

Behavioral Health Services

A Division of Health Care Services Agency

Tony Vartan, MSW, LCSW, BHS Director

County and Contract Medi-Cal Providers Directory

San Joaquin County's Behavioral Health Services 1212 N. California St. Stockton, CA 95202

This Document is Searchable

To search use Ctrl+F (or Command+F on Mac)

Search by First Name Only, Last Name Only, or Program Name

English

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call 1-888-468-9370 (TTY: 711)

ATTENTION: Auxiliary aids and services, including but not limited to large print documents and alternative formats, are available to you free of charge upon request. Call 1-888-468-9370 (TTY: 711).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-468-9370 (TTY: 711).

<u>Tiếng Việt (Vietnamese)</u>

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-468-9370 (TTY: 711).

<u>Tagalog (Tagalog – Filipino)</u>

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-376-6246 (TTY: 711).

<u>한국어 (Korean)</u>

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-468-9370 (TTY: 711) 번으로 전화해 주십시오.

繁體中文(Chinese)

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-888-468-9370 (TTY: 711)。

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-468-9370 (телетайп: 711).

فارسى (Farsi)

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با -888-88-469 (TTY: 711) تماس بگیرید.

日本語 (Japanese)

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-888-468-9370 (TTY: 711) まで、お電話にてご連絡ください。

Hmoob (Hmong)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-888-468-9370 (TTY: 711).

ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-468-9370 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (TTY: 711) (TTY: 711)

हिंदी (Hindi)

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-468-9370 (TTY: 711) पर कॉल करें।

ภาษาไทย (Thai)

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-888-468-9370 (TTY: 711).

ខ្មែរ (Cambodian)

ប្រយ័ត្ន៖ ររ សើ ិនជាអ្នកនិយាយ ភាសាខ្មែ , រសវាជំនួយមននកភាសា រោយមិនគិត្្ ្លន គឺអាចមានសំរា ់ ំររ អុើ នក។ ចូ ទូ ស័ព្ទ 1-888-468-9370 (TTY: 711)។

<u>ພາສາລາວ (Lao)</u>

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-888-468-9370 (TTY: 711).

Revised 11/2021

Program information is also available on Network of Care at www.sjcbhs/mhs.org To access services, call our toll-free number at 1-888-468-9370

Services may be delivered by an individual provider, or a team of providers, who is working under the direction of a licensed practitioner operating within their scope of practice. Only licensed, waivered, or registered mental health providers and licensed substance use disorder services providers are listed on the Plan's provider directory.

MH = Mental Health Progam and Practitioners

SUD = Substance Use Disorder Program and Practitioners

 \triangle = Provider is accepting new beneficiaries

= Provider's office has accommodations for people with physical disabilities

NPI = National Provider Identifier number

CC = Cultural Competency Training completed

ICC = intensive Care Coordination

IHBS = Intensive Home Based Services

ASL = *American Sign Language

Program Name: Black Awareness Community Outreach Program / Multicultural Services. (BACOP/MC) Full Service Partnership (MHSA) #9090. **Program Description:** Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Type of Program: MH

Address 1212 N. California St City Stockton, CA 95202

Phone Number (209) 468-2337

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Non-English Languages: Hindi, Punjabi, Urdu, Pashto, English,

Punjabi, Urdu, Pashto, English, Spanish Populations served: Adults

Cultural Competency: African American, Native American, Muslim/Middle Eastern and Gay/Lesbian/Transgender communities.

Office Hours: Monday - Friday 8 am - 5 pm

website: https://www.sjgov.org/mhs

Оранізн		website. https.w	www.sjgov.org/mms		
Last Name	First Name	NPI	Type of License	License #	СС
Nelson	Nancy	1376635680	Physician	C50283	Υ
Singh	Amarpreet	1235182916	Physician	A78414	N
Cruz	Gloria	1104375724	Registered Nurse	723203	Υ
Daughtery	Dennis	1659667319	Licensed Marriage and Family Therapist	48676	Υ
Wallace	Paul	1114044799	Licensed Psychiatric Technician	26296	Υ
Edwards Larson	Delise	1871903237	Associate Marriage and Family Therapist	96104	
Murray	Karen	1346735917	Associate Marriage and Family Therapist	118346	N

Program Name: Children and Youth Services, Stockton Clinic (CYS) #3915

Type of Program: MH Address 1414 N California St City Stockton. CA 95202

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Phone Number: (209) 468-2385

Non-English Languages: Spanish

Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Children and Youth

Cultural Competency: Comprehensive mental health services for children, youth, and their families living in Central County area. Services include individual and group therapy, case management, psychiatric assessment, and medication support.

Office Hours: Monday - Friday 8 am to 5 pm

website: https://www.sigov.org/mhs

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Last Name	First Name	NPI	Type of License	License #	CC	
Alban	Benjamin	1932227295	Licensed Clinical Social Worker	26094	Υ	
Allanki	Sailaja	1306897723	Physician	138838	Υ	
Ansari	Shaukat	1821294455	Physician	105923	Υ	
Curtiss	Megan	1265836027	Licensed Marriage and Family Therapist	123655	Υ	
Gepley	Shaun	1164030771	Associate Professional Clinical Counselor	7760	Υ	
Hudson	Mark	1528190725	Licensed Marriage and Family Therapist	78609	Υ	
Lescale Huante	Shadai	1528340320	Licensed Clinical Social Worker	86507	Υ	
Ramirez	Jacqueline	1245751650	Associate Clinical Social Worker	83837	Υ	
Ruiz	Belem	1508380411	Associate Marriage and Family Therapist	100924	Υ	

Sabet	Abdollah	1366468555	Physician	C53401	Υ
Stanley	Anastacia	1528299724	Licensed Marriage and Family Therapist	87417	Υ
Vargas	Maribel	1821247149	Associate Clinical Social Worker	35622	Υ
Sylvestre	Carrie	1306998273	Physician	G22049	
Barajas	Lauren	1154893683	Licensed Clinical Social Worker	214887	Υ
Boklund	Maria	1396157061	Licensed Marriage and Family Therapist	48496	Υ
Abdullahi	Krissie	1407307762	Associate Marriage and Family Therapist	125000	Υ
Nease	Desiree	1447703491	Associate Clinical Social Worker	71196	Υ
Santiago	Regina	1598166308	Associate Clinical Social Worker	85489	Υ
Gonzalez	Mario	1083041685	Registered Nurse	95217456	N
Simien	Carla	1629564000	Psychiatric Technician	40771	Υ
Torres	Josephine	1467018044	Associate Marriage and Family Therapist	119422	Υ

Program Name: Children and Youth Services - Foster Youth Full Service Partnership (MHSA) #9096

Type of Program: MH

Address: 1414 N California Street

City: Stockton, CA 95202

Phone Number: (209) 468-2385

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Non-English Languages: Spanish

Program Description: Case Management/Brokerage including Intensive Care Coordination (ICC),Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Children and Youth

Cultural Competency: Mental Health Services Act (MHSA) program focused on

children and youth in the Foster Care System

Office Hours: Monday - Friday 8:00 am - 5:00 pm

website: https://www.sjgov.org/mhs

Last Name	First Name	NPI	Type of License	License #	CC		
Gutierrez	Antonio	1023473469	Licensed Clinical Social Worker	71535	Υ		
Alcaraz Tapia	Maria Marlen	1942470299	Licensed Marriage and Family Therapist	93646	Υ		
Lopez	Alexis	1932767225	Associate Marriage and Family Therapist	116153	Υ		
Allanki	Sailaja	1306897723	Physician	138838	Υ		
Ansari	Shaukat	1821294455	Physician	105923	Υ		
DeLosAngeles	Christina	1861976471	Associate Marriage and Family Therapist	113408	Υ		
Sabet	Abdollah	1366468555	Physician	C53401	Υ		
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Program Name: Community Adult Treatment Services (CATS - Teams A, B, and D) #9069

Type of Program: MH

Address: 1212 N. California Street

City: Stockton, CA 95202

Phone Number: (209) 468-8842; (209) 468-8862; (209) 468-8881



Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Adult

Cultural Competency: Comprehensive Mental Health Services for adults (18-60). Services include psychiatric assessment, medication support, group, individual therapy and case management.

Non-English Languages: Spanish, Cantonese, Tagalog

Office Hours: Monday - Friday 8:00 am - 5:00 pm

https://www.sjgov.org/mhs

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Last Name	First Name	NPI	Type of License	License #	CC
Mendez	Adeline	1255453353	Licensed Psychiatric Techician	25868	Υ
Germer	Christopher	1831682400	Associate Clinical Social Worker	84113	Y
Jonney	Jorly	1902155625	Associate Clinical Social Worker	65763	Υ
Cholua	Marie	1275098055	Associate Marriage and Family Therapist	120341	Y
Chukwuka	Ogiram	1063662781	Licensed Clinical Social Worker	81785	
Phillips	Victoria	1871110437	Associate Clinical Social Worker	92751	Υ
Garcia	Frank	1992179352	Associate Marriage and Family Therapist	118171	Υ
Gementera	Jalessa	1588134209	Associate Marriage and Family Therapist	118468	Υ
Velasquez	Normita	1609464114	Licensed Psychiatric Techician	41847	
Roberts	Sharmaine	1376724310	Licensed Clinical Social Worker	28902	
Chavez	April	1760959670	Licensed Marriage and Family Therapist	113250	
Quinones	Alana	1457817033	Associate Marriage and Family Therapist	122079	Υ
Preston	Jessica	1649727066	Associate Clinical Social Worker	79154	Υ
Whittaker	Latasha	1932467362	Associate Marriage and Family Therapist	108832	Υ
Hensley	Zachary	1265039226	Associate Marriage and Family Therapist	114900	Υ
Salazar	Kellie	1295273654	Licensed Psychiatric Techician	40326	N
Weekly	Tony	1710572540	Licensed Psychiatric Techician	41837	
Martinez	Celeste	1902305972	Licensed Psychiatric Techician	40655	Υ
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ
Firnberg	Thomas	1164597472	Physician	A40218	
Jahangiri	Mohammad	1720266760	Physician	A56400	
Padala	Nagamani	1659303253	Physician	C53554	
Singh	Karamjit	1083930440	Physician	A132050	
Soares	Ana	1922191410	Physician	A68523	
Saelee	Cindy	1255511614	Licensed Clinical Social Worker	82456	Υ
McHenry	Heidi	1861763294	Licensed Psychiatric Techician	35949	Υ
Sprague	Helen	1710325642	Associate Marriage and Family Therapist	75120	Υ
Hall	Jane	1346406824	Licensed Marriage and Family Therapist	50808	Υ
Herrick	Kara	1518191659	Licensed Marriage and Family Therapist	43283	Υ
Wallace	Remedios	1639294341	Licensed Psychiatric Techician	24227	Υ
Garcia	Luis	1346599677	Licensed Marriage and Family Therapist	10398	Υ
Montgomery	Mary	1538281183	Licensed Clinical Social Worker	82129	Υ
Kavanagh	Priscilla	1528429057	Associate Professional Clinical Counselor	2122	Υ
Doronio	Ramil	1871767376	Registered Nurse	555151	Υ
Martin	Ronee	1932644796	Associate Marriage and Family Therapist	84987	Υ
Jackson	Sasha	1295181295	Associate Clinical Social Worker	79996	Υ
Helsby	Sherri	1669893764	Licensed Clinical Social Worker	29248	Υ
DeWitte	Tiffany	1023143245	Licensed Clinical Social Worker	29826	Υ
Garcia	Valerie	1770606386	Registered Nurse	704233	Υ
Manansala	Gerado	1215195813	Physician	A102439	Υ

Mascovich	Paul	1215921184	Physician	G33950	Υ			
Keys	Sheril	1942664875	Licensed Psychiatric Techician	38333	Υ			
Firnberg	Thomas	1164597472	Physician	A040218	N			
Jahangiri	Mohammad	1720266760	Physician	A56400	Υ			
Saddik	Fouad	1437254117	Physician	A44865	Υ			
Graff	Robert	1366560112	Physician	G70479	Υ			
Parsons	Wilhelmina	1144696840	Licensed Marriage and Family Therapist	49001	Υ			
Rivera	Lilian	1750059424	Licensed Clinical Social Worker	102359				
Herrera	Karla	1427722461	Associate Professional Clinical Counselor	102359				
Program Name: Community Corrections Partnership #39AP Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202 Phone Number: (209) 468-9373		Populations se Cultural Compe	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a		ety for			
_	0		our community.					
Non-English Languages: Spanish		Office Hours: Monday - Friday 8:00 am- 5:00 pm website: https://www.sjgov.org/mhs						
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Look Niewes	First Name			Liconso #	<u> </u>			
	First Name	NPI	Type of License	License #	CC			
Molina	Rico	NPI 1255454203	Type of License Licensed Clinical Social Worker	25450	Y			
Molina Garcia	Rico Julio	NPI 1255454203 1679961106	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist	25450 108163	Υ			
Molina Garcia Garcia	Rico Julio Juan	NPI 1255454203 1679961106 1710008735	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker	25450 108163 69500	Y			
Molina Garcia	Rico Julio	NPI 1255454203 1679961106 1710008735 1114141173	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist	25450 108163 69500 48970	Y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N.	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker	25450 108163 69500 48970	Y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, CA	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist iption: Case Management/ Brokerage; Mental	25450 108163 69500 48970	Y			
Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp Populations se Cultural Compe health outreach, crisis 5150 deter	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist iption: Case Management/ Brokerage; Mental bort; Crisis Intervention	25450 108163 69500 48970 Health Services	Y Y Y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202 209) 468-8686	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp Populations se Cultural Compe health outreach, crisis 5150 deter Office Hours: Compe	Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage	25450 108163 69500 48970 Health Services	Y Y Y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202 209) 468-8686	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp Populations se Cultural Compe health outreach, crisis 5150 deter Office Hours: Compe	Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and	25450 108163 69500 48970 Health Services	Y Y Y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2 Non-English Lang Cambodian, Vietr Last Name	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202 209) 468-8686	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp Populations se Cultural Competent of the comp	Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage And Family The	25450 108163 69500 48970 Health Services mmunity adult now enforcement for	y y y			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2 Non-English Lang Cambodian, Vietr Last Name Ballesteros	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202 209) 468-8686 guages: Spanish, namese First Name	NPI 1255454203 1679961106 1710008735 1114141173 Program Descr Medication Supp Populations se Cultural Compete health outreach, crisis 5150 detered office Hours: Compete website: https://www.npi	Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist iption: Case Management/ Brokerage; Mental Proception of Company o	25450 108163 69500 48970 Health Services mmunity adult now enforcement for	y y y ;			
Molina Garcia Garcia Herrington Program Name: Response Team Type of Program: Address: 1212 N. City: Stockton, C. Phone Number:(2	Rico Julio Juan Randolph Crisis Community (CCRT) #9088 MH California Street A 95202 209) 468-8686 Guages: Spanish, namese First Name Patricia	Populations se Cultural Compete health outreach, crisis 5150 determined of the compete health outreach, crisis 5150 determined outre	Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker Licensed Marriage and Family Therapist iption: Case Management/ Brokerage; Mental Property of Crisis Intervention rved: Adult, Children, Adolescents etency: Mobile multi-disciplinary crisis team for contearly intervention and joint field response with lawn tion evaluations. PEN 24 HOURS www.sjgov.org/mhs Type of License Licensed Marriage and Family Therapist	25450 108163 69500 48970 Health Services mmunity adult now enforcement for the service of the	y Y Y Y			

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Blewett	Jenna	1437658408	Associate Marriage and Family Therapist	118907	Υ		
Figueroa	Carlos	1306193933	Licensed Marriage and Family Therapist	102315	Υ		
Gutoman	Jon Christopher	1578814042	Associate Marriage and Family Therapist	111365	Υ		
Lee	Catherine	1073729646	Licensed Marriage and Family Therapist	44225	Υ		
Lewman	Brenda	1821477035	Licensed Marriage and Family Therapist	106905	Υ		
Melgarejo	Angie	1891220729	Associate Professional Clinical Counselor	6643	Υ		
Molina-Eliab	Sonya	1497878482	Associate Marriage and Family Therapist	99087	Υ		
Morales	Leonardo	1962822643	Licensed Clinical Social Worker	100000	Υ		
Harrison	Lecia	1407487200	Licensed Clinical Social Worker	86799	N		
Douglas	Roy	1407229248	Associate Clinical Social Worker	98897	N		
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Υ		
Valenzuela	Maira	1093221087	Associate Clinical Social Worker	102953			
Rios	Judybeth	1346762499	Associate Professional Clinical Counselor	8376			
Services #9011 Type of Program: I Address: 1212 N. (City: Stockton, CA	California Street	_	iption: Case Management/ Brokerage; Mental Hoort; Crisis Intervention				
Phone Number: (2	09) 468-8686	Populations served: Adult, Children Adolescents					
<u>^</u>		Cultural Competency: 24-Hour evaluation services including assessment for psychiatric emergencies, crisis counseling, outpatient and community referrals.					
Non-English Langu	uages: Spanish,	Office Hours: 2	24 HOURS				
Cambodian, Vietna	amese	website: https://	ww.sjgov.org/mhs				
Last Name	First Name	NPI	Type of License	License #	CC		
Graff	Robert	1366560112	Physician	G70479	Υ		
Gill	Paramijit	1073629218	Physician	A49224	Υ		
Ballesteros	Patricia	1790058352	Licensed Marriage and Family Therapist	108455	Y		
Bates	Carrie	1306298849	Licensed Clinical Social Worker	89569	Ϋ́		
Bringas	Carmencita	1821298753	Licensed Marriage and Family Therapist	53691	Y		
Donato	Imelda	1194278085	Licensed Professional Clinical Counselor	21487	Y		
Blewett	Jenna	1437658408	Associate Marriage and Family Therapist	118907	Y		
Figueroa	Carlos	1306193933	Licensed Marriage and Family Therapist	102315	Y		
Gutoman	Jon Christopher	1578814042	Associate Marriage and Family Therapist	111365	Y		
Lee	Catherine	1073729646	Licensed Marriage and Family Therapist	44225	Y		
Lewman	Brenda	1821477035	Licensed Marriage and Family Therapist	106905	Y		
Melgarejo	Angie	1891220729	Associate Professional Clinical Counselor	6643	Y		
	[/ \li			1			
Molina-Eliab	_	1497878482	Associate Marriage and Family Therapist	99087	Υ		
Molina-Eliab Morales	Sonya	1497878482 1962822643	Associate Marriage and Family Therapist Licensed Clinical Social Worker	99087 100000	Y		
Morales	Sonya Leonardo	1962822643	Licensed Clinical Social Worker	99087 100000 84045			
	Sonya Leonardo Wendy	1962822643 1265554638	Licensed Clinical Social Worker Licensed Marriage and Family Therapist	100000	Υ		
Morales Myotte	Sonya Leonardo	1962822643	Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Psychiatric Technician	100000 84045	Y		
Morales Myotte DeJesus	Sonya Leonardo Wendy Carolyn	1962822643 1265554638 1861650228	Licensed Clinical Social Worker Licensed Marriage and Family Therapist	100000 84045 34221	Y Y Y		

