

Administrative Office of Courts & Probation

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

District 3J

Agency Facility County: Lancaster

Agency Name: A Blessing of Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
TREY MCGRUDER	7160 S 29th St, STE 10 Lincoln, NEBRASKA 68516	Day Reporting			
		Family Support	McGruder, Trey	8063467649	tmcgruder@ablessingofhope.org
		Intensive Family Preservation	McGruder, Trey	8063467649	tmcgruder@ablessingofhope.org

Agency Name: Adolescent Ally Therapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adolescent Ally Therapy	3350 Crestridge Rd. Lincoln, NEBRASKA 68506	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Boyd, Sarah	4023708010	sarah@adolescentally.com
			Rokeby-Mayeux, Jennifer	4024054815	Jennifer@meadowlarkcounselingne.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	Juvenile Co-Occurring Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Mental Health Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com

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Alivation Health	8550 Cuthills Cir. Lincoln, NEBRASKA 68526	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Lile, Melissa (Missy)	4024766060	mlile@alivation.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 Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	Juvenile Substance Use Addendum	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
		Juvenile Substance Use Evaluation	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org

Agency Name: Better Living Counseling Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Better Living Counseling Services, Inc.	7100 South 29th Street Suite A Lincoln, NEBRASKA 68516	Agency Supported Foster Care	Shaw, Taylor	4028218847	taylor.shaw@betterlivingne.com
			Todd, Jacquelyn	4027071792	jacque.todd@betterlivingne.com
		Intensive Family Preservation			
		Relative/ Kinship Home Study	Shaw, Taylor	4028218847	taylor.shaw@betterlivingne.com

Agency Name: Bloom Counseling LLC

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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	Expedited Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Expedited Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Expedited Substance Use Evaluation	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Addendum	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com

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Bloom Counseling LLC	315 S 9th street Suite 122 Lincoln, NEBRASKA 68508	Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Rine, Jennifer	5315003549	jenrine@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	Expedited Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham, Amanda	4028262000	avanlaningham@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			Vonderschmidt, Rebecca	4022454458	rvonderschmidt@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			VanLaningham,	4028262000	avanlaningham@bvbh.net

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	3901 Normal Blvd, Suite 201 Lincoln, NEBRASKA 68506	Juvenile Substance Use Outpatient Treatment (Individual/Family)	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	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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	Juvenile SUD Medical Detox			
		Juvenile Substance Use Addendum	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			McLeese- Griffin, Stephanie	4024815684	stephanie.mcleese- griffin@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Juvenile Substance Use Evaluation	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist,	4024815494	jim.holmquist@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	Juvenile Substance Use Evaluation	Larry		
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	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
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Sarafian, Michelle	4024815875	michelle.sarafian@bryanhealth.org
		Specialty Psychiatric	Johnson,	4024815392	jill.johnson@bryanhealth.org

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Bryan Health Independence Center	1640 Lake Street Lincoln, NEBRASKA 68502	Residential Treatment Facility (PRTF)	Jill		
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Griffin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Sarafian, Michelle	4024815875	michelle.sarafian@bryanhealth.org

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	Agency Supported Foster Care			
		Community Youth Coaching	Atem, Mary	4028905625	matem@cedarskids.org
			Fitzgerald, Jessalynn	5312470987	jfitzgerald@cedarskids.org
			Haas, Steffen	4026130957	shaas@cedarskids.org
			Halferty, Samantha	4022021824	shalferty@cedarskids.org
			Hillman, Olyvia	4028909268	ohillman@cedarskids.org
			Jones, Christopher	4022021248	cjones@cedarskids.org
			Koso, Virginia	4024378999	nbfrontdesk@cedarskids.org
			Little, Tamra	4028482095	tlittle@cedarskids.org

