Administrative Office of Courts & Probation

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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 416T 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: A Desired Life Therapy and Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A Desired Life Therapy and Counseling LLC	8031 W Center Rd Suite 210 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com
		Adult Mental Health Evaluation	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com
		Adult Mental Health Outpatient Counseling (Group)	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com
		Adult Mental Health Outpatient Counseling	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A Desired Life Therapy and Counseling LLC	8031 W Center Rd Suite 210 Omaha, NEBRASKA 68124	(Individual)			
		Adult Substance Use Addendum	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com
		Adult Substance Use Evaluation	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Kaipust, Jamie	5312253064	jamie.licsw@Hotmail.com

Agency Name: A New Start LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A New Start LLC	3701 Saratoga street Omaha, NEBRASKA 68111	15 Day TL Extension - Level 1	Watts, Dwan	4029436100	anewstartllc25@yahoo.com
		45 Day Transitional Living - Level 1	Watts, Dwan	4029436100	anewstartllc25@yahoo.com
		Transitional Living - Level 1	Watts, Dwan	4029436100	anewstartllc25@yahoo.com

Agency Name: A Place for Grace

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A Place for Grace	8790 F. St Suite 601 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Brotherton, Grace	7126217300	gracelyne@aplaceforgrace20.com
		Adult Mental Health Outpatient Counseling (Individual)	Brotherton, Grace	7126217300	gracelyne@aplaceforgrace20.com
		Adult Substance Use Evaluation	Brotherton, Grace	7126217300	gracelyne@aplaceforgrace20.com

Agency Name: AM Counseling and Consulting

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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	Adult Co-Occurring Evaluation	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Gambling Outpatient Counseling (Individual/Group)	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Mental Health Outpatient Counseling (Individual)	Alvarez, Evette	4028075117	evette@amcounseling.org
			Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Substance Use Addendum	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Substance Use Evaluation	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Sanchez, Laura	4028075117	laura@amcounseling.org
		Adult Substance Use Outpatient Treatment (Individual)	Alvarez, Evette	4028075117	evette@amcounseling.org
			Sanchez, Laura	4028075117	laura@amcounseling.org

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

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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 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

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

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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	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 Treatment (Individual)	Almquist, Keith	4026693665	AchievementCounseling@Gmail.com

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

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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 Sex Offense-Specific Evaluation	Zak, Daniel	4025079803	daniel.cameron.zak@gmail.com
		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: 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

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ann's Couch	8112 Grand Avenue TELEHEALTH ONLY Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Williams, Ann	4026130691	anngwilliams80@gmail.com
		Adult Mental Health Evaluation	Williams, Ann	4026130691	anngwilliams80@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Williams, Ann	4026130691	anngwilliams80@gmail.com
		Adult Substance Use Addendum	Williams, Ann	4026130691	anngwilliams80@gmail.com
		Adult Substance Use Evaluation	Williams, Ann	4026130691	anngwilliams80@gmail.com

Agency Name: Apex Foster Care, Inc. DBA 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	Stanley, Justine	4025715400	justine@apexfamily.org

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

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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: Aspired Visions Counseling Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Aspired Visions Counseling Services, LLC	2111 South 67th Street Suite 300 (Office) 301 Omaha, NEBRASKA 68106	Adult Co-Occurring Evaluation	Sparks, Albert	4027884846	albert.avcs@protonmail.com
		Adult Mental Health Evaluation	Sparks, Albert	4027884846	albert.avcs@protonmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Sparks, Albert	4027884846	albert.avcs@protonmail.com
		Adult Substance Use Evaluation	Sparks, Albert	4027884846	albert.avcs@protonmail.com

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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
		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 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 Co-Occurring Evaluation	Burton, KeNesha	4026182285	bfirst.kb@gmail.com
			Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Mental Health Evaluation	Burton, KeNesha	4026182285	bfirst.kb@gmail.com
			Luck, Jonnae	5627465150	jonnae@calmindstherapy.com

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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 Mental Health Outpatient Counseling (Individual)	Burton, KeNesha	4026182285	bfirst.kb@gmail.com
			Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Substance Use Addendum	Burton, KeNesha	4026182285	bfirst.kb@gmail.com
			Luck, Jonnae	5627465150	jonnae@calmindstherapy.com
		Adult Substance Use Evaluation	Burton, KeNesha	4026182285	bfirst.kb@gmail.com
			Luck, Jonnae	5627465150	jonnae@calmindstherapy.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	5015 DODGE ST SUITE 300 Omaha, NEBRASKA 68132	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 Health Outpatient Counseling (Individual)	Kola, Betty	4029337577	buoyantfamilyservices@gmail.com
			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/	Kola, Betty	4029337577	buoyantfamilyservices@gmail.com
			Stanton, Christopher	4029337577	chriss.bfs@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	5015 DODGE ST SUITE 300 Omaha, NEBRASKA 68132	Group)			
		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	1501 Mike Fahey Drive Suite 120 Omaha, NEBRASKA 68102	Adult Gambling Outpatient Counseling (Individual/Group)			
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		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	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	1501 Mike Fahey Drive Suite 120 Omaha, NEBRASKA 68102	Evaluation	Frank		
		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

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
			Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@bearcompanycounseling.com
		Adult Mental Health Evaluation	Crayne, Laura	4025123528	laurie.crayne@bearcompanycounseling.com
			Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com