	•		_		_
Brown	Kristaline	1750723821	Licensed Psychiatric Technician	32575	Υ
Gill	Sandeep	1871852673	Licensed Psychiatric Technician	34942	Υ
Isham	Loni	1891145033	Licensed Psychiatric Technician	38233	Υ
Lewis	Chandra	1770914061	Licensed Psychiatric Technician	37210	Υ
McArthur	Milagros	1477809929	Licensed Psychiatric Technician	36471	Υ
Price	Jennifer	1932621893	Licensed Psychiatric Technician	40662	Υ
Alejo	Stephanie	1659798130	Licensed Psychiatric Technician	37033	Υ
Sumampong	Criselle	1073121414	Licensed Psychiatric Technician	41696	N
Wright-Freeman	Cody	1538584859	Licensed Psychiatric Technician	37819	Υ
Formoso	Rizza	1649862269	Licensed Psychiatric Technician	41438	Υ
Douglas	Roy	1407229248	Associate Clinical Social Worker	98897	Υ
Harrison	Lecia	1407487200	Licensed Clinical Social Worker	86799	N
Valenzuela	Maira	1093221087	Associate Clinical Social Worker	102953	
Rios	Judybeth	1346762499	Associate Professional Clinical Counselor	8376	
Type of Program: MI Address: 1212 N. Ca City: Stockton, CA 9 Phone Number: (209	alifornia Street 5202	Populations so	rved: Adult, Adolescents (12 yrs or older)		
Phone Number: (208	9) 468-8686		, , ,		
, <u>L</u>		- I	tency: 23-Hour psychiatric assessment and stabi		
	0		Referrals are provided during admission and upon	discharge.	
Non-English Langua	= · · · · · · · · · · · · · · · · · · ·	Office Hours: O			
Cambodian, Vietnan		•	vww.sjgov.org/mhs	T	1
Last Name	First Name	NPI	Type of License	License #	CC
Graff	Robert	1366560112	Physician	G70479	Υ
Arroyo	Maria Elizabeth	1255459061	Registered Nurse	488617	Υ
Brown	Brandi	1316060023	Registered Nurse	713008	Y
Cabrera	Gilbert	1679693766	Registered Nurse	565185	Υ
Dapon	Jeanette	1780152918	Registered Nurse	824521	Υ
Laizer	Gloria	1255706479	Registered Nurse	764452	Υ
Leal	Bobby	1265074785	Registered Nurse	95149157	Υ
Mendoza	Michelle	1477951812	Registered Nurse	797022	Y
Seraypheap	Arunny	1013037274	Registered Nurse	547944	
Kottke	Marline	1891223111	Licensed Vocational Nurse		Υ
Abundez		-		198957	Υ
	Jesse	1841413036	Licensed Psychiatric Technician	198957 29162	
Arriola	Jesse Eulalie	1841413036 1255573044	Licensed Psychiatric Technician Licensed Psychiatric Technician	29162 34426	Y Y Y
DeJesus	Jesse Eulalie Carolyn	1841413036 1255573044 1861650228	Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Psychiatric Technician	29162 34426 34221	Y Y Y
	Jesse Eulalie Carolyn Christy	1841413036 1255573044 1861650228 1497978795	Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Psychiatric Technician	29162 34426 34221 28731	Y Y Y Y
DeJesus	Jesse Eulalie Carolyn	1841413036 1255573044 1861650228 1497978795 1780018390	Licensed Psychiatric Technician	29162 34426 34221 28731 37071	Y Y Y Y Y
DeJesus Little Montantes Andrande	Jesse Eulalie Carolyn Christy	1841413036 1255573044 1861650228 1497978795 1780018390 1205460482	Licensed Psychiatric Technician	29162 34426 34221 28731 37071 243952	Y Y Y Y Y Y
DeJesus Little Montantes	Jesse Eulalie Carolyn Christy Michael	1841413036 1255573044 1861650228 1497978795 1780018390	Licensed Psychiatric Technician	29162 34426 34221 28731 37071	Y Y Y Y Y

Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Υ
Holguin	Gagriel	1255704094	Licensed Psychiatric Technician	38216	Υ
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Υ
Lo	Pa	1295377117	Licensed Psychiatric Technician	41128	Υ
Menius	Victoria	1487074258	Licensed Psychiatric Technician	37534	Υ
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Υ
Phillips	Heather	1114530250	Licensed Psychiatric Technician	41710	N
Ripoyla	Jerral	1821511700	Licensed Psychiatric Technician	40644	Υ
Salon	Jennifer	1730702119	Licensed Psychiatric Technician	41462	N
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Υ
Singh	Jasvir	1477833911	Licensed Psychiatric Technician	36007	Υ
Smith	Maria	1821624156	Licensed Psychiatric Technician	41522	N
Soy	Nathaniel	173065931	Licensed Psychiatric Technician	41042	Υ
Vang	Mai	1982103081	Licensed Psychiatric Technician	40697	Υ
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	Υ
White	Carolina	1588134480	Licensed Psychiatric Technician	41058	Υ
Wong	Adam	1346859469	Licensed Psychiatric Technician	41676	N
Lambert	Rekha	1164647525	Licensed Marriage and Family Therapist	10386	Υ
Navarro	Grace	1083737753	Associate Clinical Social Worker	72678	Υ
Nguyen	Thao	1912214065	Licensed Marriage and Family Therapist	88176	Υ
Tran	Michelle	1366642068	Licensed Clinical Social Worker	81278	Υ
Singh	Devi	1962083725	Registered Nurse	818277	N
Tuning	Frankie	1073631727	Registered Nurse	95171895	N
Maldonado	Adan	1063878825	Associate Marriage and Family Therapist	121459	Υ

Program Name: Forensic Court Full Service Partnership (MHSA) #9091 **Program Description:** Case Management/ Brokerage; Mental Health Services; Medication Support; Crisis Intervention

Type of Program: MH

OB

Address: 1212 N California Street

City: Stockton, CA 95202

Phone Number: (209) 468-8786

Non-English Languages: Spanish

Populations served: Adult

Cultural Competency: Provides comprehensive psychiatric and integrative services to

address the needs of Mentally III Offenders.

Office Hours: Monday - Friday 8:00 am- 5:00 pm

website: https://www.sjgov.org/mhs

		woboito. https.w	website. https://www.sjgov.org/mile					
Last Name	First Name	NPI	Type of License	License #	CC			
McCall-Salerno	Betsey	1740574672	Licensed Marriage and Family Therapist	42444	Υ			
Musa	Joseph	1821271404	Associate Clinical Social Worker	64128	Υ			
Anderson	Alexander	1417183385	Associate Clinical Social Worker	70838	Υ			
Zummo	Joseph	1497927487	Associate Marriage and Family Therapist	105417	Υ			
Gonzales	Alicia	1679711790	Associate Clinical Social Worker	84800	Υ			

Ketcham	Shauna	1841798865	Associate Clinical Social Worker	79168	Ιγ
Bautista	Daniel	1407490733	Associate Marriage and Family Therapist	11280	T Y
Dautista	Daniel	1407430733	Associate Marriage and Family Micrapist	11200	 '
	: MH California Street		iption: Case Management/ Brokerage; Mental Hoort; Crisis Intervention	lealth Services;	•
Phone Number: (Populations se	rved: Older Adult		
ロ ら Non-English Land	guages: Spanish	underserved old	etency: Full Service Partnership with the emphasiser adult population ages (60+) Ionday - Friday 8:00 am- 5:00 pm	s on outreach to	the
rton English Early	gaagoo. opamon		ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	СС
Blue	Christine	1093786683	Physician	A10733	Υ
Resendez	Cynthia	1780877845	Physician	A84098	Υ
#39BE	. M. I	Intervention	iption: Case Management/ Brokerage; Mental He	·	
#39BE Type of Program Address: 1212 N City: Stockton, C. Phone Number: (California Street A 95202	Populations se	rved: Adult		
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (California Street A 95202	Populations se			
Type of Program Address: 1212 N City: Stockton, C	California Street A 95202 (209) 468-8880	Populations se Cultural Compe	rved: Adult etency: Transitional housing program focusing on		
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (California Street A 95202 (209) 468-8880	Populations se Cultural Compe population and f Office Hours: M	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs	engaging the ta	arget
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (California Street A 95202 (209) 468-8880	Populations se Cultural Compe population and f Office Hours: M	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm		
Type of Program Address: 1212 N City: Stockton, C Phone Number: (California Street A 95202 (209) 468-8880 guages:	Populations se Cultural Compe population and f Office Hours: N website: https:w	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs	engaging the ta	arget
Type of Program Address: 1212 N City: Stockton, C Phone Number: (California Street A 95202 (209) 468-8880 guages:	Populations se Cultural Compe population and f Office Hours: N website: https:w	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs	engaging the ta	arget
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (Non-English Lang Last Name	California Street A 95202 (209) 468-8880 guages: First Name	Populations se Cultural Compe population and f Office Hours: M website: https:// NPI	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License	engaging the ta	arget
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (Last Name Program Name: Type of Program Address: 1212 N	California Street A 95202 (209) 468-8880 guages: First Name InSPIRE (MHSA) #39A : MH . California Street	Populations se Cultural Compe population and f Office Hours: M website: https:// NPI N Program Descr Coordination (IC)	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs	License #	arget
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (\(\triangle \) Non-English Lang Last Name Program Name: Type of Program	California Street A 95202 (209) 468-8880 guages: First Name InSPIRE (MHSA) #39A : MH . California Street A 95202	Populations se Cultural Compe population and f Office Hours: M website: https:// NPI N Program Descr Coordination (IC)	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm www.sjgov.org/mhs Type of License iption:Case Management/ Brokerage including In eC); Mental Health Services including Intensive Hotion Support; Crisis Intervention	License #	arget
Type of Program Address: 1212 N City: Stockton, C. Phone Number: (Compared to the compared t	California Street A 95202 (209) 468-8880 guages: First Name InSPIRE (MHSA) #39A : MH . California Street A 95202	Populations se Cultural Compe population and f Office Hours: N website: https:w NPI N Program Descr Coordination (IC (IHBS); Medica: Populations se Cultural Compe	rved: Adult etency: Transitional housing program focusing on acilitating prgress in recovery. Monday - Friday 8:00 am- 5:00 pm www.sjgov.org/mhs Type of License iption:Case Management/ Brokerage including In eC); Mental Health Services including Intensive Hotion Support; Crisis Intervention	engaging the ta	cc

Non-English Langua Cambodian, Vietna			Office Hours: Monday-Friday 8:00 am- 5:00 pm					
Cambodian, Vietnamese		website: www.sjcbhs/mhs.org						
Last Name First Name		NPI	, ,					
<u> </u>	This italic		1,750 0. 2.00.000		CC			
Program Name: La	a Familia Clinic Ful	Program Descr	ription: Case Management/ Brokerage including Ir	ntensive Care				
Service Partnershi		_	CC); Mental Health Services including Intensive Ho		ices			
#9092	,	· ·	tion Support; Crisis Intervention					
Type of Program: M	1H	, , ,	· · · · · · · · · · · · · · · · · · ·					
Address: 1212 N. C								
City: Stockton, CA 9								
Phone Number: (20		Populations se	rved: Adult - Focus on Latino outreach and acce	SS.				
()	,	<u> </u>	etency: Psychiatric assessment, case management		upport.			
		<u>-</u>	roup therapy with a special emphasis on serving S					
△ &		persons	or and the second configuration of the second configuratio	parment operaning	,			
Non-English Langua	ages: Spanish	•	Monday - Friday 8:00 am- 5:00 pm					
	agos opolinon	website: www.sj						
Last Name	First Name	NPI	Type of License	License #	СС			
Nelson	Nancy	1376635680	Physician	C50283	Υ			
Fernandez	Jane	1194799395	Physician	A93060	Υ			
Smith	Pamela	1902889694	Physician	G84663	Υ			
Resendez	Cynthia	1780877845	Physician	A84098	Υ			
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ			
Tamayo	Donnelle	1073871216	Registered Nurse	551864	Υ			
Cruz	Gloria	1104375724	Registered Nurse	723203	Υ			
Cruz	Adriana	1871612697	Licensed Clinical Social Worker	81643	Υ			
Aranda	Scarlette	1295929529	Associate Clinical Social Worker	83748	Υ			
Flores	Henry	1992038657	Associate Marriage and Family Therapist	123887				
	,							
Program Name: M	ary Graham	Program Descr	ription: Case Management/ Brokerage including I	ntensive Care				
Children's Shelter	#9008	Coordination (IC	CC); Mental Health Services including Intensive Ho	me Based Servi	ices			
Type of Program: M	1H	(IHBS); Medica	tion Support; Crisis Intervention					
Address: 6861 Mary								
City: Stockton, CA	=							
Phone Number: (20		Populations se	rved: Children and Youth					
(=0	,		etency: Provides outpatient mental health services	s to residents of	Marv			
△ Ġ		Graham Childre	•		,			
Non-English Langua	ages:		24 Monday though Friday 8AM - 5PM					
	- G	website: none						
Last Name	First Name	NPI	Type of License	License #	СС			
Allanki	Sailaja		3 Physician	138838	Y			
	Shaukat		5 Physician	105923	Y			
Ansari	JJIIGUNGL			TO332.71				

Yocham	Amanda	1226102516	Liconcod Marriago and Eamily Thoronist	70069	V
Sylvester	Carrie	1326103516	Licensed Marriage and Family Therapist	79068 G22049	Y
Sylvester Gonzalez			,		
	Mario		Registered Nurse	95217456	Y
Simien	Carla		Licensed Psychiatric Technician	40771	
Valdez	Janice	1003322199	Associate Marriage and Family Therapist	10842	
Program Name:	MHSA TAY FSP #39B1	Program Descrip	I otion: Case Management/ Brokerage including Ir	ntensive Care	
riogialii Naille.	WIIIOA IAI I OF #39DI		C); Mental Health Services including Intensive Ho		rices
Type of Program:	MH	,	on Support; Crisis Intervention	Jille Dased Gerv	1003
Address: 1212 N.					
City: Stockton, CA					
Phone Number:(2		Populations serv	ved: Adults		
i none number.(2	09) 400-2000		t ency: Full service partnership providing outpatie	nt mental health	
۵ اد		services	iericy. I dii service partifership providing outpatie	ni meniai neailii	
Non-English Lang	uages:	Office Hours: M	onday - Friday 8:00 am- 5:00 pm		
		website: www.sjcl	bhs.org/mhs		
Last Name	First Name	NPI	Type of License	License #	CC
Jackson	Sasha	1295181295	Associate Clinical Social Worker	79996	Υ
Type of Program: Address: 1212 N City: Stockton, CA	California Street				
Phone Number: (2		Populations serv	ved: Older Adult		
۵ ه		Cultural Compet (60+) provided by medication suppo	tency: Comprehensive Behavioral Health Service a multidisciplinary team. Services include psychort, group, individual therapy and case management	iatric assessmer	
•	uages: Spanish,		onday - Friday 8:00 am- 5:00 pm		
Cambodian, Vietn		website: www.sjcl	3	T	
Last Name	First Name	NPI	Type of License	License #	CC
House	Tracy	1720503550	Licensed Psychiatric Technician	32050	Υ
Blue	Christine	1093786683	Physician	A10733	Υ
Clay	Jeanette	1861950222	Associate Clinical Social Worker	86060	Υ
Resendez	Cynthia	1780877845	Physician	A84098	Υ
Clay	Jeanette	1861950222	Associate Clinical Social Worker	86060	Υ
Cusumano	Katherine	1659988822	Associate Professional Clinical Counselor	8125	Υ
Vales	Kevin	1952525909	Licensed Marriage and Family Therapist	79770	Υ
#9020	Pathways to Wellbeing	Coordination (ICC	otion:Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho		rices
Type of Program:	N/ILI	THERE'S Madication	an Crimmant. Oniaia Internation		
Address: 333 E.		(IDBS), Wedicali	on Support; Crisis Intervention		

					15
Loity, Stockton CA OF	2000				
City: Stockton, CA 95		2 10 0	1.0131		
Phone Number: (209)) 468-1547	-	ved: Children and Youth		141
			etency: Provides in-home and in-community outpa	itient mental nea	alth
△ <u>Ġ</u>			Code 300 dependent SJC children		
Non-English Languag	jes: Spanish	Office Hours:	Monday - Friday 8:00 am - 5:00 pm		
	_		ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	CC
Allanki	Sailaja	1306897723	Physician	138838	Υ
Alcaraz Tapia	Maria Marlen	1942470299	Licensed Marriage and Family Therapist	93646	Υ
Castaneda-Jensen	Renessa	1376664862	Licensed Marriage and Family Therapist	81528	Υ
Payne	Sheilena	1336437656	Licensed Marriage and Family Therapist	94571	Υ
Pollock	Leora	1245663426	Licensed Clinical Social Worker	75192	Υ
Quinn	Timothy	1316322381	Associate Marriage and Family Therapist	79556	Υ
Campos Ramos	Marc	1487715785	Licensed Clinical Social Worker	25797	Υ
Del Toro	Jose	1578058681	Licensed Marriage and Family Therpaist	120167	Υ
Program Name: Peter Type of Program: MH Address: 535 W Matth City: French Camp, C	H thews Rd	Coordination (IC	iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Hotion Support; Crisis Intervention		rices
Phone Number (209)	468-4240	Populations ser	rved: Children and Youth		
		Cultural Compe	etency: Provides outpatient mental health services	s to youth detain	ed at
△ Ġ .		Peterson Hall.			
Non-English Languag	ges: Spanish	Office Hours:	Monday - Friday 8:00 am - 8:00 pm		
			Saturday - Sunday 10:00 am - 7:00 pm		
		website: https:w	ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	СС

		website: https:w	ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	CC
Shabneet	Hira Brar	1851598452	Physician	A112447	Υ
Pablico	Shiella	1588036321	Licensed Psychiatric Technician	37620	Υ
Abdollah	Sabet	1366468555	Physician	C53401	Υ
Yocham	Amanda	1326103516	Licensed Marriage and Family Therapist	79068	Υ
Robbins Rios	Laura	1013386580	Licensed Marriage and Family Therapist	128355	Υ
Bavery	Karina	1477891679	Licensed Marriage and Family Therapist	121608	Υ
Martinez	Adriana	1851831242	Associate Marriage and Family Therapist	107761	Υ
Nelson	Michelle	1891173357	Licensed Marriage and Family Therapist	11430	Υ
Gonzalez	Mario	1083041685	Registered Nurse	95217456	Υ
Burke	Billy	1922483932	Associate Professional Clinical Counselor	4938	Υ
Program Name: I Facility (PHF) #3	Psychiatric Health	Program Desci	ription: Non-Hospital PHF		
Type of Program:					
404031					

