

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
		warner, roland	4023854597	roland.warner@cortherapeutic.com	
			Juvenile Mental Health Outpatient Counseling (Individual/Family)	Brooks, Cristy	4025006870
		Brugger, Siera	4025006870	siera.brugger@cortherapeutic.com	
			Davies, Paul	4023166570	p.a.davies15@gmail.com
		Green, Caleb	4022904634	caleb.green@cortherapeutic.com	
		Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com	
		warner, roland	4023854597	roland.warner@cortherapeutic.com	
		Juvenile Substance Use Addendum	Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance	Duffy, Terry	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	Use Evaluation	Terry		
			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 Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Adult Co-Occurring Evaluation	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehinger@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
Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Adult Co-Occurring Evaluation	Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
			Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Adult Gambling Outpatient Counseling (Individual/ Group)	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@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 Evaluation	Brostad, Greg	4024943337
		Cochran, Virginia		4024943337	virginia@heartlandcounselingservices.com
		Fehringer, Diane		4024943337	fehrringer@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	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
Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Counseling (Group)	Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@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 Mental Health Outpatient Counseling (Individual)	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@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
		Adult Sex Offense-Specific Evaluation	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
		Adult Sex Offense-Specific Outpatient	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Counseling (Individual/ Group)			
		Adult Substance Use Addendum	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@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 Substance Use Evaluation	Ortega, Jessica	4025082137	jortega013@gmail.com
			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
			Knudsen,	4024943337	lisbeth@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Adult Substance Use Evaluation	Lisbeth		
			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 Substance Use Intensive Outpatient Counseling (IOP)	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehinger@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 Substance Use Outpatient Treatment (Group)	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Adult Substance Use Outpatient Treatment (Group)	Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@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 Substance Use Outpatient Treatment (Individual)	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@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
		Anger Management Class	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Anger Management Class	Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Mackling, Jamie	4024943337	jamiem@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Juvenile Co-Occurring Evaluation	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehringer@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	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehringer@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Peters, Martinique	4024943337	marti@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Juvenile Mental Health Evaluation	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
			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
		Brostad, Greg		4024943337	greg@heartlandcounselingservices.com
		Cochran, Virginia		4024943337	virginia@heartlandcounselingservices.com
		Fehringer, Diane		4024943337	fehrringer@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

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com
		Juvenile Substance Use Addendum	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@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
		Juvenile Substance Use Evaluation	Ortega, Jessica	4025082137	jortega013@gmail.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
			Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Juvenile Substance Use Evaluation	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 Outpatient Treatment (Group)	Ortega, Jessica	4025082137	jortega013@gmail.com
			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
			Knudsen, Lisbeth	4024943337	lisbeth@heartlandcounselingservices.com
			Myers, Jill	4024943337	jill@heartlandcounselingservices.com
			Shanahan, Sarah	4024943337	sarah@heartlandcounselingservices.com
		Youngberg, Aaron	4024943337	aaron@heartlandcounselingservices.com	
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Ortega, Jessica	4025082137	jortega013@gmail.com
			Bowens Kissi Afare, Charlette	4024943337	charlette@heartlandcounselingservices.com
			Brostad, Greg	4024943337	greg@heartlandcounselingservices.com

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Heartland Counseling Services, Inc.	1201 Arbor Drive South Sioux City, NEBRASKA 68776	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Cochran, Virginia	4024943337	virginia@heartlandcounselingservices.com
			Fehringer, Diane	4024943337	fehrringer@heartlandcounselingservices.com
			Knudsen, Lisbeth	4024943337	lisbeth@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
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Brostad, Greg	4024943337	greg@heartlandcounselingservices.com
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	Randhawa, Jamie	7123333315	jamie.randhawa@theowenscompanies.com

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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	Electronic Monitoring Cell Phone	Jamie		
		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

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

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Awareness Counseling LLC	2170 N Platte Ave. null Fremont, NEBRASKA 68025	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

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

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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: Capstone Behavioral Health

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Capstone Behavioral Health-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Mental Health Outpatient Counseling (Individual)	Birkland, Jordan	3193834595	jbirkland@lotusbh.net
			Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Hohwieler Evans, Tiffany	4022124836	tevans@capstonebehavioralhealth.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			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-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
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Mental Health Evaluation	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-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Expedited Mental Health Evaluation	Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Expedited Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Co-Occurring Evaluation	Andersen, Brian	4026148444	bandersen@capstonebehavioralhealth.com
			Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Needelman, Joshua	4026148444	jneedelman@capstonebehavioralhealth.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Mental Health Outpatient Counseling (Group)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Hohwieler Evans, Tiffany	4022124836	tevans@capstonebehavioralhealth.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			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
Capstone Behavioral Health-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Juvenile Mental Health Outpatient Counseling (Group)	Jacqueline		
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Birkland, Jordan	3193834595	jbirkland@lotusbh.net
			Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Filcheck, Holly	4023500771	hfilcheck@capstonebehavioralhealth.com
			Hohwieler Evans, Tiffany	4022124836	tevens@capstonebehavioralhealth.com
			Osborn, Katlynn	4027271592	kosborn@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
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use	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-Fremont	230 E. 22nd Street,#4 Fremont, NEBRASKA 68025	Outpatient Treatment (Group)	Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net

