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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 426 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Evaluation	Alexis, Geraldine	4027393300	galexis007@msn.com

Agency Name: 3Sisters Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
3Sisters Family Services	1941 South 42nd St Suite 402F Omaha, NEBRASKA 68105	Day Reporting	Birch, Ta'Lynn	5132037349	birchtalynn@gmail.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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Rush, Sherlonda	4026699030	sherlondarush@betterucounseling.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Rush, Sherlonda	4026699030	sherlondarush@betterucounseling.com

Agency Name: Abbott Counseling Services

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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	Expedited Co-Occurring Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Expedited Mental Health Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Expedited Substance Use Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Co-Occurring Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Mental Health Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Substance Use Addendum	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Substance Use Evaluation	Abbott, Kara	4027089389	kara_brooke@hotmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	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	Family Support	Villa, Veronica	4022131655	abishaicounseling@outlook.com
		General Education Class	Villa, Veronica	4022131655	abishaicounseling@outlook.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Villa, Veronica	4022131655	abishaicounseling@outlook.com
		Juvenile Substance Use Outpatient Treatment (Group)	Villa, Veronica	4022131655	abishaicounseling@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Abishai Counseling	4315 Frances St, Suite 100 Omaha, NEBRASKA 68105	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Villa, Veronica	4022131655	abishaicounseling@outlook.com

Agency Name: Achievement Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Achievement Counseling Services	8031 West Center Road Suite 324 Omaha, NEBRASKA 68124	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Adjudicated Youth Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adjudicated Youth Services	1446 S 11th Street Omaha, NEBRASKA 68108	Family Support	George, Timothy	4028126849	georgetimothy07@gmail.com

Agency Name: Ann's Couch

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

Agency Name: Apex Family Care

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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	Agency Supported Foster Care			
		Invoice - Day Reporting			
		Invoice - Emergency Professional Foster Care			
		Invoice - Group Home A			
		Invoice - Professional Foster Care			
		Professional Foster Care			
		Relative/Kinship Home Study	Stanley, Justine	4025715400	justine@apexfamily.org

Agency Name: Aspirations LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ramanda Bruce	1941 S 42nd st suite 528 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Juvenile Mental Health Evaluation	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Bruce, Ramanda	4028805253	aspirationscounseling@gmail.com

Agency Name: BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC	1941 S. 42ND ST. SUITE 106 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
BUOYANT FAMILY SERVICES COUNSELING AND CONSULTING LLC	1941 S. 42ND ST. SUITE 106 Omaha, NEBRASKA 68105	Juvenile Substance Use Addendum	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Juvenile Substance Use Evaluation	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	KOLA, BETTY	4029337577	buoyantfamilyservices@gmail.com
		Juveniles Who Sexually Harm Risk Evaluation	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, Adolescent Services	2417 Burdette Street Omaha, NEBRASKA 68111	Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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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	1941 South 42nd Street Suite 224 Omaha, NEBRASKA 68105	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Juvenile Substance Use Addendum	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Juvenile Substance Use Evaluation	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Juvenile Substance Use Outpatient Treatment (Group)	Bailey III, Frank	4025043242	frankbailey6912@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Be Kind LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Be Kind LLC	11837 Miracle Hills Drive Ste 102 Omaha, NEBRASKA 68154	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum	Bolter, Shannon	4028042093	shannon@bekindomaha.com
		Juvenile Substance Use Evaluation	Bolter, Shannon	4028042093	shannon@bekindomaha.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Bolter, Shannon	4028042093	shannon@bekindomaha.com
		Juvenile Substance Use Outpatient Treatment	Bolter, Shannon	4028042093	shannon@bekindomaha.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Be Kind LLC	11837 Miracle Hills Drive Ste 102 Omaha, NEBRASKA 68154	(Group)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bolter, Shannon	4028042093	shannon@bekindomaha.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	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Crayne, Laura	4025123528	laurie.crayne@bearcompanycounseling.com
			Hogan, Payton	4022813892	payton.hogan@bearcompanycounseling.com
		Juvenile Substance Use Evaluation			

Agency Name: Better Living Counseling Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Better Living Foster Care & Family Services Omaha	9945 Maple Street Omaha, NEBRASKA 68134	Agency Supported Foster Care			
		Relative/Kinship Home Study			

Agency Name: Bill□s Heart

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bill□s Heart	5402 Grand Avenue Omaha, NEBRASKA 68104	Family Support			

Agency Name: Boys Town

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town	13603 Flanagan Blvd Youth Care Building Boys Town, NEBRASKA 68010	Group Home A	Hernandez, Melina	5313553167	melina.hernandez@boystown.org
		Group Home B	Hernandez, Melina	5313553167	melina.hernandez@boystown.org
		Invoice Group Home B			
Boys Town Adolescent Intensive Outpatient Chemical Use Treatment Program (IOP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Co-Occurring Evaluation	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Mental Health Outpatient Counseling (Group)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town Adolescent Intensive Outpatient Chemical Use Treatment Program (IOP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Mental Health Outpatient Counseling (Group)	Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Addendum	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@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 Intensive Outpatient Chemical Use Treatment Program (IOP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Substance Use Addendum	Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Evaluation	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile	Brown, Kari	5313553039	kari.brown@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 Intensive Outpatient Chemical Use Treatment Program (IOP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Substance Use Outpatient Treatment (Group)	Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
Boys Town Adolescent Psychiatric Services Program	14092 Hospital Road Boys Town, NEBRASKA 68010	Juvenile Medication Management			

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Boys Town Adolescent and Adult Chemical Use Program (CUP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Co-Occurring Evaluation	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Addendum	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org

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Boys Town Adolescent and Adult Chemical Use Program (CUP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Substance Use Addendum	Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Evaluation	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Boys Town Adolescent and Adult Chemical Use Program (CUP)	13460 Walsh Drive Boys Town, NEBRASKA 68010	Juvenile Substance Use Intensive Outpatient (IOP)	Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Outpatient Treatment (Group)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@boystown.org
			Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Brown, Kari	5313553039	kari.brown@boystown.org
			Connelly, Carolyn	5313553329	carolyn.connelly@boystown.org
			Denton, Marlee	5313553221	Marlee.Denton@boystown.org
			Dibert, Brittany	5313557912	brittany.dibert@yahoo.com
			Hansen, Lyndsey	5313557910	lyndsey.hansen@boystown.org
			Pedersen, Melissa	5313557907	melissa.pedersen@boystown.org
			Pfeffer, Maria	5313557913	maria.pfeffer@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	Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Robinson, Natasha	5313553008	Natasha.robinson@boystown.org
Boys Town Eastern Nebraska Foster Family Services	213 Maher Boys Town, NEBRASKA 68010	Agency Supported Foster Care	Crabbe, Rachael	5313553018	rachael.crabbe@boystown.org
		Professional Foster Care			
		Relative/ Kinship Home Study	Crabbe, Rachael	5313553018	rachael.crabbe@boystown.org
Boys Town Family Home Program (Group Home A and B)	13603 Flanagan Blvd Youth Care Building Boys Town, NEBRASKA 68010	Group Home A	Mercer, Erik	5313553057	erik.mercer@boystown.org
		Group Home B	Mercer, Erik	5313553057	erik.mercer@boystown.org
Boys Town Intervention and Assessment (Shelter) Services	13603 Flanagan Blvd Youth Care Building Boys Town, NEBRASKA 68010	Shelter Care	Mercer, Erik	5313553057	erik.mercer@boystown.org
Boys Town Multisystemic Therapy Services (MST)	5074 Ames Avenue Omaha, NEBRASKA 68104	Multisystemic Therapy (MST)	Alexander, Kimberly	4026184347	kimberly.alexander@boystown.org
			Alexander, Lesli	4022535690	Lesli.Alexander@boystown.org
			Burgos, Claudia	5312670065	prissila.burgos@boystown.org
			Makalima, Bonginkosi	4025060144	malusi.makalima@boystown.org
			Schwery , Jaimie	7122160829	jaimie.schwery@boystown.org
			Vipond,	4022064309	bradley.vipond@boystown.org

