmquist@bryanhealth.org
		Johnson, Jill		4024815392	jill.johnson@bryanhealth.org
		Larsen, Nicole		4024815268	nicole.larsen@bryanhealth.org
		Marvin, Annette		4025703555	annette.marvin@bryanhealth.org
		McLeese-Griffin, Stephanie		4024815684	stephanie.mcleese-griffin@bryanhealth.org
Popple, Lisa	4024815268	lisa.popple@bryanhealth.org			
Schumacher, Robin	4024815268	robin.schumacher@bryanhealth.org			

**Agency Name: CEDARS Youth Services**

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CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	In Home Family Service (IHFS)	Atem, Mary	4028905625	matem@cedarskids.org
			Halferty, Samantha	4022021824	shalferty@cedarskids.org
			Hillman, Olyvia	4028909268	ohillman@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Robben, Sarah	3195611212	Srobben@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org

### Agency Name: Center For Independent Living of Central Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	140 S 27TH ST SUITE B Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
		Adult Mental Health Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
		Adult Substance Use Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org

### Agency Name: CenterPointe, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adult Residential	2220 S 10th Lincoln, NEBRASKA 68502	Adult Co-Occurring Capable Short-Term Residential	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Co-Occurring Evaluation	Kester, Elizabeth	4023141160	lkester@centerpointe.org
			Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adult Residential	2220 S 10th Lincoln, NEBRASKA 68502	Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Short-Term Residential			
CenterPointe Outpatient	2202 S. 11th St. Lincoln, NEBRASKA 68503	Adult Co-Occurring Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Snyder, Jessica	4024755161	jsnyder@centerpointe.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Snyder, Jessica	4024755161	jsnyder@centerpointe.org
		Adult Mental Health Outpatient Counseling (Individual)	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Snyder, Jessica	4024755161	jsnyder@centerpointe.org
		Adult Substance Use Addendum	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Linderholm, Jacob	4023565089	jlinderholm@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CenterPointe Outpatient	2202 S. 11th St. Lincoln, NEBRASKA 68503	Adult Substance Use Addendum	Alyssa		
		Adult Substance Use Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Linderholm, Jacob	4023565089	jlinderholm@centerpointe.org
		Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org	
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Borchers, Amy	3033710925	aborchers@centerpointe.org

### Agency Name: Choice Change Consequence

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Choice Change Consequence	430 South 16 Lincoln NE 68508 Lincoln, NEBRASKA 68508	PRS-BIP	Thompson, Sandy	4024504409	sthompson@familiesinspiringfamilies.org

### Agency Name: Choices Treatment Center, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Choices Treatment Center, Inc.	127 S. 37th St., Suite B Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
			Wilson, Kayla	4023184968	kwilson.choices@outlook.com
		Adult Mental Health Evaluation	Wilson, Kayla	4023184968	kwilson.choices@outlook.com
		Adult Substance Use Addendum	Atherton, Brandy	4023666771	batherton.choices@outlook.com
			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
Choices Treatment Center, Inc.	127 S. 37th St., Suite B Lincoln, NEBRASKA 68510	Adult Substance Use Addendum	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
			Wilson, Kayla	4023184968	kwilson.choices@outlook.com
			Wragge, Mya	3083791005	mwrage21@gmail.com
		Adult Substance Use Evaluation	Atherton, Brandy	4023666771	batherton.choices@outlook.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
			Wilson, Kayla	4023184968	kwilson.choices@outlook.com
			Wragge, Mya	3083791005	mwrage21@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Wilson, Kayla	4023184968	kwilson.choices@outlook.com
			Wragge, Mya	3083791005	mwrage21@gmail.com

### Agency Name: Committing to Change Counseling and Recovery

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Committing to Change Counseling and Recovery	1701 Windhoek Dr Suite 140 Lincoln, NEBRASKA 68512	Adult Co-Occurring Evaluation	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Mental Health Evaluation	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Substance Use Addendum	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Substance	McNichols,	4022358568	stephanie.j.mcnichols@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Committing to Change Counseling and Recovery	1701 Windhoek Dr Suite 140 Lincoln, NEBRASKA 68512	Use Evaluation	Stephanie		
		Adult Substance Use Outpatient Treatment (Individual)	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com

