Administrative Office of Courts & Probation

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District 7

Agency Facility County: Antelope

Agency Name: County of Antelope-Antelope County Sheriff's Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
County of Antelope-Antelope County Sheriff's Office	1102 L Street Neligh, NEBRASKA 68756	Invoice - Law Enforcement Transportation			

Agency Facility County: Cuming

Agency Name: Midtown Health Center, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center--West Point	303 Plaza Dr West Point, NEBRASKA 68787	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: The Well

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Outpatient-West Point	130 Anna Stalp Avenue West Point, NEBRASKA 68788	Adult Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Adult Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Adult Mental Health Outpatient Counseling			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Outpatient-West Point	130 Anna Stalp Avenue West Point, NEBRASKA 68788	(Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Facility County: Knox

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-Niobrara	2523 Woodbine St Niobrara, NEBRASKA 68760	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use			

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Lincoln, NE 68509
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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Niobrara	2523 Woodbine St Niobrara, NEBRASKA 68760	Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Facility County: Madison

Agency Name: A Better Spirit Counseling Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
A Better Spirit Counseling Center	400 W. Braasch Ave, Suite 1 Norfolk, NEBRASKA 68701	Adult Mental Health Outpatient Counseling (Individual)	Wells, Amy	4023005150	amy@abetterspirit.com
		Adult Substance Use Evaluation	Wells, Amy	4023005150	amy@abetterspirit.com
		Adult Substance Use Outpatient Treatment (Individual)			
		Expedited Substance Use Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Wells, Amy	4023005150	amy@abetterspirit.com
		Juvenile Substance Use Evaluation	Wells, Amy	4023005150	amy@abetterspirit.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Alicia Wagner Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tranquil Lotus Collaborative	1909 Vicki Lane Suite 105 Norfolk,	Adult Co-Occurring Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org

P.O. Box 98910
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Phone: (402) 471-3730

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tranquil Lotus Collaborative	NEBRASKA 68701	Adult Mental Health Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Co-Occurring Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Mental Health Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile	Wagner,	4022567883	alicia@tranquillotuscollaborative.org

Administrative Office of Courts & Probation

P.O. Box 98910
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Phone: (402) 471-3730

District 7

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Tranquil Lotus Collaborative		Substance Use Addendum	Alicia		
		Juvenile Substance Use Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org

Agency Name: Apex Therapy Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Apex Therapy Services, LLC	1306 Andrews Drive Norfolk, NEBRASKA 68701	Adult Psychological Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org
		Juvenile Psychological Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org
		Juveniles Who Sexually Harm Risk Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org

Agency Name: Associated Psychologists & Counselors, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associated Psychologists &	1306 N. 13th St. Suite 100 Norfolk,	Adult Initial Diagnostic Interview (Medication			

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counselors, LLC	NEBRASKA 68701	Prescriber Only)			
		Adult Mental Health Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Mental Health Outpatient Counseling (Individual)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Psychological Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Sex Offense-Specific Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Substance Use Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Substance Use Outpatient Treatment (Individual)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Mental Health Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Psychological Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juveniles Who Sexually Harm Risk Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org

Agency Name: Behavioral Health Specialists

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Co-Occurring Capable Short-Term Residential			
		Adult Co-Occurring Evaluation			
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Alvarez, Rachel	4025649994	ralvarez@4bhs.org
			Claussen, Patricia	4023401158	anneclaussen27@gmail.com
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Reyes, Juan	4025649994	jreyes@4bhs.org
		Adult Substance Use Evaluation	Alvarez, Rachel	4025649994	ralvarez@4bhs.org
			Claussen, Patricia	4023401158	anneclaussen27@gmail.com
			Hohbein, Kathy	4024169630	khohbein@4bhs.org

Administrative Office of Courts & Probation

P.O. Box 98910
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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation	Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Reyes, Juan	4025649994	jreyes@4bhs.org
			Schliewe, Jennifer	4023703140	jschliewe@4bhs.org
		Adult Substance Use Halfway House	Hohbein, Kathy	4024169630	khohbein@4bhs.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use Outpatient Treatment (Group)	Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Schliewe, Jennifer	4023703140	jschliewe@4bhs.org
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use Outpatient Treatment (Individual)	Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use	Alvarez,	4025649994	ralvarez@4bhs.org

