Administrative Office of Courts & Probation

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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			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)			

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 Residential	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	Adult Substance Use Short-Term Residential	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Dirks, Tamara	4024614960	tdirks@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jgilfillan@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	jgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
			Steckelberg Scott, Jamie	4023140507	Jamie.Scott.SW@gmail.com
		Adult Substance Use Evaluation	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
			Steckelberg Scott, Jamie	4023140507	Jamie.Scott.SW@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@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	Adult Substance Use Outpatient Treatment (Group)	Bradley, Stanford	4023265181	sbradley@alcoholanddrugsolutions.com
			Gilfillan, Jody	4026014289	jgilfillan@alcoholanddrugsolutions.com
			Outson, Derek	4027707176	doutson@alcoholanddrugsolutions.com
		Adult Substance Use Outpatient Treatment (Individual)	Gilfillan, Jody	4026014289	jgilfillan@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 Outpatient Counseling (Individual)	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		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

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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@artofadvicellc.net
		Adult Substance Use Addendum	Crellin, Shannon	3252016817	screllin@artofadvicellc.net
		Adult Substance Use Evaluation	Crellin, Shannon	3252016817	screllin@artofadvicellc.net
		Adult Substance Use Outpatient Treatment (Individual)	Crellin, Shannon	3252016817	screllin@artofadvicellc.net

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 Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	Adult Co-Occurring Evaluation	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
		Adult Gambling Intensive Outpatient Counseling (Individual/Group)	Leikam, Megan	4022616667	megan.leikam@actnebraska.org
		Adult Gambling Outpatient Counseling (Individual/Group)	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,	4022616667	danielle.bugay@actnebraska.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	Adult Substance Use Addendum	Danielle		
			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 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

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	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
			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

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	Adult Substance Use Outpatient Treatment (Group)	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
			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,	4024163811	brendawray2000@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	PRS-BIP	Brenda		

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 Evaluation	Rohren, Brenda	4024861101	brenda@bhr-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	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Mental Health Evaluation	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Mental Health Outpatient Counseling (Individual)	Rine, Jennifer	5315003549	jenrine@counselingatbloom.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	Adult Substance Use Addendum	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Substance Use Evaluation	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Adult Substance Use Outpatient Treatment (Individual)	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		PRS-BIP	Adams, Eli	8582768237	eli.adams2@outlook.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,	4028262000	avanlaningham@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)	Amanda		
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			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	Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org

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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	Adult Co-Occurring Capable Short-Term Residential	McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Adult Substance Use Addendum	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Adult Substance Use Evaluation	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org

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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	Adult Substance Use Intensive Outpatient Counseling (IOP)	Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Adult Substance Use Outpatient Treatment (Individual)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Adult Substance Use Short-Term Residential	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Larsen, Nicole	4024815268	nicole.larsen@bryanhealth.org
			Marshall-French, Sharon	4014815268	sharon.marshall-french@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin,	4024815684	stephanie.mcleese-griffin@bryanhealth.org

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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	Adult Substance Use Short-Term Residential	Stephanie		

Agency Name: CEDARS Youth Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
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
			Robben, Sarah	3195611212	Srobben@cedarskids.org

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	4316 S. 48th St. Suite 1 Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

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

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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 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
AnchorPointe South	2633 P St Lincoln, NEBRASKA 68503	Adult Co-Occurring Capable Short-Term Residential	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Co-Occurring Evaluation	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Short-Term Residential			
Campus for Health & Wellbeing	2202 S. 11th St. Lincoln, NEBRASKA 68502	Adult Co-Occurring Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Snyder, Jessica	4024755161	jsnyder@centerpointe.org
			Strizek, Melissa	3083711025	mstrizek@centerpointe.org
		Adult Initial Diagnostic Interview (Medication			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Campus for Health & Wellbeing	2202 S. 11th St. Lincoln, NEBRASKA 68502	Prescriber Only)			
		Adult Mental Health Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Snyder, Jessica	4024755161	jsnyder@centerpointe.org
			Strizek, Melissa	3083711025	mstrizek@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
			Strizek, Melissa	3083711025	mstrizek@centerpointe.org
		Adult Substance Use Evaluation	Borchers, Amy	3033710925	aborchers@centerpointe.org
			Linderholm, Jacob	4023565089	jlinderholm@centerpointe.org
			Maxwell, Alyssa	4024437087	amaxwell@centerpointe.org
			Strizek, Melissa	3083711025	mstrizek@centerpointe.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Borchers, Amy	3033710925	aborchers@centerpointe.org