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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 Mental Health Evaluation	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	Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@bearcompanycounseling.com
		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
			Moore, Canterra	4024014333	terra@bearcompanycounseling.com
			Ruei, Zakarias	4029058425	Zak@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	Dibert, Brittany	5313557912	brittany.dibert@boystown.org
			Hansen, Lyndsey	4029553900	lyhansen@childrensnebraska.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	Dibert, Brittany	5313557912	brittany.dibert@boystown.org
			Hansen, Lyndsey	4029553900	lyhansen@childrensnebraska.org
			Pedersen, Melissa	5313557907	melissa.pedersen@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	Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
			Stoller, Christina	5313553379	christina.stoller@boystown.org
		Adult Substance Use Evaluation	Dibert, Brittany	5313557912	brittany.dibert@boystown.org
			Hansen, Lyndsey	4029553900	lyhansen@childrensnebraska.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)	Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@boystown.org
			Hansen, Lyndsey	4029553900	lyhansen@childrensnebraska.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 Nebraska In Home Family Services	314 Sudkya Boys Town, NEBRASKA 68010	In Home Family Service (IHFS)	Birkland, Hannah	5313553171	hannah.birkland@boystown.org
			Brown, Curtis	4026607905	Curtis.brown@boystown.org
			Darnell, Guy	4023168210	guy.darnell@boystown.org
			Davis, Dontae	4026797128	marquce1999@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town Eastern Nebraska In Home Family Services	314 Sudkya Boys Town, NEBRASKA 68010	In Home Family Service (IHFS)	Johnsen, Kara	5314447421	kara.johnsen@boystown.org
			Prouty, Emma	4028103748	emma.prouty@boystown.org
			Reginald, Anton	4025471860	Anton.reginald@boystown.org
			Spidell, Rylee	4026706356	rylee.spidell@boystown.org
			Strock , Cade	4026797116	cade.strock@boystown.org
			Vipond, Bradley	4022064309	bradley.vipond@boystown.org

Agency Name: Boyz to men

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boyz to men	5225 NW Radial Hwy Omaha, NEBRASKA 68104	15 Day TL Extension - Level 2	DeBolt, David	4028127389	daviddblt@yahoo.com
		45 Day Transitional Living - Level 2	DeBolt, David	4028127389	daviddblt@yahoo.com
		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
		Transitional Living - Level 2	Austin, Willie	4024520102	williea244@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boyz to men	5225 NW Radial Hwy Omaha, NEBRASKA 68104	Transitional Living - Level 2	DeBolt, David	4028127389	daviddblt@yahoo.com
Girlz to Women Sober Living (The Beff House)	2236 S 11Street Omaha, NEBRASKA 68108	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			

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
		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			

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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	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 Outpatient Counseling (Individual)	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			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

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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

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Youth Services-Omaha Office	6901 Dodge Street, Suite 208 Omaha, NEBRASKA 68132	In Home Family Service (IHFS)	Watts, Kayla	4022017043	kwatts@cedarskids.org

Agency Name: COUNSELING REAL LIFE, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
COUNSELING REAL LIFE, LLC	3000 FARNAM STREET East Suite#3 Omaha, NEBRASKA 68131	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
COUNSELING REAL LIFE, LLC	3000 FARNAM STREET East Suite#3 Omaha, NEBRASKA 68131	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)			
		Adult Substance Use Outpatient Treatment (Individual)	Austin, Willie	4024520102	williea244@gmail.com

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	1905 Harney Street STE 210 Omaha, NEBRASKA	Split Cost Professional			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Services	68102	Foster Care			

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	15 Day TL Extension - Level 2	Huynh, Tina	4029914673	thhuynh11@gmail.com
		45 Day Transitional Living - Level 2	Huynh, Tina	4029914673	thhuynh11@gmail.com
		Adult Co-Occurring Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@gmail.com
		Adult Mental Health Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@gmail.com
		Adult Substance Use Addendum	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@gmail.com
		Adult Substance Use Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@gmail.com
		Transitional Living - Level 2	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
			Huynh, Tina	4029914673	thhuynh11@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	1490 N 16th	Adult Co-Occurring	Goracke,	4024758748	cgoracke@centerpointe.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Hope - AnchorPointe North	Street Omaha, NEBRASKA 68102	Capable Short-Term Residential	Courtney		
			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 Addendum	Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use Evaluation	Meadows, Sara	4024805105	Sara.meadows11@gmail.com
			Volnek, Ashley	4024758717	avolnek@centerpointe.org
		Adult Substance Use Short-Term Residential	Volnek, Ashley	4024758717	avolnek@centerpointe.org
Campus for Hope - StartingPointe North	1490 N 16th Omaha, NEBRASKA 68102	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

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Campus for Hope - StartingPointe North	1490 N 16th Omaha, NEBRASKA 68102	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

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@chainbreakercounseling.net
		Adult Substance Use Evaluation	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net

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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 Outpatient Treatment (Group)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net
		Adult Substance Use Outpatient Treatment (Individual)	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Granillo, Jill	4025043242	jillggranillo@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net
	4924 Capitol Avenue Omaha, NEBRASKA 68132	15 Day TL Extension - Level 1	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
		15 Day TL Extension - Level 2	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
		45 Day Transitional Living - Level 1	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
		45 Day Transitional Living - Level 2	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
		Transitional Living - Level 1	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net
		Transitional Living - Level 2	Goodrich, Cynthia	4022377482	crhouse4924@gmail.com
			Woods, Amy	4024037709	awoods@chainbreakercounseling.net

Agency Name: Charles Drew Health Center

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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 Co-Occurring Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@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
			Marquez, Elvia	5314667738	elvia.marquez@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 Health Outpatient Counseling (Individual)	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@charlesdrew.com
			Menendez,	4025109975	michael.menendez@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	2915 Grant Street Omaha, NEBRASKA 68111	Adult Mental Health Outpatient Counseling (Individual)	Michael		
			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
			Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@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 Evaluation	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Durant, Donald	4024520021	donaldrdurantjr44@gmail.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	Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@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 Intensive Outpatient Counseling (IOP)	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@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 Outpatient Treatment (Group)	Bell, Antoinette	4027099849	newbalancecounseling@gmail.com
			Duncan, Larry	4024571224	larry.duncan@charlesdrew.com
			Durant,	4024520021	donaldrdurantjr44@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 Outpatient Treatment (Group)	Donald		
			Gitari, Betty	4023785566	bettymwendegitari@gmail.com
			Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Marquez, Elvia	5314667738	elvia.marquez@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
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	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@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	(Individual)	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
		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
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Adult Co-Occurring Evaluation	Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Mental Health	Tarrant-Moore,	4024513553	hope.tarrant-moore@charlesdrew.com

