

CD Provider List by Provider

Agency Name: (Set as H2)

Alcohol & Drug Services of Gallatin Co (Set as H3)

Phone:(406) 586-5493

Fax: (406) 587-1238

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Shelly Johnson	shellyj@adsgc.org	Director	Gallatin	2310 N. 7th Ave	Bozeman	MT	59715
Vicki DeBoer	vickid@adsgc.org	Clinical Supervisor	Gallatin	2310 N. 7th Ave	Bozeman	MT	59715
Becky Wysoski	beckyw@adsgc.org	Office Manager	Gallatin	2310 N. 7th Ave	Bozeman	MT	59715

Program #	Agency Name	Contact Phone	Fax Number	Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
247	Benefis Healthcare	(406) 455-2367	(406)455-2373	Marlene O'Connell, RN	marleneoconnell@benefis.org	Director	Cascade	500 15th Ave. S.	Great Falls	MT	59405-

Program #	Agency Name	Contact Phone	Fax Number	Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
222	Boyd Andrew Community Services	(406) 443-2343	(406) 443-5490	Sara Dobbins	sdobbins@boydandrew.com	Office Manager	Jefferson	PO Box 1153	Boulder	MT	59632-
				Amy Tenney	atenney@boydandrew.com	Director	Jefferson	PO Box 1153	Boulder	MT	59632-
				Evonne Hawe	ehawe@boydandrew.com	Clinical Supervisor	Jefferson	PO Box 1153	Boulder	MT	59632-

Amy Tenney	atenney@boydandrew.com	Director	Lewis & Clark	PO Box 1153	Helena	MT	59601-
Evonne Hawe	ehawe@boydandreww.com	Clinical Supervisor	Lewis & Clark	PO Box 1153	Helena	MT	59624-
Sara Dobbins	sdobbins@boydandrew.com	Office Manager	Lewis & Clark	PO Box 1153	Helena	MT	59601-
Amy Tenney	atennney@boydandrew.com	Director	Jefferson	102 N. Brooke St	Whitehall	MT	59759-
Evonne Hawe	ehawe@boydandreww.com	Clinical Supervisor	Jefferson	102 N. Brooke St	Whitehall	MT	59759-
Sara Dobbins	sdobbins@boydandrew.com	Office Manager	Jefferson	102 N. Brooke St	Whitehall	MT	59759-
Dan Krause	dkrause@boydandrew.com	Clinical Supervisor	Jefferson	PO Box 1153	Boulder	MT	59632-

Program #	Agency Name	Contact Phone	Fax Number
299	Bullhook Community Health Center	(406)265-4541	(406) 265-2148

Contact_Name	Email	Title/Role	County	Mailing Address	City	State	Zip
Rozan Kerr	kerrr@bullhook.com	Office Manager	Hill	521 4th Street	Havre	MT	59501-
Cindy Smith	smithc@bullhook.com	Director	Hill	521 4th Street	Havre	MT	59501-
		Clinical Director	Hill	521 4th Street	Havre	MT	59501-

Program #	Agency Name	Contact Phone	Fax Number
283	Center for Mental Health	(406) 466-5681	(406) 466-5683

Contact_Name	Email	Title/Role	County	Mailing Address	City	State	Zip
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Teresa McCracken	teresam@center4mh.org	Clinical Director	Teton	316 1st St N.W.	Choteau	MT	59422-
Nicolete Villagran	nicoletev@center4mh.org	Office Manager	Teton	316 1st St N.W.	CHOTEAU	MT	59422-
Sydney Blair	sydneyb@center4mh.org	Director	Teton	316 1st St N.W.	CHOTEAU	MT	59422-
Sydney Blair	sydneyb@centr4mh.org	Director	Pondera	925 Oilfield, Ste 2	CONRAD	MT	59425-
Nicolete Villagran	nicoletev@center4mh.org	Office Manager	Pondera	925 Oilfield, Ste 2	CONRAD	MT	59425-
Teresea McCracken	teresam@center4mh.org	Clinical Director	Pondera	925 Oilfield, Ste 2	CONRAD	MT	59425-

Program #	Agency Name	Contact Phone	Fax Number
295	Choices for Change Counseling	(406) 822-5422	(406) 822-0786

