Administrative Office of Courts & Probation

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

District 3J

Agency Facility County: Lancaster

Agency Name: A Blessing of Hope

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

Agency Name: Adolescent Ally Therapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adolescent Ally Therapy	3350 Crestridge Rd. Lincoln, NEBRASKA 68506	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Alivation Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alivation Health	8550 Cuthills Cir. Lincoln, NEBRASKA 68526	Juvenile Co-Occurring Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Mental Health Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Lile, Melissa (Missy)	4024766060	mlile@alivation.com

Administrative Office of Courts & Probation

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

District 3J

Agency Name: Associates in Counseling & Treatment

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associates in Counseling & Treatment	5600 P Street Lincoln, NEBRASKA 68505	Juvenile Substance Use Addendum	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org
		Juvenile Substance Use Evaluation	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com
			Leikam, Megan	4022616667	megan.leikam@actnebraska.org

Agency Name: Better Living Counseling Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Better Living Counseling Services, Inc.	7100 South 29th Street Suite A Lincoln, NEBRASKA 68516	Agency Supported Foster Care	Balsewicz, Kenna	4024760104	kenna.balsewicz@betterlivingne.com
			Eddings, Jamie	4024760104	jamie.eddings@betterlivingne.com
			Shaw, Taylor	4028218847	taylor.shaw@betterlivingne.com
			Todd, Jacquelyn	4027071792	jacque.todd@betterlivingne.com
		Intensive Family Preservation			
		Relative/ Kinship Home Study	Shaw, Taylor	4028218847	taylor.shaw@betterlivingne.com

Agency Name: Bloom Counseling LLC

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bloom Counseling LLC	315 S 9th street Suite 122 Lincoln, NEBRASKA 68508	Expedited Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Expedited Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Expedited Substance Use Evaluation	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Addendum	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bloom Counseling LLC	315 S 9th street Suite 122 Lincoln, NEBRASKA 68508	Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Rine, Jennifer	5315003549	jenrine@counselingatbloom.com

Agency Name: Blue Valley Behavioral Health, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	3901 Normal Blvd, Suite 201 Lincoln, NEBRASKA 68506	Juvenile Substance Use Evaluation	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Dietz, Kate	4028735505	kdietz@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Campbell, Peyton	4028010292	pcampbell@bvbh.net
			Thomalla, Eric	4024434414	ethomalla@bvbh.net
			Vandenberg, Laura	4026433343	lvandenberg@bvbh.net
			White, Nichole	4022283386	nwhite@bvbh.net

Agency Name: Bryan Health Independence Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bryan Health Independence Center	1640 Lake Street Lincoln, NEBRASKA	Juvenile SUD Medical Detox			
		Juvenile Substance Use	Bianco,	5312053084	steph.bianco810@gmail.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bryan Health Independence Center	68502	Addendum	Stephanie		
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Juvenile Substance Use Evaluation	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
		Juvenile Substance Use Intensive Outpatient (IOP)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bianco, Stephanie	5312053084	steph.bianco810@gmail.com
			Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson,	4024815392	jill.johnson@bryanhealth.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Bryan Health Independence Center		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Jill		
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Sarafian, Michelle	4024815875	michelle.sarafian@bryanhealth.org
		Specialty Psychiatric Residential Treatment Facility (PRTF)	Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org
			McLeese-Grifin, Stephanie	4024815684	stephanie.mcleese-griffin@bryanhealth.org
			Phillips, Michele	5314445103	Michele.Phillips@bryanhealth.org
			Popple, Lisa	4024815268	lisa.popple@bryanhealth.org
			Sarafian, Michelle	4024815875	michelle.sarafian@bryanhealth.org