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	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Evaluation	Hope		
			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	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Long, Skylar	7122150202	skylar.long@charlesdrew.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
			Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Intensive Outpatient	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Tarrant-Moore,	4024513553	hope.tarrant-moore@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	Counseling (IOP)	Hope		
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Adult Substance Use Outpatient Treatment (Individual)	Durant, Donald	4024520021	donaldrdurantjr44@gmail.com
			Long, Skylar	7122150202	skylar.long@charlesdrew.com
			Tarrant-Moore, Hope	4024513553	hope.tarrant-moore@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com

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

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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 Sex Offense-Specific Outpatient Counseling (Individual/Group)	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: Chosen Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Chosen Counseling, LLC	6069 Camden Avenue Omaha, NEBRASKA 68104	Adult Gambling Intensive Outpatient Counseling (Individual/Group)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)			
Love and Light Counseling	11207 West Dodge Road Suite #250 Omaha, NEBRASKA 68154	Adult Gambling Intensive Outpatient Counseling (Individual/Group)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Love and Light Counseling	11207 West Dodge Road Suite #250 Omaha, NEBRASKA 68154	Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Christine Baccari

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
			Wibel, Jeff	4023415128	jwibel@commall.org
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	Brown, Jessica	4023415128	jbrown@commall.org
		Adult Substance Use Evaluation	Brown, Jessica	4023415128	jbrown@commall.org

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

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	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Mental Health Evaluation	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Psychological Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Addendum	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Evaluation	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com
			Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Martin, Jennifer	7122590437	jenny.martin2233@gmail.com

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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
		Adult Substance Use Evaluation	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Hall, John	4027703764	john.hall@completefamilytreatment.com
		Adult Substance Use Outpatient Treatment (Individual)	Hall, John	4027703764	john.hall@completefamilytreatment.com

Agency Name: Concord Mediation Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Concord Mediation Center	2910 S. 84th Street Omaha, NEBRASKA 68124	Mediation - Juvenile	Besley, Jenaime	4027086032	besleyjenaime@gmail.com

Agency Name: Continuum Counseling & Consultants, LLC

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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: 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	Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Adult Mental Health Outpatient Counseling (Group)			
		Adult	Tucker,	4029798350	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	Mental Health Outpatient Counseling (Individual)	Mildred		
		Adult Substance Use Addendum	Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Grabenschroer, Heidi	4026166886	heidi.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjanee@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Evaluation	Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Grabenschroer, Heidi	4026166886	heidi.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjanee@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Grabenschroer, Heidi	4026166886	heidi.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjanee@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 Intensive Outpatient Counseling (IOP)	Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Grabenschroer, Heidi	4026166886	heidi.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjanee@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Deutsch-Mackey, Michelle	4028063403	m.mackey.cultivatingpaths@gmail.com
			Grabenschroer, Heidi	4026166886	heidi.cultivatingpaths@gmail.com
			Hanna, Abigail	5313290824	ahanna991.cultivatingpaths@gmail.com
			Smith, Janee	4023121460	hooksjanee@gmail.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
			Warrick, Kristan	4026398501	kris.cultivatingpaths@gmail.com

Agency Name: David DeBolt Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
David DeBolt Counseling at	2236 S. 11th Street Omaha,	Adult Substance Use Addendum			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Beff House)	NEBRASKA 68108	Adult Substance Use Evaluation			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)			
David DeBolt Counseling at Boyz to Men	5225 NW Radial Hwy Omaha, NEBRASKA 68104	Adult Substance Use Addendum	DeBolt, David	4028127389	daviddblt@yahoo.com
		Adult Substance Use Evaluation	DeBolt, David	4028127389	daviddblt@yahoo.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	DeBolt, David	4028127389	daviddblt@yahoo.com
		Adult Substance Use Outpatient Treatment (Group)	DeBolt, David	4028127389	daviddblt@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	DeBolt, David	4028127389	daviddblt@yahoo.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	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			
		Transitional Living - Level 2			

Agency Name: Deens THD Enterprise LLC

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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	Blakely , Eric	4027143494	Wavezel@gmail.com
			Clark, LaTrenda	4022389643	trendaclark@yahoo.com
			Harris, Walter	5313295103	walterdionharris73@gmail.com
			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	15 Day TL Extension - Level 1	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		15 Day TL Extension - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		45 Day Transitional Living - Level 1	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		45 Day Transitional Living - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		Transitional Living - Level 1	Olsen, Nichole	5312553970	ncurry2130@gmail.com
		Transitional Living - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
	2922 Izard St Omaha, NEBRASKA 68131	15 Day TL Extension - Level 1	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		15 Day TL Extension - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		45 Day	Olsen,	5312553970	ncurry2130@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2922 Izard St Omaha, NEBRASKA 68131	Transitional Living - Level 1	Nichole		
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		45 Day Transitional Living - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
			Shaddy, Jake	5312036550	differentapproachne@gmail.com
		Transitional Living - Level 1			
		Transitional Living - Level 2	Olsen, Nichole	5312553970	ncurry2130@gmail.com
	5208 Grover St Omaha, NEBRASKA 68106	15 Day TL Extension - Level 1			
		15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 1			
		45 Day Transitional Living - Level 2			

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	Pagett, Greg	4025908778	greg.pagett@douglascounty-ne.gov
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Matrix Substance Use Intensive Outpatient			

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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	Treatment (IOP)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
			Pagett, Greg	4025908778	greg.pagett@douglascounty-ne.gov
		Adult Mental Health Outpatient Counseling (Individual)	Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
			Pagett, Greg	4025908778	greg.pagett@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
			Pagett, Greg	4025908778	greg.pagett@douglascounty-ne.gov
		Adult Substance Use Evaluation	Carter, Evan	4026587315	eecarter05@gmail.com
			Dombrowski, Lydia	4023058881	lydia.dombrowski@gmail.com
			Newby, Emily	4025592712	emily.newby@douglascounty-ne.gov
			Pagett, Greg	4025908778	greg.pagett@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
			Pagett, Greg	4025908778	greg.pagett@douglascounty-ne.gov