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Nancy Smith	choices@blackfoot.net	Director	Mineral	P.O. Box 622	Superior	MT	59872-
Charlene Thompson	ct.choices@blackfoot.net	Office Manager	Mineral	P.O. Box 622	Superior	MT	59872-
Nancy Smith	choices@blackfoot.net	Clinical Director	Mineral	P.O. Box 622	Superior	MT	59872-
Teauna Holden	th.choices@blackfoot.net	Office Contact	Mineral	P.O. Box 622	Superior	MT	59872-

Program #	Agency Name	Contact Phone	Fax Number
212	Crystal Creek Lodge Treatment Center	(406) 338-6330	(406) 338-7661

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
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Pat Calf Looking	Lodge_jaybird_65@hotmail.com	Clinical Director	Glacier/Teton	P.O. Box 450	Browning	MT	59417-
Louella Heavy Runner	louellahr@gmail.com	Director	Glacier/Teton	P.O. Box 450	Browning	MT	59417-
Anna Horn	annahorn01@yahoo.com	Office Manager	Glacier/Teton	P.O. Box 450	Browning	MT	59417-

Program #	Agency Name	Contact Phone	Fax Number				
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211	District II Alcohol & Drug Program	(406) 485-3425					
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Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Dennise Schaffner	distii@midrivers.com	Director	McCone	McCone County Courthouse	Circle	MT	59215-
Dennise Schaffner	distii@midrivers.com	Director	Dawson	119 S. Kendrick	Glendive	MT	59330-
Dennise Schaffner	dschaffner@midrivers.com	Clinical Director	Richland	P.O. Box 1530	Sidney	MT	59270-
Dennise Schaffner	distii@midrivers.com	Director	Richland	P.O. Box 1530	Sidney	MT	59270-

Program #	Agency Name	Contact Phone	Fax Number				
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273	EMCMHC - Substance Abuse/Dependency Svcs	(406) 234-0234	(406) 234-0235				
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Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Brenda Kneeland	bkneeland@emcmc.org	Director	Custer	PO Box 1530	Miles City	MT	59327-
John Rex	jrexemcmhc@emcmhc.org	Clinical Director	McCone		SIDNEY	MT	59270-
Brenda Kneeland	bkneeland@emcmc.org	Director	Fallon	225 S. 3rd St.	Baker	MT	59313-

John Rex		Clinical Director	Fallon	225 S. 3rd St.	Baker	MT	59313-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Rosebud	1093 Main St	FORSYTH	MT	59327-
John Rex	jrexemcmhc@emcm hc.org	Clinical Director	Rosebud	1093 Main St	FORSYTH	MT	59327-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Rosebud	P.O. Box 1257	Forsyth	MT	59327-
John Rex	jrexemcmhc@emcm hc.org	Clinical Director	Rosebud	P.O. Box 1257	Forsyth	MT	59327-
John Rex	jrexemcmhc@emcm hc.org	Clinical Director	Valley	1009 North 6th St	Glasgow	MT	59230-
Brenda Kneeland	bkneeland@emcmh c.org	Director	McCone		SIDNEY	MT	59270-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Phillips	PO Box 640	Malta	MT	59538-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Valley	1009 North 6th St	Glasgow	MT	59230-
John Rex	jrexemcmhc@emcm hc.org	Director	Custer	PO Box 1530	Miles City	MT	59327-
			Custer	PO Box 1530	Miles City	MT	59327-
			Custer	PO Box 1530	Miles City	MT	59327-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Daniels	105 5th Ave. East	Scobey	MT	59230-
Brenda Kneeland	bkneeland@emcmh c.org	Director	Powder River	507 North Lincoln	Broadus	MT	59317-

