Program ID	Program Name	Location Address	City	State	Zip
201	Gallatin Co.	2310 N. 7th Ave	Bozeman	MT	59715
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, 2 RH -(1 Male & 1 Female), Tx Court, Co-occurring	Gallatin	(406) 586-5493	(406) 587-1238	

Director: Shelly Johnson **Email:** shellyj@adsgc.org

Clinical Supervisor: Vicki DeBoer **Email:** vickid@adsgc.org
Office Manager: Becky Wysoski **Email:** beckyw@adsgc.org

Program ID	Program Name	Location Address	City	State	Zip
247	Benefis Healthcare	500 15th Ave S.	Great Falls	MT	59405
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, Co-occurring, Tx Court	Cascade	(406) 455-2367	(406) 455-2373	

Director: Marlene O'Connell, RN **Email:** marleneoconnell@benefis.org
Website: www.benefis.org

Program ID	Program Name	Location Address	City	State	Zip
222	Boyd Andrew Community Services **(Main Office)**	60 Last Chance Gulch	Helena	MT	59601
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, Co-occurring, RH - (Male), Tx Court, Inpatient	Lewis & Clark	(406) 443-2343	(406) 443-5490	

Director: Amy Tenney **Email:** atenney@boydandrew.com

Clinical Supervisor: Evonne Hawe **Email:** ehawe@boydandrew.com

Office Manager: Sara Dobbins **Email:** sdobbins@boydandrew.com

Mailing Address PO Box 1153 Helena MT 59624

Website: www.boydandrew.com

Program ID	Program Name	Location Address	City	State	Zip
299	Bullhook Community Health Center	521 4th Street	Havre	MT	59501
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Hill	(406)-265-4541	(406) 265-2148	

Director: Cindy Smith **Email:** smithc@bullhook.com

Clinical Director: **Email:**

Office Manager: Rozan Kerr **Email:** kerrr@bullhook.com

website: www.bullhook.com

Program ID	Program Name	Location Address	City	State	Zip
283	Center for Mental Health **(Main Office)**	514 S. Front St	Conrad	MT	59425
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, Co-occurring	Pondera	(406) 278-3205		

Director: Michelle Hill **Email:** michellehi@center4mh.org

Clinical Director: Keri DeGroat **Email:** kerid@center4mh.org

Office Manager: Nicolete Villagran **Email:** nicoletev@center4mh.org

Mailing Address 925 Oilfield, Ste 2 Shelby MT 59474

Program ID	Program Name	Location Address	City	State	Zip
295	Choices for Change Counseling	304 4th Ave E	Superior	MT	59872
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, Co-occurring	Mineral	(406) 822-5422		

Director: Nancy M. Smith **Email:** nsmith@choicesforchange.net

Smith **Email:** nsmith@choicesforchange.net

Thompson **Email:** cthompson@choicesforchange.net

Admin. Assistant: Teauna Holden **Email:** tholden@choicesforchange.net

Mailing Address PO Box 622 Superior MT 59872

Program ID	Program Name	Location Address	City	State	Zip
212	Crystal Creek Lodge	Old Hospital Hill #1	Browning	MT	59417
	Services	**County**	**Phone**	**Fax**	
	Inpatient, OP, ACT, MIP	Glacier/Teton	(406) 338-6330	(406) 338-7660	

	Director: Pat E. Calf Looking		**Email:** kiannar7@hotmail.com		
	Clinical Director: Durand Bear Medicine		**Email:** durandbm@hotmail.com		
	Office Manager: Anna Horn		**Email:** annahorn01@yahoo.com		
	Mailing Address	PO Box 450	Browning	MT	59417

Program ID	Program Name	Location Address	City	State	Zip
211	District II Alcohol & Drug Program **(Main Office)**	119 South Kendrick	Glendive	MT	59330
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Dawson	(406) 377-5942	(406) 377-3050	
	Director: Jerry Schlepp		**Email:** distii@midrivers.com		
	Clinical Director: Tim Anderson		**Email:** adsidney@midrivers.com		
	Office Manager: Arlene Blanton		**Email:** distii@midrivers.com		

