

# Administrative Office of Courts & Probation

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

## District 6

### Agency Facility County: Burt

#### Agency Name: Northeast Nebraska Psychologist Services, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northeast Nebraska Psychologist Services, PC	408 N. Oakland Avenue Oakland, NEBRASKA 68045	Adult Mental Health Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Mental Health Outpatient Counseling (Individual)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Psychological Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Substance Use Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Substance Use Outpatient Treatment (Individual)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Mental Health Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Psychological Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Substance Use Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com

### Agency Facility County: Cedar

#### Agency Name: COR Therapeutic Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	104 N Broadway Avenue Hartington, NEBRASKA 68739	Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)			
		Adult Substance Use	Duffy,	4026401542	terry.duffy@cortherapeutic.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email	
	104 N Broadway Avenue Hartington, NEBRASKA 68739	Outpatient Treatment (Individual)	Terry			
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com	
			warner, roland	4023854597	roland.warner@cortherapeutic.com	
		Juvenile Co-Occurring Evaluation	Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com	
		Juvenile Mental Health Evaluation	Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com	
			Davies, Paul	4023166570	p.a.davies15@gmail.com	
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com	
			Williams, Tina	4023582047	tina.williams@cortherapeutic.com	
			warner, roland	4023854597	roland.warner@cortherapeutic.com	
			Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com	
			Brugger, Siera	4025006870	siera.brugger@cortherapeutic.com	
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Davies, Paul	4023166570	p.a.davies15@gmail.com	
			Green, Caleb	4022904634	caleb.green@cortherapeutic.com	
			Reyes, Connie	4029200524	connie.reyes@cortherapeutic.com	
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com	
			Williams, Tina	4023582047	tina.williams@cortherapeutic.com	
			warner, roland	4023854597	roland.warner@cortherapeutic.com	
			Juvenile Substance	Duffy,	4026401542	terry.duffy@cortherapeutic.com

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	104 N Broadway Avenue Hartington, NEBRASKA 68739	Use Addendum	Terry		
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance Use Evaluation	Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Davies, Paul	4023166570	p.a.davies15@gmail.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		PRS-BIP			

**Agency Facility County: Dakota**

**Agency Name: Heartland Counseling Services, Inc.**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland	1201 Arbor	Adult Co-	Bowens	4024943337	charlette@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Counseling Services, Inc.	Drive South Sioux City, NEBRASKA 68776	Occurring Evaluation	Kissi Afare, Charlette		
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Adult Gambling Outpatient Counseling (Individual/ Group)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Adult Gambling Outpatient Counseling (Individual/ Group)	Aaron		
		Adult Mental Health Evaluation	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Adult Mental Health Outpatient Counseling (Group)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Mackling,	4024943337	jamiem@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email	
		Adult Mental Health Outpatient Counseling (Group)	Jamie			
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com	
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com	
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com	
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Adult Mental Health Outpatient Counseling (Individual)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com	
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com	
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com	
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com	
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com	
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com	
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com	
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com	
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com	
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com	
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
			Adult Sex Offense-Specific Evaluation	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Adult Sex	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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		Offense-Specific Outpatient Counseling (Individual/ Group)	Greg		
		Adult Substance Use Addendum	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehinger@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
			Adult Substance Use Evaluation	Bowens Kissi Afare, Charlette	4024943337
		Brostad, Greg		4024943337	greg@heartlandcounselingservices.com
		Cochran,		4024943337	virginia@heartlandcounselingservices.com

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		Adult Substance Use Evaluation	Virginia		
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com



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		Adult Substance Use Intensive Outpatient Counseling (IOP)	Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Adult Substance Use Outpatient Treatment (Group)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Adult Substance Use Outpatient Treatment (Individual)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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		Adult Substance Use Outpatient Treatment (Individual)	Greg		
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Anger Management Class	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Anger Management Class	Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Juvenile Co-Occurring Evaluation	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Mental Health Evaluation	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters,	4024943337	marti@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Mental Health Evaluation	Martinique		
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Mental Health Outpatient Counseling (Group)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
Fehringer, Diane	4024943337		fehrringer@heartlandcounselingservices.com		
Halladay, Michelle	4024943337		michelle@heartlandcounselingservices.com		

