

Administrative Office of Courts & Probation

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

District 4A

Agency Facility County: Douglas

Agency Name: 111 FREE, INC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
111 FREE, INC	1941 South 42nd Street Suite 426 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	Alexis, Geraldine	4027393300	galexis007@msn.com
		Adult Mental Health Evaluation	Alexis, Geraldine	4027393300	galexis007@msn.com
		Adult Substance Use Evaluation	Alexis, Geraldine	4027393300	galexis007@msn.com
		Adult Substance Use Outpatient Treatment (Individual)	Alexis, Geraldine	4027393300	galexis007@msn.com

Agency Name: A Better You Counseling Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A Better You Counseling Services LLC	11060 Oak Street Suite 6 Omaha, NEBRASKA 68144	Adult Mental Health Outpatient Counseling (Individual)	Rush, Sherlonda	4026699030	sherlondarush@betterucounseling.com

Agency Name: AC III Sober and Transitional Living, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
AC III Sober and Transitional Living, LLC	1714 Sahler St Omaha, NEBRASKA 68110	Transitional Living - Level 2			

Agency Name: AM Counseling and Consulting

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
AM Counseling and Consulting	2121 S 44th St Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation			
		Adult Gambling Outpatient			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
AM Counseling and Consulting	2121 S 44th St Omaha, NEBRASKA 68105	Counseling (Individual/Group)			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation			
		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 (Individual)			

Agency Name: Abbott Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Abbott Counseling Services	7811 L Street Suite 104 Ralston, NEBRASKA 68127	Adult Co-Occurring Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Adult Mental Health Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Adult Substance Use Addendum	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Adult Substance Use Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Abbott, Kara	4027089389	kara_brooke@hotmail.com

Agency Name: Abishai Counseling

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Abishai Counseling	4315 Frances St, Suite 100 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation			
		Adult Substance Use Addendum	Villa, Veronica	4028503403	abishaicounseling@outlook.com
		Adult Substance Use Evaluation	Villa, Veronica	4028503403	abishaicounseling@outlook.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Villa, Veronica	4028503403	abishaicounseling@outlook.com
		Adult Substance Use Outpatient Treatment (Group)	Villa, Veronica	4028503403	abishaicounseling@outlook.com
		Adult Substance Use Outpatient Treatment (Individual)	Villa, Veronica	4028503403	abishaicounseling@outlook.com

Agency Name: Achievement Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Achievement Counseling Services	8031 West Center Road Suite 324 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com
		Adult Substance Use Addendum	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com
		Adult Substance Use Evaluation	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com
		Adult Substance Use Outpatient	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Achievement Counseling Services	8031 West Center Road Suite 324 Omaha, NEBRASKA 68124	Treatment (Individual)			

Agency Name: Aequitas Behavioral Assessments & Consulting

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Aequitas Behavioral Assessments & Consulting	3929 S 147 Street Suite P Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com
		Adult Mental Health Evaluation	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com
		Adult Sex Offense-Specific Evaluation			
		Adult Substance Use Evaluation	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com

Agency Name: Agape Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Agape Counseling Services	1941 South 42nd Street Suite 426 Omaha, NEBRASKA 68105	Adult Substance Use Addendum	Rogers, Randall	7127139655	marketclues@gmail.com
		Adult Substance Use Evaluation	Austin, Willie	4024520102	williea244@gmail.com
			Rogers, Randall	7127139655	marketclues@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Agape Counseling Services	1941 South 42nd Street Suite 426 Omaha, NEBRASKA 68105	Adult Substance Use Intensive Outpatient Counseling (IOP)	Rogers, Randall	7127139655	marketclues@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Rogers, Randall	7127139655	marketclues@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Rogers, Randall	7127139655	marketclues@gmail.com

Agency Name: Along the Willowed Path, P.C.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Along the Willowed Path, P.C.	11635 Arbor Street STE 230 Omaha, NEBRASKA 68144	Adult Co-Occurring Evaluation	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com
		Adult Mental Health Evaluation	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com
		Adult Mental Health Outpatient Counseling (Individual)	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com
		Adult Substance Use Addendum	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com
		Adult Substance Use Evaluation	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com
		Adult Substance Use Outpatient Treatment (Individual)	Wells, Amanda	4026609687	amanda@alongthewillowedpath.com

Agency Name: Ann's Couch

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ann's Couch	4004 N 91st Street, null Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ann's Couch	4004 N 91st Street, null Omaha, NEBRASKA 68134	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: Apex Family Care

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Apex Family Care	4805 N 72nd St Omaha, NEBRASKA 68134	Adult Mental Health Outpatient Counseling (Individual)			
		Split Cost Professional Foster Care			

Agency Name: Arch Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1502 north 58th street Omaha, NEBRASKA 68104	Adult Substance Use Halfway House	Messerschmidt, Ean	4023468898	emesserschmidt@archhalfwayhouse.org
Arch Inc.	604 south 37th street Omaha, NEBRASKA 68105	Adult Substance Use Halfway House	Messerschmidt, Ean	4023468898	emesserschmidt@archhalfwayhouse.org

Agency Name: Arose Mental Health LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Arose Mental Health	8790 F Street Suite 401 Omaha, NEBRASKA 68127	Adult Mental Health Evaluation	Schrad, Ashley	4028198419	arosementalhealthllc@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LLC	8790 F Street Suite 401 Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Schrad, Ashley	4028198419	arosementalhealthllc@outlook.com

Agency Name: Aspirations LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ramanda Bruce	11414 West Center Rd. Suite 348 Omaha, NEBRASKA 68144	Adult Co-Occurring Evaluation	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Adult Mental Health Evaluation	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Adult Substance Use Addendum	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Adult Substance Use Evaluation	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com

Agency Name: At Peace Therapy, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
At Peace Therapy, LLC	13513 Cottner Street Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Ajlouny, Alestin	4024139919	alestinatpeace@outlook.com
		Adult Mental Health Evaluation	Ajlouny, Alestin	4024139919	alestinatpeace@outlook.com
		Adult Mental Health Outpatient Counseling (Individual)	Ajlouny, Alestin	4024139919	alestinatpeace@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
At Peace Therapy, LLC	13513 Cottner Street Omaha, NEBRASKA 68137	Adult Substance Use Addendum	Ajlouny, Alestin	4024139919	alestinatpeace@outlook.com
		Adult Substance Use Evaluation	Ajlouny, Alestin	4024139919	alestinatpeace@outlook.com

Agency Name: Auxiliary House

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Auxiliary House	2118 Grand Ave Omaha, NEBRASKA 68110	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: BE 1ST LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
BE 1ST LLC	2219 MAPLE ST Omaha, NEBRASKA 68110	Adult Substance Use Evaluation	Burton, KeNesha	4026182285	bfirst.kb@gmail.com

Agency Name: BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC	1941 S. 42ND ST. SUITE 106 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Adult Mental Health Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
			Stanton, Christopher	4029337577	chriss.bfs@gmail.com
		Adult Mental	KOLA,	4029337577	buoyantfamilyservices@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC	1941 S. 42ND ST. SUITE 106 Omaha, NEBRASKA 68105	Health Outpatient Counseling (Individual)	BETTY		
			Stanton, Christopher	4029337577	chriss.bfs@gmail.com
		Adult Sex Offense-Specific Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
			Stanton, Christopher	4029337577	chriss.bfs@gmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
			Stanton, Christopher	4029337577	chriss.bfs@gmail.com
		Adult Substance Use Addendum	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Adult Substance Use Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com

Agency Name: Bailey Counseling Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bailey Counseling Services, LLC	4540 North 65th Ave Omaha, NEBRASKA 68104	Adult Gambling Outpatient Counseling (Individual/Group)			
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health	Bailey III,	4025043242	frankbailey6912@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bailey Counseling Services, LLC	4540 North 65th Ave Omaha, NEBRASKA 68104	Outpatient Counseling (Individual)	Frank		
		Adult Sex Offense-Specific Evaluation	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Substance Use Addendum	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Substance Use Evaluation	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Balance & Harmony Counseling Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Balance & Harmony Counseling Services LLC	1941 S 42nd street suite 541 Omaha, NEBRASKA 68105	Adult Mental Health Outpatient Counseling (Individual)	Blanco, Magda	4029344618	balanceharmonycounseling@yahoo.com
			Cardenas, Ana	4029344618	balanceharmonycounseling@yahoo.com

Agency Name: Bear Company Counseling

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bear Company Counseling	5858 Wenninghoff Rd Ste 2 Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com
		Adult Mental Health Evaluation	Crayne, Laura	4025123528	laurie.crayne@bearcompanycounseling.com
			Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com
			Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@bearcompanycounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Crayne, Laura	4025123528	laurie.crayne@bearcompanycounseling.com
			Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com
			Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@bearcompanycounseling.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Crayne, Laura	4025123528	laurie.crayne@bearcompanycounseling.com
			Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com
			Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@bearcompanycounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com

Agency Name: Bell House, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bell House, LLC	2604 Fort Street Omaha, NEBRASKA 69111	Transitional Living - Level 2			

Agency Name: Blue Sky Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Blue Sky Counseling	5814 S 142nd St Omaha, NEBRASKA 68137	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Boys Town

