

# Administrative Office of Courts & Probation

P.O. Box 98910  
Lincoln, NE 68509  
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
A Blessing of Hope	7130 S 29th St, STE A Lincoln, NEBRASKA 68516	Day Reporting			
		Family Support	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: Affirmation Drug and Alcohol Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Affirmation Drug and Alcohol Counseling	301 S. 70th Street, Suite 313 Lincoln, NEBRASKA 68510	Juvenile Substance Use Addendum	Johnson, Eric	4023096981	ejohnson@affdac.com
		Juvenile Substance Use Evaluation	Johnson, Eric	4023096981	ejohnson@affdac.com
		Juvenile Substance Use Outpatient Treatment (Group)	Johnson, Eric	4023096981	ejohnson@affdac.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Johnson, Eric	4023096981	ejohnson@affdac.com

#### 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	Juvenile Co-Occurring Evaluation	Lile, Melissa (Missy)	4024766060	mlile@alivation.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Alivation Health	68526	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

### 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
		Juvenile Substance Use Evaluation	Cramer, Angela	4022616667	angela.cramer@actnebraska.org
			Karas, Alice	4029757007	akaras1263@gmail.com

### 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,	4028218847	taylor.shaw@betterlivingne.com

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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	Taylor		
			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

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
		Juvenile Co-Occurring Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Knott, Joseph	3082894604	joeknott@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		Juvenile Mental Health Evaluation	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Knott, Joseph	3082894604	joeknott@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com

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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	Juvenile Mental Health Evaluation	Jennifer		
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Kirkwood, Sarah	5315003759	sarahkirkwood@counselingatbloom.com
			Knott, Joseph	3082894604	joeknott@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
			Knott, Joseph	3082894604	joeknott@counselingatbloom.com
			Rine, Jennifer	5315003549	jenrine@counselingatbloom.com
		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,	4026433343	lvandenberg@bvbh.net

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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	Laura		
			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 68502	Juvenile SUD Medical Detox			
		Juvenile Substance Use Addendum	Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Phillips, Michele	5314445103	michele.phillips@onelfs.org
		Juvenile Substance Use Evaluation	Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Phillips, Michele	5314445103	michele.phillips@onelfs.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Holmquist, Larry	4024815494	jim.holmquist@bryanhealth.org
			Johnson, Jill	4024815392	jill.johnson@bryanhealth.org
			Marvin, Annette	4025703555	annette.marvin@bryanhealth.org

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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 68502	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Phillips, Michele	5314445103	michele.phillips@onelfs.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
			Phillips, Michele	5314445103	michele.phillips@onelfs.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
			Fellers, Johana	5318101590	jfellers@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
			Jones, Christopher	4022021248	cjones@cedarskids.org
Koso, Virginia	4024378999	nbfrontdesk@cedarskids.org			

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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	Morehead, Teresa	4025703785	tmorehead@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Family Support	Atem, Mary	4028905625	matem@cedarskids.org
			Fellers, Johana	5318101590	jfellers@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
			Morehead, Teresa	4025703785	tmorehead@cedarskids.org
			Murphy, Shannon	4028101069	smurphy@cedarskids.org
			Utter, Daniel	4028100590	dutter@cedarskids.org
		Juvenile Co-Occurring Evaluation			
		Juvenile Electronic Monitoring Cell Phone			
		Juvenile Electronic Monitoring GPS	Fellers, Johana	5318101590	jfellers@cedarskids.org
			Harmon, Grace	4025107916	gharmon@cedarskids.org
Morehead, Teresa	4025703785		tmorehead@cedarskids.org		

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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	Juvenile Electronic Monitoring GPS	Teresa		
			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	Kettler, Nanci	4024345437	nkettler@cedarskids.org
CEDARS Youth Services	6601 Pioneers Blvd, Ste 1 Lincoln, NEBRASKA 68506	Crisis Stabilization	Kettler, Nanci	4024345437	nkettler@cedarskids.org
			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 Outpatient Counseling (Individual/Family)	Rickertsen, Allyson	4028909241	arickertsen@cedarskids.org



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### 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
			Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Juvenile Mental Health Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
			Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com
		Juvenile Substance Use Evaluation	Anson, Vicki	4023215435	vanson@irnebraska.org
			Faimon, Dr. Kristina	4024329553	kristinafaimon@gmail.com

### Agency Name: CenterPointe, Inc

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
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.