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CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	Community Youth Coaching	Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Robben, Sarah	3195611212	Srobben@cedarskids.org
			Thompson, Shayla	5315009976	sthompson@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Family Support	Atem, Mary	4028905625	matem@cedarskids.org
			Fitzgerald, Jessalynn	5312470987	jfitzgerald@cedarskids.org
			Haas, Steffen	4026130957	shaas@cedarskids.org
			Halferty, Samantha	4022021824	shalferty@cedarskids.org
			Hillman, Olyvia	4028909268	ohillman@cedarskids.org
			Koso, Virginia	4024378999	nbfrontdesk@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Co-Occurring Evaluation			
		Juvenile Electronic Monitoring Cell Phone			
		Juvenile Electronic Monitoring GPS	Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Robben, Sarah	3195611212	Srobben@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Electronic			

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CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	Monitoring Land Line			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Professional Foster Care			
		Relative/Kinship Home Study	Little, Tamra	4028482095	tlittle@cedarskids.org
CEDARS Youth Opportunity Center	1620 N Street Lincoln, NEBRASKA 68508	Independent Living			
CEDARS Youth Services	6601 Pioneers Blvd, Ste 1 Lincoln, NEBRASKA 68506	Crisis Stabilization	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Invoice - Mileage			
		Invoice - Professional Foster Care			
		Juvenile Co-Occurring Evaluation	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Juvenile Mental Health Evaluation	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Juvenile Substance Use Evaluation	Rickertsen, Allyson	4028909241	arickertsen@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	Juvenile Co-Occurring Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
		Juvenile Mental	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	Health Evaluation			
		Juvenile 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	Juvenile Medication Management			
CenterPointe Outpatient	2202 S. 11th St. Lincoln, NEBRASKA 68503	Family Support			
		Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling (Group)	Borchers, Amy	3033710925	aborchers@centerpointe.org
		Juvenile Substance Use Outpatient Treatment (Group)	Borchers, Amy	3033710925	aborchers@centerpointe.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	Juvenile Co-Occurring Evaluation	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
		Juvenile Substance Use			

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Choices Treatment Center, Inc.	127 S. 37th St., Suite B Lincoln, NEBRASKA 68510	Evaluation			

Agency Name: Christian Heritage

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Christian Heritage	14880 Old Cheney Road Walton, NEBRASKA 68461	Agency Supported Foster Care			

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	Juvenile Substance Use Outpatient Treatment (Individual/Family)	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	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation			

Agency Name: Diana Arpan

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Diana Arpan	3801 Castle Circle Lincoln, NEBRASKA 68524	Invoice - Foster Care			

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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	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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 Drive 1 Lincoln, NEBRASKA 68526	Juvenile Co-Occurring Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Mental Health Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Addendum	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Risk Evaluation			

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	4719 Prescott Avenue Lincoln, NEBRASKA 68506	General Education Class	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org

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Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	General Education Class	Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org
		Juvenile Co-Occurring Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Outpatient Counseling (Group)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Substance Use Addendum	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats,	4024054617	DEb@cvharmonyhealth.org

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	4719 Prescott Avenue Lincoln, NEBRASKA 68506	Juvenile Substance Use Addendum	Debra		
		Juvenile Substance Use Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org
		Juvenile Substance Use Outpatient Treatment (Group)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	DEb@cvharmonyhealth.org

Agency Name: HopeSpoke

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling (Group)	Barrett, Amanda	3198991514	abarrett@hopespoke.org
			Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Wellman, Carrie	4024757666	cwellman@hopespoke.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Barrett, Amanda	3198991514	abarrett@hopespoke.org
			Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org

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HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Neal, Ann	4024163928	aneal@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org
			Trofholz, Chad	4026069262	ctrofholz@gmail.com
			Waltman, Alicia	4024757666	awaltman@hopespoke.org
		Juvenile Psychiatric Evaluation			
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Barrett, Amanda	3198991514	abarrett@hopespoke.org
			Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Neal, Ann	4024163928	aneal@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Pickel, Katy	4023108375	kpickel@hopespoke.org