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Short-Term Residential	Rachel		
			Claussen, Patricia	4023401158	anneclaussen27@gmail.com
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Reyes, Juan	4025649994	jreyes@4bhs.org
			Schliewe, Jennifer	4023703140	jschliewe@4bhs.org
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Agency Supported Foster Care			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum	Oestreich, Rhonda	4023703140	roestreich@4bhs.org
		Juvenile Substance Use Evaluation	Oestreich, Rhonda	4023703140	roestreich@4bhs.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Oestreich, Rhonda	4023703140	roestreich@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
		Relative/Kinship Home Study			

Agency Name: COR Therapeutic Services, LLC

Administrative Office of Courts & Probation

P.O. Box 98910
Lincoln, NE 68509
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District 7

Agency Name: COR Therapeutic Services, LLC

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P.O. Box 98910
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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Davies, Paul	4023166570
			Stahlecker, Rebecca	4025006870
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Gadeken, Angela	4023600782
			Leifeld, Katie	4025006870
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
		Adult Substance Use Outpatient Treatment (Individual)	Canham, Abigail	4023790040
			Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Gadeken, Angela	4023600782
			Houser, Elisabeth	4027419121
			Leifeld, Katie	4025006870
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Torres, Tamara	4023694458
			Watson, Syerra	4024196211
			Williams, Tina	4023582047
		Day Reporting	Milander-Mace, Amanda	4025006870
			Schlake, Erin	4026494479
		Expedited Mental Health Evaluation	Behmer, Jamie	4027509556

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District 7

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Administrative Office of Courts & Probation

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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Expedited Mental Health Evaluation	Brooks, Cristy	4025006870
			Burgoon, Andria	4025006870
			Cuevas, Tikisha	4028417633
			Davies, Paul	4023166570
			Freudenburg, Kendra	4025006870
			Gadeken, Angela	4023600782
			Kuchar, Tonya	4025006870
			Larson, Beth	4025006870
			Leifeld, Katie	4025006870
			Lotz, Sharon	4025006870
			Milander-Mace, Amanda	4025006870
			Ohde, Ashton	4025006870
			Reese, Megan	4023672571
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Williams, Tina	4023582047
		General Education Class	Beed, Mariah	4027502506
			Brooks, Cristy	4025006870
			Brugger , Siera	4025006870
			Burgoon, Andria	4025006870
			Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Green, Caleb	4022904634
			Ibsen, Ally	4028850472
			Jefferson, Javona	4029108704

Administrative Office of Courts & Probation

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District 7

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mariah.beed@cortherapeutic.com
cristy.brooks@cortherapeutic.com
siera.brugger@cortherapeutic.com
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Administrative Office of Courts & Probation

P.O. Box 98910
Lincoln, NE 68509
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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	General Education Class	Jueden, Jillian	4023166614
			Klinetobe, Sarah	4023400772
			Leifeld, Katie	4025006870
			Lotz, Sharon	4025006870
			McGill, Pyper	4028011689
			Milander-Mace, Amanda	4025006870
			Ohde, Ashton	4025006870
			Reese, Megan	4023672571
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
		Invoice - Mileage		
		Juvenile Co-Occurring Evaluation	Gadeken, Angela	4023600782
			Houser, Elisabeth	4027419121
			Leifeld, Katie	4025006870
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Williams, Tina	4023582047
		Juvenile Mental Health Evaluation	Beed, Mariah	4027502506
			Behmer, Jamie	4027509556
			Brooks, Cristy	4025006870
			Burgoon, Andria	4025006870
			Cuevas, Tikisha	4028417633
			Davies, Paul	4023166570