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Boys Town Multisystemic Therapy Services (MST)	5074 Ames Avenue Omaha, NEBRASKA 68104	Multisystemic Therapy (MST)	Bradley		
			Wyatt, Angela	4026588127	angela.wyatt@boystown.org
Boys Town Psychiatric Residential Treatment Facility (PRTF)	14092 Hospital Road Boys Town, NEBRASKA 68010	Hospital Based Psychiatric Residential Treatment Facility (PRTF)	Cahill , Erin	5313555456	Erin.Cahill@boystown.org
			Ervin, Daley	5313555220	daley.ervin@boystown.org
			Greer, Angela	4029807608	angela.greer@boystown.org
			Gross, Tylore	5313555429	tylore.gross@boystown.org
			Hamlin, Noah	5313555200	noah.hamlin@boystown.org
			Hernbloom, Amy	5313555420	amy.hernbloom@boystown.org
			Johnson, Bridget	5313555424	bridget.johnson@boystown.org
			Kula, Melissa	5313555424	melissa.kula@boystown.org
			Lichter, Emily	5313555413	emily.lichter@boystown.org
			Mackey, Kimberly	5313555409	kimberly.mackey@boystown.org
			Maynard, Elizabeth	5313555458	elizabeth.maynard@boystown.org
			Maynard, Margaret	5313555476	meg.maynard@boystown.org
			McGinnis, Anna	5313555229	anna.mcginnis@boystown.org
			Paljor, Nyawuor	5313555225	nyawuor.paljor@boystown.org
			Russ, Kaneja	5313555455	kaneja.russ@boystown.org
			Sanders, Talisca	5313555228	talisca.sanders@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 Psychiatric Residential Treatment Facility (PRTF)	14092 Hospital Road Boys Town, NEBRASKA 68010	Hospital Based Psychiatric Residential Treatment Facility (PRTF)	Sandquist, Jordan	5313555220	jordan.sandquist@boystown.org
			Thomas, Marissa	4022104097	marissa.thomas@boystown.org
			zerbe, Katherine	5313555415	katherine.zerbe@boystown.org

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 Omaha, NEBRASKA 68105	General Education Class	Smith, Janee	4023121460	hooksjanee@gmail.com
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Brenda Ticknor

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brenda Ticknor	10846 Old Mill Road Suite 5 Omaha, NEBRASKA 68147	Juvenile Substance Use Addendum	Ticknor, Brenda	4026876449	brendaticknor@ymail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brenda Ticknor	10846 Old Mill Road Suite 5 Omaha, NEBRASKA 68147	Juvenile Substance Use Evaluation	Ticknor, Brenda	4026876449	brendaticknor@ymail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Brian P. Schnieder, LICSW, LADC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Brian P. Schnieder, LICSW, LADC	8998 L Street, Suite #109 Omaha, NEBRASKA 68127	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Schnieder, Brian	4028500054	brianschnieder@yahoo.com

Agency Name: Bridging the Gap Psychological Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bridging the Gap Psychological Services LLC	7701 Pacific Street suite 012 Omaha, NEBRASKA 68124	Juvenile Mental Health Evaluation			
		Juvenile Psychological Evaluation			

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	10840 Old Mill Rd, Suite 200 Omaha, NEBRASKA 68154	Agency Supported Foster Care			
		Community Youth Coaching	Carlson, Shandy	5315307630	scarlson@cedarskids.org
			Carnes, Jennifer	4026176023	jcarnes@cedarskids.org
			Fellers, Johana	5318101590	jfellers@cedarskids.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Youth Services-Omaha Office	10840 Old Mill Rd, Suite 200 Omaha, NEBRASKA 68154	Community Youth Coaching	Harmon, Grace	4025107916	gharmon@cedarskids.org
			Knutson, Peter	5318933034	pknutson@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Nosbisch, Megan	4027309783	mnosbisch@cedarskids.org
			Petrini, Shelby	4024161956	spetrini@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Family Support	Carlson, Shandy	5315307630	scarlson@cedarskids.org
			Carnes, Jennifer	4026176023	jcarnes@cedarskids.org
			Fellers, Johana	5318101590	jfellers@cedarskids.org
			Harmon, Grace	4025107916	gharmon@cedarskids.org
			Knutson, Peter	5318933034	pknutson@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Nosbisch, Megan	4027309783	mnosbisch@cedarskids.org
			Petrini, Shelby	4024161956	spetrini@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Co-Occurring Evaluation			
		Juvenile Electronic Monitoring GPS	Fellers, Johana	5318101590	jfellers@cedarskids.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Youth Services-Omaha Office	10840 Old Mill Rd, Suite 200 Omaha, NEBRASKA 68154	Juvenile Electronic Monitoring GPS	Harmon, Grace	4025107916	gharmon@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Pham, Adrianna	4028908346	apham@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Professional Foster Care			
		Relative/Kinship Home Study			

Agency Name: CHI Immanuel PRTF

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CHI Immanuel PRTF	6845 N68th Plaza Omaha, NEBRASKA 68122	Hospital Based Psychiatric Residential Treatment Facility (PRTF)	Edet, Cassandra	4025722251	cassie.edet@commonspirit.org
			Oberndorfer, Summer	4025722816	summer.oberndorfer@commonspirit.org
			Watson, Pamela	4025723050	pamela.watson@commonspirit.org

Agency Name: CISPE NE

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CISPE NE	2417 Burdette Street Omaha, NEBRASKA 68111	Anger Management Class			
		Case Managed Tutoring			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CISPE NE	2417 Burdette Street Omaha, NEBRASKA 68111	Day Reporting			
		Evening Reporting			
		Intensive Family Preservation			

Agency Name: CNW Alliance

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CNW Alliance	3009 R St Omaha, NEBRASKA 68107	Day Reporting	Rush Cardenas, Crystal	5317772567	Crystal@cnwalliance.org
		Evening Reporting	Rush Cardenas, Crystal	5317772567	Crystal@cnwalliance.org
		Family Partner	Clemow, Jorge	5317779529	Jorge@cnwalliance.org
			Rush Cardenas, Crystal	5317772567	Crystal@cnwalliance.org
			Rush Sr, William	5317779364	william@cnwalliance.org
			Zermeno Santiago, Cynthia	5317772534	cynthia@cnwalliance.org
		Family Support	Clemow, Jorge	5317779529	Jorge@cnwalliance.org
			Rush Cardenas, Crystal	5317772567	Crystal@cnwalliance.org
			Rush Sr, William	5317779364	william@cnwalliance.org
			Zermeno Santiago, Cynthia	5317772534	cynthia@cnwalliance.org

Agency Name: Capture Developmental and Community Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capture Developmental and Community Services	1905 Harney Street STE 210 Omaha, NEBRASKA 68102	Day Reporting			
		Independent Living			

Agency Name: Care-RIE

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Care-RIE	7805 N 86th Ave Omaha, NEBRASKA 68122	Day Reporting			
		Shelter Care			

Agency Name: CenterPointe, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Campus for Hope - COR	1490 N 16th Street Omaha, NEBRASKA 68102	Juvenile Medication Management			
Campus for Hope - Short Term Residential	1490 N 16th Omaha, NEBRASKA 68508	Juvenile Medication Management			

Agency Name: Change The Image

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Change The Image	5404 S 112th Plaza #108 Omaha, NEBRASKA 68137	Family Partner	Perry, DeAngelo	4029831879	perrystransport20@gmail.com

Agency Name: Charles Drew Health Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Juvenile Co-Occurring Evaluation	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Evaluation	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center	2915 Grant Street Omaha, NEBRASKA 68111	Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Addendum	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Evaluation	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Outpatient Treatment (Group)	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow, LaNita	4028815708	lanita.whitlow@hotmail.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Outpatient Treatment	Habrich, Carla	4028855324	carla.habrich@charlesdrew.com
			Whitlow,	4028815708	lanita.whitlow@hotmail.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	(Individual/ Family)	LaNita		
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
Charles Drew Health Center-Radius	5030 Grand Ave Omaha, NEBRASKA 68104	Juvenile Co-Occurring Evaluation	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Booker, Lucious	4025171287	lucious.booker@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Outpatient Counseling (Group)	Booker, Lucious	4025171287	lucious.booker@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Booker, Lucious	4025171287	lucious.booker@charlesdrew.com
			Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Addendum	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Evaluation	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile	Williams,	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Charles Drew Health Center-Radius	5030 Grand Ave Omaha, NEBRASKA 68104	Substance Use Intensive Outpatient (IOP)	Shelina		
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
Charles Drew Health Center-TYAC	5920 Maple Street Omaha, NEBRASKA 68104	Juvenile Co-Occurring Evaluation			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use			