Agency Name: CEDARS Youth Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	Agency Supported Foster Care			
		Community Youth Coaching	Atem, Mary	4028905625	matem@cedarskids.org
			Fitzgerald, Jessalynn	5312470987	Jfitzgerald@cedarskids.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	Community Youth Coaching	Haas, Steffen	4026130957	shaas@cedarskids.org
			Halferty, Samantha	4022021824	shalferty@cedarskids.org
			Hillman, Olyvia	4028909268	ohillman@cedarskids.org
			Jones, Christopher	4022021248	cjones@cedarskids.org
			Koso, Virginia	4024378999	nbfrontdesk@cedarskids.org
			Little, Tamra	4028482095	tlittle@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Thompson, Shayla	5315009976	sthompson@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Family Support	Atem, Mary	4028905625	matem@cedarskids.org
			Fitzgerald, Jessalynn	5312470987	Jfitzgerald@cedarskids.org
			Haas, Steffen	4026130957	shaas@cedarskids.org
			Halferty, Samantha	4022021824	shalferty@cedarskids.org
			Hillman, Olyvia	4028909268	ohillman@cedarskids.org
			Koso, Virginia	4024378999	nbfrontdesk@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Co-Occurring			

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Northbridge Community Center	1533 N 27th St Lincoln, NEBRASKA 68503	Evaluation			
		Juvenile Electronic Monitoring Cell Phone			
		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 Electronic Monitoring Land Line			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Professional Foster Care			
		Relative/Kinship Home Study			
CEDARS Youth Opportunity Center	1620 N Street Lincoln, NEBRASKA 68508	Independent Living			
CEDARS Youth Services	6601 Pioneers Blvd, Ste 1 Lincoln, NEBRASKA 68506	Crisis Stabilization	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Invoice - Mileage			
		Invoice - Professional Foster Care			
		Juvenile Co-Occurring Evaluation	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Juvenile Mental Health Evaluation	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org
		Juvenile Mental Health	Rickertsen,	4028909241	arickertsen@cedarskids.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CEDARS Youth Services	6601 Pioneers Blvd, Ste 1 Lincoln, NEBRASKA 68506	Outpatient Counseling (Individual/Family)	Allyson		
		Juvenile Substance Use Evaluation	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org

Agency Name: Center For Independent Living of Central Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	140 S 27TH ST SUITE B Lincoln, NEBRASKA 68510	Juvenile Co-Occurring Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
		Juvenile Mental Health Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
		Juvenile Substance Use Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org

Agency Name: CenterPointe, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Adult Residential	2220 S 10th Lincoln, NEBRASKA 68502	Juvenile Medication Management			
CenterPointe Outpatient	2202 S. 11th St. Lincoln, NEBRASKA 68503	Family Support			
		Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling (Group)	Borchers, Amy	3033710925	aborchers@centerpointe.org
		Juvenile Substance Use Outpatient Treatment (Group)	Borchers, Amy	3033710925	aborchers@centerpointe.org

Agency Name: Choices Treatment Center, Inc.

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Choices Treatment Center, Inc.	127 S. 37th St., Suite B Lincoln, NEBRASKA 68510	Juvenile Co-Occurring Evaluation	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum	Stabler, Sheree	4027306499	sheree.stabler@gmail.com
		Juvenile Substance Use Evaluation			

Agency Name: Christian Heritage

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

Agency Name: Committing to Change Counseling and Recovery

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Committing to Change Counseling and Recovery	1701 Windhoek Dr Suite 140 Lincoln, NEBRASKA 68512	Juvenile Substance Use Outpatient Treatment (Individual/Family)	McNichols, Stephanie	4022358568	stephanie.j.mcnichols@gmail.com

Agency Name: Complete Family Treatment Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Family Treatment Services LNK	4600 Valley Road Suite 425 Lincoln, NEBRASKA 68510	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Complete Family Treatment Services LNK	4600 Valley Road Suite 425 Lincoln, NEBRASKA 68510	Expedited Substance Use Evaluation			

Agency Name: Diana Arpan

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

Agency Name: Engrained Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Engrained Counseling LLC	9100 Andermatt Dr ste 1 Lincoln, NEBRASKA 68526	Juvenile Co-Occurring Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Mental Health Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Addendum	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Evaluation	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Schottel, Ronicka	7855410370	ronicka@gmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Risk Evaluation			