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town Adolescent and Adult Chemical Use Program (CUP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Adult Co-Occurring Evaluation	Burgos, Claudia	5312670065	prissila.burgos@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
			Stoller, Christina	5313553379	christina.stoller@boystown.org
		Adult Substance Use Addendum	Burgos, Claudia	5312670065	prissila.burgos@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town Adolescent and Adult Chemical Use Program (CUP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Adult Substance Use Addendum	Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
			Stoller, Christina	5313553379	christina.stoller@boystown.org
		Adult Substance Use Evaluation	Burgos, Claudia	5312670065	prissila.burgos@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
			Stoller, Christina	5313553379	christina.stoller@boystown.org
		Adult Substance Use Outpatient Treatment (Individual)	Burgos, Claudia	5312670065	prissila.burgos@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
			Stoller, Christina	5313553379	christina.stoller@boystown.org
Boys Town Eastern	314 Sudkya	In Home Family	Birkland,	5313553171	hannah.birkland@boystown.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nebraska In Home Family Services	Boys Town, NEBRASKA 68010	Service (IHFS)	Hannah		
			Brown, Curtis	4026607905	Curtis.brown@boystown.org
			Darnell, Guy	4023168210	guy.darnell@boystown.org
			Goshorn, Kevin	4026772507	kevin.goshorn@boystown.org
			Holz, Morgan	4026778563	morgan.holz@boystown.org
			Ledesma, Cinthya	4026703616	cinthya.ledesma@boystown.org
			Meyer, Cynthia	4028103713	cindy.meyer@boystown.org
			Point, Gabby	5313017208	gabby.point@boystown.org
			Reginald, Anton	4025471860	Anton.reginald@boystown.org
			Spidell, Rylee	4026706356	rylee.spidell@boystown.org
			Stanek, Beau	5312831954	Beau.Stanek@boystown.org
			Strock , Cade	4026797116	cade.strock@boystown.org
			Vipond, Bradley	4022064309	bradley.vipond@boystown.org

Agency Name: Braun Counseling Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Braun Counseling Services LLC	8031 West Center Rd, Ste 322 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Mental Health Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com

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Braun Counseling Services LLC	8031 West Center Rd, Ste 322 Omaha, NEBRASKA 68124	Adult Mental Health Outpatient Counseling (Individual)	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Addendum	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Breaking Chains LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Breaking Chains LLC	1941 S 42nd St Suite 426 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Breaking Sad, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Breaking Sad, LLC	7005 N 88th Street Omaha, NEBRASKA 68122	Adult Co-Occurring Evaluation	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Meckna, Shy	4025175191	smeckna@msn.com
		Adult Mental Health	Dombrowski,	4023058881	lydia.dombrowski@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Breaking Sad, LLC	7005 N 88th Street Omaha, NEBRASKA 68122	Outpatient Counseling (Individual)	Lydia		
			Meckna, Shy	4025175191	smeckna@msn.com
		Adult Substance Use Addendum	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Meckna, Shy	4025175191	smeckna@msn.com
		Adult Substance Use Evaluation	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Meckna, Shy	4025175191	smeckna@msn.com
		Adult Substance Use Outpatient Treatment (Individual)	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Meckna, Shy	4025175191	smeckna@msn.com

Agency Name: Brian P. Schnieder, LICSW, LADC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brian P. Schnieder, LICSW, LADC	8998 L Street, Suite #109 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Mental Health Evaluation	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Mental Health Outpatient Counseling (Individual)	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Substance Use Addendum	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Substance Use Evaluation	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Schnieder, Brian	4028500054	brianschnieder@yahoo.com

Agency Name: CEDARS Youth Services

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Youth Services- Omaha Office	10840 Old Mill Rd, Suite 200 Omaha, NEBRASKA 68154	In Home Family Service (IHFS)	Carlson, Shandy	5315307630	scarlson@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Petrini, Shelby	4024161956	spetrini@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
			Watts, Kayla	4022017043	kwatts@cedarskids.org

Agency Name: Calm Minds LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Calm Minds LLC	4911 Grand Ave Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Mental Health Evaluation	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Mental Health Outpatient Counseling (Individual)	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Substance Use Addendum	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Substance Use Evaluation	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Substance Use Outpatient Treatment (Individual)	Luck, Jonnae	5627465150	jonnae@calmindstherapy.com

Agency Name: Capture Developmental and Community Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capture Developmental and Community Services	1905 Harney Street STE 210 Omaha, NEBRASKA 68102	Split Cost Professional Foster Care			

Agency Name: Carla Vista Sober Living, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carla Vista Sober Living, LLC	11648 Douglas St Omaha, NEBRASKA 68154	Transitional Living - Level 1			

Agency Name: Carole's House of Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carole's House of Hope	7815 Harney St Omaha, NEBRASKA 68114	Adult Co-Occurring Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Adult Mental Health Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Adult Substance Use Addendum	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Adult Substance Use Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Transitional Living - Level 2	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com

Agency Name: CenterPointe, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Campus for Hope - COR	1490 N 16th Street Omaha, NEBRASKA 68102	Adult Co-Occurring Capable Short-Term Residential	Goracke, Courtney	4024758748	cgoracke@centerpointe.org
			Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Co-Occurring Evaluation	Goracke, Courtney	4024758748	cgoracke@centerpointe.org
			Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Mental Health Evaluation	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use	Volnek,	4024758717	avolnek@centerpointe.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Campus for Hope - COR	1490 N 16th Street Omaha, NEBRASKA 68102	Addendum	Ashley		
		Adult Substance Use Evaluation	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use Short-Term Residential	Volnek, Ashley	4024758717	avolnek@centerpointe.org
Campus for Hope - Short Term Residential	1490 N 16th Omaha, NEBRASKA 68508	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	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use Evaluation	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)			
		Adult Substance Use Short-Term Residential	Volnek, Ashley	4024758717	avolnek@centerpointe.org

Agency Name: Chain Breaker, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	3909 Cuming Street Suite 201 Omaha, NEBRASKA 68131	Adult Substance Use Addendum	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net
		Adult Substance Use Evaluation	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net
	4924 Capitol Avenue Omaha, NEBRASKA 68132	Adult Substance Use Outpatient Treatment (Group)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net
		Adult Substance Use Outpatient Treatment (Individual)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net
		Transitional Living - Level 1	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakerounseling.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	4924 Capitol Avenue Omaha, NEBRASKA 68132	Transitional Living - Level 2	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Woods, Amy	4024037709	awoods@chainbreaker counseling.net

Agency Name: Charles Drew Health Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Adult Co-Occurring Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Menendez, Michael	4025109975	michael.menendez@charlesdrew.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental	Bell,	4027099849	newbalancecounseling@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Health Outpatient Counseling (Individual)	Antoinette		
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Menendez, Michael	4025109975	michael.menendez@charlesdrew.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Addendum	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Price, Morghan	9032935484	edenscompass@outlook.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Adult Substance Use Evaluation	Marquez, Elvia	4023590372	elvia.marquez@charlesdrew.com
			Price, Morghan	9032935484	edenscompass@outlook.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Price, Morghan	9032935484	edenscompass@outlook.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Outpatient Treatment (Group)	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Price, Morghan	9032935484	edenscompass@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Adult Substance Use Outpatient Treatment (Group)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
Charles Drew Health Center-TYAC	5920 Maple Street Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Medication Management			
		Adult Mental Health Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health Outpatient Counseling (Group)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health Outpatient Counseling (Individual)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Addendum	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center-TYAC	5920 Maple Street Omaha, NEBRASKA 68104	Adult Substance Use Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Outpatient Treatment (Group)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Outpatient Treatment (Individual)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Co-Occurring Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Adult Mental Health Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health Outpatient Counseling (Group)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health Outpatient Counseling (Group)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Adult Mental Health Outpatient Counseling (Group)	Shelina		
		Adult Mental Health Outpatient Counseling (Individual)	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Addendum	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Evaluation	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Outpatient Treatment	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams,	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	(Individual)	Shelina		

Agency Name: Child Saving Institute, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Child Saving Institute, Inc.	4545 Dodge Street Omaha, NEBRASKA 68132	Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Chimney Rock Psychological Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Chimney Rock Psychological Health	6311 Ames Ave Unit 195 Omaha, NEBRASKA 68104	Adult Mental Health Evaluation	Mason, Eric	7252728830	ericmason@redrockph.com
		Adult Mental Health Outpatient Counseling (Individual)	Mason, Eric	7252728830	ericmason@redrockph.com
		Adult Sex Offense-Specific Evaluation	Mason, Eric	7252728830	ericmason@redrockph.com
		Adult Substance Use Evaluation	Mason, Eric	7252728830	ericmason@redrockph.com
		Adult Substance Use Outpatient Treatment (Individual)	Mason, Eric	7252728830	ericmason@redrockph.com

Agency Name: Christine Baccari

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Christine Baccari	12020 Shamrock Plaza, Suite 200 Omaha, NEBRASKA 68154	Adult Substance Use Evaluation	Baccari, Christine	4026805033	christine@baccari.com
		Adult Substance Use Outpatient Treatment (Individual)	Baccari, Christine	4026805033	christine@baccari.com

Agency Name: Community Alliance Rehabilitation Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Community Alliance Rehabilitation Services	7150 Arbor Street Omaha, NEBRASKA 68106	Adult Co-Occurring Evaluation	Brown, Jessica	4023415128	jbrown@commall.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Brown, Jessica	4023415128	jbrown@commall.org
			Cooke, Rebecca	4028847223	rcooke@commall.org
			Wibel, Jeff	4023415128	jwibel@commall.org
		Adult Mental Health Outpatient Counseling (Individual)	Cooke, Rebecca	4028847223	rcooke@commall.org
		Adult Substance Use Addendum	Brown, Jessica	4023415128	jbrown@commall.org
		Adult Substance Use Evaluation	Brown, Jessica	4023415128	jbrown@commall.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)			

