

Behavioral Health Services A Division of Health Care Services Agency

Nia Lozano, MD, BHS Interim Director Cara Dunn, BHS Assistant 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

<u>English</u>

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).

Tiếng Việt (Vietnamese)

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).

Tagalog (Tagalog – Filipino)

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.

<u>繁體中文(Chinese)</u>

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)。

<u> Յայերեն (Armenian)</u>

ՈԻՇԱԴՐՈԻԹՅՈԻՆ` Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ։ Չանգահարեք 468-9370 (TTY (հեռատիպ)՝ 711).

<u> Русский (Russian)</u>

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

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توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. ب 1-888-868-9370 (TTY: 711) نماس 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).

<u>ਪੰਜਾਬੀ (Punjabi)</u>

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<u>)</u>

1-888-468-9370	اللغوية تتوافر لك بالمجان. اتصل برقم	ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة ا
	(TTY: 711)	:رقم هاتف الصم والبكم)

<u>हिंदी (Hindi)</u>

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।

<u>ภาษาไทย (Thai)</u>

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

<u>ខ្មែរ (Cambodian)</u>

ប្រយ័ត្នះ ររ សើ ិនជាអ្នកនិយាយ ភាសាខ្មែ , រសវាជំនួយមននកភាសា រោយមិនគិតា្ ្លន គឺអាចមានសំរា ់ ំររ អ៊េី 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 9/2022

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

 \pounds = 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. Type of Program: MH Address 1212 N. California St City Stockton, CA 95202 Phone Number (209) 468-2337 △		Coordination (IC (IHBS); Medicat Populations ser Cultural Compe Gay/Lesbian/Tra Office Hours:	tency: African American, Native American, Muslir nsgender communities. Monday -Friday 8 am - 5 pm	ome Based Serv	
Spanish			ww.sjgov.org/mhs		-
Last Name	First Name	NPI	Type of License	License #	CC
Cruz	Gloria	1104375724	Registered Nurse	723203	Y
Daughtery	Dennis	1659667319	Licensed Marriage and Family Therapist	48676	Y
Edwards Larson	Delise	1871903237	Associate Marriage and Family Therapist	96104	
Murray	Karen	1346735917	Associate Marriage and Family Therapist	118346	Ν
Nelson	Nancy	1376635680	Physician	C50283	Y
Singh	Amarpreet	1235182916	Physician	A78414	N
Wallace	Paul	1114044799	Licensed Psychiatric Technician	26296	Y
Program Name: Children and Youth Services, Stockton Clinic (CYS) #3915 Type of Program: MH Address 1414 N California St		-	ption: Case Management/ Brokerage including In		
Type of Program: N	/H alifornia St		C); Mental Health Services including Intensive Ho ion Support; Crisis Intervention	ome Based Serv	vices
Type of Program: N Address 1414 N Ca	/IH alifornia St 95202	(IHBS); Medicat		ome Based Serv	vices
Type of Program: N Address 1414 N Ca City Stockton, CA 9	/IH alifornia St 95202	(IHBS); Medicat	ion Support; Crisis Intervention		
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20	/IH alifornia St 95202	(IHBS); Medicat Populations ser Cultural Competities livit	ion Support; Crisis Intervention rved: Children and Youth tency: Comprehensive mental health services for ng in Central County area. Services include individ	children, youth ual and group	
Type of Program: N Address 1414 N Ca City Stockton, CA 9	/IH alifornia St 95202	(IHBS); Medicat Populations ser Cultural Competities livit	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for	children, youth ual and group	
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20	//H alifornia St 95202 99) 468-2385	(IHBS); Medicat Populations ser Cultural Compe their families livir therapy, case ma	ion Support; Crisis Intervention rved: Children and Youth tency: Comprehensive mental health services for ng in Central County area. Services include individ	children, youth ual and group	
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20	//H alifornia St 95202 99) 468-2385	(IHBS); Medicat Populations ser Cultural Compe their families livin therapy, case ma Office Hours: M	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for ng in Central County area. Services include individ anagement, psychiatric assessment, and medicati	children, youth ual and group	
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20	//H alifornia St 95202 99) 468-2385	(IHBS); Medicat Populations ser Cultural Compe their families livin therapy, case ma Office Hours: M	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for ng in Central County area. Services include individ anagement, psychiatric assessment, and medication onday - Friday 8 am to 5 pm	children, youth ual and group	
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 C Non-English Langu	/IH alifornia St 05202 09) 468-2385 ages: Spanish	(IHBS); Medicat Populations set Cultural Compe their families livir therapy, case ma Office Hours: M website: https://www.	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for ing in Central County area. Services include individ anagement, psychiatric assessment, and medication londay - Friday 8 am to 5 pm ww.sjgov.org/mhs	children, youth ual and group on support.	, and
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 Characteristic Caracteristic Caracteris	/IH alifornia St 05202 09) 468-2385 ages: Spanish First Name	(IHBS); Medicat Populations set Cultural Competition their families living therapy, case main Office Hours: Main website: https://www. NPI	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for ng in Central County area. Services include individ anagement, psychiatric assessment, and medication londay - Friday 8 am to 5 pm ww.sjgov.org/mhs Type of License	children, youth ual and group on support. License #	, and
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 C C Non-English Langu Last Name Abdullahi	 IH alifornia St 5202 9) 468-2385 ages: Spanish First Name Krissie 	(IHBS); Medicat Populations set Cultural Competition their families livin therapy, case material Office Hours: Material website: https://www. NPI 1407307762	ion Support; Crisis Intervention ved: Children and Youth tency: Comprehensive mental health services for ing in Central County area. Services include individ anagement, psychiatric assessment, and medication londay - Friday 8 am to 5 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist	children, youth ual and group on support. License # 125000	, and CC Y
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 D C Non-English Langu Last Name Abdullahi Alban	IH alifornia St 95202 09) 468-2385 ages: Spanish First Name Krissie Benjamin	(IHBS); Medicat Populations ser Cultural Competitivity their families livity therapy, case ma Office Hours: M website: https://www. NPI 1407307762 1932227295	ion Support; Crisis Intervention	children, youth ual and group on support. License # 125000 26094	, and CC Y Y
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Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 Don-English Langu Last Name Abdullahi Alban Allanki Ansari	IH alifornia St 95202 09) 468-2385 ages: Spanish First Name Krissie Benjamin Sailaja Shaukat	(IHBS); Medicat Populations ser Cultural Competitivity their families livity therapy, case ma Office Hours: M website: https://www. NPI 1407307762 1932227295 1306897723 1821294455	ion Support; Crisis Intervention	children, youth ual and group on support. License # 125000 26094 138838 105923	, and CC Y Y Y Y
Type of Program: N Address 1414 N Ca City Stockton, CA 9 Phone Number: (20 Don-English Langu Last Name Abdullahi Alban Allanki Ansari Avelar	IH alifornia St 95202 09) 468-2385 ages: Spanish First Name Krissie Benjamin Sailaja Shaukat Evony	(IHBS); Medicat Populations set Cultural Competitivity their families livity therapy, case material Office Hours: Material website: https://www. NPI 1407307762 1932227295 1306897723 1821294455 1962136501	ion Support; Crisis Intervention	children, youth ual and group on support. License # 125000 26094 138838 105923 N/A	, and CC Y Y Y Y Y
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Diaz	David	1821585308	Licensed Marriage and Family Therapist	129095	N		
Gepley	Shaun	1164030771	Associate Professional Clinical Counselor	7760	Y		
Gonzalez	Mario	1083041685	Registered Nurse	95217456	Ν		
Green	Sheena	1700452448	Associate Clinical Social Worker	107169	Y		
Hudson	Mark	1528190725	Licensed Marriage and Family Therapist	78609	Y		
Kumar	Gaurav	1235513102	Physician	A151187	Y		
Lescale Huante	Shadai	1528340320	Licensed Clinical Social Worker	86507	Y		
Lopez	Alexis	1932767225	Associate Marriage & Family Therapitst	116153	Y		
Navarro	Elizabeth	1801242771	Associate Clinical Social Worker	103985	Y		
Nease	Desiree	1447703491	Associate Clinical Social Worker	71196	Y		
Ramirez	Jacqueline	1245751650	Associate Clinical Social Worker	83837	Y		
Rhone	Danevia	1114650405	Associate Clinical Social Worker	99638	Y		
Rodriguez	Cristina	1760070247	Associate Marriage & Family Therapitst	12350	Y		
Ruiz	Belem	1508380411	Associate Marriage and Family Therapist	100924	Y		
Santiago	Regina	1598166308	Associate Clinical Social Worker	85489	Y		
Simien	Carla	1629564000	Psychiatric Technician	40771	Y		
Stanley	Anastacia	1528299724	Licensed Marriage and Family Therapist	87417	Y		
Strayhorn	Earlene	1134211246	Physician	C68926	Y		
Torres	Josephine	1467018044	Associate Marriage and Family Therapist	119422	Y		
Vargas	Maribel	1821247149	Associate Clinical Social Worker	35622	Y		
Washington	De'zha	1639695430	Licensed Clinical Social Worker	107479	Ν		
Yang	Mai	1447866090	Associate Clinical Social Worker	105295	Y		
		Program Description: Case Management/Brokerage including Intensive Care					
Program Name: C	hildren and Youth	Program Descri	ption: Case Management/Brokerage including	Intensive Care			
Program Name: C Services - Foster		-			ces		
-	Youth Full Service	Coordination (IC	ption: Case Management/Brokerage including C),Mental Health Services including Intensive Hor on Support; Crisis Intervention		ces		
Services - Foster Partnership (MHS	Youth Full Service A) #9096	Coordination (IC	C),Mental Health Services including Intensive Hor		ces		
Services - Foster	Youth Full Service A) #9096 1H	Coordination (IC	C),Mental Health Services including Intensive Hor		ces		
Services - Foster Partnership (MHS) Type of Program: M Address : 620 N. A	Youth Full Service A) #9096 IH urora Street Ste 4	Coordination (IC	C),Mental Health Services including Intensive Hor		ces		
Services - Foster Partnership (MHS Type of Program: M Address : 620 N. A City: Stockton, CA	Youth Full Service A) #9096 1H urora Street Ste 4 95202	Coordination (IC (IHBS); Medicati	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention		ces		
Services - Foster Partnership (MHS) Type of Program: M Address : 620 N. A	Youth Full Service A) #9096 1H urora Street Ste 4 95202	Coordination (IC (IHBS); Medicati	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention	ne Based Servio	ces		
Services - Foster Partnership (MHS Type of Program: M Address : 620 N. A City: Stockton, CA	Youth Full Service A) #9096 1H urora Street Ste 4 95202	Coordination (IC (IHBS); Medicati Populations ser Cultural Compe	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth itency: Mental Health Services Act (MHSA) progra	ne Based Servio	ces		
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Services - Foster Partnership (MHS Type of Program: M Address : 620 N. A City: Stockton, CA Phone Number: (20 C Non-English Langu Last Name Alcaraz Tapia	Youth Full Service A) #9096 IH urora Street Ste 4 95202 09) 468-2385 ages: Spanish First Name Maria Marlen	Coordination (IC (IHBS); Medication Populations set Cultural Competion children and you Office Hours: M website: https://www. NPI 1942470299	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention rved: Children and Youth tency: Mental Health Services Act (MHSA) progra th in the Foster Care System londay - Friday 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Licensed Marriage and Family Therapist	am focused on License # 93646	CC Y		
Services - Foster Partnership (MHS) Type of Program: M Address : 620 N. A City: Stockton, CA Phone Number: (20 Co Co Last Name Alcaraz Tapia Allanki	Youth Full Service A) #9096 H urora Street Ste 4 95202 09) 468-2385 ages: Spanish First Name Maria Marlen Sailaja	Coordination (IC (IHBS); Medication Populations set Cultural Competion children and you Office Hours: M website: https://www. NPI 1942470299 1306897723	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Mental Health Services Act (MHSA) progra th in the Foster Care System londay - Friday 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Licensed Marriage and Family Therapist Physician	am focused on License # 93646 138838	СС Ү Ү		
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Services - Foster Partnership (MHS) Type of Program: M Address : 620 N. A City: Stockton, CA Phone Number: (20 C Non-English Langu Last Name Alcaraz Tapia Allanki Ansari DeLosAngeles Flores	Youth Full Service A) #9096 IH urora Street Ste 4 95202 09) 468-2385 ages: Spanish First Name Maria Marlen Sailaja Shaukat Christina Henry	Coordination (IC (IHBS); Medication) Populations set Cultural Compension children and you Office Hours: M website: https://www.bsite: https://www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add///www.stations.add//www.stations.add//www.stations.add///www.stations.add//www.stations.add///www.stations.add//wwww.stations.a	C),Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Mental Health Services Act (MHSA) progra th in the Foster Care System londay - Friday 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Licensed Marriage and Family Therapist Physician Physician Associate Marriage and Family Therapist Licensed Marriage and Family Therapist	License # 93646 138838 105923 113408 128269	СС		

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 △		Coordination (IC (IHBS); Medical Populations se Cultural Compe Services include and case manage	etency: Comprehensive Mental Health Services for psychiatric assessment, medication support, grou	ome Based Ser).
Cantonese, Tagal	09	website: https://u	www.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	СС
Last Name Chavez	April	1760959670	Licensed Marriage and Family Therapist	113250	
Cholua	Marie	1275098055	Associate Marriage and Family Therapist	120341	Y
Chukwuka	Ogiram	1063662781	Licensed Clinical Social Worker	81785	+-'
DeWitte	Tiffany	1023143245	Licensed Clinical Social Worker	29826	Y
Doronio	Ramil	1871767376	Registered Nurse	555151	Y
Firnberg	Thomas	1164597472	Physician	A40218	N
Garcia	Frank	1992179352	Associate Marriage and Family Therapist	118171	Y
Garcia	Luis	1346599677	Licensed Marriage and Family Therapist	10398	Y
Garcia	Valerie	1770606386	Registered Nurse	704233	Y
Gementera	Jalessa	1588134209	Associate Marriage and Family Therapist	118468	Y
Germer	Christopher	1831682400	Associate Clinical Social Worker	84113	Y
Graff	Robert	1366560112	Physician	G70479	Y
Hall	Jane	1346406824	Licensed Marriage and Family Therapist	50808	Y
Helsby	Sherri	1669893764	Licensed Clinical Social Worker	29248	Y
Hensley	Zachary	1265039226	Associate Marriage and Family Therapist	114900	Y
Herrera	Karla	1427722461	Associate Professional Clinical Counselor	102359	+ .
Herrick	Kara	1518191659	Licensed Marriage and Family Therapist	43283	Y
Hollowell	Shirley	1124143474	Registered Nurse	352081	Y
Jackson	Sasha	1295181295	Associate Clinical Social Worker	79996	Ŷ
Jahangiri	Mohammad	1720266760	Physician	A56400	Ŷ
Jonney	Jorly	1902155625	Associate Clinical Social Worker	65763	Ŷ
Kavanagh	Priscilla	1528429057	Associate Professional Clinical Counselor	2122	Ŷ
Keys	Sheril	1942664875	Licensed Psychiatric Technician	38333	Ŷ
Manansala	Gerado	1215195813	Physician	A102439	Y
Martin	Ronee	1932644796	Associate Marriage and Family Therapist	84987	Y
Martinez	Celeste	1902305972	Licensed Psychiatric Technician	40655	Y
Mascovich	Paul	1215921184	Physician	G33950	Y
McHenry	Heidi	1861763294	Licensed Psychiatric Technician	35949	Y