### **Agency Name: Complete Family Treatment Services**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Family Treatment Services LNK	4600 Valley Road Suite 425 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Mental Health Outpatient Counseling (Individual)	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Substance Use Addendum	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Substance Use Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com

### **Agency Name: Connecting Links**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Connecting Links	740 South 17th Street Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			McClure, Sean	4028750755	smcclur19@gmail.com
		Adult Mental Health Evaluation	Arsiaga , Tina	4023103816	tarsiaga@icloud.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Connecting Links	740 South 17th Street Lincoln, NEBRASKA 68508	Adult Mental Health Outpatient Counseling (Group)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
		Adult Mental Health Outpatient Counseling (Individual)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
		Adult Substance Use Addendum	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Adult Substance Use Evaluation	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Adult Substance Use Outpatient Treatment (Group)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Adult Substance Use Outpatient Treatment (Individual)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Transitional Living - Level 2	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckie.davison@nebraska.gov

**Agency Name: Counseling Affiliates of Nebraska**

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling Affiliates of Nebraska	1550 S. 70th St. STE 101 Lincoln, NEBRASKA 68506	Adult Psychological Evaluation			
		Adult Sex Offense-Specific Evaluation	Foster, Kathy	4023262027	NepalMt@aol.com
			Giles, Nicholas	4024880077	nicgiles1@msn.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Foster, Kathy	4023262027	NepalMt@aol.com
			Giles, Nicholas	4024880077	nicgiles1@msn.com
Adult Substance Use Evaluation					

### **Agency Name: Debra Knight, LADC, LMHP**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Debra Knight, LADC, LMHP	4600 Valley Rd, Ste 319 Lincoln, NEBRASKA 68510	Adult Mental Health Outpatient Counseling (Individual)	Knight, Debra	4025408650	davidsondebrk@gmail.com
		Adult Substance Use Addendum	Knight, Debra	4025408650	davidsondebrk@gmail.com
		Adult Substance Use Evaluation	Knight, Debra	4025408650	davidsondebrk@gmail.com

### **Agency Name: Donna Connely DBA Empowerment Psychotherapy**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Donna Connely DBA Empowerment Psychotherapy	4830 Wilshire Blvd. Lincoln, NEBRASKA 68504	Adult Mental Health Outpatient Counseling (Individual)			

### **Agency Name: Dwight Brown Counseling**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dwight Brown	2233 Grainger Pkwy	Adult Mental Health Outpatient			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling	Lincoln, NEBRASKA 68512	Counseling (Individual)			

### Agency Name: Engrained Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Engrained Counseling LLC	9100 Andermatt Dr ste 1 Lincoln, NEBRASKA 68526	Adult Co-Occurring Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Mental Health Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Sex Offense-Specific Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Addendum	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Schottel, Ronicka	7855410370	ronicka@gmail.com

### Agency Name: Erica JW Sullivan LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Erica JW Sullivan LLC	8101 O Street Ste 211 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Sullivan, Erica	4028822226	erica@covemh.com
		Adult Mental Health Evaluation	Sullivan, Erica	4028822226	erica@covemh.com
		Adult Mental Health Outpatient Counseling (Individual)	Sullivan, Erica	4028822226	erica@covemh.com
		Adult Substance Use Addendum	Sullivan, Erica	4028822226	erica@covemh.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Erica JW Sullivan LLC	8101 O Street Ste 211 Lincoln, NEBRASKA 68510	Adult Substance Use Evaluation	Sullivan, Erica	4028822226	erica@covemh.com
		Adult Substance Use Outpatient Treatment (Individual)	Sullivan, Erica	4028822226	erica@covemh.com

### Agency Name: Forward Thinking LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Forward Thinking LLC	1013 A St Lincoln, NEBRASKA 68502	Transitional Living - Level 2	Woods, Kristin	4025605892	forwardthinking1013@gmail.com

### Agency Name: Fresh Start Home

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Fresh Start Home	6433 Havelock Ave Lincoln, NEBRASKA 68507	Transitional Living - Level 2			