Agency Name: Harmony Health Center LLC

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
College View Harmony Health Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	General Education Class	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Threats, Debra	4024054617	dthreats1@hotmail.com
		Juvenile Co-Occurring Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			De La Cruz, Andrea (Annie)	4029571476	annie@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Outpatient Counseling (Group)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			De La Cruz, Andrea (Annie)	4029571476	annie@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			De La Cruz, Andrea	4029571476	annie@cvharmonyhealth.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
College View Harmony Health Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	Juvenile Mental Health Outpatient Counseling (Individual/Family)	(Annie)		
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Substance Use Addendum	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	dthreats1@hotmail.com
		Juvenile Substance Use Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	dthreats1@hotmail.com
		Juvenile Substance Use Outpatient Treatment (Group)	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
			Threats, Debra	4024054617	dthreats1@hotmail.com

Agency Name: HopeSpoke

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling (Group)	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Wellman, Carrie	4024757666	cwellman@hopespoke.org

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Neal, Ann	4024163928	aneal@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org
			Trofholz, Chad	4026069262	ctrofholz@gmail.com
			Waltman, Alicia	4024757666	awaltman@hopespoke.org
		Juvenile Psychiatric Evaluation			
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Bizal, Kyle	4023108006	kbizal@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Neal, Ann	4024163928	aneal@hopespoke.org
			Noetzel, Jared	4026189569	jnoetzel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Bizal, Kyle	4023108006	kbizal@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Kuhlman, Alexandra	3083905465	lexeekuhlman@outlook.com
			Noetzel, Jared	4026189569	jnoetzel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
		Juveniles Who Sexually Harm Risk Evaluation	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Neal, Ann	4024163928	aneal@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
HopeSpoke ThGH	904 Sumner Street Lincoln, NEBRASKA 68502	Juvenile Medication Management			
		Juvenile Psychological Evaluation			
		Juveniles Who Sexually Harm Intensive Outpatient Counseling (IOP)	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org
		Juveniles Who Sexually Harm Therapeutic Group Home	Benesch, Kevin	4024757666	kbenesch@hopespoke.org
			Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
HopeSpoke ThGH	904 Sumner Street Lincoln, NEBRASKA 68502	Juveniles Who Sexually Harm Therapeutic Group Home	Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org
		Juveniles Who Sexually Harm Therapeutic Group Home - Room & Board	Brooks, Tony	4024342670	tbrooks@hopespoke.org
			Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
			Pickel, Katy	4023108375	kpickel@hopespoke.org
			Posvar, Christina	4024342670	cposvar@hopespoke.org

Agency Name: Imagine by Northpoint

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northpoint Lincoln	3801 Union Drive Lincoln, NEBRASKA 68516	Juvenile Mental Health Day Treatment			
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Substance Use Intensive Outpatient (IOP)			

Agency Name: Integrated Roots Support Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Integrated Roots Support Services	4535 Normal Blvd Suite 212 Lincoln, NEBRASKA 68506	Family Support	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
	2201 Independence Dr Lincoln, NEBRASKA 68521	Family Support			

Agency Name: Jenda Family Services

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Family Services	815 K Street Lincoln, NEBRASKA 68405	Agency Supported Foster Care	Bodfield, Lexy	4024182898	lexybodfield@jendafamilyservices.com
			Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			Madsen, Janessa	3088300698	janessamadsen@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
		Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation			
		Family Support	Benes, Sara	4024136159	sarabenes@jendafamilyservices.com
			Bliven, Amya	3085297082	amyabliven@jendafamilyservices.com
			Bodfield, Lexy	4024182898	lexybodfield@jendafamilyservices.com
			Brown, Coreena	4024740011	coreenabrown@jendafamilyservices.com
			Brown, Jessica	4026865751	jessicabrown@jendafamilyservices.com
			Cabrera, Isabel	4024740011	isabelcabrera@jendafamilyservices.com
			Cardona, Jennifer	4024188984	jennifercardona@jendafamilyservices.com
			Cavalier, Emma	7125796831	Emmacavalier@jendafamilyservices.com
			Cross, McKinley	4024740011	mckinleycross@jendafamilyservices.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Family Services	815 K Street Lincoln, NEBRASKA 68405	Family Support	Dick, Natalia	4023669685	Nataliadick@jendafamilyservices.com
			Jepsen, Tyler	4024142911	tylerjepsen@jendafamilyservices.com
			Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			McMahan, Jayden	4029042536	jaydenmcmahan@jendafamilyservices.com
			Munger, Chelsea	4028603110	chelseamunger@jendafamilyservices.com
			Stubbs, Mallory	4026491534	mallorystubbs@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
			Uglow, Kelli	4028024821	kelliuglow@jendafamilyservices.com
			Wheeler, Harmony	4028057033	harmonywheeler@jendafamilyservices.com
		Intensive Family Preservation	Bender, Rachel	4023000114	Rachelprater@jendafamilyservices.com
			Cottle, Montana	4028381145	montanacottle@jendafamilyservices.com
			Ehlers, Nancy	4023044989	nancyehlers@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Williams, Kristin	3164613669	kristinwilliams@jendafamilyservices.com
			Zach, Jessica	3083676872	jessicazach@jendafamilyservices.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/			