Montgomony	Adeline Mary	1255453353 1538281183	Licensed Psychiatric Techician Licensed Clinical Social Worker	25868 82129	Y Y
Montgomery Padala	Nagamani	1659303253		C53554	
Paulaa Parsons	Wilhelmina	1144696840	Physician Licensed Marriage and Family Therapist	49001	Y
Phillips	Victoria	1871110437	Associate Clinical Social Worker	92751	Y
Preston	Jessica	1649727066	Associate Clinical Social Worker	79154	Y
	Alana	1457817033	Associate Clinical Social Worker Associate Marriage and Family Therapist	122079	Y
Quinones Rivera	Lilian	1750059424	Licensed Clinical Social Worker	102359	
Roberts	Sharmaine	1376724310	Licensed Clinical Social Worker	28902	
Saddik	Fouad	1437254117	Physician	A44865	Y
Saelee		1255511614	Licensed Clinical Social Worker	82456	Y
	Cindy Kellie	1295273654		40326	r N
Salazar			Licensed Psychiatric Technician		
Singh	Karamjit	1083930440	Physician Development	A132050	
Soares	Ana	1922191410	Physician	A68523	
Sprague	Helen	1710325642	Associate Marriage and Family Therapist	75120	Y
Velasquez	Normita	1609464114	Licensed Psychiatric Techician	41847	
Wallace	Remedios	1639294341	Licensed Psychiatric Technician	24227	Y
Weekly	Tony	1710572540	Licensed Psychiatric Technician	41837	
Whittaker	Latasha	1932467362	Associate Marriage and Family Therapist	108832	Y
Corrections Partn Type of Program: N	ИН	Medication Supp	port; Crisis Intervention		
Type of Program: M Address: 1212 N. C City: Stockton, CA	ИН California Street 95202	Medication Supp	port; Crisis Intervention		
Type of Program: N Address: 1212 N. C	ИН California Street 95202	Populations se			
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20	/H California Street 95202 09) 468-9373	Populations se Cultural Compe Probation to red our community.	rved: Adult e tency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a		ety for
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20	/H California Street 95202 09) 468-9373	Populations se Cultural Compe Probation to red our community. Office Hours:	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm		ety for
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 C Non-English Langu	/IH California Street 95202 09) 468-9373 lages: Spanish	Populations se Cultural Compe Probation to red our community. Office Hours: website: https:w	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs	nd increase safe	-
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 Non-English Langu Last Name	/IH California Street 95202 09) 468-9373 lages: Spanish First Name	Populations se Cultural Compe Probation to red our community. Office Hours: website: https://website.	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License	nd increase safe	
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 O C Non-English Langu Last Name Garcia	/IH California Street 95202 D9) 468-9373 ages: Spanish First Name Juan	Populations se Cultural Compe Probation to red our community. Office Hours: website: https:w NPI 1710008735	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License Licensed Clinical Social Worker	License #	-
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 Non-English Langu Last Name Garcia Garcia	/IH California Street 95202 09) 468-9373 lages: Spanish First Name Juan Juan	Populations se Cultural Compe Probation to red our community. Office Hours: website: https:// NPI 1710008735 1679961106	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist	License # 69500 108163	СС ү
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 Non-English Langu Last Name Garcia Garcia Herrington	AH California Street 95202 D9) 468-9373 Hages: Spanish First Name Juan Julio Randolph	Populations se Cultural Compe Probation to red our community. Office Hours: website: https:w NPI 1710008735 1679961106 1114141173	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	License # 69500 108163 48970	СС
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 Non-English Langu Last Name Garcia Garcia Herrington Molina	AH California Street 95202 D9) 468-9373 Hages: Spanish First Name Juan Julio Randolph Rico	Populations se Cultural Compe Probation to red our community. Office Hours: website: https://www. NPI 1710008735 1679961106 1114141173 1255454203	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, an Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Clinical Social Worker	License # 69500 108163 48970 25450	СС
Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number: (20 Non-English Langu Last Name Garcia Garcia Herrington	AH California Street 95202 D9) 468-9373 Aages: Spanish First Name Juan Julio Randolph Rico risis Community CCRT) #9088 AH California Street	Populations se Cultural Compe Probation to red our community. Office Hours: website: https:// 1710008735 1679961106 1114141173 1255454203 Program Descr	rved: Adult etency: Serve clients under AB-109 community su uce recidivism, promote wellness and recovery, a Monday - Friday 8:00 am- 5:00 pm ww.sjgov.org/mhs Type of License Licensed Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	License # 69500 108163 48970 25450	СС

பக் Non-English Languages: Spanish, Cambodian, Vietnamese		Cultural Competency: Mobile multi-disciplinary crisis team for community adult mental health outreach, early intervention and joint field response with law enforcement for crisis 5150 detention evaluations. Office Hours: OPEN 24 HOURS				
		Last Name	First Name	NPI	Type of License	License #
Arriola	Eulalie	1255573044	Licensed Clinical Social Worker	34426	Y	
Ballesteros	Patricia	1790058352	Licensed Marriage and Family Therapist	108455	Y	
Bates	Carrie	1306298849	Licensed Clinical Social Worker	89569	Y	
Blewett	Jenna	1437658408	Associate Marriage and Family Therapist	118907	Y	
Bringas	Carmencita	1821298753	Licensed Marriage and Family Therapist	53691	Y	
Donato	Imelda	1194278085	Licensed Professional Clinical Counselor	21487	Y	
Douglas	Roy	1407229248	Associate Clinical Social Worker	98897	N	
Figueroa	Carlos	1306193933	Licensed Marriage and Family Therapist	102315	Y	
	Frank	1992179352	Associate Marriage and Family Therapist	118171	Y	
Gutoman	Jon Christopher	1578814042	Licensed Marriage and Family Therapist	130945	Y	
Harrison	Lecia	1407487200	Licensed Clinical Social Worker	86799	N	
Ketcham	Shauna	1841798865	Associate Clinical Social Worker	79168	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	
	Sonya	1497878482	Associate Marriage and Family Therapist	99087	Y	
Morales	, Leonardo	1962822643	Licensed Clinical Social Worker	100000	Y	
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Y	
	Judybeth	1346762499	Associate Professional Clinical Counselor	8376	Y	
	, Maira	1093221087	Associate Clinical Social Worker	102953	Y	
	Peter	1134570542	Associate Marriage and Family Therapist	131513	Y	
Program Name: Crisi Services #9011 Type of Program: MH Address: 1212 N. Calit City: Stockton, CA 952	fornia Street 202	-	iption: Case Management/ Brokerage; Mental H port; Crisis Intervention	lealth Services;		
Phone Number: (209)	468-8686	Populations se	rved: Adult, Children Adolescents			
∩ Ġ.		Cultural Competency: 24-Hour evaluation services including assessment for psychiatric emergencies, crisis counseling, outpatient and community referrals.				
Non-English Language	es: Spanish		PEN 24 HOURS	,		
Cambodian, Vietname	•		ww.sjgov.org/mhs			
	First Name	NPI	Type of License	License #	СС	
	Stephanie	1659798130	Licensed Psychiatric Technician	37033	Y	
	Eulalie	1255573044	Licensed Psychiatric Technician	34426	Y	
			•		Y	
	Patricia	1790058352	Licensed Marriage and Family Therapist	108455	Y Y	
Bates	Carrie	1306298849	Licensed Clinical Social Worker	89569	-	
Bazua	Melissa	1972944072	Licensed Psychiatric Technician	36496	Y	

Blewett	Jenna	1437658408	Associate Marriage and Family Therapist	118907	Y
Bringas	Carmencita	1821298753	Licensed Marriage and Family Therapist	53691	Y
Brown	Kristaline	1750723821	Licensed Psychiatric Technician	32575	Ý
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Y
Donato	Imelda	1194278085	Licensed Professional Clinical Counselor	21487	Ý
Douglas	Roy	1407229248	Associate Clinical Social Worker	98897	Ý
Figueroa	Carlos	1306193933	Licensed Marriage and Family Therapist	102315	Ý
Formoso	Rizza	1649862269	Licensed Psychiatric Technician	41438	Ý
Garcia	Frank	1992179352	Associate Marriage and Family Therapist	118171	Ý
Gill	Paramijit	1073629218	Physician	A49224	Ý
Gill	Sandeep	1871852673	Licensed Psychiatric Technician	34942	Ý
Graff	Robert	1366560112	Physician	G70479	Ý
Gutoman	Jon Christopher	1578814042	Licensed Marriage and Family Therapist	130945	Ý
Harrison	Lecia	1407487200	Licensed Clinical Social Worker	86799	N
Isham	Loni	1891145033	Licensed Psychiatric Technician	38233	Y
Ketcham	Shauna	1841798865	Associate Clinical Social Worker	79168	Ý
Lee	Catherine	1073729646	Licensed Marriage and Family Therapist	44225	Y
Lewis	Chandra	1770914061	Licensed Psychiatric Technician	37210	Ý
Lewman	Brenda	1821477035	Licensed Marriage and Family Therapist	106905	Ý
McArthur	Milagros	1477809929	Licensed Psychiatric Technician	36471	Ý
Melgarejo	Angie	1891220729	Associate Professional Clinical Counselor	6643	Ý
Molina Eliab	Sonya	1497878482	Associate Marriage and Family Therapist	99087	Ý
Morales	Leonardo	1962822643	Licensed Clinical Social Worker	100000	Ý
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Ý
Price	Jennifer	1932621893	Licensed Psychiatric Technician	40662	Ý
Rios	Judybeth	1346762499	Associate Professional Clinical Counselor	8376	Ý
Scharp	Sam	1508526856	Licensed Psychiatric Technician	42150	Ň
Sumampong	Criselle	1073121414	Licensed Psychiatric Technician	41696	N
Valenzuela	Maira	1093221087	Associate Clinical Social Worker	102953	Y
Walsh	Peter	1134570542	Associate Marriage and Family Therapist	131513	Y
Wright-Freeman	Cody	1538584859	Licensed Psychiatric Technician	37819	Y
Program Name: Cri	,	Program Descri	iption: Crisis Stabilization CSU		
Units (CSU) #9032			·····		
, γ					
Type of Program: MI Address: 1212 N. Ca					
City: Stockton, CA 9		Denulations and	nadi Adult Adalaaanta (10 ura, ar aldar)		
Phone Number: (209	9) 400-0000		rved: Adult, Adolescents (12 yrs. or older) •tency: 23-Hour psychiatric assessment and stabi	lization unit	
∆க					
Non-English Langua	age: Spanish		Referrals are provided during admission and upon PEN 24 HOURS	uscharge.	
Cambodian, Vietnan			vww.sjgov.org/mhs		
	-	NPI		Liconce #	
Last Name	First Name		Type of License	License # 29162	CC V
Abundez	Jesse	1841413036	Licensed Psychiatric Technician	_	Y
Andrade	Oscar	1215661145	Licensed Psychiatric Technician	42243	Ν

Arroyo	Maria Elizabeth	1255459061	Registered Nurse	488617	Y
Bokleman	Roy	11404003	Licensed Psychiatric Technician	32628	Y
Brown	Brandi	1316060023	Registered Nurse	713008	Y
Cabrera	Gilbert	1679693766	Registered Nurse	565185	Y
Chapin	Larry	1528200169	Licensed Psychiatric Technician	26162	Y
Daniel	Steven	1184366528	Licensed Psychiatric Technician	41990	Ν
Dapon	Jeanette	1780152918	Registered Nurse	824521	Y
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Y
Fortes	Catherine	1346681442	Licensed Psychiatric Technician	36982	Y
Garcia	Francisco	1538899620	Licensed Psychiatric Technician	42266	Ν
Graff	Robert	1366560112	Physician	G70479	Y
Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Y
Hawkins	Lynnetta	1437436938	Licensed Marriage and Family Therapist	93110	Y
Holguin	Gabriel	1255704094	Licensed Psychiatric Technician	38216	Y
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Y
Kaur	Narinder	1063006294	Licensed Psychiatric Technician	41886	Ν
Kottke	Marline	1891223111	Licensed Vocational Nurse	198957	Y
Laizer	Gloria	1255706479	Registered Nurse	764452	Y
Lambert	Rekha	1164647525	Licensed Marriage and Family Therapist	10386	Y
Little	Christy	1497978795	Licensed Psychiatric Technician	28731	Y
Lo	Ра	1295377117	Licensed Psychiatric Technician	41128	Y
Luna	Humberto	1306419080	Licensed Psychiatric Technician	42022	Ν
Maldonado	Adan	1063878825	Associate Marriage and Family Therapist	121459	Y
Mendoza	Michelle	1477951812	Registered Nurse	797022	Y
Menius	Victoria	1487074258	Licensed Psychiatric Technician	37534	Y
Michael	Kimberly	1538831151	Licensed Psychiatric Technician	29086	N
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Y
Montantes	Michael	1780018390	Licensed Psychiatric Technician	37071	Y
Navarro	Grace	1083737753	Associate Clinical Social Worker	72678	Y
Nguyen	Thao	1912214065	Licensed Marriage and Family Therapist	88176	Y
Phillips	Heather	1114530250	Licensed Psychiatric Technician	41710	Ν
Ripoyla	Jerral	1821511700	Licensed Psychiatric Technician	40644	Y
Sahota	Mandeep	1609536994	Registered Nurse	831415	Ν
Salon	Jennifer	1730702119	Licensed Psychiatric Technician	41462	Ν
Seraypheap	Arunny	1013037274	Registered Nurse	547944	Y
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Y
Singh	Devi	1962083725	Registered Nurse	818277	Ν
Smith	Maria	1821624156	Licensed Psychiatric Technician	41522	Ν
Tran	Michelle	1366642068	Licensed Clinical Social Worker	81278	Y
Tuning	Frankie	1073631727	Registered Nurse	95171895	Ν
Vang	Mai	1982103081	Licensed Psychiatric Technician	40697	Y
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	Y

Blue Resendez Program Name: Ho #39BE	Cynthia using Services	1780877845 Program Descr Intervention	Physician iption: Case Management/ Brokerage; Mental He	A84098 ealth Services; (Y Crisis	
Blue Resendez	,		•			
Blue	1			1404000		
	Christine	1093786683	Physician	A10733	Y	
Last Name	First Name	NPI	Type of License	License #	СС	
	I		ww.sjgov.org/mhs			
Non-English Langua	ges: Spanish		londay - Friday 8:00 am- 5:00 pm			
∩¢.						
~ F		Cultural Competency: Full Service Partnership with the emphasis on outreach to the underserved older adult population ages (60+)				
Phone Number: (209) 468-3760		rved: Older Adult			
City: Stockton, CA 9						
Address: 1212 N Cal						
Type of Program: MH	ł					
Service Partnership	(MHSA) #9093					
Life Skills (G.O.A.L.	-		port; Crisis Intervention			
Program Name: Gai	ining Older Adult	Program Descr	I iption: Case Management/ Brokerage; Mental H	ealth Services:		
Zummo	Joseph	143/32/48/	Associate Marriage and Family Therapist	103417		
Musa Zummo	Joseph	1821271404 1497927487	Associate Clinical Social Worker	64128 105417	Y Y	
McCall-Salerno	Betsey	1740574672	Licensed Marriage and Family Therapist	42444	Y	
Ketcham	Shauna	1841798865	Associate Clinical Social Worker	79168	Y	
Gonzales	Alicia	1679711790	Associate Clinical Social Worker	84800	Y	
Bautista	Daniel	1407490733	Associate Marriage and Family Therapist	11280	Y	
Anderson	Alexander	1417183385	Associate Clinical Social Worker	70838	Y	
Last Name	First Name	NPI	Type of License	License #	CC	
	I-• • • •		ww.sjgov.org/mhs	1		
Non-English Langua	ges: Spanish		londay - Friday 8:00 am- 5:00 pm			
۵ ۴			ds of Mentally III Offenders.			
. L			etency: Provides comprehensive psychiatric and in	ntegrative servic	ces to	
Phone Number:(209)	468-8786	Populations ser				
City: Stockton, CA 95						
Address : 1212 N Ca						
Type of Program: MH	ł					
Service Partnership	(MHSA) #9091	Medication Supp	oort; Crisis Intervention			
Program Name: For	ensic Court Full	Program Descr	iption: Case Management/ Brokerage; Mental H	ealth Services;		
Wong	Adam	1346859469	Licensed Psychiatric Technician	41676	N	
White	Carolina	1588134480	Licensed Psychiatric Technician	41058	Y	
Walter	Taffie	1134570542	Licensed Psychiatric Technician	32090	Y	
	Kendra	1447518204	Licensed Psychiatric Technician	36449	Y	

Address: 1212 N California Street City: Stockton, CA 95202								
Phone Number: (209) 468-8880		Populations served: Adult Cultural Competency: Transitional housing program focusing on engaging the target						
								cilitating prgress in recovery.
		Non-English Languag	es:	Office Hours: Mo	onday - Friday 8:00 am- 5:00 pm			
			website: https://www.sjgov.org/mhs					
Last Name	First Name	NPI	Type of License	License #	CC			
Program Name: InSPIRE (MHSA) #39AN Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202		Coordination (ICC	btion: Case Management/ Brokerage including Intersive Holo); Mental Health Services including Intensive Holon Support; Crisis Intervention		rices			
Phone Number: (209)		Populations serv	/ed: Adult					
		•	ency: MHSA innovation component providing lea	rnina communit	tv			
∩ Ġ .		•	pecialized cohorts.		.,			
Non-English Languag	jes:Spanish,	Office Hours: Monday-Friday 8:00 am- 5:00 pm						
Cambodian, Vietname		website: www.sjcl	bhs/mhs.org					
Last Name	First Name	NPI	Type of License	License #	CC			
Program Name: La F Service Partnership #9092 Type of Program: MH Address: 1212 N. Cal City: Stockton, CA 95	(MHSA) ifornia St.	Coordination (ICC	otion: Case Management/ Brokerage including Int c); Mental Health Services including Intensive Hor on Support; Crisis Intervention		rices			
Phone Number: (209)		Populations served: Adult - Focus on Latino outreach and access.						
۵Ġ		Cultural Compet individual and gro persons	ency: Psychiatric assessment, case managemen oup therapy with a special emphasis on serving Sp	t, medication su				
Non-English Languag	jes: Spanish		onday - Friday 8:00 am- 5:00 pm					
	1	website: www.sjcl		I				
Last Name	First Name	NPI	Type of License	License #	CC			
Aranda	Scarlette	1295929529	Associate Clinical Social Worker	83748	Y			
Cruz	Gloria	1104375724	Registered Nurse	723203	Y			
Cruz	Adriana	1871612697	Licensed Clinical Social Worker	81643	Y			
Fernandez	Jane	1194799395	Physician	A93060	Y			
Flores	Henry	1992038657	Associate Marriage and Family Therapist	123887	Y			
Hollowell	Shirley	1124143474	Registered Nurse	352081	Y			
Nelson	Nancy	1376635680	Physician	C50283	Y			
Resendez	Cynthia	1780877845	Physician	A84098	Y			