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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	Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Group)			
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)			
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Juvenile Co-Occurring Evaluation	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Outpatient Counseling (Group)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Psychiatric Evaluation			
		Juvenile	Williams,	4023201665	shelina.williams@charlesdrew.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Charles Drew Health Center-Omaha Home for Boys 5190 Sprague Plaza Suite 201 Omaha, NEBRASKA 68104	Substance Use Addendum	Shelina		
		Juvenile Substance Use Evaluation	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Outpatient Treatment (Group)	Williams, Shelina	4023201665	shelina.williams@charlesdrew.com
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	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	Agency Supported Foster Care			
		Crisis Stabilization	Ulrich, Teffany	4026581210	tulrich@childsaving.org
		Family Support			
		Shelter Care	Ulrich, Teffany	4026581210	tulrich@childsaving.org

Agency Name: Clearwater Counseling, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	12127 Pacific Street	Juvenile Co-Occurring Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Omaha, NEBRASKA 68154	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Code Z Outreach

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Code Z Outreach	4136 Grand Ave Omaha, NEBRASKA 68111	Family Partner	Jones, Ron	4029559500	Jonesronjr402@gmail.com
			Louis, Latron	4027145083	codezoutreach@gmail.com

Agency Name: Colleen A Conoley PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Colleen A Conoley PC	11330 Q Street Suite 205 Omaha, NEBRASKA 68137	Juvenile Mental Health Evaluation	Conoley, Colleen	4026994769	caconoley@luxsci.net
		Juvenile Psychological Evaluation	Conoley, Colleen	4026994769	caconoley@luxsci.net

Agency Name: Community Options Individual and Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Community Options Individual and Family Services	1941 S. 42nd St. Suite 134 Omaha, NEBRASKA 68105	Family Support	Pierce, Duana	4924908055	deedee@coifs.org
			Stock, Angela	4026586468	Angies@coifs.org

Agency Name: Compassion & Care Nebraska

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Compassion & Care Nebraska	5310 N. 99th Street Suite #2 Omaha, NEBRASKA 68134	Day Reporting	Lewis, Robert	4025989048	robert.ccneb@gmail.com
		Evening Reporting	Lewis, Robert	4025989048	robert.ccneb@gmail.com

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	Juvenile Co-Occurring Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Mental Health Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Psychological Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Substance Use Addendum	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Substance Use Evaluation	Tamayo, Kelly	4025902947	drkellytamayo@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Family Treatment Services	10846 John Galt Blvd Omaha, NEBRASKA 68137	Juvenile Mental Health Outpatient Counseling (Individual/Family)	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	Expedited Family Group Conference	Overholt, Kathleen	4023451131	koverholt@concord-center.com
		Mediation	Overholt, Kathleen	4023451131	koverholt@concord-center.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	Juvenile Co-Occurring Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Juvenile Substance Use Addendum	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com
		Juvenile Substance Use Evaluation	BAULPINSON, DORAINE	4025147613	doraineh@aol.com
			Tucker, Mildred	4029798350	cultivatingpaths@gmail.com

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Agency Name: Developmental Disability Center of Nebraska, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Developmental Disability Center of Nebraska, LLC	1805 N 73RD ST Omaha, NEBRASKA 68114	Invoice - Day Reporting			
		Invoice - Group Home A			

Agency Name: Different World - New Beginnings

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Different World - New Beginnings	4609 N. 24th Street Omaha, NEBRASKA 68111	Day Reporting	Mackey, Terrence	4026126711	Tmackeyomaha@aol.com
			Roper, Forrest	4022539249	forrestroper@gmail.com
		Family Support	Mackey, Terrence	4026126711	Tmackeyomaha@aol.com
			Roper, Forrest	4022539249	forrestroper@gmail.com

Agency Name: Douglas County Youth Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Douglas County Youth Center	1301 S 41st Street Omaha, NEBRASKA 68105	Invoice - H.O.M.E.			
		Invoice - Secure Detention			
		Invoice - Staff Detention			

Agency Name: Dr. Doraine Baul-Pinson

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dr. Doraine Baul-Pinson	1941 S. 42nd Street Ste Center Mall -- Ste# 426 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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Agency Name: Dukes Village Development

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dukes Village Development	1941 S 42nd St #107 Omaha, NEBRASKA 68105	Evening Reporting			

Agency Name: East African Development Association of Nebraska. (EADAN)

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
East African Development Association of Nebraska. (EADAN)	4735 Nw Radial Hwy Omaha, NEBRASKA 68104	Family Partner			

Agency Name: Elevated Thinking LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Elevated Thinking LLC	5027 S 162nd Ave Omaha, NEBRASKA 68135	Day Reporting			
		Evening Reporting			

Agency Name: Embracing Heart Supportive Service

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Embracing Heart Supportive Service	11069 I Street Omaha, NEBRASKA 68137	Day Reporting	Akue, Adoukoe	4024520023	floraakue@gmail.com
			Ezui, Tanya	4022017719	info@embracingheart.com
			Omar, Hamisi	4022156557	Omar@embracingheart.com
			Ouedraogo, Constant	3479209614	konstente@gmail.com
			Pichardo, Sujey	4025478039	manager@embracingheart.com
			Poppe, Joey	5312621294	coordinator@embracingheart.com
			summers, warren	4022086735	probation@embracingheart.com
		Employment	Akue,	4024520023	floraakue@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Embracing Heart Supportive Service	11069 I Street Omaha, NEBRASKA 68137	Placement	Adoukoe		
			Ezui, Tanya	4022017719	info@embracingheart.com
			Omar, Hamisi	4022156557	Omar@embracingheart.com
			Ouedraogo, Constant	3479209614	konstente@gmail.com
			Pichardo, Sujey	4025478039	manager@embracingheart.com
			Poppe, Joey	5312621294	coordinator@embracingheart.com
			summers, warren	4022086735	probation@embracingheart.com
		Evening Reporting	Akue, Adoukoe	4024520023	floraakue@gmail.com
			Ezui, Tanya	4022017719	info@embracingheart.com
			Omar, Hamisi	4022156557	Omar@embracingheart.com
			Ouedraogo, Constant	3479209614	konstente@gmail.com
			Pichardo, Sujey	4025478039	manager@embracingheart.com
			Poppe, Joey	5312621294	coordinator@embracingheart.com
			summers, warren	4022086735	probation@embracingheart.com
		Family Partner	Pichardo, Sujey	4025478039	manager@embracingheart.com
		Family Support	Akue, Adoukoe	4024520023	floraakue@gmail.com
			Ezui, Tanya	4022017719	info@embracingheart.com
			Omar, Hamisi	4022156557	Omar@embracingheart.com
			Ouedraogo, Constant	3479209614	konstente@gmail.com
			Pichardo, Sujey	4025478039	manager@embracingheart.com
			summers,	4022086735	probation@embracingheart.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Embracing Heart Supportive Service	11069 I Street Omaha, NEBRASKA 68137	Family Support	warren		
		Independent Living	Akue, Adoukoe	4024520023	floraakue@gmail.com
			Omar, Hamisi	4022156557	Omar@embracingheart.com
			Ouedraogo, Constant	3479209614	konstente@gmail.com
			Pichardo, Sujey	4025478039	manager@embracingheart.com
			Poppe, Joey	5312621294	coordinator@embracingheart.com

Agency Name: Flourish Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Flourish Counseling LLC	3677 North 129th Street Omaha, NEBRASKA 68164	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile 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	Juvenile Co-Occurring Evaluation	Akers, Anita	4029334411	anita@focusc3.com
		Juvenile Mental Health Evaluation	Akers, Anita	4029334411	anita@focusc3.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Akers, Anita	4029334411	anita@focusc3.com
		Juvenile Substance Use Outpatient Treatment	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	(Individual/Family)			

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	Juvenile Mental Health Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com
		Juvenile Psychological Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Gard, Gary	4023935432	ggard@drgarygard.com
		Juveniles Who Sexually Harm Risk Evaluation	Gard, Gary	4023935432	ggard@drgarygard.com