John Rex	jrexemcmhc@emcmhc.org	Clinical Director	Powder River	507 North Lincoln	Broadus	MT	59317-
Brenda Kneeland	jrexemcmhc@gmail.com	Director	Sheridan	1001 West Laurel	Plentywood	MT	59254-
Brenda Kneeland	bkneeland@emcmhc.org	Director	Sheridan	124 Custer Ste B	Wolf Point	MT	59201-
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Brenda Kneeland	bkneeland@emcmhc.org	Director	Dawson	PO Box 1321	GLENDIVE	MT	59330-
Brenda Kneeland	bkneeland@emcmhc.org	Director	Garfield	Jordan Medical Clinic	Jordan	MT	59337-
Brenda Kneeland	bkneeland@emcmhc.org	Director	Wibaux		CIRCLE	MT	59215-
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John Rex	jrexemcmhc@emcmhc.org	Clinical Director	Wibaux		CIRCLE	MT	59215-
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Mary Hughes	mhughes_emcmhc@nemont.net	Office Manager	Valley	1009 North 6th St	Glasgow	MT	59230-

Program #	Agency Name	Contact Phone	Fax Number
209	Flathead Valley Chemical Dependency Clinic	(406) 296-2822	(406) 296-2823

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
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Desiree Newcomb	desireenewcomb@fvcdc.net	Office Manager	Sanders	PO Box 940	LIBBY	MT	59923-
Mike Cummins	michaelcummins@fvcdc.net	Director	Sanders	PO Box 940	LIBBY	MT	59923-
Derek Dalton	derekdalton@fvcdc.net	Clinical Director	Flathead	PO Box 7115	Kalispell	MT	59904-
Desiree Newcomb	desireenewcomb@fvcdc.net	Office Manager	Flathead	PO Box 756	Libby	MT	59923-
Derek Dalton	derekdalton@fvcdc.net	Clinical Director	Flathead	PO Box 756	Libby	MT	59923-
Teresa Oakland	theresaoakland@fvcdc.net	Clinical Supervisor	Lincoln	PO Box 1409	Eureka	MT	59917-
Elsie Stimfling	judyfrank@fvcdc.net	Lead Staff	Sanders	PO Box 940	LIBBY	MT	59923-
Derek Dalton	derekdalton@fvcdc.net	Clinical Director	Lincoln	PO Box 1409	Eureka	MT	59917-
Derek Dalton	derekdalton@fvcdc.net	Clinical Director	Sanders	PO Box 940	LIBBY	MT	59923-
Mike Cummins	michaelcummins@fvcdc.net	Director	Lincoln	PO Box 1409	Eureka	MT	59917-
Mike Cummins	michaelcummins@fvcdc.net	Director	Flathead	PO Box 756	Libby	MT	59923-

Denise Belt	denisebelt@fvcdc.net	Office Manager	Flathead	PO Box 7115	Kalispell	MT	59904-
Mike Cummins	michaelcummins@fvcdc.net	Director	Flathead	PO Box 7115	Kalispell	MT	59904-
Bill Foster	billfoster@fvcdc.net	Lead Staff	Flathead	PO Box 756	Libby	MT	59923-

Program #	Agency Name	Contact Phone	Fax Number
902	Fort Belknap Chemical Dependency Program	(406) 353-4175	(406) 353-4771

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Irma Skunk Cap	skunkcapirma@yahoo.com	Clinical Director	Blaine	656 Agency Main St	Harlem	MT	59526-
Sara Wilson	miss.serah.wilson@gmail.com	Office Manager	Blaine	656 Agency Main St	HARLEM	MT	59526-
Charlie Ereaux	Charlie.ereaux@ftbelknap.org	Director of Operations	Blaine	656 Agency Main St	Harlem	MT	59526-

Program #	Agency Name	Contact Phone	Fax Number
227	Gateway Community Services	(406) 727-2512	(406) 727-7451

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Robert Wigdorski	bob@gatewayrecovery.org	Director	Cascade	26 4th St. North	Great Falls	MT	59401-
Megan Bailly	megan@gatewayrecovery.org	Clinical Director	Cascade	26 4th St. North	Great Falls	MT	59401-
Tammy Hatch	tammy@gatewayrecovery.org	Office Manager	Cascade	26 4th St. North	Great Falls	MT	59401-

Program #	Agency Name	Contact Phone	Fax Number					
304	Helena Indian Alliance	(406) 442-9244	(406) 449-5797					
	Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
	Ben Horn	bhorn@helenaindianalliance.com	Clinical Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-
	Todd Wilson	TWilson@helenaindianalliance.com	Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-
	Todd Wilson	TWilson@helenaindianalliance.com	Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-
	Ben Horn	bhorn@helenaindianalliance.com	Clinical Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-
	Ben Horn	bhorn@helenaindianalliance.com	Clinical Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-
	Todd Wilson	TWilson@helenaindianalliance.com	Director	Lewis and Clark	501 Euclid	HELENA	MT	59601-