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HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juveniles Who Sexually Harm Risk Evaluation	Barrett, Amanda	3198991514	abarrett@hopespoke.org
			Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Neal, Ann	4024163928	aneal@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
HopeSpoke ThGH	904 Sumner Street Lincoln, NEBRASKA 68502	Juvenile Medication Management			
		Juvenile Psychological Evaluation			
		Juveniles Who Sexually Harm Intensive Outpatient Counseling (IOP)	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cpovar@hopespoke.org
		Juveniles Who Sexually Harm Therapeutic Group Home	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cpovar@hopespoke.org
		Juveniles Who Sexually Harm Therapeutic Group Home - Room & Board	Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke ThGH	904 Sumner Street Lincoln, NEBRASKA 68502	Juveniles Who Sexually Harm Therapeutic Group Home - Room & Board	Posvar, Christina	4024342670	cposvar@hopespoke.org

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	Juvenile Mental Health Day Treatment	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.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	Family Support	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Intensive Family Preservation	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Jenda Family Services

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Family Services	4701 Innovation Drive Lincoln, NEBRASKA 68521	Agency Supported Foster Care	Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
		Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation			
		Family Support	Brown, Coreena	4024740011	coreenabrown@jendafamilyservices.com
			Cabrera, Isabel	4024740011	isabelcabrera@jendafamilyservices.com
			Cardona, Jennifer	4024188984	jennifercardona@jendafamilyservices.com
			Clark, Courtney	4026691314	courtneyclark@jendafamilyservices.com
			Keck, Noah	4023818159	Noahkeck@jendafamilyservices.com
			Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			Munger, Chelsea	4028603110	chelseamunger@jendafamilyservices.com
			Rios, Brisa	3086726533	brisarios@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
			Svatos, Scott	4024740011	scottsvatos@jendafamilyservices.com
			Uglow, Kelli	4028024821	kelliuglow@jendafamilyservices.com
			Wheeler,	4028057033	harmonywheeler@jendafamilyservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Family Services	4701 Innovation Drive Lincoln, NEBRASKA 68521	Family Support	Harmony		
		Intensive Family Preservation	Cottle, Montana	4028381145	montanacottle@jendafamilyservices.com
			Ehlers, Nancy	4029371820	nancyehlers@jendafamilyservices.com
			Nieveen, Hazey	4022178503	Hazeynieveen@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Wheeler, Harmony	4028057033	harmonywheeler@jendafamilyservices.com
			Williams, Kristin	3164613669	kristinwilliams@jendafamilyservices.com
			Zach, Jessica	3083676872	jessicazach@jendafamilyservices.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Professional Foster Care	Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
		Relative/Kinship Home Study			
Jenda Independent Living	770 Cotner Blvd Suite 100 Lincoln, NEBRASKA 68505	Independent Living	Svatos, Scott	4024740011	scottsvatos@jendafamilyservices.com
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA	Expedited Co-Occurring Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann,	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
Jenda Outpatient Clinic	68510	Expedited Co-Occurring Evaluation	Maggie		
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Expedited Mental Health Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Expedited Substance Use Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		General Education Class	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Intensive Family			

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Jenda Outpatient Clinic		Preservation			
		Juvenile Co-Occurring Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundage, Lindsay	4024740011	lindsaybrundage@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundage, Lindsay	4024740011	lindsaybrundage@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Outpatient Counseling (Group)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com

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Jenda Outpatient Clinic		Juvenile Mental Health Outpatient Counseling (Group)	Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			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
		Juvenile Substance Use Addendum	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile	Barrow, Denise	4024740011	denisebarrow@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		Substance Use Evaluation	Denise		
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundage, Lindsay	4024740011	lindsaybrundage@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Outpatient Treatment (Group)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundage, Lindsay	4024740011	lindsaybrundage@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@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		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			

Agency Name: Julia Doss

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Julia Doss	5018 W Superior St Lincoln, NEBRASKA 68524	Invoice - Kinship Foster Care			