### Agency Name: Harmony Health Center LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
College View Harmony Health Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Adult Mental Health Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
Adult Mental Health	Allen,	4024139147	siobhan@cvharmonyhealth.org		

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
College View Harmony Health Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	Outpatient Counseling (Individual)	Siobhan		
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Adult Substance Use Addendum	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org
		Adult Substance Use Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
		Adult Substance Use Outpatient Treatment (Group)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org
		Adult Substance Use Outpatient Treatment (Individual)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org

**Agency Name: Houses of Hope of Nebraska**



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Outpatient Services	1001 S. 70th Street Suite 105 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Matrix Evaluation	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Matrix Substance Use Intensive Outpatient Treatment (IOP)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Substance Use Addendum	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Substance Use Evaluation	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Outpatient Services	1001 S. 70th Street Suite 105 Lincoln, NEBRASKA 68510	Adult Substance Use Intensive Outpatient Counseling (IOP)	Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Substance Use Outpatient Treatment (Group)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
		Adult Substance Use Outpatient Treatment (Individual)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Santillan, Veronica	4024744343	veronica.santillan7@icloud.com
Residential Treatment	2633 P Street Lincoln, NEBRASKA 68503	Adult Co-Occurring Capable Short-Term Residential			
Transitional Living	1124 North Cotner Blvd. Lincoln, NEBRASKA 68505	Adult Substance Use Halfway House	Chauza, Marv	4024995909	mchauza@housesofhope.com
			Doehling, Raechel	4024353165	rdoehling@housesofhope.com
			Garcia, Orlando	4024353165	ogarcia@housesofhope.com
			Swan, David	4024353165	dswan@housesofhope.com

### Agency Name: Imagine by Northpoint

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northpoint Lincoln	3801 Union Drive Lincoln, NEBRASKA 68516	Adult Substance Use Intensive Outpatient Counseling (IOP)	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com

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### Agency Name: Inner Clarity Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inner Clarity Counseling	610 J Street Suite 320 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com
		Adult Mental Health Evaluation	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com
		Adult Substance Use Addendum	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com
		Adult Substance Use Evaluation	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com

### Agency Name: Insight Recovery Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Insight Recovery Center	770 North Cotner Suite 309 Lincoln, NEBRASKA 68505	Adult Substance Use Addendum	Huske, Tim	4027184645	thuske@yahoo.com
		Adult Substance Use Evaluation	Huske, Tim	4027184645	thuske@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Insight Recovery Center	770 North Cotner Suite 309 Lincoln, NEBRASKA 68505	Adult Substance Use Intensive Outpatient Counseling (IOP)	Huske, Tim	4027184645	thuske@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	Huske, Tim	4027184645	thuske@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Huske, Tim	4027184645	thuske@yahoo.com

### Agency Name: Jenda Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Adult Mental Health Evaluation	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Adult Mental Health Outpatient	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Counseling (Individual)	Lindsay		
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Adult Substance Use Addendum	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Adult Substance Use Evaluation	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Adult Substance Use Outpatient Treatment (Individual)	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Adult Substance Use Outpatient Treatment (Individual)	Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com

### Agency Name: Jennifer Somers LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jennifer Somers LLC	4535 Normal Blvd Ste 212 Lincoln, NEBRASKA 68506	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: KVC Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Adult Mental Health Outpatient Counseling (Individual)	Christian, Gloria	7852598007	gkchristian@kvc.org
		Adult Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
		Adult Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Adult Substance Use			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Outpatient Treatment (Individual)			

### Agency Name: Kieso Polygraph Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kieso Polygraph Services - US Bank Building	233 South 13th Street Suite 1100 Lincoln, NEBRASKA 68508	Adult Sex Offense-Specific Polygraph Examination	Kieso, Christian	6052548365	kiesopolygraph@gmail.com