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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.	4435 O St, Suite 110 Lincoln, NEBRASKA 68510	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum	Atherton, Brandy	4023666771	batherton.choices@outlook.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
			Wragge, Mya	3083791005	mwragge21@gmail.com
		Adult Substance Use Evaluation	Atherton, Brandy	4023666771	batherton.choices@outlook.com
			Black, Cynthia	4028743268	cblack0218@gmail.com
			Wragge, Mya	3083791005	mwragge21@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Wragge, Mya	3083791005	mwragge21@gmail.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	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			
		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
			McClure,	4028750755	smcclur19@gmail.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 Evaluation	Sean		
		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
			Arsiaga, Toni	4024051639	tonircaga@gmail.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com
		Adult Substance Use Evaluation	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Arsiaga, Toni	4024051639	tonircaga@gmail.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Arsiaga, Toni	4024051639	tonircaga@gmail.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com
		Adult Substance Use Outpatient Treatment (Group)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Arsiaga, Toni	4024051639	tonircaga@gmail.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com
		Adult Substance Use Outpatient Treatment (Individual)	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Arsiaga, Toni	4024051639	tonircaga@gmail.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com
		Transitional Living - Level 2	Arsiaga , Tina	4023103816	tarsiaga@icloud.com
			Davison, Rebecca	4023355998	beckieandavry@icloud.com

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: Crane Therapy and Wellness LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Crane Therapy and Wellness LLC	8101 O st. Suite 211 Lincoln, NEBRASKA 68510	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

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

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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)	Connely, Donna	4026013422	donnael@live.com

Agency Name: Dwight Brown Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dwight Brown Counseling	2233 Grainger Pkwy Lincoln, NEBRASKA 68512	Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Ember & Bloom Therapy LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ember & Bloom Therapy LLC	6911 Van Dorn Street Ste 2 Lincoln, NEBRASKA 68506	Adult Mental Health Evaluation	Salmans, Kaelee	4027896178	admin@emberbloomtherapy.com
		Adult Mental Health Outpatient Counseling (Individual)	Salmans, Kaelee	4027896178	admin@emberbloomtherapy.com

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

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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 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
		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	15 Day TL Extension - Level 2	Woods, Kristin	4025605892	forwardthinking1013@gmail.com
		45 Day Transitional Living	Woods, Kristin	4025605892	forwardthinking1013@gmail.com

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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	- Level 2			
		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: Garden View Mental Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Garden View Mental Health	1867 SW 31st St Lincoln, NEBRASKA 68522	Adult Co-Occurring Evaluation	Ellis, Brian	4024409638	bellis@gvmentalhealth.com
		Adult Mental Health Evaluation	Ellis, Brian	4024409638	bellis@gvmentalhealth.com
		Adult Mental Health Outpatient Counseling (Individual)	Ellis, Brian	4024409638	bellis@gvmentalhealth.com
		Adult Substance Use Addendum	Ellis, Brian	4024409638	bellis@gvmentalhealth.com
		Adult Substance Use Evaluation	Ellis, Brian	4024409638	bellis@gvmentalhealth.com
		Adult Substance Use Outpatient Treatment (Individual)	Ellis, Brian	4024409638	bellis@gvmentalhealth.com

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,	4024139147	Brad@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	Adult Co-Occurring Evaluation	Bradly		
		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 Outpatient Counseling (Individual)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			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

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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	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

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
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
		Adult Matrix Evaluation	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
		Adult Matrix Substance Use Intensive Outpatient Treatment (IOP)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@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 Mental Health Evaluation	Etherton, Kim	4024744343	ketherton@housesofhope.com
		Adult Substance Use Addendum	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
		Adult Substance Use Evaluation	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
		Adult Substance Use Outpatient Treatment (Group)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@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 Outpatient Treatment (Individual)	Desrosiers, Jenifer	4024744343	jdesrosiers@housesofhope.com
			Etherton, Kim	4024744343	ketherton@housesofhope.com
			Loudy, Elizabeth	4026767217	eloudy@housesofhope.com
			Santillan, Veronica	4024744343	vsantillan@housesofhope.com
Residential Treatment	4740 A Street Lincoln, NEBRASKA 68510	Adult Co-Occurring Capable Short-Term Residential			
Transitional Living	1124 North Cotner Blvd. Lincoln, NEBRASKA 68505	Adult Substance Use Halfway House	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)	Batten, Amy	5312016890	abatten@northpointrecovery.com
			Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com