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		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com	
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com	
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com	
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com	
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Juvenile Substance Use Addendum	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com	
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com	
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com	
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com	
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com	
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com	
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com	
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com	
			Ortega, Jessica	4025082137	jortega013@gmail.com	
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com	
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com	
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
			Juvenile	Bowens	4024943337	charlette@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Substance Use Evaluation	Kissi Afare, Charlette		
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Juvenile Substance Use Outpatient Treatment (Group)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com

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		Juvenile Substance Use Outpatient Treatment (Group)	Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Halladay, Michelle	4024943337	michelle@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Ortega, Jessica	4025082137	jortega013@gmail.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Juveniles Who Sexually Harm Outpatient	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Treatment (Group)			
		Juveniles Who Sexually Harm Risk Evaluation	Brostad, Greg	4024943337	greg@heartlandcounselingservices.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-S SIOUX CITY	115 E 28th Street South Sioux City, NEBRASKA 68776	Continuous Alcohol Monitoring (CAM) with EM	Parks, McKenzie	7123393222	mckenzie.parks@owenseducationalservices.org
			Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com
		Family Support	Parks, McKenzie	7123393222	mckenzie.parks@owenseducationalservices.org
			Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com
		Juvenile Electronic Monitoring Cell Phone	Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com
		Juvenile Electronic Monitoring GPS	Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com
		Juvenile Electronic Monitoring Land Line	Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com

**Agency Facility County: Dodge**

**Agency Name: Awareness Counseling**



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Awareness Counseling LLC	2170 N Platte Ave. null Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Matrix Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Mental Health Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Mental Health Outpatient Counseling (Individual)	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Substance Use Addendum	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Substance Use Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Adult Substance Use Outpatient Treatment (Individual)	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juvenile Co-Occurring Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juvenile Mental Health Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juvenile Substance Use Addendum	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juvenile Substance Use Evaluation	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Sorensen, Rachel	4027203992	sorensenwriter@yahoo.com

**Agency Name: Braun Counseling Services LLC**

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	301 East 6th Street, Ste 103 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Mental Health Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Addendum	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Evaluation	Braun, Diane	4029807600	dbrauncounseling@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Braun, Diane	4029807600	dbrauncounseling@gmail.com

### Agency Name: CITY OF FREMONT POLICE DEPT

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CITY OF FREMONT POLICE DEPT	725 N Park Ave Fremont, NEBRASKA 68025	Invoice - Law Enforcement Transportation			

### Agency Name: Care Corps' LifeHouse

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Care Corps' LifeHouse	723 North Broad Street Fremont, NEBRASKA 68025	Transitional Living - Level 2			

### 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
	515 N D ST Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation			
		Adult Substance Use Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	515 N D ST Fremont, NEBRASKA 68025	Juvenile Co-Occurring Evaluation			
		Juvenile Substance Use Evaluation			

### **Agency Name: Debra J Hallstrom Counseling**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Debra J Hallstrom Counseling	2170 North Platte Ave PO Box 1696 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Hallstrom, Debra	4027208220	djhallstrom@aol.com
		Adult Mental Health Evaluation	Hallstrom, Debra	4027208220	djhallstrom@aol.com
		Adult Mental Health Outpatient Counseling (Individual)	Hallstrom, Debra	4027208220	djhallstrom@aol.com
		Adult Substance Use Addendum	Hallstrom, Debra	4027208220	djhallstrom@aol.com
		Adult Substance Use Evaluation	Hallstrom, Debra	4027208220	djhallstrom@aol.com
		Adult Substance Use Outpatient Treatment (Individual)	Hallstrom, Debra	4027208220	djhallstrom@aol.com