### Agency Name: Lancaster County Community Corrections

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lancaster County Community Corrections	605 S 10TH ST Suite B-131 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
		Adult Matrix Substance Use Intensive Outpatient Treatment (IOP)	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
			Street, Tiffanie	4028069105	TStreet@lancaster.ne.gov
		Adult Mental Health Outpatient Counseling (Individual)	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
		Adult Substance Use Addendum	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
			Street, Tiffanie	4028069105	TStreet@lancaster.ne.gov

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lancaster County Community Corrections	605 S 10TH ST Suite B-131 Lincoln, NEBRASKA 68508	Adult Substance Use Evaluation	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
			Street, Tiffanie	4028069105	TStreet@lancaster.ne.gov
		Adult Substance Use Outpatient Treatment (Individual)	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Street, Tiffanie	4028069105	TStreet@lancaster.ne.gov

### Agency Name: Lincoln Regional Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lincoln Regional Center	801 West Prospector Place Lincoln, NEBRASKA 68522	Adult Mental Health Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov
		Adult Psychological Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov

### Agency Name: Liz Sizer Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Liz Sizer Counseling, LLC	4535 Normal Blvd Ste 265 Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Sizer, Liz	4023813813	lsizer@lizersizercounseling.com
		Adult Matrix Evaluation	Sizer, Liz	4023813813	lsizer@lizersizercounseling.com
		Adult Mental Health Evaluation	Sizer, Liz	4023813813	lsizer@lizersizercounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Sizer, Liz	4023813813	lsizer@lizersizercounseling.com
		Adult Substance Use	Sizer, Liz	4023813813	lsizer@lizersizercounseling.com



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Liz Sizer Counseling, LLC	4535 Normal Blvd Ste 265 Lincoln, NEBRASKA 68506	Addendum			
		Adult Substance Use Evaluation	Sizer, Liz	4023813813	lsizer@lizerscounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Sizer, Liz	4023813813	lsizer@lizerscounseling.com

### Agency Name: Lumos Mental Health Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lumos Mental Health Services	5715 South 34th Street Suite 500 Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation	Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com
		Adult Mental Health Evaluation	Dorant, Ami	4022055677	Ami@LumosMHS.com
			Hollister, Michelina	4022055677	miki@lumosmhs.com
			Kovar, Kaitlyn	4028040203	kaitlyn@lumosmhs.com
			Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com
			Adult Mental Health Outpatient Counseling (Individual)	Dorant, Ami	4022055677
		Hollister, Michelina		4022055677	miki@lumosmhs.com
		Kovar, Kaitlyn		4028040203	kaitlyn@lumosmhs.com
		Schlichenmaier, Kayla		4022055677	kayla@lumosmhs.com
		Adult Substance Use Evaluation	Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lumos Mental Health Services	5715 South 34th Street Suite 500 Lincoln, NEBRASKA 68516	Adult Substance Use Evaluation	Joellyn		
		Adult Substance Use Outpatient Treatment (Individual)	Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com

### Agency Name: Lutheran Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2301 O Street, Ste 1 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Bodtke, Debra	5313015072	debra.bodtke@onelfs.org
			McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
		Adult Mental Health Outpatient Counseling (Individual)	Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Addendum	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2301 O Street, Ste 1 Lincoln, NEBRASKA 68510	Adult Substance Use Addendum	Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Evaluation	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Outpatient Treatment (Group)	Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Outpatient Treatment (Individual)	Bodtke, Debra	5313015072	debra.bodtke@onelfs.org
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
			Wismer, Julie	4025609032	julie.wismer@onelfs.org

**Agency Name: Lynn Beideck Recovery/Behavioral Health Services**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lynn Beideck Recovery/Behavioral Health Services	3119 S. 33rd St Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Adult Mental Health Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Adult Substance Use	Beideck,	4025609558	lynnbeideck3@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lynn Beideck Recovery/Behavioral Health Services	3119 S. 33rd St Lincoln, NEBRASKA 68506	Evaluation	Lynn		
		Adult Substance Use Outpatient Treatment (Individual)	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com

### Agency Name: Matt Talbot Kitchen and Outreach

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Matt Talbot Kitchen and Outreach	2121 North 27th St Lincoln, NEBRASKA 68503	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