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Family Services	815 K Street Lincoln, NEBRASKA 68405	Family)			
		Professional Foster Care	Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
		Relative/Kinship Home Study	Bodfield, Lexy	4024182898	lexybodfield@jendafamilyservices.com
Jenda Family Services - Lincoln	4701 Innovation Drive Lincoln, NEBRASKA 68521	Agency Supported Foster Care			
		Family Support			
		Professional Foster Care			
		Relative/Kinship Home Study			
Jenda Independent Living	770 Cotner Blvd Suite 100 Lincoln, NEBRASKA 68505	Independent Living			
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Expedited Co-Occurring Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Expedited Mental Health Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman,	4026415909	whitneychrisman@jendafamilyservices.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Expedited Mental Health Evaluation	Whitney		
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Expedited Substance Use Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		General Education Class	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Intensive Family Preservation			
		Juvenile Co-Occurring Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason,	5315005729	amandamason@jendafamilyservices.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Juvenile Co-Occurring Evaluation	Amanda		
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Outpatient Counseling (Group)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Juvenile Mental Health Outpatient Counseling (Individual/ Family)	Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Addendum	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jenda Outpatient Clinic	4600 Valley Road Suite 350 Lincoln, NEBRASKA 68510	Outpatient Treatment (Group)	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Outpatient Treatment (Individual/ Family)	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Ellis, Tara	5737199655	ellis.taral@gmail.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/ Family)			

Agency Name: Julia Doss

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

Agency Name: Julie Bottom Counseling

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Julie Bottom Counseling	8225 Northwoods Drive Lincoln, NEBRASKA 68505	Juvenile Substance Use Addendum	Bottom, Julie	4029372115	julie.bottom@doane.edu
		Juvenile Substance Use Evaluation	Bottom, Julie	4029372115	julie.bottom@doane.edu
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bottom, Julie	4029372115	julie.bottom@doane.edu

Agency Name: KVC Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Agency Supported Foster Care	Ahmann , Lisa	4025705559	lahmann@kvc.org
			Crook, Becca	4027305203	rcrook@kvc.org
			Heinzerling, Erica	5154193578	eheinzerling@kvc.org
			Klahn, Tanner	4028907269	tklahn@kvc.org
			Marino, Faith	5315309257	fmarino@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	Jlschuler@kvc.org
			Thompson, Kaitlyn	5317396725	kathompson@kvc.org
		Expedited Co-Occurring Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Expedited Mental Health Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Expedited Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Family Support	Christian, Gloria	7852598007	gkchristian@kvc.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Family Support	Grayson, Patrick	4029402766	Pgrayson@kvc.org
			Jurgens, Riley	4026496219	rjurgens@kvc.org
			Roybal, Maggie	5313010835	mroybal@kvc.org
		Intensive Family Preservation	Christian, Gloria	7852598007	gkchristian@kvc.org
			Jurgens, Riley	4026496219	rjurgens@kvc.org
			Roybal, Maggie	5313010835	mroybal@kvc.org
		Invoice - Emergency Professional Foster Care			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Evaluation	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Outpatient Treatment (Group)	Christian, Gloria	7852598007	gkchristian@kvc.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
		Professional Foster Care	Ahmann , Lisa	4025705559	lahmann@kvc.org
			Crook, Becca	4027305203	rcrook@kvc.org
			Heinzerling, Erica	5154193578	eheinzerling@kvc.org
			Klahn, Tanner	4028907269	tklahn@kvc.org