Program ID	Program Name	Location Address	City	State	Zip
273	Eastern Montana Community Mental Health Center - Substance Abuse/Dependency Svcs **(Main Office)**	2508 Wilson St	Miles City	MT	59301
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, RH - Male, Co-occurring, Tx Court	Custer	(406) 234-1687	(406) 234-4039	
	Director: Jim Novelli		**Email:** Jim54emcmhc@yahoo.org		
	Clinical Supervisor: John Rex		**Email:** jrexemcmhc@gmail.com		
	Office Manager: Wanda Holmlund		**Email:** wholmlund@yahoo.com		
	Mailing Address	PO Box 1530	Miles City	MT	59301

Program ID	Program Name	Location Address	City	State	Zip
209	Flathead Valley Chemical Dependency Clinic Satellite Office	North Lincoln County Annex 66121 Hwy 37	Eureka	MT	59917
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Lincoln	(406) 297-2822	(406) 297-2823	
	Director: Mike Cummins		**Email:** michaelcummins@fvcdc.net		
	Lead Staff: Theresa Oakland		**Email:** theresaoakland@fvcdc.net		
	Clinical Coordinator: Derek Dalton		**Email:** derekdalton@fvcdc.net		
	Office Manager: Deanise Killingsworth		**Email:** deanisekillingsworth@fvcdc.net		
	Mailing Address	PO Box 1409	Eureka	MT	59917

Program ID	Program Name	Location Address	City	State	Zip
209	Flathead Valley Chemical Dependency Clinic **(Main Office)**	1312 North Meridian	Kalispell	MT	59904
	Services	**County**	**Phone**	**Fax**	
	OP, Co-occurring, ACT, MIP, RH-(Female), Tx Court	Flathead	(406) 756-6453	(406) 756-8546	
	Director: Mike Cummins		**Email:** michaelcummins@fvcdc.net		

	Clinical Director: Derek Dalton		**Email:** derekdalton@fvcdc.net		
	Office Manager: Denise Belt		**Email:** Denisebelt@fvcdc.net		
	Mailing Address	PO Box 7115	Kalispell	MT	59904
Program ID	**Program Name**	**Location Address**	**City**	**State**	**Zip**
902	Fort Belknap Chemical Dependency Program	656 Agency Main St	Harlem	MT	59526
	Services	**County**	**Phone**	**Fax**	
	OP, MIP, ACT, Co-occurring	Blaine	(406) 353-4175	(406) 353-4771	
	Director: Richard King		**Email:** rlkingiii@gmail.com		
	Office Manager: Sylvia "Skeeter" Campbell		**Email:** skeeter_campbell@yahoo.com		

Program ID	Program Name	Location Address	City	State	Zip
227	Gateway Community Services **(Main Office)**	26 4th St. North	Great Falls	MT	59401

Services	County	Phone	Fax
OP, MIP, ACT, Co-occurring, RH - Male Native American	Cascade	(406) 727-2512	(406) 727-7451

Director: Mary Ann Dubay **Email:** maryann@gatewayrecovery.org
Clinical Director: Pat Osterhout **Email:** Pat@gatewayrecovery.org
Office Manager: Tammy Hatch **Email:** tammy@gatewayrecovery.org
Website: www.gatewayrecovery.org

Program ID	Program Name	Location Address	City	State	Zip
304	Helena Indian Alliance	501 Euclid Avenue	Helena	MT	59601

Services	County	Phone	Fax
Outpatient, Adults, Adoloscents, Co-Occuring, Act & MIP	Lewis & Clark	406-442-9244	406-449-5797

Director: Tressie White **Email:** director@helenaindianalliance.com
Clinical Director: Ben Horn, LAC **Email:** bhorn@helenaindianalliance.com
Assistant Director: Tressie White **Email:** Tressie@helenaindianalliance.com

Mailing Address	501 Euclid Avenue	Helena	MT	59601

Program ID	Program Name	Location Address	City	State	Zip
293	Indian Family Health Clinic	1220 Central Ave Ste 1B	Great Falls	MT	59401

Services	County	Phone	Fax
OP, MIP, Co-occurring	Cascade	(406) 268-1587	(406) 268-1572

Director: Ernestine Belcourt **Email:** ebelcourt@indianfamilyhealth.org
Clinical Director: Jason Gleason **Email:** Provider1@indianfamilyhealth.org
Office Manager: Leah Noel adminassist@indianfamilyhealth.org

Program ID	Program Name	Location Address	City	State	Zip
277	Indian Health Board of Billings	1127 Alderson Ave	Billings	MT	59102

Services	County	Phone	Fax
OP, Co-occurring	Yellowstone	(406) 245-7318	(406) 248-5912