Address: 1212 N. California St

City: Stockton, CA 95202

Phone Number: (209) 468-8686

0 **b**

Non-English Languages:Spanish Cambodian, Vietnamese

Populations served: Adult

Cultural Competency: Inpatient psychiatric hospitalization services

Office Hours: OPEN 24 HOURS

		website: https:w	ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	CC
Gill	Paramijit	1073629218	Physician	A49224	Υ
Silver	Hilary	1720201221	Physician	C33442	Υ
Arroyo	Maria Elizabeth	1255459061	Registered Nurse	488617	Υ
Brown	Brandi	1316060023	Registered Nurse	713008	Υ
Cabrera	Gilbert	1679693766	Registered Nurse	565185	Υ
Dapon	Jeanette	1780152918	Registered Nurse	824521	Υ
Laizer	Gloria	1255706479	Registered Nurse	764452	Υ
Leal	Bobby	1265074785	Registered Nurse	95149157	Υ
Mendoza	Michelle	1477951812	Registered Nurse	797022	Υ
Seraypheap	Arunny	1013037274	Registered Nurse	547944	Υ
Kottke	Marline	1891223111	Licensed Vocational Nurse	198957	Υ
Abundez	Jesse	1841413036	Licensed Psychiatric Technician	29162	Υ
Arriola	Eulalie	1255573044	Licensed Psychiatric Technician	34426	Υ
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Υ
Little	Christy	1497978795	Licensed Psychiatric Technician	28731	Υ
Montantes	Michael	1780018390	Licensed Psychiatric Technician	37071	Υ
Bokelman	Roy	111404003	Licensed Psychiatric Technician	32628	Υ
Chapin	Larry	1528200169	Licensed Psychiatric Technician	26162	Υ
Clutario	Dindo	1164664512	Licensed Psychiatric Technician	34295	Υ
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Υ
Fortes	Catherine	1346681442	Licensed Psychiatric Technician	36982	Υ
Harbin	Toni	1639475049	Licensed Psychiatric Technician	28726	Υ
Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Υ
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Υ
Look	Jasmin	1194143198	Licensed Psychiatric Technician	37492	Υ
Menius	Victoria	1487074258	Licensed Psychiatric Technician	37534	Υ
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Υ
Ota	Robert	1578786554	Licensed Psychiatric Technician	33792	Υ
Pinano	Paolo	1245352616	Licensed Psychiatric Technician	33726	Υ
Ruiz	Meliza	1477161396	Licensed Psychiatric Technician	41597	N
Ruiz	Ronald	1700907094	Licensed Psychiatric Technician	27494	Υ
Seba	Vicki	1639291636	Licensed Psychiatric Technician	31714	Υ
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Υ
Siador	Jill	1366884058	Licensed Psychiatric Technician	36818	Υ
Singh	Jasvir	1477833911	Licensed Psychiatric Technician	36007	Υ
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	Υ
Villasenor	Kendra	1447518204	Licensed Psychiatric Technician	36449	Υ

Zorea	Dylan	1467573766	Licensed Psychiatric Technician	28206	Υ
Limas	Stephanie	1053433748	Licensed Marriage and Family Therapist	99397	Υ
Shah	Mamoona	1407978471	MHC	Waivered	Υ
Camello	Bena	1053581116	Licensed Clincial Social Worker	65302	Υ
Weiland	Jessica	1164751392	Licensed Professional Clinical Counselor	173	Υ
Singh	Devi	1962083725	Registered Nurse	818277	N
Tuning	Frankie	1073631727	Registered Nurse	95171895	N

Program Name: San Joaquin County MH Services Lodi Clinic #3924

Type of Program: MH

Address: 1209 W. Tokay Street, Suites

1, 3, 5, 7, 9, 12, 14, and 16 City: Lodi, CA 95240

Phone Number: (209) 331-2070

Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Adult, Children, and Youth

Cultural Competency: Comprehensive mental health services for adults (18-60), children, youth, and their families living in North County area. Services include psychiatric assessment, medication support, group and individual therapy, and case management.

Office Hours: Monday - Friday, 8:00 am - 5:00 pm

website: https://www.sigov.org/mhs

へられる。
Non-English Languages: Spanish
Last Name First Name
Romero Karla

		website. https.w	ww.sjgov.org/mins		
Last Name	First Name	NPI	Type of License	License #	CC
Romero	Karla	1083133276	Associate Marriage and Family Therapist	100573	Υ
Rizvi	Saba	1619190501	Physician	A95786	Υ
Alban	Benjamin	1932227295	Licensed Clinical Social Worker	26094	Υ
Hill	Patricia	1902926231	Licensed Marriage and Family Therapist	23764	Υ
Valdez	Janice	1003322199	Associate Marriage and Family Therapist	10842	Υ
Allanki	Sailaja	1306897723	Physician	138838	Υ
Ansari	Shaukat	1821294455	Physician	105923	Υ
Chow	Christopher	1124530100	Licensed Psychiatric Technician	38077	Υ
Doronio	Ramil	1871767376	Registered Nurse	555151	Υ
Padilla	Cassandra	1477137289	Registered Nurse	95137004	N
Sabet	Abdollah	1366468555	Physician	C53401	Υ
Lugtu	Debbie	1396333266	Associate Marriage and Family Therapist	121448	Υ
Sylvester	Carrie	1306998273	Physician	G22049	N

Program Name: San Joaquin County MH Services Tracy Clinic #9048

Type of Program: MH

Address: 220 W. Eleventh Street

City: Tracy, CA 95376

Phone Number: (209) 831-5941

Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Adult

		Cultural Compe	etency: Comprehensive mental health services fo	r adults (18-60)	living
		·	area. Services include psychiatric assessment, n	, ,	
△ Ġ .		•	dual therapy, and case management.		,
Non-English Lang	uages: Spanish	<u> </u>	Monday - Friday 8:00 am - 5:00 pm		
rton Englion Early	aagoor opamen	website: sjcbhs.c			
Last Name	First Name	NPI	Type of License	License #	CC
Amador	Keith	1891127403	Licensed Marriage and Family Therapist	102725	
Stokes	Vicki	1164061024	Associate Clinical Social Worker	88366	Υ
Pasa	Angelo	1689874125	Registered Nurse	691250	
Everson	Maja	1811975139	Physician	172144	
Thompson	Beverly	1528311230	Associate Clinical Social Worker	70671	Υ
(TCC) - Full range health services an management program: Type of Program: Address: 4422 N. D1-D4 City: Stockton, CA Phone Number: (2	gram. #9014 MH Pershing Ave, Suites A 95207 209) 953-8843 uages: Cambodian,	Populations serpopulations Cultural Compessoutheast Asia. Vietnamese. Office Hours: Newboite: www.sjr		e Southeast Asia	nn es from
Last Name	First Name	NPI			
	First Name		Type of License	License #	
Kazmi	Syed	1437310273	Physician	A33815	Υ
Kazmi Smith	Syed Pamela	1437310273 1902889694	Physician Physician	A33815 G84663	Y
Kazmi Smith Park	Syed Pamela Kyung Soo	1437310273 1902889694 1013493436	Physician Physician Associate Clinical Social Worker	A33815 G84663 95613	Y Y Y
Kazmi Smith Park Hollowell	Syed Pamela Kyung Soo Shirley	1437310273 1902889694 1013493436 1124143474	Physician Physician Associate Clinical Social Worker Registered Nurse	A33815 G84663 95613 352081	Y Y Y Y
Kazmi Smith Park Hollowell Nguyen	Syed Pamela Kyung Soo	1437310273 1902889694 1013493436	Physician Physician Associate Clinical Social Worker	A33815 G84663 95613 352081 845080	Y Y Y
Kazmi Smith Park Hollowell Nguyen	Syed Pamela Kyung Soo Shirley	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849	Physician Physician Associate Clinical Social Worker Registered Nurse	A33815 G84663 95613 352081	Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong	Syed Pamela Kyung Soo Shirley Quynh-Chi	1437310273 1902889694 1013493436 1124143474 1417371014	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse	A33815 G84663 95613 352081 845080	Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist	A33815 G84663 95613 352081 845080 86055 61343 98396	Y Y Y Y Y Y Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$ Recovery Service	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian es (SEARS) for the	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr Coordination (IC	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist iption: Case Management/ Brokerage including CC); Mental Health Services including Intensive H	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$ Recovery Service Southeast Asian	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian es (SEARS) for the population-Full	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr Coordination (IC	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$ Recovery Service Southeast Asian Service Partners	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian es (SEARS) for the population-Full hip (MHSA) #9094	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr Coordination (IC	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist iption: Case Management/ Brokerage including CC); Mental Health Services including Intensive H	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$ Recovery Service Southeast Asian Service Partners Type of Program:	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian es (SEARS) for the population-Full hip (MHSA) #9094 MH	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr Coordination (IC	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist iption: Case Management/ Brokerage including CC); Mental Health Services including Intensive H	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y Y Y Y Y Y Y
Kazmi Smith Park Hollowell Nguyen Xiong Egbuchulam Lose Program Name: \$ Recovery Service Southeast Asian Service Partners Type of Program:	Syed Pamela Kyung Soo Shirley Quynh-Chi Maly Angela Alexsandria Southeast Asian es (SEARS) for the population-Full hip (MHSA) #9094 MH Pershing Avenue, Suite	1437310273 1902889694 1013493436 1124143474 1417371014 1932218849 1700231321 1053557306 Program Descr Coordination (IC	Physician Physician Associate Clinical Social Worker Registered Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist iption: Case Management/ Brokerage including CC); Mental Health Services including Intensive H	A33815 G84663 95613 352081 845080 86055 61343 98396 Intensive Care	Y Y Y Y Y Y Y Y Y Y Y Y

Phone Number: (209) 953-8843		Populations served: Adult Focus on outreach and access for the Southeast Asian population				
		Cultural Compe	etency: Full Service Partnership with emphasis on	serving person	s from	
_			Services available in Cambodian (Khmer), Hmong	~ .		
△ &		Vietnamese.				
Non-English Lang Laotian, Hmong, V	uages: Cambodian, /ietnamese, Thai	Office Hours: N	Monday - Friday, 8:00 am - 5:00 pm			
,		website: www.sj	cbhs.org/mhs			
Last Name	First Name	NPI	Type of License	License #	CC	
Kazmi	Syed	1437310273	Physician	A33815	Υ	
Smith	Pamela	1902889694	Physician	G84663	Υ	
Park	Kyung Soo	1013493436	Associate Clinical Social Worker	95613	Υ	
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ	
Nguyen	Quynh-Chi	1417371014	Registered Nurse	845080	Υ	
Xiong	Maly	1932218849	Licensed Marriage and Family Therapist	86055	Y	
Egbuchulam	Angela	1700231321	Associate Clinical Social Worker	61343	Y	
Lose	Alexsandria	1053557306	Associate Marriage and Family Therapist	98396	Y	
1030	Alexadiana	1033337300	Associate Marriage and Farmily Merapist	30330	† '	
CONTRACT ORG	ANIZATIONAL PROVI		iption: Case Management Brokerage/Intensive			
#39AR		I(ICC); Mental H	ealth Services including Intensive Home Based Se	ervices (IHRS)		
	orado Street, Suite 510	, ,	avioral Services (TBS); Crisis Intervention	civices (ii ibo),		
Address: 6 S. El D City: Stockton, CA	orado Street, Suite 510 95202	Therapeutic Beh	avioral Services (TBS); Crisis Intervention			
•	orado Street, Suite 510 95202	Therapeutic Beh	rved: Children and Youth	``	S	
Address: 6 S. El D City: Stockton, CA Phone Number: (2	orado Street, Suite 510 95202	Populations se	rved: Children and Youth etency: Provides Therapeutic Behavioral Services	(TBS) and crisi	S	
Address: 6 S. EI D City: Stockton, CA Phone Number: (2	orado Street, Suite 510 95202 209) 478-9862	Populations services tabilization services	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization	(TBS) and crisi	S	
Address: 6 S. El D City: Stockton, CA Phone Number: (2	orado Street, Suite 510 95202 209) 478-9862	Populations services tabilization services Office Hours: M	rved: Children and Youth etency: Provides Therapeutic Behavioral Services vices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm	(TBS) and crisi	S	
Address: 6 S. El D City: Stockton, CA Phone Number: (2	orado Street, Suite 510 95202 209) 478-9862 uages:	Populations services abilization services of the Stabilization ser	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm	(TBS) and crisi		
Address: 6 S. El D City: Stockton, CA Phone Number: (2 \(\) Non-English Lange Last Name	orado Street, Suite 510 95202 909) 478-9862 uages:	Populations serve Cultural Compessabilization serve Office Hours: Medical NPI	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License	(TBS) and crisi	СС	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 Comparison Lange Last Name Willis	orado Street, Suite 510 95202 209) 478-9862 uages: First Name Joetta	Populations service Cultural Compessabilization service Hours: Mwebsite: https://www.npl	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist	(TBS) and crisin. License #	CC Y	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 \(\triangle \) Non-English Lange Last Name Willis Libre	orado Street, Suite 510 95202 909) 478-9862 uages: First Name Joetta Alyssa	Populations serve Cultural Compessabilization serve Office Hours: Mebsite: https://www.npl 1760716039 1841840394	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker	License # 52986 91717	CC Y Y	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 Comparison Lange Last Name Willis Libre Thysell	orado Street, Suite 510 95202 209) 478-9862 uages: First Name Joetta Alyssa Tandrea	Populations served Cultural Compessabilization served Office Hours: Metabolic Hours: Metabo	rved: Children and Youth etency: Provides Therapeutic Behavioral Services vices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist	License # 52986 91717 123831	CC Y Y	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 \(\triangle \) Non-English Lange Last Name Willis Libre Thysell Fox	orado Street, Suite 510 95202 209) 478-9862 uages: First Name Joetta Alyssa Tandrea Stephen	Populations serve Cultural Compessabilization serve Office Hours: Mebsite: https://www.npl 1760716039 1841840394 1457863516 1619359445	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Marriage and Family Therapist	License # 52986 91717 123831 108563	CC Y Y Y	
Address: 6 S. EI D City: Stockton, CA Phone Number: (2 Complete C	porado Street, Suite 510 395202 209) 478-9862 uages: First Name Joetta Alyssa Tandrea Stephen Nwokedi	Populations serve Cultural Compessabilization serve Office Hours: Metabolic Hours: Metaboli	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker	License # 52986 91717 123831 108563 98128	CC Y Y Y Y	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 \(\triangle \) Non-English Lange Last Name Willis Libre Thysell Fox	orado Street, Suite 510 95202 209) 478-9862 uages: First Name Joetta Alyssa Tandrea Stephen	Populations serve Cultural Compessabilization serve Office Hours: Mebsite: https://www.npl 1760716039 1841840394 1457863516 1619359445	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Marriage and Family Therapist	License # 52986 91717 123831 108563	CC Y Y Y	
Address: 6 S. El D City: Stockton, CA Phone Number: (2 Complete C	porado Street, Suite 510 195202 209) 478-9862 uages: First Name Joetta Alyssa Tandrea Stephen Nwokedi Kimberly Casa Pacifica MH Lewis Road A 93012	Populations serve Cultural Compessabilization serve Office Hours: Metabolic Hours: Metaboli	rved: Children and Youth etency: Provides Therapeutic Behavioral Services rices as an alternative to psychiatric hospitalization londay - Friday, 8:00 am - 5:00 pm rww.aspiranet.org Type of License Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker	License # 52986 91717 123831 108563 98128 89649 are Coordinatio	CC Y Y Y Y Y Y Y Y Y	

△ Ġ .		Cultural Compet	ency: Provides outpatient mental health services			
Non-English Langua	JOS.		onday - Friday, 8:00 am - 5:00 pm			
Mon-English Langua	y c s.	website: https://w	ww.caspacifica.org			
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUNTY P			Type of License	2.00.130 //	 	
COT OF COOKITT						
Program Name: CR	IS (University of the	Program Descrip	Lotion: Mental Health Services Intensive Home E	Rased Services		
Pacific) #39A1	io (Oniversity of the	Frogram Descrip	Stion: Wentar realth Services intensive Florine L	based Services		
•	1					
Type of Program: Mh Address:405 E. Pine						
City: Stockton, CA 9		Danulations com	and Adult			
Phone Number: (209) 404-3319	Populations serv				
	0 ' 1	<u> </u>	ency: Behavioral Intervention Services			
Non-English Langua	ges: Spanisn		Monday - Friday 8:00 am - 5:00 pm			
	1	website: none	I=			
Last Name	First Name	NPI	Type of License	License #	СС	
NON LICENSED STA	AFF ONLY				<u> </u>	
City: Hollister, CA 95 Phone Number: (831) 636-2121	Cultural Compet	ved: Children and Youth ency: Outpatient Mental Health Services onday - Friday 8:00 am - 5:00 pm			
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNTY P			7.			
Program Name: Cha #9057 Type of Program: MH Address: 714 W. Ma City: Grass Valley, C. Phone Number: (530 △ 失	ł iin Street A 95945	Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention Populations served: Children and Youth Cultural Competency: Outpatient Mental Health Services				
Non-English Langua	ges:		Monday - Friday 8:00 am - 5:00 pm			
		website: www.cha				
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUNTY P	PROVIDER					