Smith	Pamela	1902889694	Physician	G84663	Υ	
Tamayo	Donnelle	1073871216	Registered Nurse	551864	Y	
Program Name: Mary Graham Children's Shelter #9008 Type of Program: MH		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention				
Address: 6861 Mar City: Stockton, CA	•					
Phone Number: (20		Populations se	rved: Children and Youth			
, ,	,	· ·	etency: Provides outpatient mental health services	s to residents of	Mary	
∩ Ġ		Graham Childre	-		,	
Non-English Langu	lages:	Office Hours: 2	24 Monday though Friday 8AM - 5PM			
0 0	0	website: none				
Last Name	First Name	NPI	Type of License	License #	СС	
Allanki	Sailaja	1306897723	Physician	138838	Y	
Ansari	Shaukat	1821294455	Physician	105923	Y	
Gonzalez	Mario	1083041685	Registered Nurse	95217456	Y	
Kumar	Gaurav	1235513102	Physician	A151187	Y	
Simien	Carla	1629564000	Licensed Psychiatric Technician	40771		
Torres	Josephine	1467018044	Associate Marriage and Family Therapist	119422	Y	
Yocham Program Name: M Type of Program: N	Amanda IHSA TAY FSP #39B1 //H	1326103516 Program Descr Coordination (IC	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir CC); Mental Health Services including Intensive Ho tion Support; Crisis Intervention	79068 ntensive Care	Y vices	
Yocham Program Name: M Type of Program: N Address: 1212 N. C City: Stockton, CA	Amanda IHSA TAY FSP #39B1 //H California 95202	1326103516 Program Descr Coordination (IC (IHBS); Medica	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir CC); Mental Health Services including Intensive Ho tion Support; Crisis Intervention	79068 ntensive Care		
Yocham Program Name: M Type of Program: N Address: 1212 N. C	Amanda IHSA TAY FSP #39B1 //H California 95202	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir CC); Mental Health Services including Intensive Ho tion Support; Crisis Intervention	79068 ntensive Care ome Based Ser	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20	Amanda IHSA TAY FSP #39B1 //H California 95202 9) 468-2335	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults	79068 ntensive Care ome Based Ser	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. (City: Stockton, CA Phone Number:(20 C	Amanda IHSA TAY FSP #39B1 //H California 95202 9) 468-2335	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm	79068 ntensive Care ome Based Ser	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. (City: Stockton, CA Phone Number:(20 C	Amanda IHSA TAY FSP #39B1 //H California 95202 9) 468-2335	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm	79068 ntensive Care ome Based Ser	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20	Amanda IHSA TAY FSP #39B1 //H California 95202 9) 468-2335 iages:	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir CC); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs	79068 Intensive Care Some Based Serr		
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20 △ と Non-English Langu Last Name	Amanda IHSA TAY FSP #39B1 //H California 95202 (9) 468-2335 (ages: First Name	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj NPI	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License	79068 Intensive Care ome Based Serr Int mental health	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20 △ と. Non-English Langu Last Name Jackson Program Name: O (OAS) #3980	Amanda IHSA TAY FSP #39B1 //H California 95202 (9) 468-2335 (9) 468-2335	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj NPI 1295181295 Program Descr	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License	79068 ntensive Care ome Based Serr nt mental health License # 79996	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20 △ と Non-English Langu Last Name Jackson Program Name: O (OAS) #3980 Type of Program: M Address: 1212 N C	Amanda IHSA TAY FSP #39B1 //H California 95202 (9) 468-2335 (9) 468-2335	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj NPI 1295181295 Program Descr	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental He	79068 ntensive Care ome Based Serr nt mental health License # 79996	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20 City: Stockton, CA Non-English Langu Last Name Jackson Program Name: O (OAS) #3980 Type of Program: M Address: 1212 N C City: Stockton, CA	Amanda IHSA TAY FSP #39B1 //H California 95202 /9) 468-2335 ///////////////////////////////////	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj NPI 1295181295 Program Descr Medication Supp	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Hotion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental Hebort; Crisis Intervention	79068 ntensive Care ome Based Serr nt mental health License # 79996	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. C City: Stockton, CA Phone Number:(20 △ と Non-English Langu Last Name Jackson Program Name: O (OAS) #3980 Type of Program: M Address: 1212 N C	Amanda IHSA TAY FSP #39B1 //H California 95202 /9) 468-2335 ///////////////////////////////////	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compe services Office Hours: I website: www.sj NPI 1295181295 Program Descr Medication Supp Populations se Cultural Compe Cultural Compe	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental He	79068 Intensive Care Intensive Care Intensive Based Serr Intensive Intensive Care Intensive Care Intensive Intensive Care Intensive Intensive Intensive Care Intensive Intens	vices	
Yocham Program Name: M Type of Program: M Address: 1212 N. (City: Stockton, CA Phone Number:(20 City: Stockton, CA Non-English Langu Last Name Jackson Program Name: O (OAS) #3980 Type of Program: M Address: 1212 N C City: Stockton, CA	Amanda IHSA TAY FSP #39B1 //H California 95202 /9) 468-2335 ///////////////////////////////////	1326103516 Program Descr Coordination (IC (IHBS); Medica Populations se Cultural Compensation services Office Hours: I website: www.sj NPI 1295181295 Program Descr Medication Supp Populations se Cultural Compensation Cultural Compensation (60+) provided b	Licensed Marriage and Family Therapist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Adults etency: Full service partnership providing outpatie Monday - Friday 8:00 am- 5:00 pm cbhs.org/mhs Type of License Associate Clinical Social Worker iption: Case Management/ Brokerage; Mental He bort; Crisis Intervention rved: Older Adult etency: Comprehensive Behavioral Health Service	79068 Intensive Care Intensiting Care Intensing Car	vices	

Cambodian, Vietnam	ese	website: www.sjc	bhs.org/mhs			
Last Name	First Name	NPI	Type of License	License #	CC	
Blue	Christine	1093786683	Physician	A10733	Y	
Clay	Jeanette	1861950222	Associate Clinical Social Worker	86060	Y	
Cusumano	Katherine	1659988822	Associate Professional Clinical Counselor	8125	Y	
House	Tracy	1720503550	Licensed Psychiatric Technician	32050	Y	
Resendez	Cynthia	1780877845	Physician	A84098	Y	
Vales	Kevin	1952525909	Licensed Marriage and Family Therapist	79770	Y	
Program Name: Pat	hways to Wellbeing	Program Descri	ption:Case Management/ Brokerage including Int	ensive Care	•	
#9020		-	C); Mental Health Services including Intensive Ho		/ices	
Type of Program: MH	ł	(IHBS); Medicati	on Support; Crisis Intervention			
Address : 620 N. Au		(<i>)</i>				
City: Stockton, CA 95						
Phone Number: (209) 468-1547	•	ed: Children and Youth		101	
∧ F		•	tency: Provides in-home and in-community outpat	lient mental hea	aith	
∩¢_	A A A		Code 300 dependent SJC children			
Non-English Langua	ges: Spanish	Office Hours:	Monday - Friday 8:00 am - 5:00 pm			
	1	website: https:ww			r	
Last Name	First Name	NPI	Type of License	License #	CC	
Allanki	Sailaja	1306897723	Physician	138838	Y	
Campos Ramos	Marc	1487715785	Licensed Clinical Social Worker	25797	Y	
Castaneda-Jensen	Renessa	1376664862	Licensed Marriage and Family Therapist	81528	Y	
Del Toro	Jose	1578058681	Licensed Marriage and Family Therpaist	120167	Y	
Gipaya	Juanita	1235500042	Licensed Marriage and Family Therapist	126901	Y	
Heidenberg	Bradley	1255764627	Licensed Marriage and Family Therapist	98495	Y	
Hernandez	Lea	1063171676	Licensed Clinical Social Worker	104626	Y	
Payne	Sheilena	1336437656	Licensed Marriage and Family Therapist	94571	Y	
Pollock	Leora	1245663426	Licensed Clinical Social Worker	75192	Y	
Samson	Maria	1619515640	Associate Marriage and Family Therapist	130181	Y	
Program Name: Pet	erson Hall #9009	Program Descri	ption: Case Management/ Brokerage including In	tensive Care	-	
Type of Program: MH	4	Coordination (ICC	C); Mental Health Services including Intensive Ho	me Based Serv	/ices	
Address: 535 W Matt		(IHBS); Medicati	on Support; Crisis Intervention			
City: French Camp, C						
		Denulations comusel. Children and Vauth				
Phone Number (209)	400-4240	Populations served: Children and Youth				
~ L		Peterson Hall.	tency: Provides outpatient mental health services	to youth detain	ieu al	
۵ <u>۴</u>	0					
Non-English Languag	jes: Spanisn	Office Hours:	Monday - Friday 8:00 am - 8:00 pm			
		una la altera de C	Saturday - Sunday 10:00 am - 7:00 pm			
		website: https:ww				
Last Name	First Name	NPI	Type of License	License #	CC	
Bavery	Karina	1477891679	Licensed Marriage and Family Therapist	121608	Y	
Burke	Billy	1922483932	Associate Professional Clinical Counselor	4938	Y	
Gonzalez	Mario	1083041685	Registered Nurse	95217456	Y	

Kumar	Gaurav	1235513102	Physician	A151187	Y
Martinez	Adriana	1851831242	Licensed Marriage and Family Therapist	131299	Y
Mullen	Alvin Jay	1336808971	Psychiatric Technican	41866	Y
Nelson	Michelle	1891173357	Licensed Marriage and Family Therapist	11430	Y
Pablico	Shiella	1588036321	Licensed Psychiatric Technician	37620	Y
Shabneet	Hira Brar	1851598452	Physician	A112447	Ŷ
Yocham	Amanda	1326103516	Licensed Marriage and Family Therapist	79068	Y
Program Name: Facility (PHF) #3 Type of Program: Address: 1212 N. City: Stockton, CA	MH California St	Program Descr	iption: Non-Hospital PHF		
Phone Number: (209) 468-8686		Populations se	rved: Adult		
ΔĠ		Cultural Compe	etency: Inpatient psychiatric hospitalization servic	es	
Non-English Languages:Spanish Cambodian, Vietnamese		Office Hours: (OPEN 24 HOURS		
		website: https:w	ww.sjgov.org/mhs		
Last Name	First Name	NPI	Type of License	License #	CC
Abundez	Jesse	1841413036	Licensed Psychiatric Technician	29162	Y
Arriola	Eulalie	1255573044	Licensed Psychiatric Technician	34426	Y
Bokelman	Roy	111404003	Licensed Psychiatric Technician	32628	Y
Brown	Brandi	1316060023	Registered Nurse	713008	Y
Cabrera	Gilbert	1679693766	Registered Nurse	565185	Y
Camello	Bena	1053581116	Licensed Clincial Social Worker	65302	Y
Chapin	Larry	1528200169	Licensed Psychiatric Technician	26162	Y
Clutario	Dindo	1164664512	Licensed Psychiatric Technician	34295	Y
Dapon	Jeanette	1780152918	Registered Nurse	824521	Y
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Y
Fortes	Catherine	1346681442	Licensed Psychiatric Technician	36982	Y
Gill	Paramijit	1073629218	Physician	A49224	Y
Graff	Robert	1366560112	Physician	G70479	Y
Harbin	Toni	1639475049	Licensed Psychiatric Technician	28726	Y
Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Y
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Y
Kaur	Narinder	1063006294	Licensed Psychiatric Technician	41886	Ν
Kottke	Marline	1891223111	Licensed Vocational Nurse	198957	Y
Laizer	Gloria	1255706479	Registered Nurse	764452	Y
Limas	Stephanie	1053433748	Licensed Marriage and Family Therapist	99397	Y
Little	Christy	1497978795	Licensed Psychiatric Technician	28731	Y
Look	Jasmin	1194143198	Licensed Psychiatric Technician	37492	Y
Mendoza	Michelle	1477951812	Registered Nurse	797022	Y
Menius	Victoria	1487074258	Licensed Psychiatric Technician	37534	Y
Michael	Kimberley	1538831151	Licensed Psychiatric Technician	29086	Ν
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Y

Montantes	Michael	1780018390	Licensed Psychiatric Technician	37071	Y
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Y
Ota	Robert	1578786554	Licensed Psychiatric Technician	33792	Y
Phillips	Heather	114530250	Licensed Psychiatric Technician	41710	Ν
Pinano	Paolo	1245352616	Licensed Psychiatric Technician	33726	Y
Ruiz	Ronald	1700907094	Licensed Psychiatric Technician	27494	Y
Sahota	Mandeep	1609536994	Registered Nurse	831415	Ν
Seba	Vicki	1639291636	Licensed Psychiatric Technician	31714	Y
Seraypheap	Arunny	1013037274	Registered Nurse	547944	Y
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Y
Shah	Mamoona	1407978471	МНС	Waivered	Y
Silver	Hilary	1720201221	Physician	C33442	Y
Singh	Devi	1962083725	Registered Nurse	818277	Ν
Tuning	Frankie	1073631727	Registered Nurse	95171895	N
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	Y
Villasenor	Kendra	1447518204	Licensed Psychiatric Technician	36449	Y
White	Caroline	1588134480	Licensed Psychiatric Technician	41058	Y
Wong	Adam	1346859469	Licensed Psychiatric Technician	41676	Ν
MH Services Lod Type of Program: Address: 1209 W.	MH Tokay Street, Suites	Coordination (IC	iption: Case Management/ Brokerage including Ir C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention		rices
MH Services Lod Type of Program:	Ii Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M	C); Mental Health Services including Intensive He tion Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Serv ssment, medication support, group and individual	ome Based Serv adults (18-60), ices include	
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Phone Number:(20 Non-English Lang	Ii Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 uages: Spanish	Coordination (IC (IHBS); Medicat Populations se Cultural Competic children, youth, a psychiatric asse management. Office Hours: M website: https://	C); Mental Health Services including Intensive Health tion Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Serv ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs	ome Based Serv adults (18-60), ices include therapy, and cas	Se
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Done Number:(20 Non-English Lang Last Name	II Clinic #3924 MH Tokay Street, Suites , 14, and 16 240 09) 331-2070 uages: Spanish First Name	Coordination (IC (IHBS); Medicat Populations se Cultural Competi- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI	C); Mental Health Services including Intensive Heation Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License	adults (18-60), ices include therapy, and cas	se CC
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Defense Number:(20 Non-English Lang Last Name Abdullahi	Ii Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 uages: Spanish First Name Krissie	Coordination (IC (IHBS); Medicat Populations se Cultural Competic children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762	C); Mental Health Services including Intensive Health tion Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist	adults (18-60), ices include therapy, and cas License # 125000	Se CC Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Done Number:(20 Non-English Lang Last Name Abdullahi Alban	II Clinic #3924 MH Tokay Street, Suites 14, and 16 40 09) 331-2070 uages: Spanish First Name Krissie Benjamin	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762 1932227295	 C); Mental Health Services including Intensive Health Services including Intensive Health Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services for and their families living in North County area. Services and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living in North County area. Services for and their families living and their families living and their families living and their families living area. Services for and their families living and services for and their families living and their families living area. Services for area. Se	adults (18-60), ices include therapy, and cas License # 125000 26094	Se СС Ү Ү
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Characteristic Constraints) Non-English Lang Last Name Abdullahi Alban Allanki	II Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 Uages: Spanish First Name Krissie Benjamin Sailaja	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762 1932227295 1306897723	C); Mental Health Services including Intensive Health tion Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician	adults (18-60), ices include therapy, and cas License # 125000 26094 138838	Se CC Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20	II Clinic #3924 MH Tokay Street, Suites 14, and 16 40 09) 331-2070 First Name Krissie Benjamin Sailaja Shaukat	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762 1932227295 1306897723 1821294455	 C); Mental Health Services including Intensive Heation Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services for and their families living in North County area. Services and their families living in North County area. Services for and their families living in North County area. Services and their families living in North County area. Services and their families living and individual for the services for and their families living in North County area. Services and their families living in North County area. Services and their families living and their families living in North County area. Services and their families living in North County area. Services and their families living in North County area. Services and their families living and th	• adults (18-60), ices include therapy, and cas 125000 26094 138838 105923	Se CC Y Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20 Chow	II Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 Vages: Spanish First Name Krissie Benjamin Sailaja Shaukat Christopher	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// 1407307762 1932227295 1306897723 1821294455 1124530100	C); Mental Health Services including Intensive Health tion Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Physician Licensed Psychiatric Technician	• adults (18-60), ices include therapy, and cas 125000 26094 138838 105923 38077	Se
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Display the second Non-English Lang Last Name Abdullahi Alban Allanki Ansari Chow Doronio	li Clinic #3924 MH Tokay Street, Suites 14, and 16 40 09) 331-2070 First Name Krissie Benjamin Sailaja Shaukat Christopher Ramil	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// 1407307762 1932227295 1306897723 1821294455 1124530100 1871767376	 C); Mental Health Services including Intensive Heation Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ment, medication support, group and individual forday - Friday, 8:00 am - 5:00 pm www.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Licensed Psychiatric Technician Registered Nurse 	• adults (18-60), ices include therapy, and cas 125000 26094 138838 105923 38077 555151	Se CC Y Y Y Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20) Last Name Abdullahi Alban Allanki Ansari Chow Doronio Hill	II Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 Vages: Spanish First Name Krissie Benjamin Sailaja Shaukat Christopher Ramil Patricia	Coordination (IC (IHBS); Medica Populations se Cultural Compe- children, youth, a psychiatric asse management. Office Hours: M website: https:// 1407307762 1932227295 1306897723 1821294455 1124530100 1871767376 1902926231	C); Mental Health Services including Intensive Heation Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Serv ssment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Licensed Psychiatric Technician Registered Nurse Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychiatric Technician	• adults (18-60), ices include therapy, and cas 26094 138838 105923 38077 555151 23764	Se Y Y Y Y Y Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20 Last Name Abdullahi Alban Allanki Ansari Chow Doronio Hill Kumar	II Clinic #3924 MH Tokay Street, Suites 14, and 16 40 09) 331-2070 First Name Krissie Benjamin Sailaja Shaukat Christopher Ramil Patricia Gaurav	Coordination (IC (IHBS); Medica Populations se Cultural Competi- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762 1932227295 1306897723 1821294455 1124530100 1871767376 1902926231 1235513102	 C); Mental Health Services including Intensive Health Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ment, medication support, group and individual forday - Friday, 8:00 am - 5:00 pm Www.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Licensed Psychiatric Technician Registered Nurse Licensed Marriage and Family Therapist Physician 	• adults (18-60), ices include therapy, and cas 125000 26094 138838 105923 38077 555151 23764 A151187	Se CC Y Y Y Y Y Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20 Last Name Abdullahi Alban Allanki Ansari Chow Doronio Hill Kumar Lugtu	II Clinic #3924 MH Tokay Street, Suites , 14, and 16 40 09) 331-2070 First Name Krissie Benjamin Sailaja Shaukat Christopher Ramil Patricia Gaurav Debbie	Coordination (IC (IHBS); Medica Populations se Cultural Compe children, youth, a psychiatric asse management. Office Hours: M website: https:// 1407307762 1932227295 1306897723 1821294455 1124530100 1871767376 1902926231 1235513102 1396333266	 C); Mental Health Services including Intensive Health Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Servessment, medication support, group and individual fonday - Friday, 8:00 am - 5:00 pm ww.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Licensed Psychiatric Technician Registered Nurse Licensed Marriage and Family Therapist Physician Associate Marriage and Family Therapist Physician Associate Marriage and Family Therapist 	• adults (18-60), ices include therapy, and cas 26094 138838 105923 38077 555151 23764 A151187 121448	Se CC Y Y Y Y Y Y Y Y Y
MH Services Lod Type of Program: Address: 1209 W. 1, 3, 5, 6, 7, 9, 12, City: Lodi, CA 952 Phone Number:(20 Chone Number:(20 Last Name Abdullahi Alban Allanki Ansari Chow Doronio Hill Kumar	II Clinic #3924 MH Tokay Street, Suites 14, and 16 40 09) 331-2070 First Name Krissie Benjamin Sailaja Shaukat Christopher Ramil Patricia Gaurav	Coordination (IC (IHBS); Medica Populations se Cultural Competi- children, youth, a psychiatric asse management. Office Hours: M website: https:// NPI 1407307762 1932227295 1306897723 1821294455 1124530100 1871767376 1902926231 1235513102	 C); Mental Health Services including Intensive Health Support; Crisis Intervention rved: Adult, Children, and Youth etency: Comprehensive mental health services for and their families living in North County area. Services ment, medication support, group and individual forday - Friday, 8:00 am - 5:00 pm Www.sjgov.org/mhs Type of License Associate Marriage and Family Therapist Licensed Clinical Social Worker Physician Licensed Psychiatric Technician Registered Nurse Licensed Marriage and Family Therapist Physician 	• adults (18-60), ices include therapy, and cas 125000 26094 138838 105923 38077 555151 23764 A151187	Se CC Y Y Y Y Y Y Y Y