Program #	Agency Name	Contact Phone	Fax Number					
293	Indian Family Health Clinic	(406) 268-1587	(406) 268-1572					
	Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
	Julie Flesch	jflesch@indianfamilyhealth.org	Clinical Director	Cascade	1220 Central Ave, Ste 2B	Great Falls	MT	59401-
	Ernestine Belcourt	ebelcourt@indianfamilyhealth.org	Director	Cascade	1220 Central Ave, Ste 2B	Great Falls	MT	59401-
	Leah Noel	Inoel@indianfamilyhealth.org	Executive Assistant	Cascade	1220 Central Ave, Ste 2B	Great Falls	MT	59401-

Program #	Agency Name	Contact Phone	Fax Number
303	Intermountain Community Services	406-442-7920	

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Kim Gardner	king@intermountain.org	Executive Director	Lewis & Clark	3240 Dredge Drive	Helena	MT	59602-
Denni Byrd	dennib@intermountain.org	Office Manager	Lewis & Clark	3240 Dredge Drive	Helena	MT	59602-
Denni Byrd	king@intermountain.org	Site Director	Lewis & Clark	3240 Dredge Drive	Helena	MT	59602-

Program #	Agency Name	Contact Phone	Fax Number
206	Journey Recovery	(406) 932-5924	(406) 932-3022

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Daisy Nyberg	dnyberg@scmrhc.org	Site Director	Sweet Grass	PO Box 236	Big Timber	MT	59011-
Laura Harper	lharper@scmrhc.org	Site Director	Big Horn	809 N. Custer Avenue	Hardin	MT	59034-
Barb Mettler	lharper@scmrhc.org	Director	Big Horn	809 N. Custer Avenue	Hardin	MT	59034-
Elizabeth Bender	ebender@scmrhc.org	Office Manager	Big Horn	809 N. Custer Avenue	Hardin	MT	59034-
Barb Mettler	bmettler@scmrhc.org	Director	Wheatland		HARLOWTON	MT	59036-
Barb Mettler	bMettler@scmrhc.org	Director	Musselshell	26 W. Main Street	Roundup	MT	59072-
Laura Harper	lharper@scmrhc.org	Site Director	Musselshell	26 W. Main Street	Roundup	MT	59072-
Barb Mettler	bmettler@scmrhc.org	Director	Sweet Grass	PO Box 232	Big Timber	MT	59011-
Susan Williams	slong@scmrhc.org	Office Manager	Fergus	PO Box 44	Lewistown	MT	59457-

Laura Harper	lharper@scrmhmc.org	Site Director	Carbon	PO Box 482	Red Lodge	MT	59068-
Laurie Parrent	dnyberg@scrmhmc.org	Office Manager	Sweet Grass	PO Box 236	Big Timber	MT	59011-
Laura Harper	lharper@scrmhmc.org	Director	Yellowstone	PO Box 219	LEWISTOWN	MT	59457-
Laura Harper	lharper@scrmhmc.org	Director	Stillwater	P.O. Box 238	Columbus	MT	59019-
Wendy Wells	wenwells@scrmhmc.org	Office Manager	Stillwater	P.O. Box 238	Columbus	MT	59019-
Laura Harper	lharper@scrmhmc.org	Site Director	Fergus	PO Box 44	Lewistown	MT	59457-
Barb Mettler	bMettler@scrmhmc.org	Director	Fergus	PO Box 44	Lewistown	MT	59457-
Barb Mettler	bMettler@scrmhmc.org	Director	Carbon	PO Box 482	Red Lodge	MT	59068-
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Cindy McCaffree	cmcafree@scrmhmc.org	Office Manager	Musselshell	26 W. Main Street	Roundup	MT	59072-
Laura Harper	lharper@scrmhmc.org	Site Director	Wheatland		HARLOWTON	MT	59036-
Mary Cameron	mcameron@scrmhmc.org	Office Manager	Carbon	PO Box 482	Red Lodge	MT	59068-