### **Agency Name: Lotus Behavioral Health, LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Roberts, Markie	5317211732	mroberts@lotusbh.net
		Adult Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone, Alicia	4026580654	aliciafalcone521@gmail.com
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Knight , Raven	4025120049	ravenknight.4360@gmail.com
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
			Adult Mental Health Outpatient Counseling (Individual)	Birkland, Jordan	3193834595
		Bruce, Jessica		4025339518	jbruce@lotusbh.net
		Falcone, Alicia		4026580654	aliciafalcone521@gmail.com
		Groeble, Skyler		4023664754	sgroeble@lotusbh.net
		Knight , Raven		4025120049	ravenknight.4360@gmail.com
		Osborn, Katlynn		4027271592	kosborn@lotusbh.net
		Rezac , Jacqueline		4027201741	jrezac@lotusbh.net
		Roberts, Markie		5317211732	mroberts@lotusbh.net
		Adult Substance Use Addendum	Bruce, Jessica	4025339518	jbruce@lotusbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Adult Substance Use Addendum	Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Adult Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Adult Substance Use Outpatient Treatment (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone, Alicia	4026580654	aliciafalcone521@gmail.com
			Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Adult Substance Use Outpatient Treatment (Individual)	Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
			Juvenile Mental Health Evaluation	Bruce, Jessica	4025339518
		Falcone, Alicia		4026580654	aliciafalcone521@gmail.com
		Groebli, Skyler		4023664754	sgroebli@lotusbh.net
		Knight, Raven		4025120049	ravenknight.4360@gmail.com
		Osborn, Katlynn		4027271592	kosborn@lotusbh.net
		Rezac, Jacqueline		4027201741	jrezac@lotusbh.net
		Roberts, Markie		5317211732	mroberts@lotusbh.net
		Semerad, MaLeaha		4023807062	mhays@lotusbh.net
		Juvenile Mental Health Outpatient Counseling (Individual/Family)		Birkland, Jordan	3193834595
			Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone, Alicia	4026580654	aliciafalcone521@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Alicia		
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Knight , Raven	4025120049	ravenknight.4360@gmail.com
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Semerad, MaLeaha	4023807062	mhays@lotusbh.net
		Juvenile Substance Use Addendum	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Substance Use Outpatient Treatment (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac ,	4027201741	jrezac@lotusbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Lotus Behavioral Health, LLC	152 E 6th St Ste 116 Fremont, NEBRASKA 68025	Juvenile Substance Use Outpatient Treatment (Group)	Jacqueline		
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone, Alicia	4026580654	aliciafalcone521@gmail.com
			Groebl, Skyler	4023664754	sgroebl@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@lotusbh.net
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net

### Agency Name: Lutheran Family Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1420 E Military Ave Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Luers, Janelle	5314443536	Janelle.luers@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
			Stawniak, Rachael	4027211774	rachael.stawniak@onelfs.org
		Adult Mental Health Evaluation	Luers, Janelle	5314443536	Janelle.luers@onelfs.org
			Rich, Jamie	4023173269	Jrich@lfsneb.org
			Stawniak, Rachael	4027211774	rachael.stawniak@onelfs.org
		Adult Mental Health Outpatient Counseling (Individual)	Rich, Jamie	4023173269	Jrich@lfsneb.org
		Adult Substance Use Addendum	Luers, Janelle	5314443536	Janelle.luers@onelfs.org
			Stawniak, Rachael	4027211774	rachael.stawniak@onelfs.org
		Adult Substance Use Evaluation	Luers, Janelle	5314443536	Janelle.luers@onelfs.org
			Stawniak,	4027211774	rachael.stawniak@onelfs.org



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email	
	1420 E Military Ave Fremont, NEBRASKA 68025	Adult Substance Use Evaluation	Rachael			
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Rich, Jamie	4023173269	Jrich@lfsneb.org	
		Adult Substance Use Outpatient Treatment (Group)	Luers, Janelle	5314443536	Janelle.luers@onelfs.org	
			Rich, Jamie	4023173269	Jrich@lfsneb.org	
		Adult Substance Use Outpatient Treatment (Individual)	Luers, Janelle	5314443536	Janelle.luers@onelfs.org	
			Rich, Jamie	4023173269	Jrich@lfsneb.org	
			Stawniak, Rachael	4027211774	rachael.stawniak@onelfs.org	
		Agency Supported Foster Care				
		Juvenile Medication Management				
		Juvenile Mental Health Outpatient Counseling (Group)				
Juvenile Psychiatric Evaluation Interview Only						
Juvenile Substance Use Outpatient Treatment (Group)						