Strayhorn	Earlene	1134211246	Physician	C68926	Y		
Program Name: San Joaquin County		Program Description: Case Management/ Brokerage including Intensive Care					
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 ∩ €. 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: Adult Cultural Competency: Comprehensive mental health services for adults (18-60) living in South 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					
0 0		website: sjcbhs.c	· · · · ·				
Last Name	First Name	NPI	Type of License	License #	СС		
Amador	Keith	1891127403	Licensed Marriage and Family Therapist	102725			
Everson	Maja	1891127403	Physician	102725			
Pasa	Angelo	1689874125	Registered Nurse	691250			
Stokes	Vicki	1164061024	Associate Clinical Social Worker	88366	Y		
Thompson	Beverly	1528311230	Associate Clinical Social Worker	70671	Y		
	Transcultural Clinic		iption: Case Management/ Brokerage including Ir				
Type of Program: Address: 4422 N. D1-D4 City: Stockton, CA	Pershing Ave, Suites						
Phone Number: (2		Populations served: Adult Focus on outreach and access for the Southeast Asian populations					
۵ ۴		Southeast Asia. Vietnamese.	Cultural Competency: Full Service Partnership with emphasis on serving persons from Southeast Asia. Services available in Cambodian (Khmer), Hmong, Laotian (Lao) and Vietnamese.				
Non-English Lang Laotian, Hmong, V	juages: Cambodian, √ietnamese, Thai	Office Hours: Monday - Friday, 8:00 am - 5:00 pm					
		website: www.sjo		licorco #			
Last Name	First Name	NPI	Type of License	License #	CC		
Egbuchulam	Angela	1700231321	Associate Clinical Social Worker	61343	Y		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Y		
Kazmi	Syed	1437310273	Physician	A33815	Y		
Lose	Alexsandria	1053557306	Associate Marriage and Family Therapist	98396	Y		
Nguyen	Quynh-Chi	1417371014	Registered Nurse	845080	Y		
		11017407476	IAccociato Clinical Social Workor				
Park Smith	Kyung Soo Pamela	1013493436 1902889694	Associate Clinical Social Worker Physician	95613 G84663	Y Y		

Xiong	Maly	1932218849	Licensed Marriage and Family Therapist	86055	Y		
Program Name: Sou	, <i>i</i>	Program Description: Case Management/ Brokerage including Intensive Care					
Recovery Services (
Southeast Asian po	-	Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention					
Service Partnership	·		on Support, Chais intervention				
-	. ,						
Type of Program: MH							
Address:4422 N. Pers	sning Avenue, Suite						
D2, D3, D4, D5, D6	2007						
City: Stockton, CA 95		Denulations com	red. Adult Facus on outroach and access for the	Coutbooot Acie	-		
Phone Number: (209) 953-8843		populations service	ved: Adult Focus on outreach and access for the S	Southeast Asian	n		
۵Ŀ			ency: Full Service Partnership with emphasis on	serving persons	s from		
		-	Services available in Cambodian (Khmer), Hmong,	• •			
		Vietnamese.			and		
Non-English Languag	les: Cambodian		onday - Friday, 8:00 am - 5:00 pm				
Laotian, Hmong, Vieti							
		website: www.sjc	bhs.ora/mhs				
Last Name	First Name	NPI	Type of License	License #	CC		
Egbuchulam	Angela	1700231321	Associate Clinical Social Worker	61343	Ŷ		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Ŷ		
Kazmi	Syed	1437310273	Physician	A33815	Ŷ		
Lose	Alexsandria	1053557306	Associate Marriage and Family Therapist	98396	Ŷ		
Nguyen	Quynh-Chi	1417371014	Registered Nurse	845080	Ŷ		
Park	Kyung Soo	1013493436	Associate Clinical Social Worker	95613	Ŷ		
Smith	Pamela	1902889694	Physician	G84663	Y		
Xiong	Maly	1932218849	Licensed Marriage and Family Therapist	86055	Y		
CONTRACT ORGAN	IZATIONAL PROVID	ERS		•			
Program Name: ASF	PIRAnet	Program Descrip	otion: Case Management Brokerage/Intensive C	Care Coordination	on		
#39AR		(ICC); Mental He	alth Services including Intensive Home Based Se				
Type of Program: MH			avioral Services (TBS); Crisis Intervention				
Address: 6 S. El Dora			х <i>Г</i> .				
City: Stockton, CA 95	202						
Phone Number: (209)		Populations serv	ved: Children and Youth				
,		Cultural Competency: Provides Therapeutic Behavioral Services (TBS) and crisis					
∆ Ġ .		stabilization servi	ces as an alternative to psychiatric hospitalization.				
Non-English Languag	jes:		onday - Friday, 8:00 am - 5:00 pm				
		website: https//ww	vw.aspiranet.org				
Last Name	First Name	NPI	Type of License	License #	CC		
Chinaka	Nwokedi	1114488251	Associate Clinical Social Worker	98128	Y		
Davis	Kimberly	1992842728	Associate Marriage and Family Therapist	89649	Y		
Fox	Stephen	1619359445	Associate Marriage and Family Therapist	108563	Y		
Libre	Alyssa	1841840394	Associate Clinical Social Worker	91717	Y		
Thysell	Tandrea	1457863516	Associate Marriage and Family Therapist	123831	Y		

Willis	Joetta	1760716039	Licensed Marriage and Family Therapist	52986	Y				
Program Name: Casa			otion: Case Management Brokerage/Intensive Car	-					
#39AB Type of Program: MH Address : 1722 S. Lewis Road City: Camarrillo, CA 93012		(ICC); Mental He Therapeutic Beha	alth Services including Intensive Home Based Ser avioral Services (TBS); Crisis Intervention		I				
Phone Number: (805) 981-1422 으 년		· · ·	/ed: Children and Youth						
			ency: Provides outpatient mental health services						
Non-English Languag	es:		onday - Friday, 8:00 am - 5:00 pm						
· · · · ·		NPI	ww.caspacifica.org	License #	СС				
Last Name OUT OF COUNTY P	First Name		Type of License	License #	Ľ				
OUT OF COUNTY PI	KUVIDEK								
Program Name: CBIS Pacific) #39A1 Type of Program: MH Address:405 E. Pine S City: Stockton, CA 95	Street	Program Descrip	otion: Mental Health Services Intensive Home Ba	ased Services					
Phone Number: (209)		Populations served: Adult							
∆ &		Cultural Competency: Behavioral Intervention Services							
Non-English Languag	es: Spanish	Office Hours: Monday - Friday 8:00 am - 5:00 pm							
		website: none							
Last Name	First Name	NPI	Type of License	License #	CC				
NON LICENSED STA	FF ONLY								
Program Name: Cha #9057 Type of Program: MH Address : 714 W. Main City: Grass Valley, CA	n Street	Coordination (ICC	otion: Case Management/ Brokerage including Intersive Hon c); Mental Health Services including Intensive Hon on Support; Crisis Intervention		ices				
Phone Number: (530)		Populations serv	/ed: Children and Youth						
		Cultural Compet	ency: Outpatient Mental Health Services						
Non-English Languag	es:				Office Hours: Monday - Friday 8:00 am - 5:00 pm				
		website: www.charisyouthcenter							
Γ.			ansyouncemer						
Last Name	First Name	NPI	Type of License	License #	CC				
OUT OF COUNTY PF	ROVIDER			License #	CC				
	ROVIDER d Abuse #39AS ornia Street	NPI Program Descrip	Type of License btion: Case Management/ Brokerage including Int c); Mental Health Services including Intensive Hon	ensive Care					
OUT OF COUNTY PE Program Name: Chile Prevention Council Type of Program: MH Address: 540 N. Calife	ROVIDER d Abuse #39AS ornia Street 202	NPI Program Descrip Coordination (ICC (IHBS); Crisis Inte	Type of License btion: Case Management/ Brokerage including Int c); Mental Health Services including Intensive Hon	ensive Care					

Non-English Lang	juages:	Office Hours: M	londay - Friday 8:00 am - 5:00 pm				
5 5	, ,		ochildabuse.org				
Last Name	First Name	NPI	Type of License	License #	CC		
Archangel	Ashle	1801216965	Associate Marriage and Family Therapist	106324	Y		
Beck	Vienna	1396390878	Associate Marriage and Family Therapist	128219	Y		
Goode	Dulce	1083288542	Associate Marriage and Family Therapist	130540	Y		
Jacka	Karen	1790908788	Licensed Clinical Social Worker	16470	Y		
Lowe	Cassandra	1205278694	Licensed Marriage and Family Therapist	118868	Y		
Program Name:	Children's Home of	Program Descr	iption: Case Management/ Brokerage including Ir	ntensive Care			
Stockton #39BC		Coordination (IC	C); Mental Health Services including Intensive Ho	me Based Serv	vices		
Type of Program:	MH	•	pport; Crisis Intervention				
Address: 430 N. F							
City: Stockton, CA							
Phone Number: (2		Populations se	rved: Youth and Adolescent				
□ と			etency: Short Term Residential Therapeutic Progra	am			
Non-English Lang	luades:	Office Hours: 2					
	Judgool	Website: www.c					
Last Name	First Name	NPI	Type of License	License #	CC		
Wells	Katelyn	1730669235	Licensed Marriage and Family Therapist	32808	Y		
Address 1227 E L City: Stockton, CA	•						
Phone Number:(2	09) 466-0853	Populations se	Populations served: Youth and Adolecent				
∆ Ġ .		Cultural Compe	Cultural Competency: Short Term Residential Therapeutic Program				
Non-English Lang	juages:	Office Hours: 2	4 HOURS				
		website: www.ch	nsstk.com				
Last Name	First Name	NPI	Type of License	License #	CC		
Cole	Paige	1003373382	Associate Marriage and Family Therapist	118061	Y		
Reinhardt	Janae	1689296311	Associate Clinical Social Worker	98064	Y		
Program Name:	Circle C Ranch Inc.	Program Descr	iption: Case Management/ Brokerage including Ir	ntensive Care			
#39CR		Coordination (IC	C); Mental Health Services including Intensive Ho	me Based Ser	vices		
Type of Program:	MH	(IHBS); Crisis In					
Address: 342 Bes	st Rd						
City: Stockton, CA	A 95215						
Phone Number: (916) 295-8582	Populations se	rved: Youth and Adolescent				
∩ ċ .		Cultural Compe	etency: Short Term Residential Therapeutic Progra	am			
Non-English Lang	juages:	Office Hours: 2					
		Website: www.c	irclecranch.org				
Last Name	First Name	NPI	Type of License	License #	СС		
			•				

Program Name: Community Re-Entry Program Description: Case Management/ Brokerage; Mental Health Serry Program ILS #9044 Intervention Type of Program: MH Address:405 E. Pine Street Intervention					
Type of Program: MH	Program Description: Case Management/ Brokerage; Mental Health Services; Crisis Intervention				
City: Stockton, CA 95204					
Phone Number: (209) 464-5519 Populations served: Adult					
Cultural Competency: Provides independent living skills training and rehat	oilitation				
Non-English Languages: Spanish Office Hours: Monday - Friday 8:00 am - 5:00 pm					
website: none					
Last Name First Name NPI Type of License Licens	e # CC				
NON LICENSED STAFF ONLY					
Program Name: Crittenton Services For Program Description: Case Management Brokerage/Intensive Care Coord	lination				
Children And Families #39B3 (ICC); Mental Health Services including Intensive Home Based Services (II	IBS);				
Type of Program: MH Therapeutic Behavioral Services (TBS); Medication Support; Crisis Interve	ention				
Address: 100 E. Valley View Drive					
City: Fullerton, CA 92832					
Phone Number: (714) 680-9000 Populations served: Children and Youth	Populations served: Children and Youth				
	Cultural Competency: Residential facility providing mental health treatment to youth.				
Note English Languages: Office Hours: Monday - Friday 8:30 am- 5 pm					
website: www.crittentonsocal.org					
Last Name First Name NPI Type of License Licens	e# CC				
OUT OF COUNTY PROVIDER					
Program Name: EA Family Services Program Description: Case Management/Brokerage inlcuding Intensive C	Care				
#39CP Coordinatiion (ICC); Mental Health Services including Intensive Home Base					
(IHBS); Crisis Intervention.					
Type of Program: MH					
Address: 525 W. Kettleman Lane					
City: Lodi, CA 95240					
Phone Number: (209) 369-1939 Populations served: Youth & Adolescent	Populations served: Youth & Adolescent				
Cultural Competency: Short Term Residenital Treatment Therapeutic Prog	Cultural Competency: Short Term Residenital Treatment Therapeutic Program				
Non-English Languages: Office Hours: 24 Hours					
website: www.ea.org					
Last Name First Name NPI Type of License Licens	e # CC				
Sabado Amberly 1245829399 Associate Clinical Social Worker 10080	N				
	Care				
Program Name: EA Family Services Program Description: Case Management/Brokerage inlcuding Intensive C	Coordinatiion (ICC); Mental Health Services including Intensive Home Bases Services				
#39CN Coordinatiion (ICC); Mental Health Services including Intensive Home Base					
#39CN Coordinatiion (ICC); Mental Health Services including Intensive Home Base					
#39CN Type of Program: MH Coordinatiion (ICC); Mental Health Services including Intensive Home Base (IHBS); Crisis Intervention.					