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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 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 (Individual)	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
		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: Effective Counseling, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Effective Counseling, LLC	14713 Ames Avenue Omaha, NEBRASKA 68116	Adult Substance Use Addendum	Sims III, John	4026098548	EffectiveCounselingNebraska@gmail.com
		Adult Substance Use Evaluation	Sims III, John	4026098548	EffectiveCounselingNebraska@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Sims III, John	4026098548	EffectiveCounselingNebraska@gmail.com

Agency Name: Ellis Psychiatric

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ellis Psychiatric	223 East Condron Street Valley, NEBRASKA 68064	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: 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	1905 Harney St Suite 110 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
		Adult Mental Health Outpatient	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	1905 Harney St Suite 110 Omaha, NEBRASKA 68102	Counseling (Individual)			
		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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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Family Enrichment	820 S 75th Street Omaha, NEBRASKA 68114	Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation			

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
			Engle, Christine	4029334411	cme2911@gmail.com
		Adult Substance Use 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 Substance Use Evaluation	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 Addendum			
		Adult Substance Use Evaluation	Polk, Marcus	4023052811	gatewaytransitionalhousing@gmail.com

Agency Name: Generational Health LLC

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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 Substance Use Outpatient Treatment (Individual)			
	2208 Pinkney Street Omaha, NEBRASKA 68111	Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Good Turn Labor, INC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Good Turn Labor, INC	4302 Fort Street Omaha, NEBRASKA 68111	15 Day TL Extension - Level 2	Micek, Julie	4022141021	juliemicek@gmail.com
		45 Day Transitional Living - Level 2	Micek, Julie	4022141021	juliemicek@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Good Turn Labor, INC	4302 Fort Street Omaha, NEBRASKA 68111	Adult Co-Occurring Evaluation			
		Adult Medication Management			
		Adult Mental Health Evaluation	Micek, Julie	4022141021	juliemicek@gmail.com
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

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	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	Outpatient Counseling (Individual)	Pendley, Megan	4022904042	mpendley.Halo@gmail.com
			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,	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: Heartland Family Service

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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, NEBRASKA 68105	Adult Co-Occurring Evaluation	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hardin, Reese	4025533000	rhardin@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hardin, Reese	4025533000	rhardin@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@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	2101 S 42nd Street Omaha, NEBRASKA 68105	Adult Mental Health Evaluation	Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Mental Health Outpatient Counseling (Group)	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Mental Health Outpatient Counseling (Individual)	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer,	4025527012	mroyer@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	2101 S 42nd Street Omaha, NEBRASKA 68105	Adult Mental Health Outpatient Counseling (Individual)	Mary		
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Seitz, Adryanna	4029132652	aseitz@heartlandfamilyservice.org
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Substance Use Evaluation	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hardin, Reese	4025533000	rhardin@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer,	4025527012	mroyer@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	2101 S 42nd Street Omaha, NEBRASKA 68105	Adult Substance Use Evaluation	Mary		
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Substance Use Outpatient Treatment (Group)	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hardin, Reese	4025533000	rhardin@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@heartlandfamilyservice.org
			Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
		Adult Substance Use Outpatient Treatment (Individual)	Andersen, Luke	4028817740	landersen@heartlandfamilyservice.org
			Hart, Michelle	4025527407	mhart@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	2101 S 42nd Street Omaha, NEBRASKA 68105	Adult Substance Use Outpatient Treatment (Individual)	Heidvogel, Brian	4025527004	bheidvogel@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
			Kenney, Zachary	4022109307	zkenney@heartlandfamilyservice.org
			Messina, Daniel	4026696613	dmessina@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Seitz, Adryanna	4029132652	aseitz@heartlandfamilyservice.org
		PRS-BIP	Conley, Dawn	4025527066	DConley@heartlandfamilyservice.org
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: Holistic Hope Therapy, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Holistic Hope Therapy, LLC	11640 Arbor St. Suite 101 Omaha, NEBRASKA 68144	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: 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 Outpatient Treatment (Individual)	Wiles, Lori	4026993468	lwiles@wilescoun.omhcoxmail.com

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	Batten, Amy	5312016890	abatten@northpointrecovery.com
			Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com
Northpoint Omaha	9623 M Street Omaha, NEBRASKA	Adult Substance Use Intensive Outpatient	Batten, Amy	5312016890	abatten@northpointrecovery.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northpoint Omaha	68127	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 Outpatient Treatment (Group)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Adult Substance Use Outpatient Treatment (Individual)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com

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)	Carrasco, Veronica	4026132241	veronicac@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 Medication Management			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	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 Evaluation	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)	Corbin, Trinette	4029322248	trinettec@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 Intensive Outpatient Counseling (IOP)	Thompson-Brown, Bridgette	4029322248	bridgetteT@inroadstorecovery.com
			kinnaman, mark	4029322248	markk@inroadstorecovery.com
		Adult Substance Use Short-Term Residential	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

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 Use Outpatient Treatment	Arens, Necol	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	(Individual)			

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 #140 Omaha, NEBRASKA 68105	Adult Substance Use Addendum	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Evaluation	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com

Agency Name: Jennifer Blankenship LIMHP LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jennifer Blankenship LIMHP LLC	12732 Harney Street Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation	Blankenship, Jennifer	4025703847	jennifer.blankenship@doane.edu
		Adult Mental Health Outpatient	Blankenship, Jennifer	4025703847	jennifer.blankenship@doane.edu

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jennifer Blankenship LIMHP LLC	12732 Harney Street Omaha, NEBRASKA 68154	Counseling (Individual)			
		Adult Substance Use Addendum	Blankenship, Jennifer	4025703847	jennifer.blankenship@doane.edu
		Adult Substance Use Evaluation	Blankenship, Jennifer	4025703847	jennifer.blankenship@doane.edu
		Adult Substance Use Outpatient Treatment (Individual)	Blankenship, Jennifer	4025703847	jennifer.blankenship@doane.edu
	11919 P street Suite C Omaha, NEBRASKA 68137	Adult Mental Health Outpatient Counseling (Group)			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			
	1905 Harney St., Ste 110 Omaha, NEBRASKA 68102	Adult Mental Health Outpatient Counseling (Group)			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			