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Agency Name: Complete Behavioral Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Behavioral Health	4565 S 133rd St Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Mental Health Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Bernard, David	4022066501	dgbarnard_411@hotmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Psychological Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Addendum	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Bernard, David	4022066501	dgbarnard_411@hotmail.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	10846 John Galt Blvd Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Mental Health Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Mental Health Outpatient Counseling (Individual)	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Substance Use Addendum	Hall, John	4027703764	john.hall@completefamilytreatment.com
			Hull, Brian	4024323171	bhull@joltnebraska.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Family Treatment Services	10846 John Galt Blvd Omaha, NEBRASKA 68137	Adult Substance Use Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com
			Hull, Brian	4024323171	bhull@joltnebraska.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Hall, John	4027703764	john.hall@completefamilytreatment.com
			Hull, Brian	4024323171	bhull@joltnebraska.org
		Adult Substance Use Outpatient Treatment (Individual)	Hall, John	4027703764	john.hall@completefamilytreatment.com

Agency Name: Continuum Counseling & Consultants, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Continuum Counseling & Consultants, LLC	12020 Shamrock Plaza Suite 200 Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation	Berry, Shane	4025226570	continuumcounseling@outlook.com
		Adult Mental Health Evaluation	Berry, Shane	4025226570	continuumcounseling@outlook.com
		Adult Mental Health Outpatient Counseling (Individual)	Berry, Shane	4025226570	continuumcounseling@outlook.com
		Adult Substance Use Addendum	Berry, Shane	4025226570	continuumcounseling@outlook.com
		Adult Substance Use Evaluation	Berry, Shane	4025226570	continuumcounseling@outlook.com
		Adult Substance Use Outpatient Treatment (Individual)	Berry, Shane	4025226570	continuumcounseling@outlook.com

Agency Name: Cornerstone Recovery House

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cornerstone Recovery House	1101 S 28th St Omaha, NEBRASKA 68105	Transitional Living - Level 2			

Agency Name: Creative Counseling and Studio

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Creative Counseling and Studio	1941 S 42nd St Ste 542 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			

Agency Name: Cultivating Paths Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cultivating Paths Counseling, LLC	1941 South 42nd Street, Suite 307 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Adult Substance Use Addendum	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Deutsch-	4028063403	m.mackey.cultivatingpaths@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cultivating Paths Counseling, LLC	1941 South 42nd Street, Suite 307 Omaha, NEBRASKA 68105	Adult Substance Use Addendum	Mackey, Michelle		
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjane@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjane@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjane@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance	Deutsch-	4028063403	m.mackey.cultivatingpaths@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cultivating Paths Counseling, LLC	1941 South 42nd Street, Suite 307 Omaha, NEBRASKA 68105	Use Outpatient Treatment (Group)	Mackey, Michelle		
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjane@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjane@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com

Agency Name: David's House

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
David's House	9161 Blondo St Omaha, NEBRASKA 68134	Transitional Living - Level 2			

Agency Name: Deens THD Enterprise LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Deens THD Enterprise LLC	12919 C Plaza Omaha, NEBRASKA 68144	Juvenile Transportation	Clark, LaTrenda	4022389643	trendaclark@yahoo.com
			Harris, Walter	5313295103	walterdionharris73@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Deens THD Enterprise LLC	12919 C Plaza Omaha, NEBRASKA 68144	Juvenile Transportation	Starks, Michael	4029174489	Skeetmarino3344@yahoo.com

Agency Name: Different Approach

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Different Approach	3714 N 77th street Omaha, NEBRASKA 68131	Transitional Living - Level 1	Shaddy, Jake	5312036550	differentapproachne@gmail.com
		Transitional Living - Level 2	Shaddy, Jake	5312036550	differentapproachne@gmail.com
	2922 Izard St Omaha, NEBRASKA 68131	Transitional Living - Level 1	Shaddy, Jake	5312036550	differentapproachne@gmail.com
		Transitional Living - Level 2	Shaddy, Jake	5312036550	differentapproachne@gmail.com

Agency Name: Douglas County Community Mental Health Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Douglas County Community Mental Health Center	4102 Woolworth Ave Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	Minturn, Tiffany	4024444755	tiffany.minturn@douglascounty-ne.gov
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Matrix Substance Use Intensive Outpatient Treatment (IOP)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Minturn,	4024444755	tiffany.minturn@douglascounty-

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Douglas County Community Mental Health Center	4102 Woolworth Ave Omaha, NEBRASKA 68105	Adult Mental Health Evaluation	Tiffany		ne.gov
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
		Adult Mental Health Outpatient Counseling (Individual)	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
		Adult Substance Use Addendum	Carter, Evan	4026587315	eecarter05@gmail.com
			Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
		Adult Substance Use Evaluation	Carter, Evan	4026587315	eecarter05@gmail.com
			Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Minturn, Tiffany	4024444755	tiffany.minturn@douglascounty-ne.gov
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov

Agency Name: Dr. Doraine Baul-Pinson

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dr. Doraine Baul-Pinson	1941 S. 42nd Street Ste Center Mall -- Ste# 426 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
		Adult Mental Health Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
		Adult Mental Health Outpatient Counseling	BAULPINSON, DORAINE	4025147613	doraineh@aol.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dr. Doraine Baul-Pinson	1941 S. 42nd Street Ste Center Mall -- Ste# 426 Omaha, NEBRASKA 68105	(Individual)			
		Adult Substance Use Addendum	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
		Adult Substance Use Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Eden's Compass & Company LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Eden's Compass, LLC	2909 Bristol Street Omaha, NEBRASKA 68111	Adult Substance Use Evaluation	Price, Morghan	9032935484	edenscompass@outlook.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Price, Morghan	9032935484	edenscompass@outlook.com
		Adult Substance Use Outpatient Treatment (Group)	Price, Morghan	9032935484	edenscompass@outlook.com
		Adult Substance Use Outpatient Treatment (Individual)	Price, Morghan	9032935484	edenscompass@outlook.com

Agency Name: Eunoia- A Beautiful, Thinking Mind Company

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Eunoia- A Beautiful, Thinking Mind Company	319 S. 17th St Suite 233 Omaha, NEBRASKA 68102	Adult Co-Occurring Evaluation	Gaines, Denise	4024031367	eunoiamindful@gmail.com
		Adult Mental Health Evaluation	Gaines, Denise	4024031367	eunoiamindful@gmail.com
		Adult Mental Health Outpatient Counseling (Group)	Gaines, Denise	4024031367	eunoiamindful@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Eunoia- A Beautiful, Thinking Mind Company	319 S. 17th St Suite 233 Omaha, NEBRASKA 68102	Adult Mental Health Outpatient Counseling (Individual)	Gaines, Denise	4024031367	eunoiamindful@gmail.com
		Adult Substance Use Addendum	Gaines, Denise	4024031367	eunoiamindful@gmail.com
			Sheard, Demetria	2525624681	dsheard.wcllc@gmail.com
		Adult Substance Use Evaluation	Gaines, Denise	4024031367	eunoiamindful@gmail.com
			Sheard, Demetria	2525624681	dsheard.wcllc@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Gaines, Denise	4024031367	eunoiamindful@gmail.com
			Sheard, Demetria	2525624681	dsheard.wcllc@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Gaines, Denise	4024031367	eunoiamindful@gmail.com
			Sheard, Demetria	2525624681	dsheard.wcllc@gmail.com

Agency Name: EvalsOmaha, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
EvalsOmaha, LLC	8031 W Center Rd Suite 305 Omaha, NEBRASKA 68124	Adult Substance Use Addendum	Johnson, Corey	4022358341	corey@evalsomaha.com
		Adult Substance Use Evaluation	Johnson, Corey	4022358341	corey@evalsomaha.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Family Enrichment

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Family Enrichment	820 S 75th Street Omaha, NEBRASKA 68114	Adult Initial Diagnostic Interview (Medication Prescriber Only)	Ellis, Mary	4028716010	maryellislaw@gmail.com
		Adult Medication Management	Ellis, Mary	4028716010	maryellislaw@gmail.com
		Adult Mental Health Evaluation	Ellis, Mary	4028716010	maryellislaw@gmail.com

Agency Name: Flourish Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Flourish Counseling LLC	3677 North 129th Street Omaha, NEBRASKA 68164	Adult Co-Occurring Evaluation	Ellis, Tara	5737199655	ellis.taral@gmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Ellis, Tara	5737199655	ellis.taral@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Ellis, Tara	5737199655	ellis.taral@gmail.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: Focus C3, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Focus C3, PC	10748 Virginia Plaza Suite 107 Omaha, NEBRASKA 68128	Adult Co-Occurring Evaluation	Akers, Anita	4029334411	anita@focusc3.com
			Engle, Christine	4029334411	cme2911@gmail.com
		Adult Mental Health Evaluation	Akers, Anita	4029334411	anita@focusc3.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Focus C3, PC	10748 Virginia Plaza Suite 107 Omaha, NEBRASKA 68128	Adult Mental Health Evaluation	Engle, Christine	4029334411	cme2911@gmail.com
		Adult Substance Use Evaluation	Akers, Anita	4029334411	anita@focusc3.com
			Engle, Christine	4029334411	cme2911@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Akers, Anita	4029334411	anita@focusc3.com
			Engle, Christine	4029334411	cme2911@gmail.com