<u>ه ج</u>		Cultural Competency: Short Term Residenital Treatment Therapeutic Program					
Non-English Languages:		Office Hours: 24 Hours					
	-	website: www.ea.org					
Last Name	First Name	NPI	Type of License	License #	CC		
Sabado	Amberly	1245829399	Associate Clinical Social Worker	10080	Ν		
Program Name: Edgewood Center for Type of Program: MH Address: 1801 Vincente Street - Buildings City: San Francisco, CA 94116 Phone Number: (415) 681-3211 Lon English Languages:		(ICC); Mental H Therapeutic Beh	Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention				
			rved: Children and Youth				
		· · ·	tency: Provides outpatient mental health service				
Non-English Languages:		website: www.ed	Monday - Friday 8:30 am- 5:00 pm				
Last Name	First Name	NPI	Type of License	License #	СС		
OUT OF COUNTY					CC		
Program Name: Turning Point Community Program: Esperanza Type of Program: MH Address: 1803 W. March Lane Suite C&D City: Stockton, CA 95207		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Crisis Intervention. Full-Service Partnership Program; Evidenced Based model - ACT (Assertive Community Treatment)					
Phone Number: (20	09) 636-5353	Populations served: Those diagnosed with a severe mental health diagnosis.					
<u> ひ ひ </u>		Cultural Competency: Veterans, LGBT, Older Adults, Physical Disabilities and Mental					
Non-English Langu	ages: Spanish, Hmong	Office Hours: Monday - Friday 8:30 am - 5:00 pm					
		website: www.tp	cp.org				
Last Name	First Name	NPI	Type of License	License #	СС		
Amaral	Angela	1831655257	Associate Marriage and Family Therapist	124155	Y		
Bernard	Alexis	1255456943	MFT-I	92866	Y		
Browning	Jessika	1437752052	N/A	N/A	Y		
Casaday	Bobbie	1619627601	Licensed Vocational Nurse	VN189374	Y		
Emunah	Ariella	1205836996	Physician	A97295	Y		
Goldfine-Lewis	Roberta	1588211502	Licensed Vocational Nurse	91927	Y		
Haskell	Erica	1154936383	N/A	N/A	Y		
Hieb	Kristina	1407010739	Associate Marriage and Family Therapist	113741	Y		
Largaespada	Alexander	1881902161	Licensed Marriage and Family Therapist	125526	Y		
Nevarez	Maria aka Angelica		N/A	N/A	Y		
Pruitt	Kathryn	1629277132	Licensed Marriage and Family Therapist	97463	Y		
Ramirez	Aly	1316544539	N/A	N/A	Y		
Retchfertig	Medora	1861874216	Associate Clinical Social Worker	104274	Y		
Stokes	Sharon	1144376070	Nurse Practitioner	AP4876	Y		
Wright	Kathleen	1679613327	N/A	N/A	Y		
Program Name: F Type of Program: N		Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS);					

		I				
Address: 3800 Coolidge Avenue		Therapeutic Behavioral Services (TBS); Crisis Intervention				
City: Oakland, CA 94602						
			rved: Children and Youth			
∩ Ġ.			etency: Provides outpatient mental health services	3		
Non-English Languag	jes:		londay - Friday 8:30 am - 5 pm			
		website: www.fre	edfinch.org			
Last Name	First Name	NPI	Type of License	License #	СС	
41. Fred Finch You	th Center- OUT OF	COUNTY PROVI	DER			
Program Name: G.L	.O.M.A.R.F. 3 #39CB	Program Descri	iption: Crisis Residential Treatment Program		•	
Type of Program: MH						
Address : 1117 S. Gr						
City: Stockton, CA 9						
Phone Number: (209) 330-7155 x506		Populations ser	rved: Adult			
۵ د			tency: Crisis Residential Treatment Program			
Non-English Languag	100.	Office Hours: 2				
	JC0.	website: www.gl				
Last Name	First Name	NPI		License #	СС	
			Type of License Licensed Clinical Social Worker			
Hood	Keturah	1629241138		81315	Y	
Ortiz	Amanda	1588184477	Associate Marriage and Family Therapist	109399	Y	
Program Name: G.L		Program Descri	iption: Adult Transitional Residential Treatment P	rogram		
Type of Program: MH						
Address: 8210 Bright						
City: French Camp, C						
Phone Number:(209)	330-7155 x508	Populations served: Adult				
<u>ිරි</u>			etency: Adult Transitional Residential Treatment F	rogram		
Non-English Languag	jes:	Office Hours: 2				
		website: www.gl				
Last Name	First Name	NPI			1	
	i ii st itanie		Type of License	License #	СС	
Butler	Taylor	1669065140	Associate Professional Clinical Counselor	122866	Y	
Butler Hood						
	Taylor	1669065140	Associate Professional Clinical Counselor	122866	Y	
	Taylor	1669065140 1629241138	Associate Professional Clinical Counselor	122866	Y	
	Taylor Keturah	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker	122866	Y	
Hood	Taylor Keturah . O.M.A.R.F. 5 #39CC	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker	122866	Y	
Hood Program Name: G.L	Taylor Keturah . O.M.A.R.F. 5 #39CC	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker	122866	Y	
Hood Program Name: G.L Type of Program: MH	Taylor Keturah . O.M.A.R.F. 5 #39CC	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker	122866	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond	Taylor Keturah . O.M.A.R.F. 5 #39CC I Drive	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program	122866	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond City: Lodi, CA 95240 Phone Number: (209)	Taylor Keturah . O.M.A.R.F. 5 #39CC I Drive	1669065140 1629241138 Program Descri	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program	122866	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond City: Lodi, CA 95240 Phone Number: (209) C	Taylor Keturah . O.M.A.R.F. 5 #39CC Drive 330-7155 x597	1669065140 1629241138 Program Descri Populations ser Cultural Compe	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program rved: Adult stency: Crisis Residential Treatment Program	122866	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond City: Lodi, CA 95240 Phone Number: (209)	Taylor Keturah . O.M.A.R.F. 5 #39CC Drive 330-7155 x597	1669065140 1629241138 Program Descri Populations set Cultural Compe Office Hours: 24	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program rved: Adult stency: Crisis Residential Treatment Program 4 HOURS	122866	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond City: Lodi, CA 95240 Phone Number: (209) C & Non-English Languag	Taylor Keturah . O.M.A.R.F. 5 #39CC Drive 330-7155 x597 jes:	1669065140 1629241138 Program Descri Populations set Cultural Compe Office Hours: 24 website: www.gl	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program rved: Adult etency: Crisis Residential Treatment Program 4 HOURS om-arf.org	122866 81315	Y	
Hood Program Name: G.L Type of Program: MH Address: 458 Almond City: Lodi, CA 95240 Phone Number: (209) C	Taylor Keturah . O.M.A.R.F. 5 #39CC Drive 330-7155 x597	1669065140 1629241138 Program Descri Populations set Cultural Compe Office Hours: 24	Associate Professional Clinical Counselor Licensed Clinical Social Worker iption: Crisis Residential Treatment Program rved: Adult stency: Crisis Residential Treatment Program 4 HOURS	122866	Y	

Program Name: Turr			Licensed Clinical Social Worker	81315	Y			
	Program Name: Turning Point		Program Description: Case Management/ Brokerage including Intensive Care					
Community Program	•	Coordination (ICC); Mental Health Services including Intensive Home Based Services						
Type of Program: MH		(IHBS); Crisis Intervention. Full-Service Partnership Program; Evidenced Based Model-						
Address: 1803 W. March Lane Ste. C-D City: Stockton, CA 95207 Phone Number: (209) 636-5353 $\hat{\Box}$		ACT (Assertive C	community Treatment)					
		Populations con	ved: Those diagnosed with a severe mental hea	Ith diagnosis				
		•	tency: Veterans, LGBT, Older Adults, Physical Di		ontal			
			onday - Friday 8:30 a.m 5:00 p.m.		CIIIdi			
Hmong	co. opunion,	website: www.tpc						
Last Name	First Name	NPI	Type of License	License #	СС			
Amaral	Angela	1831655257	Associate Marriage and Family Therapist	124155	Y			
Bernard	Alexis	1255456943	MFT-I	92866	Y			
Browning	Jessika	1437752052	N/A	N/A	Y			
Casaday	Bobbie	1619627601	Licensed Vocational Nurse	VN189374	<u> '</u>			
Emunah	Ariella	1205836996	Physician	A97295	Y			
Goldfine-Lewis	Roberta	1588211502	Licensed Vocational Nurse	91927	Y			
Haskell	Erica	1154936383	N/A	N/A	Y			
Hieb	Kristina	1407010739	Associate Marriage and Family Therapist	113741	Ý			
Largaespada	Alexander	1881902161	Licensed Marriage and Family Therapist	125526	Y			
Nevarez	Maria aka Angelica		N/A	N/A	Y			
Pruitt	Kathryn	1629277132	Licensed Marriage and Family Therapist	97463	Ŷ			
Ramirez	Aly	1316544539	N/A	N/A	Ŷ			
Retchfertig	Medora	1861874216	Associate Clinical Social Worker		Ŷ			
Stokes	Sharon	1144376070	Nurse Practitioner	AP4876	Ŷ			
Wright	Kathleen	1679613327	N/A	N/A	Ŷ			
Program Name: Lati			ption: Case Management/ Brokerage; Mental He					
Health and Recovery Type of Program: MH Address : 237 E. Cha City: Stockton, CA 95	/ Services #90671 annel Street	Intervention						
Phone Number: (209)	444-8910	Populations serve	ved: Adult					
∩ €.			tency: Provides Culturally Competent Services to	Latinos				
Non-English Languag	es: Spanish		onday - Friday 8:00 am - 5:00 pm					
		www.elconcilio.or	g					
Last Name	First Name	NPI	Type of License	License #	CC			
Largaespada	Alexander	1881902161	Licensed Marriage and Family Therapist	125526	Y			
Wielenga	Wilton	1528126703	Licensed Clinical Social Worker	5681	Y			
Program Name: Lift	•	Program Descri	ption: Case Management/ Brokerage including I	ntensive Care				
Therapeutic Group Home, Inc #39CT Type of Program: MH Address: 786 Brookhurst Blvd City: Lathrop, CA 95330		Coordination (ICC (IHBS); Crisis Inte	C); Mental Health Services including Intensive Ho ervention	ome Based Serv	rices			

Phone Number: (951) 634-5570		Populations served: Youth and Adolescent					
∩ &		Cultural Competency: Short Term Residential Therapeutic Program					
Non-English Lang	uages:	Office Hours: 24 HOURS					
0 0	0	Website: www.liftupyourhead.org					
Last Name	First Name	NPI	Type of License	License #	CC		
Program Name: N	Martin Gipson	Program Descri	ption: Case Management/ Brokerage; Mental He	ealth Services;	Crisis		
Type of Program:	MH	Intervention					
Address : 405 E. F							
City: Stockton, CA 95204							
Phone Number: (209) 464-5519		Populations ser					
			tency: Provides socialization, vocational, and edu	ucational opport	unities		
		for Adult Mentally					
Non-English Lang	uages: Spanish	website: none	onday - Friday 8:00 am - 5:00 pm				
Last Name	First Name	NPI	Type of License	License #	CC		
NON LICENSED S							
	Parents By Choice	Program Descri	ا ption: Case Management/Brokerage including In	tensive Care	1		
Type of Program:	•	Coordination (ICC); Mental Health Services including Intensive Home Based Services;					
Address:306 E Ma		Crisis Intervention					
City: Stockton, CA							
-	09) 478-4554 ext. 1040	Populations served: Children, Adolescents, and Families					
	03) 470-4334 6xt. 1040	Cultural Competency: Therapeutic Foster Care/Mental Health Services; Positive					
ے ا Non-English Lang	uages: Spanish	Office Hours: Monday - Friday 10:00 am - 6:00 pm					
	uages. Opanish	website: www.parentsbychoice.net					
Last Name	First Name	NPI	Type of License	License #	СС		
Crusos	Amanda	1700418084	Associate Clinical Social Worker	94023	Ŷ		
Oliviera	Carlos	1992101612	Licensed Marriage and Family Therapist	116198	Ŷ		
Ramos	Mayra	1336552553	Licensed Marriage and Family Therapist	113207	Ŷ		
Program Name P	synergy Folsom	Program Descri	ption: Case Management/ Brokerage; Mental	Health Services	•		
Type of Program:	MH	Crisis Intervention	n				
Address: 9951 Ho							
City: Sacramento,							
ony. Cuoramonto,							
		Populations ser	ved: Adult				
Phone Number: (9	916) 364-5533						
≙ Ġ.			tency: Provides outpatient mental health services	6			
Non-English Lang	uages: Spanish		onday Friday 7:30 am-6:00 pm				
		website: www.ps					
Last Name	First Name	NPI	Type of License	License #	CC		
OUT OF COUNTY							
Program Name P	synergy - Sacramento	Program Descri	ption: Case Management/ Brokerage; Mental	Health Services	,		

Type of Program: MH		Crisis Intervention				
	Address: 4612 Roosevelt Avenue					
City: Sacramento, CA	L Contraction of the second seco					
Phone Number:(916)	379-5876	Populations serv	/ed: Adult			
∩ &		Cultural Compet	ency: Provides outpatient mental health services			
Non-English Languag	es: Spanish	Office Hours: Mo	nday Friday 7:30 am-6:00 pm			
	·	website: www.ps	ynergy.org			
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNTY P	ROVIDER					
Program Name: Psy	nergy - Sacramento	Program Descrip	tion: Case Management/ Brokerage; Mental Hea	Ith Services;	Crisis	
Type of Program: MH		Intervention				
Address: 4616 Roose						
City: Sacramento, CA	95820					
Phone Number: (916)	379-5876	Populations serv	ved: Adult			
∆ Ġ.		Cultural Compet	ency: Provides outpatient mental health services			
Non-English Languag	es: Spanish	Office Hours: Monday Friday 7:30 am-6:00 pm				
		website: www.psynergy.org				
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNTY P						
Program Name: San	Gabriel Children's	Program Descrir	I stion: Case Management/ Brokerage including Ir	tensive Care		
Type of Program: MH		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services				
rype of riogram. with		•	on Support; Crisis Intervention		1003	
Address : 4740 N. Gr	and Avanua					
City: Covina, CA 917		Donulations com	ad Children and Vauth			
Phone Number: (626)	009-2009	· ·	red: Children and Youth			
A E			ency: Provides outpatient mental health services			
Non-English Languag	es.		onday - Friday 8 am- 5 pm			
		website: www.sar				
Last Name	First Name				2	
			Type of License	License #	CC	
OUT OF COUNTY P			Type of License	License #	CC	
	ROVIDER					
Program Name: SG0	ROVIDER CC - Enid Home	Program Descrip	otion: Case Management Brokerage/Intensive C	are Coordinati		
	ROVIDER CC - Enid Home	Program Descrip (ICC); Mental He	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser	are Coordinati vices (IHBS);		
Program Name: SGO Type of Program: MH	ROVIDER CC - Enid Home	Program Descrip (ICC); Mental He	otion: Case Management Brokerage/Intensive C	are Coordinati vices (IHBS);		
Program Name: SGO Type of Program: MH Address : 337 S. Enic	ROVIDER CC - Enid Home	Program Descrip (ICC); Mental He	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser	are Coordinati vices (IHBS);		
Program Name: SGO Type of Program: MH Address : 337 S. Enic City: Azusa, CA 9170	ROVIDER CC - Enid Home I Avenue 2	Program Descrip (ICC); Mental He Therapeutic Beha	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser vioral Services (TBS); Medication Support; Crisis I	are Coordinati vices (IHBS);		
Program Name: SGC Type of Program: MH Address : 337 S. Enic City: Azusa, CA 9170 Phone Number: (626)	ROVIDER CC - Enid Home I Avenue 2	Program Descrip (ICC); Mental He Therapeutic Beha Populations serv	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser vioral Services (TBS); Medication Support; Crisis I ved: Children and Youth	are Coordinati vices (IHBS);		
Program Name: SGC Type of Program: MH Address : 337 S. Enic City: Azusa, CA 9170 Phone Number: (626)	ROVIDER CC - Enid Home I Avenue 2 859-2089	Program Descrip (ICC); Mental He Therapeutic Beha Populations serv Cultural Compet	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser vioral Services (TBS); Medication Support; Crisis I ved: Children and Youth ency: Provides outpatient mental health services	are Coordinati vices (IHBS);		
Program Name: SGC Type of Program: MH Address : 337 S. Enic City: Azusa, CA 9170 Phone Number: (626)	ROVIDER CC - Enid Home I Avenue 2 859-2089	Program Descrip (ICC); Mental He Therapeutic Beha Populations serv Cultural Compet	otion: Case Management Brokerage/Intensive C alth Services including Intensive Home Based Ser vioral Services (TBS); Medication Support; Crisis I ved: Children and Youth ency: Provides outpatient mental health services onday - Friday 8 am- 5 pm	are Coordinati vices (IHBS);		