Director: Marjorie Bear Don't Walk **Email:** mbdw@ihbbillings.org
Clinical Director: Dee Dee Smith **Email:** dsmith@ihbbillings.org
Office Manager: Robert Ironmaker **Email:** rironmaker@ihbbillings.org

Program ID	Program Name	Location Address	City	State	Zip

303	Intermountain				
		3240 Dredge Drive	Helena	MT	59602
	Services	**County**	**Phone**	**Fax**	
	Co-Occurring, Adol OP, IOP, ACT, MIP	Lewis & Clark	(406) 442-7920		
	Executive Director: Kim Gardner		**Email:** kimg@intermountain.org		
	Site Director: Kim Gardner		**Email:** kimg@intermountain.org		
	Office Manager: Denni Byrd		**Email:**		
	Mailing Address	3240 Dredge Drive	Helena	MT	59602

Program ID	Program Name	Location Address	City	State	Zip
206	Journey Recovery	1245 North 29th St	Billings	MT	59101
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Yellowstone			
	Clinical Director: Laura Harper		**Email:** lharper@scmrmhc.org		
	Mailing Address	1245 North 29th St	Billings	MT	59101
	Office Manager: Chelsie Fuchs		**Email:** cfuchs@scmrmhc.org		
	Mailing Address	PO Box 232	Big Timber	MT	59011
224	Missoula Urban Indian Center	830 W. Central Ave	Missoula	MT	59801
	Services	**County**	**Phone**	**Fax**	
	OP, MIP, Co-occurring	Missoula	(406) 829-9515	(406) 829-9519	
	Director: LeeAnn Bruised Head		**Email:** ljohnson@muihc.org		
	Clinical Director: Tim Payne		**Email:** tpayne@muihc.org		
	Office Manager: Alice Whiteman		**Email:** awhiteman@muihc.org		
			Website: www.muihc.org		

Program ID	Program Name	Location Address	City	State	Zip
223	Montana Chemical Dependency Center	2500 Continental Drive	Butte	MT	59701
	Services	**County**	**Phone**	**Fax**	
	Inpatient, Detox	Silver Bow	(406) 496-5400	(406) 496-5437	
	Director: Kyle Fouts		**Email:** kfouts@mt.gov		
	Clinical Supervisor: Susan Rajacich		**Email:** srajacich@mt.gov		

Program ID	Program Name	Location Address	City	State	Zip
296	New Day	1111 Coburn Rd	Billings	MT	59101
	Services	**County**	**Phone**	**Fax**	
	OP, Co-occurring, adolescent only	Yellowstone	(406) 254-2340	(406) 294-1023	
	Director: Vernon Mummey		**Email:** newday@mcn.net		
	Clinical Director: Jennifer Stern		**Email:** jstern@newdayranch.com		
	Office Manager: Jessi Parker		**Email:** jparker@newdayranch.com		
	Mailing Address	PO Box 30282	Billings	MT	59107

Program ID	Program Name	Location Address	City	State	Zip
292	New Horizons Recovery Satellite Office	Big Sandy City Hall	Big Sandy	MT	59520
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Choteau	(406) 390-5363		

Office Manager: Wanda Bennett **Email:** newhorizons107@aol.com

Program ID	Program Name	Location Address	City	State	Zip
292	New Horizons Recovery **(Main Office)**	1308 Franklin St	Fort Benton	MT	59442
	Services	**County**	**Phone**	**Crisis**	
	OP, ACT, MIP	Choteau	(406) 622-3211	(406) 949-4760	

Director: Alou Horinek **Email:** alouhorinek@yahoo.com
Office Manager: Wanda Bennett **Email:** newhorizons107@aol.com

Mailing Address	PO Box 459	Fort Benton	MT	59442

ID	Program Name	Location Address	City	State	Zip
303	Recovery Center of Missoula	1201 Wyoming St.	Missoula	MT	59801
	Services	**County**	**Phone**	**Fax**	
	IP	Missoula	(406) 532-9900	(406) 532-9901	

Director: Tamara Nauts **Email:** oula.org
Site Director: **Email:**

Program ID	Program Name	Location Address	City	State	Zip
202	Rimrock Foundation	1231 North 29th Street	Billings	MT	59101
	Services	**County**	**Phone**	**Fax**	
	Detox, Inpatient - (Adolescent & Adult), Day Treatment - Adolescent, ACT, OP, Co-occurring, RH - (W&C, Adolescent-Female and Adult-Male), Tx Court	Yellowstone	(406) 248-3175	(406) 248-3821	