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	Agency Supported Foster Care	Ahmann , Lisa	4025705559	lahmann@kvc.org
			Crook, Becca	4027305203	rcrook@kvc.org
			Hall, Andrea	4023095459	anhall@kvc.org
			Heinzerling, Erica	5154193578	eheinzerling@kvc.org
			Klahn, Tanner	4028907269	tklahn@kvc.org
			Marino, Faith	5315309257	fmarino@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	jlschuler@kvc.org
			Thompson, Kaitlyn	5317396725	kathompson@kvc.org
		Expedited Co-Occurring Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Expedited Mental Health	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		
		Expedited Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Family Support	Christian, Gloria	7852598007	gkchristian@kvc.org
			Grayson, Patrick	4029402766	Pgrayson@kvc.org
			Jurgens, Riley	4026496219	rjurgens@kvc.org
			Roybal, Maggie	5313010835	mroybal@kvc.org
		Intensive Family Preservation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Jurgens, Riley	4026496219	rjurgens@kvc.org
			Roybal, Maggie	5313010835	mroybal@kvc.org
		Invoice - Emergency Professional Foster Care			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Outpatient Treatment (Group)	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
		Professional Foster Care	Ahmann , Lisa	4025705559	lahmann@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	Professional Foster Care	Crook, Becca	4027305203	rcrook@kvc.org
			Hall, Andrea	4023095459	anhall@kvc.org
			Heinzerling, Erica	5154193578	eheinzerling@kvc.org
			Klahn, Tanner	4028907269	tklahn@kvc.org
			Marino, Faith	5315309257	fmarino@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	jlschuler@kvc.org
			Thompson, Kaitlyn	5317396725	kathompson@kvc.org
		Relative/Kinship Home Study	Bequette, Jason	4027308892	jbequette@kvc.org
			Bonney-Heermann, Elizabeth	4025700688	ebonney@kvc.org
			Crook, Becca	4027305203	rcrook@kvc.org
			Hall, Andrea	4023095459	anhall@kvc.org
			Lindsay, Whitney	5315107258	wlindsay@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	jlschuler@kvc.org

Agency Name: Lancaster County Youth Services Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lancaster County Youth Services Center	1200 Radcliff Street Lincoln, NEBRASKA 68512	Invoice - Secure Detention			
		Invoice - Staff			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lancaster County Youth Services Center	1200 Radcliff Street Lincoln, NEBRASKA 68512	Detention			

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	Invoice - Competency Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov
		Juvenile Mental Health Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov
		Juvenile Psychological Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov

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	Juvenile Mental Health Evaluation	Hollister, Michelina	4022055677	miki@lumosmhs.com
			Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	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

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Agency Name: Lutheran Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lutheran Family Services of NE	5025 Garland Lincoln, NEBRASKA 68504	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
	1311 South Folsom Street Lincoln, NEBRASKA 68522	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation	Baumeister, Journie	3087300566	journiebaumeister@gmail.com
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Baumeister, Journie	3087300566	journiebaumeister@gmail.com
		Juvenile Substance Use Addendum	Baumeister, Journie	3087300566	journiebaumeister@gmail.com
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
		Juvenile Substance Use Evaluation	Baumeister, Journie	3087300566	journiebaumeister@gmail.com
			Thompson, Jessie	4023695406	jessie.thompson@onelfs.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
	2301 O Street, Ste 1 Lincoln, NEBRASKA 68510	Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling			

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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	(Group)			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Substance Use Outpatient Treatment (Group)			

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	Juvenile Co-Occurring Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Juvenile Mental Health Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com