Agency Name: Getting Over Adversity Together, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Getting Over Adversity Together, LLC	4601 S 50th Street Suite 302 Omaha, NEBRASKA 68117	Case Managed Tutoring			
		Day Reporting	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Employment Placement	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Evening Reporting	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Family Partner	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Family Support	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Getting Over Adversity Together, LLC	4601 S 50th Street Suite 302 Omaha, NEBRASKA 68117	General Education Class	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Intensive Family Preservation	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
		Relative/ Kinship Home Study	McCroy, Shanice	4027186936	shanicemccroy@p-31services.com
	4601 S 50th Street suite 302 Omaha, NEBRASKA 68117	Case Managed Tutoring			
		Day Reporting			
		Employment Placement			
		Evening Reporting			
		Family Partner			
		Family Support			
		Intensive Family Preservation			

Agency Name: Golden Rule Living LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Golden Rule Living LLC	2616 Maple St Omaha, NEBRASKA 68111	Day Reporting	Stewart, Golden	4028136559	stewartgolden@yahoo.com
		Evening Reporting			

Agency Name: Goshen Developmental Disability Center, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Goshen Developmental Disability Center, LLC	3306 N 190th Plaza Elkhorn, NEBRASKA 68022	Invoice - Day Reporting			
		Invoice - Group Home A			

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	Juvenile Mental Health Outpatient Counseling (Group)	Schnieder, Brian	4028500054	brianschnieder@yahoo.com
		Juvenile Substance Use Outpatient Treatment (Group)			

Agency Name: Heartland Family Service

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland Family Service	2101 S 42nd Street Omaha, NEBRASKA 68105	Community Youth Coaching	Andersen, Valeria	4029795833	vandersen@heartlandfamilyservice.org
			Burton, JaNisha	4026713344	jburton@heartlandfamilyservice.org
			Burton, KeNesha	4029907376	kburton@heartlandfamilyservice.org
			Haynes, Cager	4024577767	chaynes@heartlandfamilyservice.org
			Mcgee, Justin	4023509391	jmcgee@heartlandfamilyservice.org
			Rolfzen, Bailey	4029793549	brolfzen@heartlandfamilyservice.org
			Soe, Eh	4026594171	esoe@heartlandfamilyservice.org
		Family Partner	Soe, Eh	4026594171	esoe@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	Family Support	Andersen, Valeria	4029795833	vandersen@heartlandfamilyservice.org
			Burton, JaNisha	4026713344	jburton@heartlandfamilyservice.org
			Burton, KeNesha	4029907376	kburton@heartlandfamilyservice.org
			Haynes, Cager	4024577767	chaynes@heartlandfamilyservice.org
			Mcgee, Justin	4023509391	jmcgee@heartlandfamilyservice.org
			Rolfzen, Bailey	4029793549	brolfzen@heartlandfamilyservice.org
			Soe, Eh	4026594171	esoe@heartlandfamilyservice.org
		General Education Class	Burton, KeNesha	4029907376	kburton@heartlandfamilyservice.org
			Jorgensen, Shannon	4055527425	sjorgensen@heartlandfamilyservice.org
		Juvenile Co-Occurring Evaluation	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Cassidy, Victoria	4025527015	Vcassidy@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	Juvenile Mental Health Evaluation	Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Mental Health Outpatient Counseling (Group)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Royer, Mary	4025527012	mroyer@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Mary		
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Psychiatric Evaluation			
		Juvenile Substance Use Addendum	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Substance Use Evaluation	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Substance Use Outpatient Treatment	Cassidy, Victoria	4025527015	Vcassidy@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	(Group)	Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Cassidy, Victoria	4025527015	Vcassidy@heartlandfamilyservice.org
			Fry, Sueretta	4025527064	Sfry@Heartlandfamilyservice.org
			Irwin, Erica	4025547052	eirwin@heartlandfamilyservice.org
			Olson, Rachael	4025527059	rolson@heartlandfamilyservice.org
			Schult, Caitlin	4025547204	cschult@heartlandfamilyservice.org
			Walsh, Natasha	4025527499	nwalsh@heartlandfamilyservice.org

Agency Name: Hearts That Heal Family Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Hearts That Heal Family Services LLC	2115 N 75th St 10 Omaha, NEBRASKA 68134	Family Support	McNeil, Amanda	4026899559	heartsthathealfsw@gmail.com

Agency Name: Holistic Healing Mind, Body, & Soul, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Holistic Healing Mind, Body, &	1111 N 13th St. Suite 418 Omaha, NEBRASKA	Juvenile Co-Occurring Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Soul, LLC	68102	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Holmes2Inspire

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Holmes2Inspire	4326 Grand Ave Omaha, NEBRASKA 68111	Family Partner	Holmes Jr, Mr. Rob	4026127518	Holmes2inspire@gmail.com
		Family Support	Holmes Jr, Mr. Rob	4026127518	Holmes2inspire@gmail.com

Agency Name: Imagine by Northpoint

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Imagine by Northpoint	8710 Frederick St. #100 Omaha, NE 68124 Omaha, NEBRASKA 68124	Juvenile Mental Health Day Treatment	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Stevenson, Sandy	2085799858	sstevenson@northpointrecovery.com

Agency Name: Infinite Avenues Counseling, LLC

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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	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Juvenile Substance Use Addendum	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Juvenile Substance Use Evaluation	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Juvenile Substance Use Outpatient Treatment (Group)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Segoviano, Jessica	5313017817	jsegoviano@infiniteavenuescounseling.com

Agency Name: Innerwork Counseling and Consulting LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Innerwork Counseling and Consulting LLC	7905 L Street Ste 430 Omaha, NEBRASKA 68127	Juvenile Psychiatric Evaluation			

Agency Name: Inroads To Recovery

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inroads To Recovery	2808 N 75th St Omaha, NEBRASKA 68134	Juvenile Medication Management			
		Juvenile Psychiatric			

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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	Evaluation			

Agency Name: Intentional Healing Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Intentional Healing Inc	5858 Wenninghoff Road Suite 3 Omaha, NEBRASKA 68134	Anger Management Class			
		Juvenile Mental Health Evaluation	Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com

Agency Name: JS REACH IOP/OP

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
JS REACH IOP/OP	1941 S 42nd Street suite #416P Omaha, NEBRASKA 68105	Juvenile Substance Use Addendum	Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Juvenile Substance Use Evaluation	Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Juvenile Substance Use Outpatient Treatment (Group)	Scott, Judi	4025910871	j.scottcounseling@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Scott, Judi	4025910871	j.scottcounseling@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	Agency Supported Foster Care	Aguirre Placke, Fannye	4023262928	fanaguirreplacke@kvc.org
			Chandler, Travis	4026194125	tchandler@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	Agency Supported Foster Care	Graves, Natalie	4029996751	ngraves@kvc.org
			Jarmin, Samantha	4025785086	sjarmin@kvc.org
			Parks, Lauren	4023205944	Lparks@kvc.org
			Sprakel, Liza	4029801188	lsprakel@kvc.org
			Sutherland, Maizy	4026178873	mlsutherland@kvc.org
			Swanson, Megan	4022388531	mswanson@kvc.org
		Expedited Co-Occurring Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Expedited Mental Health Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Expedited Substance Use Evaluation	Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Rogers, Randall	7127139655	rrogers@kvc.org
		Family Support	Barber, Rakeesha	4028890946	rbarber@kvc.org
			Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@kvc.org
			Thompson,	4029570252	mithompson@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	Family Support	Michaela		
		Intensive Family Preservation	Barber, Rakeesha	4028890946	rbarber@kvc.org
			Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Mapes, Kathleen	4025470741	kmapes@kvc.org
		Invoice - Professional Foster Care			
		Juvenile Co-Occurring Evaluation	Prusia, Jade	4025061008	jprusia@KVC.org
		Juvenile Mental Health Evaluation	Prusia, Jade	4025061008	jprusia@KVC.org
		Juvenile Mental Health Outpatient Counseling (Group)	Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Prusia, Jade	4025061008	jprusia@KVC.org
		Juvenile Substance Use Addendum	Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Rogers, Randall	7127139655	rrogers@kvc.org
		Juvenile Substance Use Evaluation	Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska	11550 I St. Suite 100 Omaha, NEBRASKA 68137	Juvenile Substance Use Evaluation	Rogers, Randall	7127139655	rrogers@kvc.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Rogers, Randall	7127139655	rrogers@kvc.org
		Juvenile Substance Use Outpatient Treatment (Group)	Bolter, Shannon	4028042093	shannon@bekindomaha.com
			Christian, Gloria	7852598007	gkchristian@kvc.org
			Prusia, Jade	4025061008	jprusia@KVC.org
			Rogers, Randall	7127139655	rrogers@kvc.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Prusia, Jade	4025061008	jprusia@KVC.org
			Rogers, Randall	7127139655	rrogers@kvc.org
		Professional Foster Care	Aguirre Placke, Fannye	4023262928	fanaguirreplacke@kvc.org
			Chandler, Travis	4026194125	tchandler@kvc.org
			Graves, Natalie	4029996751	ngraves@kvc.org
			Jarmin, Samantha	4025785086	sjarmin@kvc.org
			Parks, Lauren	4023205944	Lparks@kvc.org
			Sprakel, Liza	4029801188	lsprakel@kvc.org
			Sutherland, Maizy	4026178873	mlsutherland@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	Relative/Kinship Home Study	Griess-Johnston, Cynthia	4023206690	cgriess@kvc.org
			Padilla, Taylor	4026186318	tpadilla@kvc.org
			Parks, Lauren	4023205944	Lparks@kvc.org