Last Name	First Name	NPI	Type of License	License #	CC
OUT OF COUNTY P	ROVIDER				•
Program Name: SG	CC-Homerest Home	Program Descri	ption: Case Management Brokerage/Intensive	Care Coordinati	ion
Type of Program: MH		- · ·	alth Services including Intensive Home Based Se		
Address : 5329 N. Ho		· · ·	avioral Services (TBS); Medication Support; Crisis	· · ·	
City: Azusa, CA 9170					
Phone Number: (626		Populations ser	ved: Children and Youth		
∩& `´			tency: Provides outpatient mental health services	;	
Non-English Languag	ges:	•	londay - Friday 8 am- 5 pm		
	, ,	website: www.sar			
Last Name	First Name	NPI	Type of License	License #	CC
OUT OF COUNTY P					
Program Name: San	Joaquin Connect	Program Descri	ption: Case Management/ Brokerage including I	ntensive Care	
Type of Program: M⊦	•		C); Mental Health Services including Intensive Ho		/ices
•••	, getown Place, Suite D		on Support; Crisis Intervention		
City: Stockton, CA 9		(
Phone Number: (209		Populations ser	ved: Adult		
	, 200 0001	•	tency: Full Services Partnership (FSP) model who	ere staff create	а
Non-English Languag	nes: Snanish	-	onday - Friday 8:30 am- 5 pm		<u>u</u>
	goo. opanion,	website: www.tel			
				 <i></i>	
Last Name	First Name	INPI	LIVDE OT LICENSE	llicense #	
Last Name Bird	First Name	NPI 1386243590	Type of License	License #	CC Y
Bird	Alena	1386243590	Licensed Psychiatric Technician	41723	Y
Bird Enemmuo	Alena Ifeatu	1386243590 1952969008	Licensed Psychiatric Technician Nurse Practitioner	41723 95011649	Y Y
Bird Enemmuo Lorenz	Alena Ifeatu Arthur	1386243590 1952969008 1477603249	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist	41723 95011649 45350	Y Y Y
Bird Enemmuo	Alena Ifeatu	1386243590 1952969008	Licensed Psychiatric Technician Nurse Practitioner	41723 95011649	Y Y
Bird Enemmuo Lorenz Winslow	Alena Ifeatu Arthur Jason	1386243590 1952969008 1477603249 1336415025	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker	41723 95011649 45350 99684	Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur	Alena Ifeatu Arthur Jason mmitview Child	1386243590 1952969008 1477603249 1336415025 Program Descri	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including	41723 95011649 45350 99684 ntensive Care	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH	Alena Ifeatu Arthur Jason nmitview Child	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Ho	41723 95011649 45350 99684 ntensive Care	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placery	Alena Ifeatu Arthur Jason mmitview Child i	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including	41723 95011649 45350 99684 ntensive Care	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S	Alena Ifeatu Arthur Jason nmitview Child i /ille Dr. #2 95667	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Ho	41723 95011649 45350 99684 ntensive Care	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placery	Alena Ifeatu Arthur Jason nmitview Child i /ille Dr. #2 95667	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medicatio	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including C); Mental Health Services including Intensive Ho	41723 95011649 45350 99684 ntensive Care	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530	Alena Ifeatu Arthur Jason nmitview Child i /ille Dr. #2 95667	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including Intensive Holo C); Mental Health Services including Intensive Holo on Support; Crisis Intervention ved: Children and Youth	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530	Alena Ifeatu Arthur Jason nmitview Child I ville Dr. #2 95667) 644-2412	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Compete	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Hol on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530	Alena Ifeatu Arthur Jason nmitview Child I ville Dr. #2 95667) 644-2412	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competent Office Hours: Medication	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including Intensive Holo C); Mental Health Services including Intensive Holo on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 City: Placerville, CA S Phone Number: (530)	Alena Ifeatu Arthur Jason nmitview Child / /ille Dr. #2 95667) 644-2412	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competent Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Hol on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: M⊢ Address: 670 Placerv City: Placerville, CA S Phone Number: (530 △ と. Non-English Languag Last Name	Alena Ifeatu Arthur Jason mmitview Child i ville Dr. #2 95667) 644-2412 ges: First Name	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competent Office Hours: Medication	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including Intensive Holo C); Mental Health Services including Intensive Holo on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y Y
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 Defense State	Alena Ifeatu Arthur Jason mmitview Child / //ille Dr. #2 95667) 644-2412 ges: First Name PROVIDER	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competer Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I c); Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org Type of License	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 Check Non-English Languag Last Name OUT OF COUNTY P Program Name: Tele	Alena Ifeatu Arthur Jason mmitview Child ille Dr. #2 95667) 644-2412 ges: First Name ROVIDER ecare (aka Jeremy	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competer Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Hol on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 City: Placerville, CA S	Alena Ifeatu Arthur Jason mmitview Child i ville Dr. #2 95667) 644-2412 ges: First Name ROVIDER ecare (aka Jeremy i	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competer Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I c); Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org Type of License	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 △ と. Non-English Languag Last Name OUT OF COUNTY P Program Name: Tele Type of Program: MH Address: 5634 Jerem	Alena Ifeatu Arthur Jason mmitview Child f ville Dr. #2 95667) 644-2412 ges: First Name ROVIDER ecare (aka Jeremy f y Way	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competer Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I c); Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org Type of License	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices
Bird Enemmuo Lorenz Winslow Program Name: Sur Type of Program: MH Address: 670 Placerv City: Placerville, CA S Phone Number: (530 City: Placerville, CA S	Alena Ifeatu Arthur Jason mmitview Child i ille Dr. #2 5667) 644-2412 ges: First Name PROVIDER ecare (aka Jeremy i y Way 5212	1386243590 1952969008 1477603249 1336415025 Program Descri Coordination (ICC (IHSB); Medication Populations ser Cultural Competer Office Hours: M website: www.sur	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist Associate Clinical Social Worker ption: Case Management/ Brokerage including I C); Mental Health Services including Intensive Hor on Support; Crisis Intervention ved: Children and Youth tency: Provides outpatient mental health services londay - Friday 8 am- 5 pm mmitviewtreatment.org Type of License ption: Crisis Residential Treatment Program	41723 95011649 45350 99684 Intensive Care me Based Serv	Y Y Y ices

<u>۵</u> ه		Cultural Competency: Crisis Residential Treatment Program				
Non-English Lang	guages:	Office Hours: 24 HOURS				
		website: www.te	lecarecorp.com			
Last Name	First Name	NPI	Type of License	License #	CC	
luynh	Thuy	1033485495	Licensed Psychiatric Technician	36454	Y	
Reiland	Jessica	1003154634	Associate Clinical Social Worker	70377	Y	
aylor	Shannan	1528074770	Licensed Marriage and Family Therapist	46081	Y	
rogram Name:	Telecare Early	Program Descr	iption: Case Management/ Brokerage including I	ntensive Care		
Type of Program: MH			C); Mental Health Services including Intensive He		vices	
•••	eorgetown Place, Suite	(IHBS); Medica				
City: Stockton, C	-					
hone Number: (Populations se	rved: Adults			
ે હૈ	. ,		etency: Provides outpatient mental health services	s for children an	d	
-	guages: Spanish	adults				
5 .		Office Hours: M	londay - Friday 8 am- 5 pm			
		website: www.te				
ast Name	First Name	NPI	Type of License	License #	C	
ass	Oshalique	1477811677	Associate Professional Clinical Counselor	5490	Y	
loffman	Holli	1144380940	Nurse Practitioner	14724	Y	
Ailes	Jennifer	1275541641	Physician	G83528	Y	
lanas	Melissa	1679807994	Licensed Clinical Social Worker	66499	Y	
aylor	Shannan	1528074770	Licensed Marriage and Family Therapist	6081	Y	
ran	Tran	1477084671	Licensed Vocational Nurse	275938	Y	
Program Name:	Telecare San Joaquin	Program Descr	iption: Case Management/ Brokerage including I	ntensive Care		
Type of Program	-	-	C); Mental Health Services including Intensive He		vices	
•• •	eorgetown Place, Suite D		tion Support; Crisis Intervention			
City: Stockton, C		. ,				
		Populations se	rved: Adult			
Phone Number: ((209) 269-5587					
े द		Cultural Competency: Full Services Partnership (FSP) model where staff create a				
Non-English Lang	guages: Spanish,	Office Hours: N	londay - Friday 8:30 am- 5 pm			
Cambodian		website: www.te	lecarecorp.com			
.ast Name	First Name	NPI	Type of License	License #	C	
Bird	Alena	1386243590	Licensed Psychiatric Technician	41723	Y	
	Ifeatu	1952969008	Nurse Practitioner	95011649	Y	
nemmuo		1477603249	Licensed Marriage and Family Therapist	45350	1 14	
	Arthur	1177000215			Ŷ	
	Arthur	1177000210			Y	
inemmuo orenz Program Name:	Arthur Telecare San Joaquin		iption: Case Management/ Brokerage including I	ntensive Care	Y	
orenz Program Name:	Telecare San Joaquin	Program Descr				
orenz Program Name: Type of Program	Telecare San Joaquin	Program Descr Coordination (IC	iption: Case Management/ Brokerage including I			

BirdAEnemmuoILorenzAProgram Name: ValleyCounseling Services#9040	First Name Alena Ifeatu Arthur y Community	Office Hours: M website: www.tele NPI 1386243590 1952969008 1477603249 Program Descrip	Type of License Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist	License # 41723 95011649	a CC Y Y
Non-English Language Cambodian Last Name F Bird A Enemmuo I Lorenz A Program Name: Valley Counseling Services F #9040	First Name Alena Ifeatu Arthur y Community	website: www.tele NPI 1386243590 1952969008 1477603249 Program Descrip	Carecorp.com Type of License Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist	41723 95011649	Y
Cambodian Last Name F Bird F Enemmuo Lorenz F Program Name: Valley Counseling Services #9040	First Name Alena Ifeatu Arthur y Community	website: www.tele NPI 1386243590 1952969008 1477603249 Program Descrip	Carecorp.com Type of License Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist	41723 95011649	Y
BirdAEnemmuoILorenzAProgram Name: ValleyCounseling Services#9040	Alena Ifeatu Arthur y Community	1386243590 1952969008 1477603249 Program Descrip	Licensed Psychiatric Technician Nurse Practitioner Licensed Marriage and Family Therapist	41723 95011649	Y
Enemmuo I Lorenz A Program Name: Valley Counseling Services #9040	lfeatu Arthur y Community	1952969008 1477603249 Program Descrip	Nurse Practitioner Licensed Marriage and Family Therapist	95011649	
Lorenz / Program Name: Valley Counseling Services #9040	Arthur y Community	1477603249 Program Descrip	Licensed Marriage and Family Therapist		
Program Name: Valle Counseling Services #9040	y Community	Program Descrip		45250	I Y
Counseling Services #9040	• •			45350	Y
#9040	(VCCS) (Manteca)	Coordination (ICC	otion: Case Management/ Brokerage including Int	ensive Care	
Type of Program: MH		-	C); Mental Health Services including Intensive Hou on Support; Crisis Intervention	me Based Serv	ices
Address:129 E. Center City: Manteca, CA 9533	36				
Phone Number: (209) 2	239-5553		ved: Children and Youth		
∩ € _			ency: Comprehensive mental health services for	children, youth,	, and
Non-English Language	es:		onday-Friday 8:00 am- 5:00 pm		
Last Name F	First Name	NPI	ww.valleycommunitycounselingservices.org	License #	СС
	Stefani	1770093494	Type of License Associate Marriage and Family Therapist	102456	Y
	Paul	1386175669	Associate Marriage and Family Therapist	131721	Y Y
	Melissa	1356968739	Associate Marriage and Family Therapist	120670	Y
	Muhammad	1811051337	Physician	C53847	Y
	lessica	1083344790	Associate Marriage and Family Therapist	133988	Y
	Adriana	1295253797	Associate Marriage and Family Therapist	97389	Ŷ
	Megan	1669833885	Licensed Marriage and Family Therapist	112156	Ŷ
	Elaine	1508875055	Licensed Marriage and Family Therapist	45258	Y
	Reshma	1073061784	Associate Clinical Social Worker	103567	Y
	Hannah	1659967396	Associate Clinical Social Worker	98087	Y
	Mercy	1780246975	Associate Marriage and Family Therapist	117340	Y
	, Teresa	1386762623	Psychologist	14848	Y
Program Name: Valle	y Community	Program Descrip	tion: Individual/family/group/plan development/a	assessment/col	llateral
Counseling Services (VCCS) (School Based Program - Stockton) #9042 Type of Program: MH Address: 6707 Embarcadero Drive, Suite		/rehab/Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention			
City: Stockton, CA 952		Dopulations as a	undu Children and Vauth		
Phone Number: (209) 9	900-4240		ved: Children and Youth	at various ash	oolo in
A C			ency: Outpatient mental health services provided	at various scho	Jois In
Non-English Language	5.	Office Hours:	Monday - Friday 8:00 am - 5:00 pm ww.valleycommunitycounselingservices.org		
Last Name	First Name	•		liconce #	66
	F irst Name Stefani	NPI 1770093494	Type of License Associate Marriage and Family Therapist	License # 102456	CC Y

Doyle	Lindsey	1669706016	Associate Marriage and Family Therapist	105790	Y
Gill	Paul	1386175669	Associate Marriage and Family Therapist	131721	Y
Navarro	Jessica	1083344790	Associate Marriage and Family Therapist	133988	Y
Pena	Adriana	1295253797	Associate Marriage and Family Therapist	97389	Y
Pettit	Megan	1669833885	Licensed Marriage and Family Therapist	112156	Y
Pike				5258	Y
	Elaine	1508875055	Licensed Marriage and Family Therapist	_	
Shaw	Hannah	1659967396	Associate Clinical Social Worker	98087	Y
Viles-Reed	Teresa	1386762623	Psychologist	14848	Y
Program Name: Valley Community Type of Program: MH Address: 19 East 6th Street City: Tracy, CA 95378		Coordination (IC (IHBS); Medicat	iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention		vices
Phone Number: (2	209) 835-8583		rved: Children and Youth		
٥Ğ			etency: Full range specialty mental health services	for children an	d
Non-English Lang	juages:		londay - Friday 8:00 am - 5:00 pm		
		website: https://v	www.valleycommunitycounselingservices.org		
Last Name	First Name	NPI	Type of License	License #	CC
Cervantes	Rosemary	1407299738	Licensed Marriage and Family Therapist	127214	Y
Coleman	Stefani	1770093494	Associate Marriage and Family Therapist	102456	Y
Kamran	Muhammad	1811051337	Physician	C53847	Y
B		1669833885	Licensed Marriage and Family Therapist	112156	Y
Pettit	Megan	1003033003	Licensed Marriage and ranning merapist	112130	
Pettit Roy	Reshma	1073061784	Associate Clinical Social Worker	103567	Ŷ
Roy Viles-Reed	Reshma Teresa	1073061784 1386762623	Associate Clinical Social Worker Psychologist	103567 14848	
Roy Viles-Reed	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medicat Populations se Cultural Compe community	Associate Clinical Social Worker	103567 14848 tensive Care me Based Serv	Y Y vices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 C	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medicat (IHBS); Medicat Populations set Cultural Competication community Office Hours: Note: website: www.vite	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In iption: Case Management/ Brokerage including Intensive Ho icC); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org	103567 14848 tensive Care me Based Serv	Y Y vices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 C	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medicat Populations se Cultural Compe community Office Hours: N	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License	103567 14848 tensive Care me Based Serv in-home and ir	Y Y vices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 Non-English Lang	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080 guages:	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medicat (IHBS); Medicat Populations set Cultural Competication community Office Hours: Note: website: www.vite	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License Associate Marriage and Family Therapist/	103567 14848 tensive Care me Based Serv in-home and ir License # 131714/11	Y Y ices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 Non-English Lang Last Name Alampi	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080 guages: First Name Emily	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medical Populations set Cultural Competic community Office Hours: N website: www.viet NPI 1679222939	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License Associate Marriage and Family Therapist/ APCC	103567 14848 tensive Care me Based Serv in-home and ir License # 131714/11 274	Y Y rices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 Non-English Lang Last Name	Reshma Teresa Victor Community pport, Stockton, MH March Lane, Suite A 95207 209) 465-1080 guages: First Name	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medical Populations set Cultural Competic community Office Hours: N website: www.vie NPI	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License Associate Marriage and Family Therapist/	103567 14848 tensive Care me Based Serv in-home and ir License # 131714/11	Y Y rices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 Non-English Lang Last Name Alampi	Reshma Teresa Victor Community pport, Stockton, MH . March Lane, Suite A 95207 209) 465-1080 guages: First Name Emily	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medical Populations set Cultural Competic community Office Hours: N website: www.viet NPI 1679222939	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License Associate Marriage and Family Therapist/ APCC	103567 14848 tensive Care me Based Serv in-home and ir License # 131714/11 274	Y Y rices
Roy Viles-Reed Program Name: Services and Su (VCSS) #9063 Type of Program: Address: 2495 W 125 City: Stockton, C Phone Number: (2 Non-English Lang Last Name Alampi Anderson	Reshma Teresa Victor Community pport, Stockton, MH March Lane, Suite A 95207 209) 465-1080 guages: First Name Emily Shanae	1073061784 1386762623 Program Descr Coordination (IC (IHBS); Medicat (IHBS); Medicat Populations set Cultural Competication Community Office Hours: N website: www.vite NPI 1679222939 1093281941	Associate Clinical Social Worker Psychologist iption: Case Management/ Brokerage including In C); Mental Health Services including Intensive Ho tion Support; Crisis Intervention rved: Children and Youth etency: Provides outpatient mental health services londay - Friday 8:00 am - 5:00 pm ctor.org Type of License Associate Marriage and Family Therapist/ APCC Associate Professional Clinical Counselor	103567 14848 tensive Care me Based Serv in-home and ir License # 131714/11 274 7588	Y Y rices CC Y Y