Agency Name: Judi Biniamow

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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	Adult Mental Health Outpatient Counseling (Individual)	biniamow, judi	4023211956	judibomaha1@cox.net
		Adult Substance Use Outpatient Treatment (Individual)	biniamow, judi	4023211956	judibomaha1@cox.net

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	Mapes, Kathleen	4025470741	kmapes@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Adult Mental Health Evaluation	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 Mental Health Outpatient Counseling (Individual)	Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@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 Mental Health Outpatient Counseling (Individual)	Thompson, Michaela	4029570252	mithompson@kvc.org
		Adult Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Adult Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Adult Substance Use Outpatient Treatment (Individual)	Prusia, Jade	4025061008	jprusia@KVC.org
		Reentry Agency Support	Prusia, Jade	4025061008	jprusia@KVC.org
		Reentry Clinical Services	Prusia, Jade	4025061008	jprusia@KVC.org
		Reentry Youth & Family Services - Foster Care	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	5150 Nth 90th	Adult Substance Use	Keck, Amy	5317729749	Ajksm18@gmail.com

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

Agency Name: Kersten Borer LLC

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 -	1299 Farnam Street Suite 300 Omaha, NEBRASKA 68102	Adult Sex Offense-Specific Polygraph	Kieso, Christian	6052548365	kiesopolygraph@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Landmark Center		Examination			

Agency Name: Legacy Therapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Legacy Therapy	1941 S. 42nd St. Suite 416-W Omaha, NEBRASKA 68105	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Legal Family Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Legal Family Services LLC	11329 P St Suite 105 Omaha, NEBRASKA 68137	Adult Mental Health Outpatient Counseling (Individual)			

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 Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Adult Substance Use Addendum	Denker, Lindsay	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	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: Lotus Centre, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Centre, LLC	7602 Pacific St Ste. 102 Omaha, NEBRASKA 68114	Adult Co-Occurring Evaluation	Schmidt, James "Jim"	4026808280	jschmidt@lotuscentre.org
		Adult Mental Health Evaluation	Schmidt, James "Jim"	4026808280	jschmidt@lotuscentre.org
		Adult Mental Health Outpatient Counseling (Individual)	Schmidt, James "Jim"	4026808280	jschmidt@lotuscentre.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Centre, LLC	7602 Pacific St Ste. 102 Omaha, NEBRASKA 68114	Adult Substance Use Addendum	Schmidt, James "Jim"	4026808280	jschmidt@lotuscentre.org
		Adult Substance Use Evaluation	Schmidt, James "Jim"	4026808280	jschmidt@lotuscentre.org
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Lunar Serenity Wellness

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lunar Serenity Wellness	8790 F Street Suite 729 Omaha, NEBRASKA 68127	Adult Co-Occurring Evaluation	Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Mental Health Evaluation	Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Substance Use Addendum	Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Substance Use Evaluation	Smith, Cassandra	5312337493	smithcj821@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Smith, Cassandra	5312337493	smithcj821@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	Gurewitz, David	6507812330	david.gurewitz@onelfs.org
			Lannin, Grant	4024808774	grant.lannin@onelfs.org
			McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.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 Co-Occurring Evaluation	Rich, Jamie	4023173269	Jrich@lfsneb.org
		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)	Gurewitz, David	6507812330	david.gurewitz@onelfs.org
			McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Addendum	Brien, Kathryn	7732169726	kathryn.brien@onelfs.org
			Gurewitz, David	6507812330	david.gurewitz@onelfs.org
			Lannin, Grant	4024808774	grant.lannin@onelfs.org
			McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Evaluation	Gurewitz, David	6507812330	david.gurewitz@onelfs.org
			Lannin, Grant	4024808774	grant.lannin@onelfs.org
			McCollister, Suzanne	4025025132	suzanne.mccollister@onelfs.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 Substance Use Evaluation	Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Brien, Kathryn	7732169726	kathryn.brien@onelfs.org
			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)	Brien, Kathryn	7732169726	kathryn.brien@onelfs.org
			Gurewitz, David	6507812330	david.gurewitz@onelfs.org
			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	Walsh, Natasha	4022134167	natasha.walsh@onelfs.org
		Adult Mental Health Evaluation	Walsh, Natasha	4022134167	natasha.walsh@onelfs.org
		Adult Substance Use Addendum	Walsh, Natasha	4022134167	natasha.walsh@onelfs.org
		Adult Substance Use Evaluation	Walsh, Natasha	4022134167	natasha.walsh@onelfs.org

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)			

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

Agency Name: 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 68144	Adult Co-Occurring Evaluation	Maggett, Joseph	4023126840	joseph@maggett-counseling.com
		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	McCullough, Cynthia	4022506153	mcc3@cox.net

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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	(Individual)			
		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
		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	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			

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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: Midwest Community Services DBA Midwest Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midwest Community Services LLC	9411 F 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

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	Cho, Jungwon	5318002641	info@nalamentalhealth.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Mental Health Evaluation	Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Mental Health Outpatient Counseling (Individual)	Cho, Jungwon	5318002641	info@nalamentalhealth.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Addendum	Bradley, Aubree	2085699085	abradley@nalamentalhealth.com
			Cho,	5318002641	info@nalamentalhealth.com

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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 Substance Use Addendum	Jungwon		
			Dunn, Rachel	5313462402	racheldunn85@outlook.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Evaluation	Bradley, Aubree	2085699085	abradley@nalamentalhealth.com
			Dunn, Rachel	5313462402	racheldunn85@outlook.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Dunn, Rachel	5313462402	racheldunn85@outlook.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com
		Adult Substance Use Outpatient Treatment (Individual)	Bradley, Aubree	2085699085	abradley@nalamentalhealth.com
			Cho, Jungwon	5318002641	info@nalamentalhealth.com
			Dunn, Rachel	5313462402	racheldunn85@outlook.com
			Webb, Tiffany	5318002641	Tgormley@nalamentalhealth.com