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	Adult Co-Occurring Evaluation	Barrow, Denise	5315003080	denisebarrow@iclaritycounseling.com
			Chrisman, Whitney	4026415909	whitneychrisman@iclaritycounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inner Clarity Counseling	68508	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: Institute For Resilience LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Institute For Resilience LLC	650 J Street Suite 100 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@institute4resilience.com
		Adult Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@institute4resilience.com
		Adult Mental Health Outpatient Counseling (Individual)	Kirkwood, Sarah	5315003759	sarahkirkwood@institute4resilience.com
		Adult Substance	Kirkwood,	5315003759	sarahkirkwood@institute4resilience.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Institute For Resilience LLC	650 J Street Suite 100 Lincoln, NEBRASKA 68508	Use Addendum	Sarah		
		Adult Substance Use Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@institute4resilience.com
		Adult Substance Use Outpatient Treatment (Individual)	Kirkwood, Sarah	5315003759	sarahkirkwood@institute4resilience.com

Agency Name: Integrated Roots Support Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Integrated Roots Support Services	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, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		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: Jenda Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient	4600 Valley Road Suite 350	Adult Co-Occurring	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Clinic	Lincoln, NEBRASKA 68510	Evaluation	Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
		Adult Mental Health Evaluation	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
		Adult Mental Health Outpatient Counseling (Individual)	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Ehlers, Nancy	4029371820	nancyehlers@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Stephens, Rachel	2105568996	rachelstephens@jendafamilyservices.com
		Adult Substance Use Addendum	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
		Adult Substance Use Evaluation	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
		Adult Substance Use Outpatient Treatment (Individual)	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@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)			

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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 Substance Use Addendum			
		Adult Substance Use Evaluation	Somers, Jennifer	4023706472	jennifer@jennifersomerscounseling.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: KP Perspectives

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KP Perspectives	7811 Pioneers Blvd Suite 104 Lincoln, NEBRASKA 68506	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			

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
			Grayson, Patrick	4029402766	Pgrayson@kvc.org
		Adult Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
		Adult Substance Use	Christian,	7852598007	gkchristian@kvc.org

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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	Evaluation	Gloria		
		Adult Substance Use Outpatient Treatment (Individual)			
		Reentry Agency Support			
		Reentry Clinical Services			
		Reentry Youth & Family Services - Foster Care			

Agency Name: Kayleigh N Wolf, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kayleigh N Wolf, LLC	8101 O Street, Suite 201 Lincoln, NEBRASKA 68510	Adult Mental Health Evaluation	Wolf, Kayleigh	4028530004	kayleigh@sycamoreandsage.net
		Adult Mental Health Outpatient Counseling (Individual)	Wolf, Kayleigh	4028530004	kayleigh@sycamoreandsage.net
		Adult Substance Use Outpatient Treatment (Individual)	Wolf, Kayleigh	4028530004	kayleigh@sycamoreandsage.net

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	605 S 10TH ST Suite B-131 Lincoln,	Adult Co-Occurring Evaluation	Becker, Michael	4024417616	mbecker@lancaster.ne.gov

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Community Corrections	NEBRASKA 68508	Adult Co-Occurring Evaluation	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
		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
		Adult Substance Use Evaluation	Becker, Michael	4024417616	mbecker@lancaster.ne.gov
			Larson, Kristin	4024413491	klarson@lancaster.ne.gov
		Adult Substance Use Outpatient Treatment (Individual)	Becker, Michael	4024417616	mbecker@lancaster.ne.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@lizsizercounseling.com
		Adult Matrix Evaluation	Sizer, Liz	4023813813	lsizer@lizsizercounseling.com
		Adult Mental Health Evaluation	Sizer, Liz	4023813813	lsizer@lizsizercounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Sizer, Liz	4023813813	lsizer@lizsizercounseling.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	Adult Substance Use Addendum	Sizer, Liz	4023813813	lsizer@lizsizercounseling.com
		Adult Substance Use Evaluation	Sizer, Liz	4023813813	lsizer@lizsizercounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Sizer, Liz	4023813813	lsizer@lizsizercounseling.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
			Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
		Adult Mental Health Outpatient Counseling (Individual)	Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Addendum	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Williams, Taylor	4023106878	taylorrwilliams@unomaha.edu
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Evaluation	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Williams,	4023106878	taylorrwilliams@unomaha.edu