Cupit	Christy	1386286383	Licensed Marriage and Family Therapist	120662	Y	
Dadkhah	Betia	1083709380	Licensed Marriage and Family Therapist	44160	Y	
Dixon	Nikita	1477725984	Physician	A116123	Y	
Farias	Angela	1013457878	Associate Clinical Social Worker	107024	Y	
Gaines	Ronnica	1558030502	Associate Marriage and Family Therapist	119924	Ý	
Kooger	Giana	1720318132	Licensed Marriage and Family Therapist	86205	Y	
Lopez	Christina	1265705727	Associate Marriage and Family Therapist	102443	Y	
Lozano	Sheree	1538523501	Associate Marriage and Family Therapist	88637	Y	
Marshall	Koryn	1962881870	Licensed Marriage and Family Therapist	86263	Y	
Noey	Brandt	1538214291	Licensed Clinical Social Worker	26375	Y	
Rodriguez	Maria	1003123241	Associate Professional Clinical Counselor	5313	Y	
Singh	Kiranpreet	1043779671	Associate Marriage and Family Therapist	125906	Y	
Zuckerman	Michelle	1891948691	Licensed Marriage and Family Therapist	84298	Y	
Program Name: Vie	ctor Community	Program Descri	iption: Case Management/ Brokerage including	Intensive Care		
Support Services	- Manteca #39CG	Coordination (IC	C); Mental Health Services including Intensive Ho	ome Based Serv	/ices	
City: Manteca, CA 9	Lane, Suite 101 & 201 5337					
Phone Number: (20	9) 647-6200	· · · · ·	rved: Children and Youth			
∩ &		Cultural Competency: Provides outpatient mental health services in-home and in Office Hours: Monday - Friday 8:00 am - 5:00 pm				
Non-English Langua	ages:					
website: www.victor.org						
	-			1.		
Last Name	First Name	NPI	Type of License	License #	СС	
Boss Kinser	Jennifer	1700215308	Associate Marriage and Family Therapist	120812	СС	
Boss Kinser Boyle-Day	Jennifer Coral	1700215308 1083140610	Associate Marriage and Family Therapist Associate Marriage and Family Therapist	120812 121006	22	
Boss Kinser Boyle-Day Chavez	Jennifer Coral Esmeralda	1700215308 1083140610 1942728514	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist	120812 121006 141941		
Boss Kinser Boyle-Day Chavez Cuevas	Jennifer Coral Esmeralda Andrew	1700215308 1083140610 1942728514 1629578190	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker	120812 121006 141941 92656	СС 	
Boss Kinser Boyle-Day Chavez Cuevas Diaz	Jennifer Coral Esmeralda Andrew Claudia	1700215308 1083140610 1942728514 1629578190 1275810442	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist	120812 121006 141941 92656 99791	Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson	Jennifer Coral Esmeralda Andrew Claudia Breana	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker	120812 121006 141941 92656 99791 93896		
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger	Jennifer Coral Esmeralda Andrew Claudia Breana Giana	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist	120812 121006 141941 92656 99791 93896 86206	Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Koryn	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	120812 121006 141941 92656 99791 93896 86206 86263		
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Koryn Alisia	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker	120812 121006 141941 92656 99791 93896 86206 86263 90719	Y Y Y Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos Rivas-Olivarez	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Koryn Alisia Yulisa	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666 1801445085	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Clinical Social Worker	120812 121006 141941 92656 99791 93896 86206 86263 90719 96813	Y Y Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos Rivas-Olivarez Seefeldt	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Giana Koryn Alisia Yulisa Jacquelyn	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666 1801445085 1124250204	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Clinical Social Worker Licensed Marriage and Family Therapist	120812 121006 141941 92656 99791 93896 86206 86263 90719 96813 115647	Y Y Y Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos Rivas-Olivarez	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Koryn Alisia Yulisa	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666 1801445085	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Clinical Social Worker	120812 121006 141941 92656 99791 93896 86206 86263 90719 96813	Y Y Y Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos Rivas-Olivarez Seefeldt	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Giana Koryn Alisia Yulisa Jacquelyn Michelle	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666 1801445085 1124250204	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Clinical Social Worker Licensed Marriage and Family Therapist	120812 121006 141941 92656 99791 93896 86206 86263 90719 96813 115647	Y Y Y Y Y	
Boss Kinser Boyle-Day Chavez Cuevas Diaz Johnson Kooger Marshall Ramos Rivas-Olivarez Seefeldt Simpson	Jennifer Coral Esmeralda Andrew Claudia Breana Giana Koryn Alisia Yulisa Jacquelyn Michelle ric Hospitals S Hospital H urn Boulevard A 95841	1700215308 1083140610 1942728514 1629578190 1275810442 1326532284 1720318132 1962881870 1508418666 1801445085 1124250204 1780214478 Program Descri	Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker Licensed Marriage and Family Therapist Associate Clinical Social Worker	120812 121006 141941 92656 99791 93896 86206 86263 90719 96813 115647 92259	Y Y Y Y Y	

Non-English Languages:		Office Hours: 24 HOURS				
		website: www	v.heritageoakshospital.com			
Last Name	First Name	NPI	Type of License	License #	СС	
Out of County H	lospital	•				
-						
Program Name:	BHC Sierra Vista	Program De	scription: Children's & Adult General	& Specialized Mental Health		
Type of Program:		l ŭ	·	'		
Address: 8001 Br						
City: Sacramento,						
Phone Number: (916) 423-2000		Populations	served: All Ages			
۵ ۴.	,		npetency: Interpreter Services availab	le for language other than Englis	sh	
Non-English Lang	wades.		: 24 HOURS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			v.sierravistahospital.com			
Last Name	First Name	NPI	Type of License	License #	СС	
Out of County H	lospital		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
St. Helena Hospi	tal Center for	Program Do	scription: Inpatient Hospital			
Type of Program:			scription. Inpatient nospital			
Address: 525 Ore						
	•					
City: Vallejo, CA 9		Denulations				
Phone Number: (7	(07) 646-2200		served: All Ages			
A G		Cultural Cor	s: 24 HOURS			
Non-English Lang	luages:					
	-		v.adventisthealth.org	··· // /		
Last Name	First Name	NPI	Type of License	License #	CC	
Out of County H	lospital	-				
Program Name:	John Muir Behavioral	Program De	scription: Inpatient Hospital			
Type of Program:	MH					
Address: 2740 Gr	ant Street					
City: Concord, CA	94520					
Phone Number: (§	925) 680-6500	Populations	served: All Ages			
ે દ ્ય ે	,	Cultural Cor	¥			
Non-English Lang	uages:	Office Hours	s: 24 HOURS			
0 0	Ĩ	website: www	v.johnmuirhealth.com			
Last Name	First Name	NPI	Type of License	License #	СС	
Out of County H				1		
Program Name:	Sutter Center for	Program De	scription: Children's & Adult General	& Specialized Mental Health		
Type of Program:						
Address : 7700 Fo						
City: Sacramento,						
Phone Number: (Populations	served: All Ages			
	510/ 500-5045		SCIVEU. AII AYES			

∩ Ė.		Cultural Competency: Interpreter Services available for language other than English				
Non-English Languages:		Office Hours: 24 HOURS				
		website: www.suttermedicalcenter.org				
Last Name	First Name	NPI	Type of License	License #	СС	
Out of County Hospital					<u> </u>	
, ,					1	
Program Name:	Program Name: Fremont Hospital		iption: Children's & Adult General &	Specialized Mental Health	-	
Type of Program:						
Address: 39001 S						
City: Fremont, CA						
Phone Number: (5		Populations se	rved: All Ages			
∩ € .	10/130-1100	Cultural Comp	-			
Non-English Lang	119065.	Office Hours:	-			
Horr English Eding	uugus.		emonthospital.com			
Last Name	First Name	NPI	Type of License	License #	СС	
Aneja	Alka	1619031317	Physician	A112029	Y	
Athwal	Harmohinder	1740298256	Physician	A81841	Υ Y	
			· ·		N	
Boora	Kamaljeet	1356587711	Physician	102846		
Duvvuri	Vikas	1255470480	Physician	A99706	Y	
Fooks	Trevor	1730267535	Physician	G63964	Y	
Harleen	Dyal	1225424327	Physician	A153255	N	
Kahlon	Ravinder	1386741320	Physician	A50823	N	
Kahlon Kaur Waraich	Vasdeep	1497852446	Physician	A51243	N	
Kaur waraich Kudaravalli	Jaap Padmavathi	1316132285 1144221953	Physician	G67904 A67964	Y Y	
		1023188935	Physician	A67964 A52032	-	
Kumar Kumar	Pradeep Deepak	1306257910	Physician Physician	A130068	N Y	
Manjunath	Sudha	1801826797	Physician	A130008	Y	
Munir	Syed	1790718815	Physician	C55029	Y	
Nayak	Nanda	1477656262	Physician	A43182	N	
Patel	Falguni	1548414337	Physician	A105594	Y	
Phillips	Nicholas	1255727293	Physician	A153125	N	
Punia	Surender	1376589663	Physician	A77004	Y	
Reddy	Divya	1518120211	Physician	A103547	Ý	
Singh	Devindar	1447294624	Physician	A48148	N	
Singh	Sunpreet	1326464462	Physician	A132932	Y	
Waraich	Bhupinder	1689869547	Physician	A53968	Y	
					1	
SUBSTANCE USE	DISORDER SERVICE	S PROVIDER DIRI	CTORY			
Program Name: (Chemical Dependency	y Program Descr	iption: Education & Early Intervention	on Outpatient Treatment Pe	rinatal	
Type of Program:	SUD					
Address: 620 N. A	urora St. Suite 1					
City: Stockton, CA	95202					

Phone Number: (209) 468-3720		Populations served: Adult and Youth, Adult Perinatal					
ுக்		Cultural Competency: Transitional Age Youth, Adolescents, Veteran, Lesbian, Office Hours: Monday, Wednesday and Friday 8:00 am - 5:00 pm; Tuesday and					
	guages: Spanish						
		website: http://w	ww.sjcbhs.org/mhs				
Last Name	First Name	NPI	Type of License	License #	СС		
Bagdonas	Michelle	1164765137	SAC II	179976	Y		
Beas	Sandra	1821435447	SAC II	1710437	Y		
				R07102614			
Berdahl	Michelle	1407070311	Program Supervisor	35	Y		
Cervantes	Ingrid	1659017135	SAC I	13268	Y		
Hansen	Mark	1225465156	АРРС	7420	Y		
Inzunza	Suzanne	1205415031					
Lozano	Nia	1851590996	Physician	A89255			
Martin	Rebecca	1447671581	SAC II - CCAPP	Aii5305031	Y		
Nguyen	Xuan	1609159623	SAC II	169310	Y		
				Aii5370031			
Pelletier	Paul	1578976569	Program Manager - CCAPP	8	Y		
				R06090615			
Roberts	Edelisa	1043331671	SAC II	44	Y		
Russell	Stacy	1639622566	SAC II	6991	Y		
-							
Sosa	Rebecca	1770133290	SACI	9622	Y		
Sumano	Jennie	1972240794	SAC I	13307	Y Y		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr	Jennie Family Ties : SUD . Recovery Road np, CA 95231	1972240794		13307			
Sumano Program Name: Type of Program Address: 7178 S City: French Cam Phone Number: (Jennie Family Ties : SUD . Recovery Road np, CA 95231	1972240794 Program Descr Populations se	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal	13307 Iponent Assessments			
Sumano Program Name: Type of Program Address: 7178 S City: French Can Phone Number: (D &	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208	1972240794 Program Descr Populations se Cultural Competition	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesb	13307 Iponent Assessments			
Sumano Program Name: Type of Program Address: 7178 S City: French Can Phone Number: (D &	Jennie Family Ties : SUD . Recovery Road np, CA 95231	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS	13307 Iponent Assessments			
Sumano Program Name: Type of Program Address: 7178 S City: French Can Phone Number: (D &	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesk 4 HOURS ww.sjcbhs.org/mhs	13307 nponent Assessments nian, Gay, Bisexual,	Y		
Sumano Program Name: Type of Program Address: 7178 S City: French Can Phone Number: (D &	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS	13307 Iponent Assessments			
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (Definition of the second Non-English Lang	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesk 4 HOURS ww.sjcbhs.org/mhs	13307 nponent Assessments nian, Gay, Bisexual,	Y		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D Non-English Lang Last Name	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS ww.sjcbhs.org/mhs Type of License	13307 nponent Assessments nian, Gay, Bisexual,	Y		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D & Non-English Lang Last Name Carriedo	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS ww.sjcbhs.org/mhs Type of License SAC I	13307 nponent Assessments pian, Gay, Bisexual, License #	Y		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (Definition of the second Phone Sumber: (Definition of the second Carriedo Carry	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie	1972240794Program DescrPopulations seCultural CompeOffice Hours: 2website: http://wNPI12154509291518523794	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS ww.sjcbhs.org/mhs Type of License SAC I SAW	13307 aponent Assessments bian, Gay, Bisexual, License # NA	Y CC		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D. C. Non-English Lang Last Name Carriedo Cary Cheatham	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern	1972240794Program DescrPopulations seCultural CompeOffice Hours: 2website: http://wNPI121545092915185237941427576545	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS www.sjcbhs.org/mhs Type of License SAC I SAW SAW	13307 ponent Assessments pian, Gay, Bisexual, License # NA NA	ү СС Ү		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D. Carr Last Name Carriedo Cary Cheatham Facaros	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesb 4 HOURS ww.sjcbhs.org/mhs Type of License SAC I SAW SAW SAC II	ian, Gay, Bisexual, License # NA NA 1710742	Υ CC Υ Υ		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D. C. Non-English Lang Last Name Carriedo Cary Cheatham Facaros Foreman	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan Kelly	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038 1770140600	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS www.sjcbhs.org/mhs Type of License SAC I SAW SAW SAW SAW SAW SAW	ian, Gay, Bisexual, License # NA NA 1710742	Υ CC Υ Υ		
Sumano Program Name: Type of Program Address: 7178 S City: French Carr Phone Number: (D. C. Non-English Lang Last Name Carriedo Cary Cheatham Facaros Foreman	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan Kelly	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038 1770140600	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS www.sjcbhs.org/mhs Type of License SAC I SAW SAW SAW SAW SAW SAW	ian, Gay, Bisexual, License # NA NA 1710742	Υ CC Υ Υ		
Sumano Program Name: Type of Program Address: 7178 S City: French Cam Phone Number: (Cary Cheatham Facaros Foreman Gaston	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan Kelly Kenya	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038 1770140600 1104430925	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS www.sjcbhs.org/mhs Type of License SAC I SAW SAW SAC II SAW SAC II SAW SAC I	13307 aponent Assessments bian, Gay, Bisexual, License # NA NA 1710742 NA	Υ CC Υ Υ Υ		
Sumano Program Name: Type of Program Address: 7178 S City: French Cam Phone Number: (Cary Cheatham Facaros Foreman Gaston Gomez	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan Kelly Kenya Rosemary	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038 1770140600 1104430925 1699898676	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesk 4 HOURS www.sjcbhs.org/mhs Type of License SAC I SAW SAW SAC II SAW SAC II SAW SAC II SAC II	13307 aponent Assessments bian, Gay, Bisexual, License # NA NA 1710742 NA C17481214	Υ CC Υ Υ Υ		
Sumano Program Name: Type of Program Address: 7178 S City: French Cam Phone Number: (Cary Cheatham Facaros Foreman Gaston Gomez Lozano	Jennie Family Ties : SUD . Recovery Road np, CA 95231 (209) 468-6208 guages: Spanish First Name Mayra Jamie Lavern Susan Kelly Kenya Rosemary Nia	1972240794 Program Descr Populations se Cultural Compe Office Hours: 2 website: http://w NPI 1215450929 1518523794 1427576545 1306265038 1770140600 1104430925 1699898676 1851590996	SAC I iption: Inpatient Treatment Perinatal Com rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lest 4 HOURS ww.sjcbhs.org/mhs Type of License SAC I SAW SAC I SAW SAC I Physician	13307 aponent Assessments bian, Gay, Bisexual, bian, Gay, Bisexual,	Υ		