### Agency Name: Meadowlark Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Meadowlark Counseling, LLC	4344 N 62nd St Lincoln, NEBRASKA 68507	Adult Mental Health Outpatient Counseling (Individual)			

### Agency Name: Mental Health Association of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Honu Home	4141 South 56th Street Lincoln, NEBRASKA 68506	Transitional Living - Level 2			

### Agency Name: Mind Matters Health and Wellness

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Mind Matters Mental Health and Wellness	700 R St. Ste 301 Lincoln, NEBRASKA 68501	Adult Co-Occurring Evaluation	Jobman, Christopher	4023040748	chris@mindmatterslincoln.com
		Adult Mental Health Evaluation	Jobman, Christopher	4023040748	chris@mindmatterslincoln.com
		Adult Mental Health	Jobman,	4023040748	chris@mindmatterslincoln.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Mind Matters Mental Health and Wellness	700 R St. Ste 301 Lincoln, NEBRASKA 68501	Outpatient Counseling (Individual)	Christopher		
		Adult Substance Use Addendum	Jobman, Christopher	4023040748	chris@mindmatterslincoln.com
		Adult Substance Use Evaluation	Jobman, Christopher	4023040748	chris@mindmatterslincoln.com
		Adult Substance Use Outpatient Treatment (Individual)	Jobman, Christopher	4023040748	chris@mindmatterslincoln.com

### Agency Name: Mindful Growth and Recovery

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Mindful Growth and Recovery	770 North Cotner Blvd, Suite 208 Lincoln, NEBRASKA 68505	Adult Co-Occurring Evaluation	Lamp, Melinda	4023260361	melinda.lamp@doane.edu
		Adult Mental Health Evaluation	Lamp, Melinda	4023260361	melinda.lamp@doane.edu
		Adult Mental Health Outpatient Counseling (Individual)	Lamp, Melinda	4023260361	melinda.lamp@doane.edu
		Adult Substance Use Addendum	Lamp, Melinda	4023260361	melinda.lamp@doane.edu
		Adult Substance Use Evaluation	Lamp, Melinda	4023260361	melinda.lamp@doane.edu
		Adult Substance Use Outpatient Treatment (Individual)	Lamp, Melinda	4023260361	melinda.lamp@doane.edu

### Agency Name: N&R Resources, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
N&R Resources,	1550 S 70th St. Ste 100 Lincoln, NEBRASKA	PRS-BIP	Novoa, Roxana	5312072619	rnovoa_nrresources@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LLC	68506				

### Agency Name: New Beginnings Psychological Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Beginnings Psychological Services	140 N. 8th St. #430 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Mental Health Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Mental Health Outpatient Counseling (Individual)	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Psychological Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Sex Offense-Specific Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Substance Use Addendum	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Adult Substance Use Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com

### Agency Name: New Endings Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Endings Counseling, LLC	4535 Normal Blvd. Ste. 212 Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Endings Counseling, LLC	4535 Normal Blvd. Ste. 212 Lincoln, NEBRASKA 68506	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: New Hope Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Hope Counseling, LLC	7130 South 29th Street, Suite D7 Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Adult Mental Health Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Adult Mental Health Outpatient Counseling (Individual)	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Adult Substance Use Addendum	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Adult Substance Use Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Adult Substance Use Outpatient Treatment (Individual)	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com

### Agency Name: New Life Place

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Life Place	822 H Street Lincoln,	Transitional Living - Level 2	Brewster, Sharon	4025805628	sbrewster@alcoholanddrugsolutions.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Life Place	NEBRASKA 68502	Transitional Living - Level 2	Gilfillan, Dameon	4023015371	Dgilfillan@alcoholanddrugsolutions.com

### Agency Name: New Possibilities Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Possibilities Counseling, LLC	770 N. Cotner Blvd Suite 402 Lincoln, NEBRASKA 68505	Adult Co-Occurring Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Adult Mental Health Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Carville, Misty	4023107867	mistycarville313@gmail.com
		Adult Substance Use Addendum	Carville, Misty	4023107867	mistycarville313@gmail.com
		Adult Substance Use Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Carville, Misty	4023107867	mistycarville313@gmail.com