Agency Name: Nebraska Behavioral Health Group LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nebraska Behavioral Health Group LLC	11602 W Center Road Suite 225 Omaha, NEBRASKA 68114	Adult Co-Occurring Evaluation	Murphy, Sara	4022096197	smurphy@nebhg.com
			Ramsey, Barbara	4025096263	bramsey@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nebraska Behavioral Health Group LLC	11602 W Center Road Suite 225 Omaha, NEBRASKA 68114	Adult Mental Health Evaluation	Murphy, Sara	4022096197	smurphy@nebhg.com
			Ramsey, Barbara	4025096263	bramsey@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.com
		Adult Mental Health Outpatient Counseling (Individual)	Murphy, Sara	4022096197	smurphy@nebhg.com
			Ramsey, Barbara	4025096263	bramsey@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.com
		Adult Substance Use Addendum	Murphy, Sara	4022096197	smurphy@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.com
		Adult Substance Use Evaluation	Murphy, Sara	4022096197	smurphy@nebhg.com
			Ramsey, Barbara	4025096263	bramsey@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.com
		Adult Substance Use Outpatient Treatment (Individual)	Murphy, Sara	4022096197	smurphy@nebhg.com
			Ramsey, Barbara	4025096263	bramsey@nebhg.com
			Schrad, Ashley	4022106134	aschrad@nebhg.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	6056 Ames Ave Omaha,	Adult Co-Occurring	Bell, Antoinette	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
counseling	NEBRASKA 68104	Evaluation			
		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	10840 Old Mill Rd 300 Omaha, NEBRASKA 68154	Adult Co-Occurring Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		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			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	10840 Old Mill Rd Ste 300 Omaha, NEBRASKA 68154	(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: 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)			

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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 Substance Use Outpatient Treatment (Individual)			

Agency Name: OMNI Inventive Care

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OMNI Inventive Care	5115 F Street Omaha, NEBRASKA 68117	Adult Co-Occurring Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
		Adult Mental Health Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
		Adult Mental Health Outpatient Counseling (Individual)	Brown, Tahra	3082939288	Tahra.Brown@omniic.com
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
		Adult Psychological Evaluation			
		Adult Substance Use Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
		Adult Substance Use Outpatient Treatment (Individual)	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
		Split Cost Professional Foster Care			

Agency Name: Omaha Home for Boys (OHB)

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	Bartlett, Rachelle	5312220500	rbartlett@ohb.org

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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 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: 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	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com
		Adult Substance Use Addendum	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com

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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 Substance Use Evaluation	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Marquez, Longfellow	4022507810	sharedsolutionscounseling@gmail.com

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

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Adult Co-Occurring Evaluation	Hoover, Jillian	5312327154	Jillian.hoover@gmail.com
			Roth, Jessica	4027046224	jessica.roth@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Mental Health	Jones, Kendra	4025901735	Kendra.jones@optum.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 Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Evaluation	Needelman, Joshua	4026148444	josh.needelman@optum.com
			Roth, Jessica	4027046224	jessica.roth@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Mental Health Outpatient Counseling (Individual)	Hoover, Jillian	5312327154	Jillian.hoover@gmail.com
			Jones, Kendra	4025901735	Kendra.jones@optum.com
			Lindner, Jennifer	4025172948	jennifer.lindner@optum.com
			Morell, Elizabeth	4026148444	emorell@capstonebehavioralhealth.com
			Roth, Jessica	4027046224	jessica.roth@optum.com
			Signorelli, Mary	4026148444	mary.signorelli@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Psychological Evaluation	Lindner, Jennifer	4025172948	jennifer.lindner@optum.com
			Morell, Elizabeth	4026148444	emorell@capstonebehavioralhealth.com
			Needelman, Joshua	4026148444	josh.needelman@optum.com
		Adult Substance Use Addendum	Roth, Jessica	4027046224	jessica.roth@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Substance Use Evaluation	Hoover, Jillian	5312327154	Jillian.hoover@gmail.com
			Roth, Jessica	4027046224	jessica.roth@optum.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 Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Adult Substance Use Evaluation	Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Substance Use Outpatient Treatment (Group)	Hoover, Jillian	5312327154	Jillian.hoover@gmail.com
			Roth, Jessica	4027046224	jessica.roth@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.com
		Adult Substance Use Outpatient Treatment (Individual)	Hoover, Jillian	5312327154	Jillian.hoover@gmail.com
			Roth, Jessica	4027046224	jessica.roth@optum.com
			Thompson, Jacquelyn	4026089146	jacquelyn.thompson1@optum.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	15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 2			
		Transitional Living - Level 2			

Agency Name: Owens & Associates, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Owens & Associates, Inc.	7415 N 30 Street Omaha, NEBRASKA 68112	Continuous Alcohol Monitoring (CAM)			

Agency Name: Owens Educational Services, Inc.

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Agency Name: Our Square

Agency Name: Owens & Associates, Inc.

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
Owens Educational Services, Inc.	7413 N 30th Street Omaha, NEBRASKA 68112	Continuous Alcohol Monitoring (CAM)	Bothwell, Robin	4026583796

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: Pathway To Recovery LLC.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pathway To Recovery LLC.	1941 S 42nd St STE 416-O Omaha, NEBRASKA 68105	Adult Substance Use Addendum	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Evaluation	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Besley, Jenaime	4027086032	besleyjenaime@gmail.com
			Scott, Judi	4025910871	j.scottcounseling@gmail.com

Agency Name: Perceptions

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Perceptions	11819 Miracle	Adult Co-			

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Individual Email
Robin.Bothwell@OwensEducationalServices.org

Agency Name: Papa Josh House LLC

Agency Name: Pathway To Recovery LLC.