Agency Name: GG Enterprise

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
GG Enterprise	10040 Regency Circle Suite 250 Omaha, NEBRASKA 68114	Adult Mental Health Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com
		Adult Mental Health Outpatient Counseling (Individual)	Gard, Gary	4023935432	ggard@drgarygard.com
		Adult Psychological Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com
		Adult Sex Offense-Specific Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com

Agency Name: Gateway Transitional Housing

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Gateway Transitional Housing	6337 North 33rd Street Omaha, NEBRASKA 68111	Adult Substance Use Evaluation	Polk, Marcus	4023052811	gatewaytransitionalhousing@gmail.com
		Transitional Living - Level 2	Polk, Marcus	4023052811	gatewaytransitionalhousing@gmail.com

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Agency Name: Generational Health LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Generational Health LLC	2506 N. 72nd St Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Langford, Shannon	5312399260	healthygenerations1@gmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Langford, Shannon	5312399260	healthygenerations1@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Langford, Shannon	5312399260	healthygenerations1@gmail.com
		Adult Substance Use Addendum	Langford, Shannon	5312399260	healthygenerations1@gmail.com
		Adult Substance Use Evaluation	Langford, Shannon	5312399260	healthygenerations1@gmail.com

Agency Name: Georgia's House of Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Georgia's House of Hope	701 South 75th Street Omaha, NEBRASKA 68114	Adult Co-Occurring Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Transitional Living - Level 1	Carter, Cherie	4024527869	healinghouseofhope7@gmail.com
		Transitional Living - Level 2	Carter, Cherie	4024527869	healinghouseofhope7@gmail.com
	2208 Pinkney Street Omaha, NEBRASKA 68111	Adult Substance Use Outpatient Treatment (Individual)			
		Transitional Living - Level 1	Carter, Cherie	4024527869	healinghouseofhope7@gmail.com
		Transitional Living -	Carter,	4024527869	healinghouseofhope7@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2208 Pinkney Street Omaha, NEBRASKA 68111	Level 2	Cherie		

Agency Name: Grace365 ReEntry

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Grace365 ReEntry	3316 N 45th Street Omaha, NEBRASKA 68104	Transitional Living - Level 2			

Agency Name: Halo Counseling Center, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Halo Counseling Center, LLC	8998 L St STE 110 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Czapenski, John	4026515404	halocounseling@outlook.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com
		Adult Mental Health Evaluation	Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Mental Health Outpatient Counseling (Individual)	Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Halo Counseling Center, LLC	8998 L St STE 110 Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Perkumas, Christine	4023200785	Clperkumas@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Adult Substance Use Addendum	Czapenski, John	4026515404	halocounseling@outlook.com
			Freeman, Faith	4022109058	faithfreemann@gmail.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com
		Adult Substance Use Evaluation	Czapenski, John	4026515404	halocounseling@outlook.com
			Freeman, Faith	4022109058	faithfreemann@gmail.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Czapenski, John	4026515404	halocounseling@outlook.com
			Freeman, Faith	4022109058	faithfreemann@gmail.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Halo Counseling Center, LLC	8998 L St STE 110 Omaha, NEBRASKA 68127	Adult Substance Use Intensive Outpatient Counseling (IOP)	Katie		
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Czapenski, John	4026515404	halocounseling@outlook.com
			Freeman, Faith	4022109058	faithfreemann@gmail.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Czapenski, John	4026515404	halocounseling@outlook.com
			Freeman, Faith	4022109058	faithfreemann@gmail.com
			Lorenzen, Katie	3602041888	katies7@yahoo.com
			Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			Schnieder, Brian	4028500054	brianschnieder@yahoo.com
			Smith, Lauren	5312226960	laurenwsmith.halocounseling@gmail.com

Agency Name: Healing Stone LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Healing Stone	1819 Lothrop Street Omaha, NEBRASKA 68110	Adult Substance Use Addendum	Austin, Willie	4024520102	williea244@gmail.com
		Adult Substance Use Evaluation	Austin, Willie	4024520102	williea244@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Austin, Willie	4024520102	williea244@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Austin, Willie	4024520102	williea244@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Austin, Willie	4024520102	williea244@gmail.com
	4359 Hamilton St Omaha, NEBRASKA 68131	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)			
		Transitional Living - Level 2			

Agency Name: Heartland Family Service

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland Family Service	2101 S 42nd Street Omaha,	Adult Co-Occurring Evaluation	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry,	4025527064	Sfry@Heartlandfamilyservice.org

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Heartland Family Service	NEBRASKA 68105	Adult Co-Occurring Evaluation	Sueretta		
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org

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Heartland Family Service		Adult Mental Health Evaluation	Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Mental Health Outpatient Counseling (Group)	Byers, Erin	4025527064	ebyers@heartlandfamilyservice.org
			Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Mental Health Outpatient Counseling (Individual)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland Family Service		Adult Mental Health Outpatient Counseling (Individual)	Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Substance Use Addendum	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Substance Use Evaluation	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org

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Heartland Family Service		Adult Substance Use Evaluation	Brian		
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Substance Use Outpatient Treatment (Group)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Adult Substance Use Outpatient Treatment (Individual)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org

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Heartland Family Service		Adult Substance Use Outpatient Treatment (Individual)	Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		PRS-BIP			
Nebraska Family Works - Heartland Family Service	4847 Sahler Street Omaha, NEBRASKA 68104	Adult Co-Occurring Capable Short-Term Residential			

Agency Name: Heitmann Consulting Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heitmann Consulting Inc.	16411 Grover St Omaha, NEBRASKA 68130	Adult Substance Use Addendum	Heitmann, Ruth	4028717541	rheitmannconsulting@gmail.com
		Adult Substance Use Evaluation	Heitmann, Ruth	4028717541	rheitmannconsulting@gmail.com

Agency Name: Hope Healing & Wellness LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Hope Healing & Wellness LLC	7551 Main Street, Suite 259 Ralston, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Wiles, Lori	4026993468	lwiles@wilescoun.omhcoxmail.com
		Adult Substance Use	Wiles, Lori	4026993468	lwiles@wilescoun.omhcoxmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Hope Healing & Wellness LLC	7551 Main Street, Suite 259 Ralston, NEBRASKA 68127	Outpatient Treatment (Individual)			

Agency Name: Imagine by Northpoint

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northpoint Nebraska	7215 Ontario Street Omaha, NEBRASKA 68124	Adult Substance Use Short-Term Residential	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com
Northpoint Omaha	9623 M Street Omaha, NEBRASKA 68127	Adult Substance Use Intensive Outpatient Counseling (IOP)	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com

Agency Name: Infinite Avenues Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Infinite Avenues Counseling, LLC	5414 S 99th St Omaha, NEBRASKA 68127	Adult Substance Use Addendum	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Adult Substance Use Evaluation	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Adult Substance Use Outpatient Treatment (Group)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com

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Agency Name: Innerwork Counseling and Consulting LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Innerwork Counseling and Consulting LLC	7905 L Street Ste 430 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: Inroads To Recovery

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inroads To Recovery	2808 N 75th St Omaha, NEBRASKA 68134	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	Chavez, Pedro	4024501265	PedroC@inroadstorecovery.com
			Corbin, Trinetec	4029322248	trinetec@inroadstorecovery.com
			Mathijssen, Graciela	4029322248	gracielam@inroadstorecovery.com
			Ogden, David	4027079718	davido@inroadstorecovery.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inroads To Recovery	2808 N 75th St Omaha, NEBRASKA 68134	Adult Substance Use Addendum	Thompson-Brown, Bridgette	4029322248	bridgetteT@inroadstorecovery.com
			kinnaman, mark	4029322248	markk@inroadstorecovery.com
		Adult Substance Use Evaluation	Chavez, Pedro	4024501265	PedroC@inroadstorecovery.com
			Corbin, Trinette	4029322248	trinettec@inroadstorecovery.com
			Mathijssen, Graciela	4029322248	gracielam@inroadstorecovery.com
			Ogden, David	4027079718	davido@inroadstorecovery.com
			Thompson-Brown, Bridgette	4029322248	bridgetteT@inroadstorecovery.com
			kinnaman, mark	4029322248	markk@inroadstorecovery.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Chavez, Pedro	4024501265	PedroC@inroadstorecovery.com
			Corbin, Trinette	4029322248	trinettec@inroadstorecovery.com
			Mathijssen, Graciela	4029322248	gracielam@inroadstorecovery.com
			Ogden, David	4027079718	davido@inroadstorecovery.com
			Thompson-Brown, Bridgette	4029322248	bridgetteT@inroadstorecovery.com
			kinnaman, mark	4029322248	markk@inroadstorecovery.com
		Adult Substance Use Short-Term Residential	Chavez, Pedro	4024501265	PedroC@inroadstorecovery.com
			Corbin, Trinette	4029322248	trinettec@inroadstorecovery.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inroads To Recovery	2808 N 75th St Omaha, NEBRASKA 68134	Adult Substance Use Short-Term Residential	Mathijssen, Graciela	4029322248	gracielam@inroadstorecovery.com
			Ogden, David	4027079718	davido@inroadstorecovery.com
			Thompson-Brown, Bridgette	4029322248	bridgetteT@inroadstorecovery.com
			kinnaman, mark	4029322248	markk@inroadstorecovery.com