Administrative Office of Courts & Probation

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Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Juvenile Mental Health Evaluation	Freudenburg, Kendra	4025006870
			Gadeken, Angela	4023600782
			Jefferson, Javona	4029108704
			Jueden, Jillian	4023166614
			Kuchar, Tonya	4025006870
			Larson, Beth	4025006870
			Leifeld, Katie	4025006870
			Lotz, Sharon	4025006870
			Milander-Mace, Amanda	4025006870
			Ohde, Ashton	4025006870
			Reese, Megan	4023672571
			Roskens, Mikayla	3195296219
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Williams, Tina	4023582047
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Beed, Mariah	4027502506
			Behmer, Jamie	4027509556
			Bender, Yasmine	4029203757
			Blase, Valerie	3089912360
			Brooks, Cristy	4025006870
			Brouwer, Kyle	4025006870
			Brugger , Siera	4025006870
			Burgoon, Andria	4025006870

Administrative Office of Courts & Probation

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

District 7

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andria.burgoon@cortherapeutic.com

Administrative Office of Courts & Probation

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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Cuevas, Tikisha	4028417633
			Davies, Paul	4023166570
			Freudenburg, Kendra	4025006870
			Gadeken, Angela	4023600782
			Green, Caleb	4022904634
			Houser, Elisabeth	4027419121
			Ibsen, Ally	4028850472
			Jefferson, Javona	4029108704
			Jueden, Jillian	4023166614
			Koperski-Bohn, Jenna	4025006870
			Krenk, Sierra	4027410551
			Kuchar, Tonya	4025006870
			Larson, Beth	4025006870
			Leifeld, Katie	4025006870
			Lotz, Sharon	4025006870
			Milander-Mace, Amanda	4025006870
			Ohde, Ashton	4025006870
			Reese, Megan	4023672571
			Reyes, Connie	4029200524
			Roskens, Mikayla	3195296219
			Rowley, Abbie	4025006870
			Shabram, Isaiah	4023405222
			Stahlecker, Rebecca	4025006870

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Streff, Tobin	4025006870
			Torres, Tamara	4023694458
			Watson, Syerra	4024196211
			Wellner, McKenna	4029107610
			Williams, Tina	4023582047
		Juvenile Substance Use Addendum	Canham, Abigail	4023790040
			Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Gadeken, Angela	4023600782
			Houser, Elisabeth	4027419121
			Ibsen, Ally	4028850472
			Leifeld, Katie	4025006870
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Torres, Tamara	4023694458
			Watson, Syerra	4024196211
			Williams, Tina	4023582047
		Juvenile Substance Use Evaluation	Canham, Abigail	4023790040
			Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Gadeken, Angela	4023600782
			Houser, Elisabeth	4027419121
			Ibsen, Ally	4028850472
			Leifeld, Katie	4025006870

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Evaluation	Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Torres, Tamara	4023694458
			Watson, Syerra	4024196211
			Williams, Tina	4023582047
		Juvenile Substance Use Outpatient Treatment (Group)	Canham, Abigail	4023790040
			Duffy, Terry	4026401542
			Leifeld, Katie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Canham, Abigail	4023790040
			Cuevas, Tikisha	4028417633
			Duffy, Terry	4026401542
			Gadeken, Angela	4023600782
			Houser, Elisabeth	4027419121
			Ibsen, Ally	4028850472
			Leifeld, Katie	4025006870
			Rowley, Abbie	4025006870
			Stahlecker, Rebecca	4025006870
			Streff, Tobin	4025006870
			Torres, Tamara	4023694458
			Watson, Syerra	4024196211
			Williams, Tina	4023582047
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Stahlecker, Rebecca	4025006870

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rebecca.stahlecker@cortherapeutic.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
COR Therapeutic Services, LLC	1203 S 8th Street Norfolk, NEBRASKA 68701	Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Davies, Paul	4023166570
		PRS-BIP	Milander-Mace, Amanda	4025006870

Agency Name: Cara Leader Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cara Leader Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Adult Mental Health Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Group)	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Individual)	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Expedited Co-	Leader,	4028609274	cara@tranquillotuscollaborative.org