Rimmer	ol	1316617541	SAC II	Ci32940521	Y
Savage	Dorothy	1396279154	SACI	11392-R	Ŷ
501050		1000270101		SUDCC	•
Vasquez-Grant	Cory	1720539158	Program Supervisor	7222	Y
Wulsin	Jessica	1063870996	Licensed Marriage Family Therapist	130224	N
	Program Name: Recovery House		ription: Inpatient Treatment Assessments	130224	1.1
Type of Program: SUD Address: 7233 S. Delivery Rd City: French Camp, Ca 95231 Phone Number: (209)468-6857			iption. Inpatient freatment Assessments		
		Populations se	rved: Adult		
∆ Ġ.			etency: Adults/Older Adult, Veterans, Lesbian, Gay	/ Bisexual	
Non-English Langu	ages: Spanish	Office Hours: 2		, Biooxaai,	
	ageer opamer		/ww.sjcbhs.org/mhs		
Last Name	First Name	NPI	Type of License	License #	СС
Baker	Ashley	1225640535	Associate Marriage and Family Therapist	100534	Y
Daker		1223040333		R13828811	-
Casaca	Dominic	1710468095	SAC I	18	Y
Frederiksen	Michael	1609419951	SACI	10139	Y
Tredenksen	IVIICIIAEI	1009419951	SACT	RH0005020	I
Graves	Dawn	1629625348	SAC I	720	Y
Hall	Marc	1235648593	CADTP	11991	Y
Harton	Antwan	1346721701	SAW	11991	Y
Howe-Jacquez	Kari	1346721701	SAV SAC II	6792	Y
Lozano	Nia	1851590996	Physician	A89255	I
Metcalf	Tamara	1811037807	Program Supervisor - CADTP	7541	Y
Ivietcan		1011037807		R13720111	T
Morales	Michelle	1902397581	SAC I	19	Y
Peterson	Martin	1073098307	SAW	9855	Y
Ramirez	George	1215586607	SAW	11985	Y
Shingu	Eric	1700299153	Program Manager	165703	Y
Vaccarezza	Lisa	1679715767	SACI	8312	Ν
Woodruff	Latrice	1952790875	SAC II	6225 IV	Ν
Young	Michael	1659778629	Program Supervisor	175499	Y
Program Name: A	dolescent Co-	Program Desci	ription: Individual & group counseling, and educat	ion in conjunctio	on with
Occurring Treatme	ent Program (ACT) oral Health Services UD alifornia Street 2nd	•	mental health services, a partnership with Mental	•	
		Populations of	mad. Youth		
Phone Number: (20	5/400-2303	Populations se	etency: Youth, Lesbian, Gay, Bisexual, Transgend	er	
Non-English Langu	ages Snanish	•	Monday - Friday. 8:00 am-5:00 pm Closed Holid		
Non-English Langu	ayes. Spailisti		wonday - Friday. 0.00 am-5.00 pm Closed Holid	Jays	

		website: http://w	ww.sjcbhs.org/mhs				
Last Name	First Name	NPI	Type of License	License #	CC		
Referrals to Lice	ensed Staff						
-	Prevention Services		otion: Individual & group counseling, and education				
Type of Program:			mental health services, a partnership with Menta	Health Services	s and		
Address: 620 N. A		Substance Abus	se Services				
City: Stockton, CA							
Phone Number: (2	209) 468-2005	Populations se	rved: Youth				
∩ &		Cultural Compe	etency: Youth, Lesbian, Gay, Bisexual, Transgen	der			
Non-English Lang	juages: Spanish		londay - Friday. 8:00 am-5:00 pm Closed Holida	ys			
		website: http://w	ww.sjcbhs.org/mhs				
Last Name	First Name	NPI	Type of License	License #	CC		
Referrals to Lice	ensed Staff						
Program Name: Type of Program: Address: 1405 11		and family coun	iption: In-house detoxification, residential service seling, case management, transportation, discharg cess to community resources. Detoxification servi	ge and aftercare	•		
City: Modesto, CA			stabilization and can vary depending on the clien	-	110-0		
	\$ 30004		rved: Women 18 & older	to primary care			
~ F			etency: Women's Needs				
이 년 Non-English Lang	waaos:		-				
	Juayes.		Office Hours: 24 hours a day / 7 days a week website: www.redwoodfamilycenter.org				
Last Name	First Name	NPI	Type of License	License #	сс		
				R12940003			
Amador	Delia	1417455775	RADTI	18			
Berkowitz	Steve	1205955671	Licensed Marriage and Family Therapist	77643	Y		
				R12882201			
Carvaeo	Felicia	1659870368	RADT I	18			
				R14474810			
Castillo	Krystle	1225796568	RADTI	21			
	,			R13515610			
Cleary	Michelle	1871102947	RADT I	71			
, ,				R13709511			
		1	1				
Gaona	April	1417538299	RADT I	9			
Gaona	April	1417538299	RADT I	9 R13367102			
Gaona Garcia	April Dolores	1417538299 1073155396	RADT I RADT I				
				R13367102	Y		
Garcia	Dolores	1073155396	RADT I	R13367102 19	Y		
Garcia	Dolores	1073155396	RADT I	R13367102 19 A68098	Y		
Garcia Gorman	Dolores Michael	1073155396 1760585897	RADT I Physician	R13367102 19 A68098 A04445051			
Garcia Gorman	Dolores Michael	1073155396 1760585897	RADT I Physician	R13367102 19 A68098 A04445051			
Garcia Gorman McDowell	Dolores Michael Paula	1073155396 1760585897 1528576196	RADT I Physician CADC II	R13367102 19 A68098 A04445051 7			

				R14569202			
Nunez	Veronica	1235899303	RADT I	2			
	Veronica	12000000		R13399703			
Prather	Laci	1154963916	RADT I	19			
		1134503510		R14657304			
Tyler	Kayla	1427793413	RADT I	22			
		1427733413		R14696605			
Zapien	Felicia	1386377844	RADT I	22			
•			SSISTED TREATMENT				
	Aegis Treatment	•	iption: Medically Supervised Methadone	Maintenance Detoxificat	ion		
Type of Program	-	-	nt Treatment (OTP) Medication Assisted T				
l ype er regram							
Address: 8626 N	. Lower Sacramento Ro	bad					
City: Stockton, C	A 95209						
Phone Number: (Populations se	rved: Adult and Adult Perinatal				
∩ Ł	200) 410 2401		etency: Adults, Older Adults, Veterans, L	eshian Gay Risevual			
	guages: Spanish		•	•			
	guagee. opamen		Office Hours: Mon Fri. 5am - 12:30pm, Sat., Sun., Holidays 7am-11am website: https://pinnacletreatment.com/locations/stockton.com				
Last Name	First Name	NPI	Type of License	License #	СС		
Alcantara	Ken	110445828	Licensed Vocational Nurse	703054	Y		
Camacho	Nancy	1679024632	CADC-CAS	C14831214	Y		
Gallbreath	Clare		Licensed Vocational Nurse	128398	Y		
				Registered			
Gonzales	Esperanza	1003421314	Lead Counselor	CADTP	Y		
Hamilton	Robert	1659791101	Physician	A154190	Y		
				Registered			
Kennedy	Carla	1538612874	Executive Director	CADTP	Y		
Oakes	Marya	1912978263	Family Nurse Practitioner	NPF15701	Y		
Salas	Graciela	1417602038	Psychiatric Technician	42180	Y		
Williams	Ted	1194954123	CAS	SUDCC6303	Y		
-							
•	5th Street Medical		iption: Medically Supervised Methadon		ation		
Type of Program		(OTP) Outpatier	nt Treatment (OTP) Medication Assisted T	reatment			
Address: 1839 S							
City: Stockton, C		-					
Phone Number: ((209) 463-0872		rved: Adult and Adult Perinatal				
∩ €.		· · · · ·	etency: Adults/Older Adult, Veterans, Les				
Non-English Lang	guages: Spanish		1onday - Friday 5am - 1pm Saturday, Su				
			pinnacletreatment.com/location/california/s				
Last Name	First Name	NPI	Type of License	License #	СС		

				CiCA02261	
Beck	Victoria	1730470295	CADCI	119	Y
Carter-Campbe	ll Jeannette	1740480342	Nurse Practitioner	7506	Y
Fox	Michael	1212069758	Physician	G53561	Y
				C03545091	
Galli	Andrew	1740647361	CADC	5	Y
				R14266804	
Gilbreath	Michelle	1639750813	RADT	21	Y
Gonzalez	Sarah	1063700540	SUDCC	7226	Y
Hamilton	Robert	1386693547	Physician	G48570	Y
Johnson	P. Curly	1235770165	Nurse Practitioner	95012302	Y
				R12901402	
Jones	Kent	1588129993	RADT	18	Y
Lu	Divina	1316001381	Licensed Vocational Nurse	183039	Y
				R14272704	
Negrete	Dolores	1447832464	RADT	21	Y
Nguyen	Linda	1558886507	SUDRC	8051	Y
Palafox	Divina	1912061995	Licensed Vocational Nurse	17300	Y
				C05037011	
Pelletier	Steve	1750652483	CADC	8	Y
Sison	Rochelle	1447748520	SUDRC	7706	Y
Talleur	Brian	1659791101	Physician	A154190	Y
Whitworth	Melissa	1033686506	Registered Nurse	541037	Y
Williams	Ginned	1942363585	SUDCCII	6030	Y
Type of Program:	. California St. Ste. B&0		iption: Medically Supervised Methadone		
Phone Number: (Populations se	rved: Adult and Adult Perinatal		
∩ Ġ. `	,	· · · · ·	etency: Adults/Older Adult, Veterans, Lesl	bian, Gay, Bisexual,	
-	guages: Spanish		londay - Friday 5am - 1pm Saturday, Su		-
			aegistreatmentcenters.com/clinic/aegis-sto		
Last Name	First Name	NPI	Type of License	License #	CC
Ayers	Jessica	1235770165	Licensed Vocational Nurse	165221	
Cano	Jacqueline	1871149757	Licensed Vocational Nurse	238131	Y
Colbert	Donna	1831770163	Registered Counselor	11752	Y
Ford	Leigh	1790741197	Nurse Practitioner	5493	
Franck	Elizabeth	1912978263	Physician Assistant	G48570	Y
				R13590408	
1	1				
Heinle	Ruth	1073195152	Registered Counselor	19	Y
Heinle Johnson	Ruth Ashley	1073195152 1649829730	Registered Counselor Registered Counselor	19 11848	Y Y

				R13749012			
Robles	Juan	1437435047	Registered Counselor	0	Y		
Sagarnaga	Cynthia	1295886893	Certified Counselor	11025	Y		
Singh	Gursimran	1215505649	Registered Counselor	11997	Y		
Spiller	Jennell	1033382221	Certified Counselor	3587	Y		
Talleur	Brian	1659791101	Physician	A154190	Y		
Type of Program Address: 541 Sou City: Lodi, CA 952	uth Ham Lane, Suite B 242		iption: Medically Supervised Methadone Maintena	ance Detoxificati	on		
Phone Number: (209)224-8490			Populations served: Adult and Adult Perinatal				
∩ Ġ_	A		etency: Adults/Older Adult, Veterans, Lesbian, Ga		40		
Non-English Lang	guages: Spanish		londay - Friday 5:00am - 6:00pm Saturday, Sunc	· ·	m - 12		
			aegistreatmentcenters.com/clinic/aegis-lodi-califor				
Last Name	First Name		Type of License	License #	CC		
Alfaro	Angeles	1649669979	Licensed Vocational Nurse	689129	Y		
Campos	John	1407192297	Licensed Vocational Nurse	260740	Y		
Castro	Julie	1548927544	Licensed Psychiatric Technician	42133	Y		
Franck	Elizabeth	1598343287	Physician Assistant	59386	Y		
Galvez	John	1487032322	Certified Alcohol and Drug Technician	A05132081 9	Y		
Garcia	Abel	1851840664	Registered Alcohol and Drug Technician	Ci25700618	Y		
Garcia	Nicolette	1659039758	Registered Alcohol and Drug Technician	12629	Y		
Masood	Wasim	1902561343	Licensed Psychiatric Technician	41832	Y		
Mora	Isabella	1710569678	Licensed Psychiatric Technician	41854	Y		
Orellana	Katherine	1053410878	Licensed Psychiatric Technician	41913	Y		
Perez	Chris	1184194169	Certified Alcohol and Drug Technician	207544 II	Y		
Preap	Jennifer	1043866627	Registered Alcohol and Drug Technician	9798	Y		
Smart	Denise	1730289083	Physician	A39072	Y		
Talleur	Brian	1659791101	Physician	A154190	Y		
Trunnell	Kathryn	1093032559	Certified Alcohol and Drug Technician	6541	Y		
Truong	Maria	1124646815	Licensed Psychiatric Technician	42019	Y		
Tun	Suehei	1548673999	Registered Alcohol and Drug Technician	7228	Y		
Valenzuela	Alyce	1508092479	Certified Alcohol and Drug Technician	6478	Y		
Vaughn	Ginger	161944700	Certified Alcohol and Drug Technician	8715	Y		
White	Kimberly	1649459546	Certified Alcohol and Drug Technician	6413	Y		
Whitworth	Melissa	1033686506	Registered Nurse	541037	Y		
	Aegis Treatment		iption: Medically Supervised Methadone Mainten				
Type of Program: Address: 955 Cer City: Manteca, CA	SUD nter Street Suites	-	nt Treatment (OTP) Medication Assisted Treatmen				

Phone Number: (209)239-9600		Populations se	Populations served: Adult and Adult Perinatal					
		Cultural Competency: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexual, Transgender						
Non-English Languages: Spanish		Office Hours: Monday - Friday 5:30am - 1pm Saturday, Sunday, Holidays 8am - 11 am website: https://aegistreatmentcenters.com/clinic/aegis-manteca-california/						
								Last Name
Falcon	Christina	1154898393	Licensed Vocational Nurse	175628	Y			
Fox	Michael	1212069758	Physician	G53561	Y			
Jane Davis	Mary	1861822744	Licensed Vocational Nurse	72342	Y			
Lam	Hong	1487282612	Licensed Vocational Nurse	705879	Y			
Mohr	Rebecca	1154898302	Licensed Psychiatric Technician	26531	Y			
Rowe	Michelle	1013199843	Physician	20A9607	Y			
Southmayd	Robert	1982700969	Physician	20A5298	Y			
, Whitworth	Melissa	1033686506	Licensed Vocational Nurse	541037	Y			
Type of Program S Address: 1111 N. E City: Stockton, CA Phone Number: (20 습 氏	El Dorado St. 95202	Populations se	nt Treatment (OTP) Medication Assisted Trea rved: Adult and Adult Perinatal etency: Adults/Older Adult, Veterans, Lesbia					
Non-English Langu Last Name	uages: Spanish		Monday - Friday 5am - 1pm Saturday, Sund edmark.com/medmark-treatment-centers-sto		n-11am CC			
AHERN	DENISE	1093203911		191227	Y			
ESCLOVON		1609489731	MEDICAL ASSISTANT	NA	Y			
GARCIA	BRITTANY	1699394965		12372	Y			
GONZALEZ	ADELITA	1972962488	REGISTERED COUNSELOR	6110	Y			
HARRIS	DANA	1760995781		6203	Y			
HOLIDAY	BRENDA	1306839352	NURSE PRACTITIONER	15461	Y			
KOUM	SAVAN	1215067228	CADTP	6568	Y			
LABASS	SHELLY	1295489029	ССАРР	R14460510 21	Y			
LENADADO LO	JERRI LAWRENCE	1477616910 1770122384	LICENSED VOCATIONAL NURSE REGISTERED COUNSELOR	170115 10180	Y Y			
PENA	ANNA	1972667236	CADTP	6197	Y Y			
SCOTT	MELISSA	1972667236	ССАРР	132186	Y Y			
SCOTT	WILLIAM	1710639398	ССАРР	132186	Y Y			
WILLIAMS	JAY FRANK	1760049043	CCAPP CERTIFIED COUNSELOR	2014156	Y			
WILLIAMS	TRISHA	1417493339	CADTP	6480	Y			
WILLIAMSON	ERNEST	1649782954	CADTP	6388	Y			
	owns Health Services		iption: Intensive Outpatient and Outpatient s					
Type of Program S		ASAM level II.1		DEI VILES. AJAIVI IEVEI I	anu			

City: Galt, CA 95	632							
Phone Number: (209) 744-9909		Populations served: Adults 18 years of age and older						
		Cultural Competency: All required in addition to Veterans, LGBT, Older Adults						
		Office Hours: Monday - Friday 8am - 5pm Saturday 9am - 4pm						
		website: http://townhealthservices.com						
Last Name	First Name	NPI	Type of License	License #	CC			
Brooks	Kendra	1932775814	SUDRC#	11905	Y			
				R14751007				
Castaneda	Iririan	1427783000	RADT	22	Y			
				R14750807				
Cobb	Robert	1477288751	RADT	22	Y			
				R16792042				
Cross	Tanisha	1679204291	RADT	91	Y			
				SUDCC				
Delong	Tammi	1972150514	Certified CADPT 1	6085	Y			
				R14750907				
Fechner	Christina	1346975927	RADT	22	Y			
Gaylor	Joseph	1528721248	SUDRC#	12442	Y			
Joshan	Solaiman	1114599677	SUDRC#	12053	Y			
				R14385207				
Maxey	Heather	1104498658	RADT	21	Y			
				R14583402				
Prakash	Ronika	1457521205	RADT	22	Y			
Towns	Mark	A100676	Physician/Addiction Specialist	A100676	Y			
Ulm	Mathew	1013402015	CCAPPII	Ci31561220	Y			
Program Name: Stockton Circle of Friends Type of Program SUD		Program Descr	iption: Inpatient Residential Treatment					
Address: 3128 E	Anita Street							
City: Stockton, CA 95205-3905 Phone Number: (209)451-0315		Denvilatione convolut Advit Male New Device to I						
		Populations served: Adult Male Non-Perinatal						
心と Non-English Languages:		Cultural Competency: Veterans, Adults, Older Adults, Gay, Transgender Office Hours: 24 Hours						
		Website: none						
Last Name	First Name	NPI	Type of License	License #	сс			
Campbell	Ernest	1124390109	SAC I	C059511118				
Duvdevany	Neta	1598180341	Physician	C137556	N			
Estrada	Michael	1275517617	SAC I	5919	Y			
Hatten	Stephanie	1730471384	SAC II	C19391214	Ŷ			