Agency Name: Intentional Healing Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Intentional Healing Inc	5858 Wenninghoff Road Suite 3 Omaha, NEBRASKA 68134	Adult Mental Health Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Suttles, Elisha	4029151387	intentionalhealingr3@gmail.com

Agency Name: Introspection Consultation Mental Health Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Introspection Consultation Mental Health Services LLC	4914 Glasgow Ave Omaha, NEBRASKA 68157	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance	Arens,	4029572570	introspectionconsultation@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Introspection Consultation Mental Health Services LLC	4914 Glasgow Ave Omaha, NEBRASKA 68157	Use Outpatient Treatment (Individual)	Necol		

Agency Name: JS REACH IOP/OP

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
JS REACH IOP/OP	1941 S 42nd Street suite #416P Omaha, NEBRASKA 68105	Adult Substance Use Addendum	Besley, Jenaime	4027086032	jbesley@concord-center.com
			Scott, Judi	4025910871	j.scottreachop@gmail.com
		Adult Substance Use Evaluation	Besley, Jenaime	4027086032	jbesley@concord-center.com
			Scott, Judi	4025910871	j.scottreachop@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Besley, Jenaime	4027086032	jbesley@concord-center.com
			Scott, Judi	4025910871	j.scottreachop@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Besley, Jenaime	4027086032	jbesley@concord-center.com
			Scott, Judi	4025910871	j.scottreachop@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Besley, Jenaime	4027086032	jbesley@concord-center.com
			Scott, Judi	4025910871	j.scottreachop@gmail.com

Agency Name: Judi Biniamow

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Judi Biniamow	3024 South 179 Plz #358 Omaha, NEBRASKA 68130	Adult Mental Health Outpatient Counseling (Individual)	biniamow, judi	4023211956	judibomaha1@cox.net
		Adult Substance Use Outpatient Treatment	biniamow, judi	4023211956	judibomaha1@cox.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Judi Biniamow	3024 South 179 Plz #358 Omaha, NEBRASKA 68130	(Individual)			

Agency Name: Julie Micek Counseling Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Julie Micek Counseling Services, LLC	11605 Douglas Street Omaha, NEBRASKA 68154	Adult Mental Health Evaluation	Micek, Julie	4022141021	juliemicek@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Micek, Julie	4022141021	juliemicek@gmail.com

Agency Name: KVC Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska	11550 I St. Suite 100 Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Prusia, Jade	4025061008	jprusia@KVC.org
		Adult Mental Health Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Thompson, Michaela	4029570252	mithompson@kvc.org
		Adult Mental Health Outpatient Counseling (Individual)	Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Thompson, Michaela	4029570252	mithompson@kvc.org
		Adult Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@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	11550 I St. Suite 100 Omaha, NEBRASKA 68137	Adult Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Adult Substance Use Outpatient Treatment (Individual)	Prusia, Jade	4025061008	jprusia@KVC.org

Agency Name: Kaiser Consulting Alcohol Treatment

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kaiser Consulting Alcohol Treatment	16624 Oak Street Omaha, NEBRASKA 68130	Adult Initial Diagnostic Interview (Medication Prescriber Only)	Kaiser, Nathan	3088821587	specialed7.nk@gmail.com
		Adult Medication Management	Kaiser, Nathan	3088821587	specialed7.nk@gmail.com

Agency Name: Keck Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Keck Counseling LLC	5150 Nth 90th Omaha, NEBRASKA 68134	Adult Substance Use Addendum	Keck, Amy	5317729749	Ajksm18@gmail.com
			Maldonado, Gina	4029687053	glmald6777@gmail.com
		Adult Substance Use Evaluation	Keck, Amy	5317729749	Ajksm18@gmail.com
			Maldonado, Gina	4029687053	glmald6777@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Keck, Amy	5317729749	Ajksm18@gmail.com
			Maldonado, Gina	4029687053	glmald6777@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Keck, Amy	5317729749	Ajksm18@gmail.com
			Maldonado, Gina	4029687053	glmald6777@gmail.com

Agency Name: Kersten Borer LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kersten Borer LLC	7602 Pacific Street Suite 304 Omaha, NEBRASKA 68114	Adult Co-Occurring Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Adult Mental Health Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Adult Mental Health Outpatient Counseling (Individual)	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Adult Substance Use Addendum	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Adult Substance Use Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Adult Substance Use Outpatient Treatment (Individual)	Borer, Kersten	4025155383	kerstenborerllc@cox.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 - Landmark Center	1299 Farnam Street Suite 300 Omaha, NEBRASKA 68102	Adult Sex Offense-Specific Polygraph Examination	Kieso, Christian	6052548365	kiesopolygraph@gmail.com

Agency Name: Lindsay Denker LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lindsay Denker LLC	9239 W Center Rd, Suite 226 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Mental Health Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Psychological	Denker,	4029326643	therapywithlinds@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lindsay Denker LLC	9239 W Center Rd, Suite 226 Omaha, NEBRASKA 68124	Evaluation	Lindsay		
		Adult Substance Use Addendum	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Substance Use Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Denker, Lindsay	4029326643	therapywithlinds@gmail.com

Agency Name: Looking Forward Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Looking Forward Counseling Services	13513 Cottner St. Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Adult Mental Health Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Adult Substance Use Addendum	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Adult Substance Use Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com

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	7929 W. Center Rd Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lutheran Family Services	7929 W. Center Rd Omaha, NEBRASKA 68124	Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Mental Health Outpatient Counseling (Group)	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Mental Health Outpatient Counseling (Individual)	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Addendum	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Evaluation	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Outpatient Treatment (Group)	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Outpatient Treatment (Individual)	McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
	11011 Q Street, Building C Suite 104 Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	11011 Q Street, Building C Suite 104 Omaha, NEBRASKA 68137	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: MAKE A DIFFERENCE OUTREACH TRANSITIONAL PROGRAM

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
MAKE A DIFFERENCE OUTREACH TRANSITIONAL PROGRAM	1905 SPENCER ST Omaha, NEBRASKA 68110	Adult Mental Health Evaluation			
		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)			
		Transitional Living - Level 1			
		Transitional Living - Level 2			

Agency Name: Maggett Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	11907 Arbor St. Suite A Omaha, NEBRASKA	Adult Co-Occurring Evaluation	Maggett, Joseph	4023126840	joseph@maggett-counseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	68144	Adult Mental Health Outpatient Counseling (Individual)	Maggett, Joseph	4023126840	joseph@maggett-counseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Maggett, Joseph	4023126840	joseph@maggett-counseling.com

Agency Name: McCullough Counseling & Recovery LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
McCullough Counseling & Recovery LLC	1299 Farnam St Ste #357 Omaha, NEBRASKA 68102	Adult Co-Occurring Evaluation	McCullough, Cynthia	4022506153	mcc3@cox.net
		Adult Mental Health Evaluation	McCullough, Cynthia	4022506153	mcc3@cox.net
		Adult Mental Health Outpatient Counseling (Individual)	McCullough, Cynthia	4022506153	mcc3@cox.net
		Adult Substance Use Addendum	McCullough, Cynthia	4022506153	mcc3@cox.net
		Adult Substance Use Evaluation	McCullough, Cynthia	4022506153	mcc3@cox.net
		Adult Substance Use Outpatient Treatment (Individual)	McCullough, Cynthia	4022506153	mcc3@cox.net

Agency Name: Megan Wolff Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Megan Wolff Counseling	8790 F Street Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Wolff, Megan	5312257017	megan@meganwolffcounseling.com
		Adult Mental Health Evaluation	Wolff, Megan	5312257017	megan@meganwolffcounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Megan Wolff Counseling	8790 F Street Omaha, NEBRASKA 68127	Adult Substance Use Addendum	Wolff, Megan	5312257017	megan@meganwolffcounseling.com
		Adult Substance Use Evaluation	Wolff, Megan	5312257017	megan@meganwolffcounseling.com

Agency Name: Mental Health Association of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Green House	6055 Country Club Lane Omaha, NEBRASKA 68152	Transitional Living - Level 2			

Agency Name: Michael House

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Michael House	6607 Maple St. Omaha, NEBRASKA 68104	Transitional Living - Level 2			
	4821 Ames Ave. Omaha, NEBRASKA 68104	Transitional Living - Level 2			
	4825 Ames Ave. Omaha, NEBRASKA 68104	Transitional Living - Level 2			

Agency Name: Midwest Community Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midwest Community Services LLC	9507 Q street Omaha, NEBRASKA 68127	Adult Sex Offense-Specific Evaluation			

Agency Name: NOVA Treatment Community

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
NOVA Treatment Community	8502 Mormon Bridge Road Omaha, NEBRASKA 68152	Adult Co-Occurring Capable Short-Term Residential	Henderson, Kimberly	4029918558	khenderson@novatc.org

Agency Name: Nala Care Mental Health

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nala Care Mental Health	13750 Millard Ave Ste 201 Omaha, NEBRASKA 68130	Adult Co-Occurring Evaluation	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Mental Health Evaluation	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Mental Health Outpatient Counseling (Individual)	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Addendum	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Evaluation	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Outpatient Treatment (Individual)	Gormley, Tiffany	5318002641	Tgormley@nalamentalhealth.com