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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 Evaluation	Taylor		
			Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Outpatient Treatment (Group)	Wismer, Julie	4025609032	julie.wismer@onelfs.org
		Adult Substance Use Outpatient Treatment (Individual)	Bodtke, Debra	5313015072	debra.bodtke@onelfs.org
			Wismer, Julie	4025609032	julie.wismer@onelfs.org

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: 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	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			
		Transitional Living - Level 2			

Agency Name: N&R Resources, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
N&R Resources, LLC	1550 S 70th St. Ste 100 Lincoln, NEBRASKA 68506	PRS-BIP	Novoa, Roxana	5312072619	rnovoa_nrresources@outlook.com

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 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	Carville,	4023107867	mistycarville313@gmail.com

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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	Outpatient Counseling (Individual)	Misty		
		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	650 J Street Suite 100 Lincoln, NEBRASKA 68508	Adult Co-Occurring Evaluation	Martin, Kelly	4022646716	newwaycounselingne@gmail.com
		Adult Mental Health Evaluation	Martin, Kelly	4022646716	newwaycounselingne@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Martin, Kelly	4022646716	newwaycounselingne@gmail.com
		Adult Substance Use Addendum	Martin, Kelly	4022646716	newwaycounselingne@gmail.com
		Adult Substance Use Evaluation	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 Group	2100 Fletcher Ave STE 103 Lincoln, NEBRASKA 68521	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
Northside Behavioral Health Group	2100 Fletcher Ave STE 103 Lincoln, NEBRASKA 68521	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

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

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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 Substance Use Outpatient Treatment (Individual)	Perrien, Cody	4023185878	cody@sikhonatherapyne.com

Agency Name: Owens & Associates, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	5800 Cornhusker Hwy, Suite 7-8 Lincoln, NEBRASKA 68506	Continuous Alcohol Monitoring (CAM)			

Agency Name: Owens Educational Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OWENS-LINCOLN	5800 Cornhusker Hwy, Suite 7 SUITE 7 Lincoln, NEBRASKA 68507	Continuous Alcohol Monitoring (CAM)			

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	15 Day TL Extension - Level 1			
		15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 1			
		45 Day Transitional Living - Level 2			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Transitional Living - Level 1			
		Transitional Living - Level 2			

Agency Name: PMA Counseling

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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

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: Paradigm, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	6911 Van Dorn St. Ste. 1 Lincoln, NEBRASKA 68506	Adult Co-Occurring Evaluation	Brundege, Lindsay	4029918093	lbrundege@paradigmdirection.com
			Mason, Amanda	4029378005	amason@paradigmdirection.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	6911 Van Dorn St. Ste. 1 Lincoln, NEBRASKA 68506	Adult Mental Health Evaluation	Brundege, Lindsay	4029918093	lbrundege@paradigmdirection.com
			Mason, Amanda	4029378005	amason@paradigmdirection.com
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation	Brundege, Lindsay	4029918093	lbrundege@paradigmdirection.com
			Mason, Amanda	4029378005	amason@paradigmdirection.com

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
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Ray, Jared	4024342730	Jared@pinelakebh.com
		Adult Psychological Evaluation			
		Adult Substance Use Addendum			

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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	Adult Substance Use Evaluation	Ray, Jared	4024342730	Jared@pinelakebh.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Ray, Jared	4024342730	Jared@pinelakebh.com
		Adult Substance Use Outpatient Treatment (Group)	Ray, Jared	4024342730	Jared@pinelakebh.com
		Adult Substance Use Outpatient Treatment (Individual)	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@poncatribe-ne.gov
			McDonald, Kathryn	4022880127	kmcdonald@poncatribe-ne.gov
		Adult Mental Health Evaluation	Brown, Jennifer	5312483030	jbrown@poncatribe-ne.gov
		Adult Mental Health Outpatient Counseling (Individual)	Brown, Jennifer	5312483030	jbrown@poncatribe-ne.gov
			McDonald, Kathryn	4022880127	kmcdonald@poncatribe-ne.gov
		Adult Substance Use Addendum	Brown, Jennifer	5312483030	jbrown@poncatribe-ne.gov
		Adult Substance Use Evaluation	Brown, Jennifer	5312483030	jbrown@poncatribe-ne.gov
			McDonald, Kathryn	4022880127	kmcdonald@poncatribe-ne.gov
		Adult Substance Use Outpatient Treatment (Group)			