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

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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 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
	4600 Valley Road Suite 425 Lincoln, NEBRASKA 68510	Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use Evaluation			

### Agency Name: Diana Arpan

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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 Mental Health Evaluation			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Risk Evaluation			

### Agency Name: Harmony Health Center LLC

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	Allen,	4024139147	siobhan@cvharmonyhealth.org

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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	Evaluation	Siobhan		
			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 (Annie)	4029571476	annie@cvharmonyhealth.org
			Marcey-Fleming, Kathleen	4026946445	kathyf@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org
		Juvenile Substance Use Addendum	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Hill, Victoria	4026317244	vicki@cvharmonyhealth.org
			Shay, Bradly	4024139147	Brad@cvharmonyhealth.org

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College View Harmony Health Center	4719 Prescott Avenue Lincoln, NEBRASKA 68506	Juvenile Substance Use Addendum	Threats, Debra	4024054617	dthreats1@hotmail.com
		Juvenile Substance Use Evaluation	Allen, Siobhan	4024139147	siobhan@cvharmonyhealth.org
			Hill, Victoria	4026317244	vicki@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
			Hill, Victoria	4026317244	vicki@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
		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

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HopeSpoke	2444 O Street Lincoln, NEBRASKA 68510	Juvenile Mental Health Outpatient Counseling (Individual/Family)	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	
			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	
			Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Esquivel, Jessica	4024757666	jesquivel@hopespoke.org
		Kuhlman, Alexandra		3083905465	lexeekuhlman@outlook.com	
		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	

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HopeSpoke ThGH	904 Sumner Street Lincoln, NEBRASKA 68502	Juvenile Medication Management			
		Juvenile Psychological Evaluation			
		Juvenciles 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
		Juvenciles Who Sexually Harm Therapeutic Group Home	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
		Juvenciles 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**

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Northpoint Lincoln	3801 Union Drive Lincoln, NEBRASKA 68516	Juvenile Mental Health Day Treatment			
		Juvenile Mental Health Intensive Outpatient Counseling (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**

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	Aguilera de la Torre, Eddie	4023099015	eddieaguilera@jendafamilyservices.com
			Bodfield, Lexy	4024182898	lexybodfield@jendafamilyservices.com
			Madsen, Janessa	3088300698	janessamadsen@jendafamilyservices.com
		Expedited Co-Occurring Evaluation			
		Expedited Mental Health Evaluation			
		Expedited Substance Use			



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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	Evaluation			
		Family Support	Aguilera de la Torre, Eddie	4023099015	eddieaguilera@jendafamilyservices.com
			Belt, Adrianna	4025986448	adriannabelt@jendafamilyservices.com
			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
			Cross, McKinley	4024740011	mckinleycross@jendafamilyservices.com
			Dick, Natalia	4023669685	Nataliadick@jendafamilyservices.com
			Hoffman, Daisha	4029951017	daishahoffman@jendafamilyservices.com
			Jepsen, Tyler	4024142911	tylerjepsen@jendafamilyservices.com
			Kindig, Madison	9136343935	madisonkindig@jendafamilyservices.com
			Lerma, Rome	3086727449	romelerma@jendafamilyservices.com
	McMahan, Jayden	4029042536	jaydenmcmahan@jendafamilyservices.com		
	Munger,	4028603110	chelseamunger@jendafamilyservices.com		