Agency Name: New Balance Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
new balance counseling	6056 Ames Ave Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
		Adult Mental Health Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
		Adult Substance Use Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com

Agency Name: New Beginnings Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Beginnings Counseling	11414 W. Center Road Ste 247 Omaha, NEBRASKA	Adult Co-Occurring Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Beginnings Counseling	68144	Adult Mental Health Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Mental Health Outpatient Counseling (Individual)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Addendum	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Outpatient Treatment (Individual)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
	10840 Old Mill Rd Ste 300 Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Mental Health Outpatient Counseling (Individual)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Addendum	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Adult Substance Use Outpatient Treatment (Individual)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com

Agency Name: New Direction Counseling, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brian Brown	12020 Shamrock Plaza #200 PO Box 6195 Omaha NE 68106 Omaha, NEBRASKA 68154	Adult Substance Use Addendum	Brown, Brian	4029539180	bcbrown51@gmail.com
		Adult Substance Use Evaluation	Brown, Brian	4029539180	bcbrown51@gmail.com

Agency Name: New Hope Agency, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Hope Agency, PC	8790 F Street Studio 823 Omaha, NEBRASKA 68127	Adult Mental Health Evaluation			

Agency Name: Next Step Counseling Service

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Next Step Counseling Service	6001 North 30th Street Omaha, NEBRASKA 68111	Adult Substance Use Evaluation	Foxx, Karen	4023121009	foxxkd@aol.com
		Adult Substance Use Outpatient Treatment (Individual)	Foxx, Karen	4023121009	foxxkd@aol.com

Agency Name: Northside Behavioral Health Group

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	14216 Dayton Circle STE 5 Omaha, NEBRASKA 68137	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: OMNI Inventive Care

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OMNI Inventive Care	5115 F Street Omaha, NEBRASKA 68117	Adult Co-Occurring Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Adult Mental Health Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
			Whiteley, Kelsey	4022130877	kelsey.whiteley@omniic.com
		Adult Psychological Evaluation			
		Adult Substance Use Evaluation	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com

Agency Name: Omaha Home for Boys (OHB)

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Omaha Home for Boys (OHB)	4343 N 52nd Street Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Omaha Insomnia and Psychiatric Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Omaha Insomnia and Psychiatric Services	13917 Gold Circle Omaha, NEBRASKA 68144	Adult Medication Management			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Psychological Evaluation			

Agency Name: OneWorld Community Health Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OneWorld Community Health Center	4920 South 30th Street Omaha, NEBRASKA 68107	Adult Co-Occurring Evaluation			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OneWorld Community Health Center	4920 South 30th Street Omaha, NEBRASKA 68107	Adult Mental Health 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: Open Door Mission

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Open Door Mission	2828 N 23 St East Omaha, NEBRASKA 68110	Transitional Living - Level 2			

Agency Name: Optum Behavioral Care of Ohio DBA A Better Way Therapy of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Optum Behavioral Care of Ohio DBA A Better Way Therapy of Nebraska	11204 Davenport St Ste 200 Omaha, NEBRASKA 68154	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Optum Behavioral Care of Ohio dba Capstone Behavioral Health of Nebraska

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Adult Mental Health Evaluation	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Jones, Kendra	4025901735	kwjones@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Adult Mental Health Outpatient Counseling (Individual)	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Jones, Kendra	4025901735	kwjones@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Lindner, Jennifer	4025172948	jlindner@capstonebehavioralhealth.com
			Mills, Ruth	4029578244	rmills@capstonebehavioralhealth.com
			Morell,	4026148444	emorell@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Adult Mental Health Outpatient Counseling (Individual)	Elizabeth		
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Signorelli, Mary	4026148444	msignorelli@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Adult Psychological Evaluation	Lindner, Jennifer	4025172948	jlindner@capstonebehavioralhealth.com
			Morell, Elizabeth	4026148444	emorell@capstonebehavioralhealth.com
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
		Adult Substance Use Addendum	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Adult Substance Use Evaluation	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Adult Substance Use Evaluation	Jacquelyn		
		Adult Substance Use Outpatient Treatment (Group)	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Adult Substance Use Outpatient Treatment (Individual)	Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com

Agency Name: Our Square

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Our Square	6120 Sprague Omaha, NEBRASKA 68104	Transitional Living - Level 2			

Agency Name: Owens Educational Services, Inc.

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Owens Educational Services, Inc.	7413 N 30th Street Omaha, NEBRASKA 68112	Continuous Alcohol Monitoring (CAM)	Bothwell, Robin	4026583796	Robin.Bothwell@OwensEducationalServices.org

Agency Name: Papa Josh House LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Papa Josh House LLC	3348 Ames ave Omaha, NEBRASKA 68111	Transitional Living - Level 1	Flowers, LaRhonda	4027884846	larhonda@r3cc.net

Agency Name: Pathways Therapy Solutions, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pathways Therapy Solutions, LLC	7905 L Street Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Henry, Laurie	4028853827	lauriehenry@pathwaystherapysolutions.com

Agency Name: Perceptions

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Perceptions	11819 Miracle Hills Drive Suite 203 Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Andres, Sandra	4024144131	sandy-andres@perceptionstherapy.com
			Harrison, Elizabeth	4026748427	Liz-harrison@perceptionstherapy.com
			Peterson, Shannon	4022044447	shannon-peterson@perceptionstherapy.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Perceptions	11819 Miracle Hills Drive Suite 203 Omaha, NEBRASKA 68154	Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)	Peterson, Shannon	4022044447	shannon-peterson@perceptionstherapy.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	2602 J St Omaha, NEBRASKA 68107	Adult Co-Occurring Evaluation	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com

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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	2602 J St Omaha, NEBRASKA 68107	Adult Substance Use Evaluation	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Kenedy, Angela	4027345275	akenedy@poncatribes-ne.gov
			Stephens, Jasmine	4023692714	jasminepaige324@gmail.com

Agency Name: Programming Life 101

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Programming Life 101	7530/7532 Blondo Street Omaha, NEBRASKA 68134	Transitional Living - Level 2			

Agency Name: R Squared Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
R Squared Counseling LLC	8790 F Street Suite 527 Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com

Agency Name: RADIUS

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
RADIUS	5040 Grand Avenue	In Home Family	Parmer, Alisa	5318950034	alisa.parmar@radiusomaha.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Omaha, NEBRASKA 68104	Service (IHFS)			

Agency Name: Rainwood Healing Space-LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Rainwood Healing space LLC	6211 North 75th street Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org
		Adult Medication Management			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org
		Adult Substance Use Addendum	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org
		Adult Substance Use Evaluation	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org
		Adult Substance Use Outpatient Treatment (Individual)	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org

Agency Name: Recovery Stay

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Recovery Stay	3313 Spaulding St Omaha, NEBRASKA 68111	Transitional Living - Level 1			

Agency Name: Reed Campbell Counseling & Consulting, PC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Reed Campbell Counseling & Consulting, PC	319 S 17th St Suite 232 Omaha, NEBRASKA 68102	Adult Co-Occurring Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Mental Health Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Mental Health Outpatient Counseling (Individual)	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Substance Use Addendum	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Substance Use Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Substance Use Outpatient Treatment (Individual)	Campbell, Reed	4029152251	reed@rccounselingconsulting.com

Agency Name: Renewed Life Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Renewed Life Counseling, LLC	13520 Discovery Drive Suite 202 Omaha, NEBRASKA 68137	Adult Mental Health Evaluation	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org
		Adult Mental Health Outpatient Counseling (Individual)	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org
		Adult Substance Use Outpatient Treatment (Individual)	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org

Agency Name: Renewed Vision Counseling and Developmental Disability Center

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	4610 S 133rd St Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Resiliency & Recovery, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Resiliency & Recovery, LLC	108 N 49th Street Suite B103 Omaha, NEBRASKA 68132	Adult Gambling Outpatient Counseling (Individual/Group)			
		Adult Substance Use Addendum	Bolter, Shannon	4022003808	shannon@recoveryomaha.org
		Adult Substance Use Evaluation	Bolter, Shannon	4022003808	shannon@recoveryomaha.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bolter, Shannon	4022003808	shannon@recoveryomaha.org
		Adult Substance Use Outpatient Treatment (Group)	Bolter, Shannon	4022003808	shannon@recoveryomaha.org
		Adult Substance Use Outpatient Treatment (Individual)	Bolter, Shannon	4022003808	shannon@recoveryomaha.org

Agency Name: Restore Rebuild Reconnect Counseling Center LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Restore Rebuild Reconnect Counseling Center LLC	1941 S. 42nd street Suite 506 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Mental Health Outpatient Counseling (Group)	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-	4027884846	paige@r3cc.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Restore Rebuild Reconnect Counseling Center LLC	1941 S. 42nd street Suite 506 Omaha, NEBRASKA 68105	Adult Mental Health Outpatient Counseling (Group)	Corr, Paige		
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Mental Health Outpatient Counseling (Individual)	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Substance Use Addendum	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Substance Use Evaluation	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers,	4027884846	larhonda@r3cc.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Restore Rebuild Reconnect Counseling Center LLC	1941 S. 42nd street Suite 506 Omaha, NEBRASKA 68105	Adult Substance Use Evaluation	LaRhonda		
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Substance Use Outpatient Treatment (Individual)	Botello, Meagan	7123149814	meagan@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net