Program Name: Child Abuse Program Description: Case Management/ Brokerage including Intensive Care **Prevention Council** Coordination (ICC); Mental Health Services including Intensive Home Based Services #39AS (IHBS); Crisis Intervention Type of Program: MH Address: 540 N. California Street City: Stockton, CA 95202 Populations served: Children and Youth Phone Number: (209) 644-5311 Cultural Competency: Provides outpatient mental health services utilizing \wedge \mathcal{E} strengthening family approach Non-English Languages: Office Hours: Monday - Friday 8:00 am - 5:00 pm website: www.nochildabuse.org NPI CC License # Type of License **Last Name First Name** Jacka Karen 1790908788 Licensed Clinical Social Worker 16470 Υ Lowe Cassandra 1205278694 Licensed Marriage and Family Therapist 118868 Υ Khan Nazia 1508227158 Associate Professional Clinical Counselor 81499 Υ Associate Clinical Social Worker 83947 Υ Chum Thear 1134648231 Υ Archangel Ashle 1801216965 Associate Marriage and Family Therapist 106324 Associate Marriage and Family Therapist UyenMy 1942550959 113903 Υ Nguyen Bockmon-Ortiz Francine 1043587546 Associate Professional Clinical Counselor 7058 Υ Washington Lorraine 1639722820 Associate Marriage and Family Therapist 127280 Υ Perryman Shardon 1356815989 Associate Clinical Social Worker 87661 Υ Galli Elizabeth 15680327 Associate Marriage and Family Therapist 125735 Beck Vienna 13963908 Associate Marriage and Family Therapist 128219 Program Name: Children's Home of Program Description: Case Management/ Brokerage including Intensive Care Stockton #39BC Coordination (ICC); Mental Health Services including Intensive Home Based Services Type of Program: MH (IHBS); Med Support; Crisis Intervention Address: 430 N. Pilgrim Street City: Stockton, CA 95205 Phone Number: (209) 466-0853 Populations served: Youth and Adolescent <u>^</u> 6 Cultural Competency: Short Term Residential Therapeutic Program Office Hours: 24 HOURS Non-English Languages: Website: www.chsstk.com NPI License # CC Type of License **First Name Last Name** Wells 1730669235 Licensed Marriage and Family Therapist Katelyn 32808 Υ Galindo Michael 1437627338 Associate Clinical Social Worker 35257 Program Name: Children's Home of Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC): Mental Health Services including Intensive Home Based Services Stockton - Aspen Cottage #39BK (IHBS); Med Support; Crisis Intervention Type of Program: MH Address:1222 E Lindsay St City: Stockton, CA 95205 Phone Number: (209) 466-0853 Populations served: Youth and Adolecent △ (**5**. Cultural Competency: Short Term Residential Therapeutic Program Office Hours: 24 HOURS Non-English Languages: Spanish

		website: www.cl	nsstk.com		
Last Name	First Name	NPI	Type of License	License #	CC
Ruiz	Rachael	1285207084	Associate Marriage and Family Therapist	126995	Υ
_	Children's Home of		ription: Case Management/ Brokerage including I		
Stockton - Triple		,	CC); Mental Health Services including Intensive Ho	ome Based Ser	vices
Type of Program:		(IHBS); Med Su	ipport; Crisis Intervention		
Address 1227 E L	•				
City: Stockton, CA		D 1.41	T. W. W. T. A. L.		
Phone Number:(2	209) 466-0853		rved: Youth and Adolecent		
			etency: Short Term Residential Therapeutic Progr	ram	
Non-English Lang	guages:	Office Hours: 2			
	T	website: www.cl	_	I	1
Last Name	First Name	NPI	Type of License	License #	CC
Cole	Paige	1003373382	Associate Marriage and Family Therapist	118061	Y
Muy	Monika	1982008603	Associate Clinical Social Worker	102247	Υ
1					
Program ILS #	MH	Program Descr Intervention	iption: Case Management/ Brokerage; Mental H	lealth Services;	Crisis
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA	9044 MH Vine Street A 95204	Intervention		lealth Services;	Crisis
Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (2)	9044 MH Vine Street A 95204	Intervention Populations se			
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA	9044 MH Vine Street A 95204 209) 464-5519	Populations se Cultural Composervices	rved: Adult etency: Provides independent living skills training		
Program ILS #5 Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (2)	9044 MH Vine Street A 95204 209) 464-5519	Populations se Cultural Composervices	rved: Adult		
Program ILS #5 Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (2)	9044 MH Vine Street A 95204 209) 464-5519	Populations se Cultural Composervices Office Hours:	rved: Adult etency: Provides independent living skills training		
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (:	9044 MH Vine Street A 95204 209) 464-5519 guages: Spanish First Name	Populations se Cultural Composervices Office Hours: website: none	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm	and rehabilitation	on
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (3) \(\text{\text{L}} \) Non-English Lang Last Name	9044 MH Vine Street A 95204 209) 464-5519 guages: Spanish First Name	Populations se Cultural Composervices Office Hours: website: none	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm	and rehabilitation	on
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (: Check Non-English Lang Last Name NON LICENSED Program Name:	9044 MH Vine Street A 95204 209) 464-5519 guages: Spanish First Name	Populations se Cultural Composervices Office Hours: website: none NPI	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm	and rehabilitation	on
Program ILS # Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (: Check Non-English Lang Last Name NON LICENSED Program Name:	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano	Populations se Cultural Composervices Office Hours: website: none NPI	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License	and rehabilitation	on
Type of Program: Address:405 E. P City: Stockton, CA Phone Number: (2) Non-English Lang Last Name NON LICENSED Program Name: (PHF) #39A8 Type of Program:	MH line Street A 95204 209) 464-5519 guages: Spanish First Name STAFF ONLY Crestwood Solano MH	Populations se Cultural Composervices Office Hours: website: none NPI Program Descr	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (i Non-English Lang Last Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu	MH line Street A 95204 209) 464-5519 guages: Spanish First Name STAFF ONLY Crestwood Solano MH Holumne Street Suite	Populations se Cultural Composervices Office Hours: website: none NPI Program Descr	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (2) Non-English Lang Last Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu City: Vallejo, CA	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano MH Violumne Street Suite 94589	Populations se Cultural Composervices Office Hours: website: none NPI Program Descr	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License ription: Non-Hospital PHF	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (i Cat Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu City: Vallejo, CA Phone Number: (i	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano MH Violumne Street Suite 94589	Populations se Cultural Composervices Office Hours: website: none NPI Program Descri	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License ription: Non-Hospital PHF	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (2) Non-English Lang Last Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu City: Vallejo, CA Phone Number: (2) City: Vallejo, CA Phone Number: (3) City: Vallejo, CA Phone Number: (4) City: Vallejo, CA	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano MH Violumne Street Suite 94589 707) 558-1777	Populations se Cultural Composervices Office Hours: website: none NPI Program Descri B. Populations se Cultural Compo	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License ription: Non-Hospital PHF rved: Adult etency: Inpatient psychiatric hospitalization service	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (i Cat Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu City: Vallejo, CA Phone Number: (i	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano MH Violumne Street Suite 94589 707) 558-1777	Populations se Cultural Composervices Office Hours: website: none NPI Program Descri B. Populations se Cultural Compo	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License ription: Non-Hospital PHF rved: Adult etency: Inpatient psychiatric hospitalization service 4 HOURS	and rehabilitation	on
Type of Program: Address: 405 E. P City: Stockton, CA Phone Number: (2) Non-English Lang Last Name NON LICENSED Program Name: (PHF) #39A8 Type of Program: Address: 2201 Tu City: Vallejo, CA Phone Number: (1) City: Vallejo, CA Phone Number: (1)	MH Vine Street A 95204 209) 464-5519 Guages: Spanish First Name STAFF ONLY Crestwood Solano MH Violumne Street Suite 94589 707) 558-1777	Populations se Cultural Composervices Office Hours: website: none NPI Program Descri B. Populations se Cultural Compo	rved: Adult etency: Provides independent living skills training Monday - Friday 8:00 am - 5:00 pm Type of License ription: Non-Hospital PHF rved: Adult etency: Inpatient psychiatric hospitalization service	and rehabilitation	on

Program Name: C	rittenton Services For	Program Descr	iption: Case Management Brokerage/Intens	sive Care Coordination	1
Children And Far		(ICC); Mental H	ealth Services including Intensive Home Bas navioral Services (TBS); Medication Support	sed Services (IHBS);	
Type of Program: I	МН	Therapeatio Ben	avioral convices (186), inicalcation cupport	, Onois intervention	
Address: 100 E. Va					
City: Fullerton, CA					
Phone Number: (7		Populations se	rved: Children and Youth		
△ Ġ ,	,		etency: Residential facility providing mental h	nealth treatment to yo	uth.
ری Non-English Langu	uages:		Monday - Friday 8:30 am- 5 pm	,	
3	ŭ		ittentonsocal.org		
Last Name	First Name	NPI	Type of License	License #	СС
OUT OF COUNTY		1		L	
Type of Program: <mark>I</mark> Address: 525 W. K		(IHBS); Crisis In	tervention.		
City: Lodi, CA 952₄ Phone Number: (2 △ ك Non-English Langu	09) 369-1939	Cultural Compe Office Hours: 2		herapeutic Program	
Phone Number: (2)	09) 369-1939 uages:	Cultural Compe Office Hours: 2 website: www.ea	etency: Short Term Residenital Treatment Th 24 Hours a.org		
Phone Number: (2) Last Name	09) 369-1939 uages: First Name	Cultural Compe Office Hours: 2 website: www.ea	etency: Short Term Residenital Treatment Th 24 Hours a.org Type of License	License #	
Phone Number: (2 스 년 Non-English Langu Last Name	09) 369-1939 uages:	Cultural Compe Office Hours: 2 website: www.ea	etency: Short Term Residenital Treatment Th 24 Hours a.org		CC
Phone Number: (2) Non-English Langu Last Name Sabado Program Name: E #39CN Type of Program: Name: Name: Name Address: 601 Palm	O9) 369-1939 Lages: First Name Amberly EA Family Services MH In Ave.	Cultural Compe Office Hours: 2 website: www.ea NPI 1245829399 Program Descr	etency: Short Term Residenital Treatment The 24 Hours a.org Type of License Associate Clinical Social Worker iption: Case Management/Brokerage inlocations (CC); Mental Health Services including Intensi	License # 10080 ding Intensive Care	N
Phone Number: (2) Non-English Langu Last Name Sabado Program Name: E #39CN Type of Program: Name: Name: Name Address: 601 Palm City: Lodi, CA 9524	O9) 369-1939 uages: First Name Amberly Amberly A Family Services MH n Ave. 40	Cultural Compe Office Hours: 2 website: www.ea NPI 1245829399 Program Descri Coordinatiion (IC (IHBS); Crisis Ini	etency: Short Term Residenital Treatment The 24 Hours a.org Type of License Associate Clinical Social Worker iption: Case Management/Brokerage inlocations (CC); Mental Health Services including Intensi	License # 10080 ding Intensive Care	N
Phone Number: (2) Non-English Langu Last Name Sabado Program Name: E #39CN Type of Program: Name: Name Address: 601 Palm City: Lodi, CA 9524 Phone Number: (2)	O9) 369-1939 uages: First Name Amberly Amberly A Family Services MH n Ave. 40	Cultural Compe Office Hours: 2 website: www.ea NPI 1245829399 Program Descri Coordinatiion (IC (IHBS); Crisis Intelligence	etency: Short Term Residenital Treatment Treat	License # 10080 ding Intensive Care ive Home Bases Serv	N
Phone Number: (2) Non-English Langu Last Name Sabado Program Name: E #39CN Type of Program: Name: Name Address: 601 Palm City: Lodi, CA 9524 Phone Number: (2)	o9) 369-1939 uages: First Name Amberly Amberly Amberly A Family Services MH n Ave. 40 09) 333-0971	Cultural Compe Office Hours: 2 website: www.ea NPI 1245829399 Program Descri Coordinatiion (IC (IHBS); Crisis Intelligence	etency: Short Term Residenital Treatment The 24 Hours alorg Type of License Associate Clinical Social Worker iption: Case Management/Brokerage inloud CC); Mental Health Services including Intensitervention. rved: Youth & Adolescent etency: Short Term Residenital Treatment The	License # 10080 ding Intensive Care ive Home Bases Serv	N
Phone Number: (2) Non-English Langu Last Name Sabado Program Name: E #39CN Type of Program: Name: Name Address: 601 Palm City: Lodi, CA 9524 Phone Number: (2)	o9) 369-1939 uages: First Name Amberly Amberly Amberly A Family Services MH n Ave. 40 09) 333-0971	Cultural Compe Office Hours: 2 website: www.ea NPI 1245829399 Program Descri Coordinatiion (IC (IHBS); Crisis Inter-	etency: Short Term Residenital Treatment Treat	License # 10080 ding Intensive Care ive Home Bases Serv	N
Phone Number: (2) O	o9) 369-1939 uages: First Name Amberly Amberly Amberly A Family Services MH n Ave. 40 09) 333-0971	Cultural Competer Office Hours: 2 website: www.ea NPI 1245829399 Program Descrit Coordinatiion (IC (IHBS); Crisis Interpretations see Cultural Competer Office Hours: 2	etency: Short Term Residenital Treatment Treat	License # 10080 ding Intensive Care ive Home Bases Serv	

Type of Program: MH Address: 1801 Vincente Street - Buildings A, D, H, L, S, W, P, M City: San Francisco, CA 94116 Phone Number: (415) 681-3211 Therapeutic Behavioral Services (TBS); Crisis Intervention Populations served: Children and Youth

△ €.		Cultural Compe	etency: Provides outpatient mental health service		
Non-English Langu	lages:	Office Hours:	Monday - Friday 8:30 am- 5:00 pm		
		website: www.ed			
Last Name	First Name	NPI	Type of License	License #	CC
OUT OF COUNTY	' PROVIDER		, ,,	I	
Program Name: Turning Point Community Program: Esperanza #39BX Type of Program: MH Address: 1803 W. March Lane Suite C-D City: Stockton, CA 95207		Coordination (IC (IHBS); Crisis In	iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Hotervention. Full-Service Partnership Program; Evic Community Treatment)	ome Based Serv	
Phone Number: (2		Populations se	rved: Adult - Those diagnosed with a severe men	tal health diagno	osis.
△ と Non-English Langu	uages: Spanish, Hmong	regularly.	s; Cultural Competency Training(s) required of each	ch staff and offe	red
TYON English Early	ages. opanish, rimong		ionady Thady 0.00 am 0.00 pm		
		website: www to	cn org		
Last Name	Eirst Name	website: www.tp		License #	
Last Name	First Name	NPI	Type of License	License #	CC
Emunah	Ariella	NPI 1205836996	Type of License Physician	A97295	Υ
Emunah Pruitt	Ariella Kathryn	NPI 1205836996 1629277132	Type of License Physician Licensed Marriage and Family Therapist	A97295 97463	Y
Emunah Pruitt Largaespada	Ariella Kathryn Alexander	NPI 1205836996 1629277132 1881902161	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	A97295 97463 93473	Y Y Y
Emunah Pruitt Largaespada Bernard	Ariella Kathryn Alexander Alexis	NPI 1205836996 1629277132 1881902161 1255456943	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866	Y Y Y Y
Emunah Pruitt Largaespada Bernard Hieb	Ariella Kathryn Alexander	NPI 1205836996 1629277132 1881902161 1255456943 1407010739	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866 113741	Y Y Y
Emunah Pruitt Largaespada Bernard Hieb Goldfine-Lewis	Ariella Kathryn Alexander Alexis Kristina	NPI 1205836996 1629277132 1881902161 1255456943	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866	Y Y Y Y
Emunah	Ariella Kathryn Alexander Alexis Kristina Roberta	NPI 1205836996 1629277132 1881902161 1255456943 1407010739 1588211502	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866 113741	Y Y Y Y Y
Emunah Pruitt Largaespada Bernard Hieb Goldfine-Lewis Browning Haskell	Ariella Kathryn Alexander Alexis Kristina Roberta Jessika	NPI 1205836996 1629277132 1881902161 1255456943 1407010739 1588211502 1437752052 1154936383	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866 113741	Y Y Y Y Y Y
Emunah Pruitt Largaespada Bernard Hieb Goldfine-Lewis Browning Haskell Nevarez	Ariella Kathryn Alexander Alexis Kristina Roberta Jessika Erica	NPI 1205836996 1629277132 1881902161 1255456943 1407010739 1588211502 1437752052 1154936383	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866 113741	Y Y Y Y Y Y Y Y Y Y Y Y
Emunah Pruitt Largaespada Bernard Hieb Goldfine-Lewis Browning	Ariella Kathryn Alexander Alexis Kristina Roberta Jessika Erica Maria aka Angelica	NPI 1205836996 1629277132 1881902161 1255456943 1407010739 1588211502 1437752052 1154936383 1861874216	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	A97295 97463 93473 92866 113741	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Emunah Pruitt Largaespada Bernard Hieb Goldfine-Lewis Browning Haskell Nevarez Ramirez	Ariella Kathryn Alexander Alexis Kristina Roberta Jessika Erica Maria aka Angelica Aly Medora Kathleen	NPI 1205836996 1629277132 1881902161 1255456943 1407010739 1588211502 1437752052 1154936383 1861874216 1316544539 1861874216 1679613327	Type of License Physician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Vocational Nurse	A97295 97463 93473 92866 113741 91927	Y Y Y Y Y Y Y Y