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	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Mid-Plains Center for Behavioral Healthcare Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	620 N 48th St Suite 303 Lincoln, NEBRASKA 68504	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Multisystemic Therapy (MST)	Bailey, Autumn	4025252214	abailey@midplainscenter.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	620 N 48th St Suite 303 Lincoln, NEBRASKA 68504	Multisystemic Therapy (MST)	Bernadt, Jay	4024056615	jbernadt@midplainscenter.org
			Boko, Dramane	4023271285	dboko@midplainscenter.org
			Clark, Vernon	4028408204	vclark@midplainscenter.org
			Epperson, Pamela	4027079839	pepperson@midplainscenter.org
			Nichols, Kayla	4028170352	knichols@midplainscenter.org
			Super, Trudy	4028031731	tsuper@midplainscenter.org

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	Juvenile Mental Health Outpatient Counseling (Group)	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juvenile Psychological Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juvenile Substance Use Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juveniles Who Sexually Harm Risk Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com

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	Juvenile Co-Occurring Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Mental	Pawlowski,	4024057922	kristi@newhopecounselinglincoln.com

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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	Health Outpatient Counseling (Individual/Family)	Kristi		
		Juvenile Substance Use Addendum	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Substance Use Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.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	Juvenile Co-Occurring Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Mental Health Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Addendum	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Carville, Misty	4023107867	mistycarville313@gmail.com

Agency Name: New Way Counseling, LLC

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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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	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	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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	Agency Supported Foster Care	Marschman, Mindy	4022399719	mindy.marschman@omniic.com
		Expedited Co-Occurring Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Expedited Mental Health Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
		Expedited Substance Use Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Family Support	Fralin, Kelly	4025201571	kelly.fralin@omniic.com
			Frye, Amy	4023639859	amy.frye@omniic.com
			Ladd, Allen	4028050897	allen.ladd@omniic.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2300 South 13th Street Lincoln, NEBRASKA 68502	Family Support	Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
			Thayer, Heather	4023691484	Heather.Thayer@omniic.com
		Intensive Family Preservation	Fralin, Kelly	4025201571	kelly.fralin@omniic.com
			Frye, Amy	4023639859	amy.frye@omniic.com
			Ladd, Allen	4028050897	allen.ladd@omniic.com
			Sieck, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
			Thayer, Heather	4023691484	Heather.Thayer@omniic.com
		Juvenile Co-Occurring Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Juvenile Mental Health Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Ladd, Allen	4028050897	allen.ladd@omniic.com
			Sieck, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Risk Evaluation			
		Relative/Kinship Home Study	Marschman, Mindy	4022399719	mindy.marschman@omniic.com

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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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Perrien, Cody	4023185878	cody@sikhonatherapyne.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Perrien, Cody	4023185878	cody@sikhonatherapyne.com

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	Family Support	Adams, Brandi	4029750182	Brandi.Adams@owenseducationalservices.org
			Jenkins, Roni	4022194667	Roni.jenkins@owenseducationalservices.org
			Wilkins, James	4024640784	james.wilkins@theowenscompanies.com
		Juvenile Electronic Monitoring GPS	Jenkins, Roni	4022194667	Roni.jenkins@owenseducationalservices.org

Agency Name: Paradigm, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	4316 South 48th Street Lincoln, NEBRASKA 68516	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Pathfinder Support Services Home Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pathfinder	6130 South 58th Street	Day Reporting	Perry, Tera	7753890866	tperry@pathfinderserv.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Support Services - Lincoln	Suite D Lincoln, NEBRASKA 68516	Evening Reporting	Perry, Tera	7753890866	tperry@pathfinderserv.com
		Family Support	Perry, Tera	7753890866	tperry@pathfinderserv.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	Juvenile Co-Occurring Evaluation			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Group)			
		Juvenile Substance Use Outpatient Treatment			

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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/Family)			

Agency Name: Pioneer Counseling Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pioneer Counseling Center	5020 Elk Ridge Road Lincoln, NEBRASKA 68516	Invoice - Competency Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Invoice - Psychological Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Juvenile Competency Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Juvenile Psychological Evaluation	Remington, Janelle	4024408025	jremington@madonna.org

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	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Raquel Moreno Izaguirre LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Raquel	4535 Normal Blvd	Juvenile Co-Occurring			