Agency Name: Keck Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Keck Counseling LLC	5150 Nth 90th Omaha, NEBRASKA 68134	Juvenile Substance Use Addendum	Keck, Amy	5317729749	Ajksm18@gmail.com
		Juvenile Substance Use Evaluation	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	Juvenile Co-Occurring Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Juvenile Mental Health Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Juvenile Substance Use Addendum	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Juvenile Substance Use Evaluation	Borer, Kersten	4025155383	kerstenborerllc@cox.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Borer, Kersten	4025155383	kerstenborerllc@cox.net

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Agency Name: LC Counselling DBA Healing Pathways

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LC Counselling DBA Healing Pathways	1299 Farnam St. Suite 300 Omaha, NEBRASKA 68102	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			

Agency Name: LNR SafePlace LNR Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LNR SafePlace LNR Services LLC	2325 n 70th st Omaha, NEBRASKA 68104	Family Partner	Parker, Mohogany	4023168813	Mohoganyparker3@gmail.com

Agency Name: LifeForge Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LifeForge Counseling	11218 Elm Street Suite B Omaha, NEBRASKA 68144	Juveniles Who Sexually Harm Intensive Outpatient Counseling (IOP)	Ihle, Christopher	5313755126	ihle.christopher@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Ihle, Christopher	5313755126	ihle.christopher@gmail.com

Agency Name: Lindsay Denker LLC

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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	Juvenile Co-Occurring Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Mental Health Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Psychological Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Substance Use Addendum	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Substance Use Evaluation	Denker, Lindsay	4029326643	therapywithlinds@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	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	Expedited Co-Occurring Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Expedited Mental Health Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Expedited Substance Use Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Juvenile Co-Occurring Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Juvenile Mental Health Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com

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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	Juvenile Substance Use Addendum	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com
		Juvenile Substance Use Evaluation	Eggert, Krysti	4029571709	lookingforwardcounseling@gmail.com

Agency Name: Lutheran Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lutheran Family Services	7929 W. Center Rd Omaha, NEBRASKA 68124	Agency Supported Foster Care			
		Family Partner			
		Family Support			
		Invoice - Professional Foster Care			
		Juvenile Medication Management			
		Juvenile Psychiatric Evaluation			
		Juvenile Substance Use Outpatient Treatment (Group)			
		Professional Foster Care			
Lutheran Family Services of NE	11807 Q Street Omaha, NEBRASKA 68137	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			

Agency Name: Lyfe Changes Resource Center, INC. c/o Project Safe Space- Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lyfe Changes Resource	2509 Decatur	Anger			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Center, INC. c/o Project Safe Space- Nebraska	Street Omaha, NEBRASKA 68111	Management Class			
		Community Treatment Aide (CTA)			
		Day Reporting			
		Family Partner			
		Family Support	Worthington, Brea	4028809925	bgross2015@icloud.com
		Intensive Family Preservation	Worthington, Brea	4028809925	bgross2015@icloud.com
		Relative/ Kinship Home Study	Worthington, Brea	4028809925	bgross2015@icloud.com

Agency Name: MAHANAIM

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
MAHANAIM	9510 Binney st Omaha, NEBRASKA 68134	Day Reporting	YAMEOGO, SERGE	9179824958	sergiop4x@yahoo.fr
		Evening Reporting	YAMEOGO, SERGE	9179824958	sergiop4x@yahoo.fr
		Family Partner			
		Family Support			
		Independent Living	YAMEOGO, SERGE	9179824958	sergiop4x@yahoo.fr

Agency Name: Maddelyn Bal

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Maddelyn Bal	7701 Pacific St 208 Omaha, NEBRASKA	Juvenile Co-Occurring Evaluation	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Maddelyn Bal	68124	Juvenile Mental Health Evaluation	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com
		Juvenile Substance Use Addendum	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com
		Juvenile Substance Use Evaluation	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bal, Maddelyn	4026168607	Maddelyn.bal@gmail.com

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	Juvenile Co-Occurring Evaluation	Maggett, Joseph	4023126840	joseph@maggett-counseling.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Maggett, Joseph	4023126840	joseph@maggett-counseling.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Maggett, Joseph	4023126840	joseph@maggett-counseling.com

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	Juvenile Co-Occurring Evaluation	Wolff, Megan	5312257017	megan@meganwolffcounseling.com
		Juvenile Mental Health Evaluation	Wolff, Megan	5312257017	megan@meganwolffcounseling.com

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

Agency Name: Munroe Meyer Institute at the University of Nebraska Medical Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Munroe Meyer Institute at the University of Nebraska Medical Center	6902 Pine Street Omaha, NEBRASKA 68106	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Psychological Evaluation			

Agency Name: NEBRASKA NEUROBEHAVIORAL SERVICES, INC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
NEBRASKA NEUROBEHAVIORAL SERVICES, INC	10306 Ellison Circle Omaha, NEBRASKA 68132	Invoice - Day Reporting			
		Invoice - Group Home A			
		Professional Foster Care			

Agency Name: NOVA Treatment Community

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
NOVA Treatment	8502 Mormon Bridge Road Omaha,	Agency Supported Foster Care			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Community	NEBRASKA 68152	Family Support			
		Professional Foster Care			
		Relative/Kinship Home Study			
		Specialty Psychiatric Residential Treatment Facility (PRTF)	Henderson, Kimberly	4029918558	khenderson@novatc.org
			Renner, Mikaela	4026773586	mrenner@novatc.org

Agency Name: Neter Enterprise LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Neter Enterprise LLC	5326 Hanover Circle Omaha, NEBRASKA 68152	Day Reporting	Penn, Robert	4027392069	neter.enterprisellc@outlook.com
		Evening Reporting	Penn, Robert	4027392069	neter.enterprisellc@outlook.com
		Family Partner	Penn, Robert	4027392069	neter.enterprisellc@outlook.com
		General Education Class	Penn, Robert	4027392069	neter.enterprisellc@outlook.com

Agency Name: New Balance Counseling

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

Agency Name: New Beginnings Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Beginnings Counseling	11414 W. Center Road Ste 247 Omaha, NEBRASKA 68144	Juvenile Co-Occurring Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Mental Health Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Substance Use Addendum	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Substance Use Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
	10840 Old Mill Rd Ste 300 Omaha, NEBRASKA 68154	Juvenile Co-Occurring Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Mental Health Evaluation	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Substance Use Addendum	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com
		Juvenile Substance	Baumgart,	4025989601	brandy@newbeginningsomaha.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	10840 Old Mill Rd Ste 300 Omaha, NEBRASKA 68154	Use Evaluation	Brandy		
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Baumgart, Brandy	4025989601	brandy@newbeginningsomaha.com

Agency Name: New Hope Agency, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Hope Agency, PC	8790 F Street Studio 823 Omaha, NEBRASKA 68127	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: New Life Family Alliance

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Life Family Alliance	3610 Dodge Street,Ste204 Omaha, NEBRASKA 68131	Family Partner	Laa, Aban	4023158189	alaa@nlfaomaha.org
		Family Support	Laa, Aban	4023158189	alaa@nlfaomaha.org