Last Name	First Name	NPI	Type of License	License #	CC
41. Fred Finch Y	outh Center- OUT C	F COUNTY PROVI	DER	•	
. N	3 L		ription: Crisis Residential Treatment Program		
Program Name: (Type of Program:	3.L.O.M.A.R.F. 3 #390 MH	CB			
Address : 1117 S.					
City: Stockton, CA					
	209) 330-7155 x506	Populations se	arved: Adult		
	103) 000-7 100 X000		etency: Crisis Residential Treatment Program		
∟ິວະ Non-English Lang	nauec.	Office Hours:			
Non-English Lang	uages.	website: www.g			
Last Name	First Name	NPI	Type of License	License #	CC
Hood	Keturah	1629241138	Licensed Clinical Social Worker	81315	Υ
Ortiz	Amanda	1588184477		109399	Y
Jrtiz	Amanda	1588184477	Associate Marriage and Family Therapist	109399	
		Drogram Deser		rogram	
Address: 8210 Bri City: French Cam	ght Road o, CA 95231				
Type of Program: Address: 8210 Bri City: French Cam Phone Number:(2 △ ♣	ght Road	Populations se	e rved: Adult etency: Adult Transitional Residential Treatment P	Program	
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road o, CA 95231 09) 330-7155 x508	Cultural Composition Office Hours:	etency: Adult Transitional Residential Treatment P 24 HOURS	Program	
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road o, CA 95231 09) 330-7155 x508	Cultural Composition Office Hours: website: www.g	etency : Adult Transitional Residential Treatment P 24 HOURS lom-arf.org		
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road o, CA 95231 09) 330-7155 x508 uages: First Name	Cultural Composition Office Hours:	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License	Program License #	cc
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road o, CA 95231 09) 330-7155 x508 uages:	Cultural Composition Office Hours: website: www.g	etency : Adult Transitional Residential Treatment P 24 HOURS lom-arf.org		CC Y
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road o, CA 95231 09) 330-7155 x508 uages: First Name	Office Hours: website: www.g	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License	License #	+
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2 A Same Non-English Lang Last Name Hood Butler	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor	Cultural Composition Office Hours: Website: www.g NPI 1629241138 1669065140 Program Description	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker	License # 81315	
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #396	Cultural Composition Office Hours: Website: www.g NPI 1629241138 1669065140 Program Description	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390	Cultural Composition Office Hours: Website: www.g NPI 1629241138 1669065140 Program Description	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive	Cultural Composition Office Hours: Website: www.g NPI 1629241138 1669065140 Program Description	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2 Last Name Hood Butler Program Name: 6 Type of Program: Address: 458 Alm City: Lodi, CA 95	ght Road c, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2 A STAN STAN STAN STAN STAN STAN STAN STA	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2 Last Name Hood Butler Program Name: (2 Program Name: (3 Address: 458 Alm City: Lodi, CA 95 Phone Number: (2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descrict Populations se Cultural Composition	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program erved: Adult etency: Crisis Residential Treatment Program	License # 81315	Υ
Address: 8210 Bri City: French Cam Phone Number:(2 Last Name Hood Butler Program Name: (2 Program Name: (3 Address: 458 Alm City: Lodi, CA 95 Phone Number: (2	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597	Cultural Composition Office Hours: 2 website: www.g NPI 1629241138 1669065140 Program Descr	etency: Adult Transitional Residential Treatment P 24 HOURS Iom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program erved: Adult etency: Crisis Residential Treatment Program 24 HOURS	License # 81315	Υ
Address: 8210 Bricality: French Camphone Number: (2) Abon-English Language Non-English Language Program Name: (2) Address: 458 Alm City: Lodi, CA 95. Phone Number: (2) Abon-English Language Non-English Non-English Language Non-English	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor MH ond Drive 240 209) 330-7155 x597 uages:	Cultural Composition Office Hours: Website: www.g NPI 1629241138 1669065140 Program Descrict Populations se Cultural Composition Office Hours: 2 Website: www.g	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program erved: Adult etency: Crisis Residential Treatment Program 24 HOURS lom-arf.org	License # 81315 122866	Y
Address: 8210 Bri City: French Cam Phone Number: (2 A Solution Services Se	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597 uages: First Name	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr CC Populations se Cultural Composition Office Hours: 2 website: www.g NPI	etency: Adult Transitional Residential Treatment P 24 HOURS Image: Comparison of the Comparison of	License # 81315	Y
Address: 8210 Bricaty: French Came Phone Number: (2004) Non-English Language Program Name: (2004) Address: 458 Almone Number: (2004) Phone Number: (2004) Non-English Language Non-English Non-E	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597 uages: First Name Keturah	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr CC Populations se Cultural Composition Office Hours: 2 website: www.g NPI 1629241138	etency: Adult Transitional Residential Treatment P 24 HOURS lom-arf.org Type of License Licensed Clinical Social Worker Associate Professional Clinical Counselor ription: Crisis Residential Treatment Program erved: Adult etency: Crisis Residential Treatment Program 24 HOURS lom-arf.org	License # 81315 122866	Y
Address: 8210 Bricaty: French Came Phone Number: (2004) Non-English Language Program Name: (2004) Address: 458 Almone Number: (2004) Phone Number: (2004) Non-English Language Non-English Non-E	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597 uages: First Name	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr CC Populations se Cultural Composition Office Hours: 2 website: www.g NPI	etency: Adult Transitional Residential Treatment P 24 HOURS Image: Comparison of the Comparison of	License # 81315	Y
Address: 8210 Bri City: French Cam Phone Number: (2 Non-English Lang Last Name Hood Butler Program Name: (2 Address: 458 Alm City: Lodi, CA 95 Phone Number: (2 Non-English Lang	ght Road b, CA 95231 09) 330-7155 x508 uages: First Name Keturah Taylor G.L.O.M.A.R.F. 5 #390 MH ond Drive 240 209) 330-7155 x597 uages: First Name Keturah Nikeya	Cultural Composition Office Hours: website: www.g NPI 1629241138 1669065140 Program Descr CC Populations se Cultural Composition Office Hours: 2 website: www.g NPI 1629241138 1093284275	etency: Adult Transitional Residential Treatment P 24 HOURS Image: Comparison of the Comparison of	License # 81315	Y

Type of Program: MH Address: 1803 W. March Lane Ste. C-D City: Stockton, CA 95207		(IHBS); Crisis Intervention. Full-Service Partnership Program; Evidenced Based Model-ACT (Assertive community Treatment)				
Phone Number: (209) 636-5353		Populations served: Adult - Those diagnosed with a severe mental health diagnosis.				
_		Cultural Compet	rency: Veterans, LGBT, Older Adults, Physical Di ; Cultural Competency Training(s) required of eac	sabilities and M	lental	
<u> </u>						
Non-English Languag	es: Spanish,		onday - Friday 8:30 a.m 5:00 p.m.			
Hmong		website: www.tpc				
Last Name	First Name	NPI	Type of License	License #	CC	
Emunah	Ariella	1205836996	Physician	A97295	Υ	
Pruitt	Kathryn	1629277132	Licensed Marriage and Family Therapist	97463	Υ	
Largaespada	Alexander	1881902161	Licensed Marriage and Family Therapist	93473	Υ	
Bernard	Alexis	1255456943	Associate Marriage and Family Therapist	92866	Υ	
Hieb	Kristina	1407010739	Associate Marriage and Family Therapist	113741	Υ	
Goldfine-Lewis	Roberta	1588211502	Licensed Vocational Nurse	91927	Υ	
Browning	Jessika	1437752052			Υ	
Haskell	Erica	1154936383			Υ	
Nevarez	Maria aka Angelica	1861874216			Υ	
Ramirez	Aly	1316544539			Υ	
Retchfertig	Medora	1861874216	Associate Clinical Social Worker		Υ	
Wright	Kathleen	1679613327			Υ	
Program Name: Lati Health and Recovery Type of Program: MH Address: 445 N. San City: Stockton, CA 95	y Services #9067 Joaquin Street	Program Descrip Intervention	otion: Case Management/ Brokerage; Mental He	ealth Services;(Orisis	
Phone Number: (209)	444-8910	Populations ser	ved: Adult			
<u>م لج</u> (Cultural Compet	ency: Provides Culturally Competent Services to	Latinos		
Non-English Languag	es: Spanish	Office Hours: Mo	onday - Friday 8:00 am - 5:00 pm			
		www.elconcilio.or	g			
Last Name	First Name	NPI	Type of License	License #	CC	
Wielenga	Wilton	1528126703	Licensed Clinical Social Worker	LCSW 5681	Υ	
Program Name: Martin Gipson Socialization Center #9041 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204		Intervention	otion: Case Management/ Brokerage; Mental He	ealth Services;(Crisis	
Phone Number: (209)	464-5519	Populations serv	ved: Adult			

் க் Non-English Langua	ages: Spanish	for Adult M	ompetency: Provides socialization, vocatio lentally ill beneficiaries. urs: Monday - Friday 8:00 am - 5:00 pm one	nal, and educational opportu	unities
Last Name	First Name	NPI	Type of License	License #	CC
NON LICENSED ST	TAFF ONLY				

Program Name: Mo					
Program Name: Mo	4 1 1/ 1/ 6/1/	D D •	# 0 M #5 ! ! !	1.1.	
and Family Camina			otion: Case Management/ Brokerage including		dooo
and Family Services, Inc. #39A4		,	C); Mental Health Services including Intensive Hotic Behavioral Services (TBS) Medication Suppo		
Type of Program: MH		(II Ibo), Therapeu	ilic Beriavioral Services (163) Medication Suppo	it, Clisis lillerv	CHUOH
•					
Address: 7818 Bar Du Lane					
City: Sacramento, CA 95829		Danielatiana aan	and Oblidge and Westle		
Phone Number: (530	1) 265-9057	•	ved: Children and Youth		
Alon Fralish Langua	2001		ency: Provides outpatient mental health services	5	
Non-English Langua	ges.		onday - Friday 8 am- 4:30 pm untainvalleyfamily.org		
	1	website. www.iiio	I	1	
Last Name	First Name				
Last Ivallie	FIIST Name	NPI	Type of License	License #	СС
OUT OF COUNTY P	PROVIDER	1	Type of Election		
001 01 0001111	TO VIDEN				
Program Name: Mo	untain Valley Child	Program Descrip	otion: Case Management/ Brokerage including	Intensive Care	
and Family Services			c); Mental Health Services including Intensive He		
•		· ·	tic Behavioral Services (TBS); Medication Supp		
Type of Program: Mh	1				
Address : 6171 Brad					
Muuless. Uli I Didu	shaw Rd				
City: Sacramento, CA	A 95829	Populations serv	ved: Children and Youth		
City: Sacramento, CAPhone Number: (530	A 95829		ved: Children and Youth ency: Provides outpatient mental health services	5	
City: Sacramento, CA Phone Number: (530	A 95829 () 265-9057	Cultural Compet	ency: Provides outpatient mental health services	S	
City: Sacramento, CAPhone Number: (530	A 95829 () 265-9057	Cultural Compet Office Hours: Mo		5	
City: Sacramento, CA Phone Number: (530	A 95829 () 265-9057	Cultural Compet Office Hours: Mo	ency: Provides outpatient mental health services onday - Friday 8 am- 4:30 pm	License #	cc
City: Sacramento, CAPhone Number: (530 \(\frac{\mathcal{L}}{\mathcal{L}} \) Non-English Langua	A 95829 1) 265-9057 ges: First Name	Cultural Compet Office Hours: Mo website: www.mo	ency: Provides outpatient mental health services onday - Friday 8 am- 4:30 pm untainvalleyfamily.org		
City: Sacramento, CAPhone Number: (530 A Sacramento) Non-English Language Last Name	A 95829 b) 265-9057 ges: First Name PROVIDER	Cultural Compet Office Hours: Mo website: www.mo	ency: Provides outpatient mental health services onday - Friday 8 am- 4:30 pm untainvalleyfamily.org		
City: Sacramento, CAPhone Number: (530 Contact Name Country For Program Name: Mo	A 95829) 265-9057 ges: First Name PROVIDER untain Valley Child	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip	ency: Provides outpatient mental health services anday - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including	License #	CC
City: Sacramento, CAPhone Number: (530 A Sacramento) Non-English Language Last Name	A 95829) 265-9057 ges: First Name PROVIDER untain Valley Child	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip Coordination (ICC	ency: Provides outpatient mental health services and ay - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Including Intensive Health Services Including Intensive	License # Intensive Care ome Based Serv	CC
City: Sacramento, CAPhone Number: (530 Non-English Language Last Name OUT OF COUNTY F Program Name: Mo and Family Services	A 95829) 265-9057 ges: First Name PROVIDER untain Valley Child s, Inc. #39A2	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip Coordination (ICC	ency: Provides outpatient mental health services anday - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including	License # Intensive Care ome Based Serv	CC
City: Sacramento, CAPhone Number: (530 Non-English Language Last Name OUT OF COUNTY F Program Name: Mo and Family Services Type of Program: MH	A 95829 Pages: First Name PROVIDER untain Valley Child s, Inc. #39A2	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip Coordination (ICC	ency: Provides outpatient mental health services and ay - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Including Intensive Health Services Including Intensive	License # Intensive Care ome Based Serv	CC
City: Sacramento, CAPhone Number: (530 Non-English Language Last Name OUT OF COUNTY P Program Name: Mo and Family Services Type of Program: MH Address: 9200 Sweet	A 95829 b) 265-9057 ges: First Name PROVIDER untain Valley Child s, Inc. #39A2	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip Coordination (ICC	ency: Provides outpatient mental health services and ay - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Including Intensive Health Services Including Intensive	License # Intensive Care ome Based Serv	CC
City: Sacramento, CAPhone Number: (530 Non-English Language Last Name OUT OF COUNTY F Program Name: Mo and Family Services Type of Program: MH	A 95829 Pages: First Name PROVIDER untain Valley Child s, Inc. #39A2 Het Acacia Way A 95829	Cultural Compet Office Hours: Mo website: www.mo NPI Program Descrip Coordination (ICC (IHBS); Therapeu	ency: Provides outpatient mental health services and ay - Friday 8 am- 4:30 pm untainvalleyfamily.org Type of License ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Including Intensive Health Services Including Intensive	License # Intensive Care ome Based Serv	CC

		Cultural Compe	etency: Provides outpatient mental health service	s and full-day Da	av	
△ Ġ.		Treatment.	one of the state o	o arra ran day D	u y	
Non-English Lang	uages:					
on English Early agos.		Office Hours: Monday - Friday 8 am- 4:30 pm website: www.mountainvalleyfamily.org				
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUNT			Type of License		-	
001 01 000111	T T KOVIDEK					
Program Name: I	Parents By Choice	Program Descr	iption: Case Management/Brokerage including Ir	tensive Care		
#39BL		_	CC); Mental Health Services including Intensive Ho		ices;	
Type of Program: MH		Crisis Intervention	on			
Address:306 E Ma	ain St. Suite 300					
City: Stockton, CA	95202					
Phone Number:(2	09) 478-4554 ext. 1040	Populations se	rved: Children, Adolescents, and Families			
		Cultural Compe	etency: Therapeutic Foster Care/Mental Health So	ervices; Positive	:	
_		Parenting Class	es; Foster Care/Adoptions; Transitional Housing F	Program; Superv	/ised	
△ &		Visitation Progra	ım.			
Non-English Lang	uages: Spanish	Office Hours:	Monday - Friday 10:00 am - 6:00 pm			
		website: www.pa	arentsbychoice.net			
Last Name	First Name	NPI	Type of License	License #	CC	
Ramos	Mayra	1336552553	Licensed Marriage and Family Therapist	113207	Υ	
Oliviana	Carlos	1992101612	Licensed Marriage and Family Therapist	116198	Υ	
Uliviera			Electised Warriage and Farmly Therapise	110130		
	Amanda	1700418084	Associate Clinical Social Worker	94023	Y	
Oliviera Crusos	Amanda	1700418084	Associate Clinical Social Worker	94023	Υ	
Crusos Program Name P	Amanda synergy Folsom	1700418084 Program Descr	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental	94023	Υ	
Crusos Program Name P	Amanda synergy Folsom	1700418084	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental	94023	Υ	
Program Name P Sacramento #390 Type of Program:	Amanda Synergy Folsom CQ MH	1700418084 Program Descr	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental	94023	Y	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho	Amanda Synergy Folsom CQ MH orn Road Suite B	1700418084 Program Descr	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental	94023	Υ	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento,	Amanda Synergy Folsom CQ MH Irn Road Suite B CA 95827-1955	Program Descr Crisis Intervention	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on	94023	Υ	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9	Amanda Synergy Folsom CQ MH Irn Road Suite B CA 95827-1955	Program Descr Crisis Intervention	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult	94023 Health Services	Y	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH orn Road Suite B CA 95827-1955 916) 364-5533	Program Descr Crisis Intervention Populations se Cultural Compe	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service	94023 Health Services	Υ	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH orn Road Suite B CA 95827-1955 916) 364-5533	Program Descr Crisis Intervention Populations se Cultural Compe	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm	94023 Health Services	Υ	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH orn Road Suite B CA 95827-1955 916) 364-5533	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: No	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service flonday Friday 7:30 am-6:00 pm synergy.org	94023 Health Services	,;	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH orn Road Suite B CA 95827-1955 916) 364-5533	Program Descr Crisis Intervention Populations se Cultural Compe	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm	94023 Health Services	Y	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 Characteristics)	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: No	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service flonday Friday 7:30 am-6:00 pm synergy.org	94023 Health Services	Y	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: No	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service. Monday Friday 7:30 am-6:00 pm synergy.org Type of License	94023 Health Services S License #	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ	Amanda Psynergy Folsom CQ MH Im Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name Y PROVIDER Psynergy - Sacramento	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: N website: www.p	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service flonday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental	94023 Health Services S License #	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program:	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name Y PROVIDER Psynergy - Sacramento	Program Descr Crisis Intervention Populations se Cultural Compete Office Hours: Management Management NPI Program Descr	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service flonday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental	94023 Health Services S License #	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program: Address: 4612 Ro	Amanda Psynergy Folsom CQ MH Im Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name Y PROVIDER Psynergy - Sacramento MH Posevelt Avenue	Program Descr Crisis Intervention Populations se Cultural Compete Office Hours: Management Management NPI Program Descr	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service flonday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental	94023 Health Services S License #	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program: Address: 4612 Ro City: Sacramento,	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name Y PROVIDER Psynergy - Sacramento MH Posevelt Avenue CA	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: N website: www.p NPI Program Descr Crisis Intervention	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental on	94023 Health Services S License #	;	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program: Address: 4612 Ro City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 P16) 364-5533 uages: Spanish First Name Y PROVIDER Psynergy - Sacramento MH Posevelt Avenue CA	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: No website: www.p NPI Program Descr Crisis Intervention Populations se	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental on rved: Adult	94023 Health Services s License # Health Services	;	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (9 A Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program: Address: 4612 Ro City: Sacramento, Phone Number: (9 A City: Sacramento, Phone Number: (9 A	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 Parith (CA) 364-5533 Response Spanish First Name Y PROVIDER Psynergy - Sacramento MH Rosevelt Avenue CA 16) 379-5876	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: Nowebsite: www.p NPI Program Descr Crisis Intervention Populations se Cultural Compe	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service	94023 Health Services s License # Health Services	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (S Check Non-English Lang Last Name OUT OF COUNT	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 Parith (CA) 364-5533 Response Spanish First Name Y PROVIDER Psynergy - Sacramento MH Rosevelt Avenue CA 16) 379-5876	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: M website: www.p NPI Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: M	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm	94023 Health Services s License # Health Services	;; CC	
Program Name P Sacramento #390 Type of Program: Address: 9951 Ho City: Sacramento, Phone Number: (S Non-English Lang Last Name OUT OF COUNT Program Name P #39CJ Type of Program: Address: 4612 Ro City: Sacramento, Phone Number: (9	Amanda Psynergy Folsom CQ MH In Road Suite B CA 95827-1955 Parith (CA) 364-5533 Response Spanish First Name Y PROVIDER Psynergy - Sacramento MH Rosevelt Avenue CA 16) 379-5876	Program Descr Crisis Intervention Populations se Cultural Compe Office Hours: Nowebsite: www.p NPI Program Descr Crisis Intervention Populations se Cultural Compe	Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm synergy.org Type of License iption: Case Management/ Brokerage; Mental on rved: Adult etency: Provides outpatient mental health service Monday Friday 7:30 am-6:00 pm	94023 Health Services s License # Health Services	;; CC	