Program # **Agency Name** **Contact Phone** **Fax Number**
306 Misfits, LLC (406) 868-7832 (406) 761-4493

Contact_Name **EEmail** **Title/Role** **County** **Mailing Address** **City** **State** **Zip**

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Julie Messerly	misfitsllc@hotmail.com	Co-Director	Cascade	PO Box 6325	Great Falls	MT	59406-
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Julie Messerly	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
Julie Messerly	misfitsllc@hotmail.com	Co-Director	Cascade	PO Box 6325	Great Falls	MT	59406-
Julie Messerly	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
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Julie Messerly	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
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Corin Fisch	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
Corin Fisch	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
Kathy Perry	misfitsllc@hotmail.com	Office Manager	Cascade	PO Box 6325	Great Falls	MT	59406-
Kathy Perry	misfitsllc@hotmail.com	Office Manager	Toole	PO Box 6325	Great Falls	MT	59406-
Kathy Perry	misfitsllc@hotmail.com	Office Manager	Toole	PO Box 6325	Great Falls	MT	59406-
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Kathy Perry	misfitsllc@hotmail.com	Office Manager	Toole	PO Box 6325	Great Falls	MT	59406-
Kathy Perry	misfitsllc@hotmail.com	Office Manager	Toole	PO Box 6325	Great Falls	MT	59406-
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Corin Fisch	misfitsllc@hotmail.com	Co-Director	Toole	PO Box 6325	Great Falls	MT	59406-
Corin Fisch	misfitsllc@hotmail.com	Co-Director	Cascade	PO Box 6325	Great Falls	MT	59406-

Program #	Agency Name	Contact Phone	Fax Number
224	Missoula Urban Indian Center	(406) 829-9515	(406) 829-9519

Contact_Name	EMail	Title/Role	County	Mailing Address	City	State	Zip
Troy Wilson	twilson@muihc.org	Business Operations	Missoula	830 W. Central Avenue	Missoula	MT	59801-
Lily Gervais	lgervais@muihc.org	Clinical Director	Missoula	830 W. Central Avenue	Missoula	MT	59801-
LeAnn Bruised Head	leeannb@muihc.org	Director	Missoula	830 W. Central Avenue	Missoula	MT	59801-

Program #	Agency Name	Contact Phone	Fax Number
223	Montana Chemical Dependency Center	(406)496-5400	(406) 496-5431

Contact_Name	EMail	Title/Role	County	Mailing Address	City	State	Zip
Kyle Fouts	kfouts@mt.gov	Director	Silver Bow	525 E. Mercury	Butte	MT	59701-
Shannon LaTray	SLaTray2@mt.gov	Clinical Director	Silver Bow	525 E. Mercury	Butte	MT	59701-

Program #	Agency Name	Contact Phone	Fax Number
296	New Day	(406) 254-2340	(406) 294-1023

Contact_Name	EMail	Title/Role	County	Mailing Address	City	State	Zip
Vernon Mummey	newday@mcn.net	Director	Yellowstone	P.O. Box 30282	Billings	MT	59107-

Vernon Mummey	newday@mcn.net	Director	Yellowstone	P.O. Box 30282	Billings	MT	59107-
Vernon Mummey	newday@mcn.net	Director	Yellowstone	P.O. Box 30282	Billings	MT	59107-
Jennifer Stern	jstern@newdayranch.com	Clinical Director	Yellowstone	P.O. Box 30282	Billings	MT	59107-
Lori Heimbichner	lheimbichner@newdayranch.com	Office Manager	Yellowstone	P.O. Box 30282	Billings	MT	59107-