Agency Name: North Omaha Learning Academy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
North Omaha Learning Academy	4407 Fontenelle BLVD. Omaha, NEBRASKA 68104	Day Reporting			
		Evening Reporting			
		Family Support			

Agency Name: OMNI Inventive Care

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OMNI	5115 F Street	Agency Supported Foster	Bottom, Julie	4029372115	julie.bottom@doane.edu

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Inventive Care	Omaha, NEBRASKA 68117	Care	Whiteley, Kelsey	4022130877	kelsey.whiteley@omniic.com
		Expedited Co-Occurring Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Expedited Mental Health Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Expedited Substance Use Evaluation	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Bottom, Julie	4029372115	julie.bottom@doane.edu
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Family Support	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Forrest, Eric	4023018890	eric.forrest@omniic.com
			Wiehe, Benjamin	4026703015	benjamin.wiehe@omniic.com
		Intensive Family Preservation	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Forrest, Eric	4023018890	eric.forrest@omniic.com
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Invoice - Community Based Alternative Residential	Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Invoice - Day Reporting			
		Invoice - Group Home A			
		Invoice - Professional Foster Care			
		Juvenile Co-Occurring Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Juvenile Mental Health Evaluation	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Sorrell, Catherine	4023979866	kate.sorrell@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
			Whiteley, Kelsey	4022130877	kelsey.whiteley@omniic.com
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Evaluation	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Bottom, Julie	4029372115	julie.bottom@doane.edu
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Substance Use Outpatient Treatment (Group)	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Andersen, Luke	4028817740	Luke.Andersen@omniic.com
			Bottom, Julie	4029372115	julie.bottom@doane.edu
			Hernandez, Antonieta	4022145343	toni.hernandez@omniic.com
			Walker-Vinal, Kristin	4025226212	kwalkerv@gmail.com
		Juveniles Who Sexually Harm Risk Evaluation			
		Professional Foster Care			
		Relative/Kinship Home Study	Whiteley, Kelsey	4022130877	kelsey.whiteley@omniic.com
	8715 Oak Street Omaha, NEBRASKA 68124	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation	Fisher, Laura	4024273857	fisherlaura77@gmail.com
			Jones, Katie	4027402343	katie.jones@omniic.com
		Expedited Substance Use Evaluation			

Agency Name: Omaha Center for Refugee and Immigrant Services INC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Omaha Center for Refugee and Immigrant Services INC	628 N. Saddle Creek Road, Ste B Omaha, NEBRASKA 68132	Family Partner	Aden, Abdifatah	5318677543	abdifatah.aden@ocrisi.org
			Ajongo, Elizabeth	5318677543	elizabeth.ajongo@ocrisi.org
			Mohamed, Abdi	5318677543	abdi.mohamed@ocrisi.org

Agency Name: Omaha Home for Boys (OHB)

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Omaha Home for Boys (OHB)	4343 N 52nd Street Omaha, NEBRASKA 68104	Crisis Stabilization			
		Day Reporting	Krause, Katie	4023502574	kkrause@ohb.org
		Evening Reporting	Krause, Katie	4023502574	kkrause@ohb.org
		Family Support	Koppes, Brittany	5635439033	bkoppes@ohb.org
		Group Home A			
		Independent Living			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Oiler, Jennifer	4024577086	joiler@ohb.org
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Omaha Rebels AIMS

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Omaha Rebels AIMS	1824 N 16th St Omaha, NEBRASKA 68110	Family Support	Smiley, Andrea	4029681684	asmileyomaha@yahoo.com

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	Juvenile Medication Management			
		Juvenile Mental Health			

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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	Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			

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	Expedited Co-Occurring Evaluation	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Expedited Mental Health Evaluation	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org

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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	Expedited Mental Health Evaluation	Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Expedited Substance Use Evaluation	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Co-Occurring Evaluation	Andersen, Brian	4026148444	bandersen@capstonebehavioralhealth.com
			Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation	Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Mental Health Evaluation	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Mental Health Outpatient Counseling (Group)	Andersen, Brian	4026148444	bandersen@capstonebehavioralhealth.com
			Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Jones, Kendra	4025901735	kwjones@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Signorelli,	4026148444	msignorelli@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Juvenile Mental Health Outpatient Counseling (Group)	Mary		
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Andersen, Brian	4026148444	bandersen@capstonebehavioralhealth.com
			Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com
			Jones, Kendra	4025901735	kwjones@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Lindner, Jennifer	4025172948	jlindner@capstonebehavioralhealth.com
			Mills, Ruth	4029578244	rmills@capstonebehavioralhealth.com
			Morell, Elizabeth	4026148444	emorell@capstonebehavioralhealth.com
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Signorelli, Mary	4026148444	msignorelli@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
			Titus, Aaron	4022014765	atitus@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Juvenile Psychological Evaluation	Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com
			Lindner, Jennifer	4025172948	jlindner@capstonebehavioralhealth.com
			Morell, Elizabeth	4026148444	emorell@capstonebehavioralhealth.com
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
		Juvenile Substance Use Addendum	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Substance Use Evaluation	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebaska	1941 S 42nd St Suite 328 Omaha, NEBRASKA 68105	Juvenile Substance Use Evaluation	Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Substance Use Outpatient Treatment (Group)	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Chambers, Carolyn	4022188270	cchambers@capstonebehavioralhealth.com
			Engle, Christine	4028146144	cengle@capstonebehavioralhealth.com
			Escobar, Rocio	4028199343	rescobar@capstonebehavioralhealth.com
			Larson, Alee	4024014387	alee@unconventionalhealing.org
			Roth, Jessica	4024998912	jroth@capstonebehavioralhealth.com
			Stoeger, Anna	4025219998	atenillestoeger@capstonebehavioralhealth.com
			Thompson, Jacquelyn	4026148444	jthompson@capstonebehavioralhealth.com

Agency Name: Our House Youth Services

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Our House Youth Services	1941 South 42nd Street Omaha, NEBRASKA 68105	Evening Reporting			
		Family Partner			

Agency Name: Owens Educational Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Owens Educational Services, Inc.	7413 N 30th Street Omaha, NEBRASKA 68112	Anger Management Class			
		Continuous Alcohol Monitoring (CAM)	Bothwell, Robin	4026583796	Robin.Bothwell@OwensEducationalServices.org
			MARCANTEL, CANDI	4023179941	candi.marcantel@theowenscompanies.com
		Day Reporting	MARCANTEL, CANDI	4023179941	candi.marcantel@theowenscompanies.com
		Evening Reporting	MARCANTEL, CANDI	4023179941	candi.marcantel@theowenscompanies.com
		Family Support	Guerrero, Joaquin	4024518404	joaquin.guerrero@theowenscompanies.com
			Larson, Kimberly	4026899228	Kimberly.Larson@OwensEducationalServices.org
			MARCANTEL, CANDI	4023179941	candi.marcantel@theowenscompanies.com
		General Education Class	MARCANTEL, CANDI	4023179941	candi.marcantel@theowenscompanies.com
			Wilkins, James	4024640784	james.wilkins@theowenscompanies.com
		Invoice - Mileage			
		Juvenile Electronic Monitoring Cell Phone	Bothwell, Robin	4026583796	Robin.Bothwell@OwensEducationalServices.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Owens Educational Services, Inc.	7413 N 30th Street Omaha, NEBRASKA 68112	Juvenile Electronic Monitoring GPS	Bothwell, Robin	4026583796	Robin.Bothwell@OwensEducationalServices.org
		Juvenile Electronic Monitoring Land Line	Bothwell, Robin	4026583796	Robin.Bothwell@OwensEducationalServices.org

Agency Name: Paradigm, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Paradigm, Inc.	809 South 174th Street Omaha, NEBRASKA 68118	Family Support			
		Intensive Family Preservation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Perceptions

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Perceptions	11819 Miracle Hills Drive Suite 203 Omaha, NEBRASKA 68154	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Andres, Sandra	4024144131	sandy-andres@perceptionstherapy.com
			Lohman, Alisha	4028198970	alohmancounseling@gmail.com
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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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	Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			