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OUT OF COUNTY PROVIDER					
Program Name: Psynergy - Sacramento		ption: Case Management/ Brokerage; Mental Hea	alth Services;	Crisis	
- Clinic B #39CH	Intervention				
Type of Program: MH					
Address: 4616 Roosevelt Avenue					
City: Sacramento, CA 95820					
Phone Number: (916) 379-5876	Populations serv	ved: Adult			
□ &		tency: Provides outpatient mental health services			
Non-English Languages: Spanish		Monday Friday 7:30 am-6:00 pm			
Their English Earlyaages. Spariish	website: www.ps				
Last Name First Name	NPI	Type of License	License #	СС	
OUT OF COUNTY PROVIDER					
TO CO COCKET THOUSEN					
Program Name: Sacramento Children's	Program Descrip	I ption: Case Management/ Brokerage including I	Intensive Care		
Home #9076		C); Mental Health Services including Intensive Hol			
Type of Program: MH	•	on Support; Crisis Intervention	ille based oerv	1003	
Address : 2750 Sutterville Road	(II IDO), Wedicati	on Support, Onsis intervention			
City: Sacramento, CA 95820	Denulations com	ued. Children and Vouth			
Phone Number: (916) 452-3981		ved: Children and Youth tency: Provides outpatient mental health services			
Alan Fradish Languages		•			
	Office Hours: Monday - Friday 8:30 am- 5 pm				
Non-English Languages:					
	website: www.kid	shome.org	Liconco #	L CC	
Last Name First Name			License #	СС	
	website: www.kid	shome.org	License #	CC	
Last Name First Name OUT OF COUNTY PROVIDER	website: www.kid	Type of License			
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's	website: www.kid	Type of License ption: Case Management/ Brokerage including I	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient	website: www.kid NPI Program Descrip Coordination (ICC	Type of License ption: Case Management/ Brokerage including Inc. C); Mental Health Services including Intensive Hol	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7	website: www.kid NPI Program Descrip Coordination (ICC	Type of License ption: Case Management/ Brokerage including I	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH	website: www.kid NPI Program Descrip Coordination (ICC	Type of License ption: Case Management/ Brokerage including Inc. C); Mental Health Services including Intensive Hol	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue	website: www.kid NPI Program Descrip Coordination (ICC	Type of License ption: Case Management/ Brokerage including Inc. C); Mental Health Services including Intensive Hol	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724	website: www.kid NPI Program Descrip Coordination (ICC (IHBS); Medication	Type of License ption: Case Management/ Brokerage including IC); Mental Health Services including Intensive Horon Support; Crisis Intervention	ntensive Care		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089	Program Descript Coordination (ICC (IHBS); Medication	Type of License ption: Case Management/ Brokerage including IC); Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth	Intensive Care me Based Serv		
Last Name First Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 □	Populations servicular Compet	Type of License Ption: Case Management/ Brokerage including IC); Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services	Intensive Care me Based Serv		
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: M	Type of License Ption: Case Management/ Brokerage including Including Including Including Including Intensive Holon Support; Crisis Intervention Ptency: Provides outpatient mental health services londay - Friday 8 am- 5 pm	Intensive Care me Based Serv		
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 □ ₺ Non-English Languages:	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Mebsite: www.sar	Type of License Ption: Case Management/ Brokerage including Inc.; Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm angabrielchild.com	Intensive Care me Based Serv	vices	
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 ○	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: M	Type of License Ption: Case Management/ Brokerage including Including Including Including Including Intensive Holon Support; Crisis Intervention Ptency: Provides outpatient mental health services londay - Friday 8 am- 5 pm	Intensive Care me Based Serv		
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 □ ₺ Non-English Languages:	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Mebsite: www.sar	Type of License Ption: Case Management/ Brokerage including Inc.; Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm angabrielchild.com	Intensive Care me Based Serv	vices	
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 □	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Myebsite: www.sar	Type of License ption: Case Management/ Brokerage including Including Including Including Intensive Holon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm ngabrielchild.com Type of License	Intensive Care me Based Serv	vices	
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 ○	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Medication NPI Program Descript Program Descript Program Descript NPI	Type of License ption: Case Management/ Brokerage including Inc.; Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm angabrielchild.com Type of License ption: Case Management Brokerage/Intensive Case Management Brokerage/I	Intensive Care me Based Serv License # Care Coordinati	vices	
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 ○	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Myebsite: www.sarvice NPI Program Descript (ICC); Mental Herical Populations Populations Service NPI	Type of License ption: Case Management/ Brokerage including Inc. C); Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm ngabrielchild.com Type of License ption: Case Management Brokerage/Intensive Cealth Services including Intensive Home Based Services	License #	vices	
Last Name OUT OF COUNTY PROVIDER Program Name: San Gabriel Children's Center Out Patient #39B7 Type of Program: MH Address: 4740 N. Grand Avenue City: Covina, CA 91724 Phone Number: (626) 859-2089 ○	Program Descript Coordination (ICC (IHBS); Medication Populations service Cultural Competed Office Hours: Myebsite: www.sarvice NPI Program Descript (ICC); Mental Herical Populations Populations Service NPI	Type of License ption: Case Management/ Brokerage including Inc.; Mental Health Services including Intensive Horon Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm angabrielchild.com Type of License ption: Case Management Brokerage/Intensive Case Management Brokerage/I	License #	vices	

0:4 4 04 04	1700	1				
City: Azusa, CA 9 ²	1702					
Phone Number: (6	326) 859-2089	Populations ser	ved: Children and Youth			
Phone Number: (626) 859-2089 △ 人		Populations served: Children and Youth Cultural Competency: Provides outpatient mental health services				
Non-English Languages:		Office Hours: Monday - Friday 8 am- 5 pm				
Tion English Lang			ngabrielchild.com			
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUNT		1	Type of Election			
001 01 000141	TTROVIDER					
Program Name: S	SGCC-Homerest Home	Program Descri	ption: Case Management Brokerage/Intensive	Care Coordinat	ion	
#39CL			ealth Services including Intensive Home Based S			
Type of Program:	MH	_ ` · · · ·	avioral Services (TBS); Medication Support; Crisi	•		
•		'	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Homerest Avenue					
City: Azusa, CA 9		Danulations cor	read. Children and Varith			
Phone Number: (6	020) 009-2009		ved: Children and Youth			
Alon English Langu	110000:		tency: Provides outpatient mental health services	5		
Non-English Lang	uayes.		Monday - Friday 8 am- 5 pm Ingabrielchild.com			
Last Nieus e	First Name	NPI		License #	СС	
Last Name	First Name	INFI	Type of License	License #	CC	
OUT OF COUNTY	Y PROVIDER	T.		1	Г	
III FSP #39CO Type of Program:	orgetown Place, Suite D	Coordination (IC	ption: Case Management/ Brokerage including lactorists. C); Mental Health Services including Intensive Health Support; Crisis Intervention		vices	
Phone Number: (2		Populations ser	ved: Adult			
△ Ġ.	,	Cultural Competency: Full Services Partnership (FSP) model where staff create a supportive environment with services that are based on needs, hopes, and dreams of adults with serious mental illness for those discharged from acute care facilities.				
Non-English Lang Cambodian	uages: Spanish,	Office Hours: Monday - Friday 8:30 am- 5 pm				
		website: www.tel	•			
Last Name	First Name	NPI	Type of License	License #	СС	
Lorenz	Arthur	1477603249	Licensed Marriage and Family Therapist	45350	Υ	
Bird	Alena	1386243590	Licensed Psychiatric Technician	41723	Υ	
Winslow	Jason	1336415025	Associate Clinical Social Worker	99684	Υ	
Enemmuo	Ifeatu	1952969008	Nurse Practitioner	95011649	Υ	
Program Name: S Community Foun Type of Program:	ndation #39CK	Program Descri Crisis Interventio	ption: Case Management/ Brokerage, Mental Hon	ealth Services, a	and	

IA 1.1 40 M. 40 M.	01 1						
Address: 42 West 8th							
City: Tracy, CA 95376 Phone Number: (209) 229-4559		Populations served: Children and Adolescent					
Phone Number: (209) 229-4559		•					
Non-English Languages: Spanish		Cultural Competency: Provides outpatient and school-based mental health services Office Hours: Manday Friday 9 am 5 pm					
Non-English Languages. Spanish		Office Hours: Monday - Friday 9 am- 5 pm website: www.sowaseedcf.org					
Last Name	First Name	NPI	Type of License	License #	CC		
Last Name	FIISt Name		Type of License	License #			
Warmsley	Kimberly	1083890529	Licensed Clinical Social Worker	86639	Υ		
vvarinsicy	Killiberry	1003030323	Licensed elimear social Worker	80033	'		
Program Name: Summitview Child		Program Descri	ption: Case Management/ Brokerage including	Intensive Care			
Treatment Center #		_	C); Mental Health Services including Intensive Ho		ces		
Type of Program: MH		· ·	on Support; Crisis Intervention	mo Badda Gorvi	000		
Address: 670 Placery		(1102), 110010011	on capport, one man vention				
City: Placerville, CA							
Phone Number: (530		Populations ser	ved: Children and Youth				
(300	,						
<u>△</u> <u>&</u>		Cultural Compe	tency: Provides outpatient mental health services	3			
Non-English Langua	nes.	<u> </u>	londay - Friday 8 am- 5 pm	<u>, </u>			
Tron English Earlyact	,00 .		mmitviewtreatment.org				
Last Name	First Name	NPI	Type of License	License #	CC		
OUT OF COUNTY P			, , ,				
			1				
Program Name: Tel	l ecare (aka Jeremy	Program Descri	ption: Crisis Residential Treatment Program				
House) #39AX	court (and octomy	li rogram beson	prom. Onoio recoldential frodutione registin				
Type of Program: MH	ł						
Address: 5634 Jerem							
City: Stockton, CA 9							
Phone Number: (209		Populations ser	ved: Adult				
<u>ا</u> هـ ا	, 555 1555		tency: Crisis Residential Treatment Program				
Non-English Langua	nes:	Office Hours: 24					
	,	website: www.tel					
Last Name	First Name	NPI	Type of License	License #	СС		
Reiland	Jessica	1003154634	Associate Clinical Social Worker	70377	Υ		
Huynh	Thuy	1033485495	Licensed Psychiatric Technician	36454	Υ		
Taylor	Shannan	1528074770	Licensed Marriage and Family Therapist	46081	Υ		
•			, ,				
Program Name: Tel	ecare Early	Program Descri	ption: Case Management/ Brokerage including I	ntensive Care			
Intervention Recove	ery Services (TEIRS)	Coordination (ICC	C); Mental Health Services including Intensive Ho	ome Based Serv	ices		
#39B2		(IHBS); Medicati	•				
Type of Program: MH							
Address: 4545 Georg							
City: Stockton, CA 9							
Phone Number: (209		Populations ser	ved: Adults				

ი ჭ		•	etency: Provides outpatient mental health services	s for children and				
Non-English Languages: Spanish		adults						
			londay - Friday 8 am- 5 pm					
		website: www.te	website: www.telecarecorp.com					
Last Name	First Name	NPI	Type of License	License #	CC			
Planas	Melissa	1679807994	Licensed Clinical Social Worker	66499	Υ			
Hoffman	Holli	1144380940	Nurse Practitioner	14724	Υ			
Bass	Oshalique	1477811677	Associate Professional Clinical Counselor	5490	Υ			
Tran	Tran	1477084671	Licensed Vocational Nurse	275938	Υ			
Miles	Jennifer	1275541641	Physician	G83528	Υ			
Taylor	Shannan	1528074770	Licensed Marriage and Family Therapist	6081	Υ			
Connect I #39E Type of Program:	MH eorgetown Place, Suite D	Coordination (IC (IHBS); Medical	iption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention		ces			
∆ ട്ട്. Non-English Lang Cambodian	guages: Spanish,	supportive environments adults with serio	etency: Full Services Partnership (FSP) model whonment with services that are based on needs, hous mental illness. Monday - Friday 8:30 am- 5 pm					
Last Name	First Name	NPI	Type of License	License #	CC			
Lorenz	Arthur	1477603249	Licensed Marriage and Family Therapist	45350	Y			
Bird	Alena	1386243590	Licensed Psychiatric Technician	41723	Y			
	Ifeatu	1952969008	Nurse Practitioner	95011649	<u>т</u> Ү			
Enemmuo	lieatu	1952969008	Nurse Practitioner	95011649	ľ			
Connect II #39	MH	Coordination (IC (IHBS); Medical	iption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention		ces			
Address: 4545 Ge	_							
Type of Program: Address: 4545 Ge City: Stockton, CA Phone Number: (A 95207	Populations se	rved: Adult					

Cambodian Last Name First Name		website: www.te	elecarecorp.com		
Last Name	First Name	NPI	Type of License	License #	CC
Lorenz	Arthur	1477603249	Licensed Marriage and Family Therapist	45350	Υ
Bird	Alena	1386243590	Licensed Psychiatric Technician	41723	Υ
Enemmuo	Ifeatu	1952969008	Nurse Practitioner	95011649	Υ
Services #39A9 Type of Program:	: MH ravenstein Hwy N. Bldg	Coordination (IC (IHBS); Medica	ription: Case Management/ Brokerage including CC); Mental Health Services including Intensive Hotion Support; Crisis Intervention		vices
Phone Number: (707) 823-7300	Populations se	rved: Children and Youth		
் <u>டூ</u> Non-English Lang	,	Cultural Compe services	etency: Community-based program providing outp Monday - Friday 8:00 am - 4:30 pm	patient mental he	ealth
Last Name	First Name	NPI	Type of License	License #	СС
Last Name	II II 3t IVallic	1	11 ypc of Election		
OUT OF COUNT	TV PROVIDER	•		•	
_	Valley Community	_	ription: Case Management/ Brokerage including In		vices
Program Name: Counseling Serv #9040 Type of Program:	Valley Community vices (VCCS) (Manteca	Coordination (IC (IHBS); Medica	cC); Mental Health Services including Intensive Hotion Support; Crisis Intervention rved: Children and Youth	ome Based Serv	
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co	Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553	Populations se Cultural Competential Compete	rved: Children and Youth etency: Comprehensive mental health services for gin South/Central County area. Services include anagement, psychiatric assessment, and medicati	r children, youth	, and
Program Name: Counseling Serv #9040 Type of Program: Address:129 E. C Phone Number: (Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553	Populations se Cultural Competheir families livitherapy, case m Office Hours: N	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medication of the services and the services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medication of the services include anagement.	r children, youth	, and
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553	Populations se Cultural Competential families livitherapy, case m Office Hours: N website: https://w	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medication Monday-Friday 8:00 am- 5:00 pm	r children, youth individual and gion support.	, and group
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Non-English Lang Last Name	Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553 guages: First Name	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https://v	rved: Children and Youth etency: Comprehensive mental health services for gin South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License	r children, youth individual and gion support.	, and group
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (County Coun	Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https:// NPI 1811051337	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician	r children, youth individual and gion support. License #	, and group
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Non-English Lang Last Name Kamran Coleman	Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https://v NPI 1811051337 1770093494	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist	r children, youth individual and gion support. License # C53847 102456	, and group CC Y
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Colored Name Kamran Coleman Davis	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani Valerie	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https:// NPI 1811051337 1770093494 1619362407	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Associate Clinical Social Worker	r children, youth individual and gion support. License # C53847 102456 92232	, and group CC Y Y
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Coleman Coleman Davis Jackson	Valley Community vices (VCCS) (Manteca : MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani Valerie Melissa	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https://v NPI 1811051337 1770093494 1619362407 1356968739	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Associate Clinical Social Worker Associate Marriage and Family Therapist	r children, youth individual and gion support. License # C53847 102456 92232 120670	, and group CC Y Y Y
Program Name: Counseling Serve #9040 Type of Program: Address:129 E. Co Phone Number: (Colored Last Name Kamran Coleman Davis Jackson Jimenez	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani Valerie Melissa Naomi	Populations se Cultural Competential families livitherapy, case m Office Hours: N website: https:// NPI 1811051337 1770093494 1619362407 1356968739 1669927828	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist	come Based Server children, youth individual and gion support. License # C53847 102456 92232 120670 89400	, and group CC Y Y Y Y
Program Name: Counseling Server #9040 Type of Program: Address: 129 E. Counseling Server Program: Address: 129	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 Guages: First Name Muhammad Stefani Valerie Melissa Naomi Megan	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https://v NPI 1811051337 1770093494 1619362407 1356968739 1669927828 1669833885	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicati Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Licensed Marriage and Family Therapist	cr children, youth individual and coion support. License # C53847 102456 92232 120670 89400 112156	, and group CC Y Y Y Y Y
Program Name: Counseling Server #9040 Type of Program: Address:129 E. Counseling Server Program: Address:129 E. Co	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani Valerie Melissa Naomi Megan Michelle	Populations se Cultural Competential their families livitherapy, case m Office Hours: N website: https:// NPI 1811051337 1770093494 1619362407 1356968739 1669927828 1669833885 1316572423	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicate Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Professional Clinical Counselor	r children, youth individual and gion support. License # C53847 102456 92232 120670 89400 112156 7382	, and group CC Y Y Y Y Y Y Y
Program Name: Counseling Server #9040 Type of Program: Address: 129 E. Counseling Server Program: Address: 129 E. Counseling Server Ser	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 Guages: First Name Muhammad Stefani Valerie Melissa Naomi Megan Michelle Elaine	Populations se Cultural Competheir families livitherapy, case m Office Hours: N website: https://v NPI 1811051337 1770093494 1619362407 1356968739 1669927828 1669833885 1316572423 1508875055	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicate Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Professional Clinical Counselor Licensed Marriage and Family Therapist	cr children, youth individual and gion support. License # C53847 102456 92232 120670 89400 112156 7382 45258	, and group CC Y Y Y Y Y Y Y
Program Name: Counseling Server #9040 Type of Program: Address:129 E. Counseling Server Program: Address:129 E. Co	Valley Community vices (VCCS) (Manteca MH Center Street, Suite 3 209) 239-5553 guages: First Name Muhammad Stefani Valerie Melissa Naomi Megan Michelle	Populations se Cultural Competential their families livitherapy, case m Office Hours: N website: https:// NPI 1811051337 1770093494 1619362407 1356968739 1669927828 1669833885 1316572423	rved: Children and Youth etency: Comprehensive mental health services for ng in South/Central County area. Services include anagement, psychiatric assessment, and medicate Monday-Friday 8:00 am- 5:00 pm www.valleycommunitycounselingservices.org Type of License Physician Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Professional Clinical Counselor	r children, youth individual and gion support. License # C53847 102456 92232 120670 89400 112156 7382	, and group CC Y Y Y Y Y Y Y