### Agency Name: New Way Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Way Counseling, LLC	1701 Windhoek Dr. Suite 200A Lincoln, NEBRASKA 68512	Adult Mental Health Outpatient Counseling (Individual)	Martin, Kelly	4022646716	newwaycounselingne@gmail.com

### Agency Name: Northside Behavioral Health Group

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northside Behavioral Health	2100 Fletcher Ave STE 103 Lincoln, NEBRASKA 68521	Adult Mental Health Evaluation			



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Group	2100 Fletcher Ave STE 103 Lincoln, NEBRASKA 68521	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: OMNI Inventive Care

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email	
	2300 South 13th Street Lincoln, NEBRASKA 68502	Adult Co-Occurring Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com	
		Adult Mental Health Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com	
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com	
		Adult Mental Health Outpatient Counseling (Individual)	Ladd, Allen	4028050897	allen.ladd@omniic.com	
			Sieck, Shannon	4023193429	shannon.sieck@omniic.com	
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com	
		Adult Psychological Evaluation				
		Adult Sex Offense- Specific Evaluation				
		Adult Substance Use Evaluation				
Adult Substance Use Outpatient Treatment (Individual)						

### Agency Name: Orenda Awakening LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Orenda Awakening LLC	3883 Normal Blvd STE 204 Lincoln, NEBRASKA 68506	Adult Mental Health Outpatient Counseling (Individual)	Perrien, Cody	4023185878	cody@sikhonatherapyne.com
		Adult Substance Use Outpatient Treatment (Individual)	Perrien, Cody	4023185878	cody@sikhonatherapyne.com

### Agency Name: PCM / Curtis Center Housing

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
PCM/ Curtis Center Housing	110 Q street Lincoln, NEBRASKA 68508	Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Transitional Living - Level 1			
		Transitional Living - Level 2			

### Agency Name: PMA Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
PMA Counseling	4535 Normal Boulevard, Suite 265 Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Wettstead, Brock	4023106947	brock@pmacounseling.com
		Adult Mental Health Evaluation	Wettstead, Brock	4023106947	brock@pmacounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Wettstead, Brock	4023106947	brock@pmacounseling.com
		Adult Substance Use Evaluation	Wettstead, Brock	4023106947	brock@pmacounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Wettstead, Brock	4023106947	brock@pmacounseling.com

### Agency Name: Pamela Echols

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pamela Echols	4234 N 7th st Lincoln, NEBRASKA 68521	Adult Co-Occurring Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)			

### **Agency Name: Pine Lake Behavioral Health & Medical**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pine Lake Behavioral Health & Medical	9100 Andermatt Drive Suite 1 Lincoln, NEBRASKA 68526	Adult Co-Occurring Evaluation	Ray, Jared	4024342730	Jared@pinelakebh.com
			Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Gambling Intensive Outpatient Counseling (Individual/Group)			
		Adult Gambling Outpatient Counseling (Individual/Group)			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling	Ray, Jared	4024342730	Jared@pinelakebh.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pine Lake Behavioral Health & Medical	9100 Andermatt Drive Suite 1 Lincoln, NEBRASKA 68526	(Individual)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Psychological Evaluation			
		Adult Sex Offense-Specific Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Addendum	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Evaluation	Ray, Jared	4024342730	Jared@pinelakebh.com
			Schottel, Ronicka	7855410370	ronicka@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Arnold, Tyler	4024384357	tyler@pinelakebh.com
			Ray, Jared	4024342730	Jared@pinelakebh.com
		Adult Substance Use Outpatient Treatment (Group)	Arnold, Tyler	4024384357	tyler@pinelakebh.com
			Ray, Jared	4024342730	Jared@pinelakebh.com
Adult Substance Use Outpatient Treatment (Individual)	Arnold, Tyler	4024384357	tyler@pinelakebh.com		
	Ray, Jared	4024342730	Jared@pinelakebh.com		