Agency Name: Restored Life Therapy Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Restored Life Therapy Services LLC	1529 S 203 St Suite 103 Omaha, NEBRASKA 68130	Adult Co-Occurring Evaluation	Habrich, Carla	4028197647	carlajo.restored@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Restored Life Therapy Services LLC	1529 S 203 St Suite 103 Omaha, NEBRASKA 68130	Adult Mental Health Evaluation	Habrich, Carla	4028197647	carlajo.restored@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Habrich, Carla	4028197647	carlajo.restored@gmail.com
		Adult Substance Use Addendum	Habrich, Carla	4028197647	carlajo.restored@gmail.com
		Adult Substance Use Evaluation	Habrich, Carla	4028197647	carlajo.restored@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Habrich, Carla	4028197647	carlajo.restored@gmail.com

Agency Name: Results Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Results Counseling LLC	8031 W. Center Rd. Ste. 324 Omaha, NEBRASKA 68124	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Muhlbauer, Cynthia	4025379628	cmuhlbauer@resultscounselingservices.com

Agency Name: Root of It LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Root of It LLC	5421 N 103rd St Suite 100 Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Root, Perry	4022157327	perry@therootofit.net
		Adult Mental Health Evaluation	Root, Perry	4022157327	perry@therootofit.net
		Adult Mental Health Outpatient Counseling (Individual)	Root, Perry	4022157327	perry@therootofit.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Root of It LLC	5421 N 103rd St Suite 100 Omaha, NEBRASKA 68134	Adult Substance Use Addendum	Root, Perry	4022157327	perry@therootofit.net
		Adult Substance Use Evaluation	Root, Perry	4022157327	perry@therootofit.net
		Adult Substance Use Outpatient Treatment (Individual)	Root, Perry	4022157327	perry@therootofit.net

Agency Name: SAVE OUR KIDS AND YOUTH LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
SAVE OUR KIDS AND YOUTH LLC	4430 FLORENCE BLVD Omaha, NEBRASKA 68102	Adult Substance Use Evaluation			

Agency Name: Santa Monica, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Santa Monica, Inc.	401 S 39th Street Omaha, NEBRASKA 68131	Adult Substance Use Addendum	Gagne, Amber	4029559649	amber@santamonicahouse.org
			Jackson, Larissa	4025100668	SIRelations@yahoo.com
			Motter , Shannon	4025587088	shannon@santamonicahouse.org
		Adult Substance Use Evaluation	Coffman, Cecilia	4025587088	cecilia@santamonicahouse.org
			Gagne, Amber	4029559649	amber@santamonicahouse.org
			Jackson, Larissa	4025100668	SIRelations@yahoo.com
			Motter , Shannon	4025587088	shannon@santamonicahouse.org
		Adult Substance Use Halfway House	Coffman, Cecilia	4025587088	cecilia@santamonicahouse.org
			Gagne, Amber	4029559649	amber@santamonicahouse.org
			Jackson, Larissa	4025100668	SIRelations@yahoo.com
			Motter ,	4025587088	shannon@santamonicahouse.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Santa Monica, Inc.	401 S 39th Street Omaha, NEBRASKA 68131	Adult Substance Use Halfway House	Shannon		

Agency Name: Season of Change Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Season of Change Counseling LLC	13513 Cottner Street Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com
		Adult Mental Health Evaluation	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com
		Adult Substance Use Addendum	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com
		Adult Substance Use Evaluation	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Mertes, Courtney	4025908766	seasonofchangecounseling@gmail.com

Agency Name: Serenity Matters Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Serenity Matters Counseling	5620 Ames Ave Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com
		Adult Mental Health Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Prince, Reginald	4028303877	norwal2003@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Serenity Matters Counseling	5620 Ames Ave Omaha, NEBRASKA 68104	Adult Substance Use Addendum	Browning-Prince, Crystal	4028303890	cbrowningprince@gmail.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
		Adult Substance Use Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Browning-Prince, Crystal	4028303890	cbrowningprince@gmail.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
			Tripp, Contennia	4026163672	contennia@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	Prince, Reginald	4028303877	norwal2003@gmail.com
			Tripp, Contennia	4026163672	contennia@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Browning-Prince, Crystal	4028303890	cbrowningprince@gmail.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
			Tripp, Contennia	4026163672	contennia@yahoo.com

Agency Name: Siemer Counseling & Assessments LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Siemer Counseling & Assessments LLC	12020 Shamrock Plaza Suite 200 Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation	Siemer-Daisley, Kris	4022105156	kris.siemer@gmail.com
		Adult Mental Health Evaluation	Siemer-Daisley, Kris	4022105156	kris.siemer@gmail.com
		Adult Mental Health	Siemer-	4022105156	kris.siemer@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Siemer Counseling & Assessments LLC	12020 Shamrock Plaza Suite 200 Omaha, NEBRASKA 68154	Outpatient Counseling (Individual)	Daisley, Kris		
		Adult Substance Use Addendum	Siemer-Daisley, Kris	4022105156	kris.siemer@gmail.com
		Adult Substance Use Evaluation	Siemer-Daisley, Kris	4022105156	kris.siemer@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Siemer-Daisley, Kris	4022105156	kris.siemer@gmail.com

Agency Name: Siena Francis House

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Siena Francis House	1111 Nth 17th st Omaha, NEBRASKA 68102	Transitional Living - Level 2	Timm, Jessica	4027213125	jtimmm@sienaf Francis.org

Agency Name: Solutions Sober Living, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Solutions - 60th St House	2100 S 60th St Omaha, NEBRASKA 68106	Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	Michelle@solutionssoberliving.org
Solutions - Cuming House	3423 Cuming St Omaha, NEBRASKA 68131	Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	Michelle@solutionssoberliving.org
Solutions - Maple House	9508 Maple St Omaha, NEBRASKA 68134	Transitional Living - Level 2			
Solutions - Miami House	7724 Miami St Omaha, NEBRASKA 68134	Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	Michelle@solutionssoberliving.org

Agency Name: SoundMind Therapy Services LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
SoundMind Therapy Services LLC	13520 Discovery Dr. Ste 203 Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Adult Mental Health Evaluation	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Adult Substance Use Addendum	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Adult Substance Use Evaluation	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
	13520 Discovery Dr. Ste 203 Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: Spence Counseling Center

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Spence Counseling Center	12035 Q St Omaha, NEBRASKA 68137	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Steadfast Therapy, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Steadfast Therapy, LLC	1045 n 115th st Suite 150 Omaha, NEBRASKA 68154	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Stephen Center, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stephen Center, Inc	5217 S 28th St Omaha, NEBRASKA 68107	Adult Co-Occurring Capable Short-Term Residential	Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Co-Occurring Evaluation	Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Addendum	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Evaluation	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen,	7123261960	sheila.griffen@stephencenter.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stephen Center, Inc	5217 S 28th St Omaha, NEBRASKA 68107	Adult Substance Use Evaluation	Sheila		
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Halfway House	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Outpatient Treatment (Group)	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Outpatient Treatment (Individual)	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org
		Adult Substance Use Short-Term Residential	Eby, Lauren	4027155447	lauren.eby@stephencenter.org
			Griffen, Sheila	7123261960	sheila.griffen@stephencenter.org
			Nissen, Barbara	4025587088	barbara.nissen@stephencenter.org

Agency Name: Terrell Therapy

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Terrell Therapy	8790 F Street Omaha, NE 68127 Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Terrell, Timothy	4025950780	Tim.PRC11@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: The New Beginnings Transitional Living Home LLC - The Elm House

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Cedar House	7515 Girard Street Omaha, NEBRASKA 68122	Transitional Living - Level 2			

Agency Name: The Ogba Way

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	3021 Sheffield St. Omaha, NEBRASKA 68112	Transitional Living - Level 2			
	6916 N. 24th ST Omaha, NEBRASKA 68112	Transitional Living - Level 1	Ogba, Joe	4027143520	joeogba35@gmail.com

Agency Name: The Relationship Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Relationship Center	10850 Emmet st Omaha, NEBRASKA 68164	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Theodore J. DeLaet, Ph.D., P.C.