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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 Outpatient Treatment (Individual)	Brown, Jennifer	5312483030	jbrown@poncatribe-ne.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, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Adult Mental Health Outpatient Counseling (Individual)	Moreno Izaguirre, Raquel	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	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	Hansen, Mandy	4023271680	mandy@lincolnwellnessgroup.com
		Adult Mental Health Evaluation	Hansen, Mandy	4023271680	mandy@lincolnwellnessgroup.com
		Adult Mental Health Outpatient Counseling (Individual)	Hansen, Mandy	4023271680	mandy@lincolnwellnessgroup.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Hansen, Mandy	4023271680	mandy@lincolnwellnessgroup.com

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, LLC	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Adult Co-Occurring Evaluation	Baldassano, Shelley	4024291716	counselorgirl@gmail.com
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient	Baldassano, Shelley	4024291716	counselorgirl@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sapphire Counseling and Assessments, LLC	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Counseling (Individual)			
		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: Silver Sun Mental Health DBA Nebraska Mental Health Centers

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. Suite 100 Lincoln, NEBRASKA 68526	Adult Co-Occurring Evaluation	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Cort□s Babilonia, Caroline	7875686300	carolinecb@nebraskamental.health
			Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jamiem@nebraskamental.health
			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

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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. Suite 100 Lincoln, NEBRASKA 68526	Adult Mental Health Evaluation	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Cort□s Babilonia, Caroline	7875686300	carolinecb@nebraskamental.health
			Dieckgrafe, Amanda	4024836990	amandad@nebraskamental.health
			Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Dieckgrafe, Amanda	4024836990	amandad@nebraskamental.health
			Groeteke, Olivia	4024836990	oliviag@nebraskamental.health
			Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jamiem@nebraskamental.health
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Psychological Evaluation	Clarke, Ashleigh	4024836990	drclarke@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. Suite 100 Lincoln, NEBRASKA 68526	Adult Psychological Evaluation	Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Sex Offense-Specific Evaluation	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jamiem@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Addendum	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jamiem@nebraskamental.health
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Evaluation	Clarke, Ashleigh	4024836990	drclarke@nebraskamental.health
			Magold, Josh	7089274052	drmagold@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. Suite 100 Lincoln, NEBRASKA 68526	Adult Substance Use Evaluation	Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			Monfelt-Siems, Jamie	4024836990	jamiem@nebraskamental.health
			Vrbka, Anne	4024836990	annev@nebraskamental.health
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Magold, Josh	7089274052	drmagold@nebraskamental.health
			Mathieu, Celia	5154012470	drmathieu@nebraskamental.health
			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 Halfway House			
		Adult Substance Use Outpatient Treatment	Gardner, Donna	4024413756	donna.gardner@stmonicas.com

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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	(Group)			
		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
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
		Adult Mental Health Evaluation	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Substance Use Addendum	Hinrichs, Robin	4024609099	rhinrichs@lmep.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 Substance Use Evaluation	Hinrichs, Robin	4024609099	rhinrichs@lmep.com
		Adult Substance Use Outpatient Treatment (Individual)	Hinrichs, Robin	4024609099	rhinrichs@lmep.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			
		Adult Substance Use Addendum	Keck, Amy	5317729749	Ajksm18@gmail.com
		Adult Substance Use Evaluation	Keck, Amy	5317729749	Ajksm18@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Keck, Amy	5317729749	Ajksm18@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Keck, Amy	5317729749	Ajksm18@gmail.com
		Adult Substance Use Short-Term Residential	Keck, Amy	5317729749	Ajksm18@gmail.com

Agency Name: The Mediation Center

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Mediation Center	610 J Street Suite 100 Lincoln, NEBRASKA 68508	Mediation - Juvenile			

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	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Gambling Intensive Outpatient Counseling (Individual/Group)			
		Adult Gambling Outpatient Counseling (Individual/Group)			

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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	Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Matrix Evaluation			
		Adult Medication Management			
		Adult Mental Health Evaluation	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Substance Use Evaluation	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com
		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	Kasem, Avien	4028004215	Avien_kasem@hotmail.com

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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	(Individual)	Orihuela, Lizette	4024131686	lizette@truebalancetherapy.org
			Smith, Cassandra	5312337493	smithcj821@gmail.com

Agency Name: Unity Inspired LLC

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