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Professional Foster Care	Marino, Faith	5315309257	fmarino@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	Jlschuler@kvc.org
			Thompson, Kaitlyn	5317396725	kathompson@kvc.org
		Relative/Kinship Home Study	Bequette, Jason	4027308892	jbequette@kvc.org
			Bonney-Heermann, Elizabeth	4025700688	ebonney@kvc.org
			Crook, Becca	4027305203	rcrook@kvc.org
			Lindsay, Whitney	5315107258	wlindsay@kvc.org
			Meister, Elizabeth	4024500509	emeister@kvc.org
			Schuler, Jessica	4027304743	Jlschuler@kvc.org

Agency Name: Lancaster County Youth Services Center

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

Agency Name: Lincoln Regional Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lincoln Regional	801 West Prospector Place Lincoln, NEBRASKA	Invoice - Competency	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Center	68522	Evaluation			
		Juvenile Mental Health Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov
		Juvenile Psychological Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov

Agency Name: Lumos Mental Health Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lumos Mental Health Services	5715 South 34th Street Suite 500 Lincoln, NEBRASKA 68516	Juvenile Mental Health Evaluation	Hollister, Michelina	4022055677	miki@lumosmhs.com
			Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Dorant, Ami	4022055677	Ami@LumosMHS.com
			Hollister, Michelina	4022055677	miki@lumosmhs.com
			Kovar, Kaitlyn	4028040203	kaitlyn@lumosmhs.com
			Schlichenmaier, Kayla	4022055677	kayla@lumosmhs.com
			Trauernicht, Joellyn	4022055677	joey@lumosmhs.com

Agency Name: Lutheran Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lutheran Family Services of NE	5025 Garland Lincoln, NEBRASKA 68504	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Group)			

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lutheran Family Services of NE	5025 Garland Lincoln, NEBRASKA 68504	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
	2301 O Street, Ste 1 Lincoln, NEBRASKA 68510	Juvenile Medication Management			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Substance Use Outpatient Treatment (Group)			

Agency Name: Lynn Beideck Recovery/Behavioral Health Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lynn Beideck Recovery/ Behavioral Health Services	3119 S. 33rd St Lincoln, NEBRASKA 68506	Juvenile Co-Occurring Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Juvenile Mental Health Evaluation	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Beideck, Lynn	4025609558	lynnbeideck3@gmail.com

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

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	620 N 48th St Suite 303 Lincoln, NEBRASKA 68504	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Multisystemic Therapy (MST)	Bernadt, Jay	4024056615	jbernadt@midplainscenter.org
			Clark, Vernon	4028408204	vclark@midplainscenter.org
			Epperson, Pamela	4027079839	pepperson@midplainscenter.org

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	620 N 48th St Suite 303 Lincoln, NEBRASKA 68504	Multisystemic Therapy (MST)	Nichols, Kayla	4028170352	knichols@midplainscenter.org
			Super, Trudy	4028031731	tsuper@midplainscenter.org

Agency Name: New Beginnings Psychological Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Beginnings Psychological Services	140 N. 8th St. #430 Lincoln, NEBRASKA 68508	Juvenile Mental Health Outpatient Counseling (Group)	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juvenile Psychological Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juvenile Substance Use Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com
		Juveniles Who Sexually Harm Risk Evaluation	Schutz, Antoni	4029378570	drschutz@remedypsych.com

Agency Name: New Hope Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Hope Counseling, LLC	7130 South 29th Street, Suite D7 Lincoln, NEBRASKA 68516	Juvenile Co-Occurring Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Substance Use Addendum	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com
		Juvenile Substance Use Evaluation	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Hope Counseling, LLC	7130 South 29th Street, Suite D7 Lincoln, NEBRASKA 68516	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Pawlowski, Kristi	4024057922	kristi@newhopecounselinglincoln.com