**Agency Name: Ponca Tribe of Nebraska**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Lincoln	1600 Windhoek Drive Lincoln, NEBRASKA 68512	Adult Co-Occurring Evaluation	Brown, Jennifer	5312483030	jbrown@poncatribene.gov
		Adult Mental Health Evaluation	Brown, Jennifer	5312483030	jbrown@poncatribene.gov
		Adult Mental Health Outpatient Counseling (Individual)	Brown, Jennifer	5312483030	jbrown@poncatribene.gov
		Adult Substance Use Addendum	Brown, Jennifer	5312483030	jbrown@poncatribene.gov

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Lincoln	1600 Windhoek Drive Lincoln, NEBRASKA 68512	Adult Substance Use Evaluation	Brown, Jennifer	5312483030	jbrown@poncatribene.gov
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	Brown, Jennifer	5312483030	jbrown@poncatribene.gov

### Agency Name: Pursuing Paradise Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pursuing Paradise Counseling, LLC	2100 Fletcher Avenue Suite 103 Lincoln, NEBRASKA 68521	Adult Co-Occurring Evaluation			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

### Agency Name: Raquel Moreno Izaguirre LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Raquel Moreno Izaguirre LLC	4535 Normal Blvd Suite 235 Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Adult Mental Health Evaluation	Moreno Izaguirre,	4023099978	rmorenoizaguirre@integratedroots.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Raquel Moreno Izaguirre LLC	4535 Normal Blvd Suite 235 Lincoln, NEBRASKA 68506		Raquel		
		Adult Mental Health Outpatient Counseling (Individual)	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Adult Substance Use Evaluation	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Adult Substance Use Outpatient Treatment (Individual)	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org

### Agency Name: Release Counseling & Assessment Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Release Counseling & Assessment Services, LLC	8101 O Street Suite 300 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

### Agency Name: Sapphire Counseling and Assessments, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sapphire Counseling and Assessments,	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation	Baldassano, Shelley	4024291716	counselorgirl@gmail.com
		Adult Mental			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LLC	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Baldassano, Shelley	4024291716	counselorgirl@gmail.com
		Adult Substance Use Addendum	Baldassano, Shelley	4024291716	counselorgirl@gmail.com
		Adult Substance Use Evaluation	Baldassano, Shelley	4024291716	counselorgirl@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: Sarah Smith Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sarah Smith Counseling, LLC	2411 W C St Lincoln, NEBRASKA 68522	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Smith, Sarah	4022840584	sarahsmith@sarahsmithcounselingne.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)	Apking , Hillari	4024132208	hillariapk_07@yahoo.com
			Bromwich, Dominique	4028606094	Mika@sarahsmithcounselingne.com
Smith,		4022840584	sarahsmith@sarahsmithcounselingne.com		

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sarah Smith Counseling, LLC	2411 W C St Lincoln, NEBRASKA 68522	Adult Substance Use Outpatient Treatment (Individual)	Sarah		
	700 R St. Suite 317 Lincoln, NEBRASKA 68501	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: **Second Chances Psychotherapy**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Second Chances Psychotherapy	140 N 8th St #430 Lincoln, NEBRASKA 68508	Adult Mental Health Outpatient Counseling (Group)			
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Cornish, Audrey	4024170783	audrey@remedypsych.com

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



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Adult Co-Occurring Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		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
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com
			Groeteke, Olivia	4024836990	oliviag@nebraskamental.health
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems,	4024836990	jmonfelt@nmhc-clinics.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Adult Mental Health Outpatient Counseling (Individual)	Jamie		
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Sex Offense-Specific Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@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
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka,	4024836990	annev@nebraskamental.health

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Adult Substance Use Addendum	Anne		
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Zlomke, Leland	4024836990	lzphd1@gmail.com
		PRS-BIP			

### Agency Name: St. Monica's Home

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
St. Monica's Home	120 Wedgewood Drive Lincoln, NEBRASKA 68510	Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
St. Monica's Home	120 Wedgewood Drive Lincoln, NEBRASKA 68510	Halfway House			
		Adult Substance Use Outpatient Treatment (Group)	Gardner, Donna	4024413756	donna.gardner@stmonicas.com
		Adult Substance Use Outpatient Treatment (Individual)	Gardner, Donna	4024413756	donna.gardner@stmonicas.com
		Adult Substance Use Short-Term Residential	Gardner, Donna	4024413756	donna.gardner@stmonicas.com
Rhoden, Heather	4022179063		heather.rhoden@stmonicas.com		
TC	120 Skyway Lincoln, NEBRASKA 68510	Adult Substance Use Short-Term Residential			
Women are Sacred	1100 Military Road Lincoln, NEBRASKA 68508	Adult Substance Use Short-Term Residential			