Viles-Reed	Teresa	1386762623	Psychologist	14848	Υ
Counseling Ser Based Program	Valley Community vices (VCCS) (School - Stockton) #9042	/rehab/Case Mar	iption: Individual/family/group/plan development nagement/ Brokerage including Intensive Care Co ervices including Intensive Home Based Services Intervention	ordination (ICC);
Type of Program	: MH				
A	mbarcadero Drive, Suite				
City: Stockton, C		Danulations ass	made Children and Vaush		
Phone Number: ((209) 956-4240		rved: Children and Youth	d at various sab	oolo in
^ L		Stockton, Mante	etency: Outpatient mental health services provide	u at various scri	ioois iii
Alon English Lon	QU0000	Office Hours:			
Non-English Lan	guages:		Monday - Friday 8:00 am - 5:00 pm www.valleycommunitycounselingservices.org		
Loot Nove	First Name	NPI	Type of License	License #	CC
Last Name				14848	
Viles-Reed	Teresa	1386762623	Psychologist Associate Clinical Social Worker		Y
Davis	Valerie	1619362407		92232	Y
Groen	Carissa	1891343422	Associate Marriage and Family Therapist	11470	Y
Jimenez	Naomi	1669927828	Associate Marriage and Family Therapist	89400	Υ
Nuno	Laura	1265080675	Associate Clinical Social Worker	91361	Υ
Pena	Adriana	1295253797	Associate Marriage and Family Therapist	97389	Y
Pettit	Megan	1669833885	Licensed Marriage and Family Therapist	112156	Y
Pike	Elaine	1508875055	Licensed Marriage and Family Therapist	5258	Υ
Shaw	Hannah	1659967396	Associate Marriage and Family Therapist	98087	Y
Somera	Mercy	1780246975	Associate Marriage and Family Therapist	11734	Y
	t 6th Street	Coordination (IC	iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho ion Support; Crisis Intervention		vices
Phone Number: ((209) 835-8583	Populations ser	rved: Children and Youth		
۵ ٤		Cultural Compe youth in South C	etency: Full range specialty mental health services county area.	s for children an	ıd
Non-English Lan	guages:	Office Hours: M	londay - Friday 8:00 am - 5:00 pm		
			www.valleycommunitycounselingservices.org		
	P' and Allance	NPI	Type of License	License #	CC
Last Name	First Name				
Last Name Kamran	Muhammad	1811051337	Physician	C53847	Υ
		1811051337 1407299738	Physician Licensed Marriage and Family Therapist	C53847 127214	Y

Program Name: Vi	_		iption: Case Management/ Brokerage including I		
Viles-Reed	Teresa	1386762623	Psychologist	14848	Υ
Pettit	Megan	1669833885	Licensed Marriage and Family Therapist	112156	Υ
Roy	Rehma	1073061784	Associate Clinical Social Worker	103567	Υ

Services and Support, Stockton,

(VCSS) #9063

Type of Program: MH

Address: 2495 W. March Lane, Suite

125

City: Stockton, CA 95207 Phone Number: (209) 465-1080

<u> 6</u>

Non-English Languages:

Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Populations served: Children and Youth

Cultural Competency: Provides outpatient mental health services in-home and in

community

Office Hours: Monday - Friday 8:00 am - 5:00 pm

		website: www.vi	ctor.org		
Last Name	First Name	NPI	Type of License	License #	СС
Anderson	Shanae	1093281941	Associate Professional Clinical Counselor	7588	Υ
Andrade	Louisa	1679941306	Associate Marriage and Family Therapist	102059	Υ
Chee	Christopher	1447480173	Physician	20A12207	Υ
Cupit	Christy	1386286383	Licensed Marriage and Family Therapist	120662	Υ
Dadkhah	Betia	1083709380	Licensed Marriage and Family Therapist	44160	Υ
Dixon	Nikita	1477725984	Physician	A116123	Υ
Fitzgerald	Sharee	1982145504	Associate Marriage and Family Therapist	102079	Υ
Lopez	Christina	1265705727	Associate Marriage and Family Therapist	102443	Υ
Lozano	Sheree	1538523501	Associate Marriage and Family Therapist	88637	Υ
Marshall	Koryn	1962881870	Licensed Marriage and Family Therapist	86263	Υ
Rincon	Jessica	1912266909	Associate Marriage and Family Therapist	112725	Υ
Rodriguez	Maria	1003123241	Associate Professional Clinical Counselor	5313	Υ
True	Wendy	1750476438	Licensed Marriage and Family Therapist	44262	Υ
Villeda	Maria	1487263323	Associate Clinical Social Worker	97943	Υ
Carrasco	Rocio	1841720349	Licensed Clinical Social Worker	78314	Υ
Bergh	Brianne	1194374124	Associate Clinical Social Worker	92554	Υ
Zuckerman	Michelle	1891948691	Licensed Marriage and Family Therapist	84298	Υ
Gaines	Ronnica	1558030502	Associate Marriage and Family Therapist	119924	F
_	Victor Community es - Manteca #39CG	Coordination (IC	ription: Case Management/ Brokerage including CC); Mental Health Services including Intensive Hotion Support; Crisis Intervention		ices

(IHBS); Medication Support; Crisis intervention

Type of Program: MH

Address:302 Cherry Lane, Suite 101 & 201

City: Manteca, CA 95337

Non-English Languages:

Phone Number: (209) 647-6200



Populations served: Children and Youth
Cultural Competency: Provides outpatier

Cultural Competency: Provides outpatient mental health services in-home and in

community.

Office Hours: Monday - Friday 8:00 am - 5:00 pm

website: www.victor.org

		Website. WWW.VI	website. www.victor.org			
Last Name	First Name	NPI	Type of License	License #	CC	
Boss Kinser	Jennifer	1700215308	Associate Marriage and Family Therapist	120812		
Boyle-Day	Coral	1083140610	Associate Marriage and Family Therapist	121006		
Chavez	Esmeralda	1942728514	Associate Marriage and Family Therapist	141941		
Cuevas	Andrew	1629578190	Associate Clinical Social Worker	92656	Υ	
Diaz	Claudia	1275810442	Licensed Marriage and Family Therapist	99791		
Kooger	Giana	1720318132	Licensed Marriage and Family Therapist	86206		
Marshall	Koryn	1962881870	Licensed Marriage and Family Therapist	86263	Υ	
Ramos	Alisia	1508418666	Associate Clinical Social Worker	90719	Υ	
Seefeldt	Jacquelyn	1124250204	Licensed Marriage and Family Therapist	115647		
Simpson	Michelle	1780214478	Associate Clinical Social Worker	92259		
Rivas-Olivarez	Yulisa	1801445085	Associate Clinical Social Worker	96813	Υ	
Reinhardt	Janae	1689296311	Associate Clinical Social Worker	98064	Υ	
Fuentes	Gustavo	1447036218	Associate Professional Clinical Counselor	8321	Υ	

Program Name: Victor Treatment Center - Santa Rosa #9063 Type of Program: MH Address:6495 Condo Court City: Santa Rosa, CA 95403 Phone Number: (707) 523-2334		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention Populations served: Children and Youth				
,	(07) 523-2334	-		000		
് ക് Non-English Languages:		Cultural Competency: Outpatient Mental Health Services				
Tron English Early	dages.	Office Hours: Monday - Friday 8:10 am - 4:00 pm website: www.victor.org				
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUNT	Y PROVIDER					
Contract Psychia						
Contract Psychia BHC Heritage Oa Type of Program:	atric Hospitals ks Hospital MH	Program	Description: Children's & Adult General & S	Specialized Mental Health		
Contract Psychia BHC Heritage Oa Type of Program: Address: 4250 Aul	atric Hospitals Iks Hospital MH burn Boulevard	Program	Description: Children's & Adult General & S	Specialized Mental Health		
Contract Psychia BHC Heritage Oa Type of Program: Address: 4250 Au City: Sacramento,	atric Hospitals Iks Hospital MH burn Boulevard CA 95841			Specialized Mental Health		
Contract Psychia BHC Heritage Oa Type of Program: Address: 4250 Aul	atric Hospitals Iks Hospital MH burn Boulevard CA 95841	Populatio	Description: Children's & Adult General & S ons served: All Ages Competency: Interpreter Services available for		sh	

		website: ww	w.heritageoakshospital.com		
Last Name	First Name	NPI	Type of License	License #	СС
Out of County Hos	pital		•		
Program Name: BHO Hospital Type of Program: MH		_	escription: Children's & Adult General & patient Hospital.	Specialized Mental Health	
Address: 8001 Bruce City: Sacramento, CA					
Phone Number: (916) 423-2000		Population	s served: All Ages		
<u>^</u>			mpetency: Interpreter Services available	for language other than English	h
Non-English Languag	jes:		rs: 24 HOURS		
		website: ww	w.sierravistahospital.com		
Last Name	First Name	NPI	Type of License	License #	cc
Out of County Hos	nital	INFI	Type of License	License #	CC
Out of County Hos	pitai T				
St. Helena Hospital Behavioral Health Type of Program: MH Address: 525 Oregon City: Vallejo, CA 9459	Street	i rogram b	escription: Inpatient Hospital		
Phone Number: (707)		Population	s served: All Ages		
		Cultural Co			
Non-English Languag	jes:		rs: 24 HOURS		
		website: ww	w.adventisthealth.org		
Last Name	First Name	NPI	Type of License	License #	cc
Out of County Hos	pital				
Program Name: Joh Health Center Type of Program: MH Address: 2740 Grant City: Concord, CA 94	Street 520		escription: Inpatient Hospital		
Phone Number: (925)	680-6500		s served: All Ages		
Non English Language	1001		mpetency:		
Non-English Languag	jes:		rs: 24 HOURS		
	_	website. ww	w.johnmuirhealth.com		

	_		_	<u> </u>			
Last Name	First Name	NPI	Type of License	License #	СС		
Out of County Ho	spital						
Program Name: Su Psychiatry Type of Program: M Address: 7700 Fols	Н	Program Descr Services. Inpation	ription: Children's & Adult General & Special ent Hospital.	lized Mental Health			
City: Sacramento, C							
Phone Number: (91	0) 388-3045	Populations se					
\alpha \bar{\bar{\bar{\bar{\bar{\bar{\bar{			etency: Interpreter Services available for lang	guage other than Eng	giisn		
Non-English Langua	ages:	Office Hours: 2					
		website: www.si	uttermedicalcenter.org				
Last Name	First Name	NPI	Type of License	License #	СС		
Out of County Ho	spital						
Address: 39001 Sur City: Fremont, CA S Phone Number: (51 C & Non-English Langua	94538 0)796-1100	Populations se Cultural Compo Office Hours:	etency:				
Last Name	First Name	NPI	Type of License	License #	СС		
Aneja	Alka	1619031317	Physician	A112029	Y		
Athwal	Harmohinder	1740298256	Physician	A81841	Y		
Boora	Kamaljeet	1356587711	Physician	102846	N		
Duvvuri	Vikas	1255470480	Physician	A99706	Y		
Fooks	Trevor	1730267535	Physician	G63964	Y		
Kahlon	Ravinder	1386741320	Physician	A50823	N		
Kahlon	Vasdeep	1497852446	Physician	A51243	N		
Kudaravalli	Padmavathi	1144221953	Physician	A67964	Υ		
Kumar	Pradeep	1023188935	Physician	A52032	N		
Kumar	Deepak	1306257910	Physician	A130068	Υ		
Manjunath	Sudha	1801826797	Physician	A87131	Υ		
Munir	Syed	1790718815	Physician	C55029	Υ		
Nayak	Nanda	1477656262	Physician	A43182	N		
Patel	Falguni	1548414337	Physician	A105594	Υ		
Punia	Surender	1376589663	Physician	A77004	Υ		
- II	ь.	1510120211	Dhysisian	A103547	Υ		
Reddy	Divya	1518120211	Physician	A103547	<u> </u>		

Singh	Sunpreet	1326464462	Physician	A132932	Υ
Waraich	Bhupinder	1689869547	Physician	A53968	Υ
Kaur Waraich	Jaap	1316132285	Physician	G67904	Υ
Phillips	Nicholas	1255727293	Physician	A153125	N
Harleen	Dyal	1225424327	Physician	A153255	N

	Chamical Danardan			t Tractmant Dar	rin o to l				
Counseling Cen	Chemical Dependent		Program Description: Education & Early Intervention Outpatient Treatment Perinatal						
_	•	Component inte	Component Intensive Outpatient Youth Services						
Type of Program									
	Aurora St. Suite 1								
City: Stockton, C	A 95202								
Phone Number:	(209) 468-3720	Populations se	rved: Adult and Youth, Adult Perinatal						
		Cultural Compe	etency: Transitional Age Youth, Adolescents, Vete	eran, Lesbian,					
<u>^</u>		Bisexual, Transo	gender						
_ 0.		Office Hours:	Monday, Wednesday and Friday 8:00 am - 5:00 pr	n: Tuesday and					
Non-English Lan	guages: Spanish	Thursday 8:00 a	· · · · · · · · · · · · · · · · · · ·	ii, raccaaj ana					
J		website: http://w	ww.sjcbhs.org/mhs						
Last Name	First Name	NPI	Type of License	License #	CC				
Lozano	Nia	1851590996	Physician	A89255					
Bagdonas	Michelle	1164765137	SAC II	179976	Υ				
Beas	Sandra	1821435447	SAC II	1710437	Υ				
				R07102614					
Berdahl	Michelle	1407070311	Program Supervisor	35	Υ				
				P09121011					
Popuch	Jane	1568885572	SAC II	44	Υ				
Inzunza	Suzanne	1205415031							
James	Rikita	1063053957	SAC 1 - CADTP	10152	Υ				
Keleher	Brett	1063053957	SAC II	9621	Υ				
Leonard	Kathryn	1629499603	Associate Marriage and Family Therapist	108415	Υ				
Martin	Rebecca	1447671581	SAC II - CCAPP	Aii5305031	Υ				
Nguyen	Xuan	1609159623	SAC II	169310	Υ				
				Aii5370031					
Pelletier	Paul	1578976569	Program Manager - CCAPP	8	Υ				
				R06090615					
Roberts	Edelisa	1043331671	SAC II	44	Υ				
Russell	Stacy	1639622566	SAC II	6991	Υ				
Sosa	Rebecca	1770133290	SAC I	9622	Υ				
Thao	Seelina	1215093653	Program Supervisor	169396	Υ				
Reyes	Gina	1104298850	Substance Abuse Counselor	8670	Υ				
Wulstin	Jessica	1063870996	Associate Marriage and Family Therapist	105591	Υ				

Program Name: F Type of Program:	_	Program Descr	iption: Inpatient Treatment Perinatal	Component Assessments					
Address: 500 W. F City: French Camp	•								
Phone Number: (2		Populations se	rved: Adult and Adult Perinatal						
(,		etency: Adults/Older Adult, Veterans, I	Lesbian, Gav. Bisexual.					
△ Ġ.		Transgender	•	, ,,					
Non-English Lang	uages: Spanish	Office Hours: 2	4 HOURS						
gg	angeer epermen		ww.sjcbhs.org/mhs						
Last Name	First Name	NPI	Type of License	License #	CC				
Lozano	Nia	1851590996	Physician	A89255					
Carriedo	Mayra	1215450929	SAC I						
Cary	Jamie	1518523794	SAW	NA					
Cheatham	Lavern	1427576545	SAW	NA	Υ				
Facaros	Susan	1306265038	SAC II	1710742	Y				
Foreman	Kelly	1770140600	SAW	NA NA	Y				
Franco	Tracey	1689203572	SAC II		Y				
Gaston	Kenya	1104430925	SACI						
Caston	Renya	110 1 100323	er te t						
Gomez	Rosemary	1699898676	SAC II	C17481214	Υ				
	industrial y			SUDRC	-				
Jones	Alexis	1154811792	SAC I	8981					
Manzo	Angelina	1639292675	SAC II	169517	Υ				
Moreno	Estela	1740762871	SAW	NA	Υ				
Pate	Kellie	1609248368	SAC II	1712160	Υ				
				SUDCC III -					
Potter	Annalisa	1881717411	Program Manager	7959	Ιγ				
Savage	Dorothy	1396279154	SACI	11392-R	Υ				
Spiller	Jennell	1033382221	SAC II	1711976	Υ				
				SUDCC					
Vasquez-Grant	Cory	1720539158	Program Supervisor	7222	Υ				
	,								
Rimmer	Jo	1316617541	SAC II	Ci32940521	Υ				
Program Name: F	Recovery House	Program Descr	iption: Inpatient Treatment Assessme	nts	-				
Type of Program:	<u> -</u>								
Address: 500 W. H	lospital Rd								
City: Stockton, Ca	95231								
Phone Number: (2	09)468-6857	Populations se	rved: Adult						
		Cultural Compo	etency: Adults/Older Adult, Veterans, I	Lesbian, Gay, Bisexual,					
۵ ن ے		Transgender							
	uages: Spanish	Office Hours: 2	4 HOURS						
Non-English Languages: Spanish		website: http://www.sjcbhs.org/mhs							