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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	Chelsea		
			Olson, Karlie	4022090598	karlieolson@jendafamilyservices.com
			Stubbs, Mallory	4026491534	mallorystubbs@jendafamilyservices.com
			Sullivan, Aspen	3085305206	aspensullivan@jendafamilyservices.com
			Van Velson, Abigail	4026435661	abbyvanvelson@jendafamilyservices.com
		Intensive Family Preservation	Cottle, Montana	4028381145	montanacottle@jendafamilyservices.com
			Ehlers, Nancy	4023044989	nancyehlers@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Whitehead, Jonathan	4027707286	jonathanwhitehead@jendafamilyservices.com
			Williams, Kristin	3164613669	kristinwilliams@jendafamilyservices.com
			Zach, Jessica	3083676872	jessicazach@jendafamilyservices.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Professional Foster Care			
Relative/Kinship Home Study	Bodfield, Lexy	4024182898	lexybodfield@jendafamilyservices.com		
Jenda Independent Living	770 Cotner Blvd Suite 100 Lincoln,	Independent Living	Cerny, Andy	4022701260	andycerny@jendafamilyservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	NEBRASKA 68505				
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
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Expedited Mental Health Evaluation	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.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
			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

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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	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com
			Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			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
			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	Barrow, Denise	4024740011	denisebarrow@jendafamilyservices.com

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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 Counseling (Individual/Family)	Borgmann, Maggie	5315004556	maggieborgmann@jendafamilyservices.com
			Brundege, Lindsay	4024740011	lindsaybrundege@jendafamilyservices.com
			Chrisman, Whitney	4026415909	whitneychrisman@jendafamilyservices.com
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Radtke, Nicole	4028752047	nicoleradtke@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
			Whitehead, Jonathan	4027707286	jonathanwhitehead@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
			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

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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 Substance Use Evaluation	Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
		Juvenile Substance Use Outpatient Treatment (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 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
			Mason, Amanda	5315005729	amandamason@jendafamilyservices.com
			Reutter, Erica	4024740011	ericareutter@jendafamilyservices.com
			Whitehead, Jonathan	4027707286	jonathanwhitehead@jendafamilyservices.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Whitehead, Jonathan	4027707286	jonathanwhitehead@jendafamilyservices.com

**Agency Name: Julia Doss**

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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: 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
			Drake, Taylor	4022173454	tadrake@kvc.org
			Heinzerling, Erica	5154193578	eheinzerling@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
			Grayson, Patrick	4029402766	Pgrayson@kvc.org
			Muthersbaugh, Makayla	4023263995	mmuthersbaugh@kvc.org
Roybal, Maggie	5313010835		mroybal@kvc.org		
Intensive Family Preservation	Christian, Gloria	7852598007	gkchristian@kvc.org		

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email	
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Intensive Family Preservation	Muthersbaugh, Makayla	4023263995	mmuthersbaugh@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	Bolter, Shannon	4028042093	shannon@bekindomaha.com	
			Christian, Gloria	7852598007	gkchristian@kvc.org	
		Juvenile Substance Use Evaluation	Bolter, Shannon	4028042093	shannon@bekindomaha.com	
			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	
			Drake, Taylor	4022173454	tadrake@kvc.org	
Heinzerling, Erica	5154193578		eheinzerling@kvc.org			
Marino, Faith	5315309257		fmarino@kvc.org			
Meister, Elizabeth	4024500509		emeister@kvc.org			



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
KVC Nebraska Lincoln	5001 Central Park Dr. Suite 100 Lincoln, NEBRASKA 68516	Professional Foster Care	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 Center	801 West Prospector Place Lincoln, NEBRASKA 68522	Juvenile Mental Health Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov
		Juvenile Psychological Evaluation	Hartmann, Klaus	4024795419	klaus.hartmann@nebraska.gov

### Agency Name: Lutheran Family Services

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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)			
		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: Meadowlark Counseling, LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Meadowlark Counseling, LLC	4344 N 62nd St Lincoln, NEBRASKA 68507	Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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