### Agency Name: Stacy Simonsen

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stacy Simonsen	P.O. Box 231 Denton, NEBRASKA 68339	Adult Co-Occurring Evaluation	Simonsen, Stacy	4028795860	StacySimonsen14@gmail.com
		Adult Mental Health Evaluation	Simonsen, Stacy	4028795860	StacySimonsen14@gmail.com
		Adult Sex Offense-Specific Evaluation	Simonsen, Stacy	4028795860	StacySimonsen14@gmail.com

### Agency Name: Stepping Stones

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stepping Stones	4600 Valley Road Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
			McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stepping Stones	4600 Valley Road Lincoln, NEBRASKA 68510	Adult Mental Health Evaluation	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
			McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Mental Health Outpatient Counseling (Group)	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Substance Use Addendum	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
			McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Substance Use Evaluation	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
			McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
McNichols, Stephanie	4022358568		stephanie.j.mcnichols@gmail.com		

### Agency Name: Tauni WaddingtonLLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tauni WaddingtonLLC	2320 South 48th Street #100 Lincoln, NEBRASKA 68506	Adult Mental Health Outpatient Counseling (Individual)			

### Agency Name: The Bridge Behavioral Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Bridge Behavioral Health	721 K Street Lincoln, NEBRASKA 68508	Adult Co-Occurring Capable Short-Term Residential			
		Adult Co-Occurring Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Bridge Behavioral Health	721 K Street Lincoln, NEBRASKA 68508	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Adult Substance Use Short-Term Residential			

### **Agency Name: The Recovery Center**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Recovery Center	3200 O Street, Suite 5 Lincoln, NEBRASKA 68510	Adult Substance Use Addendum	Bonebright, Curtis	4027429616	curtis@therecoverycenter.xyz
		Adult Substance Use Evaluation	Bonebright, Curtis	4027429616	curtis@therecoverycenter.xyz
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bonebright, Curtis	4027429616	curtis@therecoverycenter.xyz
		Adult Substance Use Outpatient Treatment (Group)	Bonebright, Curtis	4027429616	curtis@therecoverycenter.xyz
		Adult Substance Use Outpatient Treatment (Individual)	Bonebright, Curtis	4027429616	curtis@therecoverycenter.xyz

### **Agency Name: True Balance Therapy & Wellness LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
True Balance Therapy & Wellness LLC	4701 Van Dorn St Ste A Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation			
		Adult Gambling Intensive Outpatient Counseling (Individual/Group)			
		Adult Gambling			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
True Balance Therapy & Wellness LLC	4701 Van Dorn St Ste A Lincoln, NEBRASKA 68506	Outpatient Counseling (Individual/Group)			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Matrix Evaluation			
		Adult Medication Management	Mbemngong, Edison	4024131686	edison@truebalancetherapy.org
		Adult Mental Health Evaluation	Mbemngong, Edison	4024131686	edison@truebalancetherapy.org
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Psychological Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Kasem, Avien	4028004215	Avien_kasem@hotmail.com
		Adult Substance Use Outpatient Treatment (Group)	Kasem, Avien	4028004215	Avien_kasem@hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Kasem, Avien	4028004215	Avien_kasem@hotmail.com

**Agency Name: Unity Inspired LLC**

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Unity Inspired LLC	2000 P St Lincoln, NEBRASKA 68503	Adult Substance Use Addendum	Jackson, Sarah	4029040573	Sarahjackson@unityinspired.org
		Adult Substance Use Evaluation	Jackson, Sarah	4029040573	Sarahjackson@unityinspired.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)	Jackson, Sarah	4029040573	Sarahjackson@unityinspired.org