Agency Name: Prolific Innovative Care LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Prolific Innovative Care LLC	5404 Ames Avenue Omaha, NEBRASKA 68104	Day Reporting	Grixby, Cortney	4022103966	cgrixby@prolificinnovativecare.com
			Hill, Benford	4023201357	bjhill3510@gmail.com
		Evening Reporting	Grixby, Cortney	4022103966	cgrixby@prolificinnovativecare.com
			Hill, Benford	4023201357	bjhill3510@gmail.com
		Family Support	Grixby, Cortney	4022103966	cgrixby@prolificinnovativecare.com
			Hill, Benford	4023201357	bjhill3510@gmail.com

Agency Name: QUALITY CARE PREFERENCE LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
QUALITY CARE PREFERENCE LLC DBA	3347 Ames Avenue	Juvenile Co-Occurring			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
QUALITY EMPOWERMENT PREFERENCE LLC	Omaha, NEBRASKA 68111	Evaluation			
		Juvenile Substance Use Addendum	Tapuriah, Tesa	8638002018	tesa@qualitycarepreference.com
		Juvenile Substance Use Evaluation	Tapuriah, Tesa	8638002018	tesa@qualitycarepreference.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Tapuriah, Tesa	8638002018	tesa@qualitycarepreference.com
		Juvenile Substance Use Outpatient Treatment (Group)	Tapuriah, Tesa	8638002018	tesa@qualitycarepreference.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Tapuriah, Tesa	8638002018	tesa@qualitycarepreference.com

Agency Name: RADIUS

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
RADIUS	5040 Grand Avenue Omaha, NEBRASKA 68104	Family Partner			
		Specialized Restorative Residential Program (RESTORE)			

Agency Name: Rainwood Healing Space-LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Rainwood Healing space LLC	6211 North 75th street Omaha, NEBRASKA 68134	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Goodwin-Daly, Tonya	4028138244	tonya@rainwoodhealingcenter.org

Agency Name: Rapha Counseling & Consulting

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Rapha Counseling & Consulting	1941 South 42nd Street Ste 110 Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juveniles Who Sexually Harm Risk Evaluation			

Agency Name: ReConnect, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
ReConnect, Inc.	1941 So. 42nd St., Suite 502 Omaha, NEBRASKA 68105	Day Reporting			
		Family Support			

Agency Name: ReGang LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
ReGang LLC	3845 Franklin St Omaha, NEBRASKA 68111	Family Support	Harbour, Tylon	4029173797	Reganglc@gmail.com

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	Juvenile Co-Occurring Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Juvenile Mental Health Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Juvenile Mental Health Outpatient	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	Counseling (Individual/Family)			
		Juvenile Substance Use Addendum	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Juvenile Substance Use Evaluation	Campbell, Reed	4029152251	reed@rccounselingconsulting.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Reed	4029152251	reed@rccounselingconsulting.com

Agency Name: Remedy Road LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Remedy Road LLC	5103 south 111th street Omaha, NEBRASKA 68137	Agency Supported Foster Care			
		Group Home A			
		Group Home B			
		Invoice - Day Reporting			
		Invoice - Group Home A			

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	Juvenile Co-Occurring Evaluation	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org
		Juvenile Mental Health Evaluation	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org
		Juvenile Mental Health Outpatient	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	Counseling (Individual/Family)			
		Juvenile Substance Use Evaluation	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Stroud, Haley	4029158344	Haleystroud@renewedlifecounseling.org

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
	8601 F. St Omaha, NEBRASKA 68130	Invoice - Day Reporting			
		Invoice - Group Home A			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

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 402D Omaha, NEBRASKA 68105	Juvenile Co-Occurring Evaluation	Braggs, Danielle	9512338044	daniellebraggs@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Juvenile Medication			

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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 402D Omaha, NEBRASKA 68105	Management			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Braggs, Danielle	9512338044	daniellebraggs@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Juvenile Substance Use Addendum	Braggs, Danielle	9512338044	daniellebraggs@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Juvenile Substance Use Evaluation	Braggs, Danielle	9512338044	daniellebraggs@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Sparks, Albert	4027884846	albert@r3cc.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Braggs, Danielle	9512338044	daniellebraggs@gmail.com
			Flowers, LaRhonda	4027884846	larhonda@r3cc.net
			Guzman-Corr, Paige	4027884846	paige@r3cc.net
			Marshall, Christopher	4026809216	chris@r3cc.net
			Sparks,	4027884846	albert@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 402D Omaha, NEBRASKA 68105	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Albert		
	1941 S. 42nd street Suite 538 Omaha, NEBRASKA 68105	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Results Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Results Counseling LLC	8031 W. Center Rd. Ste. 324 Omaha, NEBRASKA 68124	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Revive Community Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Revive Community Services	18930 Grover Street Omaha, NEBRASKA 68130	Day Reporting	Danner, LaTicia	5317722727	ticia.danner@gmail.com
		Evening Reporting	Danner, LaTicia	5317722727	ticia.danner@gmail.com

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	Crisis Stabilization			
		Group Home A			
		Juvenile Mental Health Therapeutic Group Home			
		Juvenile Substance Use			

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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	Therapeutic Group Home			

Agency Name: Robinson's Family Advocacy Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Robinson's Family Advocacy Center	3223 N. 45th Street Bldg T Omaha, NEBRASKA 68104	Family Partner			

Agency Name: Ronald Smith

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ronald Smith	3841 Decatur Street Omaha, NEBRASKA 68111	Family Partner	Smith, Ronald	4028409820	cprsmith@yahoo.com

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	Family Partner	SMITH, SHANDELL	4028802762	shandellshreesmith@gmail.com
		Family Support	SMITH, SHANDELL	4028802762	shandellshreesmith@gmail.com
		Independent Living	SMITH, SHANDELL	4028802762	shandellshreesmith@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	Juvenile Co-Occurring Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Serenity Matters Counseling	68104	Juvenile Mental Health Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Substance Use Addendum	Browning-Prince, Crystal	4028303890	cbrowningprince@serenitymatterscounseling.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Substance Use Evaluation	Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Browning-Prince, Crystal	4028303890	cbrowningprince@serenitymatterscounseling.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Substance Use Outpatient Treatment (Group)	Browning-Prince, Crystal	4028303890	cbrowningprince@serenitymatterscounseling.com
			Prince, Reginald	4028303877	norwal2003@gmail.com
		Juvenile Substance Use Outpatient Treatment	Prince, Reginald	4028303877	norwal2003@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Serenity Matters Counseling		(Individual/ Family)			

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	Juvenile Mental Health Evaluation	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Ajuoga , Lucy	4029985619	soundmindtherapyservices@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
	13520 Discovery Dr. Ste 203 Omaha, NEBRASKA 68137	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Stay In School Stop The Violence

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Stay In School Stop The	1310 North 29th St Suite 2 Omaha, NEBRASKA	Family Partner			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Violence	68131	Family Support	Almonte, Danitalynn	4028713122	ms.dezires@gmail.com
			Davis, Jerry	4027085597	edu@staystopfound.org

Agency Name: Successful Principles

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Successful Principles	4407 Fontenelle Blvd Omaha, NEBRASKA 68104	Family Support			

Agency Name: Tama Healing LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tama Healing LLC	4905 S 100 Avenue Omaha, NEBRASKA 68127	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Teen Solutions LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Teen Solutions LLC	9508 Maple St Omaha, NEBRASKA 68134	Day Reporting	Bradley, Chris	4026595406	chris@teensolutionsomaha.org
			Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	michelle@teensolutionsomaha.org
			Knight, Julie	4029608729	Julie@teensolutionsomaha.org
		Evening Reporting	Anscomb, David	4022103767	david@teensolutionsomaha.org
			Bradley, Chris	4026595406	chris@teensolutionsomaha.org
			Faulkner, John	4025170249	John@solutionssoberliving.org
			Faulkner, Michelle	4023191718	michelle@teensolutionsomaha.org
			Knight, Julie	4029608729	Julie@teensolutionsomaha.org

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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	Family Partner	Terrell, Timothy	4025950780	Tim.PRC11@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Terrell, Timothy	4025950780	Tim.PRC11@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Terrell, Timothy	4025950780	Tim.PRC11@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			

Agency Name: The Cornell Knight Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Cornell Knight Center	1601 N 73rd Street Unit #6 Omaha, NEBRASKA 68114	Day Reporting	Edwards-Epperson, Jarious	4022666400	CornellKnightCenter@gmail.com
			Knight, Jonelle	4027089587	Knight40204@gmail.com
			Knight, Mary	4022666400	Thecornellknightcenter@gmail.com
		Evening Reporting	Edwards-Epperson, Jarious	4022666400	CornellKnightCenter@gmail.com
			Knight, Jonelle	4027089587	Knight40204@gmail.com
			Knight, Mary	4022666400	Thecornellknightcenter@gmail.com