### **Agency Name: Main Street Counseling**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Main Street Counseling	152 E 6th Street Suite 203 Fremont, NEBRASKA 68025	Adult Substance Use Addendum	Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		Adult Substance Use Evaluation	Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		Adult Substance Use	Porter,	4027200943	mainstreetcounseling@outlook.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Main Street Counseling	152 E 6th Street Suite 203 Fremont, NEBRASKA 68025	Intensive Outpatient Counseling (IOP)	Holly		
		Adult Substance Use Outpatient Treatment (Group)	Gregory, Nichole	4027201621	ngregory1621@gmail.com
			Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		Adult Substance Use Outpatient Treatment (Individual)	Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		Juvenile Substance Use Evaluation	Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Porter, Holly	4027200943	mainstreetcounseling@outlook.com

### Agency Name: Mindful Self Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Mindful Self Counseling, LLC	152 E. 6th Street Suite 110 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

### Agency Name: Nebraska Mediation Center

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nebraska Mediation Center	435 N. Park Avenue 4th Floor Fremont, NEBRASKA 68025	Expedited Family Group Conference	Basque Malloy, Christine	4027539415	ChristineBM@nebraskamediationcenter.com
		Mediation	Basque Malloy, Christine	4027539415	ChristineBM@nebraskamediationcenter.com

### Agency Name: Nichole Gregory Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Nichole Gregory Counseling	2170 North Platte Avenue Fremont, NEBRASKA 68025	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			

### Agency Name: Northeast Nebraska Psychologist Services, PC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1835 E. Military Avenue Suite 105 Fremont, NEBRASKA 68025	Adult Mental Health Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Mental Health Outpatient Counseling (Individual)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Psychological Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	1835 E. Military Avenue Suite 105 Fremont, NEBRASKA 68025	Adult Substance Use Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Adult Substance Use Outpatient Treatment (Individual)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Mental Health Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Psychological Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com
		Juvenile Substance Use Evaluation	Hunter, Linda	4026854130	drlindahunter@nenps.com

### Agency Name: Optum Behavioral Care of Ohio dba Capstone Behavioral Health of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Mental Health Outpatient Counseling (Individual)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Psychological	Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Evaluation	Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
		Adult Substance Use Addendum	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Co-Occurring Evaluation	Andersen, Brian	4026148444	bandersen@capstonebehavioralhealth.com
			Bruce, Jessica	4025339518	jbruce@lotusbh.net

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Juvenile Co-Occurring Evaluation	Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Mental Health Outpatient Counseling (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Psychological Evaluation	Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
		Juvenile Substance Use Addendum	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Outpatient	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac ,	4027201741	jrezac@lotusbh.net

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## District 6

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health of Nebraska-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Treatment (Group)	Jacqueline		
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net

### 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 - Fremont	212 N. 8th Street, Suite C Fremont, NEBRASKA 68025	Day Reporting			
		Evening Reporting			
		Family Support			

### 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
	2951 N. Clarkson St. Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Adult Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Adult Mental Health Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Psychological Evaluation			
		Adult Sex Offense-Specific			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2951 N. Clarkson St. Fremont, NEBRASKA 68025	Evaluation			
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)			
		Adult Substance Use Addendum	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Adult Substance Use Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Adult Substance Use Outpatient Treatment (Individual)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Co-Occurring Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Mental Health Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Psychiatric Evaluation	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Psychological Evaluation			
		Juvenile Substance Use Addendum	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Substance Use Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
		Juveniles Who Sexually Harm Outpatient			



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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
	2951 N. Clarkson St. Fremont, NEBRASKA 68025	Treatment (Group)			
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
		Juveniles Who Sexually Harm Risk Evaluation			
		PRS-BIP			

**Agency Facility County: Washington**

**Agency Name: Schrum Associates, LLC**

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Schrum Associates, LLC	PO Box 588 Blair, NEBRASKA 68008	Adult Substance Use Addendum	Schrum , Amanda	4026199686	akschrum@hush.com
		Adult Substance Use Evaluation	Schrum , Amanda	4026199686	akschrum@hush.com
		Adult Substance Use Outpatient Treatment (Individual)	Schrum , Amanda	4026199686	akschrum@hush.com