Director: Lenette Kosovich **Email:** lkosovich@rimrock.org

Clinical Supervisor: Corilee Goni **Email:** cgoni@rimrock.org
Office Manager: Shirley R. Ehlang **Email:** schlang@rimrock.org
Email: comm@rimrock.org General Email
Website: www.rimrock.org

Program ID	Program Name	Location Address	City	State	Zip
231	Southwest CD Program **(Main Office)**	430 East Park	Livingston	MT	59047
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, RH - (Men, Women, Families), Co-occurring	Park	(406) 222-2812	(406) 222-4764	

Director: Jean McCauley **Email:** swcdp@aol.com

Clinical Director: Lyndon Kacick **Email:** swcdp@aol.com
Office Manager: Cheryl Hayes **Email:** infoswcdp@aol.com

	Mailing Address	PO Box 1587	Livingston	MT	59047

Program ID	Program Name	Location Address	City	State	Zip
300	Southwest Coummunity Health Center	445 Centennial Ave.	Butte	MT	59701
	Services	**County**	**Phone**	**Fax**	
	OP	Silver Bow	(406) 723-4075		

Director: Jessica Hoff **Email:** jhoff@buttechc.com
Clinical Director: Gina Pate-Terry **Email:** gpateterry@buttechc.com
Office Manager: **Email:**

Program ID	Program Name	Location Address	City	State	Zip
302	Recovery and Treatment (SMART)	630 W. Mercury St	Butte	MT	59701
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP, Co-occurring, Tx	Silver Bow	(406) 299-3448	(406) 299-3450	

Acting Director: Dave Boyd **Email:** dboyd@cccscorp.com
Clinical Director: Linda Rogers **Email:** lrogers@cccscorp.com
Office Manager: Sandy Klimpel **Email:** sklimpel@cccscorp.com

Program ID	Program Name	Location Address	City	State	Zip
258	Western MT Addiction Services-Turning Point **(Main Office)**	1325 Wyoming	Missoula	MT	59801
	Services	**County**	**Phone**	**Fax**	
	Inpatient - (Adolescent Male &	Missoula	(406) 532-9800	(406) 541-3032	

Director: **Email:**
Clinical Director: Kevin Stewart **Email:** kstewart@wmmhc.org
Office Manager: Vacant **Email:**

Program ID	Program Name	Location Address	City	State	Zip
258	Western MT Addiction Services Satellite Office	802 Main Street, Ste C	Polson	MT	59860
	Services	**County**	**Phone**	**Fax**	
	OP, ACT, MIP	Lake	(406) 883-7310	(406) 883-7312	

Clinical Director: Kevin Stewart **Email:** kstewart@wmmhc.org
Office Manager: Lena Rae **Email:** lrae@wmmhc.org

ID	Program Name	Location Address	City	State	Zip
905	White Sky Hope Center **(Main Office)**	RR 1 Box 664	Box Elder	MT	59521
	Services	**County**	**Phone**	**Fax**	
	RH(Female Native American)	Choteau/Hill	(406) 395-4818	(406) 395-4861	

Director: Lenore Myers **Email:** lmyers@rbclinic.org
Clinical Supervisor: Mike Geboe **Email:** mgeboe@rbclinic.org

Office Manager: Myra Windy Boy **Email:** mwindyboy@rbclinic.org

Program ID	Program Name	Location Address	City	State	Zip
250	Wilderness Treatment Center	200 Hubbart Dam Road	Marion	MT	59925
	Services	**County**	**Phone**	**Fax**	
	Wilderness Adolescent & Young Adult Inpatient	Flathead	(406) 854-2832	(406) 854-2835	

Director: Nancy Brekke **Email:** ben@wildernesstreatmentcenter.com
Ref. Relations Director: Ben Dorrington **Website:** www.wilderness-therapy-program.com

Program ID	Program Name	Location Address	City	State	Zip
298	Youth Dynamics	2334 Lewis Ave	Billings	MT	59102
	Services	**County**	**Phone**	**Fax**	
	OP, Co-occurring, Adolescent Services	Yellowstone	(406) 245-6539	(406) 245-9647	

Executive Director: Peter Degel **Email:** pdegel@youthdynamics.org
Clinical Director: Teri Jackson **Email:** tjackson@youthdynamics.org
Office Manager: Dawn Wilson **Email:** dawn.wilson@youthdynamics.org