Agency Name: The Ogba Way

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Ogba Way	20901 Appaloosa Dr Elkhorn, NEBRASKA 68022	Case Managed Tutoring			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Ogba Way	20901 Appaloosa Dr Elkhorn, NEBRASKA 68022	Family Partner			

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	Invoice - Competency Evaluation			
		Juvenile Psychological Evaluation			
		Juveniles Who Sexually Harm Risk Evaluation			

Agency Name: Together Everyone Achieves More (TEAM), LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
TEAM-LLC DAY CENTER	2121 N 120 TH STREET Omaha, NEBRASKA 68164	Day Reporting			
		Evening Reporting			

Agency Name: Trisha Troia Counseling

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

Agency Name: UNMC Physicians Corporation

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
University of Nebraska Physicians	988101 Nebraska Medical Center Omaha, NEBRASKA 68198	Juvenile Co-Occurring Evaluation	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com
			Sharma, Varun	4025526007	varsharma@unmc.edu
			Zoucha, Kenneth	4024693923	kenneth.zoucha@unmc.edu
		Juvenile Medication Management	Sharma, Varun	4025526007	varsharma@unmc.edu
			Zoucha, Kenneth	4024693923	kenneth.zoucha@unmc.edu
		Juvenile Mental Health Evaluation	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com
			Sharma, Varun	4025526007	varsharma@unmc.edu
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com
		Juvenile Psychiatric Evaluation	Sharma, Varun	4025526007	varsharma@unmc.edu
		Juvenile Psychiatric Evaluation Interview Only	Sharma, Varun	4025526007	varsharma@unmc.edu
		Juvenile Substance Use Evaluation	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com
			Zoucha, Kenneth	4024693923	kenneth.zoucha@unmc.edu
		Juvenile Substance Use Outpatient Treatment (Group)	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Schutte-Lundy, Laura	4028073045	lschutte-lundy@nebraskamed.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
University of Nebraska Physicians	988101 Nebraska Medical Center Omaha, NEBRASKA 68198	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Zoucha, Kenneth	4024693923	kenneth.zoucha@unmc.edu

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	Expedited Co-Occurring Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Expedited Mental Health Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Expedited Substance Use Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Co-Occurring Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Mental Health Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Substance Use Addendum	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Substance Use Evaluation	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Larson, Alee	4024014387	alee@unconventionalhealing.org
		Juveniles Who Sexually Harm Risk Evaluation			

Agency Name: Viable Healing

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Viable Healing	2403 n 18th street Omaha, NEBRASKA 68111	Anger Management Class	Conway, Richard	4022376722	Najja1973@yahoo.com
			Peak, Stacie	7122048216	peakwallacem@gmail.com
			Wallace, Roscoe	7122047436	roscoe.wallace@viablehealing.org
		Day Reporting			
		Evening Reporting			
		Family Partner	Clark, Vicki	4025701222	Missvcnebraska1@yahoo.com
			Conway, Richard	4022376722	Najja1973@yahoo.com
			Harris, Walter	5313295103	walterdionharris73@gmail.com
			Hogue, Travis	4027071859	Tchogue1975@gmail.com
			Luczny, Lisa	4027202443	lmluczny@gmail.com
			Manning, Tabatha	4028134703	manning.tabatha@yahoo.com
			Peak, Stacie	7122048216	peakwallacem@gmail.com
			Wallace, Roscoe	7122047436	roscoe.wallace@viablehealing.org
		Family Support	Clark, Vicki	4025701222	Missvcnebraska1@yahoo.com
			Luczny, Lisa	4027202443	lmluczny@gmail.com
			Manning, Tabatha	4028134703	manning.tabatha@yahoo.com
			Wallace, Roscoe	7122047436	roscoe.wallace@viablehealing.org

Agency Name: Vigilnet America LLC

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

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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	Juvenile Electronic Monitoring Cell Phone	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Richey, Cassandra	5312725144	crichey@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com
		Juvenile Electronic Monitoring GPS	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Richey, Cassandra	5312725144	crichey@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com
		Juvenile Electronic Monitoring Land Line	Musel, Hunter	5312058118	hmusel@vigilnet.com
			Richey, Cassandra	5312725144	crichey@vigilnet.com
			Sinnott, Dave	4025379450	dsinnott@vigilnet.com

Agency Name: Water2Spirit LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Olive Crest United Methodist Church 7180 N 60th St, Omaha, NEBRASKA 68152	Day Reporting	Howard, Stevie	4027186267	stevie@water2spirit.com
			Seals, Denisha	5313338421	denisha@water2spirit.com
		Evening Reporting	Howard, Stevie	4027186267	stevie@water2spirit.com
			Seals, Denisha	5313338421	denisha@water2spirit.com
		Family Support	Howard, Stevie	4027186267	stevie@water2spirit.com
			Seals, Denisha	5313338421	denisha@water2spirit.com

Agency Name: Wicks Psychological Services, Inc.

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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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Burger, Rodney	4023397991	office@wickspsych.com
			Wicks, Chris	4023397991	cwicks@cox.net
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Burger, Rodney	4023397991	office@wickspsych.com
			Wicks, Chris	4023397991	cwicks@cox.net

Agency Name: Wilson Counseling Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wilson Counseling Services	105 N 31st Ave suite 212 Omaha, NEBRASKA 68131	Day Reporting			
		Evening Reporting			
		Family Support			

Agency Name: Wonderful Counselor

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wonderful Counselor	1524 Cuming St Apt 215 Omaha, NEBRASKA 68102	Family Partner	Harris, Walter	5313295103	walterdionharris73@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Mitchell, Sheree	4028121575	mitchellsheree3@gmail.com

Agency Name: YouTurn

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
YouTurn	4344 N. 34th Ave Omaha, NEBRASKA 68111	Family Support	Holmes Jr, Mr. Rob	4026127518	Holmes2inspire@gmail.com
			Zelasney, Brooke	4029821224	Brooke@youturnomaha.org

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Agency Name: Young Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Young Hope	2311 N 71st St Omaha, NEBRASKA 68144	Day Reporting			
		Evening Reporting			

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 Youth Coaching	Brown, Lamar	4025102732	lamar@communitybasedservices.co
			Ellis, Latasha	4022377993	Latasha@communitybasedservices.co
			Huerta-Martinez, Alma	4022067545	alma@communitybasedservices.co
			Jones, Diante	4027060136	diante@communitybasedservices.co
			Russell, Jennifer	4027535078	jrussell@communitybasedservices.co
			Strong, LaDonna	4027182182	ladonna@communitybasedservices.co
			Williams, Nia	5312679751	nia@communitybasedservices.co
			allen, matthew	4025102732	mallen@communitybasedservices.co
			lewis, dwight	4027079437	dwight@communitybasedservices.co
			loya, ana	4025102732	ana@communitybasedservices.co
		Continuous Alcohol Monitoring (CAM)	allen, matthew	4025102732	mallen@communitybasedservices.co
		Employment Placement	Ellis, Latasha	4022377993	Latasha@communitybasedservices.co
			Jones, Diante	4027060136	diante@communitybasedservices.co
			allen, matthew	4025102732	mallen@communitybasedservices.co
		Family Partner	Ellis, Latasha	4022377993	Latasha@communitybasedservices.co

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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	Family Partner	Jones, Diante	4027060136	diante@communitybasedservices.co
			allen, matthew	4025102732	mallen@communitybasedservices.co
		Family Support	Brown, Lamar	4025102732	lamar@communitybasedservices.co
			Ellis, Latasha	4022377993	Latasha@communitybasedservices.co
			Huerta-Martinez, Alma	4022067545	alma@communitybasedservices.co
			Jones, Diante	4027060136	diante@communitybasedservices.co
			Strong, LaDonna	4027182182	ladonna@communitybasedservices.co
			Williams, Nia	5312679751	nia@communitybasedservices.co
			allen, matthew	4025102732	mallen@communitybasedservices.co
			lewis, dwight	4027079437	dwight@communitybasedservices.co
			loya, ana	4025102732	ana@communitybasedservices.co