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

Agency Name: Region V Systems Behavioral Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Region V Systems Behavioral Health	1645 N Street Lincoln, NEBRASKA 68508	Expedited Family Group Conference			
		Justice Wraparound	Houska, Eden	4024415579	ehouska@region5systems.net

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	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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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	Juvenile Substance Use Addendum			
		Juvenile 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, LLC	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
	700 R St. Suite 317 Lincoln, NEBRASKA 68501	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Second Chances Psychotherapy

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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	Juvenile Mental Health Outpatient Counseling (Group)	Cornish, Audrey	4024170783	audrey@remedypsych.com

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. Lincoln, NEBRASKA 68526	Juvenile 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
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Mental Health Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Mental	Clarke,	4024836990	aclarke@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	Health Outpatient Counseling (Individual/Family)	Ashleigh		
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com
			Groeteke, Olivia	4024836990	ogroeteke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Psychiatric Evaluation	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile 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, Anne	4024836990	avrbka@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	Juvenile Substance Use Addendum	Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile 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	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Groeteke, Olivia	4024836990	ogroeteke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.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	Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Zlomke, Leland	4024836990	lzphd1@gmail.com
		Juveniles Who Sexually Harm Risk Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzphd1@gmail.com

Agency Name: The Mediation Center

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	Expedited Family Group Conference			
		Mediation			

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	Juvenile Co-Occurring Evaluation			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health			

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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/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum	Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Juvenile Substance Use Evaluation	Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
		Juvenile Substance Use Intensive Outpatient (IOP)	Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
			Kasem, Avien	4028004215	Avien_kasem@hotmail.com
		Juvenile Substance Use Outpatient Treatment (Group)	Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
			Kasem, Avien	4028004215	Avien_kasem@hotmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Davison, Rebecca	4023355998	beckie.davison@nebraska.gov
			Kasem, Avien	4028004215	Avien_kasem@hotmail.com

Agency Name: WICS-Women In Community Service

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
WICS-Women In Community Service	1935 D Street Lincoln, NEBRASKA 68502	Group Home A	Waddington, Tauni	4025802692	tauniwaddington@aol.com

Agency Name: Wellbeing Initiative, Inc.

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wellbeing Initiative, Inc.	5530 O St Ste 2 Lincoln, NEBRASKA 68510	Day Reporting	Fandrich, Kalli	4028900383	kfandrich@winitiative.org
			Thomas, Casey	5312545454	cthomas@winitiative.org
			Webb, Allison	5315309901	awebb@winitiative.org
		Evening Reporting			
		Family Partner			
		Family Support			
		General Education Class			

Agency Name: Whitehall PRTF

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Whitehall PRTF	5900 Walker Ave. Lincoln, NEBRASKA 68507	Hospital Based Psychiatric Residential Treatment Facility (PRTF)	Esquivel, Jesus	4025707645	jesse.esquivel@nebraska.gov
			Holbrook, Rolf	4024716154	rolf.holbrook@nebraska.gov
			Karn, Miranda	4024716969	miranda.karn@nebraska.gov
			Mousel, Mindy	4024716969	mindy.mousel@nebraska.gov
			Nash, Cindy	4024716180	cindy.nash@nebraska.gov
			Prescott, Sara	4024716969	sara.prescott@nebraska.gov
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation	Nash, Cindy	4024716180	cindy.nash@nebraska.gov
		Juveniles Who Sexually Harm Risk Evaluation	Nash, Cindy	4024716180	cindy.nash@nebraska.gov

Agency Name: Youth for Christ - Lincoln

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Youth for Christ - Lincoln	6401 Pine Lake Rd Lincoln, NEBRASKA 68516	General Education Class	Salmans, Jacob	5412926799	jakes@yfclincoln.org

Agency Name: berniklau education solutions team

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
berniklau education solutions team	11401 south 70th street Lincoln, NEBRASKA 68516	Day Reporting	berniklau, jacqueline	4024202888	jacque@bestedteam.org