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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)	Nichols, Kayla	4028170352	knichols@midplainscenter.org
		Multisystemic Therapy (MST)	Bernadt, Jay	4024056615	jbernadt@midplainscenter.org
			Clark, Vernon	4028408204	vclark@midplainscenter.org
			Epperson, Pamela	4027079839	pepperson@midplainscenter.org
			Hickman, Elizabeth	4024138807	ehickman@midplainscenter.org
			Nichols, Kayla	4028170352	knichols@midplainscenter.org
			Watson, Paige	4029371416	pwatson@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	7130 South 29th	Juvenile Co-	Pawlowski,	4024057922	kristi@newhopecounselinglincoln.com

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

### **Agency Name: New View Health Solutions LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
New View Health Solutions LLC	108 W 3rd St. #C Firth, NEBRASKA 68358	Juvenile Mental Health Evaluation			
		Juvenile Psychological Evaluation			

### **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: OMNI Inventive Care**

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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	Bottom, Julie	4029372115	julie.bottom@doane.edu
			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	Bottom, Julie	4029372115	julie.bottom@doane.edu
			Sieck, Shannon	4023193429	shannon.sieck@omniic.com
		Family Support	Bottom, Julie	4029372115	julie.bottom@doane.edu
			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, Shannon	4023193429	shannon.sieck@omniic.com
			Strecker, Andrea	3082276911	Andrea.Strecker@omniic.com
			Thayer, Heather	4023691484	Heather.Thayer@omniic.com
		Juvenile Co-Occurring	Sieck, Shannon	4023193429	shannon.sieck@omniic.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2300 South 13th Street Lincoln, NEBRASKA 68502	Evaluation	Shannon		
		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)	Bottom, Julie	4029372115	julie.bottom@doane.edu
		Juveniles Who Sexually Harm Risk Evaluation			
Relative/Kinship Home Study	Marschman, Mindy	4022399719	mindy.marschman@omniic.com		

### 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	Juvenile Mental Health Outpatient			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	Lincoln, NEBRASKA 68516	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**

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			

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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	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 Center	5020 Elk Ridge Road Lincoln, NEBRASKA 68516	Invoice - Competency Evaluation	Remington, Janelle	4024408025	jremington@madonna.org
		Invoice - Psychological 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



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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 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
			Glenn, Annie	4024414362	aglenn@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			

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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 Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			

### **Agency Name: Sapphire Counseling and Assessments, LLC**

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)			

### **Agency Name: Second Chances Psychotherapy**

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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 Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Juvenile Co-Occurring Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsdan, Lisa	4024836990	llogsdan@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	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Mental Health Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsdan, Lisa	4024836990	llogsdan@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Juvenile Mental Health Evaluation	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
			Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsden, Lisa	4024836990	llogsden@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	Weber, Kristi	4026468287
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsden, Lisa	4024836990	llogsden@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com
		Juvenile Substance Use Addendum	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Juvenile Substance Use Addendum	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsdan, Lisa	4024836990	llogsdan@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 Evaluation	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Logsdan, Lisa	4024836990	llogsdan@nmhc-clinics.com
			Monfelt-Siems, Jamie	4024836990	jmonfelt@nmhc-clinics.com
			Vrbka, Anne	4024836990	avrbka@nmhc-clinics.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Clarke, Ashleigh	4024836990	aclarke@nmhc-clinics.com
			Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lafferty, Melissa	4024836990	mlafferty@nmhc-clinics.com
			Monfelt-Siems,	4024836990	jmonfelt@nmhc-clinics.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Silver Sun Mental Health DBA Nebraska Mental Health Centers	4545 S. 86th St. Lincoln, NEBRASKA 68526	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Jamie		
			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
			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
			Logsden, Lisa	4024836990	llogsden@nmhc-clinics.com
			Zlomke, Leland	4024836990	lzlomke@nmhc-clinics.com

### 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: WICS-Women In Community Service

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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: 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: berniklau education solutions team

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