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Theodore J. DeLaet, Ph.D., P.C.	11414 West Center Road Suite 243 Omaha, NEBRASKA 68144	Adult Co-Occurring Evaluation	DeLaet, Theodore	4023338210	ted.delaet@wcpp.omhcoxmail.com
		Adult Psychological Evaluation	DeLaet, Theodore	4023338210	ted.delaet@wcpp.omhcoxmail.com
		Adult Sex Offense-Specific Evaluation	DeLaet, Theodore	4023338210	ted.delaet@wcpp.omhcoxmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	DeLaet, Theodore	4023338210	ted.delaet@wcpp.omhcoxmail.com

Agency Name: Theraha, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Theraha, LLC	12020 Shamrock Plz. Suite 200 Omaha, NEBRASKA 68154	Adult Mental Health Outpatient Counseling (Individual)	Talbott, Kira	4029152064	Kira@therapyomaha.com
		Adult Substance Use Addendum	Talbott, Kira	4029152064	Kira@therapyomaha.com
		Adult Substance Use Evaluation	Talbott, Kira	4029152064	Kira@therapyomaha.com
		Adult Substance Use Outpatient Treatment (Individual)	Talbott, Kira	4029152064	Kira@therapyomaha.com

Agency Name: Therapy Resource Associates, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Therapy Resource Associates, Inc.	10824 Old Mill Road Suite #21 Omaha, NEBRASKA 68154	Adult Mental Health Evaluation	DeVries, Shawn	4023306060	sdevries0523@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	DeVries, Shawn	4023306060	sdevries0523@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Therapy Resource Associates, Inc.	10824 Old Mill Road Suite #21 Omaha, NEBRASKA 68154	Adult Psychological Evaluation			
		Adult Substance Use Evaluation	DeVries, Shawn	4023306060	sdevries0523@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	DeVries, Shawn	4023306060	sdevries0523@gmail.com

Agency Name: Tim Privitera

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tim Privitera	11218 Elm St. Suite B Omaha, NEBRASKA 68144	Adult Co-Occurring Evaluation	Privitera, Timothy	4028131727	tprivitera@gmail.com
		Adult Medication Management			
		Adult Mental Health Evaluation	Privitera, Timothy	4028131727	tprivitera@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Privitera, Timothy	4028131727	tprivitera@gmail.com
		Adult Substance Use Addendum	Privitera, Timothy	4028131727	tprivitera@gmail.com
		Adult Substance Use Evaluation	Privitera, Timothy	4028131727	tprivitera@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Privitera, Timothy	4028131727	tprivitera@gmail.com

Agency Name: Trisha Troia Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Trisha Troia Counseling	1406 Veterans Drive Suite 206 Omaha, NEBRASKA 68022	Adult Co-Occurring Evaluation	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Mental Health	Troia, Trisha	4022900543	trishtroia@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Trisha Troia Counseling	1406 Veterans Drive Suite 206 Omaha, NEBRASKA 68022	Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Substance Use Addendum	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Substance Use Evaluation	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Troia, Trisha	4022900543	trishtroia@gmail.com

Agency Name: True Vine Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
True Vine Counseling	15606 Elm Street Suite 100 Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Key, Kristina	4029991716	kristina.key@truevinecounseling.net
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Mental Health Evaluation	Key, Kristina	4029991716	kristina.key@truevinecounseling.net
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	Key, Kristina	4029991716	kristina.key@truevinecounseling.net
			McNeil, William	4027537302	Wsmcneil09@gmail.com
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
True Vine Counseling	15606 Elm Street Suite 100 Omaha, NEBRASKA 68134	Adult Substance Use Evaluation	Key, Kristina	4029991716	kristina.key@truevinecounseling.net
			McNeil, William	4027537302	Wsmcneil09@gmail.com
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	McNeil, William	4027537302	Wsmcneil09@gmail.com
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	McNeil, William	4027537302	Wsmcneil09@gmail.com
	5425 N 103rd Street Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Mental Health Evaluation	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Mental Health Outpatient Counseling (Individual)	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Addendum	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Evaluation	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance			

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	5425 N 103rd Street Omaha, NEBRASKA 68134	Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net

Agency Name: UFY Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
UFY Counseling	4611 S 96th St #236 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Cappellano, Kimberly	4022376415	kcappellano88@outlook.com
		Adult Mental Health Outpatient Counseling (Individual)	Cappellano, Kimberly	4022376415	kcappellano88@outlook.com
		Adult Substance Use Addendum	Cappellano, Kimberly	4022376415	kcappellano88@outlook.com
			Carter, Evan	4026587315	eecarter05@gmail.com
		Adult Substance Use Evaluation	Cappellano, Kimberly	4022376415	kcappellano88@outlook.com
			Carter, Evan	4026587315	eecarter05@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Cappellano, Kimberly	4022376415	kcappellano88@outlook.com

Agency Name: Unconventional Healing LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Unconventional Healing LLC	4214 N 64th St Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Unconventional Healing LLC	4214 N 64th St Omaha, NEBRASKA 68104	Adult Sex Offense-Specific Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: University of Nebraska at Omaha Counseling and Psychological Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
University of Nebraska at Omaha Counseling and Psychological Services	6001 Dodge Street H&K 101 Omaha, NEBRASKA 68182	Adult Substance Use Evaluation			

Agency Name: Unstuck Yourself LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Unstuck Yourself LLC	750 S 68th Ave Omaha, NEBRASKA 68106	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Valley Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Valley Hope	11815 M St Suite 100 Omaha, NEBRASKA 68137	Adult Substance Use Evaluation	Chavis , Joe	4029918824	joechavis@valleyhope.org
			Kidd, Markie	4029918824	markiekidd@valleyhope.org
			Remington, Michael	4024528001	mikalrem79@gmail.com
		Adult Substance Use	Kidd, Markie	4029918824	markiekidd@valleyhope.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Valley Hope	11815 M St Suite 100 Omaha, NEBRASKA 68137	Intensive Outpatient Counseling (IOP)	Remington, Michael	4024528001	mikalrem79@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Chavis , Joe	4029918824	joechavis@valleyhope.org
			Kidd, Markie	4029918824	markiekidd@valleyhope.org
			Remington, Michael	4024528001	mikalrem79@gmail.com
	7703 Serum Ave Ralston, NEBRASKA 68127	Adult Co-Occurring Evaluation			
		Adult Substance Use Evaluation	Chavis , Joe	4029918824	joechavis@valleyhope.org
			Hansen, Jason	4029918824	jasonhansen@valleyhope.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Chavis , Joe	4029918824	joechavis@valleyhope.org
			Hansen, Jason	4029918824	jasonhansen@valleyhope.org
		Adult Substance Use Outpatient Treatment (Group)	Chavis , Joe	4029918824	joechavis@valleyhope.org
			Hansen, Jason	4029918824	jasonhansen@valleyhope.org

Agency Name: Vigilnet America LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Vigilnet America LLC	4862 S 96th Street Suite 2 Omaha, NEBRASKA 68127	Continuous Alcohol Monitoring (CAM)	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com
		Continuous Alcohol Monitoring (CAM) with EM	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com
		Non-Monetary Continuous Alcohol Monitoring (CAM)	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com

Agency Name: Washington Counseling

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Visions	1425 N 18th Street Omaha, NEBRASKA 68102	Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Washington, Harry	4027060267	fresh_dougie_osky@yahoo.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Washington, Harry	4027060267	fresh_dougie_osky@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	Washington, Harry	4027060267	fresh_dougie_osky@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Washington, Harry	4027060267	fresh_dougie_osky@yahoo.com
Washington Counseling	7200 S. 84th Omaha NE., 68124 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Webster Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Webster Counseling LLC	8031 W Center Rd Ste 307 Omaha, NEBRASKA 68124	Adult Mental Health Outpatient Counseling (Individual)	Webster, Brooke	4029519242	bwebsterbusiness@gmail.com

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Agency Name: Wicks Psychological Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wicks Psychological Services, Inc.	6550 S. 84th Street Suite 300 Omaha, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)	Burger, Rodney	4023397991	office@wickspych.com
			Wicks, Chris	4023397991	cwicks@cox.net

Agency Name: Wiles Counseling & Assessments, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wiles Counseling & Assessments, Inc.	7551 Main Street, Suite 259 Ralston, NEBRASKA 68127	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Wonderful Counselor

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wonderful Counselor	1524 Cuming St Apt 215 Omaha, NEBRASKA 68102	Adult Mental Health Outpatient Counseling (Individual)	Mitchell, Sheree	4028121575	mitchellsheree3@gmail.com

Agency Name: Workman Counseling L.L.C.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Workman Counseling L.L.C.	8031 W. Center Rd. Suite 322 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Workman, Jason	4023203875	Jason@Workmancounseling.com
		Adult Mental Health Evaluation	Workman, Jason	4023203875	Jason@Workmancounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Workman, Jason	4023203875	Jason@Workmancounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Workman Counseling L.L.C.	8031 W. Center Rd. Suite 322 Omaha, NEBRASKA 68124	Adult Substance Use Addendum	Workman, Jason	4023203875	Jason@Workmancounseling.com
		Adult Substance Use Evaluation	Workman, Jason	4023203875	Jason@Workmancounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Workman, Jason	4023203875	Jason@Workmancounseling.com

Agency Name: Youth Futures

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Youth Futures	2435 S 130th Circle Suite 200 Omaha, NEBRASKA 68144	PRS-BIP	Taylor, Susan	4026971123	susantaylor.youthfutures@gmail.com

Agency Name: community based services llc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
community based services llc	po box 34205 Omaha, NEBRASKA 68134	Community Based Services Phase III	Jones, Diante	4027060136	diant@communitybasedservices.co
			allen, matthew	4025102732	mallen@communitybasedservices.co
		Continuous Alcohol Monitoring (CAM)	allen, matthew	4025102732	mallen@communitybasedservices.co

Agency Name: diaz counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
diaz counseling	4107 so 22nd street Omaha, NEBRASKA 68107	Adult Substance Use Addendum	diaz, isabel	4027061847	diazisabel2007@yahoo.com
		Adult Substance Use Evaluation	diaz, isabel	4027061847	diazisabel2007@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
diaz counseling	4107 so 22nd street Omaha, NEBRASKA 68107	Adult Substance Use Intensive Outpatient Counseling (IOP)	diaz, isabel	4027061847	diazisabel2007@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	diaz, isabel	4027061847	diazisabel2007@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	diaz, isabel	4027061847	diazisabel2007@yahoo.com
		PRS-BIP	diaz, isabel	4027061847	diazisabel2007@yahoo.com