Last Name	First Name	NPI	Type of License	License #	CC
Lozano	Nia	1851590996	Physician	A89255	
Shingu	Eric	1700299153	Program Manager	165703	Υ
Graves	Dawn	1629625348	SAC I		Υ
Hall	Marc	1235648593	SAW	11991	Υ
Harton	Antwan	1346721701	SAW	11987	Υ
Howe-Jacquez	Kari	1386767663	SAC II	6792	Υ
Frederiksen	Michael	1609419951	SAC I	10139	Υ
Metcalf	Tamara	1811037807	Program Supervisor - CADTP	7541	Υ
Morales	Michelle	1902397581	SAC I	19	Υ
Peterson	Martin	1073098307	SAW	9855	Υ
Wilkins	Paul	1861994386	SAC II	10050	N
Woodruff	Latrice	1952790875	SAC II	6225 IV	N
Ramirez	George	1215586607	SAW	11985	Υ
				R13828811	
Casaca	Dominic	1710468095		18	Υ
Scarborough	Dean	1750417547	SAC II	C13931214	Υ
Young	Michael	1659778629	Program Supervisor	175499	Υ
Sharma	Shivvani	1649765975			Υ
Program Namo: A	dalassant Ca	Due man Decem	intian: Individual & group counseling, and		

Program Name: Adolescent Co-Occurring Treatment Program (ACT) Children's Behavioral Health Services

Type of Program: SUD

Address: 1414 N California Street 2nd

Floor

City: Stockton, CA 95202 Phone Number: (209)468-2385

Non-English Languages: Spanish

Program Description: Individual & group counseling, and education in conjunction with the adolescent's mental health services, a partnership with Mental Health Services and Substance Abuse Services

Populations served: Youth

Cultural Competency: Youth, Lesbian, Gay, Bisexual, Transgender

Office Hours: Monday - Friday. 8:00 am-5:00 pm Closed Holidays

website: http://www.sjcbhs.org/mhs

Last Name	First Name	NPI	Type of License	License #	СС
Referrals to License	ed Staff				

Program Name: Prevention Services

Type of Program: SUD

Address: 620 N. Aurora St. Suite 6

City: Stockton, CA 95202 Phone Number: (209) 468-2005

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Non-English Languages: Spanish

Program Description: Individual & group counseling, and education in conjunction with the adolescent's mental health services, a partnership with Mental Health Services and Substance Abuse Services

Populations served: Youth

Cultural Competency: Youth, Lesbian, Gay, Bisexual, Transgender

Office Hours: Monday - Friday. 8:00 am-5:00 pm Closed Holidays

website: http://www.sjcbhs.org/mhs

Last Name	First Name	NPI	Type of License	License #	СС				
Referrals to Lic									
Program Name:	Redwood Family	Program Descr	iption: In-house detoxification, residential service	s, individual, gro	oup				
Treatment Cente	er	and family coun	seling, case management, transportation, discharg	ge and aftercare)				
Type of Program:	SUD	planning and ac	planning and access to community resources. Detoxification services can vary from 3 - 5						
Address: 1405 11	th St.	•	stabilization and can vary depending on the clien						
City: Modesto, CA	A 95354	' *	physicians medication orders and the need for continued stabilization. While in						
Phone Number: (209) 284-0970		and receive som services include education and re guarding of med	detoxification clients can participate in in-house 12 step groups, early recovery groups and receive some individual counseling and initial discharge planning. Residential services include: assessments, intake, treatment planning, crisis intervention, psychoeducation and recreational groups, relapse prevention, patient information and safe guarding of medication. RFTC utilizes motivational interviewing techniques, cognitive behavioral therapy and trauma informed interventions.						
		Populations se	rved: Women 18 & older						
△ ሌ			etency: Women's Needs						
Non-English Lang	nuages:		4 hours a day / 7 days a week						
	,g		edwoodfamilycenter.org						
Last Name	First Name	NPI	Type of License	License #	СС				
Gorman	Michael	1760585897	Physician	A68098	Υ				
Berkowitz	Steve	1205955671	Licensed Marriage and Family Therapist	77643	Υ				
NARCOTIC TREA	ATMENT PROGRAMS	S/MEDICATION AS	SSISTED TREATMENT						
n	A a mia. Tura atura a mat								
		Program Descr	ription: Medically Supervised Methadone Mainter	nance Detoxifica	ition				
Program Name: Center Stockton		_	iption: Medically Supervised Methadone Mainter nt Treatment (OTP) Medication Assisted Treatmen		ition				
_	LS	_			ition				
Center Stockton Type of Program:	LS SUD	(OTP) Outpatier			tion				
Center Stockton Type of Program: Address: 8626 N.	LS SUD Lower Sacramento Ro	(OTP) Outpatier			tion				
Center Stockton Type of Program:	LS SUD Lower Sacramento Ro	(OTP) Outpatier			tion				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C.	LS SUD Lower Sacramento Ro A 95209	(OTP) Outpatier			tion				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C.	LS SUD Lower Sacramento Ro A 95209	(OTP) Outpatier	rved: Adult and Adult Perinatal	t					
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (LS SUD Lower Sacramento Ro A 95209	Populations se	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth,	t					
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (LS SUD Lower Sacramento Ro A 95209 209) 478-2487	Populations se Cultural Compe	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender	t Transitional Age					
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (LS SUD Lower Sacramento Ro A 95209	Populations se Cultural Compo	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar	Transitional Age	}				
Type of Program: Address: 8626 N. City: Stockton, Ca Phone Number: (LS SUD Lower Sacramento Ro A 95209 209) 478-2487	Populations se Cultural Compo	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar	Transitional Age	}				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (\(\) Non-English Lang	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish	Populations se Cultural Comport Youth, Veteran, Office Hours: Nowebsite: https://stockton-lower-s	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tre	Transitional Age m-10:30am eatment-centers-	}				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, Ca Phone Number: (Checkton Ca Non-English Lang Last Name	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish First Name	Populations se Cultural Comports Youth, Veteran, Office Hours: Nebsite: https://stockton-lower-s	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tre sacramento-rd/ Type of License	Transitional Age m-10:30am atment-centers-	CC				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (Characteristics of the content of the co	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish First Name Robert	Populations se Cultural Comports Youth, Veteran, Office Hours: Nebsite: https://stockton-lower-separates	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tre sacramento-rd/ Type of License Physician	Transitional Age m-10:30am eatment-centers License # A154190	}				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (\(\) Non-English Lang	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish First Name Robert P. Curly	Populations se Cultural Comports Youth, Veteran, Office Hours: Nebsite: https://stockton-lower-s	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tre sacramento-rd/ Type of License	Transitional Age m-10:30am atment-centers-	CC				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (Characteristics of the content of the co	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish First Name Robert	Populations se Cultural Comports Youth, Veteran, Office Hours: Nebsite: https://stockton-lower-separates	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tresacramento-rd/ Type of License Physician Nurse Practitioner	Transitional Age m-10:30am atment-centers License # A154190 95012302	CC Y				
Center Stockton Type of Program: Address: 8626 N. City: Stockton, C. Phone Number: (Characteristics of the content of the co	LS SUD Lower Sacramento Ro A 95209 209) 478-2487 guages: Spanish First Name Robert P. Curly Clare	Populations se Cultural Comports Youth, Veteran, Office Hours: Notes tockton-lower-se NPI 1659791101 1235770165	rved: Adult and Adult Perinatal etency: Adult/Older Adult, Adult Perinatal, Youth, Lesbian, Gay, Bisexual, Transgender Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 6ar pinnacletreatment.com/location/california/aegis-tre sacramento-rd/ Type of License Physician Nurse Practitioner Licensed Vocational Nurse	Transitional Age m-10:30am eatment-centers- License # A154190 95012302 128398	CC Y				

		_	_		1		
Mora	Isabella	1710569678	Licensed Psychiatric Technician	41854	Υ		
Camacho	Nancy	1679024632	CADC-CAS	C14831214	Υ		
Farmer	Melissa	1700412913	Licensed Vocational Nurse	293418			
D 11				1	4.		
_	5th Street Medical	_	iption: Medically Supervised Methadone N		ation		
Clinic Stockton		(OTP) Outpatien	nt Treatment (OTP) Medication Assisted Trea	itment			
Type of Program: Address: 1839 S.							
City: Stockton, CA	, 95206						
Phone Number: (209) 463-0872		Populations se	rved: Adult and Adult Perinatal				
△ Ŀ		Cultural Compe Transgender	etency: Adults/Older Adult, Veterans, Lesbia	an, Gay, Bisexual,			
Non-English Lang	uages: Spanish	Office Hours: M	Office Hours: Monday - Friday 5am - 1pm Saturday, Sunday, and Holidays 7am -				
		website: https://p	pinnacletreatment.com/location/california/sto n-5th-st/	ckton/aegis-treatment	-		
Last Name	First Name	NPI	Type of License	License #	СС		
Fox	Michael	1212069758	Physician	G53561	Υ		
Hamilton	Robert	1386693547	Physician	G48570	Υ		
Whitworth	Melissa	1033686506	Registered Nurse	541037	Υ		
Palafox	Divina	1912061995	Licensed Vocational Nurse	17300	Υ		
Lu	Divina	1316001381	Licensed Vocational Nurse	183039	Υ		
		1740480342	Nurse Practitioner	7506	Υ		
Carter-Campbell	l Jeannette		Naise i factitioner	7500			
Carter-Campbell Johnson	P. Curly	1235770165	Nurse Practitioner	95012302	Υ		
Program Name: A Centers Californi Type of Program: Address: 1947 N. City: Stockton, CA Phone Number: (2	P. Curly Aegis Treatment ia Street SUD California St. Ste. B&C A 95204 209) 463-0870	Program Descr (OTP) Outpatien Populations se Cultural Compe Transgender Office Hours: M		95012302 aintenance Detoxificate atment n, Gay, Bisexual,	Y		
Program Name: A Centers Californi Type of Program: Address: 1947 N. City: Stockton, CA Phone Number: (2	P. Curly Aegis Treatment ia Street SUD California St. Ste. B&C A 95204 209) 463-0870	Program Descr (OTP) Outpatien Populations se Cultural Compe Transgender Office Hours: M	Nurse Practitioner iption: Medically Supervised Methadone Manual Treatment (OTP) Medication Assisted Treatment (OTP) Medication (OTP) Medication Assisted Treatment (OTP) Medication (OTP) Medicatio	95012302 aintenance Detoxification of the street of the st	Y		

Fox	Michael	1212069758	Physician	G53561	Υ			
Whitworth	Melissa	1033686506	Registered Nurse	541037	Υ			
Talleur	Brian	1659791101	Physician	A154190	Υ			
Cano	Jacqueline	1871149757	Licensed Vocational Nurse	238131	Υ			
Johnson	P. Curly	1235770165	Nurse Practioner	95012302				
Ford	Leigh	1790741197	Nurse Practioner	5493				
Ayers	Jessica	1235770165	Licensed Vocational Nurse	165221				
•								
Program Name: Centers Lodi Type of Program Address: 541 Sou City: Lodi, CA 95	uth Ham Lane, Suite E	(OTP) Outpatier	iption: Medically Supervised Methadone M nt Treatment (OTP) Medication Assisted Tre		tion			
Phone Number: (Populations se	Populations served: Adult and Adult Perinatal					
ப் த்		Cultural Competency: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexual, Transgender Office Hours: Monday - Friday 5:00am - 6:00pm Saturday, Sunday, Holidays 7am - 12 PM						
			website: https://aegistreatmentcenters.com/clinic/aegis-lodi-california/					
Last Name	First Name	NPI	Type of License	License #	СС			
Whitworth	Melissa	1033686506	Registered Nurse	541037	Υ			
Talleur	Brian	1659791101	Physician	A154190	Υ			
Alfaro	Angeles	1649669979	Licensed Vocational Nurse	689129	Υ			
Campos	John	1407192297	Licensed Vocational Nurse	260740	Υ			
Franck	Elizabeth	1598343287	Physician Assistant	59386	Υ			
		1053410878	Licensed Psychiatric Techician	41913	Υ			
Orellana	Katherine			-1313				
	Katherine Brittney	1710561378	Licensed Psychiatric Techician	40274	Y			
Orellana					_			
Orellana Chaves	Brittney	1710561378	Licensed Psychiatric Techician	40274	Υ			
Orellana Chaves Truong Smart Program Name: Centers Manteca Type of Program: Address: 955 Cen 12A & 14 City: Manteca, CA	Brittney Maria Denise Aegis Treatment a SUD nter Street Suites	1710561378 1124646815 1730289083 Program Descr (OTP) Outpatien	Licensed Psychiatric Techician Licensed Psychiatric Techician Physician Physician Piption: Medically Supervised Methadone Mathematic Treatment (OTP) Medication Assisted Tre	40274 42019 A39072 Maintenance Detoxifica	Y Y Y			
Orellana Chaves Truong Smart Program Name: Centers Manteca Type of Program: Address: 955 Cer 12A & 14 City: Manteca, CA Phone Number: (Brittney Maria Denise Aegis Treatment a SUD nter Street Suites	1710561378 1124646815 1730289083 Program Descr (OTP) Outpatien	Licensed Psychiatric Techician Licensed Psychiatric Techician Physician Physician Iption: Medically Supervised Methadone Mat Treatment (OTP) Medication Assisted Tre	40274 42019 A39072 Maintenance Detoxifica atment	Y Y Y			
Orellana Chaves Truong Smart Program Name: Centers Manteca Type of Program: Address: 955 Cen 12A & 14 City: Manteca, CA	Brittney Maria Denise Aegis Treatment a SUD Inter Street Suites	1710561378 1124646815 1730289083 Program Descr (OTP) Outpatien	Licensed Psychiatric Techician Licensed Psychiatric Techician Physician Physician Piption: Medically Supervised Methadone Mathematic Treatment (OTP) Medication Assisted Tre	40274 42019 A39072 Maintenance Detoxifica atment	Y Y Y			
Orellana Chaves Truong Smart Program Name: Centers Manteca Type of Program: Address: 955 Cer 12A & 14 City: Manteca, CA Phone Number: (Brittney Maria Denise Aegis Treatment a SUD nter Street Suites A 95337 209)239-9600	Program Descr (OTP) Outpatien Populations se Cultural Compe	Licensed Psychiatric Techician Licensed Psychiatric Techician Physician Physician Iption: Medically Supervised Methadone Mat Treatment (OTP) Medication Assisted Tre	40274 42019 A39072 Maintenance Detoxificate atment an, Gay, Bisexual,	Y Y Y			

Last Name	First Name	NPI	Type of License	License #	CC
Fox	Michael	1212069758	Physician	G53561	Υ
Whitworth	Melissa	1033686506	Licensed Vocational Nurse	541037	Υ
Rowe	Michelle	1013199843	Physician	20A9607	Υ
Jane Davis	Mary	1861822744	Licensed Vocational Nurse	72342	Υ
Falcon	Christina	1154898393	Licensed Vocational Nurse	175628	Υ
Mohr	Rebecca	1154898302	Licensed Psychiatric Technician	26531	Υ
Lam	Hong	1487282612	Licensed Vocational Nurse	705879	Υ
Southmayd	Robert	1982700969	Physician	20A5298	Υ
Center Type of Program S Address: 1111 N. City: Stockton, CA Phone Number: (2	El Dorado St. A 95202	Populations ser	Treatment (OTP) Medication Assisted Trea ved: Adult and Adult Perinatal tency: Adults/Older Adult, Veterans, Lesbian		
Non-English Lang	uages: Spanish		onday - Friday 5am - 1pm Saturday, Sundayedmark.com/medmark-treatment-centers-sto		n-11am
Last Name	First Name	NPI	Type of License	License #	СС
AHERN	DENISE		CERTIFIED COUNSELOR	191227	Υ
ESCLOVON	LACI		MEDICAL ASSISTANT	NA	Υ
ESTRADA	MICHAEL	1588826960		5919	
GALVEZ	JOHN	1487032322	ССАРР	R11924402 15	
GONZALEZ	ADELITA	1972962488	REGISTERED COUNSELOR	6110	
GUYTON	BRUCE	1033553250		6305	
HARRIS	DANA	1760995781	CADTP	6203	Υ
HOLMAN	NADINE	1013129170	CERTIFIED COUNSELOR	7997	Υ
HOLIDAY	BRENDA	1306839352	Nurse Practitioner	15461	Υ
KHAM	JACKSON	1295348951	MEDICAL ASSISTANT	NA	Υ
KOUM	SAVAN	1215067228	CADTP	6568	Υ
KOUM	SAVIN	1891146015	CADTP	6428	Υ
LENADADO	JERRI	1477616910	Licensed Vocational Nurse	170115	Υ
LO	LAWRENCE	1770122384	REGISTERED COUNSELOR	10180	
PENA	ANNA	1972667236	CADTP	6197	Υ
POWELL	MARIROSE		Registered Nurse	13060	
TUN	SUEHEI		CERTIFIED COUNSELOR	7228	
VIVEROS	DANNY	1821519133		6340	
WILLIAMS	JAY FRANK		CERTIFIED COUNSELOR	2014156	
WILLIAMS	PEGGY	1013452093	CADTP	6252	
			·		

WILLIAMS	TED	1194954123	CADTP	6303	Υ
WILLIAMS	TRISHA	1417493339	CADTP	6480	Υ
WILLIAMSON	ERNEST	1649782954	CADTP	6388	Υ