Agency Name: New Possibilities Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Possibilities Counseling, LLC	770 N. Cotner Blvd Suite 402 Lincoln, NEBRASKA 68505	Juvenile Co-Occurring Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Mental Health Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Addendum	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Evaluation	Carville, Misty	4023107867	mistycarville313@gmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Carville, Misty	4023107867	mistycarville313@gmail.com

Agency Name: New Way Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New Way Counseling, LLC	1701 Windhoek Dr. Suite 200A Lincoln, NEBRASKA 68512	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Martin, Kelly	4022646716	newwaycounselingne@gmail.com

Agency Name: Northside Behavioral Health Group

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northside Behavioral Health Group	2100 Fletcher Ave STE 103 Lincoln, NEBRASKA 68521	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: OMNI Inventive Care

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2300 South 13th Street Lincoln, NEBRASKA 68502	Agency Supported Foster Care	Marschman, Mindy	4022399719	mindy.marschman@omniic.com
		Expedited Co-Occurring Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Expedited Mental Health Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
		Expedited Substance Use Evaluation	Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Family Support	Fralin, Kelly	4025201571	kelly.fralin@omniic.com
			Frye, Amy	4023639859	amy.frye@omniic.com
			Ladd, Allen	4028050897	allen.ladd@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
			Thayer, Heather	4023691484	Heather.Thayer@omniic.com
		Intensive Family Preservation	Fralin, Kelly	4025201571	kelly.fralin@omniic.com
			Frye, Amy	4023639859	amy.frye@omniic.com
			Ladd, Allen	4028050897	allen.ladd@omniic.com
			Sieck,	4023193429	shannon.sieck@omniic.com

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

District 3J

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

Agency Name: Omaha Insomnia and Psychiatric Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
VEN Whole Healthcare LLC	7655 Archer Pl Lincoln, NEBRASKA 68516	Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
VEN Whole Healthcare LLC	7655 Archer Pl Lincoln, NEBRASKA 68516	Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation			

Agency Name: Owens Educational Services, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OWENS-LINCOLN	5800 Cornhusker Hwy, Suite 7 SUITE 7 Lincoln, NEBRASKA 68507	Family Support	Adams, Brandi	4029750182	Brandi.Adams@owenseducationalservices.org
			Wilkins, James	4024640784	james.wilkins@theowenscompanies.com

Agency Name: Paradigm, Inc.

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

Agency Name: Pathfinder Support Services Home Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pathfinder Support Services - Lincoln	6130 South 58th Street SuiteD Lincoln, NEBRASKA 68516	Day Reporting	Perry, Tera	7753890866	tperry@pathfinderserv.com
		Evening Reporting	Perry, Tera	7753890866	tperry@pathfinderserv.com
		Family Support	Perry, Tera	7753890866	tperry@pathfinderserv.com

Agency Name: Pine Lake Behavioral Health & Medical

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Pine Lake Behavioral Health & Medical	9100 Andermatt Drive Suite 1 Lincoln, NEBRASKA 68526	Juvenile Co-Occurring Evaluation			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Group)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Pioneer Counseling Center

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

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Center	68516	Evaluation			
		Invoice - Psychological Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Juvenile Competency Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Juvenile Psychological Evaluation	Remington, Janelle	4024408025	jremington@madonna.org

Agency Name: Ponca Tribe of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Lincoln	1600 Windhoek Drive Lincoln, NEBRASKA 68512	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Raquel Moreno Izaguirre LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Raquel Moreno Izaguirre LLC	4535 Normal Blvd Suite 212 Lincoln, NEBRASKA 68506	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Moreno Izaguirre, Raquel	4023099978	rmorenoizaguirre@integratedroots.org
		Juvenile Substance			

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Raquel Moreno Izaguirre LLC	4535 Normal Blvd Suite 212 Lincoln, NEBRASKA 68506	Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Region V Systems Behavioral Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Region V Systems Behavioral Health	1645 N Street Lincoln, NEBRASKA 68508	Expedited Family Group Conference			
		Justice Wraparound	Dreier, Alicia	5317399345	adreier@region5systems.net
			Houska, Eden	4024415579	ehouska@region5systems.net