Agency Name: Perceptions

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Perceptions	Hills Drive Suite 203 Omaha, NEBRASKA 68154	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
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)	Peterson, Shannon	4022044447	shannon-peterson@perceptionstherapy.com

Agency Name: Point of Freedom LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Point of Freedom LLC	4611 s 96th St Suite #150 Omaha, NEBRASKA 68127	Adult Substance Use Evaluation	Lambley, Brent	4028385957	brent@pointoffreedom.health
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Lambley, Brent	4028385957	brent@pointoffreedom.health

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	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska	2602 J St Omaha, NEBRASKA 68107	Adult Medication Management			
		Adult Mental Health Evaluation	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Substance Use Evaluation	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Stephens, Jasmine	4023692714	jasminepaige324@gmail.com

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 Co-Occurring Evaluation	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Mental Health Evaluation	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Substance Use Addendum	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Substance Use Evaluation	Ruhge, Randy	4026601987	rsquaredcounseling@gmail.com
		Adult Substance	Ruhge,	4026601987	rsquaredcounseling@gmail.com

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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	Use Outpatient Treatment (Individual)	Randy		

Agency Name: RADIUS

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
RADIUS	5040 Grand Avenue Omaha, NEBRASKA 68104	In Home Family Service (IHFS)	Parmer, Alisa	5318950034	alisa.parmer@radiusomaha.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

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

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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 Substance Use Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Adult Substance Use Outpatient Treatment (Individual)	Campbell, Reed	4029152251	reed@rccounselingconsulting.com

Agency Name: Rejuvenation Connection (The Libertas Conexio House)

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Rejuvenation Connection (The Libertas Conexio House)	2421 Bauman Ave Omaha, NEBRASKA 68112	15 Day TL Extension - Level 2	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		45 Day Transitional Living - Level 2	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Transitional Living - Level 2	Bailey III, Frank	4025043242	frankbailey6912@gmail.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	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org

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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	Use Outpatient Treatment (Individual)			

Agency Name: Renewed Vision Counseling and Developmental Disability Center

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	Leyva, Andrew	9152278271	Vye7@pm.me
			Miller, Kari	4029363619	K871@hotmail.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)	Leyva, Andrew	9152278271	Vye7@pm.me
		Adult Mental Health Outpatient Counseling (Individual)	Miller, Kari	4029363619	K871@hotmail.com
		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)			

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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 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

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
			Chavez, Sara	4024635684	sara@r3cc.net
			Everett, Tanajah	4028712632	tanajah@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Initial Diagnostic Interview (Medication Prescriber Only)	Tudor, Petrisor	3077520225	peter@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 Medication Management	Tudor, Petrisor	3077520225	peter@r3cc.net
		Adult Mental Health Evaluation	Botello, Meagan	7123149814	meagan@r3cc.net
			Chavez, Sara	4024635684	sara@r3cc.net
			Everett, Tanajah	4028712632	tanajah@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Mental Health Outpatient Counseling (Group)	Botello, Meagan	7123149814	meagan@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Mental Health Outpatient Counseling (Individual)	Botello, Meagan	7123149814	meagan@r3cc.net
			Chavez, Sara	4024635684	sara@r3cc.net
			Everett, Tanajah	4028712632	tanajah@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Substance	Botello,	7123149814	meagan@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	Use Addendum	Meagan		
			Chavez, Sara	4024635684	sara@r3cc.net
			Cron, Kayla	4026208689	kaylahashberger@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Substance Use Evaluation	Botello, Meagan	7123149814	meagan@r3cc.net
			Chavez, Sara	4024635684	sara@r3cc.net
			Cron, Kayla	4026208689	kaylahashberger@gmail.com
			Everett, Tanajah	4028712632	tanajah@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Botello, Meagan	7123149814	meagan@r3cc.net
			Chavez, Sara	4024635684	sara@r3cc.net
			Cron, Kayla	4026208689	kaylahashberger@gmail.com
			Everett, Tanajah	4028712632	tanajah@r3cc.net
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@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 Intensive Outpatient Counseling (IOP)	Siegrist, Austin	6414257812	austin@r3cc.net
		Adult Substance Use Outpatient Treatment (Individual)	Botello, Meagan	7123149814	meagan@r3cc.net
			Chavez, Sara	4024635684	sara@r3cc.net
			Cron, Kayla	4026208689	kaylahashberger@gmail.com
			Everett, Tanajah	4028712632	tanajah@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
		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

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Agency Name: Rite of Passage, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Uta Halee Academy	10625 Calhoun Rd Omaha, NEBRASKA 68112	Split Cost Group Home A			

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
		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,	4025100668	SIRelations@yahoo.com

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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 Addendum	Larissa		
			Motter , Shannon	4025587088	shannon@santamonicahouse.org
		Adult Substance Use Evaluation	Gagne, Amber	4029559649	amber@santamonicahouse.org
			Jackson, Larissa	4025100668	SIRelations@yahoo.com
			Motter , Shannon	4025587088	shannon@santamonicahouse.org
		Adult Substance Use Halfway House	Gagne, Amber	4029559649	amber@santamonicahouse.org
			Jackson, Larissa	4025100668	SIRelations@yahoo.com
			Motter , Shannon	4025587088	shannon@santamonicahouse.org

Agency Name: Saved to Serve Counseling

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

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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
		Adult Substance Use Addendum	Browning-Prince, Crystal	4028303890	cbrowningprince@gmail.com
			Prince,	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	Reginald		
		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@hushmail.com
		Adult Mental Health Evaluation	Siemer-Daisley, Kris	4022105156	kris.siemer@hushmail.com
		Adult Mental Health Outpatient Counseling	Siemer-Daisley, Kris	4022105156	kris.siemer@hushmail.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	(Individual)			
		Adult Substance Use Addendum	Siemer-Daisley, Kris	4022105156	kris.siemer@hushmail.com
		Adult Substance Use Evaluation	Siemer-Daisley, Kris	4022105156	kris.siemer@hushmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Siemer-Daisley, Kris	4022105156	kris.siemer@hushmail.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	jtimm@sienafrancis.org