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Agency Name: Cara Leader Counseling, LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cara Leader Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Occurring Evaluation	Cara		
		Expedited Mental Health Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Expedited Substance Use Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Juvenile Co-Occurring Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Juvenile Mental Health Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
		Juvenile Substance Use Addendum	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Evaluation	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Leader, Cara	4028609274	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org

Agency Name: Carmichael Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carmichael	110 North 37th	Adult Co-Occurring	Carmichael,	4027501222	kirk@carmichaelcounseling.org

P.O. Box 98910
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Phone: (402) 471-3730

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling	Street Suite 301 Norfolk, NEBRASKA 68701	Evaluation	Kirk		
		Adult Mental Health Evaluation	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Adult Mental Health Outpatient Counseling (Individual)	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Adult Substance Use Addendum	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Adult Substance Use Evaluation	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Adult Substance Use Outpatient Treatment (Individual)	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Juvenile Co-Occurring Evaluation	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Juvenile Mental Health Evaluation	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Juvenile Substance Use Addendum	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org
		Juvenile Substance Use Evaluation	Carmichael, Kirk	4027501222	kirk@carmichaelcounseling.org

Agency Name: Crystal Matthews Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Crystal Matthews Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA	Adult Co-Occurring Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org

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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Crystal Matthews Counseling, LLC	68701	Adult Mental Health Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Individual)	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org

Agency Name: Good Life Counseling & Support LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
Good Life Counseling & Support LLC	200 North 34th Street Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Adult Initial Diagnostic Interview (Medication Prescriber Only)		
		Adult Medication Management		
		Adult Mental Health Evaluation	Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Adult Mental Health Outpatient Counseling (Individual)	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920

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Agency Name: Good Life Counseling & Support LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
Good Life Counseling & Support LLC	200 North 34th Street Norfolk, NEBRASKA 68701	Adult Mental Health Outpatient Counseling (Individual)	Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Adult Substance Use Addendum	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Adult Substance Use Evaluation	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Adult Substance Use Intensive Outpatient Counseling (IOP)		
		Adult Substance Use Outpatient Treatment (Individual)	Klassen, Ellie	4027505920
		Community Youth Coaching	Lauterbach, Tina	4026465792
			SCHEER, JADE	4028600673
			Schmuecker , Kirsten	4028449557
			Viquez, Martha	4029100900
		Day Reporting	SCHEER, JADE	4028600673
		Family Support	Hahn, Mary	4025620400
			Lauterbach, Tina	4026465792
			SCHEER, JADE	4028600673
			Schmuecker , Kirsten	4028449557
			Viquez, Martha	4029100900
		Intensive Family Preservation	Hahn, Mary	4025620400
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
Good Life Counseling & Support LLC	200 North 34th Street Norfolk, NEBRASKA 68701	Invoice - Mileage		
		Juvenile Co-Occurring Evaluation	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Juvenile Electronic Monitoring Cell Phone		
		Juvenile Electronic Monitoring GPS	SCHEER, JADE	4028600673
			Schmuecker , Kirsten	4028449557
		Juvenile Electronic Monitoring Land Line		
		Juvenile Medication Management		
		Juvenile Mental Health Evaluation	Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Kubo, Dana	4023713044
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Juvenile Psychiatric Evaluation		
		Juvenile Substance Use Addendum	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		Juvenile Substance Use Evaluation	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone
Good Life Counseling & Support LLC	200 North 34th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Evaluation	Slater, Kendra	4023713044
		Juvenile Substance Use Intensive Outpatient (IOP)	Jackson, Myla	4028416149
			Slater, Kendra	4023713044
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Jackson, Myla	4028416149
			Klassen, Ellie	4027505920
			Kubo, Dana	4023713044
			Slater, Kendra	4023713044
		PRS-BIP		

Agency Name: Kelli Means Teletherapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kelli Means Teletherapy	714 E Park Ave Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Mental Health Evaluation	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Addendum	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Evaluation	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Means, Kelli	4025000028	kmteletherapy@gmail.com

Agency Name: MADISON COUNTY SHERIFF'S OFFICE

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
MADISON COUNTY SHERIFF'S OFFICE	1313 N MAIN ST PO BOX 209 Madison, NEBRASKA	Invoice - Law Enforcement			