Agency Name: Release Counseling & Assessment Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Release Counseling & Assessment Services, LLC	8101 O Street Suite 300 Lincoln, NEBRASKA 68510	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			

Agency Name: Sapphire Counseling and Assessments, LLC

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sapphire Counseling and Assessments, LLC	3400 Plantation Drive Suite 100- Wellness Wing Lincoln, NEBRASKA 68516	Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Sarah Smith Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Sarah Smith Counseling, LLC	2411 W C St Lincoln, NEBRASKA 68522	Juvenile Mental Health Outpatient Counseling (Individual/Family)			
	700 R St. Suite 317 Lincoln, NEBRASKA 68501	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: Second Chances Psychotherapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Second Chances Psychotherapy	140 N 8th St #430 Lincoln, NEBRASKA 68508	Juvenile Mental Health Outpatient Counseling (Group)	Cornish, Audrey	4024170783	audrey@remedypsych.com

Agency Name: Silver Sun Mental Health DBA Nebraska Mental Health Centers

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA	4545 S. 86th St.	Juvenile Co-Occurring	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nebraska Mental Health Centers	Lincoln, NEBRASKA 68526	Evaluation	Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Medication Management	Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Mental Health Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com
			Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Dieckgrafe, Amanda	4024836990	adieckgrafe@nmhc-clinics.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Groeteke, Olivia	4024836990	ogroeteke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Psychiatric Evaluation	Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Psychiatric Evaluation Interview Only	Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
		Juvenile Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Substance Use Addendum	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Substance Use Addendum	Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Substance Use Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Gatlin, Kristine	4027593802	kristine@gatlinpsychiatricservices.org
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Groeteke, Olivia	4024836990	ogroeteke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juveniles Who Sexually Harm Risk Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com

Agency Name: Solace Behavioral Health and Wellness

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Solace Behavioral Health and Wellness	1541 Center Park Rd Suite 2 Lincoln, NEBRASKA 68512	Juvenile Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

Agency Name: The Mediation Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Mediation Center	610 J Street Suite 100 Lincoln, NEBRASKA 68508	Expedited Family Group Conference			
		Mediation			

Agency Name: True Balance Therapy & Wellness LLC

Administrative Office of Courts & Probation

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
True Balance Therapy & Wellness LLC	7701 S 21 St Lincoln, NEBRASKA 68512	Juvenile Co-Occurring Evaluation			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation			
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Intensive Outpatient (IOP)			
		Juvenile Substance Use Outpatient Treatment (Group)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: WICS-Women In Community Service

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

Agency Name: Wellbeing Initiative, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wellbeing	5530 O St Ste 2 Lincoln,	Day Reporting			

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

District 3J

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Initiative, Inc.	NEBRASKA 68510	Evening Reporting			
		Family Partner			
		Family Support			
		General Education Class			

Agency Name: Whitehall PRTF

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Whitehall PRTF	5900 Walker Ave. Lincoln, NEBRASKA 68507	Hospital Based Psychiatric Residential Treatment Facility (PRTF)	Esquivel, Jesus	4025707645	jesse.esquivel@nebraska.gov
			Holbrook, Rolf	4024716154	rolf.holbrook@nebraska.gov
			Karn, Miranda	6058911411	miranda.karn@nebraska.gov
			Mousel, Mindy	4024716969	mindy.mousel@nebraska.gov
			Nash, Cindy	4024716180	cindy.nash@nebraska.gov
			Prescott, Sara	4024716969	sara.prescott@nebraska.gov
		Juvenile Psychiatric Evaluation			
		Juvenile Psychological Evaluation	Nash, Cindy	4024716180	cindy.nash@nebraska.gov
		Juveniles Who Sexually Harm Risk Evaluation	Nash, Cindy	4024716180	cindy.nash@nebraska.gov

Agency Name: Youth for Christ - Lincoln

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Youth for Christ - Lincoln	6401 Pine Lake Rd Lincoln, NEBRASKA 68516	General Education Class			

Agency Name: berniklau education solutions team

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

District 3J

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