Agency Name: Solutions Enterprises, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Solutions Enterprise at Miami House(Solutions Sober Living)	7724 Miami St Omaha, NEBRASKA 68134	Adult Co-Occurring Evaluation	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Mental Health Evaluation	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Mental Health Outpatient Counseling (Individual)	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Substance Use Addendum	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Substance Use Evaluation	Chartier, Angela	4026809201	angie@growwithsolutions.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Solutions Enterprise at Miami House(Solutions Sober Living)	7724 Miami St Omaha, NEBRASKA 68134	Adult Substance Use Intensive Outpatient Counseling (IOP)	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Substance Use Outpatient Treatment (Group)	Chartier, Angela	4026809201	angie@growwithsolutions.org
		Adult Substance Use Outpatient Treatment (Individual)	Chartier, Angela	4026809201	angie@growwithsolutions.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	15 Day TL Extension - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		45 Day Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		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	15 Day TL Extension - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		45 Day Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	Michelle@solutionssoberliving.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Solutions - Maple House	9508 Maple St Omaha, NEBRASKA 68134	15 Day TL Extension - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		45 Day Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
Solutions - Miami House	7724 Miami St Omaha, NEBRASKA 68134	15 Day TL Extension - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		45 Day Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
		Transitional Living - Level 2	Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	Michelle@solutionssoberliving.org

Agency Name: SoundMind Therapy Services LLC

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	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com

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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	Addendum			
		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: Stephanie E Voyles, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stephanie E Voyles, LLC	8031 W. Center Rd. Suite 204 Omaha, NEBRASKA 68124	Adult Co-Occurring Evaluation	Voyles, Stephanie	9737136067	voyles.stephanie@gmail.com
		Adult Mental Health Evaluation	Voyles, Stephanie	9737136067	voyles.stephanie@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stephanie E Voyles, LLC	8031 W. Center Rd. Suite 204 Omaha, NEBRASKA 68124	Adult Substance Use Addendum	Voyles, Stephanie	9737136067	voyles.stephanie@gmail.com
		Adult Substance Use Evaluation	Voyles, Stephanie	9737136067	voyles.stephanie@gmail.com

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	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Co-Occurring Evaluation	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Addendum	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Evaluation	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Halfway House	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Outpatient Treatment (Group)	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Outpatient Treatment (Individual)	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org
		Adult Substance Use Short-Term Residential	Tarbill, Katarina	8157183317	katarina.tarbill@stephencenter.org

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Agency Name: Tenacious Rebirth LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tenacious Rebirth LLC	8505 Pratt Street Omaha, NEBRASKA 68134	Adult Mental Health Evaluation	Boyd, Sierra	4023822790	sboyd@tenaciousrebirthllc.com
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Terrell Therapy

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 Human Way Therapy Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Human Way Therapy Services, LLC	11707 M Cir 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)			

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Agency Name: The Ogba Way

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	8790 F St. Suite 701 Omaha, NEBRASKA 68127	15 Day TL Extension - Level 1			
		45 Day Transitional Living - Level 1			
		Transitional Living - Level 1	Ogba, Joe	4027143520	joeogba35@gmail.com

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

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

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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 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
		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: Trisha Troia Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Trisha Troia Counseling	23913 Southwest St #6 Waterloo, NEBRASKA 68069	Adult Co-Occurring Evaluation	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Mental Health Evaluation	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Troia, Trisha	4022900543	trishtroia@gmail.com
		Adult Substance Use	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	23913 Southwest St #6 Waterloo, NEBRASKA 68069	Addendum			
		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
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Evaluation	Key, Kristina	4029991716	kristina.key@truevinecounseling.net
			Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Intensive Outpatient	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	Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)	Richards, Neshelle	4026609136	neshelle.richards@truevinecounseling.net
		Adult Substance Use Outpatient Treatment (Individual)			
	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)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	5425 N 103rd Street Omaha, NEBRASKA 68134	Adult Substance 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 Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Group)			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
UFY Counseling	4611 S 96th St #236 Omaha, NEBRASKA 68127	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)			
		Adult Sex Offense-Specific Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			

Agency Name: Unity Youth & Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Unity Youth & Family Services	7810 Davenport St Omaha, NEBRASKA 68114	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
	6901 Dodge St Suite 104 Omaha, NEBRASKA 68132	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

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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: 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	Remington, Michael	4024528001	mikalrem79@gmail.com
			Wright, Jeremy	4023013173	jeremywright@valleyhope.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Remington, Michael	4024528001	mikalrem79@gmail.com
			Wright, Jeremy	4023013173	jeremywright@valleyhope.org
		Adult Substance Use Outpatient Treatment (Group)	Remington, Michael	4024528001	mikalrem79@gmail.com
			Wright, Jeremy	4023013173	jeremywright@valleyhope.org
	7703 Serum Ave Ralston, NEBRASKA 68127	Adult Co-Occurring Evaluation			
		Adult Substance Use Evaluation	Hansen, Jason	4029918824	jasonhansen@valleyhope.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Hansen, Jason	4029918824	jasonhansen@valleyhope.org
		Adult Substance Use Outpatient Treatment (Group)	Hansen, Jason	4029918824	jasonhansen@valleyhope.org

Agency Name: Vigilnet America LLC

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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
		Non-Monetary Remote Alcohol Testing			
		Remote Alcohol Testing			
		Remote Alcohol Testing - DUI			

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)	Wicks, Chris	4023397991	cwicks@cox.net

Agency Name: Wild and Wise Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wild and Wise Counseling, LLC	663 N. 132nd Street PMB 7271 Omaha, NEBRASKA 68154	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			

Agency Name: Wiles Counseling & Assessments, Inc.

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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: 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
		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 2 Adults TLP LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Youth 2 Adults TLP LLC	3349 Nth 37th Omaha, NEBRASKA 68111	15 Day TL Extension - Level 1			
		45 Day Transitional Living - Level 1			

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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	diante@communitybasedservices.co
			Strong, LaDonna	4027182182	ladonna@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	diazcounseling@outlook.com
		Adult Substance Use Evaluation	diaz, isabel	4027061847	diazcounseling@outlook.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	diaz, isabel	4027061847	diazcounseling@outlook.com
		Adult Substance Use Outpatient Treatment (Group)	diaz, isabel	4027061847	diazcounseling@outlook.com
		Adult Substance Use	diaz, isabel	4027061847	diazcounseling@outlook.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	Outpatient Treatment (Individual)			
		PRS-BIP	diaz, isabel	4027061847	diazcounseling@outlook.com