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ellie.klassen@goodlifecounseling.com
dana.kubo@goodlifecounseling.com
kendra.slater@goodlifecounseling.com

Agency Name: Kelli Means Teletherapy

Agency Name: MADISON COUNTY SHERIFF'S OFFICE

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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	68748	Transportation			

Agency Name: Madison County Juvenile Accountability Unit

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Madison County Juvenile Accountability Unit	123 North 4th Street Norfolk, NEBRASKA 68701	Day Reporting			

Agency Name: Michael Sullivan Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Michael Sullivan Counseling	110 N. 37th Street Suite 301 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Mental Health Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Substance Use Addendum	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Substance Use Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com

Agency Name: Midtown Health Center, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center, Inc.	302 W Phillip Ave Norfolk, NEBRASKA	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center, Inc.	68701	Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			
Midtown Health Center--Madison	222 S Main St Madison, NEBRASKA 68748	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			
Midtown Xpress Care	210 S 3rd St Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use			

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Xpress Care	210 S 3rd St Norfolk, NEBRASKA 68701	Outpatient Treatment (Individual)			

Agency Name: Northeast Nebraska Juvenile Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northeast Nebraska Juvenile Services	1313 1/2 N. Main Madison, NEBRASKA 68748	Invoice - Secure Detention			
		Invoice - Staff Detention			

Agency Name: Oasis Counseling International

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Casillas, Berenice	4023692942	bcasillas@ocinternational.org
			Mills, Quixuano	4023792030	qmills@ocinternational.org
			Oltmer,	4023792030	coltmer@ocinternational.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Norfolk, NEBRASKA 68701	Adult Mental Health Evaluation	Cynthia		
			Petersen, Connie	4028417720	conpete@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Mills, Quixuano	4023792030	qmills@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Psychological Evaluation	Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Adult Substance	Keller,	4029927206	jkeller@ocinternational.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Norfolk, NEBRASKA 68701	Use Outpatient Treatment (Group)	Janie		
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Community Treatment Aide (CTA)	Clyde, Jessica	4023792030	jclyde@ocinternational.org
			Keller, Janie	4029927206	jkeller@ocinternational.org
		Family Support	Clyde, Jessica	4023792030	jclyde@ocinternational.org
			Keller, Janie	4029927206	jkeller@ocinternational.org
		Juvenile Co-Occurring Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Casillas, Berenice	4023692942	bcasillas@ocinternational.org
			Mills,	4023792030	qmills@ocinternational.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Norfolk, NEBRASKA 68701	Juvenile Mental Health Evaluation	Quixuano		
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org

Agency Name: Owens & Associates, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1220 W Benjamin Ave Norfolk, NEBRASKA 68701	Continuous Alcohol Monitoring (CAM)			

Agency Name: Owens Educational Services, Inc.

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OWENS-NORFOLK	1220 W Benjamin Ave Suite 1 Norfolk, NEBRASKA 68701	Family Support			

Agency Name: PAC Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
PAC Counseling LLC	1909 Vicki Lane Ste 105 Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Adult Substance Use Evaluation	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Adult Substance Use Outpatient Treatment (Group)	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Juvenile Substance Use Addendum	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Juvenile Substance Use Evaluation	Claussen, Patricia	4023401158	anneclaussen27@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Claussen, Patricia	4023401158	anneclaussen27@gmail.com

Agency Name: Ponca Tribe of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Norfolk (Ponca Hills)	1800 Syracuse Av Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient			

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Norfolk (Ponca Hills)	1800 Syracuse Av Norfolk, NEBRASKA 68701	Counseling (Individual)			
		Adult Substance Use Addendum	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
		Adult Substance Use Evaluation	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
		Adult Substance Use Outpatient Treatment (Group)	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
		Adult Substance Use Outpatient Treatment (Individual)	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov

Agency Name: Ramsgate LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ramsgate LLC	1000 Koenigstein Avenue Norfolk, NEBRASKA 68701	15 Day TL Extension - Level 1			
		15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 1			
		45 Day Transitional Living - Level 2			
		Transitional Living - Level 1	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Transitional Living - Level 2	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com

Agency Name: Steffen Social Work Services LLC

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Steffen Social Work Services LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Mental Health Outpatient Counseling (Group)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Group)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org

Agency Name: The Link, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Link, Inc.	1001 West Norfolk Ave. Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Halfway House	Nuss, William	4023715310	wnuss@link-recovery.org
		Transitional Living - Level 1	Nuss, William	4023715310	wnuss@link-recovery.org
		Transitional Living - Level 2	Nuss, William	4023715310	wnuss@link-recovery.org

Agency Name: The Well

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dual Disorder Program	910 W. Park Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Zepeda, Stephanie	4029928670	stephaniezepeda@thewellne.org
		Adult Mental Health Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Zepeda, Stephanie	4029928670	stephaniezepeda@thewellne.org
		Adult Substance Use Addendum	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Zepeda, Stephanie	4029928670	stephaniezepeda@thewellne.org
		Adult Substance Use Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Zepeda, Stephanie	4029928670	stephaniezepeda@thewellne.org
Intermediate Residential/ Halfway House	200 S. 13th Street Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Substance Use Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Substance Use Halfway House	Parr, Jessica	4023793622	jessicaparr@thewellne.org
Men's Program	306 W. Indiana Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
Mommy and Me	512 Verges Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Mental Health Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Mommy and Me	512 Verges Avenue Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Halfway House	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Allen, Amanda	4023710220	MandiAllen@thewellne.org
			Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Mental Health Outpatient Counseling (Individual)	Allen, Amanda	4023710220	MandiAllen@thewellne.org
			Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Mental Health Outpatient Counseling (Individual)	Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Addendum	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Adult Substance Use Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Parr,	4023793622	jessicaparr@thewellne.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation	Jessica		
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Adult Substance Use Outpatient Treatment (Group)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Substance Use Outpatient Treatment (Group)	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Adult Substance Use Outpatient Treatment (Individual)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Community Treatment Aide (CTA)	James, Natalie	4023710220	nataliejames@thewellne.org
		Juvenile Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Substance Use Addendum	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Juvenile Substance Use Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva,	4028385485	kellydesilva@thewellne.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Evaluation	Kelly		
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
		Juvenile Substance Use Outpatient Treatment (Group)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
			Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org

Administrative Office of Courts & Probation

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

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Thomas, Angela	4027502449	athomas@poncatribe-ne.gov
			Vinson, Priscila	4026499635	priscilavinson@thewellne.org
Transitional Living	510 Verges Avenue Norfolk, NEBRASKA 68701	15 Day TL Extension - Level 1			
		15 Day TL Extension - Level 2			
		45 Day Transitional Living - Level 1			
		45 Day Transitional Living - Level 2			
		Transitional Living - Level 1	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org
		Transitional Living - Level 2	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4028385485	kellydesilva@thewellne.org

Agency Name: Women's House of Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Open Doors (Men)	106 W Spruce Ave Norfolk, NEBRASKA 68701	15 Day TL Extension - Level 1			
		45 Day Transitional Living - Level 1			
		Transitional Living - Level 1	Merchant, Chad	4029921119	houseofhope91@yahoo.com

Agency Facility County: Wayne

Administrative Office of Courts & Probation

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

District 7

Agency Name: CITY OF WAYNE POLICE DEPT

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CITY OF WAYNE POLICE DEPT	PO BOX 8 Wayne, NEBRASKA 68787	Invoice - Law Enforcement Transportation			

Agency Name: Renee R Wilson

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wilson Wellness and Counseling	904 Jaxon Street Wayne, NEBRASKA 68787	Adult Substance Use Addendum	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com
		Adult Substance Use Evaluation	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com
		Juvenile Substance Use Evaluation	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com

Agency Name: Wayne County Sheriff's Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wayne County Sheriff's Office	521 Lincoln St. Wayne, NEBRASKA 68787	Invoice - Law Enforcement Transportation			