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: Carlson Counseling Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carlson Counseling Services LLC	230 East 22nd Street Suite 3 Fremont, NEBRASKA 68025	Adult Co-Occurring Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Mental Health Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Sex Offense-Specific Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Substance Use Addendum	Carlson, Stanley	4026164859	stan.carlson@hotmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carlson Counseling Services LLC	230 East 22nd Street Suite 3 Fremont, NEBRASKA 68025	Adult Substance Use Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Co-Occurring Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Mental Health Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Substance Use Addendum	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Substance Use Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Carlson, Stanley	4026164859	stan.carlson@hotmail.com
		Juveniles Who Sexually Harm Risk Evaluation	Carlson, Stanley	4026164859	stan.carlson@hotmail.com

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	Hallstrom, Debra	4027208220	djhallstrom@aol.com

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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	(Individual)			
		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@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Adult Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone, Alicia	4026580654	aliciafalcone521@gmail.com
			Groebli, Skyler	4023664754	sgroebli@lotusbh.net
			Knight , Raven	4025120049	ravenknight.4360@gmail.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			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	Adult Mental Health Evaluation	Jacqueline		
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Adult Mental Health Outpatient Counseling (Individual)	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@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
			Adult Substance Use Addendum	Bruce, Jessica	4025339518
		Groeble, Skyler		4023664754	sgroeble@lotusbh.net
		Osborn, Katlynn		4027271592	kosborn@capstonebehavioralhealth.com
		Rezac , Jacqueline		4027201741	jrezac@lotusbh.net
		Roberts, Markie		5317211732	mroberts@lotusbh.net
		Adult Substance Use Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.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	Adult Substance Use Evaluation	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@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Adult Substance Use Outpatient Treatment (Individual)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groebl, Skyler	4023664754	sgroebl@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Co-Occurring Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groebl, Skyler	4023664754	sgroebl@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Mental Health Evaluation	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Falcone,	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 Evaluation	Alicia		
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Knight , Raven	4025120049	ravenknight.4360@gmail.com
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@lotusbh.net
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	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@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Addendum	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			Rezac , Jacqueline	4027201741	jrezac@lotusbh.net
			Roberts, Markie	5317211732	mroberts@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 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@capstonebehavioralhealth.com
			Rezac, Jacqueline	4027201741	jrezac@lotusbh.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Bruce, Jessica	4025339518	jbruce@lotusbh.net
			Groeble, Skyler	4023664754	sgroeble@lotusbh.net
			Osborn, Katlynn	4027271592	kosborn@capstonebehavioralhealth.com
			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			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Intensive Outpatient Counseling (IOP)			

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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	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 Intensive Outpatient Counseling (IOP)	Porter, Holly	4027200943	mainstreetcounseling@outlook.com
		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: 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: 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
			Lapointe, Anthony	4024836990	alapointe@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

Administrative Office of Courts & Probation

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Lincoln, NE 68509
Phone: (402) 471-3730

District 6

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 Mental Health Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
		Adult Mental Health Outpatient Counseling (Individual)	Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
			Salmans, Kaelee	4024836990	ksalmans@nmhc-clinics.com
		Adult Psychological Evaluation			
		Adult Sex Offense-Specific Evaluation			
		Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)			
		Adult Substance Use Addendum	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
		Adult Substance Use Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
		Adult Substance Use Outpatient Treatment (Individual)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
			Salmans, Kaelee	4024836990	ksalmans@nmhc-clinics.com
		Juvenile Co-Occurring Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
Juvenile Medication Management	Weber, Kristi	4026468287	Kristi@weberbehavioralhealth.org		
Juvenile Mental Health Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com		
	Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com		

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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	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
			Salmans, Kaelee	4024836990	ksalmans@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
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
		Juvenile Substance Use Evaluation	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Hill, Yafa	4024836990	yhill@nmhc-clinics.com
			Lapointe, Anthony	4024836990	alapointe@nmhc-clinics.com
			Salmans, Kaelee	4024836990	ksalmans@nmhc-clinics.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)			
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)			
Juveniles Who Sexually Harm Risk Evaluation					
PRS-BIP					

Agency Facility County: Washington

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District 6

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