Program #	Agency Name	Contact Phone	Fax Number				
309	Patricia "Trish" Flynn	(406) 850-4477					
Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
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Program #	Agency Name	Contact Phone	Fax Number				
307	Prairie Hills Recovery Center	(406) 488-3001	(406) 488-3003				
Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Kayla Anderson	Prairiehillsrecovery@yahoo.com	Director	Richland	PO Box 626	SIDNEY	MT	59270-
Connie Erickson	prairiehillsrecovery@yahoo.com	Office Manager	Richland	623 North Central Ave.	SIDNEY	MT	59270-
Connie Erickson	prairiehillsrecovery@yahoo.com	Office Manager	Richland	623 North Central Ave.	SIDNEY	MT	59270-
Connie Erickson	prairiehillsrecovery@yahoo.com	Office Manager	Richland	623 North Central Ave.	SIDNEY	MT	59270-
Connie Erickson	prairiehillsrecovery@yahoo.com	Office Manager	Richland	623 North Central Ave.	SIDNEY	MT	59270-

Kayla Anderson	Prairiehillisrecovery@yahoo.com	Director	Richland	PO Box 626	SIDNEY	MT	59720-
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Kayla Anderson	Prairiehillisrecovery@yahoo.com	Director	Richland	PO Box 626	SIDNEY	MT	59720-

Program #	Agency Name	Contact Phone	Fax Number
301	Recovery Center Missoula	(406)532-9900	(406) 532-9901

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Tammera Nauts	tnauts@wmmhc.org	Director	Missoula	1201 Wyoming Street	Missoula	MT	59801-

Program #	Agency Name	Contact Phone	Fax Number
202	Rimrock Foundation	(406) 248-3175	(406) 248-3821

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
Shirley Ehlang	schlang@rimrock.org	Office Manager	Yellowstone	1231 North 29th Street	Billings	MT	59101-
Lennette Kosovich	lkosovich@rimrock.org	Director	Yellowstone	1231 North 29th Street	Billings	MT	59101-
Corilee Goni	cgoni@rimrock.org	Clinical Supervisor	Yellowstone	1231 North 29th Street	Billings	MT	59101-

Program #	Agency Name	Contact Phone	Fax Number
231	Southwest Chemical Dependency Program	(406) 222-2812	

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Molly Molloy	mmolloy@swmtchc.org	Clinical Director	Silver Bow	445 Centennial Ave	Butte	MT	59701-
Leslie McCartney	lmccartney@swmtchc.org	Director	Silver Bow	445 Centennial Ave	Butte	MT	59701-

Program #	Agency Name	Contact Phone	Fax Number
302	Southwest Montana Addiction Recovery and Treatment (SMART)	(406) 299-3448	(406) 299-3450

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Linda Rogers	lrogers@cccscorp.com	Clinical Director	Silver Bow	630 W. Mercury	Butte	MT	59701-

Program #	Agency Name	Contact Phone	Fax Number
258	Western Montana Addiction Services	(406)883-7310	(406) 883-7312

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
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Katherine Isaacson	kisaacson@wmmhc.org	Director	Missoula	1325 Wyoming	Missoula	MT	59801-
Patty Snyder	psnyder@wmmhc.org	Office Manager	Ravalli	209 N. 10th St, Ste C	Hamilton	MT	59840-
Rainell Edmo	redmo@wmmhc.org	Office Manager	Lake	802 Main Street, Ste C	Polson	MT	59860-

Shiloh Lucier	slucier@wmmhc.org	Office Manager	Missoula	1325 Wyoming	Missoula	MT	59801-
Diane Conti	dcontin@wmmhc.org	Director	Ravalli	209 N. 10th St, Ste C	Hamilton	MT	59840-

Program #	Agency Name	Contact Phone	Fax Number				
297	Western Montana Tri-County Addiction Services	(406) 563-7038	(406) 563-7685				

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Kevin Stewart	kstewart@wmmhc.org	Clinical Supervisor	Deer Lodge	307 E. Park Street, Room 201	Anaconda	MT	59711-

Program #	Agency Name	Contact Phone	Fax Number				
905	White Sky Hope Center	(406) 395-4818	(406) 395-4861				

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Myra Windy Boy	mwindyboy@rbclinic.org	Office Manager	Hill	RR 1 Box 664	Box Elder	MT	59521-
Lenore Myers	lmyers@rbclinic.org	Director	Hill	RR 1 Box 664	Box Elder	MT	59521-

Program #	Agency Name	Contact Phone	Fax Number				
298	Youth Dynamics	(406) 802-7032	(406) 802-7033				

Contact_Name	EEmail	Title/Role	County	Mailing Address	City	State	Zip
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